

IvoBase[®] System



Instructions for Use

CE 0123

ivoclar
vivadent[®]
technical

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CONVENIENT PROCEDURE

IvoBase[®] System

Product information

The IvoBase System consists of a high-quality denture base material and the IvoBase Injector specifically developed for the material. The ideally coordinated system enables the fully automated and shrinkage-compensated polymerization of dentures.

IvoBase Material

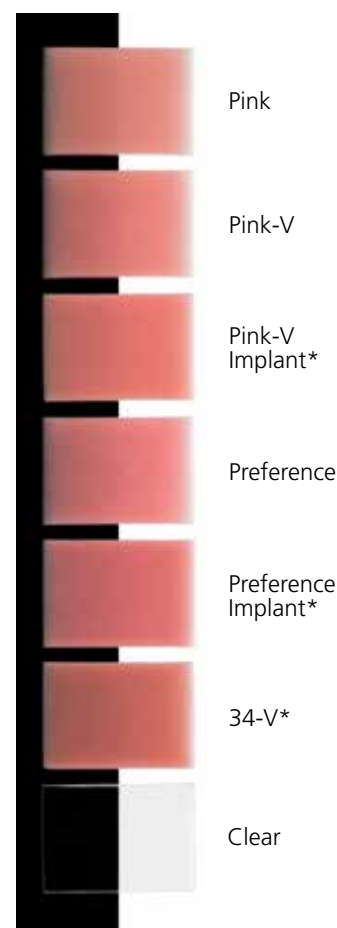
The PMMA-based IvoBase Material combines the advantages of heat- and auto-curing denture base materials. In terms of its chemistry, IvoBase Material is classified as an auto-curing polymer. However, the quality of the material is equivalent to and even exceeds that of heat-curing polymers. IvoBase may thus be considered a hybrid material. In addition to the conventional hybrid material, IvoBase is also available as an impact-resistant material version: IvoBase High Impact.

IvoBase shows a low residual monomer content immediately after polymerization. Due to the pressure-heat polymerization, a strong bond to the teeth is established. Moreover, an outstanding occlusal accuracy of fit is achieved with a short processing time in the IvoBase Injector.

The following shades are available:

- IvoBase Hybrid: Pink, Pink-V, Preference, Clear, Pink-V Implant, Preference Implant
- IvoBase High Impact: Pink, Pink-V, Preference, Pink-V Implant, Preference Implant, 34-V

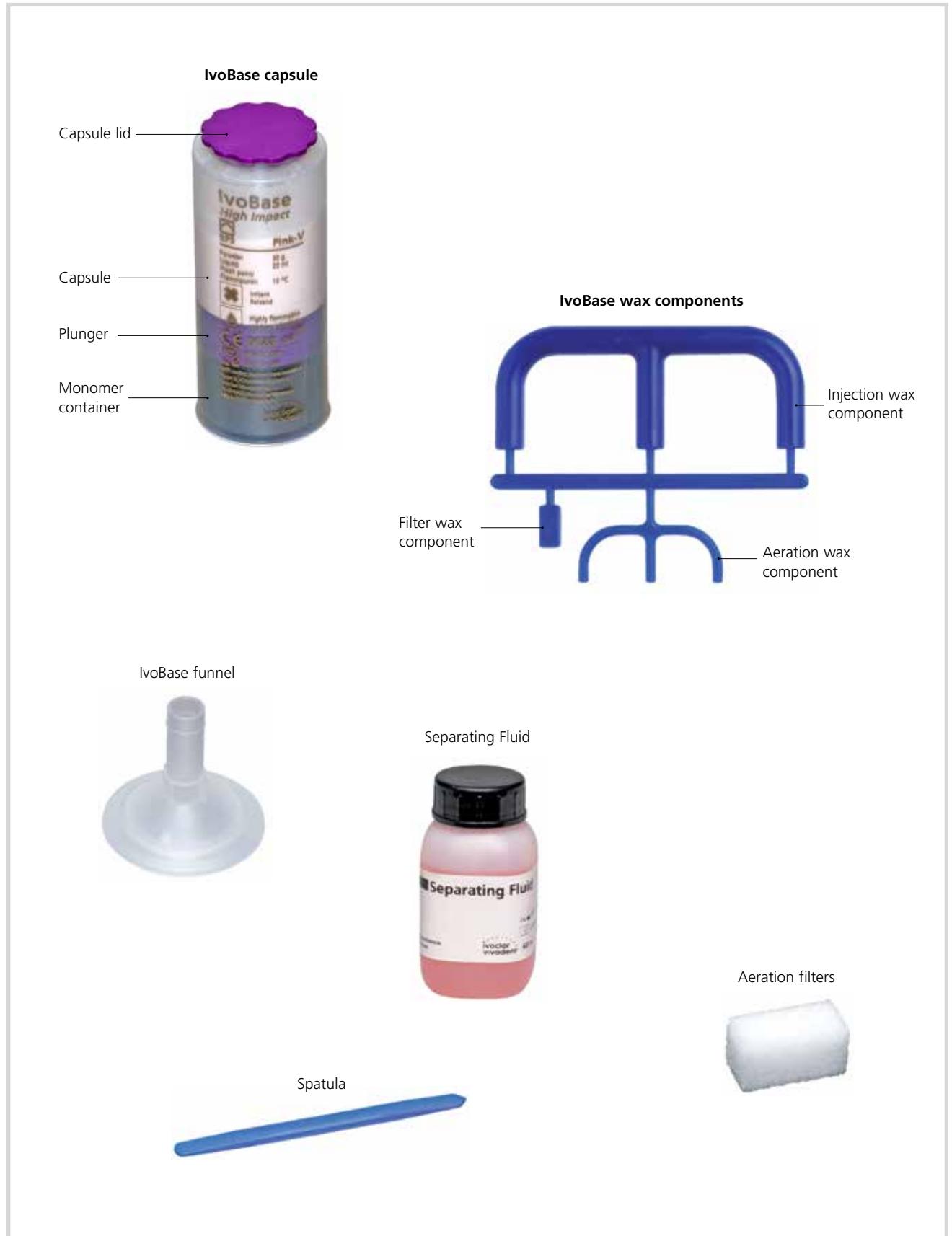
Shade selection



* with enhanced opacity, ideal for masking structural elements



IvoBase Material accessories



Composition

– IvoBase Hybrid

Powder:

Polymethyl methacrylate, citrate softener, initiator, pigments

Liquid:

Methyl methacrylate, dimethacrylate, catalyst

– IvoBase High Impact

Powder:

High-impact-modified PMMA copolymer, PMMA copolymer, polymethyl methacrylate, citrate softener, initiator, pigments

Liquid:

Methyl methacrylate, dimethacrylate, catalyst

Uses

Indication

- Complete dentures
- Partial dentures
- Combined dentures
- Hybrid dentures
- Implant prosthetics
- Relinings
- Repairs / extensions
- Mouthguards

Contraindication

If the patient is known to be allergic to any ingredients.
Intraoral use of unpolymerized material.

Physical properties

What the standard requires. What IvoBase delivers.

	Specification Type 2 Class 1 (stipulation from the standard)	Sample value for IvoBase Hybrid	Sample value for IvoBase High Impact
Flexural strength MPa	> 60	81	74
Modulus of elasticity MPa	> 1500	2700	2360
Residual monomer content in %	< 4.5	1.4	1.3
Residual monomer content with RMR*	–	0.7	0.7
Water absorption µg/mm ³	≤ 32	22.8	21.6
Solubility µg/mm ³	≤ 8.0	< 0.1	< 0.1
Fracture toughness (K _{max}) MPa m ^{1/2}	> 1.9	–	2.37
Fracture work (W _f) J/m ²	> 900	–	1450

In accordance with EN ISO 20795-1:2013 Dentistry – Denture base polymers / *Residual monomer reduction

IvoBase® Injector

With the IvoBase Injector, you can benefit from a fully automated injection and polymerization process for special PMMA resin materials which are coordinated with the system.

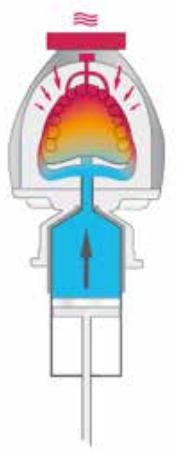
The chemical polymerization shrinkage of the resin material is fully compensated during the polymerization – due to the patented thermo-management within the flask and the heating element. This enables the fabrication of denture bases featuring excellent occlusal fit and precision. The injector has been especially developed for the IvoBase Material and produces excellent restorations.

The IvoBase Injector can also be used for the tried-and-tested SR Ivocap material. The Injector replaces the polymerization bath and thus offers a clean polymerization process without any steam.



Controlled polymerization shrinkage

The system to compensate the polymerization shrinkage, which has proven its effectiveness over many years, is the same as the one used for the SR Ivocap system.

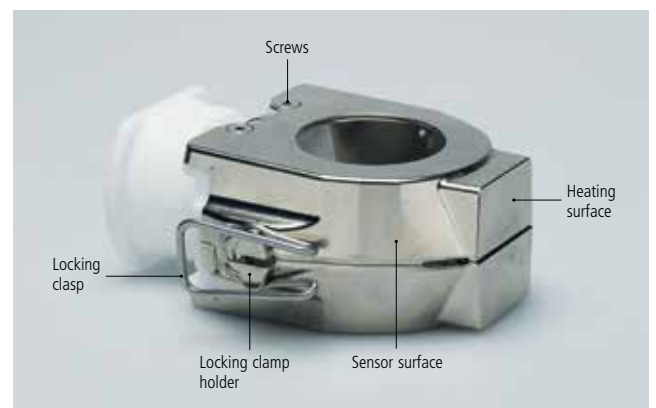


IvoBase injection programs

Program No.	Material	Duration	Duration with RMR*
1	IvoBase Hybrid	35 min.	45 min.
2	IvoBase High Impact	50 min.	60 min.
3	SR Ivocap High Impact	55 min.	65 min.
4	SR Ivocap Clear	55 min.	65 min.
5	SR Ivocap Elastomer	65 min.	–
6-20	Ivoclar Vivadent reserve		

* With the RMR function (residual monomer reduction) the residual monomer content is reduced to below 1%.

IvoBase Flask



Access former 'half'



Access former 'full'



Centring insert



Divesting aid



Please refer to the respective Operating Instructions for more detailed information on the IvoBase Injector and its accessories.

IvoBase[®] System

Complete dentures

Investing the model

The anatomic contouring should correspond with the future completed dentures to as large an extent as possible. This will help save time during subsequent finishing. After the final examination of the contact points in the articulator, wax the denture body to the model and place it in a water bath for 5–10 minutes. Use the Separating Fluid supplied with the material to subsequently isolate the stone-to-stone surfaces.

Important: The water bath should not exceed a temperature of 25 °C / 77 °F to prevent deformation / loss of occlusion.

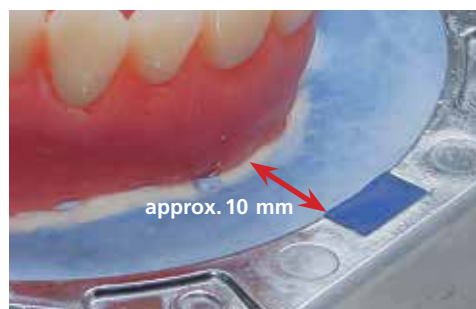


To prepare the flask, coat / spray the inner surfaces of the flask halves with a thin layer of petroleum jelly. The two flask halves are identical. Both can be used for model investment and for the counter model. Place the flask lid and the access former 'half' in one of the flask halves.

Important: Do not forget to place the filter wax component in the intended recess in the flask half.



Invest the well-soaked and isolated model in one of the flask halves using conventional Class 3 dental stone. Place the model in the centre of the flask. The distance between the anterior model stop and the flask housing must be approximately 10 millimetres. The gingivo-buccal fold should be at the same height as the flask edge. In particularly high dentures, check the vertical height with the help of the counter flask beforehand. Remove the excess stone so that the stone is flush with the model edge and the flask edge.



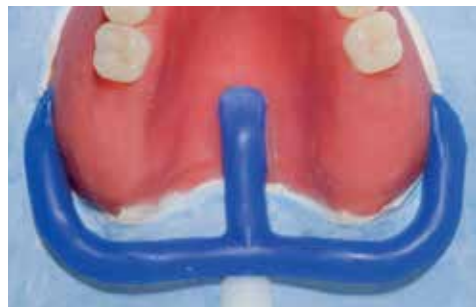
Important: The access former 'half' must be invested flush in the stone. If this is not done, stone may chip off during the subsequent investment steps and the flask will become untight.



Placing the injection channels

Once the stone has completely set, replace the access former 'half' with the access former 'full'. You can now press the injection wax component over the conical tip of the access former and to the stone surface. For maxillary complete dentures, place the injection channel by pressing it against the centre of the palatal roof and vestibular to both tubers of the contouring.

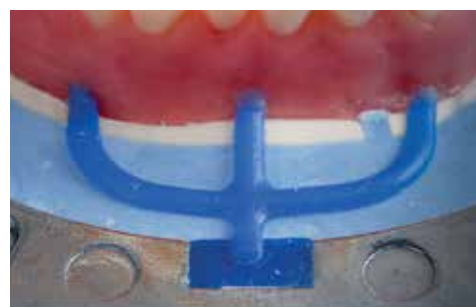
Make sure that the injection channel is well secured in all areas. The wax components can be additionally secured with wax.



For mandibular complete dentures, cut off the centre injection channel and place the two outer channels in the lingual area of the retromolar triangle.



In order to aerate the hollow space of the flask during injection, attach aeration channels in the anterior region of all restorations when working with Ivobase. Place the prefabricated wax components in such a way that there is a connection between the wax-up and the filter wax component.



Important: To ensure the tightness of the flask, the aeration channels must not come into direct contact with the flask housing.

Investing in silicone and casting the counter model

Cover the teeth, as well as the anatomically contoured alveolar area – and the lingual / palatal areas, if necessary – with a flowable to medium-viscosity addition cross-linking silicone. This protects the teeth during divesting and saves a lot of time during finishing. Apply retentive patterns in the surface of the silicone before it sets to secure the silicone in the stone of the counter model. Make sure that no hollow spaces are created between the silicone and the wax.

Important: The occlusal surfaces and incisal edges of the denture teeth must remain free of silicone. Use only addition cross-linking silicones.

Note: The Shore A hardness of the silicone must be at least 65 (e.g. Flexistone Plus or Virtual Heavy Body).



After that, isolate stone-to-stone contact surfaces with Separating Fluid and allow it to dry.



Now close the two flask halves with the locking clasps using a rotating movement. Make sure that the flask edges are clean. Allow the mixed Class 3 dental stone to flow into the opening of the flask on a shaker until the flask is completely filled. Prevent air bubbles during pouring.



Skim off the excess stone using, e.g. the IvoBase spatula, so that no stone protrudes from the flask opening.



Boiling out the model

Once the stone has set, heat the flask in a water bath at approximately 90 °C / 194 °F for 5–8 minutes. In this way, the wax is soft when the two flask halves are opened. Rough excess can be easily and generously removed with a plaster knife.

Remove the access former 'full'. Now thoroughly boil out the wax residue at the inner surfaces with clean, boiling water.

Important: Use only clean water without additives, such as wax solvents or cleaning agents. Additives may cause whitish discolouration in the basal area of the denture base and interfere with an optimum bond between the cervical area and the denture base resin.



Preparing for injection

For an optimum bond between the resin teeth and the denture base resin, the cervical areas of the teeth, as well as the basal tooth surfaces must be absolutely free of wax, e.g. clean with the steam jet.

After cleaning, slightly blast the basal tooth surfaces (100 µm Al₂O₃ at 2 bar) or roughen them with a cross-cut tungsten carbide bur.

For further details on the processing of resin teeth, please refer to the instructions of the corresponding tooth manufacturer.



Before isolation, cool the flask halves to below 30 °C / 86 °F using air or clean, cold water. The exact temperature can be checked with the help of the infrared thermometer supplied.

Important: Measure the temperature at the thickest part (highest heat accumulation).



If the stone has dried out, for example due to overnight storage, the flask halves must be soaked in cold water for 5–10 minutes prior to isolation. Remove stone residue sticking to the heater or sensor surface, the flask edge, the isolation shoulder or the recess for the aeration filter.

Now isolate the clean surfaces of the stone model with Separating Fluid. Avoid "pooling", e.g. at the gingivo-buccal fold, palatal roof and, in particular, the A-line. After approximately 5 minutes, apply a 2nd isolation layer and allow to dry. Best, vertically erect the flask halves.



Insert the aeration filter flush into the corresponding recess in the flask.

Note: With IvoBase, the air in the anterior region automatically and completely escapes through the aeration filter until the flow of the resin seals the aeration filter and sets. The hollow space is thus aerated in a controlled manner, which also prevents bubbles and porosities from forming in the resin.



Press the IvoBase funnel into the centring insert until it stops and place it in the lower flask half.



During injection, the sealing lip of the funnel is used to seal the hollow space in the flask in the injection direction. Therefore, the funnel must be completely embedded in stone to prevent the resin from escaping the flask.



Now close the two flask halves again with the locking clasps.

Note: The sealing lip of the funnel may create a narrow gap between the flask halves, which, however, will be closed in the IvoBase Injector by the clasps.



Mixing the material

The operation of the IvoBase Injector is described in detail in the corresponding Operating Instructions. The IvoBase Injector must be brought to stand-by state before the material is mixed.

One capsule is sufficient for the injection of a maxillary or mandibular complete denture.

Important: The predosed material in the capsule is sufficient for most cases. For particularly large dentures, mix the material from 2 capsules in a separate mixing container and fill the required quantity into a capsule.

Contents of the capsule:	Monomer	Polymer
IvoBase Hybrid	20 ml	34 g
IvoBase High Impact	20 ml	30 g

A short blast of compressed air between the monomer container and the capsule renders the monomer container easy to remove from the capsule. Remove the capsule lid and the seal of the monomer container with a rotating movement. Now fill the entire monomer into the capsule and mix the monomer and polymer to a homogeneous mixture for approximately 20–30 seconds using a spatula. Make sure that the material is completely mixed.

Important: No more than 5 minutes should pass between mixing the material and the start of the polymerization program.

Place the open capsule on an even surface and press the centring insert with the flask onto the capsule.

Note: Do not tilt the capsule with the flask any more to prevent the still liquid material from flowing out. When the flask is lifted, the capsule must be located securely in the centring insert.



Injection and polymerization

Open the door of the IvoBase Injector and place the prepared flask with the capsule into the polymerization chamber via the flask holder until it stops. The flask perceptibly snapping into place indicates the correct position.

For optimum results with IvoBase Hybrid and IvoBase High Impact, the IvoBase Injector is equipped with polymerization programs especially designed for the respective materials – P1 for Hybrid, P2 for High Impact.

To further reduce the residual monomer content to below 1% the optional RMR key can be activated.

Select the corresponding program and confirm with the Start key. The fully-automated injection process begins. The remaining process time is indicated in the display.



At the end of the program, an acoustic signal sounds. Use the thermal glove to remove the hot flask from the Injector by holding it by the isolation shoulder. The Injector is ready for the next polymerization immediately after the flask is removed.

Note: The flask may still be very hot when removed from the Injector. Burn hazard!

Cool the flask under cold running water for 15–25 minutes (water temperature <math><15\text{ }^{\circ}\text{C}</math> / 59 °F). As an alternative, cooling may also take place in the Injector (e.g. over night).

Important: If the flask is not sufficiently cooled and is opened too soon, deformation of the dentures may occur, which results in inaccuracy of fit.

Divesting / finishing

Remove the locking clasps and place the flask under a dental press with the divesting aid positioned between the stone and the press table. Load the divesting aid with slight pressure using the dental press. The upper flask half may now be levered up by sliding a plaster knife into the gap between the two flask halves. Remove the flask from the press, turn it around and repeat the procedure.



Remove the stone core with the capsule and separate the capsule at the injection channel using a separating disk, bur, or saw. Divest the denture from the stone core as usual with stone tongs.

Note: Do not use a hammer for divestment since it may damage the dentures.



Do not remove the dentures from the model when checking the occlusion in the articulator. Due to the coordinated system components and the shrinkage-compensating polymerization process, there is no increase in vertical dimensions.

The polymerized IvoBase Material is finished as usual with cross-cut tungsten carbide burs, sandpaper, and polishing media. The Ivoclar Vivadent Universal polishing paste is recommended for high-gloss polishing.

Important: Avoid excess heat development when finishing denture base resin with rotary instruments (warping / deformation of the denture base).



The result

IvoBase® System

Partial dentures

Basically, the procedure for completing partial dentures with IvoBase is the same as that for complete dentures. For certain details, however, there are a number of peculiarities that should be observed and that are described below.

Investing the model

Note: It is recommended to complete the dentures with IvoBase on a working model (duplicate model). In this way, damage to the master model is eliminated.

After the final check, prepare the wax-up for completion with the model cast framework. Pay particular attention to the correct fit of the model cast framework. Now wax the denture body to the model and place it in a water bath for 5–10 minutes. Use the Separating Fluid supplied with the material to subsequently isolate the stone-to-stone surfaces.



To prepare the flask, coat / spray the inner surfaces of the flask halves with a thin layer of petroleum jelly. The two flask halves are identical. Both can be used for model investment and for the counter model. Place the flask lid and the access former 'half' in one of the flask halves.

Important: Do not forget to place the filter wax component in the intended recess in the flask half.



Invest the well-soaked and isolated model in one of the flask halves using conventional Class 3 dental stone. Place the model in the centre of the flask. The distance between the anterior model stop and the flask housing must be approximately 10 millimetres. The gingivo-buccal fold should be at the same height as the flask edge. In particularly high dentures, check the vertical height with the help of the counter flask beforehand.

Remove the excess stone so that the stone is flush with the edge of the denture saddle and the flask edge. The areas of the residual dentition should be generously covered with, e.g. silicone (Shore A hardness >65) or stone, so that no undercuts are present and the two flask halves can be easily separated later on. Block out abutment teeth with retention elements up to the equator of the retention elements so that the model cast framework can still be removed from the model after investment.

Important: The access former 'half' must be invested flush in the stone. If this is not done, stone may chip off during the subsequent investment steps and the flask will become untight.



Placing the injection channels

Once the stone has completely set, replace the access former 'half' with the access former 'full'. You can now press the injection wax component over the conical tip of the access former and to the stone surface. Provide the individual denture saddles with an injection channel each at the dorsal ends.

In order to aerate the hollow space of the denture saddles during injection, attach aeration channels in the anterior margin of the saddle. If necessary, the prefabricated wax components have to be extended with channel-like wax so that a connection between the wax-up and the filter wax component can be achieved.



Investing in silicone and casting the counter model

Cover the denture teeth as well as the anatomically contoured alveolar area with a flowable to medium-viscosity addition cross-linking silicone. This protects the teeth during divesting and saves a lot of time during finishing. It is also recommended to cover the abutment teeth above the retention elements with silicone.

Apply retentive patterns in the surface of the silicone before it sets to secure the silicone in the stone of the counter model. Make sure that no hollow spaces are created between the silicone and the wax.



Important: The occlusal surfaces and incisal edges of the denture teeth must remain free of silicone. Use only addition cross-linking silicones.

Note: The Shore A hardness of the silicone must be at least 65 (e.g. Flexistone Plus or Virtual Heavy Body Fast).

After that, isolate stone-to-stone contact surfaces with Separating Fluid and allow it to dry.

Now close the two flask halves with the locking clasps using a rotating movement. Make sure that the flask edges are clean. Allow the mixed Class 3 dental stone to flow into the opening of the flask on a shaker until the flask is completely filled. Prevent air bubbles during pouring.



Skim off the excess stone using, e.g. the IvoBase spatula, so that no stone protrudes from the flask opening.



Boiling out the model

Once the stone has set, heat the flask in a water bath at approximately 90 °C / 194 °F for 5–8 minutes. In this way, the wax is soft when the two flask halves are opened. Rough excess can be easily and generously removed with a plaster knife.

Remove the access former 'full'. Now thoroughly boil out the wax residue at the inner surfaces with clean, boiling water.

Important: Use only clean water without additives, such as wax solvents or cleaning agents. Additives may cause whitish discolouration in the basal area of the denture base and interfere with an optimum bond between the cervical area and the denture base resin.

Preparing for injection

For an optimum bond between the resin teeth and the denture base resin, the cervical areas of the teeth, as well as the basal tooth surfaces must be absolutely free of wax, e.g. clean with the steam jet.



After cleaning, slightly blast the basal tooth surfaces ($100\ \mu\text{m}\ \text{Al}_2\text{O}_3$ at 2 bar) or roughen them with a cross-cut tungsten carbide bur. For further details on the processing of resin teeth, please refer to the instructions of the corresponding tooth manufacturer.

Now condition the retentions of the model cast framework for the bond with the IvoBase Material. For that purpose, wet the sandblasted surfaces with a metal bonding agent and mask them with a gingiva opaquer. In addition to a reliable bond, this also ensures good esthetics.

We recommend using SR Link and SR Nexco Gingiva Opaquer (please observe the respective Instructions for Use).



Important: Insufficient curing / processing of the opaquer leads to smearing during injection.

Before isolation, cool the flask halves to below $30\ ^\circ\text{C}$ / $86\ ^\circ\text{F}$ using air or clean, cold water. The exact temperature can be checked with the help of the infrared thermometer supplied.



Important: Measure the temperature at the thickest part (highest heat accumulation).

If the stone has dried out, for example due to overnight storage, the flask halves must be soaked in cold water for 5–10 minutes prior to isolation. Remove stone residue sticking to the heater or sensor surface, the flask edge, the isolation shoulder or the recess for the aeration filter. Now isolate the clean surfaces of the stone model with Separating Fluid. Avoid "pooling", e.g. at the gingivo-buccal fold. After approximately 5 minutes, apply a 2nd isolation layer and allow to dry. Best, vertically erect the flask halves.

Insert the aeration filter flush into the corresponding recess in the flask.

Note: With IvoBase, the air in the anterior region automatically and completely escapes through the aeration filter until the flow of the resin seals the aeration filter and sets. The hollow space is thus aerated in a controlled manner, which also prevents bubbles and porosities from forming in the resin.



Now, place the model cast framework on the model. To check the correct position, the two flask halves may be combined by hand. To somewhat secure the framework, apply a small amount of auto-curing polymer on the retention so that an attachment to the alveolar ridge is created.



Press the IvoBase funnel into the centring insert until it stops and place it in the lower flask half.

During injection, the sealing lip of the funnel is used to seal the hollow space in the flask in the injection direction. Therefore, the funnel must be completely embedded in stone to prevent the resin from escaping the flask.



Now close the two flask halves again with the locking clasps.

Note: The sealing lip of the funnel may create a narrow gap between the flask halves, which, however, will be closed in the IvoBase Injector by the clasps.

The further procedure corresponds to that for complete dentures described in the previous chapter.



The result

IvoBase® System

Implant-retained dentures / bar attachments

Starting situation

Once the tertiary structure with the underlying securing element has been completed, the wax-up can be carried out in the articulator in the usual manner.



Investing the model

The denture body is waxed to the model and placed in a water bath for 5–10 minutes. Use the Separating Fluid supplied with the material to subsequently isolate the stone-to-stone surfaces.

Important: The water bath should not exceed a temperature of 25 °C / 77 °F to prevent deformation / loss of occlusion.

To prepare the flask, coat / spray the inner surfaces of the flask halves with a thin layer of petroleum jelly. Place the flask lid and the access former 'half' in one of the two flask halves.

Important: Do not forget to place the filter wax component in the intended recess in the flask half.



Invest the well-soaked and isolated model in the prepared flask half using conventional Class 3 dental stone. Place the model in the centre of the flask. The distance between the anterior model stop and the flask housing must be approximately 10 millimetres. The gingivo-buccal fold should be at the same height as the flask edge. In particularly high dentures, check the vertical height with the help of the counter flask beforehand. Remove the excess stone so that the stone is flush with the model edge and the flask edge.

Important: The access former 'half' must be invested flush in the stone. If this is not done, stone may chip off during the subsequent investment steps and the flask will become untight.



Placing the injection channels

Once the stone has completely set, replace the access former 'half' with the access former 'full'. You can now press the injection wax component over the conical tip of the access former and to the stone surface. Place the injection channels in the same way as described in the chapter on complete dentures.

In order to aerate the hollow space of the flask during injection, attach aeration channels in the anterior region. Place the prefabricated wax components in such a way that there is a connection between the wax-up and the filter wax component.

Important: To ensure the tightness of the flask, the aeration channels must not come into direct contact with the flask housing.



Investing in silicone and casting the counter model

Cover the teeth as well as the anatomically contoured alveolar area – and the lingual / palatal areas, if necessary – with a flowable to medium-viscosity addition cross-linking silicone. Apply retentive patterns in the surface of the silicone before it sets to secure the silicone in the stone of the counter model. Make sure that no hollow spaces are created between the silicone and the wax.

Important: The occlusal surfaces and incisal edges of the denture teeth must remain free of silicone. Use only addition cross-linking silicones.

Note: The Shore A hardness of the silicone must be at least 65 (e.g. Flexistone Plus or Virtual Heavy Body Fast).



After that, isolate stone-to-stone contact surfaces with Separating Fluid and allow it to dry.

Now close the two flask halves with the locking clasps using a rotating movement. Make sure that the flask edges are clean. Allow the mixed Class 3 dental stone to flow into the opening of the flask on a shaker until the flask is completely filled. Prevent air bubbles during pouring.

Skim off the excess stone using, e.g. the IvoBase spatula, so that no stone protrudes from the flask opening.



Boiling out the model

Once the stone has set, heat the flask in a water bath at approximately 90 °C / 194 °F for 5–8 minutes. In this way, the wax is soft when the two flask halves are opened. Rough excess can be easily and generously removed with a plaster knife.

Remove the access former 'full'. Now thoroughly boil out the wax residue at the inner surfaces with clean, boiling water.

Important: Use only clean water without additives, such as wax solvents or cleaning agents. Additives may cause whitish discolouration in the basal area of the denture base and interfere with an optimum bond between the cervical area and the denture base resin.

Preparing for injection

For an optimum bond between the resin teeth and the denture base resin, the cervical areas of the teeth, as well as the basal tooth surfaces must be absolutely free of wax, e.g. clean with the steam jet. After cleaning, slightly blast the basal tooth surfaces ($100\ \mu\text{m}\ \text{Al}_2\text{O}_3$ at 2 bar) or roughen them with a cross-cut tungsten carbide bur.

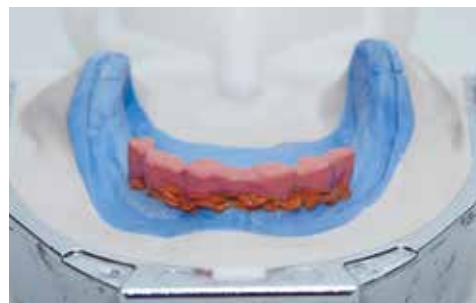
For further details on the processing of resin teeth, please refer to the instructions of the corresponding tooth manufacturer.

Now condition the tertiary structure for the bond with the IvoBase Material. For that purpose, wet the sandblasted surfaces with a metal bonding agent and mask them with a gingiva opaquer. In addition to a reliable bond, this also ensures good esthetics. We recommend using SR Link and SR Nexco Gingiva Opaquer (please observe the respective Instructions for Use).

Important: Insufficient curing / processing of the opaquer leads to smearing during injection.



To prevent denture base resin to flow between the metal constructions and into undercuts in the abutment teeth or implants during injection, these areas have to be blocked out. A flowable addition cross-linking silicone is suitable for this purpose. At the same time, the tertiary structure is secured in the correct position.



Allow the flask halves to cool to below 30 °C / 86 °F. The exact temperature can be checked with the help of the infrared thermometer supplied.

Important: Measure the temperature at the thickest part (highest heat accumulation).

Now isolate the clean surface of the stone model with Separating Fluid. Avoid "pooling", e.g. at the gingivo-buccal fold, palatal roof and, in particular, the A-line. After approximately 5 minutes, apply a 2nd isolation layer and allow to dry. Best, vertically erect the flask halves.

Insert the aeration filter flush into the corresponding recess in the flask.



Press the IvoBase funnel into the centring insert until it stops and place it in the lower flask half.

During injection, the sealing lip of the funnel is used to seal the hollow space in the flask in the injection direction. Therefore, the funnel must be completely embedded in stone to prevent the resin from escaping the flask.

Now close the two flask halves again with the locking clasps.



Note: The sealing lip of the funnel may create a narrow gap between the flask halves, which, however, will be closed in the IvoBase Injector by the clasps.

The further procedure corresponds to that for complete dentures described in the previous chapter.



The result

IvoBase[®] System

Mouthguards

IvoBase Hybrid Clear is excellently suitable for the fabrication of hard mouthguards. The procedure for the fabrication of mouthguards is described below. It is recommended to mark the tooth equator prior to the wax-up. The equator is intended to represent the margin of the hard mouthguard in the cervical direction.

Starting situation

Check the mouthguard, which is contoured in the same manner, in the articulator and press in the contact points of the opposing jaw. Smooth out tapered areas and sharp edges. Subsequently, place the model in a water bath for 5–10 minutes.



Investing the model

To prepare the flask, coat / spray the inner surfaces of the flask halves with a thin layer of petroleum jelly. The two flask halves are identical. Both can be used for model investment and for the counter model. Place the flask lid and the access former 'half' in one of the two flask halves.

Important: Do not forget to place the filter wax component in the intended recess in the flask half.



Invest the well-soaked and isolated model in the prepared flask half using conventional Class 3 dental stone. Place the model in the centre of the flask. The distance between the anterior model stop and the flask housing must be approximately 10 millimetres. The gingivo-buccal fold should be roughly at the same height as the flask edge. In particularly high models, check the vertical height with the help of the counter flask beforehand. Block out undercuts at the model with excess stone so that the two flask halves can be easily separated later on. As an alternative, an A-silicone can be used to block out undercuts.



The flask edge must be free of stone residue.

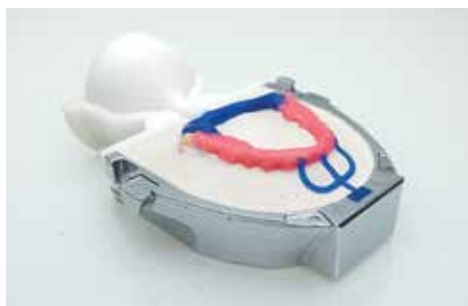
Important: The access former 'half' must be invested flush in the stone. If this is not done, stone may chip off during the subsequent investment steps and the flask will become untight.

Placing the injection channels

Once the stone has completely set, replace the access former 'half' with the access former 'full'. You can now press the injection wax component over the conical tip of the access former and to the stone surface. Place the injection channels at the dorsal ends of the contouring. Separate the injection channel in the middle. Make sure that the injection channel is well secured in all areas. The wax components can be additionally secured with wax.

In order to aerate the hollow space of the flask during injection, attach aeration channels in the anterior region of all restorations. Place the prefabricated wax components in such a way that there is a connection between the wax-up and the filter wax component.

Important: To ensure the tightness of the flask, the aeration channels must not come into direct contact with the flask housing.



Investing in silicone and casting the counter model

Cover the wax-up with a flowable to medium-viscosity addition cross-linking silicone. This provides a smooth surface and saves a lot of time during finishing.

Apply retentive patterns in the surface of the silicone before it sets to secure the silicone in the stone of the counter model. Make sure that no hollow spaces are created between the silicone and the wax.

Important: The occlusal surfaces and incisal edges of the denture teeth must remain free of silicone. Use only addition cross-linking silicones.

Note: The Shore A hardness of the silicone must be at least 65 (e.g. Flexistone Plus or Virtual Heavy Body Fast).

After that, isolate stone-to-stone contact surfaces with Separating Fluid and allow it to dry.

Now close the two flask halves with the locking clasps using a rotating movement. Make sure that the flask edges are clean. Allow the mixed Class 3 dental stone to flow into the opening of the flask on a shaker until the flask is completely filled. Prevent air bubbles during pouring.

Skim off the excess stone using, e.g. the IvoBase spatula, so that no stone protrudes from the flask opening.

The further procedure corresponds to that for complete dentures described in the previous chapter.

The homogeneous properties of the IvoBase Material Clear are clearly evidenced during high-gloss polishing.

Note: The monomer can be dyed with KFO colour concentrates to create beautiful colour effects in the mouthguard. Given the high accuracy of fit of the mouthguard it may sit rather tightly on the model. To prevent this occurrence, block out the interproximal areas or apply a third isolation layer prior to injection.



The result

IvoBase® System

Characterizing dentures

Denture teeth and denture bases can be modified and characterized with SR Connect and SR Nexco. SR Connect is a light-curing conditioner to bond light-curing veneering materials to PMMA and resin denture teeth. The SR Nexco paste in gingiva shades enables the shade design of true-to-nature gingival areas. These materials can be used to modify and characterize IvoBase dentures even more quickly and more easily. The characterization of denture bases is particularly suitable for partial and complete dentures.

Pretreatment

Slightly reduce the anatomic contouring of the surface to be characterized using a cross-cut instrument. Then, sandblast the surface with Al₂O₃ (80–100 µm) at 2 bar pressure. Remove residue with oil-free air.

Important: Do not clean the surface with steam!



Apply SR Connect in a thin, covering layer using a brush and allow to dry for **2–3 minutes**. Subsequently, polymerize in a light polymerization device.

The SR Nexco Instructions for Use contain the exact parameters for the light polymerization devices.

Make sure that the inhibited layer remains clean and is not damaged to achieve a good bond with the composite.



Contouring an esthetic gingiva

Subsequently, apply the SR Nexco Gingiva materials to make the required shape and shade adjustments. Differently shaded Gingiva and Intensive Gingiva materials are available for this purpose.



The Basic Gingiva shade BG34 is ideally coordinated with Ivobase shade 34-V.

Individual characteristic features can be applied with SR Nexco Stains, which have to be thinly coated with Gingiva material (e.g. G1 or G2).



Before the final polymerization in the light polymerization device, apply a covering, but not too thick layer of SR Gel on the completed contouring. This prevents the formation of an inhibition layer and thus facilitates finishing.



Finishing

The final finishing is generally carried out with rotary grinding and polishing instruments. A particularly lifelike gloss can be achieved with the Ivoclar Vivadent Universal Polishing Paste.

Note: The applied SR Nexco material is more wear resistant than PMMA. This fact must be taken into account during finishing and polishing. If this is not observed, a "step" may develop at the transition areas between SR Nexco and the PMMA resin during polishing, for example.



The result

IvoBase® System

Repair / relining

IvoBase can be repaired with itself, as well as with ProBase® Cold auto-curing polymer.

Repair / extension with IvoBase Hybrid / High Impact

Basically, an IvoBase denture can be repaired without investment in the IvoBase flask. The basic procedure is the same as that for repairing with conventional auto-curing denture base materials.

Observe the mixing ratio as follows:

	Polymer	Monomer
IvoBase Hybrid	9 g	5 g
IvoBase High Impact	8 g	5 g

The polymer and monomer must be homogeneously mixed (for approximately 20 seconds).

Please observe the following approximate processing times (at 23 °C / 73 °F room temperature):

- Duration of the dough phase: 30 seconds
- Duration of the pouring phase: 1–2 minutes
- Duration of the modelling phase: 3–5 minutes

The maximum total processing time after mixing is 10 minutes. Polymerize the material in a pressure pot for 20 minutes at 55 °C / 131 °F at 2.5 bar pressure.

Relining with IvoBase Hybrid / High Impact

The relining of an IvoBase denture may be carried out with or without investment in the IvoBase flask.

a) Relining without investment in the IvoBase flask

The procedure without investment in the IvoBase flask is the same as that for relining with conventional auto-curing denture base materials.

a) Relining with investment in the IvoBase flask

Investment and completion for the relining of a denture is basically the same as for the completion of a waxed-up denture. Make sure that

- the injection and aeration channels are attached to the impression of the relining;
- the area to be relined must demonstrate a thickness of at least 2 mm.

Repair / extension / relining with ProBase® Cold

The basic procedure is the same as that for repairing with conventional auto-curing denture base materials. Please refer to the ProBase Cold Instructions for Use for details.

IvoBase® System

Denture care

To maintain high-quality dentures for as long as possible, products should be used which minimize natural plaque formation and the resulting bad breath or inflammation, as well as caries in the residual dentition.

Cervitec® Gel helps maintain dentures, implants and natural teeth for a long time. The chlorhexidine in Cervitec Gel has been tried-and-tested for decades and prevents harmful bacteria from accumulating. There is less plaque formation and the inflammation of the gingiva and oral mucous membrane is prevented. The tissue is protected and the bacterial growth on dentures is reduced.

Using the oral care gel

Cervitec Gel can be used as follows, depending of the respective requirements:

- like a tooth paste with a tooth brush
- application directly on the gums, oral mucous membranes or the inner aspects of removable restorations
- application on an interdental brush and cleaning of the space between the teeth or fixed construction elements.

Cervitec Gel is applied as a preventive or a supporting care measure until the symptoms have faded, insofar as no other recommendations exist.

Note: To support the caring effect in the oral cavity, Cervitec Gel should not be rinsed out, spitting out is sufficient.



Well-maintained dentures

For correct denture care, proceed as follows:

- The dentures and the mouth without dentures should be rinsed with water after every meal.
- The dentures should be thoroughly cleaned with a soft denture brush and warm water at least once a day.
- No abrasive cleaning pastes should be used.
- Especially the inner aspects of the dentures which come into contact with the mucous membrane and interdental spaces should be carefully brushed.
- The dentures should be rinsed under running water after brushing.
- The tongue, residual dentition and palate should also be cleaned with a soft brush.
- Finally, the toothless areas are massaged with a brush.



These measures promote the overall oral health and provide for a pleasant, fresh comfort of wear of the dentures.

IvoBase[®] System

General information

Notes regarding the IvoBase Material

Notes on processing

- Exclusively use Class 3 stone for model fabrication and investment.
- With warmer ambient temperatures, it is recommended to place the IvoBase wax components in a cool place for approximately 5 minutes at a temperature of 2–8 °C / 36–42 °F (refrigerator) before use. This ensures that the wax components can be easily separated from the carrier foil.
- Soak models in water approximately 5–10 minutes before investment.
- Isolate inner flask surfaces before investment.
- Clean stone surfaces and thinly isolate with Ivoclar Vivadent Separating Fluid.
- Closely observe polymerization and cooling times.
- Contact of solvents or monomer with polymerized denture base material may lead to white discolouration.
- When using cervical isolations, Ivoclar Vivadent recommends A-silicones with a Shore A hardness of >65 (e.g. Flexistone Plus / Virtual[®] Heavy Body Fast). Condensation cross-linking silicones (C-silicones) may have a damaging effect on the denture base materials.
- The products may only be used and processed by trained personnel.
- Post-injection of a second capsule of IvoBase or SR Ivocap[®] material into an already filled flask is not permissible.
- The remaining material of an already injected IvoBase capsule cannot be used again.
- Dried out stone must be soaked in water prior to injection.
- A contaminated flask may lead to smoke development when heated.
- The dentures should be stored in a humid environment between the completion and their incorporation.

Safety notes

- Monomer contains methyl methacrylate (MMA).
- MMA is highly flammable and irritating, flash point: +10 °C / 50 °F.
- MMA is irritating to eyes, respiratory organs and skin.
- Skin contact may cause sensitization.
- Avoid skin contact with monomer and unpolymerized material. Commercial medical gloves do not provide protection against the sensitizing effect of methacrylates.
- Do not inhale vapours.
- Keep away from sources of ignition do not smoke.
- Prevent monomer from reaching the sewage system.
- Take measures against electrostatic charge.

Side effects

In individual cases local allergic reactions to methyl methacrylate materials have been reported.

Storage instructions

- Store material in a cool, dark and well ventilated place.
- Storage temperature: 2–28 °C / 36–82 °F.
- Do not use the products after the indicated expiration date.
- Keep material out of children's reach.

Classification according to EN ISO 20795-1:

Type 2 Class 1

The product meets the requirements of EN ISO 20795-1:2013.

Scientific data

Further scientific data, i.e. on the residual monomer content, accuracy of fit or mechanical properties, are contained in the "IvoBase Scientific Documentation".

The Documentation also provides a set of studies that describe the performance of IvoBase.

This Scientific Documentation can be obtained from Ivoclar Vivadent.

Supplementary information in IvoBase can be found in the "special update" 12/2011, as well as in the "ZWR" special reprint 5/2012.

Product overview and description



Denture teeth

The denture teeth from Ivoclar Vivadent are optimally coordinated with the denture base materials and enable successful processing and use.

For demanding, high-quality partial and complete dentures, the 4-layer tooth SR Phonares® II is particularly suitable.

SR Link

SR Link is a metal / composite bonding agent that provides a covalent bond between metal frameworks and SR Nexco. SR Link is an easy-to-use and, above all, tried-and-tested bonding system that can be used in conjunction with a wide selection of alloys.

The bonding system is suitable for use on frameworks made of

- alloys that contain less than 90% gold, palladium and platinum;
- alloys that contain less than 50% copper and/or silver;
- base metal alloys;
- titanium and titanium alloys.



SR Connect

SR Connect is a light-curing conditioner to bond light-curing veneering materials to PMMA, heat- or cold-curing polymers and resin denture teeth.

These are the areas of application:

Establishing a bonding layer in the case of

- individual shade and shape modifications of prefabricated teeth and different veneering materials, such as Telio® CAD and Telio Lab;
- individual shade adjustments of denture base resins.

Universal Polishing Paste, 100 ml

The SR Universal Polishing Paste is excellently suitable for quick and efficient polishing of composite and metal restorations. It is especially used for the high-gloss polishing of prosthetic restoration.



Cervitec® Gel

High-quality removable dentures should be cared for daily, just like natural teeth. Cervitec Gel reduces the natural plaque formation and the resulting bad breath, as well as minimizes the risk of inflammation of the oral mucous membrane.

Frequently Asked Questions

IvoBase Material

Can the IvoBase Material be used in the SR Ivocap System?

No. IvoBase requires a special program for polymerization, which cannot be conducted in the SR Ivocap equipment and in a water bath.

What is the purpose of the aeration filter?

With IvoBase, the air automatically and completely escapes through the aeration filter in the anterior region until the flow of the resin seals the aeration filter. The hollow space is thus aerated in a controlled manner, which also prevents bubbles and porosities from forming in the polymerized resin.

Why are 3 injection channels needed for maxillary dentures?

With the controlled injection through 3 injection channels, a constant flow limit is produced, which generates a coherent air cushion in the anterior region. This air can now be discharged through the aeration filter as a whole so that air is prevented from being trapped in the material.

What is the processing time of the mixed material?

No more than 5 minutes should pass between mixing the material and the start of the polymerization program.

Can the IvoBase Material be repaired with other auto-curing polymers?

Yes. In order to achieve the best possible shade match, Ivoclar Vivadent auto-curing polymers are recommended, e.g. ProBase Cold.

When is IvoBase Hybrid used, and when IvoBase High Impact?

IvoBase Hybrid and High Impact can be used for all types of prosthetic restorations. IvoBase High Impact is a particularly impact-resistant material that is especially recommended for implant-retained restorations or for restorations with a very delicate denture base design.

What are the differences between Hybrid and High Impact?

(see table)

How do the resin teeth have to be pretreated?

For an optimum bond between the resin teeth and the denture base resin, the cervical areas of the teeth, as well as the basal tooth surfaces must be absolutely free of wax. After cleaning, the basal surfaces are roughened by slightly sandblasting them. As an alternative, the surfaces can be roughened with a cross-cut bur. With composite teeth, the areas encased in denture base resin may also be conditioned (e.g. with SR Connect).

Can all resin teeth be processed in conjunction with the material?

Yes. For further details on the processing of resin teeth, please refer to the instructions of the corresponding tooth manufacturer.

Can ceramic teeth be processed in conjunction with the material?

Yes. For further details on the processing of ceramic teeth, please refer to the instructions of the corresponding tooth manufacturer.

	Hybrid (Typical values)	High Impact (Typical values)
Shades	Pink, Pink-V, Pink-V Implant, Preference, Preference Implant, Clear	Pink, Pink-V, Pink-V Implant, Preference, Preference Implant, 34-V
Process time / with RMR	35 min. / 45 min.	50 min. / 60 min.
According to Charpy notched impact strength*	1.14 kJ/m ²	3.07 kJ/m ²
Initial residual monomer content without / with RMR**	1.4% / 0.7%	1.3% / 0.7%
Fracture toughness**	1.39 MPa m ^{1/2}	2.37 MPa m ^{1/2}
Fracture work**	310 J/m ²	1452 J/m ²
Flexural strength**	80.9 MPa	73.8 MPa
Modulus of elasticity**	2709 MPa	2361 MPa
Water absorption**	22.8 µm/mm ³	21.6 µm/mm ³
Water solubility**	<0.1 µm/mm ³	<0.1 µm/mm ³

* According to old standard ISO 1567:2000; ** According to ISO 20795-1:2013

Can any stone be used for investment?

No, use a Class 3 dental hard stone.

Can any isolation medium be used?

No, it is recommended to use the Ivoclar Vivadent Separating Fluid provided to isolate the stone surfaces. The use of any other isolation media may cause white discoloration of the resin.

Does the IvoBase Material have to be mixed in the Cap Vibrator?

No, the material has to be mixed with the spatula to a homogeneous mixture for 20–30 seconds.

What has to be done if material escapes from the flask during the injection process?

If only a small quantity of material escapes, the program does not have to be aborted. However, if large quantities of material escape in the anterior region or through a tilted capsule plunger, aborting the program with the Stop key is recommended, since this may result in a faulty injection.

How can very large dentures be fabricated with IvoBase, for which the predosed quantity of denture base material is not sufficient?

In most case, the predosed material in the capsule is sufficient. For very large dentures, the material of two capsules is mixed in a separate mixing container and the required quantity filled back into a capsule.

IvoBase Injector**Can the next flask be loaded in the Injector and the program be started immediately after completion of an injection?**

Yes, the next injection can be started immediately. The temperature of the flask must be below 30 °C / 86 °F. If the temperature is higher, error message 1928 will appear.

Can the Ivocap flask be used in the IvoBase Injector?

No, because the Ivocap flask does not fit into the Injector. The flasks are different.

The the IvoBase flask be used with the Ivocap System?

No, since the IvoBase flask does not fit into the equipment. The flasks are different.

What is the function of the RMR key?

The polymerization time is prolonged and thus the degree of polymerization of the material is increased. Consequently, the residual monomer content is reduced (below 1%).

What is the purpose of the water container?

To gather the condensate escaping from the stone during the injection process.

Does the Injector require maintenance? How?

The water container must be emptied from time to time. Other than that, the Injector does not require maintenance.

Are there expendable parts? If yes, which?

Yes, the heater must be replaced if the corresponding notification appears in the display.

What is the warranty period?

2 years

Is an exhaust hood required for escaping gases or fumes?

No, this is not necessary.

What is the purpose of the USB interface?

It is used for future software updates via PC / Internet.

How is the Injector cleaned?

With a cleaning cloth. Please observe the corresponding information in the Operating Instructions.

What happens if the door is opened during an injection process?

The process is interrupted and an alarm is triggered. In the display, the user is instructed to close the door again.

Can the Injector be operated in rooms with high temperatures (e.g. in the casting room) without any problems?

Caution! The room temperature must not exceed 40 °C / 104 °F. Furthermore, care must be taken that the material, flask and stone temperature does not exceed 30 °C / 86 °F before the injection process.

Can the window break? If yes, can it simply be replaced?

In standard operation, the window should not break, as it is made of safety glass. If it breaks nonetheless, it can be replaced by an Ivoclar Vivadent Service Center.

Is it possible to program additional programs?

No, there are no individual programs available, since the programs have to be exactly adjusted to the material.

Should you have any further questions, please contact our technical field representatives or the hotline / service line.

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The logo for Ivoclar Vivadent, featuring a series of colored dots (green, blue, grey) above the text. The text "ivoclar" is in a smaller blue font, "vivadent" is in a larger blue font, and "technical" is in a smaller italicized blue font below it. A registered trademark symbol (®) is located to the right of "vivadent".

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