Classification System for Partial Edentulism
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This partially edentulous classification system offers the following potential benefits:

- Improved intra-operator consistency
- Improved professional communication
- Insurance reimbursement commensurate with complexity of care
- An objective method for patient screening in dental education
- Standardized criteria for outcome assessment and research
- Improved diagnostic consistency
- Simplified, organized aid in the decision to refer a patient
Classification System for the Partially Edentulous Patient

Class I
- Ideal or minimally compromised

Class II
- Moderately compromised

Class III
- Substantially compromised

Class IV
- Severely compromised

Diagnostic Criteria
1. Location and extent of the edentulous area(s)
2. Condition of the abutment teeth
3. Occlusal scheme
4. Residual ridge
REVIEW OF THE DIAGNOSTIC CRITERIA

1. Location and extent of the edentulous area(s)
2. Condition of the abutment teeth
3. Occlusal scheme
4. Residual ridge
Criteria 1

Location and extent of edentulous area(s)
Ideal or Minimally Compromised Edentulous Area

The edentulous span is confined to a single arch and one of the following:

• Any anterior maxillary span that does not exceed 2 missing incisors

• Any anterior mandibular span that does not exceed 4 missing incisors

• Any posterior maxillary or mandibular span that does not exceed 2 premolars or 1 premolar and 1 molar
Moderately Compromised Edentulous Area

The edentulous span is in both arches and one of the following:

- Any anterior maxillary span that does not exceed 2 missing incisors
- Any anterior mandibular span that does not exceed 4 missing incisors
- Any posterior maxillary or mandibular span that does not exceed 2 premolars or 1 premolar and 1 molar
- The maxillary or mandibular canine is missing
Substantially Compromised Edentulous Area

- Any posterior maxillary or mandibular span that is greater than 3 missing teeth or 2 molars
- Any edentulous span including anterior and posterior areas of 3 or more missing teeth
Severely Compromised Edentulous Area

• Any edentulous area or combination of edentulous areas requiring a high level of patient compliance
Criteria 2

Abutment Teeth Condition
Ideal or Minimally Compromised Abutment Teeth Condition

No preprosthetic therapy is indicated
Moderately Compromised Abutment Teeth Condition

Abutment Condition:
Insufficient tooth structure to retain or support intracoronal restorations – in one or two sextants

Abutments require localized adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedures in one or two sextants
Substantially Compromised Abutment Teeth Condition

Abutment condition:
Insufficient tooth structure to retain or support intracoronal or extracoronal restorations- four or more sextants

Abutments require extensive adjunctive therapy, i.e., periodontal, endodontic or orthodontic procedures- in four or more sextants
Severely Compromised Abutment Teeth Condition

Abutments have a guarded prognosis
Criteria 3

Occlusal Scheme
Ideal or Minimally Compromised Occlusal Scheme

- No preprosthetic therapy required
- Class I molar and jaw relationships
Moderately Compromised Occlusal Scheme

- Occlusal scheme requires localized adjunctive therapy (e.g. enameloplasty on premature occlusal contacts)
- Class I molar and jaw relationships
Substantially Compromised Occlusal Scheme

• Entire occlusal scheme requires reestablishment but without any change in the vertical dimension of occlusion

• Class II molar and jaw relationships
Severely Compromised Occlusal Scheme

• Entire occlusal scheme requires reestablishment with changes in the vertical dimension of occlusion

• Class II Division 2 and Class III molar and jaw relationships
Criteria 4

Residual Ridge
The criteria published for the Classification System for Complete Edentulism are used to categorize any edentulous span present in the partially edentulous patient.
Classification System for Partial Edentulism
Class I
Class I—Criteria 1
Location and extent of edentulous area(s)

- Ideal or minimally compromised
- Edentulous areas are confined to a single arch
- It does not compromise the physiologic support of the abutment
- Includes any anterior maxillary span that does not exceed two incisors, any anterior mandibular span that does not exceed four missing incisors and any posterior span that does not exceed two premolars or one premolar and a molar
Class I—*Criteria 2*

**Abutment condition**

- Abutment teeth condition is ideal or minimally compromised
- No need for preprosthetic therapy
Class I—Criteria 3
Occlusal Scheme

- Occlusal scheme is ideal or minimally compromised
- No need for preprosthetic therapy
- Maxillomandibular relationship: Class I molar and jaw relationships
Class I—Criteria 4
Residual ridge

• Residual ridge morphology is the Class I complete edentulism description
Class II
Class II—Criteria 1
Location and extent of edentulous area(s)

- Moderately compromised
- Edentulous areas are confined to a single arch
- It does not compromise the physiologic support of the abutment teeth
- Includes:
  - any anterior maxillary span not exceeding two incisors
  - any anterior mandibular span not exceeding four missing incisors
  - any posterior span that does not exceed two premolars or one premolar and a molar or any missing canine (maxillary or mandibular)
Class II—*Criteria 2*

**Abutment condition**

- Abutment teeth condition is moderately compromised
- Abutments in one or two sextants have insufficient tooth structure to retain or support intracoronal or extracoronal restorations
- Abutments in one or two sextants require localized adjunctive therapy
Class II—Criteria 3
Occlusal Scheme

• Occlusal scheme is moderately compromised

• Occlusal scheme requires localized adjunctive therapy

• Maxillomandibular relationship: Class I molar and jaw relationships
Class II—Criteria 4
Residual ridge

• Residual ridge morphology is the Class I complete edentulism description
Class III
Class III—Criteria 1
Location and extent of edentulous area(s)

- Substantially compromised
- Edentulous areas may be in one or both arches
- It does compromise the physiologic support of the abutment teeth
Class III—Criteria 2
Abutment condition

- Abutment teeth condition is substantially compromised
- Abutments in three sextants have insufficient tooth structure to retain or support intracoronal or extracoronal restorations
- Abutments in three sextants require more substantial localized adjunctive therapy, i.e., periodontal, endodontic, or orthodontic procedures
- Abutments have a fair prognosis
Class III—Criteria 3
Occlusal Scheme

• Occlusal scheme is substantially compromised

• Requires reestablishment of the entire occlusal scheme without any change in the vertical dimension of occlusion

• Maxillomandibular relationship: Class II molar and jaw relationships
Class III—Criteria 4
Residual ridge

• Residual ridge morphology is the Class I complete edentulism description
Class IV
Class IV—Criteria 1  
Location and extent of edentulous area(s)

- Severely compromised
- It can be extensive and in multiple areas in opposing arches
- It does compromise the physiologic support of the abutment teeth to create a guarded prognosis
- It includes acquired or congenital maxillofacial defects
- At least one edentulous area has a guarded prognosis
Class IV—*Criteria 2*

**Abutment condition**

- Abutment teeth condition is severely compromised
- Abutments in four or more sextants have insufficient tooth structure to retain or support intracoronal or extracoronal restorations
- Abutments in four or more sextants require extensive localized adjunctive therapy, i.e., periodontal, endodontic, or orthodontic procedures
- Abutments have guarded prognosis
Class IV—*Criteria 3*
Occlusal Scheme

- Occlusal scheme is severely compromised
- Requires reestablishment of the entire occlusal scheme including changes in the vertical dimension of occlusion
- Maxillomandibular relationship: Class II Division 2 and Class III molar and jaw relationships
Class IV—*Criteria 4*
Residual ridge

- Residual ridge morphology is the Class I complete edentulism description
Class IV—Additional Criteria

• **Refractory patient** (a patient who has chronic complaints following appropriate therapy). These patients continue to have difficulty in achieving their treatment expectations despite the thoroughness or frequency of the treatment provided.

• Severe manifestations of local or systemic disease including sequelae from oncologic treatment

• Maxillo-mandibular dyskinesia and/or ataxia
Class IV
Loss of posterior support
Class IV
Advanced wear
Guidelines for the Use of the Classification System for Partial Edentulism
In those instances when a patient’s diagnostic criteria are mixed between two or more classes, any single criterion of a more complex class places the patient into the more complex class.
The following additional guidelines will assist in the consistent application of the classification:

1. Consideration of future treatment procedures must not influence the decision as to which diagnostic level to place the patient in.

2. Initial preprosthetic treatment and/or adjunctive therapy can change the initial classification level. The classification may need to be reassessed after the removal of existing prostheses.
3. Esthetic concerns or challenges raise the classification in complexity by one level in Class I and II patients.

4. In the presence of TMD symptoms, the classification is increased in complexity by one or more levels in Class I and II patients.

5. Periodontal health is intimately related to the diagnosis and prognosis for partially edentulous patients. For the purpose of this system, it is assumed that patients will receive periodontal therapy to achieve and maintain periodontal health so that prosthodontic care can be accomplished.
6. In the situation where the patient presents with an edentulous maxilla opposing a partially edentulous mandible, each arch is diagnosed with the appropriate classification system.

In this situation, the maxilla would be classified according to the complete edentulism classification system and the mandible according to the partial edentulism classification system.

A single exception to this rule is when the patient presents with an edentulous mandible opposed by a partially edentulous or dentate maxilla.

This clinical situation presents significant complexity and long-term morbidity and as such, should be diagnosed as a Class IV in either system.
Diagnostic Worksheet
<table>
<thead>
<tr>
<th>Location &amp; Extent of Edentulous Areas</th>
<th>Class I</th>
<th>Class II</th>
<th>Class III</th>
<th>Class IV</th>
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</thead>
<tbody>
<tr>
<td>Ideal or minimally compromised-single arch</td>
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<tr>
<td>Moderately compromised-both arches</td>
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<td>Substantially compromised- &gt;3 teeth</td>
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<td>Severely compromised-guarded prognosis</td>
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<td>Congenital or acquired maxillofacial defect</td>
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<td>Abutment Tooth Condition</td>
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<td>Ideal or minimally compromised</td>
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<td>Moderately compromised-local adjunctive tx</td>
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<td>Severely compromised-extensive adjunctive tx</td>
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<td>Occlusal Scheme</td>
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<td>Ideal or minimally compromised</td>
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<td>Moderately compromised-local adjunctive tx</td>
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<td>Substantially compromised-occlusal scheme</td>
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<td>Severely compromised-change in VDO</td>
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<td>Residual Ridge</td>
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<td>Class I Edentulous</td>
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<td>Class II Edentulous</td>
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<td>Class IV Edentulous</td>
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<tr>
<td>Conditions Creating a Guarded Prognosis</td>
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<tr>
<td>Severe oral manifestations of systemic disease</td>
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<td>Maxillomandibular dyskinesia and/or ataxia</td>
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<td>Refractory patient</td>
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Guidelines for use of the Worksheet

- Any single criterion of a more complex class places the patient into the more complex class.
- Consideration of future treatment procedures must not influence the diagnostic level.
- Initial preprosthetic treatment and/or adjunctive therapy can change the initial classification level.