Restoring aesthetics and function with a reliable long-term restoration.

Application of a new semi-permanent material for exceptional clinical results.

Dr. Kleanthis Manolakis, DDS, Anthi Batiou, DDS, Greece

Clinicians often face great challenges dealing with extensive restorative clinical cases. Redefining aesthetics and function in failing dentitions is many times a challenging and time-consuming process. During the temporary restoration phase not only aesthetics and function need to be discussed with the patient and the restorative team, but also establishing endodontic and periodontal stability is of primary interest. During this temporary phase, which at times may last a prolonged period of time, the use of high performance temporary restorative materials can be beneficial. In the case presented below the use of a new supreme quality composite material designed to serve as a long-term quality semi-permanent restorative material will be discussed.

Case Presentation

The 35-year old female patient presents to our office with the wish to restore her upper and lower dentition. Both jaws were restored with fixed bridges many years ago. She experiences pain and discomfort and complains about recurrent infections in her lower jaw. She also feels uncomfortable with her dental aesthetics. Her primary concern is to restore her lower jaw first, then proceed with the upper jaw. An initial panoramic radiograph (Fig. 1) shows extensive restorations in both jaws. Only a few teeth are left in the lower jaw, presenting extensive bone loss, periapical infections and root fractures. All of her lower teeth are unfortunately unsalvageable. Additionally there is also an extensive crestal bone loss present at the posterior segments of her lower jaw. Luckily there is just enough bone present for the placement of four titanium implants in the interforaminal segment. The treatment of choice for restoring her lower jaw is a short arch fixed implant retained composite veneered bridge. This solution restores her health issues, her function and aesthetics in a very favorable way. A few months later the decision is taken to restore also the upper jaw. Her main concern is that the shape and color of her teeth are not pleasing (Fig. 2). Additionally, during the intraoral inspection, it is obvious that the restorative margins are insufficient (Fig. 3); several teeth present cervical carious lesions (Fig. 4). An extensive wear pattern is obvious from the occlusal view. When designing a new restoration for this extensive case several issues need to be taken into account. Tooth shape, tooth color and establishing optimal restorative margins for maintaining periodontal health are factors of great importance that need to be taken care of. Upon removal of the upper existing restorations extensive loss of enamel and dentin are present, as expected. Several teeth present carious lesions at their cervical region, buccally as well as palatally (Fig. 5). A positive issue is that she is not presenting extensive crestal bone loss around the existing upper teeth; her periodontal tissues are stable. A simple acrylic provisional restoration gives her a limited level of comfort and self-confidence during the time-consuming process. During the temporary restoration phase not only aesthetics and function need to be discussed with the patient and the restorative team, but also establishing endodontic and periodontic stability is of primary interest. During this temporary phase, which at times may last a prolonged period of time, the use of high performance temporary restorative materials can be beneficial. In the case presented below the use of a new supreme quality composite material designed to serve as a long-term quality semi-permanent restorative material will be discussed.

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Summary

In extensive and challenging clinical cases where a trustworthy and effective long-term solution is needed, a new generation of semi-permanent material should be given priority. It displays exceptional mechanical properties, ease of handling and optimal aesthetic results.

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