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"ONE BAKE" COMPOSITE VENEER
RESTORATION

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For our contemporary dentistry, re-establish a patient's lost dental aesthetic appearance is one of the most important topics. Veneers are restorations which are envisioned to correct aesthetic deficiencies, existing abnormalities and discolorations. There are two different types of veneers: direct and indirect laminate veneers. When it comes to the final aesthetic result and longevity, direct veneer restoration, as a definitive treatment plan in aesthetic therapies, have only been a second choice to porcelain veneers.

When the dentist choose the veneer composite as a treatment plan option, this should meet several criteria as: minimally invasive approach, good match of the colour, good finishing and polishing, functional and aesthetic biomimetic.

In all composite restorations is always preferred a smooth and highly glosses surface. The aesthetic considerations and the oral health are the reasons why a properly finished composite veneers restoration are desirable. A multitude of clinical problems such as gingival irritation, higher wear rates and recurrent or secondary caries, plaque accumulation and an overall long-term aesthetic failure are the result of a poorly finished resin veneer with their surface irregularities.

Contouring, finishing and polishing are the most important steps in successfully creating bonded and long term restorations. A clinical challenge has always been achieving a highly polished surface on the composite resin, and new methods have been coming on the scene, day by day, to accomplish this important step.



The initial situation of the patient. The chief complain was the improper aesthetic appearance at the 22.



The lateral tooth presents a class 4 restoration placed 3 years ago. The value of the lateral is slice lower than the lateral. The integration of the restoration was good, the contact point and adhesion was proper.



As a treatment plan decision, I chose to keep in place the old composite restoration and to do a composite veneer restoration without any preparation. In this case, I decided to use a single mass composite restoration, Brilliant Ever Glow A2 (Coltene Switzerland).



To had the correct finish of the composite veneer at the cervical level I placed a B4 clamp. This clamp help me a lot to move away the rubber that interfere with the cervical area.



After the sandblasting of the composite and the enamel, phosphoric acid was applied for 30 seconds, then washed out.



For this particular case I used One coat 7 Universal from Coltene.



I have noticed during time that the layering procedure can be a big disadvantage. At the level between the layers very often appear gaps and bubbles. To have a very nice and smooth surface, and to spend less time during finishing and polishing, I recommend you to use as less layers as possible.



For composite veneer reconstruction, I prefer only one layer of composite. To obtain a very anatomical outcome, you should put the proper amount of composite and use instruments that can help you to shape the veneer. I am very comfortable with the anterior brushes during this procedure.



This is the final outcome after the shape of the composite with the anterior composite brush.



After light curing of the composite, I have finished the surface. The first step of finishing is to define the transition lines. To see them better I marked them with a pencil.



A very nice tip is to use the Excessa (LM Arte Instruments) to remove in a very smooth way the round area at the transition lines level.



Also this instrument can be used at the proximal level and at the buccal area of the veneer.



Then for nicer smooth area an Arkansas stone can be used with low speed.



The time spent with this step is lower because of the nice shape of the composite during the composite modelling.



After finishing I have used DIATECH speed Guard rubber wheels. In this case I didn't use any paste or other polishing rotary instruments.



The polish result is amazing! In my opinion the nice appearance of the texture is due on the attention and care on the composite modelling. We should use as much as possible the flowable properties of the material and as less as possible on the shaping with the rotary instruments.



The final result after 65 minutes of time chair and no anaesthesia.



Maybe the handling is not the best in my opinion, but the natural value appearance and the easy polishing compensate this disadvantage.



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1. Focus more on flowable property of the composite material
 2. If the time spent during modelling is higher a little bit the finishing procedure is reduced considerably
 3. One "BAKE" strategy reduce a lot the time chair spent during the composite veneer reconstructions
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