

CLINICAL

Straight to a confident smile

Jazz Battu describes a non-invasive composite restoration

A female patient in her early 20s complained that her front teeth were not straight. She had heard about veneers and wanted advice about them.

On examination, it was found that her upper right central incisor (UR1) was rotated and fractured, but her other teeth were in good alignment.

Several options were discussed with the patient, including single and multiple veneers, which she was enquiring after. The possibility of simple orthodontics, with fixed and clear removable appliances, was also explained. The patient was reluctant to undergo long-term treatment such as orthodontics, and also wished to keep costs low.

An ethical solution

Even a single veneer would have needed irreversible reduction of the front rotated tooth. I was keen to avoid drilling healthy tooth structure, especially given the patient's young age. A non-invasive treatment, preserving the enamel, was deemed better for the long-term prognosis of the tooth.

I showed the patient previous cases I had treated using a composite layering technique. I also did a freehand mock up on her tooth, to show the result that may be expected. She was very pleased with this and consented to have her UR1 built up with composite.

The patient had whitened her teeth previously, but not for some time. She was given a one-week course of Enlighten whitening gel (16% carbamide peroxide), which was used overnight. Once she was happy with the shade, a treatment appointment was made for two weeks later.

The procedure

The restoration was carried out under rubber dam, using Heraeus Kulzer Venus Pearl and Ibond Total Etch. I find Venus Pearl a great composite material to use. The ease of handling makes it ideal, especially on cosmetic build-ups such as this. It does not stick to instruments or slump and is resistant to wear. The material always seems to blend in well with natural tooth structure, and polishes



Figure 1: The upper right central incisor (UR1) was rotated and fractured



Figure 2: Lateral view of rotated UR1



Figure 3: The distal face of the tooth was built up incrementally, using Venus Pearl B1 shade, to make the tooth appear straight



Figure 4: The patient was extremely pleased with the result and the non-invasive restoration provided

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relatively easily, to a nice finish. Furthermore, I get great support from my local rep, Reema Vadera, who is always on hand for advice on the various products available from the company.

After placement of the rubber dam, the tooth was cleaned using a pumice preparation. Teflon tape was placed on the adjacent teeth to protect them from the etching and bonding agents. The distal face of the tooth was built up incrementally, using Venus Pearl B1 shade, to make it appear straight. The chipped mesial incisal edge was also restored.

During the build up and shaping process, time was taken

to achieve as close to the desired finish as possible. This limited the amount of reduction needed with handpieces, once the material had set. The restoration was completed with a diamond finishing kit and discs, and then buffed using Heraeus' Venus Supra composite polishing kit and a diamond paste.

I was very satisfied with the clinical outcome. The patient was extremely pleased with the result and the non-invasive restoration provided. She has since referred two friends to the practice for similar treatments. Another positive factor for the patient was the relatively low cost, compared to a porcelain veneer. **D**



Jazz Battu BDS(Lond) MJDF RCS(Eng) is the principal dentist at Croft Dental Practice, a private practice in Epping, Essex. He has a keen interest in cosmetic dentistry, restoring teeth and improving the smile. Jazz has completed a year-long advanced cosmetic course with one of the UK's leading cosmetic dentists. He continues to regularly attend courses to help further enhance his skills.