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Q1:- Differentiate:

- ①. Three quarter crown.
- ②. Metal ceramic crown.
- ③. Seven eighth crown.

① Three Quarter Crown:

* The three quarter crown on a posterior teeth probably one of the most demanding of all tooth preparations. As with such preparations on other teeth, on a posterior molar it involves the proximal and lingual surfaces and ~~lingual~~ leaves the facial surface intact.

* They are always made of cast metal.

* They cover four of the tooth surfaces buccal surface remains intact.

(2)

* They are retained by grooves on mesial, distal and occlusal surfaces.

(B) Metal Ceramic Crowns :-

* Dental porcelain can be bonded to a variety of metal alloys such as Gold, Silver, nickel.

* Periodontal problems are more as compare to seven eighth crown.

(C) Seven Eighth Crown :-

* The seven-eights crown preparation includes, in addition to the surfaces covered by the three-quarter crown, the distal half of the buccal surface. Therefore the mesial aspect of this preparation resembles that for a three-quarter crown; the distal aspect resembles that for a complete crown.

Q2 :- In which condition inlays and onlays are indicated and contraindicated ?

Ans :- First of all definition of inlay and onlay.

ONLAY :-

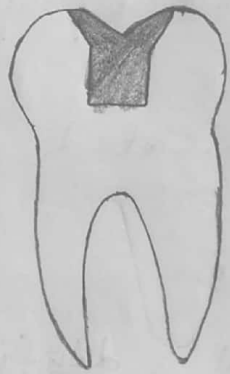
* Onlay is a type of heavy restoration which replaces the missing cusp of the wear teeth which is used primarily for chewing function.

* Onlay is indirect restoration.

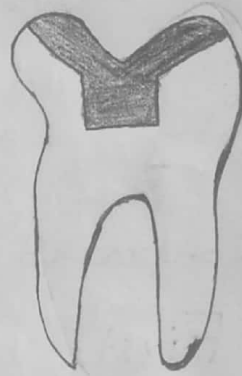
INLAY :

* Inlay just fills the gap in between the cusps of the tooth.

* Restoration which are constructed out of the mouth from material (Gold, porcelain, metal) and cemented into the prepared cavity.



INLAY



ONLAY

Indications

- * Decay in the tooth.
- * Large Restoration.
- * Endodontic ally treated teeth : used in Root canal treated tooth.
- * Wide open contacts and occlusal plane correction.
- * Teeth at risk for fracture.
- * Dental Rehabilitation with cast metal alloys.

P-T-O

- * Diastema
- * Removable prosthodontic abutment -
- * Adjunct to periodontal therapy to correct tooth anomalies
- Predisposing to plaque accumulation.
- * Sub gingival lesions.

Contraindication :

- * High Caries rate : Facial and lingual tooth surface must be free of caries or previous restoration. If present, the tooth must be restored with a full crown.
- * Young patients : Contraindicated in ~~and~~ old aged people.
- * Esthetics
- * Small restorations : If the tooth have small cavity so they require direct restoration.
- * Large pulp chambers and incompletely mineralized dentin.

P-T-O

⑥

* Parafunctional Habits like Bruxism,
Clenching etc -

* Developing and deciduous teeth:
Growth / Resorption affected
by traumatic nature of the
procedure.

Q3 : Define veneer, Explain direct
and indirect veneer technique?

Ans :-

Veneer : (Also called Dental laminates).

* A crown in which the
restoration are placed over the
prepared surface of a natural tooth.

OR

* A veneer is a layer of tooth-
colored material that is applied to a
tooth to restored localized or
generalized defect and intrinsic discoloration.

P-T-O

Direct Veneer Technique :

* These defect can be restore in one appointments with light-cured composite.

Steps :-

① Cleaning :-

* Clean the teeth with water or tripple syring.

② Select shade :

* Select shade with tooth colour before isolation because in the present of saliva the teeth have different colour as compare to the absent of saliva. ~~So~~ and saliva are present everytime in oral cavity so thats why select shade before isolation.

③ Isolation :-

* Isolation is actually the removal of saliva.

- ④ Removal of the defect and tooth preparation depth is 0.5 to .75mm.
- ⑤ Etching :
 * Apply the etchant for 30 second it is actually the disinfectants which can kill the bacteria and microorganisms.
- ⑥ Restoration of cavity with Composite resin (Microfilled).
 * Material are applied to the tooth and properly Condense a the material after condensation apply lightcure for 30 seconds.

Indirect veneer Techniques :-

- * Completed in Two appointments.
- ① First Appointment :
 * First for the veneer preparation procedure.
- ② Shade Selection :
 * Select shade with your patient participating.

⑧ Tooth preparation :

- * A uniform reduction of the tooth surfaces - Labial surface 1 mm, Interproximal surface reduction 0.5 mm and incisal edge reduction is 0.7 mm.

⑨ Impression :

- * Use a polysiloxane or polyether material for the impression -

⑩ Temporary veneers :

- * They are placed when necessary or desired.

⑪ Second Appointment :

- * This appointment for veneer cementation procedure.

⑫ Remove Temporary veneers :-

- * Remove Temporary veneers care must be taken not to damage margin areas of preparations.

P-T-O

(B) Clinical Try in :-

* The permanent veneer try to the teeth without cementation.

* Contacts need to be carefully assessed. proximal surface to be adjusted.

(C) Cementation :-

* Finally cement the veneers with the luting materials.

Q4 :- Suppose you have a crown that can be virtually indistinguishable from unrestored teeth and is most esthetically pleasing, identify the type of crown and write its advantages and disadvantages and indications?

Ans :-

* The type of crown is all ceramic crown.

Definition: Most esthetically pleasing.

* Just as their name implies, all-ceramic dental crowns are

restorations whose full thickness is

made entirely of a glass like

substance, such as porcelain.

* No metal to block light transmission.

* Can be virtually indistinguishable from unrestored teeth.

* The original type of all ceramics was the "porcelain jacket".

P-T-0

Advantages of All-ceramic crown :

- * Beautiful : Made of Translucent porcelain, they reflect light and look almost exactly like your natural teeth.
- * Strong : with an aluminum oxide ceramic core, covered in pure porcelain, they are resistant to breakage.
- * Comfortable :- Because they fit better than metal crowns, and are not temperature sensitive.
- * Superior esthetics.
- * Perfect
- * Biocompatible : Because they are made of soft-tissue friendly material which helps your gum grow back around your teeth.

Disadvantages of All-ceramic crown :

- * Require more tooth reduction.
- * Less durable
- * No Repair is possible
- * Expensive.
- * Proper preparation extremely critical.

Indication of All-ceramic crown :

- * Specially indicated in anterior teeth.
- * For severely discolored anterior teeth.
- * When patient have high esthetic demands.
- * They can also be used to rebuild posterior teeth.

Q5:- Briefly explain Composite
and porcelain veneer?

Ans:-

Composite veneer :-

* Composite veneer can be build up in the mouth by directly placing it.

* It doesn't take very long for a dentist to prepare your teeth for application of the veneers, and the application process is considered minimally invasive.

* Lower cost and shorter application process.

* Material is weaker than porcelain and may chip often.

* Can be fabricated in dental laboratory.

Composite veneer Technique :-

Also explain in question number 3.

Advantages of Composite veneer :

- * One visit procedure.
- * Less expensive.
- * Repair potential.
- * Chair - side control of the anatomy.

Disadvantages of Composite veneer :

- * Tend to discolour.
- * Wear out quickly.
- * Marginal staining.
- * Shade matching difficulty.
- * Often require repair and replacement.

P - T - O

Porcelain Veneer :-

- * Cannot be built in mouth.
- * Hence fabricated outside and fitted later.
- * Completed in two appointments.
- * A dentist will make impressions of your teeth, so the veneers can be made from the mold in the dental lab, a process that might take a week or longer. You'll receive a set of temporary veneers while you wait, just like with the indirect composite veneers.
- * When ready, the dentist will cement the thin porcelain shells the front of your teeth and shape them to look as natural as possible.
- * Custom made.
- * Longer lasting b/c of stronger material.

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- * Most expensive type of veneer.
- * Application process requires more than one visit.

Advantages of porcelain veneer:

- * Esthetic stability.
- * Stain resistant.
- * Stronger and durable.
- * Gum tissue tolerates porcelain well.

Disadvantages of porcelain veneer :-

- * The process is irreversible.
- * More costly than composite veneers.
- * Not suitable for patients with clenching or grinding habits.
- * Technique sensitive.