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CASE REPORT

DIRECT COMPOSITE RESIN VENEER – CLINICAL CASE REPORT

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ABSTRACT

Never spoke both in aesthetics as today, the standard requirement of people, seeking solutions they can rescue the beautiful on condition of naturalness has increased significantly in recent years. Thus, the solution for aesthetic problems in dentistry is a big challenge, for situations that were previously unnoticed, today are prerequisites for acceptance of restorative treatment. Thus, this paper aims to submit the report the aesthetic correction in a disharmonious smile and unsatisfactory composite restorations in anterior teeth who were treated with direct aesthetic restorative procedure. The results show the use of this technique to allows an immediate aesthetic quality, directly and inexpensively restoring the natural features of the smile.

Key words:

Veneer, Composite Resin,
Aesthetic.

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INTRODUCTION

Since 1955 with the discovery of etching proposed by Buonocore *et al.* (Year) [1], to this day there was a breakthrough in adhesive dentistry that brought the opportunity to the members of the profession can perform restorative treatments more conservative and aesthetic. It is indeed the concern with the appearance and the need that people have a harmonious smile. An aesthetic and healthy standard is closely related because there is no beauty without health, ie, satisfy anyone, regardless of sex, age or social class [2]. And reaffirmed in working Reston (2002) [3] said that the origin of demand for aesthetic, has three main factors: globalization standards of beauty the evolution of materials and techniques, and speed in the disclosure and dissemination of scientific knowledge. Over the past 44 years, since the introduction of composite resin. Researchers at the dental industry have made many improvements in composites [4].

The evolution of adhesives and light-cured composite resins has provided the realization of adhesive restorative procedures less invasive and with excellent cosmetic results [6]. Among

these bonding procedures, is making direct facets in composite resin, which consists of applying and sculpting, texturing and characterization of one or more layers of this material on the labial surface of the dental element.

The making of these restorations has become popular thanks to two factors: the possibility of preserving healthy tooth structure; and excellent aesthetic results they enable [7, 8]. However, the professional is often faced with clinical situations in which changes color beyond, but also the morphology and caries lesions and for these cases should restore both function and aesthetics. The solutions to such situations ranging from the manufacture of unitary prosthesis or more conservative procedures such as veneers Direct Abreu *et al.* (2012) [9], currently widely used due to the good results obtained and its lower cost, Busato *et al.* (2002) [10]. However, in some cases the need for reinforcement to the remaining dental element can be used to add aesthetic technique for placing pins intra - root, giving greater resistance to dental element [11, 12, 13]. Thus, the aim of this study was to report a case whose option fell by making veneers Composite Resin in Direct on upper front

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teeth, and also the placement of Fiberglass pins in incisors Side destroyed and endodontically treated.

Case Report

Patient, 35, female, presented to the Clinical Update Course in Dentistry of UNORP - University Center North Paulista, it was the presence of great coronary destruction in the superior incisors and that items 12 and 22 had endodontic treatment satisfactory (figure 1). In the interview, the patient reported to be ashamed of your smile (figure 2) and does not have the financial means to carry out an indirect restorative treatment.

It was then suggested to patient making Direct Restorations with Resin Consisting of Classes IV and placement of Fiberglass pins in incisors Side to increase retention and strengthen the tooth structure and after the realization of class IV with composite resin with long bevel mask the tooth restoration interface.

preparation completed, the tooth was washed with water and air spray and dried with air jets, then held the phosphoric acid etching gel at 37 %, applied with a syringe on the enamel for 30 seconds. Thereafter, the tooth was washed with water and air spray and dried gently, thereby applying the primer and bond (AdheSE) condition of the self Ivoclar Vivadent and polymerized for 20 seconds [Giannini et al. 2015 \[6\]](#).

To simulate the visual characteristics of the tooth structure, a first layer of composite A2 color enamel and then was applied to the polymerization of this layer a more opaque layer was applied in order to mask the class IV restoration simulating the dentin and after the dentin layers turned to apply another layer of enamel for characterization, represent the dental polychrome and present characteristic smoothness and gloss enamel. The resins were applied in layers of oblique manner by incremental technique for the purpose of minimizing marginal leakage,



Figure 1 Committed Aesthetics



Figure 2 View nearest



Figure 3 Isolation Absolute



Figure 4 Teeth 0:22 with class IV restorations



Figure 5 Control after 6 months.

As a first step took place corono-root prophylaxis to improve the periodontal health, because according Schluger (1981) [20] the dentist must remember who is trying to restore the health of the oral patient structures as a functional unit and, therefore, the oral cavity should not be left with niches that adversely affect the structures as a whole. Broke then to the removal procedure 2/3 the length of the root canal of the lateral incisors 24:22 and cementing glass fiber pin with cement Resinous Dual Ceram All of FGM following the manufacturer's guidelines (figure 3), and took place Class IV restorations with the composite resin Direct Empres of Ivoclar Vivadent to improve the cervical contour and the free gingival margin conditions (figure 5); and second [Baratieri et al. \(2000\) \[8\]](#), the dental restorations as well planned and executed promote a functional stimulation and maintenance of healthy periodontium, which allows a restoration in a suitable medium. After fifteen days with an improved gingival contour was performed absoluto insulation, which is associated with the relative insulation (figure 4) plus the modified absolute and teeth to be faceted was placed wire spacer to contain the flow of gingival groove, being held so the preparation where margins mesial and distal positioned below the proximal contact areas. With the

each layer was polymerized following the time indicated by the manufacturer 20 seconds, to complete the restoration. The initial finish was performed with excess remover tool of Duflex medium and granulation discs, after removing the insulation Absolute. For proper surface smoothness employed in the disks of fine and ultrafine grain-Sof-Lex (3M) in the next session, after the resin having passed through the hygroscopic expansion process, which was 30 days after the end of the restoration.

RESULTS AND DISCUSSION

The result was surprising because besides having returned the function, harmony and a more natural aesthetic, the patient regained his self-esteem. After a month we conducted a polishing for better refinement and control of restoration, the patient proved to be very pleased and turned to smile more, the gum had healthy. The restoration was in perfect condition reaffirming patient satisfaction and encouragement to return to take care of your oral health. The technique of direct facet with composite resin was the solution suggested to the patient as an alternative indirect restorations. Several authors demonstrate

the effectiveness of these direct facets and this technique is being perfected increasingly [8, 14]. The advantage of this Absolute isolation technique is that there occurs dehydration of dental elements, thus being able to evaluate the color that is being used and achieve a better contour to the gingival level, with the same existing control fluid conditions in the oral cavity, which It is achieved by absolute isolation. This is a procedure that must be done with great care and well-defined situations. [15]. With the selection of color, we used a body resin to simulate the effects of dentin, and associated with this if we used the hue enamel and was varied in various color saturation (chroma) to be able to play more naturally to dental element, it is known that resins are monochrome while the teeth are polychromatic [14]. The use of an enamel resin in the first and last layer is due to the fact that this has a higher surface smoothness after finishing and polishing, which gives the largest aesthetic restoration, hindering the buildup of plaque in the cervical region, this smoothness avoids injuries to the periodontium. This is true in nano hybrid resins that have a similar polishing the microparticulated [16, 17].

Removal of excess possible after completion of the restoration with the excess remover and granulation discs produces average surface roughness similar to that of tooth enamel. Polishing done with Sof-Lex discs of fine granules and ultrafine, which provide a suitable surface smoothness returning naturally, difficult that way, the build up of plaque and reducing the surface dye depositions in aesthetic materials [18, 19]. After 6 months, (image 6) was performed control of restorations could be seen that the periodontal health was maintained, demonstrating the procedures described in restorative technique were able to restore the appearance and function to the dental element, in the observed time period, demonstrating that Facet Resin Composite Direct can be displayed as an excellent treatment option in cases of changes in color, shape, and morphology [4,8,19,20].

CONCLUSION

In conclusion, the Adhesive Dentistry has allowed professionals, restore the harmony of dental patients with aesthetic problems. Patients before others the techniques and materials used in the process, now began to demand, from an acquired knowledge through the media, the use of materials and techniques highlighted in the media. A clear and harmonious smile became new ideal of beauty advocated by people and the recovery smile is challenging, but rewarding for both parties. The advantage of this technique is closely associated with satisfactory results, combined with the dexterity, skill and mastery of technique employed by the professional.

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