

# Direct anterior restorations

- Class III.
- Class IV.
- Class V.
- Correction of orthodontic anomalies

# Reading of the colour: natural light

- Cervical area: dentin shade  
(enamel is thin, dentin core can be easily seen)

By some authors – choice of dentin shade on canines (big dentine core)



# Enamel shade

- Around the defect, contralateral tooth, age



Mammelons and opalescents

Characterizations





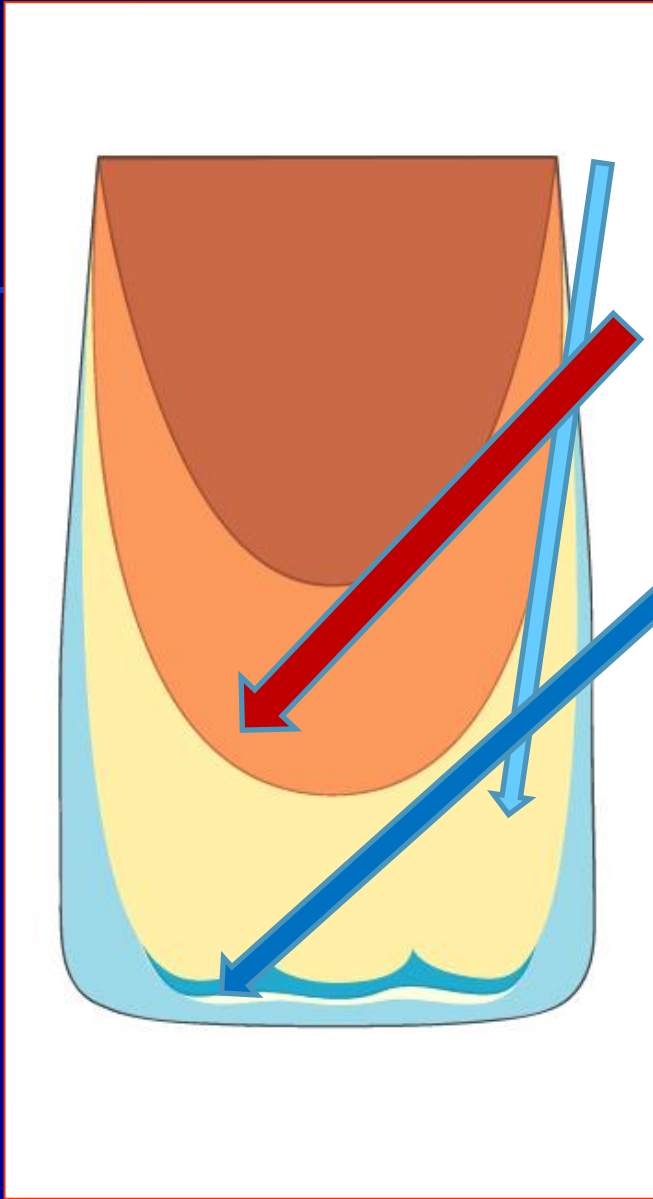
**CHROMATICITY**

**INTENSIVES**

**OPALESCENTS**

**VALUE**

**CHARACTERIZATIONS**



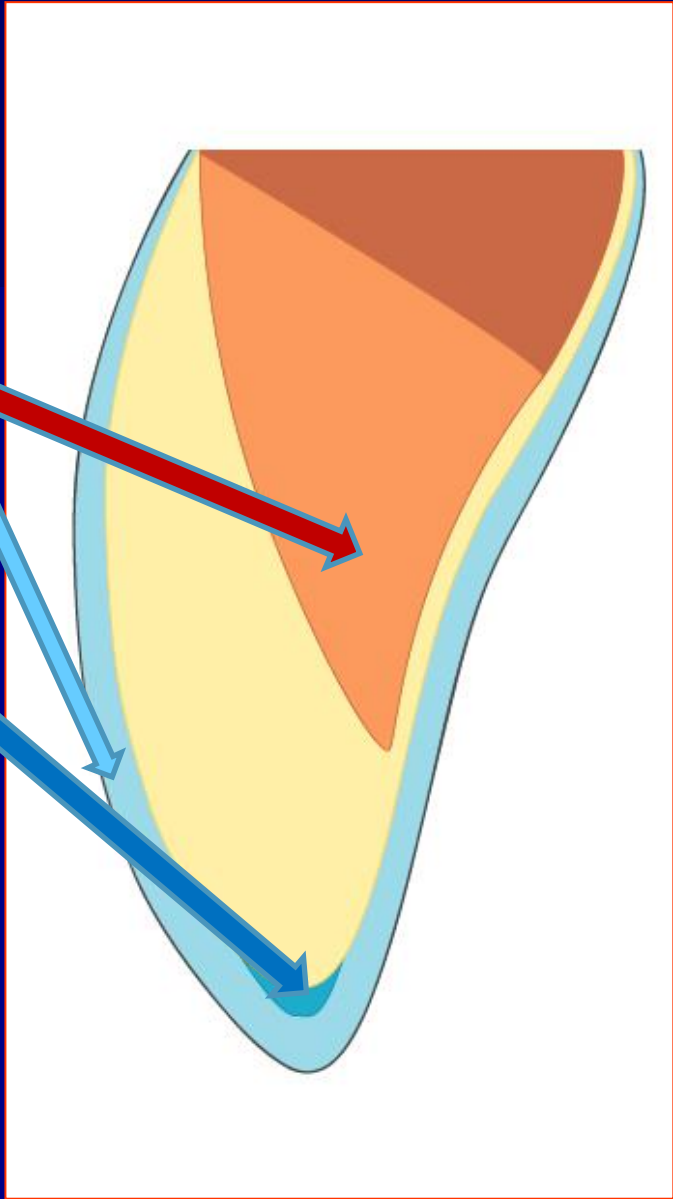
Enamel

Dentin

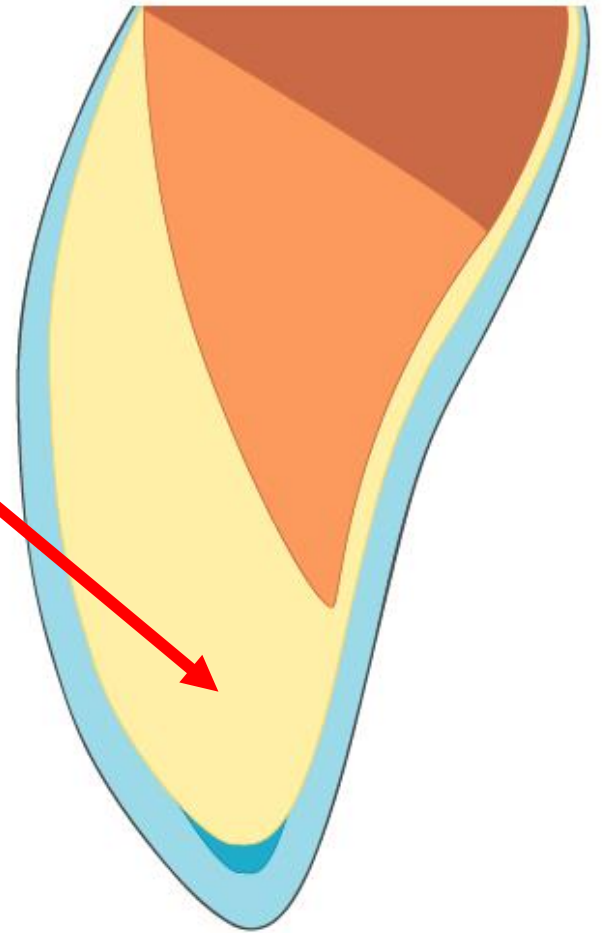
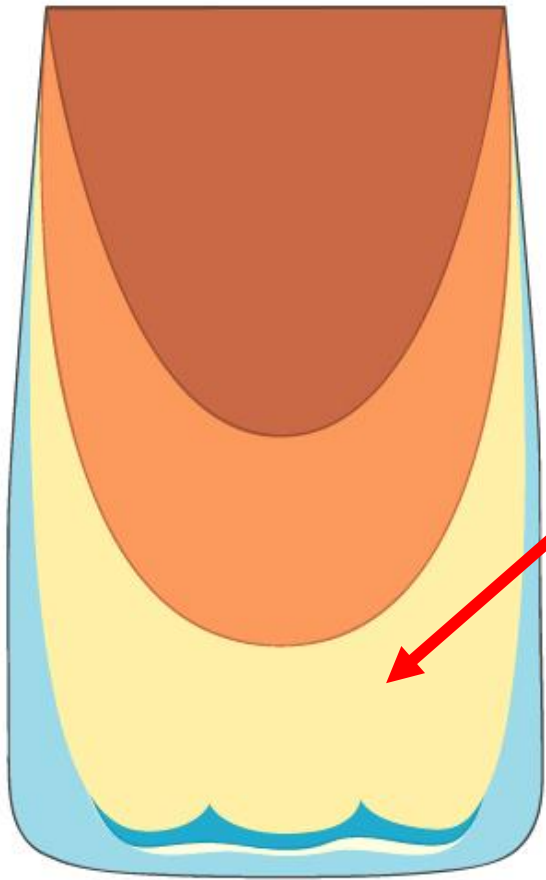
Mamelons

Opalescents

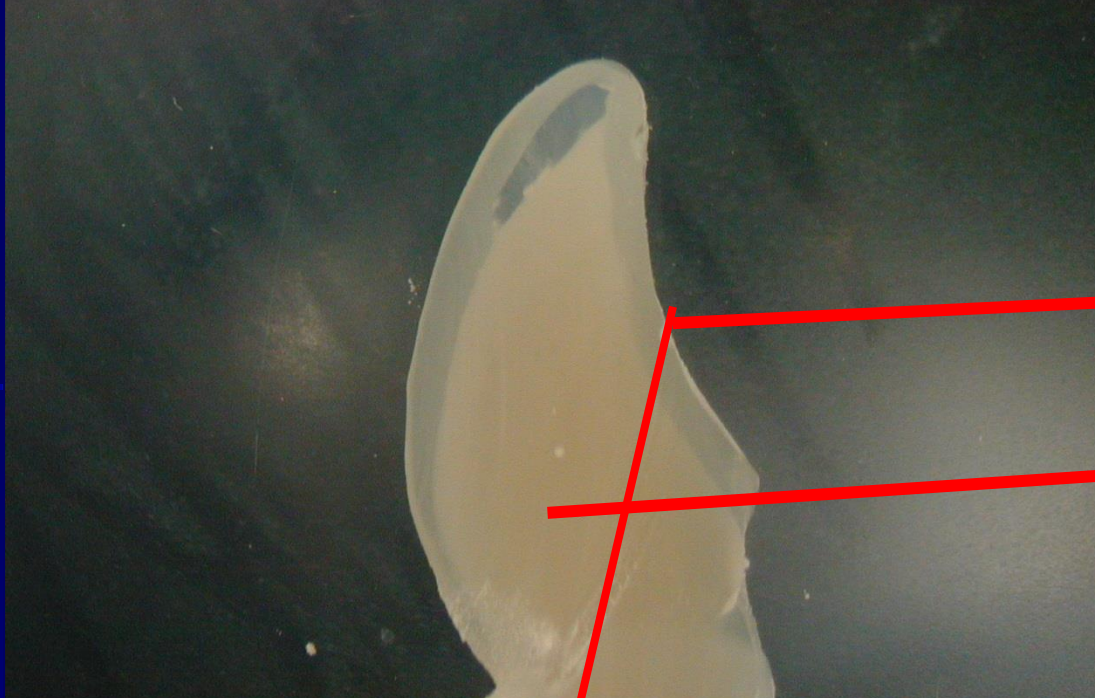
Characterizations



Desaturation







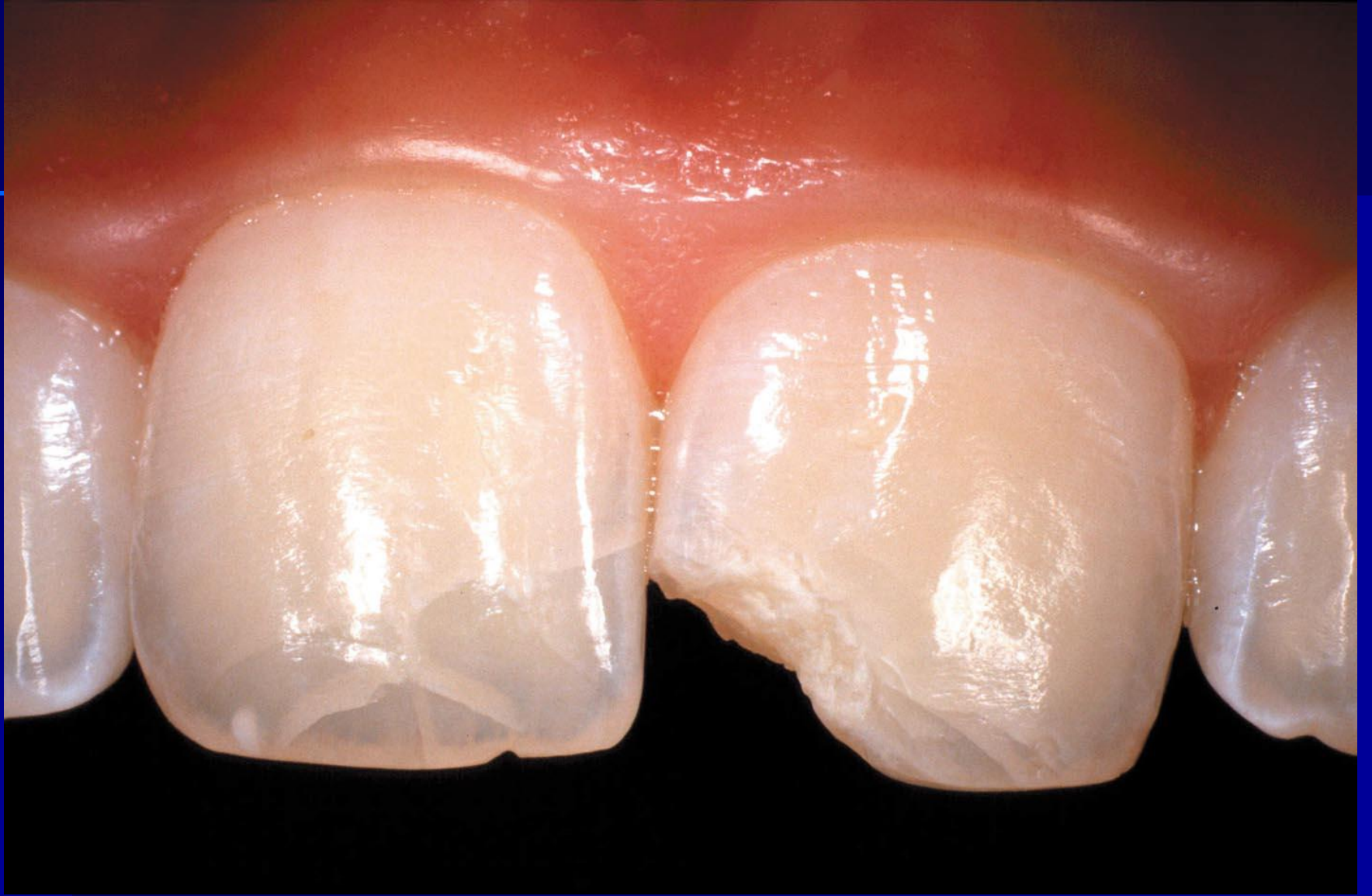
Enamel shade

Dentin shade

Desaturation  
(loosing of the hue -  
saturation)

Opalescence







# Preparation

- Diamonds – standard, fine, finishing with a soft rubber
- Removal of aprismatic enamel – mostly yes, in rare cases is not necessary (e.g. diastema closure)





# Adhesive procedures

- Acid etching preferable
  - Large field of enamel! Good connection.

# Layering of composites

- Incremental technique no bulk fill composites!
- Flowables for good adaptation in some cases.
- Work with dentin, enamel and special cases
- Last layer covered with glycerine gel



# Finishing and polishing

- Various concepts

- Finishing:

Extrafine diamonds (yellow)

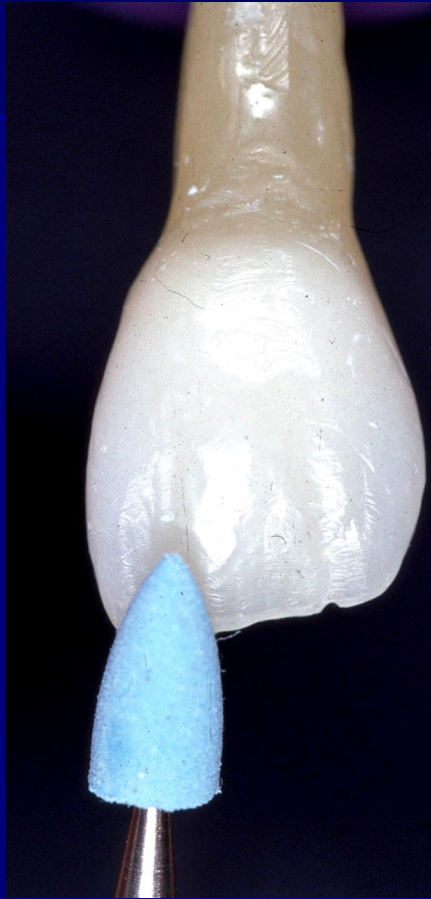
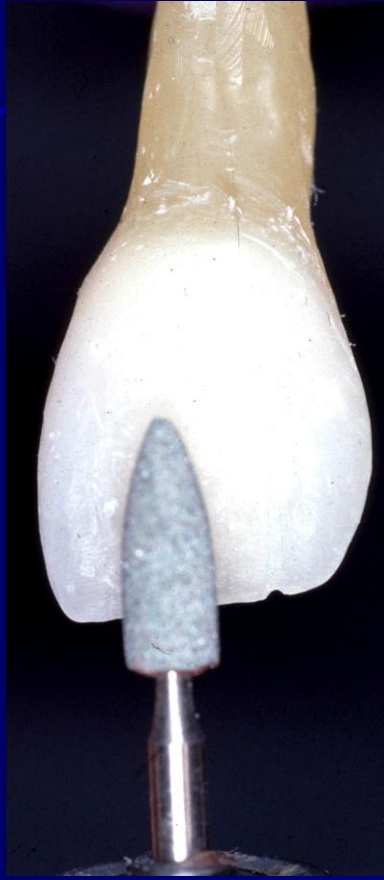
Rubber rotary instruments (prepolishing)

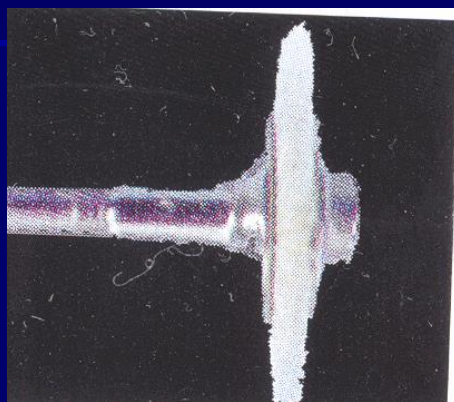
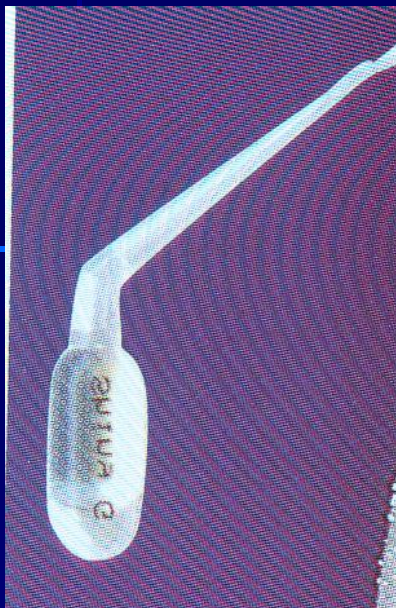
Flexible discs (for „opening“ proximal surfaces – overcome between proximal and vestibular surface, optical width.

# Finishing and polishing

- Polishing with special brushes made of natural material in combination with diamond pastes – 3-5 $\mu\text{m}$  first, 1 $\mu\text{m}$  after.
- Polishing with special rotary instrument made of felt





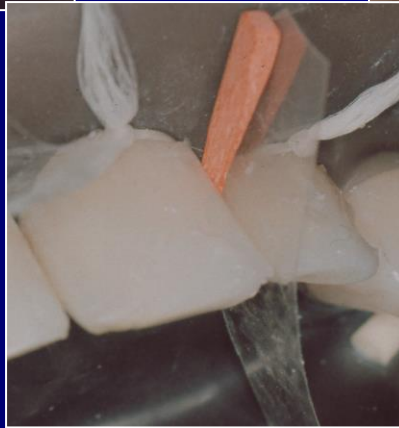


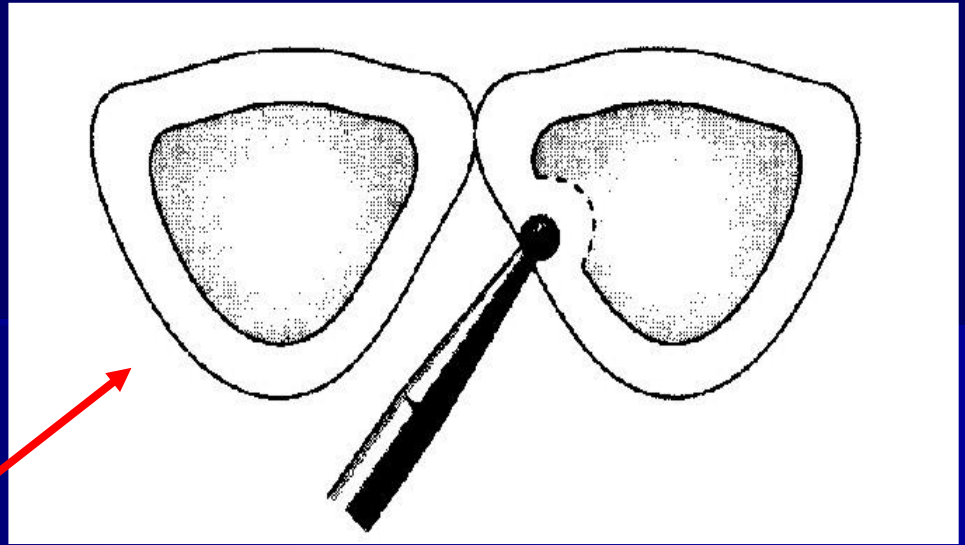




**Third class**





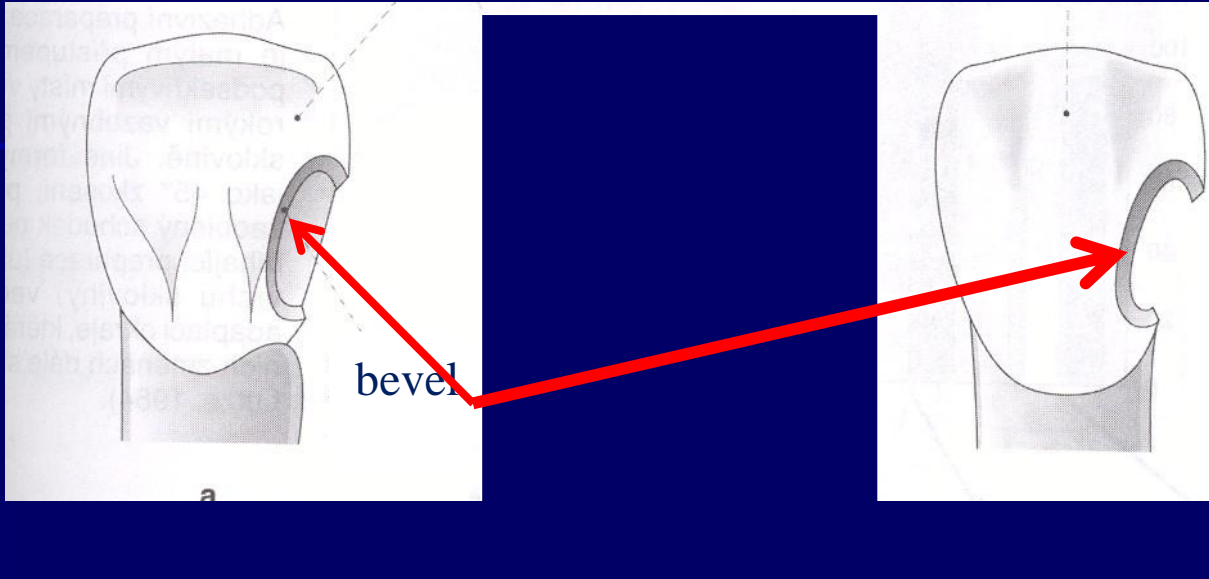


Access:

From the oral side

From the vestibular side



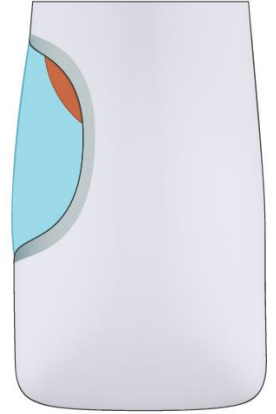
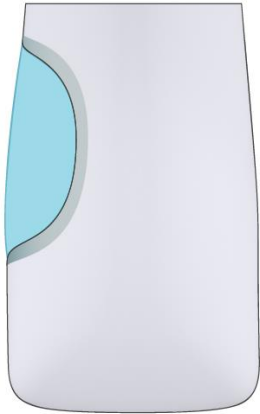


Exposure of prismatic structure

Good marginal adaptation



# Layering of composite materials



# Cleaning of tooth



# Preparation of cavity



# Acid etching



# Matrix – transparent strip, wooden wedge, bonding





# Layering



# Layering, polymerization



# Removal of matrix



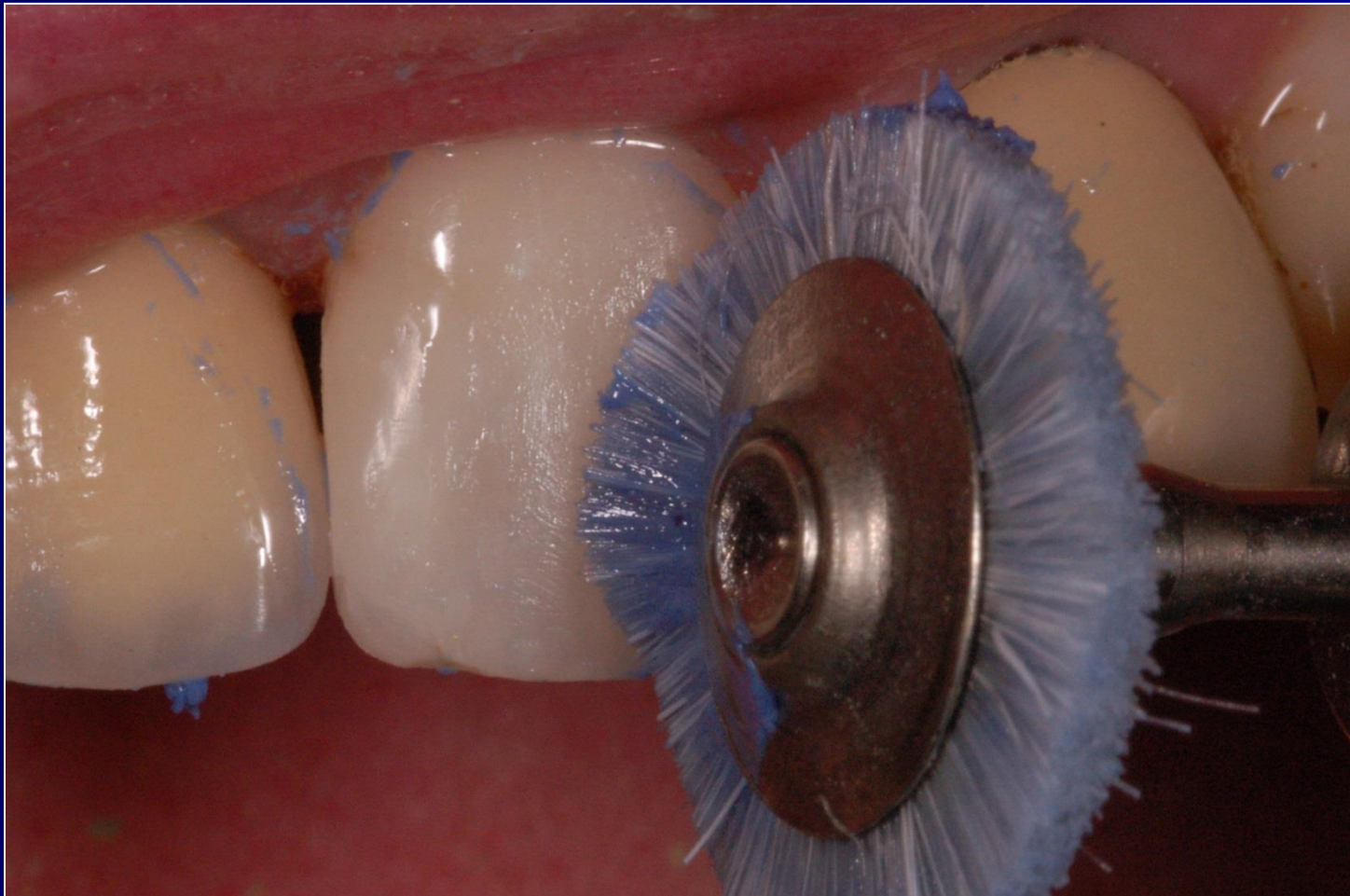
# Finishing



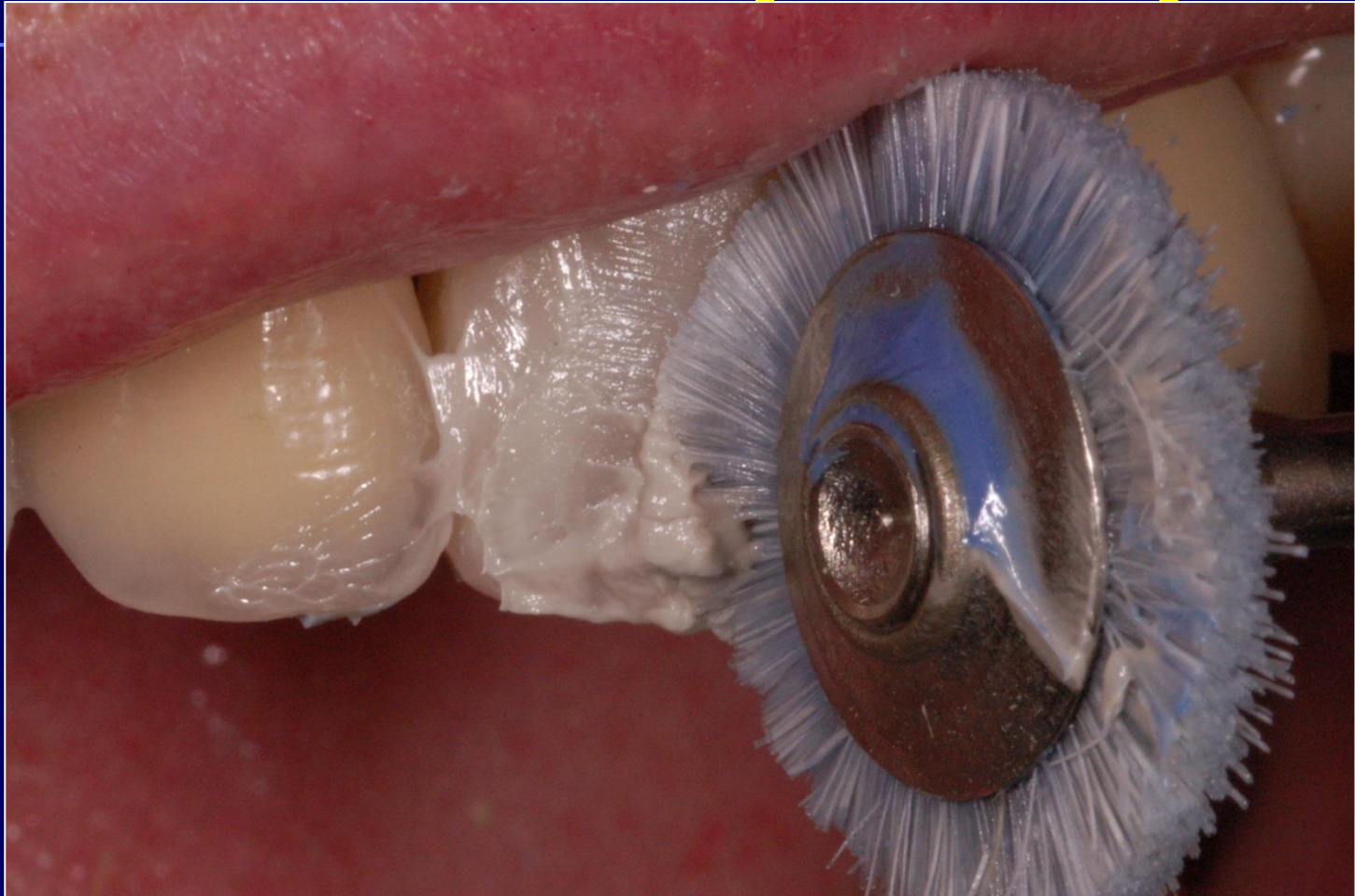
# Prepolishing



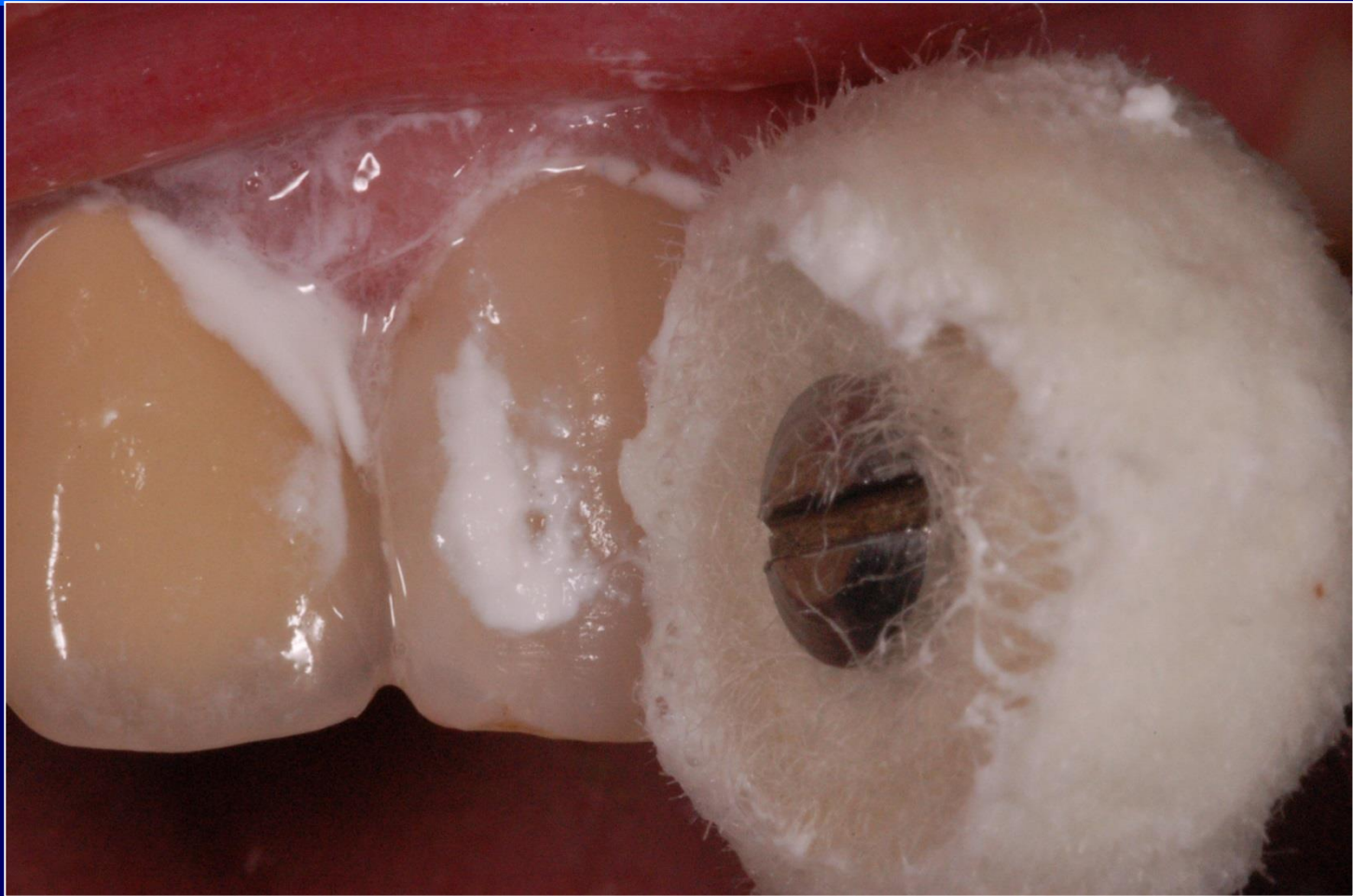
# Polishing with the brush and diamond paste 3 $\mu$ m



# Polishing with the brush and diamond paste 1 $\mu$ m



# Polishing with a rotary instrument (felt)





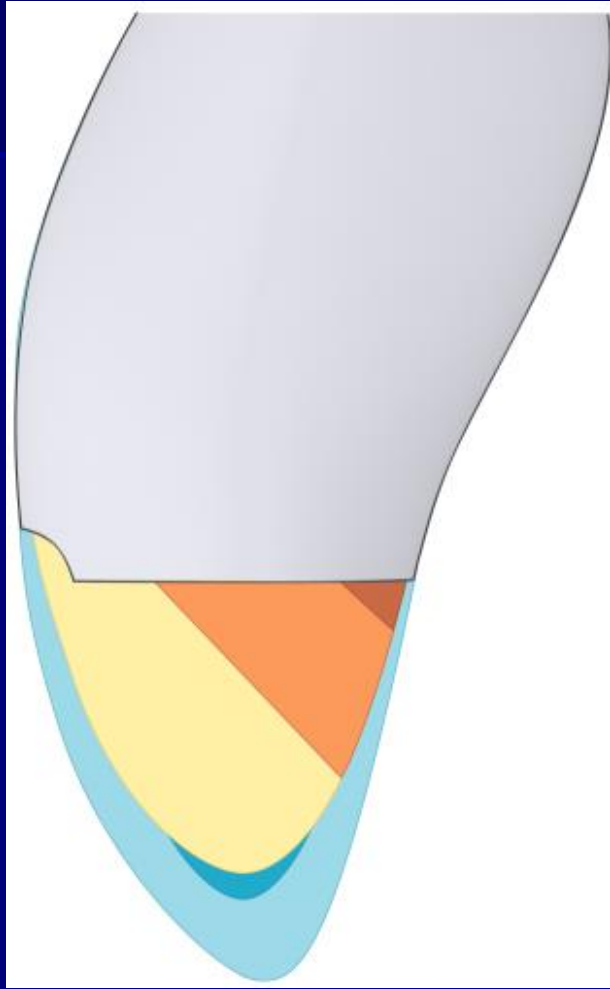
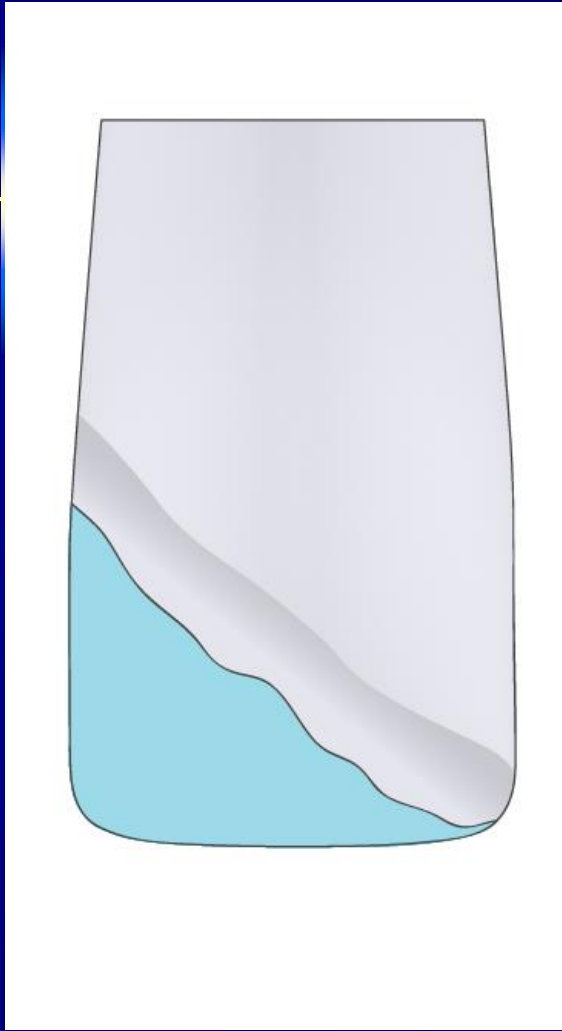
# Final result

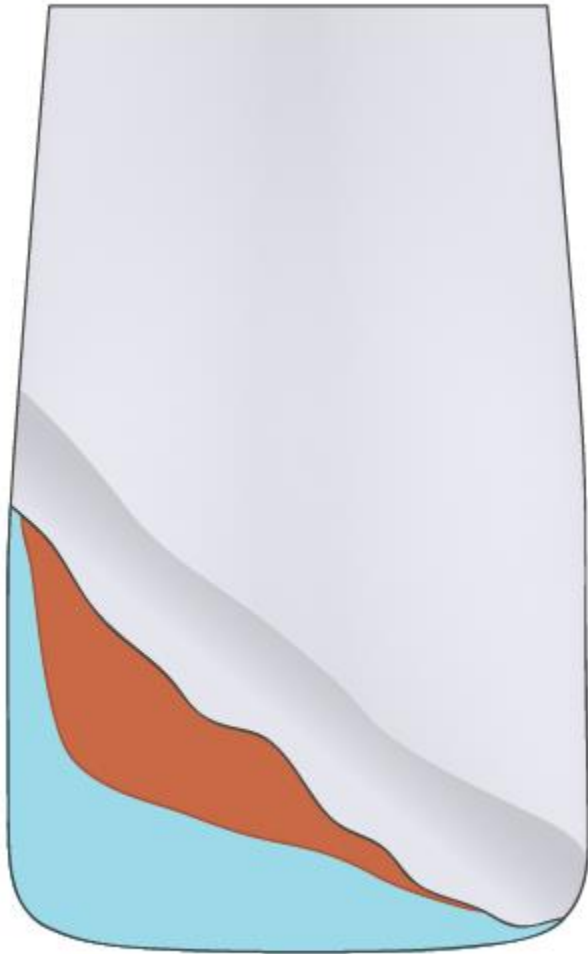


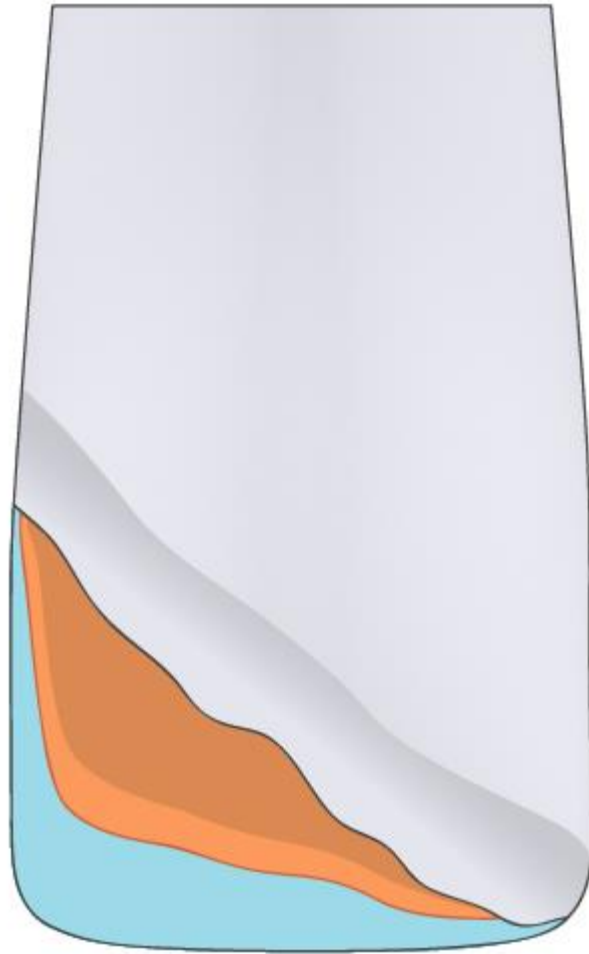
# Fourth class

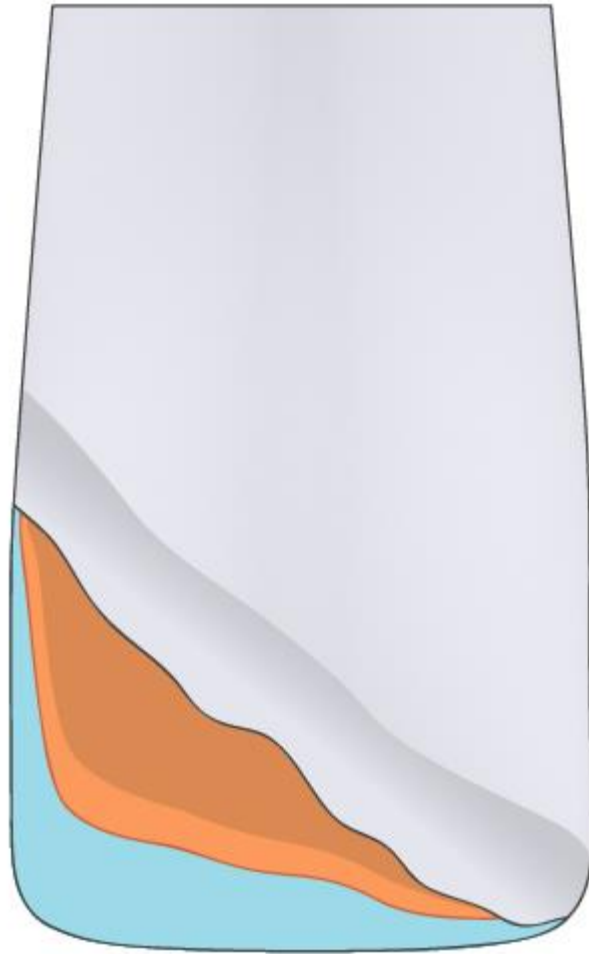
- Caries

- Trauma









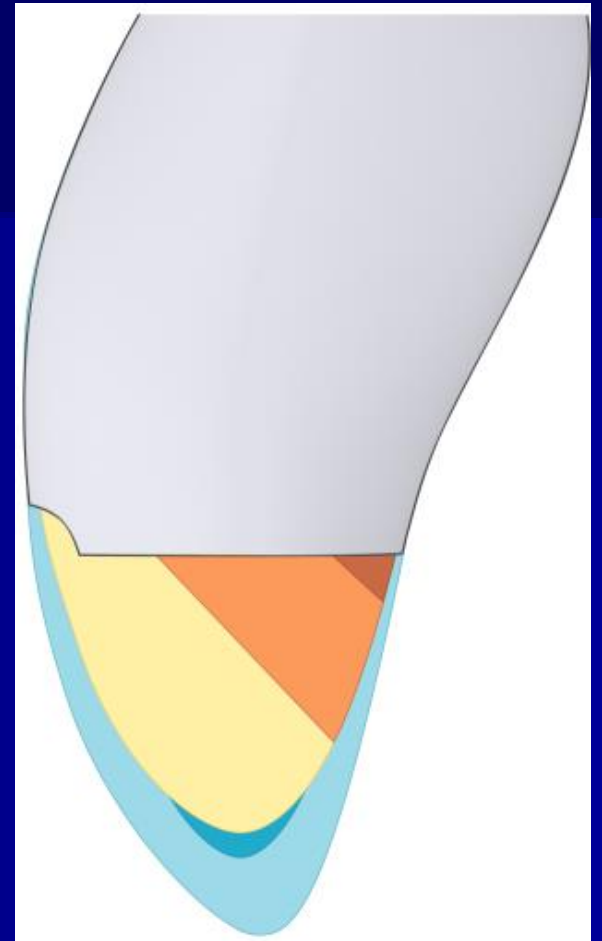
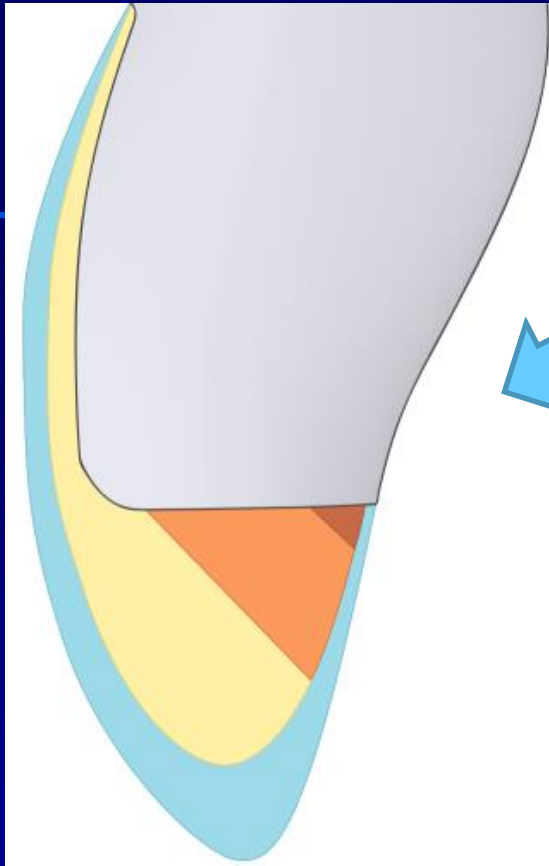








Preparation of the margin



# Making the shape

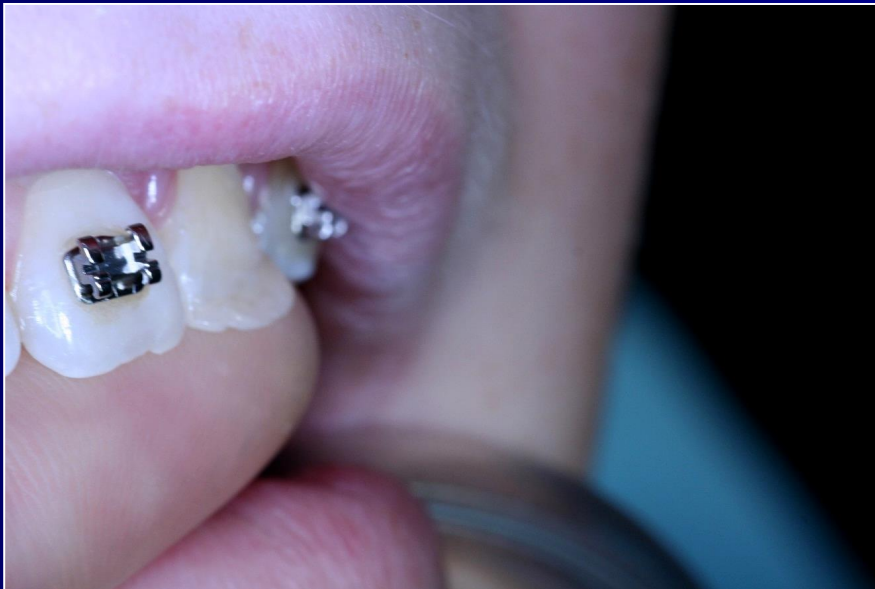


# Making the shape

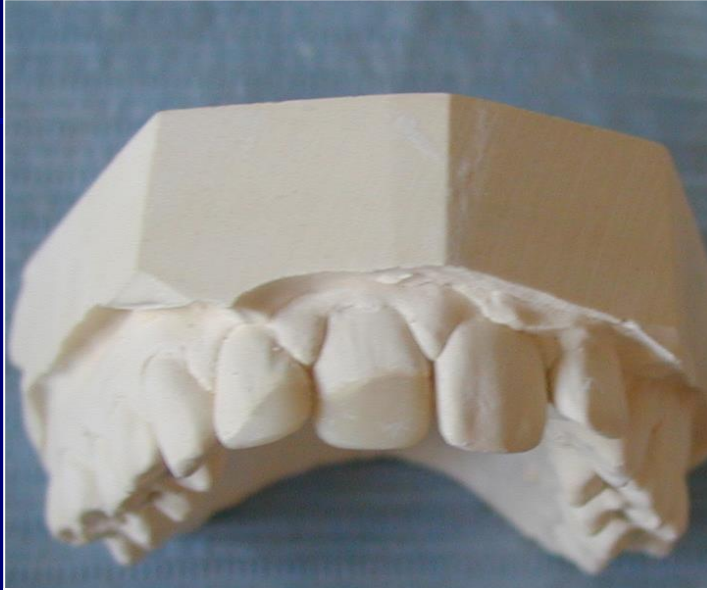
- Position of the palatal wall
- Placement of the transparent strip
- Layering of the composite material

# Making the shape

- Position of the palatal wall



# Silicone key



**Wax up**

# Silicone key



**Mock up**



# Silicone key



Creation the oral layer - palatally

Location of incisal edge



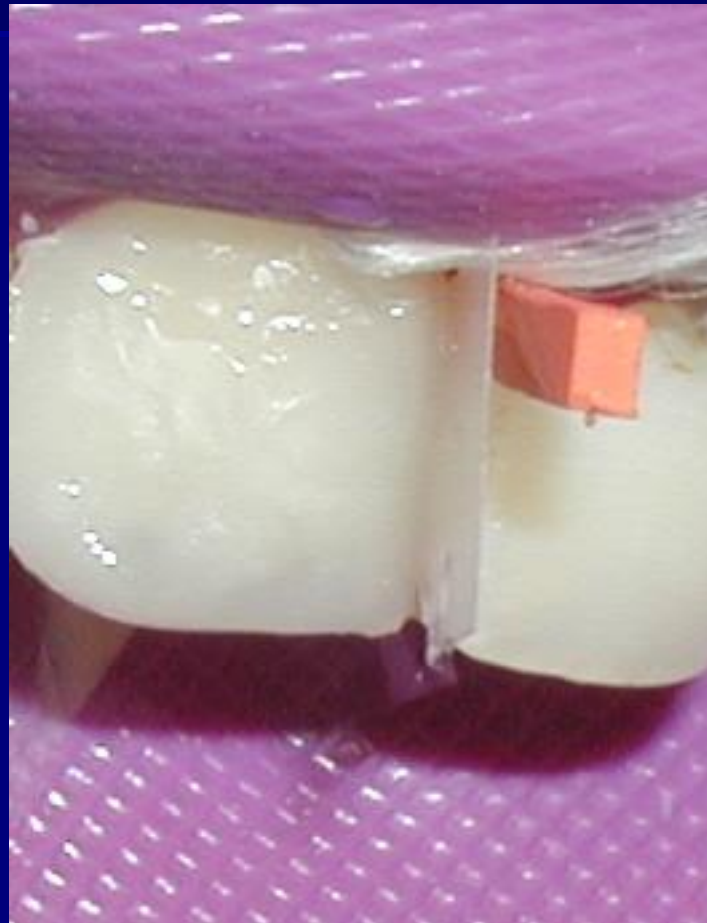


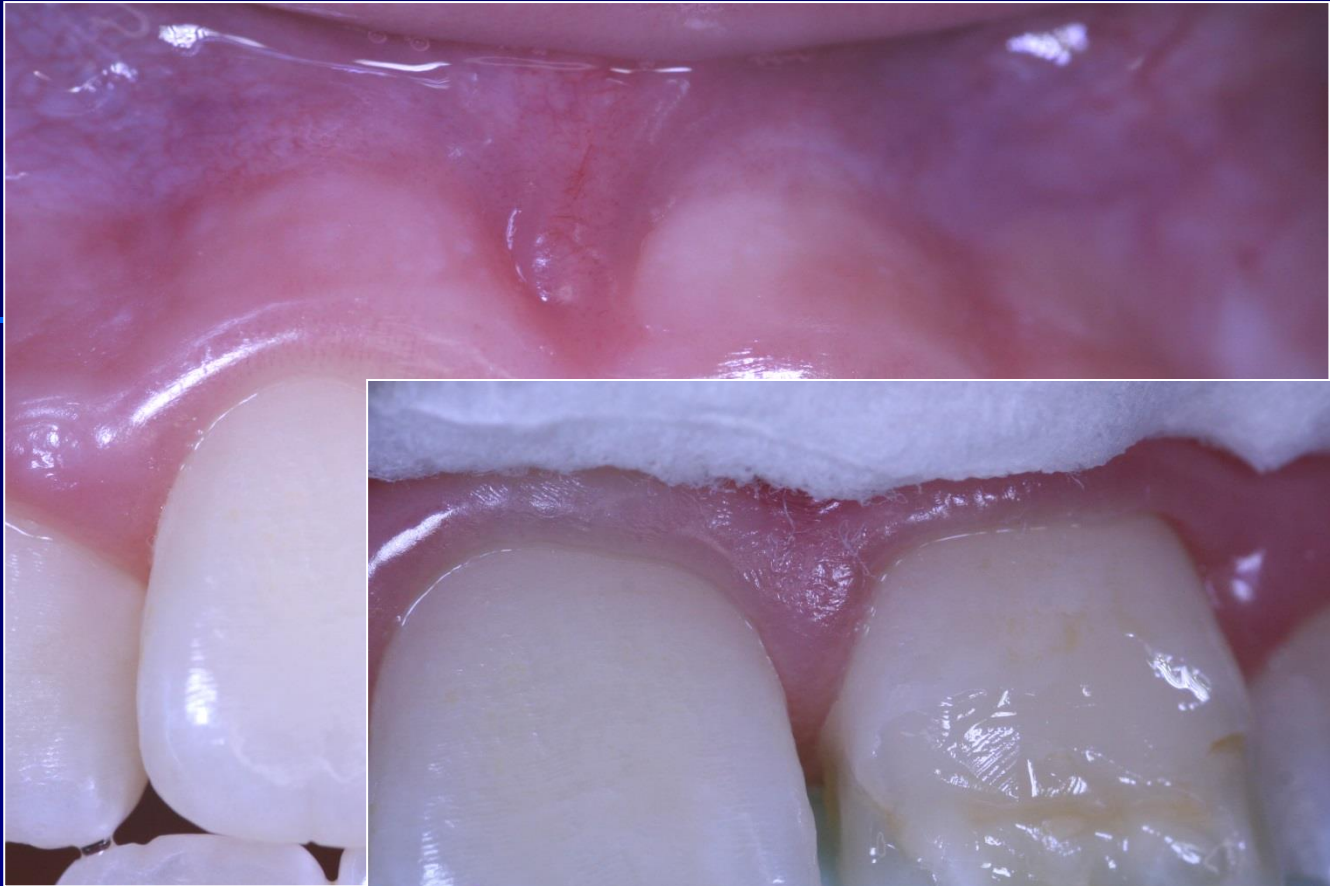


















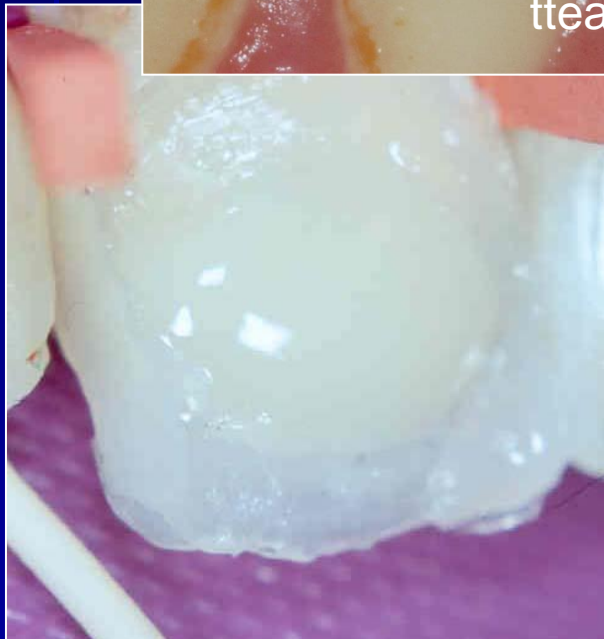




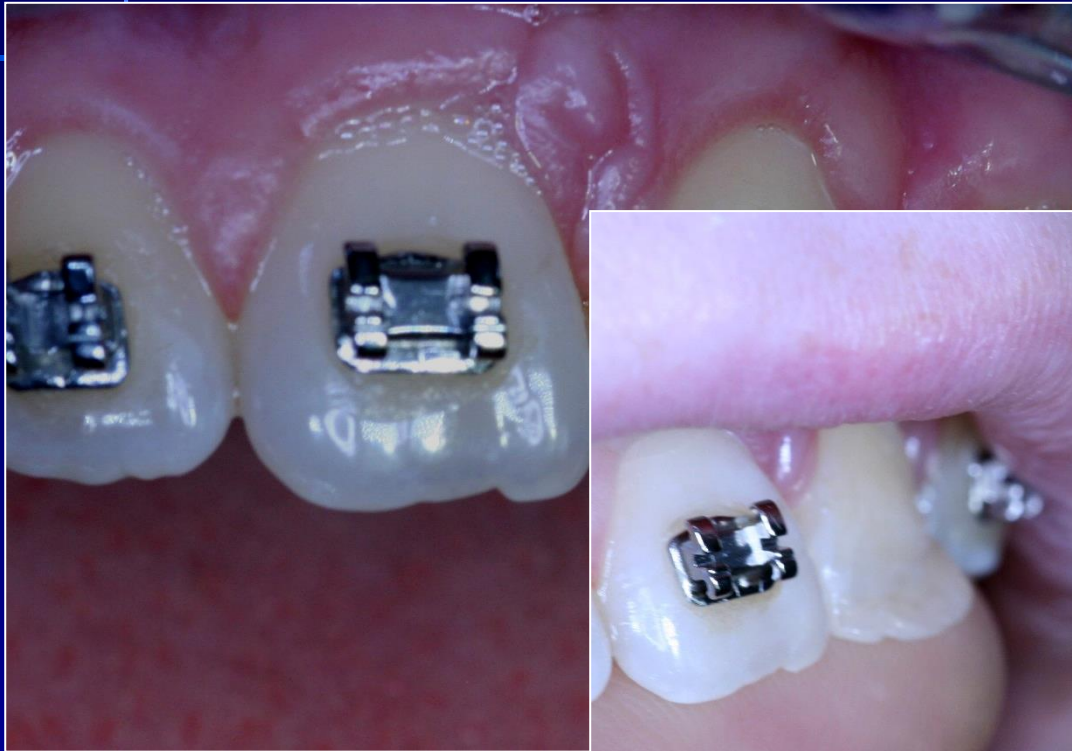


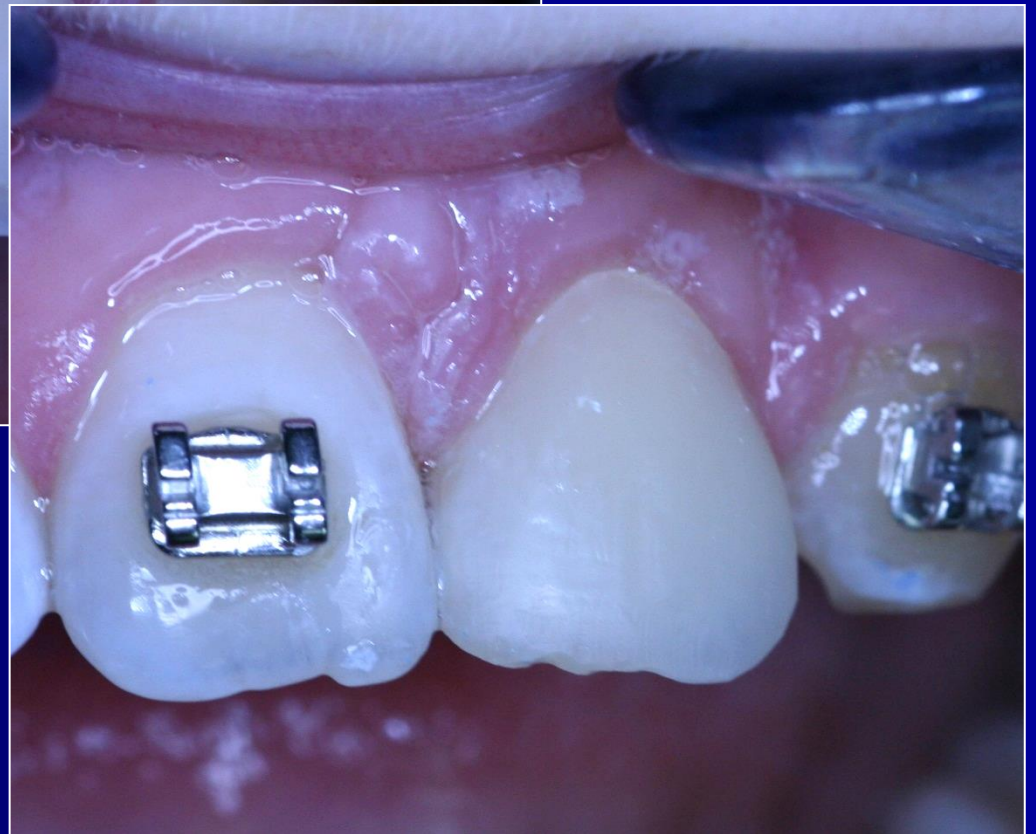
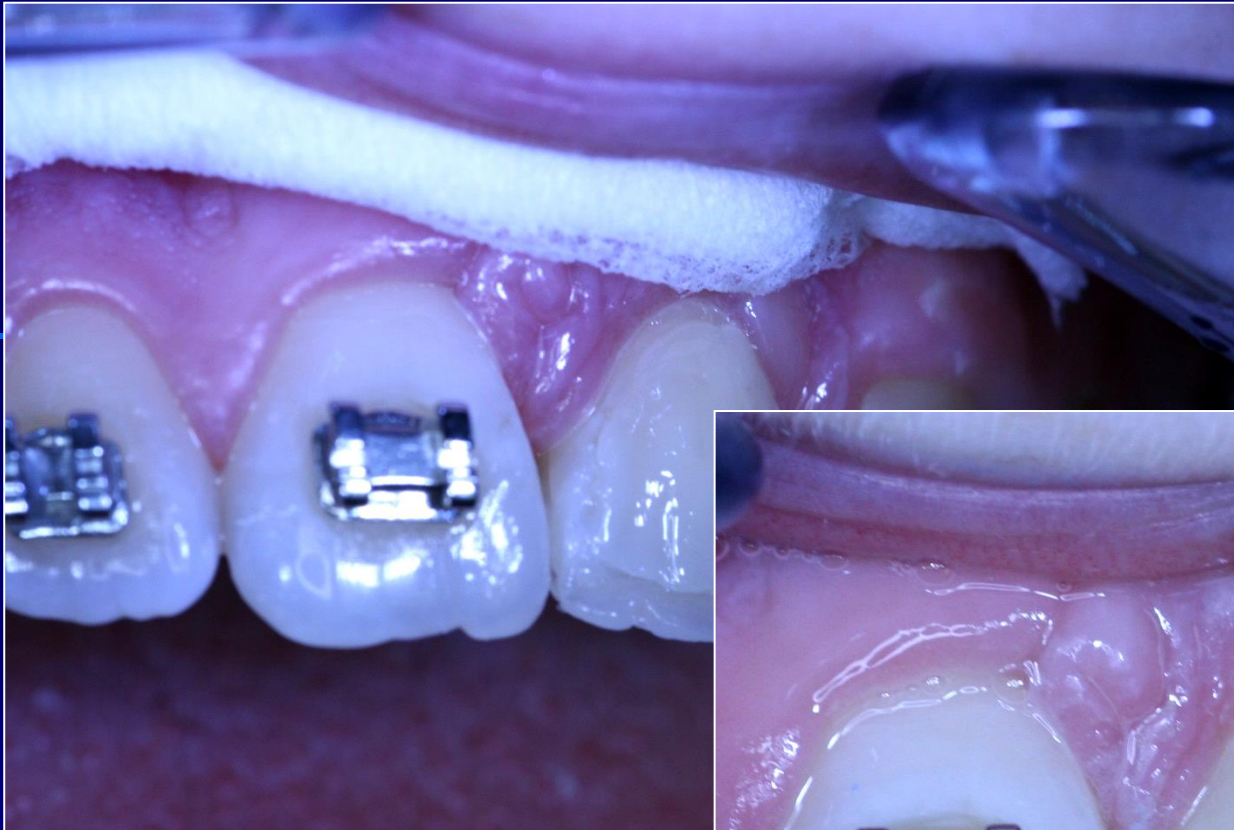


6 years post op  
10 years after the first  
treatment



# Finger method





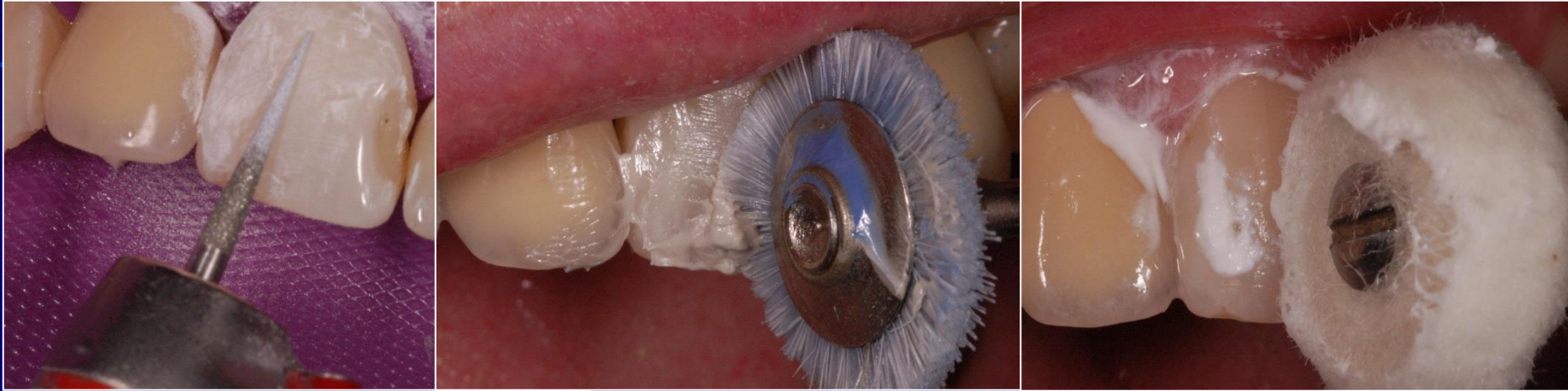








# Surface texture



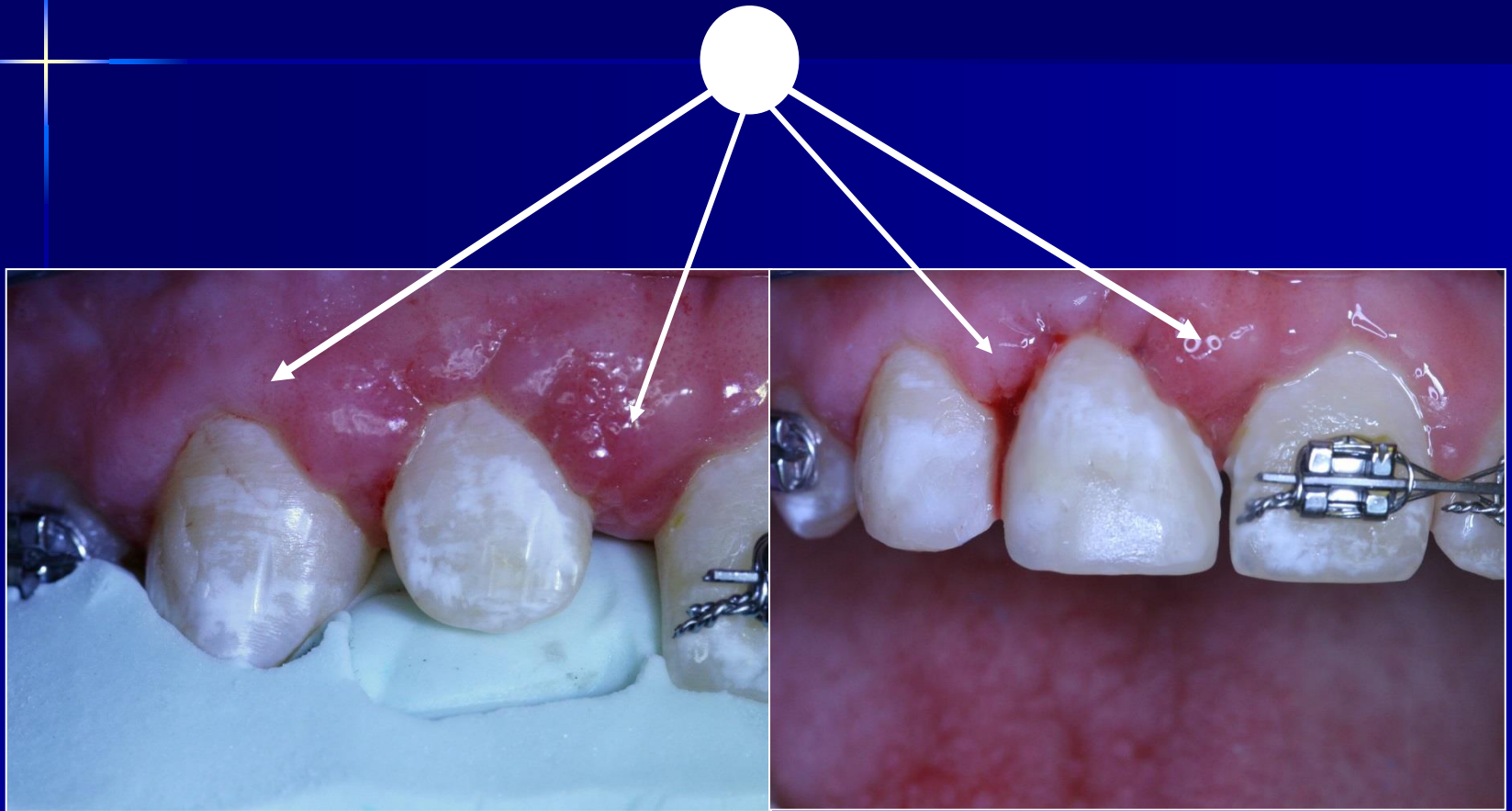


**Correction of the shape  
cooperation with the  
orthodontists**

# Complex approach

- Hygiene and cooperation
- Intermaxillary relations
  - Occlusion
  - Articulation
- Soft tissues

# Gingival hyperplasia



# Gingival hyperplasia

- Improvement of oral hagiene
- Tooth brushing (Bass technique)
- Gingivoplasty

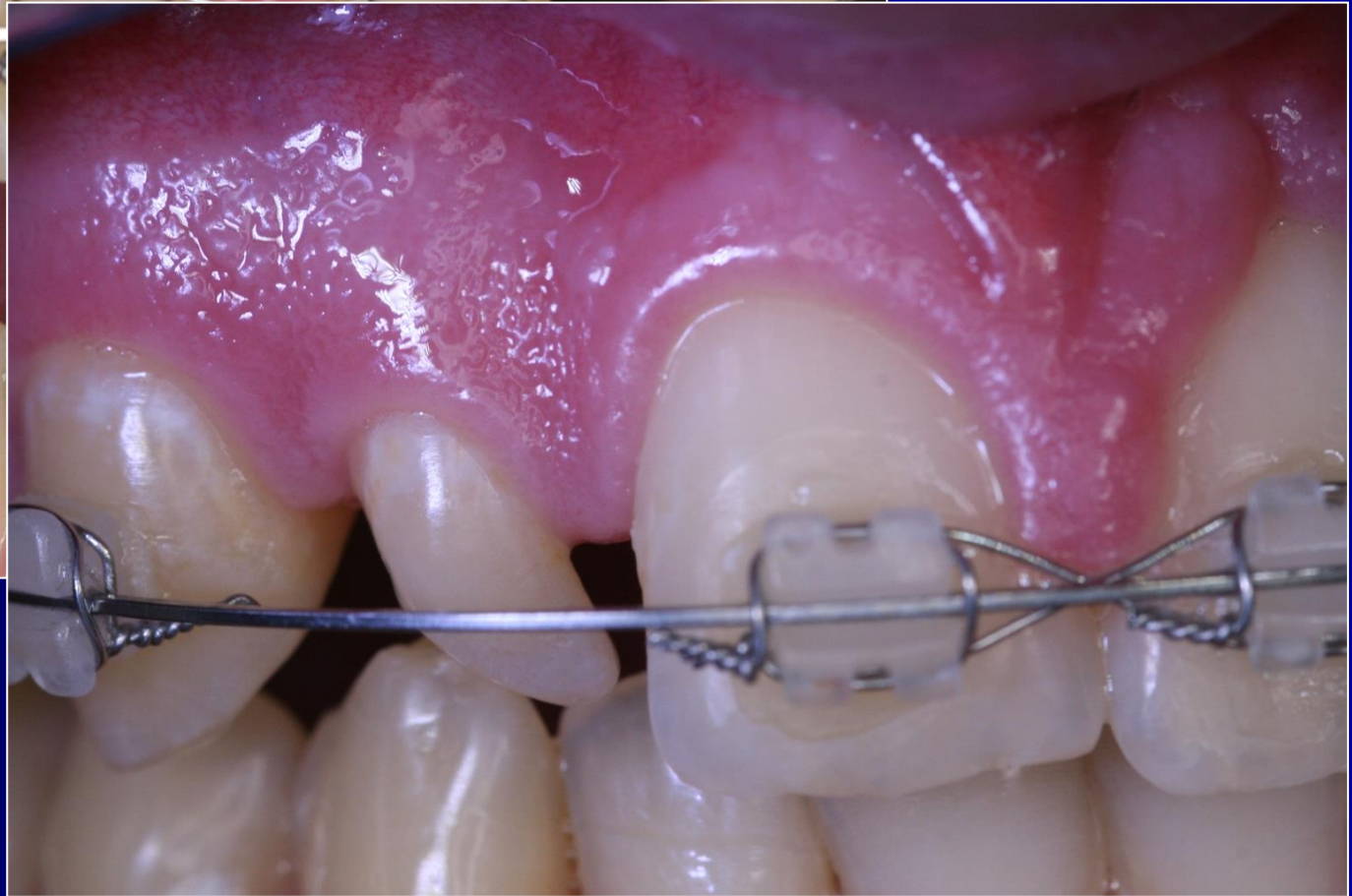
# Microdontia





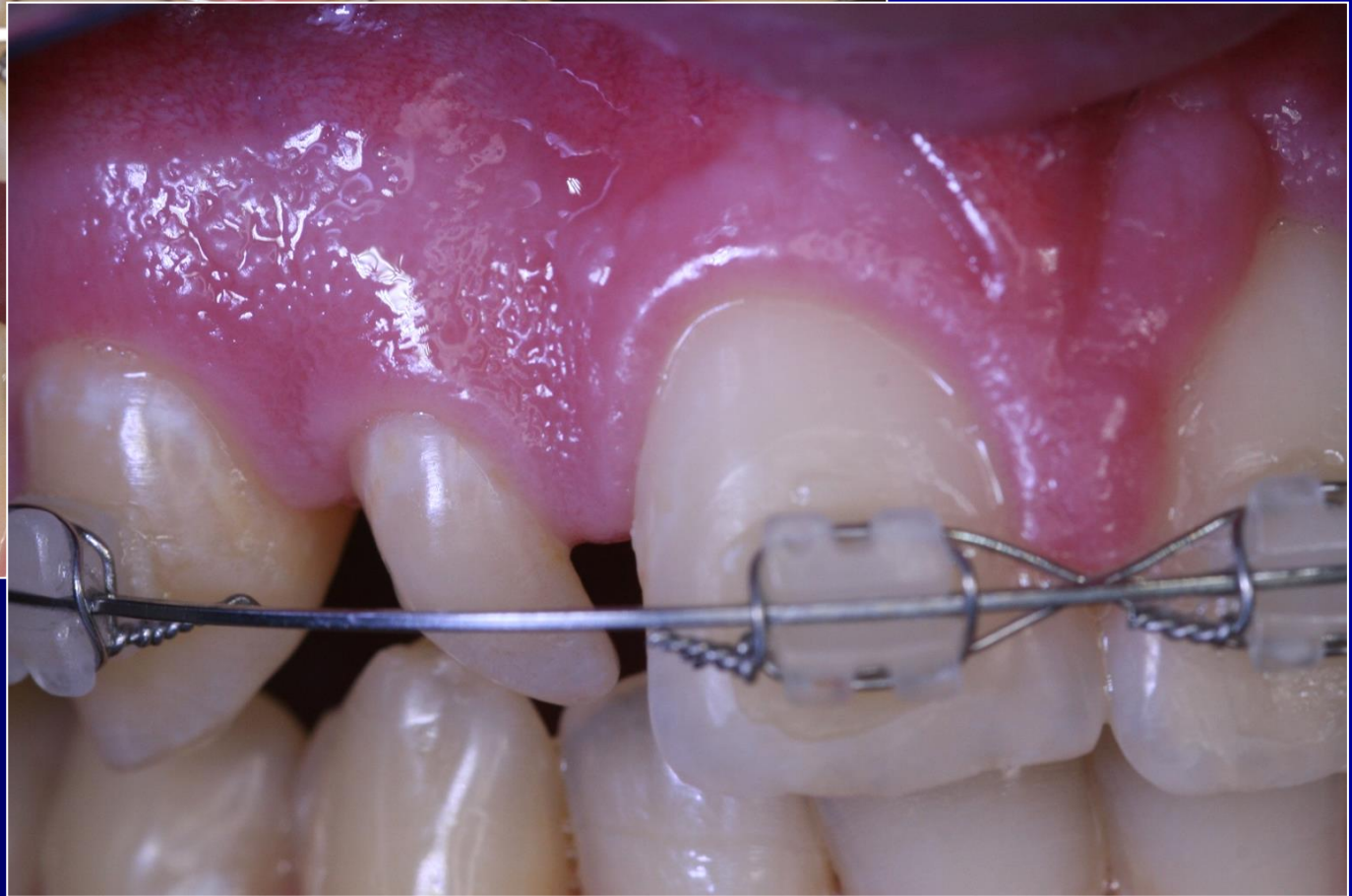














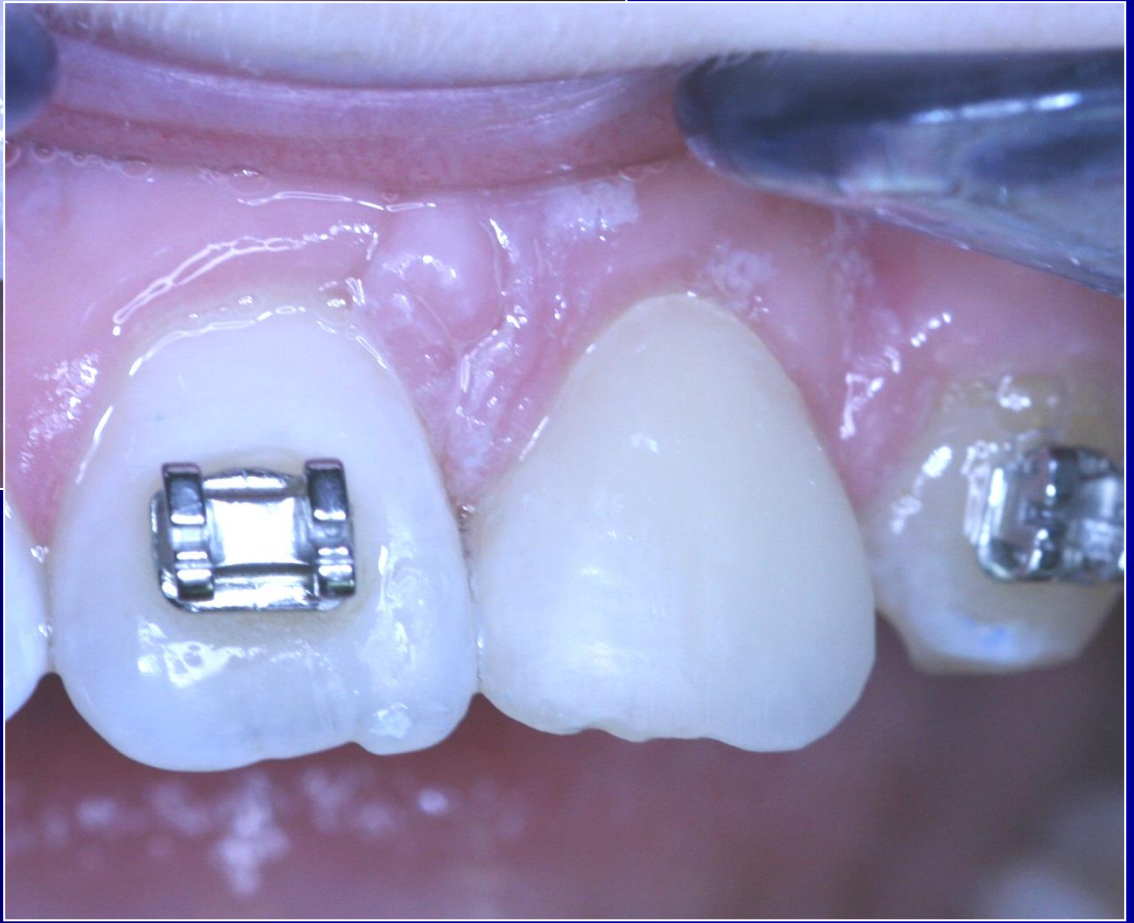
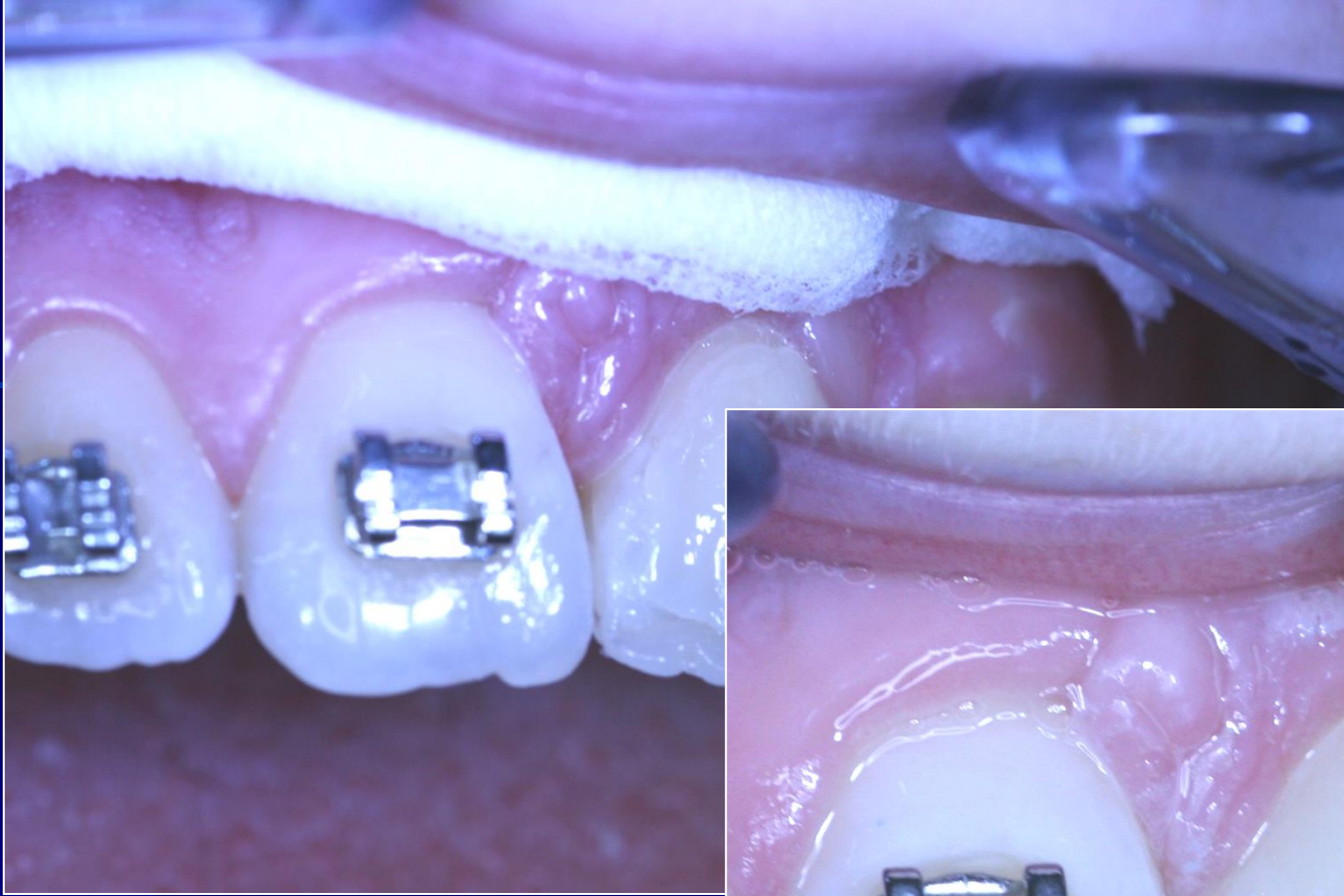


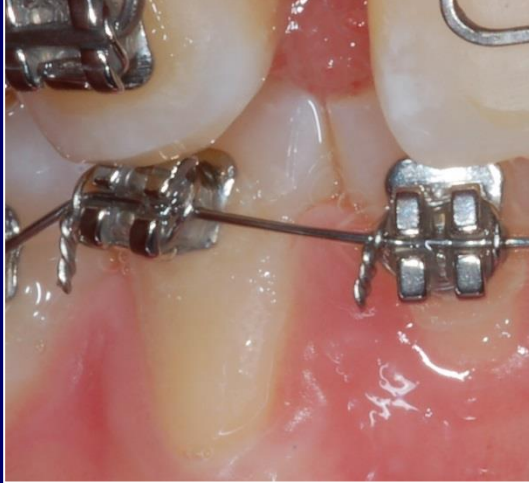




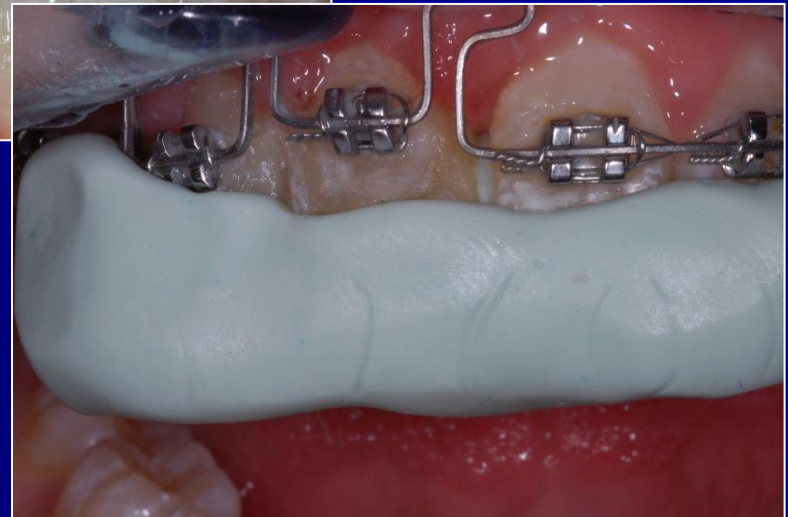
# **Correction of the size and shape**













# Closure of spaces







Pre op

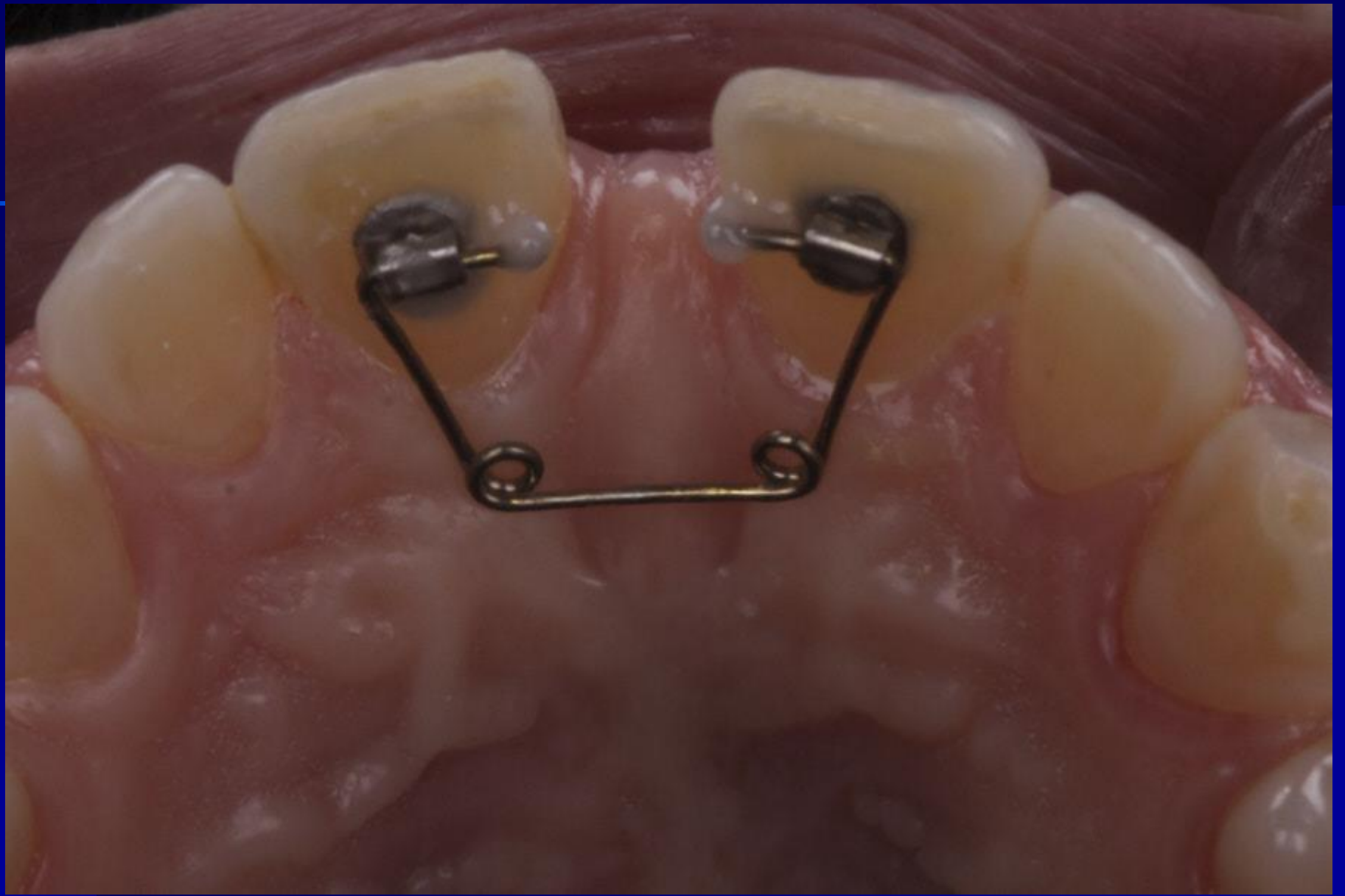


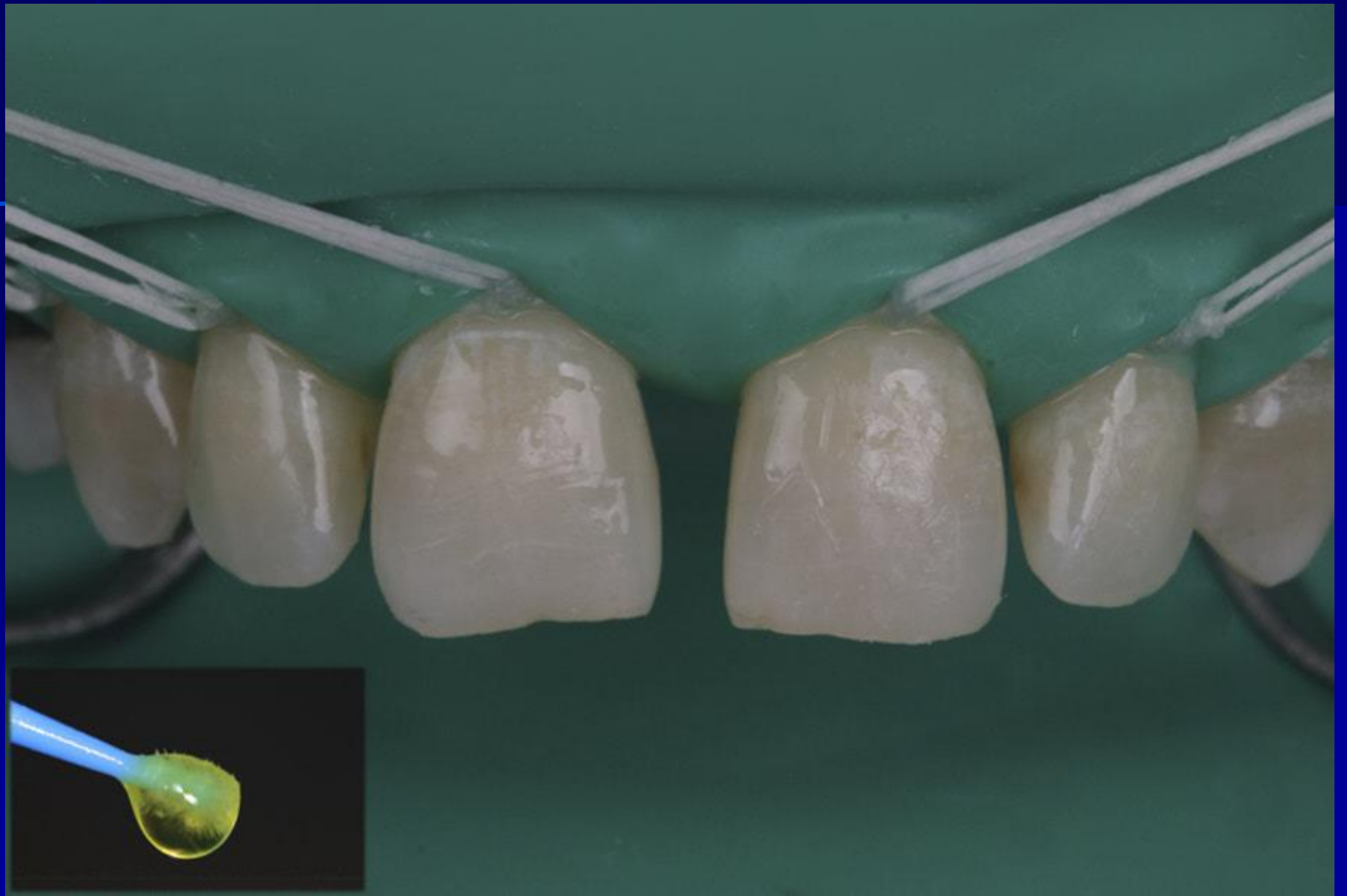
Mock up



# Diastema closure

- Orthodontic approach
- Restorative approach
- Combination
- *Frenectomy can be also performed*

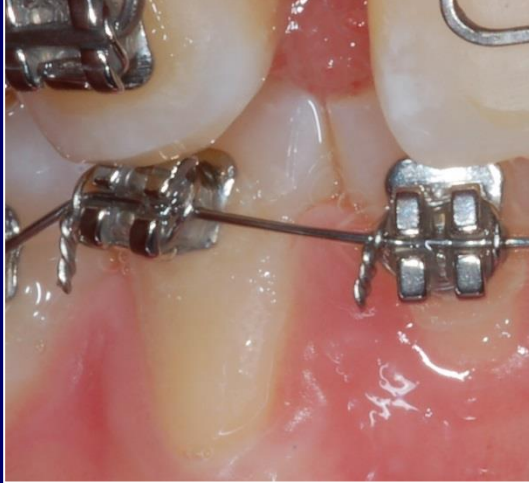




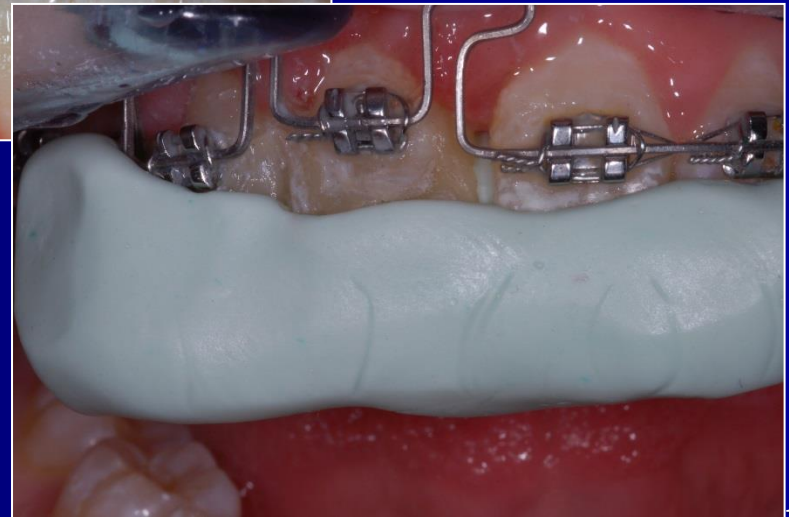












# Periodontology

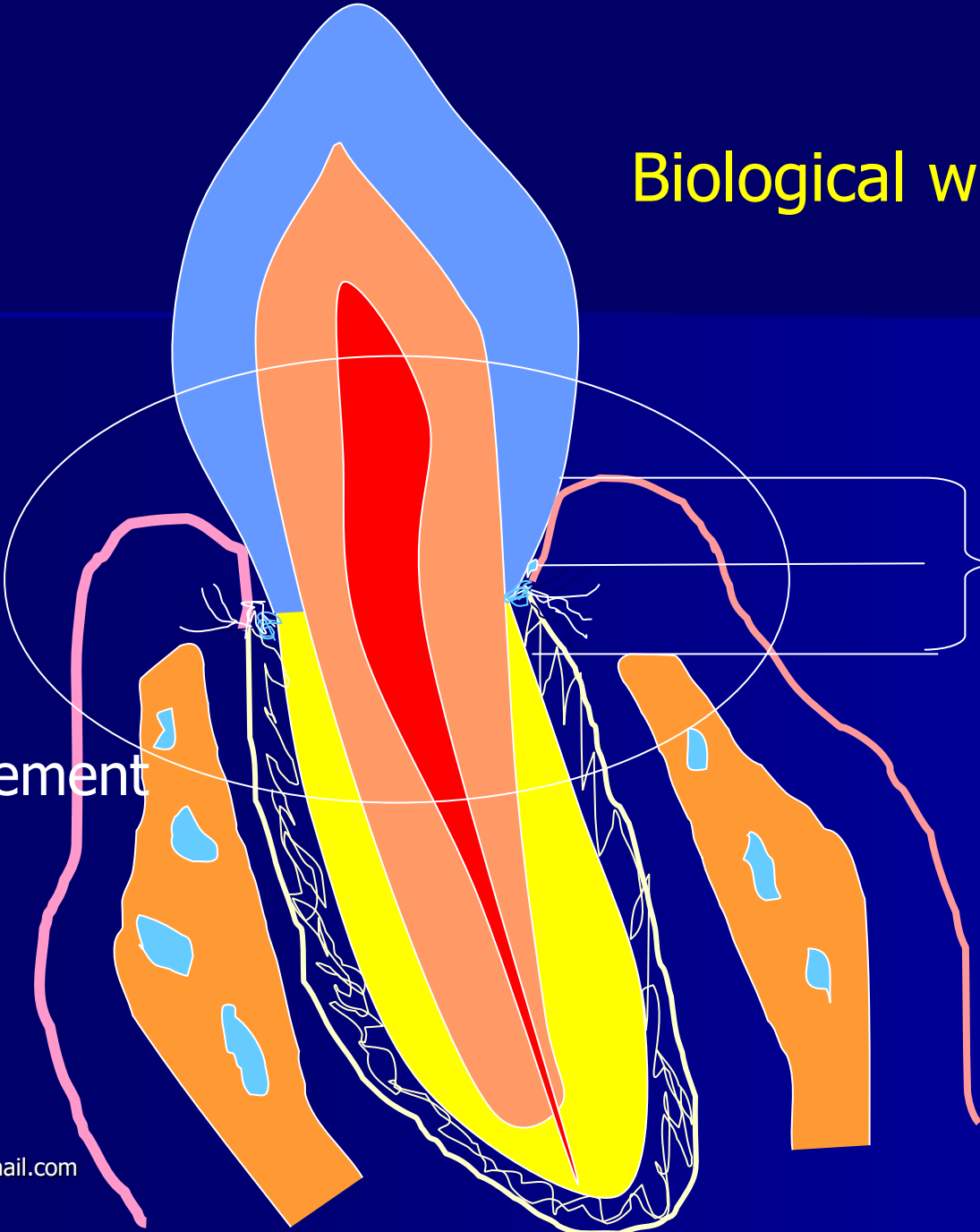
- Frenectomy
- Gingivoplasty
- Gingivectomy – elongation of the clinical crown
- Ostectomy – elongation of clinical crown

# Biological width

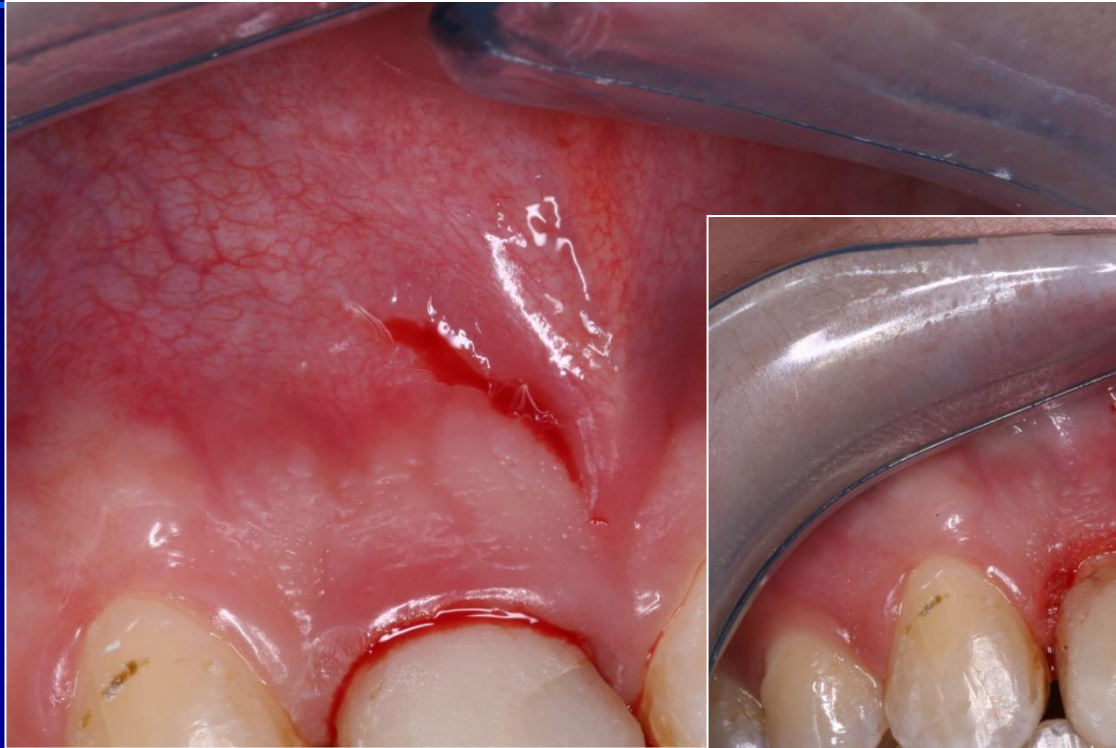
Epithelium  
attachement

Connective  
tissue attachement

2 - 3 mm



# Elongation of clinical crown













# Elongation of clinical crown







[Iroubalikova@gmail.com](mailto:Iroubalikova@gmail.com)





# Reattachment

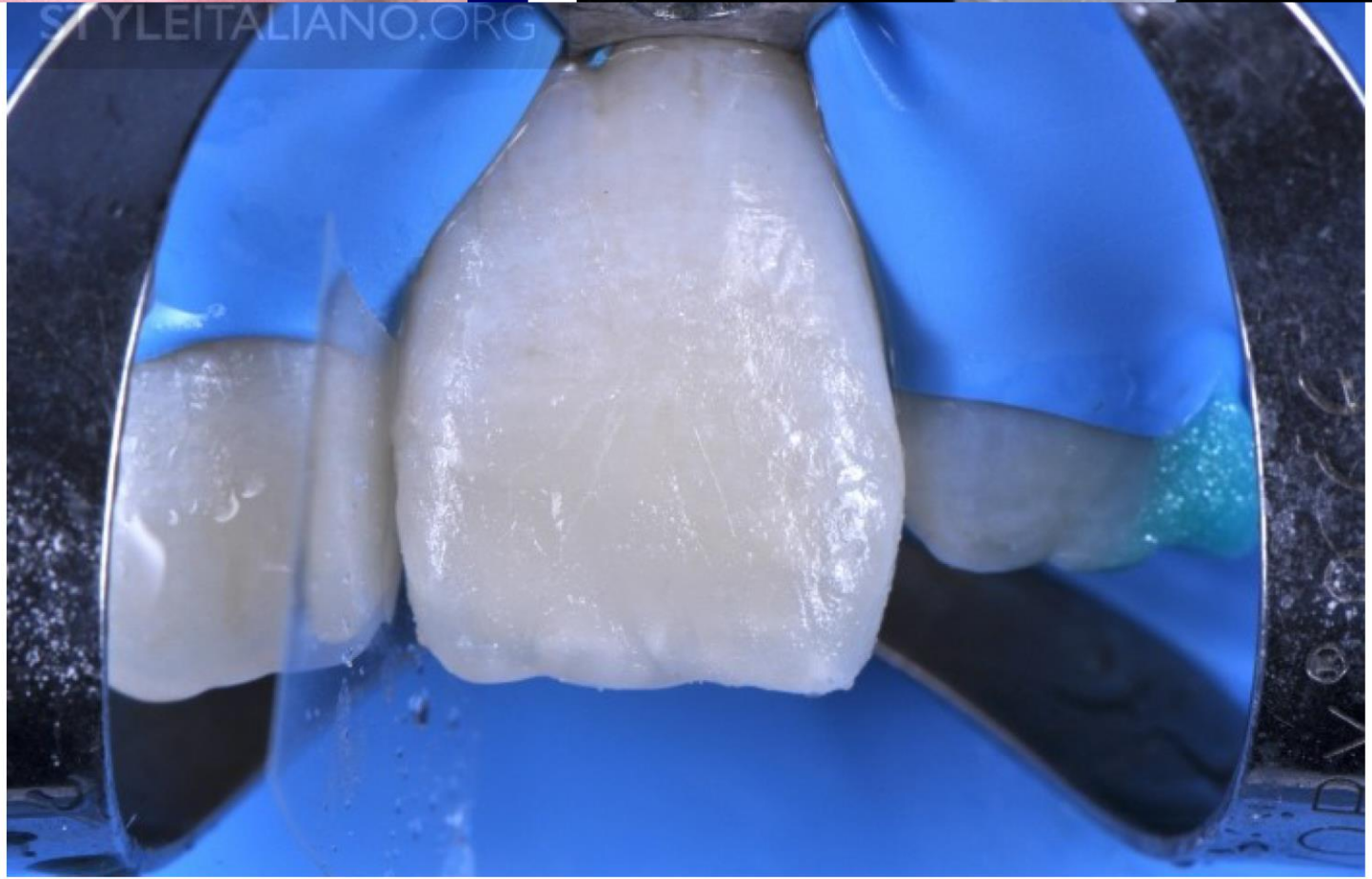


**GIUSEPPE MARCHETTI**

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CLASS IV REATTACHMENT AND  
RESTORATION WITH ONE SHADE

230 Views - Apr 2017



Il be the

Img. 9 - In a few minutes, the two pieces are bonded and the missing part is ended too, with the body



[www.styleitaliano.org](http://www.styleitaliano.org) - CLASS IV REATTACHMENT AND RESTORATION WITH ONE SHADE



Img. 9 - In a few min

# Reattachment

- 1. Check the fragment
- 2. Prepare the shallow groove around the defect in the tooth as well as in the fragment
- 3. Use adhesive procedure
- 4. Attach using flowable and composite filling material

# Case report – complex approach



- Before the treatment

# Case report- complex approach

- After orthodontic therapy



# Case report – complex approach



Final result

Ceramic restoratio