

A to Z of Porcelain Laminate Veneers

A beautiful smile seems to reflect a certain style of living, and the enhancement of facial beauty is one of the primary goals of patients seeking elective dental care. The lower one-third of the face has a major impact on the perception of facial aesthetics, and the role of a beautiful smile design not only changes the smile alone but also the overall facial appearance as well.

Once the ideal relationship between the restoration and the facial soft tissues is achieved, improvements in natural beauty can be expected to follow. With the ever-increasing importance that the media, patients and general society place on appearance, an even greater emphasis has recently been placed on elective aesthetic dentistry. By improving deficient facial proportion and integumental form, surgeons, orthodontists, and restorative dentists have the unique opportunity to weave these aesthetic needs and the creation of a pleasing smile into the fabric of their comprehensive treatment planning.

Creating the precision in terms of the preparation, fit and the aesthetic final outcome needs a serious treatment planning which is different for each case... Designing a new smile consists of many steps which are so very important and if followed right, produce predictable success.

After that stage, in order to achieve a very precise and predictable tooth preparation, wax-up, silicon indexes and related techniques such as APR (Aesthetic Pre Recontouring), APT (Aesthetic Pre-evaluative Temporaries) and preparation through the APTs are extremely crucial. This eliminates all the possible mistakes and destruction of the depth cutters that could have been done if the tooth was to be prepared without realizing the aging affects on the enamel (volumetric enamel loss) or their inappropriate teeth positions on the dental arch....

At this point I would also like to emphasize the importance of minimally-invasive dentistry. This is only possible if we can insure that proper tooth position in the arch is established, eliminating the need for any soft or hard tissue removal. This brings to mind the importance of the interdisciplinary team (in contrast to multidisciplinary). The major difference between an interdisciplinary versus a multidisciplinary approach, is that with an interdisciplinary approach, treatment planning is accomplished in a group setting with all treatment team members present. All treatment planning and treatment challenges can be discussed in a collaborative environment with team members complementing and supporting the efforts of each other. A multidisciplinary approach only represents that each discipline or area of dentistry is involved in one aspect of the treatment without necessarily working together in a unified manner. This also applies to minor or major soft tissue deficiencies. In this lecture pink esthetics will also be emphasized and discussed thoroughly.

Learning Objectives:

1. Interdisciplinary Aesthetic Treatment Planning.
2. When to use Restorative Tools or Orthodontics or Perio or a combination of these three.
3. Minimal Invasive Tooth Preparation Techniques.
4. Maximum and predictable communication between specialists.

Aesthetic Excellence PLV Hands On Course Program

Topic: Advanced smile design workshop for complicated cases

First Day

Meeting of the participants at course venue.

Lecture by Dr. Gurel.

LIVE treatment on a patient

- Tooth Preparation by Dr. Gurel
- Designing the smile
- Occlusal Check
- Mock-up
- Wax-up
- Preparing silicone indexes in the lab or chair side.
- Analysing the smile with the indexes.
- Aesthetic pre-recontouring – APR (if needed).
- Aesthetic Preevaluative Temporaries – APT.
- Evaluation of the aesthetics through APT.
- Evaluation of occlusion through APT
- Evaluation of phonetics through APT
- Tooth preparation through the APT under the microscope.
- Using depth cutters.
- Using double gridded diamond burs.
- Finishing the margins.
- Customising your Arkansas stone burs for finalising gingival margin preparations.
- Handling exposed dentin at time of preparation.
- Impression making using retraction cords (if needed).
- Preping the provisionals (discussing different techniques depending on different indications).
- Rechecking the provisionals for aesthetics, functions, phonetics.

Aesthetic communication with the patient

- Picture making
- Advanced 3D smile design live on a patient
- Evaluation of this new look with a special photo shoot
- Refining the smile design
- Checking the aesthetic outcome and function

Second Day

Interactive treatment planning

Treatment planning options for different cases. Utilizing orthodontics, periodontics, prostodontics, endodontics, maxillo facial surgery.

Hands On Course on models.

- Mock-up
- Preparing the translucent silicon impression through the wax up model
- Preparing the silicon index
- Checking the smile with index
- Aesthetic Pre-recontouring – APR
- Aesthetic Preevaluative Temporaries – APT
- Evaluation of aesthetics through APT
- Tooth preparation through the APT
- Using depth cutters
- Using double gridded diamond burs
- Finishing the margins
- Modifying the translucent silicon impression for the provisionals
- Preping the provisionals using RSVP
- Rechecking the provisionals for aesthetics.

Patient Treatment

- Removing the provisionals
- Try-in
- Whether or not to use the rubber dam.
- Surface treatment of the prepared tooth surface
- Surface treatment of the intaglio surface of the porcelain restoration
- Seating the porcelain restoration.
- Light curing (different options for the minimum invasive margin cleaning techniques)
- Checking the aesthetics, occlusion, etc.
- Bonding the BPRs.