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## AESTHETIC REHABILITATION AT IT'S LIMIT MULTIDISCIPLINARY CLINICAL CASE

KEYWORDS: ceramics, composite resin, gingivectomy, endodontics, disilicate lithium, aesthetics

**CASE DESCRIPTION:** Female patient, healthy, 42 years of age, attended the clinic unhappy with the aesthetics of her smile. After corrective anamnesis, clinical and radiographical evaluation and discussing with the patient the various treatment possibilities, and associated costs, the adopted treatment was: Endodontic treatment, internal whitening and direct restoration using compost resin on tooth 12; Endodontic retreatment, gingivectomy and rehabilitation with lithium disilicate ceramic crowns of teeth 11 and 21 and direct restoration of tooth 22.



Fig. 1 - Inicial photographs and X-rays of teeth 12, 11, 21, 22

**DISCUSSION:** The best treatment plan we can propose to a patient is one which meets aesthetical and functional objectives, the patient's expectations and capabilities. It is very important to clearly explain the risks and benefits of each treatment option, especially when the options are not ideal. In this case, we brought together the rehabilitation using resin composites and lithium disilicate ceramic materials and also with the help of various fields of dental medicine. The outcome was aesthetically/functionally satisfactory and met the patient's expectations. It has been scientifically proven that both materials have the same short term aesthetic outcome. Nonetheless, the colour stability and resistance to fracture in the long term are substantially greater for ceramic.



Fig. 2 - Step-by-step photographs of the rehabilitation.

**CONCLUSION:** By reconciling the various fields of Dental Medicine (namely Endodontics, Periodontology, Oral Rehabilitation, aestetics) and by using different rehabilitation materials (resin composites, and lithium disilicate ceramic), it was possible to achieve a favourable outcome both aesthetically and functionally.



Fig. 3 - Final photografs and X-rays of the teeth 12, 11, 21, 22.