

# Patient X

Restorative Case

Kishan Mistry

Whiston Scheme 2019

Calm Dental Care, Urmston

# History

- Demographics
  1. 30 year old male, unemployed, body builder, Manchester
- RFA
  1. Routine Exam 6/12
- PC
  1. “My lower front teeth are really worn down”
  2. “I have gaps from missing teeth that I want to address”
- HPC
  1. Hypodontia – missing lower 1’s + lower 5’s
  2. Severe jaw ache, severe tooth wear, high energy drink intake

# Medical History

- ASA 1
- Cardiovascular<sup>0</sup>
- Respiratory<sup>0</sup>
- Gastrointestinal system<sup>0</sup>
- Renal<sup>0</sup>
- Hepatic<sup>0</sup>
- Endocrine<sup>0</sup>
- Musculoskeletal<sup>0</sup>
- Nervous System – Citalopram 40mg once in the morning
- Blood<sup>0</sup>
- Allergies<sup>0</sup>

# Citalopram

- 40 mg once in the morning, used for last two years
- Selective serotonin reuptake inhibitor
- Depressive illness
- Relevant common/uncommon side effects:
  - sleep disorders, dry mouth, altered taste, vomiting, yawning, headaches, bruxism\*

# Dental History

- Last visited the dentist 6 months ago for an exam, regular attender.  
Been at practice for 7 years
- Brushes twice daily, morning + night with oscillation rotation electric toothbrush
- Mouthwash: Never
- Interdental cleaning: Never
- Patient does not have anxiety towards dental treatment
- Severe tooth wear, restorations, RCT, XLA's in past

# Family History

- No known inheritable disorders

# Social History

Alcohol: drinks socially ~ 7 units weekly

Smoke: Never smoked

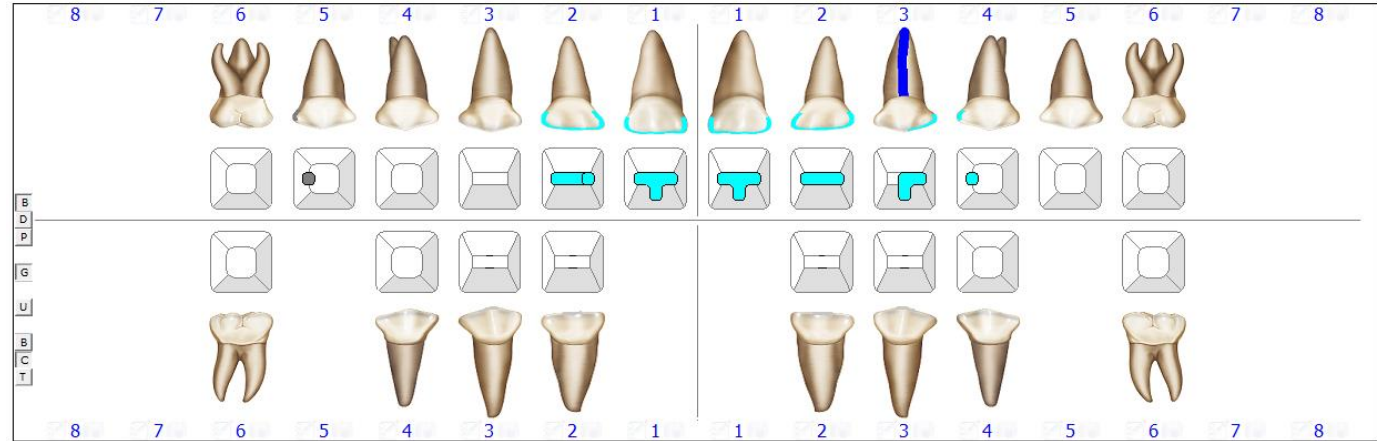
Currently unemployed > Exemption: Income-related employment & support allowance

# Examination

- Lips and seal – competent
- Asymmetry – NAD
- Skeletal classification – Class 2
- Lymph Nodes – NAD
- MOM – NAD
- TMJ - NAD

# Intra Oral

- Labial Mucosa – NAD
- Buccal Mucosa – NAD
- Gingiva – NAD
- Tongue – NAD
- Floor of mouth – NAD
- Palate – NAD
- Throat – NAD
- Incisor relationship – Class 1
- Molar relationship – RHS: Class 1, LHS: Class 2
- Excursive movements – Protrusion: , LHS: group function , RHS: group function
- Oral hygiene - good
- Other – Non-carious surface tooth loss – severe attrition on lower 2-2





# Special Investigations

1. Radiographs
  - RBW + LBW
2. Pre-operative photographs
3. Study models

# Radiographs



Parameter	RBW – Q1, assess bone levels + caries	LBW - Q1, assess bone levels + caries
Bone Levels	Good	Good
Radio-lucencies	NAD	NAD
Radio-opacities	UR6 O, UR5 DO (negative ledge)	UL5 O
Pathology	NAD	NAD

# Pre-operative Photographs



Frontal View - Parted



Frontal View - ICP

# Study models



RHS



Frontal



LHS

# Definitive Diagnosis

1. UL2 B enamel caries
2. Non-carious tooth wear lower 3-3s (Attrition)

# Treatment Options

## 1. UL2

- Restore with composite
- Topical fluoride and monitor

## 2. Lower 3-3 toothwear

- Stabilisation splint alone
- Composite build ups LL3, LL2, LR2, LR3  
+/- stabilisation splint
- Leave and monitor

# Treatment Options

## 3. Lower 1-1 edentulous space

- Adhesive bridge
- Toothborne denture – Co-Cr
- Implant

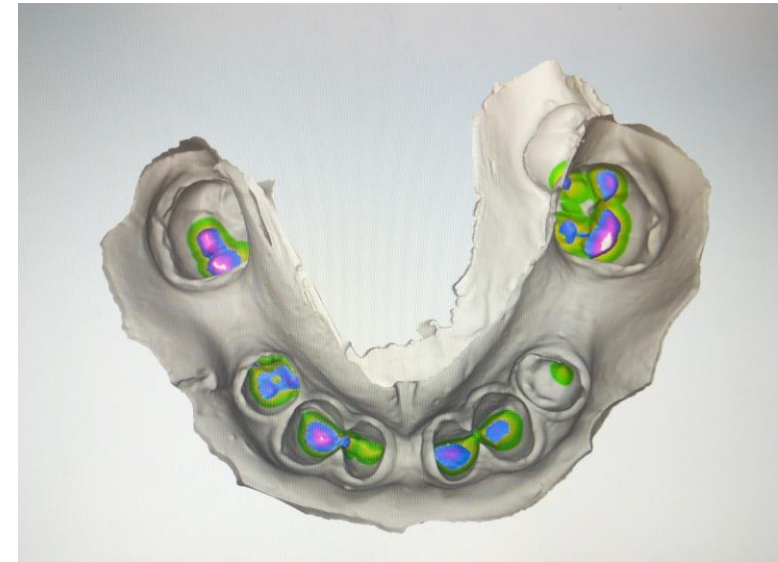
# Proposed anterior appearance





# Adhesive Bridge ?

- Intraoral scanner - Planmeca PlanScan®
- Scanned models - Planmeca Romexis®



# Treatment Plan

- Stabilisation Phase
  - OHI, TBI
  - S + P
  - Topical fluoride UL2 B lesion
  - Flouride supplement – Flouride TP 5000ppm

# Treatment Plan

- Restorative Phase
  - Facebow
  - Lower 3-3 wax up
  - Silicone putty matrix
  - Lower 3-3 composites placed

# Study models: lower 3-3 wax up



Silicone putty matrix of wax up



# Lower anterior composites



Frontal View - Parted



Frontal View - ICP



# Static Occlusion



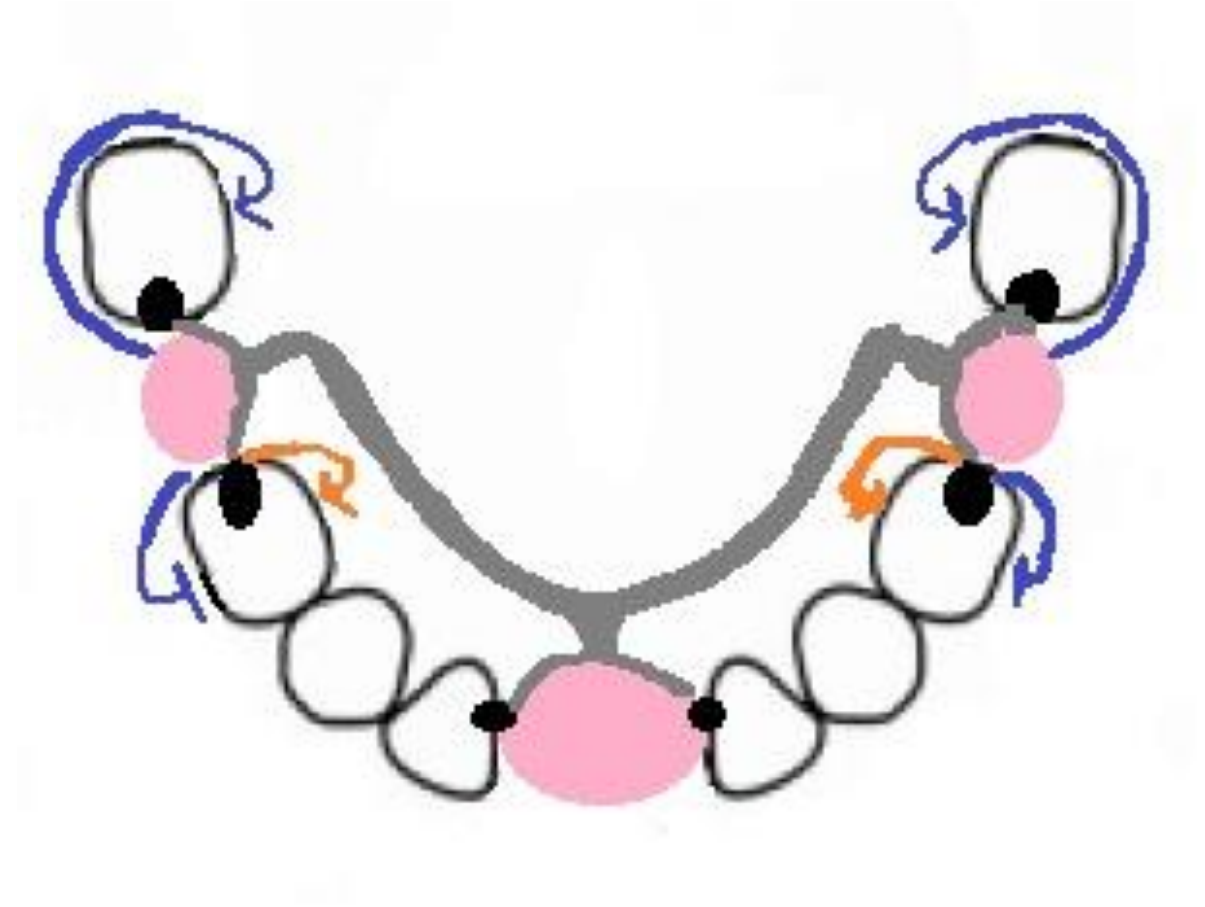
# Treatment Plan

- Maintenance Phase
  - Monitor UL2 B carious lesion
  - Stabilisation splint
  - Remotivate patient – stabilisation splint + dietary compliance



# Treatment Plan

- Advanced restorative phase
  - Co-Cr lower partials



# Co-Cr Design



# Post – Operative Photographs





# Comparison



Pre-Operative



Proposed anterior appearance



Post-Operative

# Reflection

- Treatment
  - Co-Cr shining through anterior tooth
- Patient Management
  - Involving patient in all planning stages – improved confidence
- Teamworking
  - Working with other associates regarding increasing OVD
- Future
  - Do not make photoshops too good – worse than outcome?