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الآية 32 من سورة البقرة

# Restoring Young Permanent Teeth "Hints and Tips"

Ву

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# One Chance Only Job

 A simple soccer match could lead to a big diplomatic crisis be tween two "brother" nations. Simply because it's a one chance only job...









 Photography is another one chance only job. If the artist fails to push the shutter button on the right time, this photo will become of no interest... a picture of ordinary faucet.



 .. So is coming back to earth. If that man fails to turn on that single engine at the right time, he will consume his Oxygen and die on the lunar surface.





Pediatric dentistry is a one chance only job because it deals with, unfriendly and fearful children who leave you with very little window through which you try to do your job!

Do your job now or your child patient might never open his mouth again!!!!

# A One Chance Only Job Should Be.....

- Fast
- Durable
- Keeps Future in Mind



# Something leads to another....

Patient selection, tooth, tooth surface

Material selection



Technique selection



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## Patient, Tooth and Tooth Surface Criteria

- Child's age is between 6 to 12.
- At the beginning of that period, management is preventive, conservative.
- As time goes by, management would be more

aesthetic-oriented

In Pediatric
 Dentistry, we
 have two
 customers... a
 child and parents

Dr. Hisham El-Batawi

# Unique characteristics of the young permanent dentition



- Eruption adjacent to primary teeth & into a pre-existing oral environment
- Molars are susceptible to occlusal caries soon after eruption
- Young patients with a history of caries in the primary dentition are at higher caries risk in the early mixed dentition

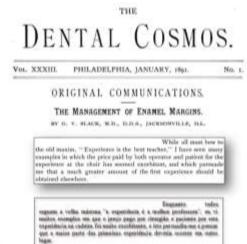
• Which tooth to be filled?

• Which tooth to be sealed?

• Which tooth to be left for observation?

# We need to diagnose before we treat!!!





When Mr. Black classified dental caries, he had only one Material of choice that was Amalgam. His classification was perfect for the material he had and the technique he adopted.

That was Black's principles for cavity preparation.

Let's be more specific and look for another new way of dental caries classification that suits the new trends, materials and techniques

International Caries Detection and Assessment System. Please visit. <a href="http://www.icdas.org">http://www.icdas.org</a>

ICDAS CARIES CLASSIFICATION.

# In the ICDAS-system, caries is scored after cleaning of the teeth



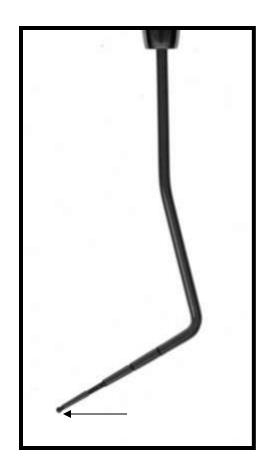
Otherwise caries will be underscored



# Probes ... Explorers?

In the ICDAS-system perio-probes are used to feel with

Explorers are not recommended as they may produce traumatic defects.







#### ICDAS-detection criteria

The classification system operates with 7 scores.

Score 0=sound

Scores 1-2 involve different stages of white or brown spot lesions

Score 3= Lesions with microcavities

Score 4= Shadowed lesions

Scores 5-6 involve cavitated (into the dentine) lesions

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SOUND

opacity
with airdrying:
white,
BROWN

opacity
without airdrying:
white,
BROWN

SURFACE INTEGRITY LOSS

UNDERLYING GREY SHADOW

DISTINCT CAVITY

EXTENSIVE CAVITY













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Sound

Ekstrand et al., (1997) modified by ICDAS (Ann Arbor), 2002 and again in 2004 (Baltimore)

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# To decide a line of treatment, it is not enough to classify decayed teeth. You may also need to classify patients using the Caries Risk Indicator (Caries assessment Tool CAT)

#### **Low Risk**

Optimal fluoride exposures both systemic and topical

Consumption of simple sugars or limiting to mealtime

High caregiver socioeconomic status (financially stable)

Regular dental visits

#### **Caries risk indicator**

#### **Moderate Risk**

Suboptimal systemic fluoride exposure with optimal topical exposure

Between meal snacking (1-2)

Midlevel caregiver socioeconomic status.

Irregular use of dental services

#### **Caries risk indicator**

#### **High Risk**

Suboptimal topical fluoride exposure

Frequent between meal snacking (3 or more)

Low level caregiver socioeconomic status.

No usual source of dental care

#### Caries risk indicator

#### **High Risk**

Active caries present in the mother

Children with special health care needs

Conditions decreasing saliva flow (medications, radiotherapy)

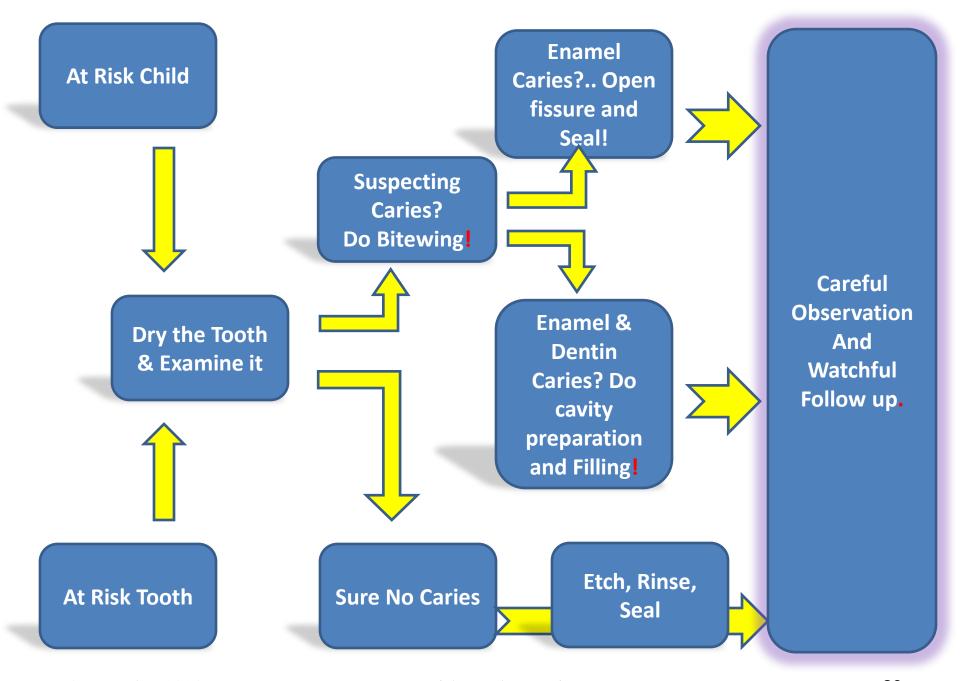
After classifying carious teeth and patients' risks, may be now you can answer those questions

Which tooth to be filled?

Which tooth to be sealed?

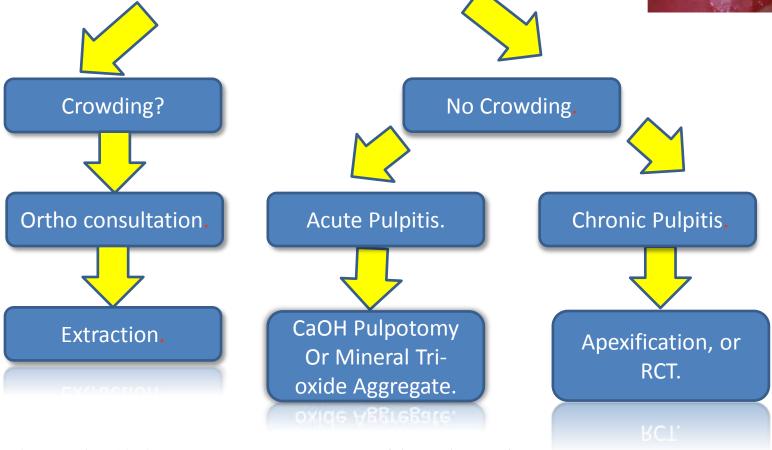
Which tooth to be left for observation?

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1<sup>st</sup>. Permanent molar with deep caries and signs of pulpitis.

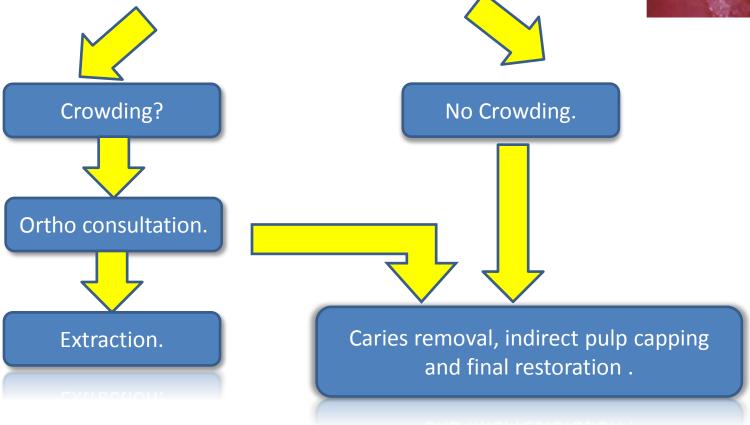




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1<sup>st</sup>. Permanent molar with deep caries and no signs of pulpitis.





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# Removal of 1<sup>st</sup>. Permanent molar? Isn't it a crime?

A tooth that was brand new, in perfect condition, designed and made by God's Hands to stay for more than 100 years and your patient destroyed it 3 years!!

What do you think the prognosis and durability of that tooth would be after root canal treatment?

The answer is no, it is not a crime to remove it provided that It is removed at the right time. When there is evidence of wisdom tooth by radiographic examination... that is at the age of 9 Y 6 M. Remember, a one chance only job should be done at the right time.

## .... Extraction of 1st. permanent molar



- Hoping the 2<sup>nd</sup>. Molar will erupt in the space created by extraction.
- Assuming that the child will have a 3<sup>rd</sup>. Molar to erupt in place of the 2<sup>nd</sup>.
- When can you verify presence of 3<sup>rd</sup>. Molar?

#### **Material Selection**

"Say bye to Black's principles"



Majority of caries confined to pits and fissures

Concerns about environmental pollution and mercury toxicity from amalgam restorations

Advances in tooth-coloured restorative materials

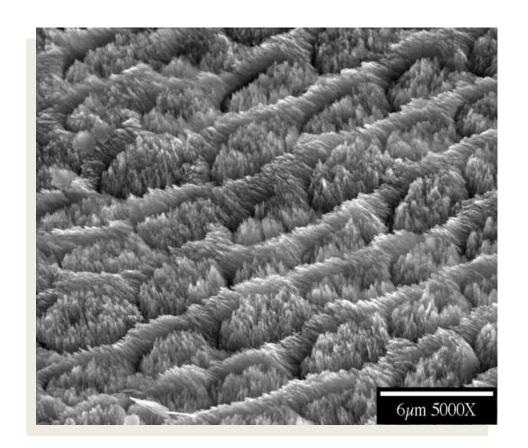
Aesthetic desires of patient and parent

#### The seven alternatives

- 1. Glass Ionomer (packable)
- 2. Resin Modified GI
- 3. High Viscosity GI
- 4. Polyacid-modified composite resin (compomers)
- 5. Composite
- 6. Amalgam
- 7. Steel crowns

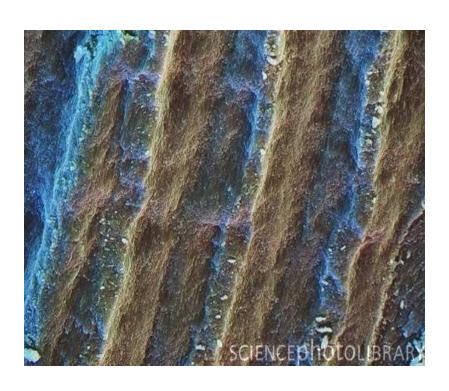
How many of these were not available to Mr. Black?

# Bonding to Enamel is simple



From SciencePhotoLibrary.com

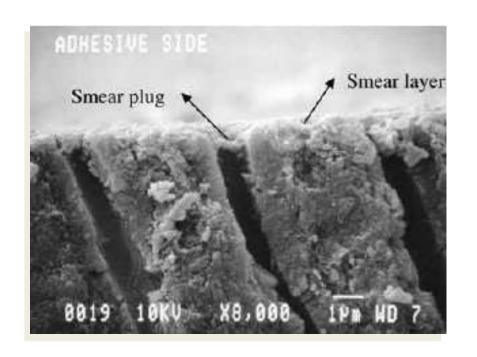
## Enamel vs. Dentine







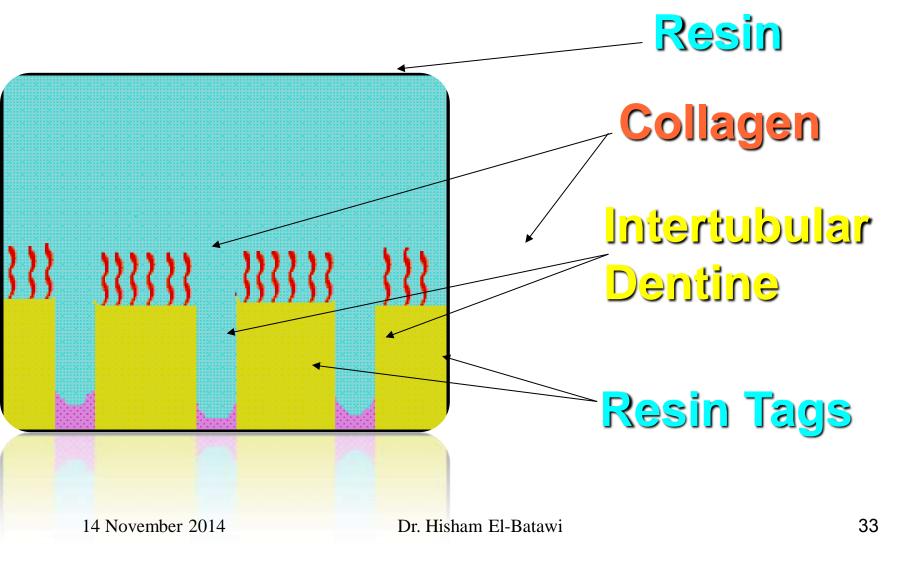
## **Complicated Dentine**



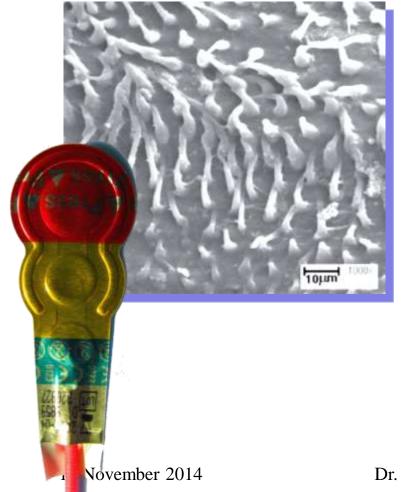
From 3m Espee

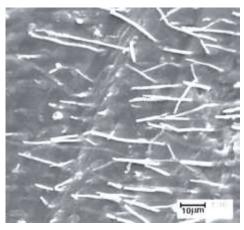
J. Perdigao, University of Minnesota

# **Bonding to Dentine**

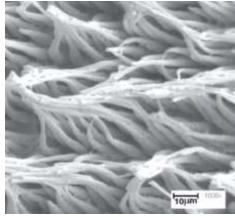


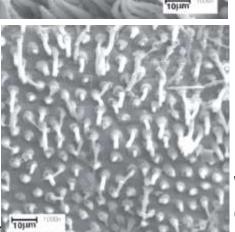
# Bonding to Dentine The Adhesive....









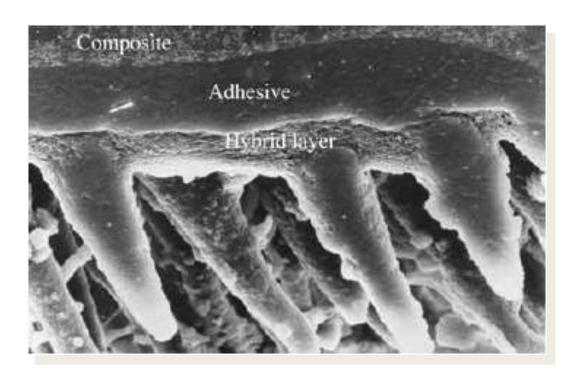




Dr. Hisham

# The Adhesive (cont.)





From 3m Espee

### Etch & Rinse

# Cured Dental Adho 534320 (R

### Self-Etch

Vs.



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#### Water's Power of Destruction

When it rains I Jeddah, it's Venice



Where Will Water Come From?
From dentinal fluid and from micro leakage



#### Etch & Rinse or Self Etch + Flowable

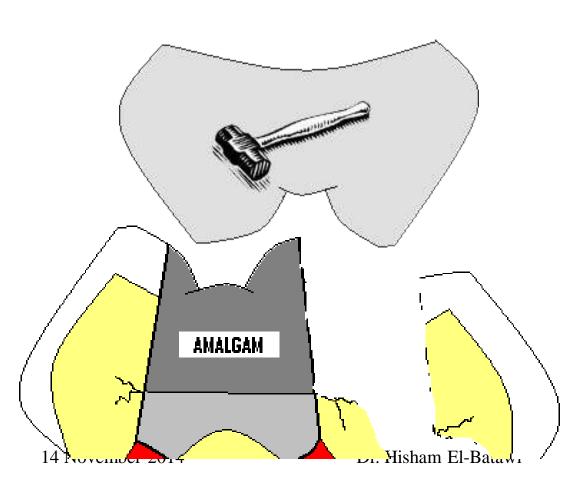


Etching, rising and bonding is the gold standard, but some times the limited cooperation of your child patient does not allow for that multiple step and technique sensitive procedure.

Then the single step, self etching procedure might be recommended. Should you use it, it is recommended to use a layer of flowable composite after bonding.

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# Amalgam Vs. Tooth-Colored Sharp Line Angels Vs. Rounding



•No Amalgam for Pulpotomized Teeth.

•Tooth-Colored fillings show minimal micromovement.

# Amalgam still has a place in our practice

- Dental Public Health Perspective
- Dentist Friendly
- Durable.
- Cheap.

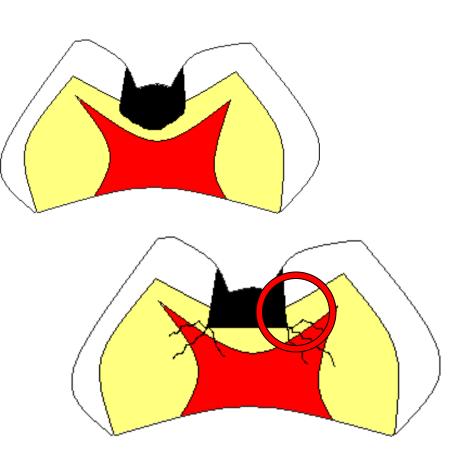


## If we can't reach the poor....



Someone else will do.

# When using Amalgam is un avoidable...



- No sharp line angles.
- Add bulk through width and depth.
- Do undercuts for retention.
- No flat pulpal floor.

## We are destroying teeth!!!

We have to stop that



## About the design of our tools

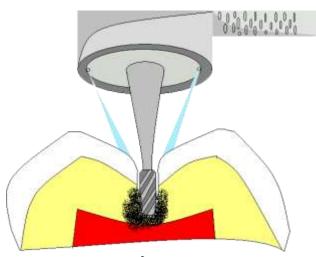








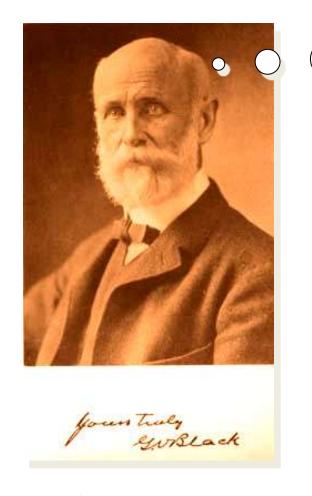
### About the design of our tools



 Even when using coolant, the bur goes alone and water is left out. The deeper you go, the more dentin you burn.



## Black's principles were good for his





#### **Extension for Prevention**

**Extension for Retention** 

## Mr. Greene Vardiman Black (1836-1915)



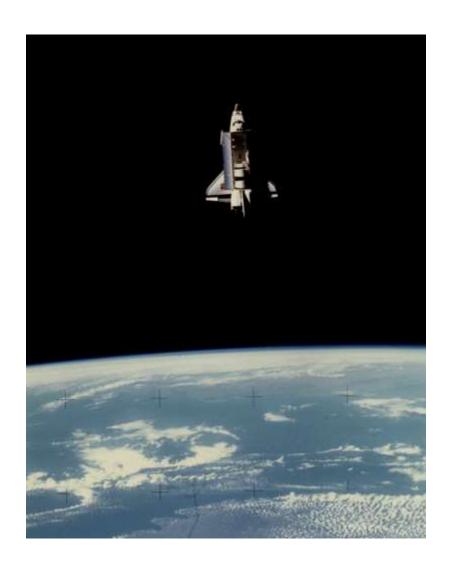
- Introduced rotary instruments to Operative Dentistry.
- Classified Dental Caries.

•Introduced Black's Principles for Cavity Preparation

#### Fast, Durable and .....Keeps Future in Mind

We no longer use Black's dental chair, should we Insist to use his cavity preparation principles?



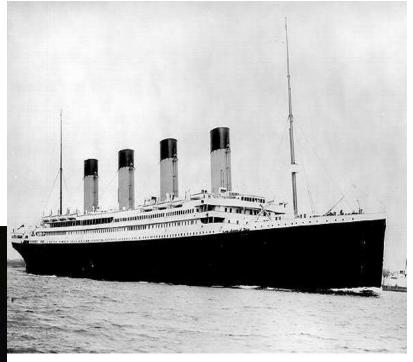


# The disaster of Challenger.



# The disaster of Titanic.





We trusted metals so much....

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#### The disaster of....The Comet



The comet was the world's 1st commercial jet liner.



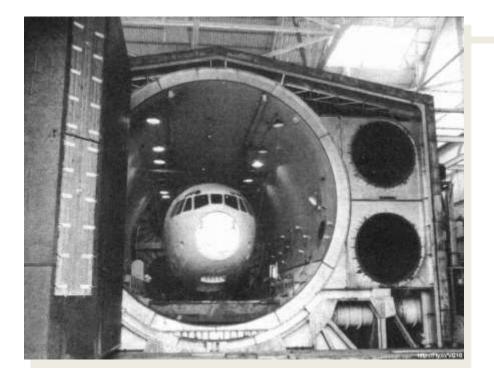
Most of comets crashed during flight without clear explanation

10th Amounty 1954

#### Comet jet crashes with 35 on board

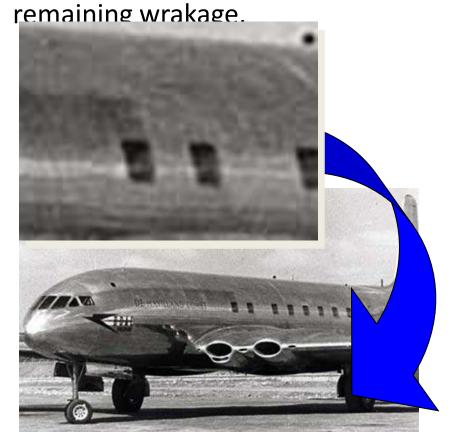
Thirty-five people are missing, feared dead, after a Comet jet airliner crashed into the Mediterranean.

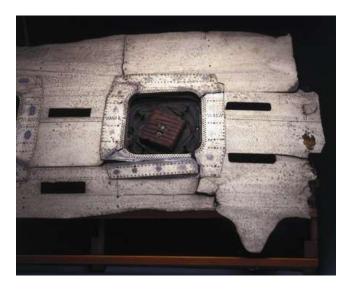


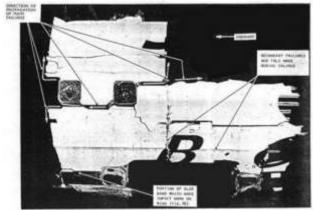


Trying to find an explanation, investigators inserted the body in a bunker and applied repeated cycles of air compression and decompression simulating fight conditions.

Investigators noticed that the sharp line angels of the aircraft windows started to show cracking similar to those of the







## So... investigators learned that using Black's principles in air craft design is a HUGE mistake!!!



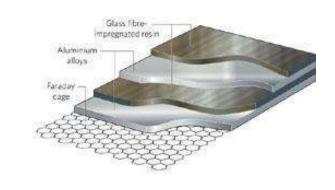
No More Sharp Line Angels

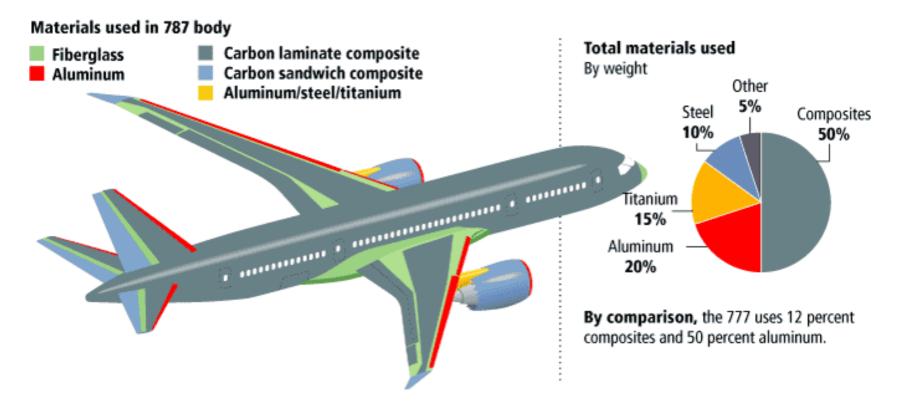
An advice...... Don't get impressed by big names like TITANIC, CHALLENGER and COMET....

Look for the science behind the name How about BOEING's dream?

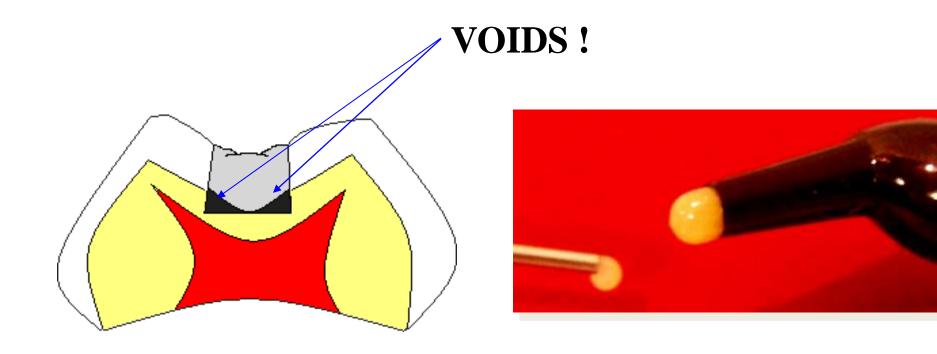


# ...By the way, it is 50% made of COMPOSITE and there is a lot of science behind that..



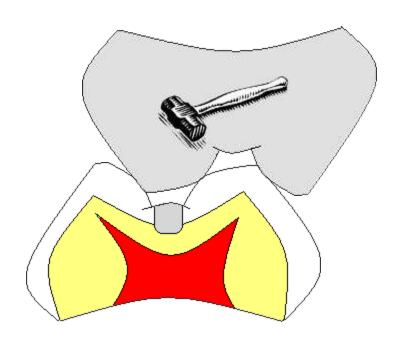


### Another reason for rounding



# Sorry Black's Principles it's time for change

- Conservative
- Shallow Cavity.
- No Extension for Prevention.
- No Extension for Retention.



#### From now on, our cavities will be



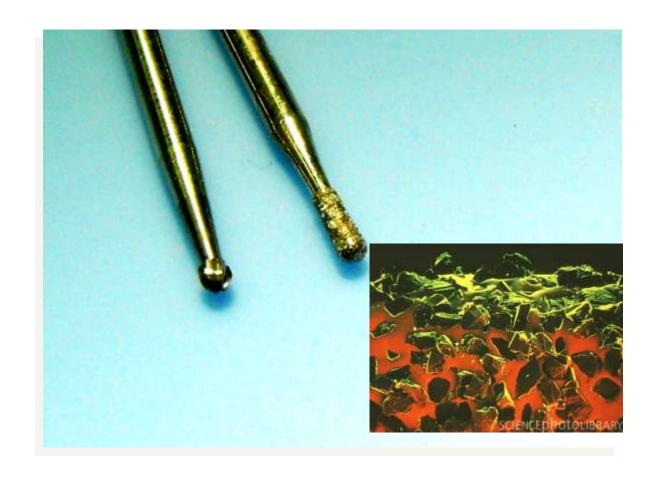




- •Fast
- Strong and Durable

- Conservative
- No extension for prevention
- Rounded line angels.

#### Bur selection, diamond... or .. carbide...?



#### SSC's in permanent molars indications

- Hypoplasia / hypomineralization
- Teeth with very large carious lesions and those requiring pulp therapy
- Patients with special needs where a SSC likely to be more durable than direct filling materials



# Advantages

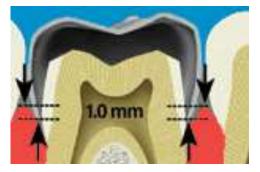
- Durable
- Relatively inexpensive
- Single step extra-coronal restoration
- Full coronal coverage
- Reduces sensitivity from exposed dentine
- ↑s occlusal vertical dimension

## Steps for Chrome-Steel Crowns







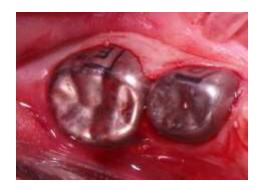












## Modifying crown edge





I do this only for permanent teeth

#### Disadvantages

Poor aesthetics? (Metallic)

Potential for nickel allergy (rare)

 May cause gingival or periodontal problems if retained for long periods

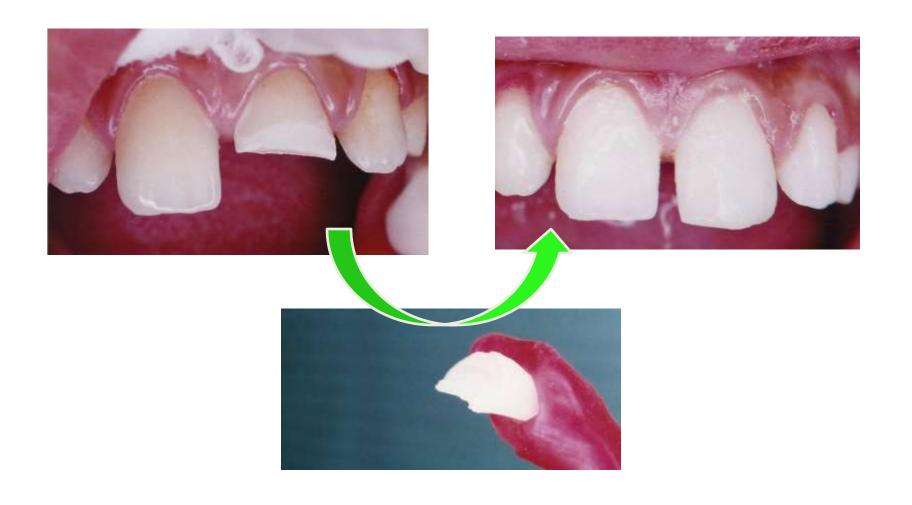
# Hypoplastic teeth



# Treatment of Hypoplastic anterior teeth

- Discrete hypoplastic white or yellow-brown spots can be improved by enamel microabrasion.
- Or by making shallow saucer-shaped preparations in enamel to remove the intensely colored tooth structure and then restoring the enamel with composite resin
- Composite resin or porcelain veneers provide a treatment option for patients who have moderate to severe staining of one or more teeth.

## Restoring Traumatized Teeth



#### Charles Darwin Once Said...

"It is not the strongest of the species or the most intelligent that will survive,

It is the one most adaptable to change."



