



Restoring Confidence

A 15-Year Journey to a Smile Reborn

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The goal
*was to deliver a
natural
appearance while
maintaining a
conservative, cost-
effective solution.*

INTRODUCTION

A 28 year-old male patient presented to our clinic with a long-standing concern — broken upper front teeth resulting from a road traffic accident nearly **15 years** ago. Following initial treatment at the time, he had consulted several dentists over the years but was consistently advised dental implants as the only solution.

Due to the **financial constraints**, he postponed the treatment and lived for over a decade with **compromised aesthetics and reduced confidence**.

Clinical Findings And Planning

On examination, the patient had fractured maxillary central incisors with sufficient remaining tooth structure to support direct restoration. After assessing vitality and occlusion, we discussed all possible treatment options. Considering his expectations, functional needs, and affordability, a **direct composite restoration approach** was chosen.

Treatment Approach

ON EXAMINATION

Intraorally -

- Tooth no. 11 - # upto middle third of the crown.
- Tooth no. 21 - # upto cervical third of the crown.
- Both teeth were non tender on vertical & horizontal percussion.
- Inflamed marginal gingiva.

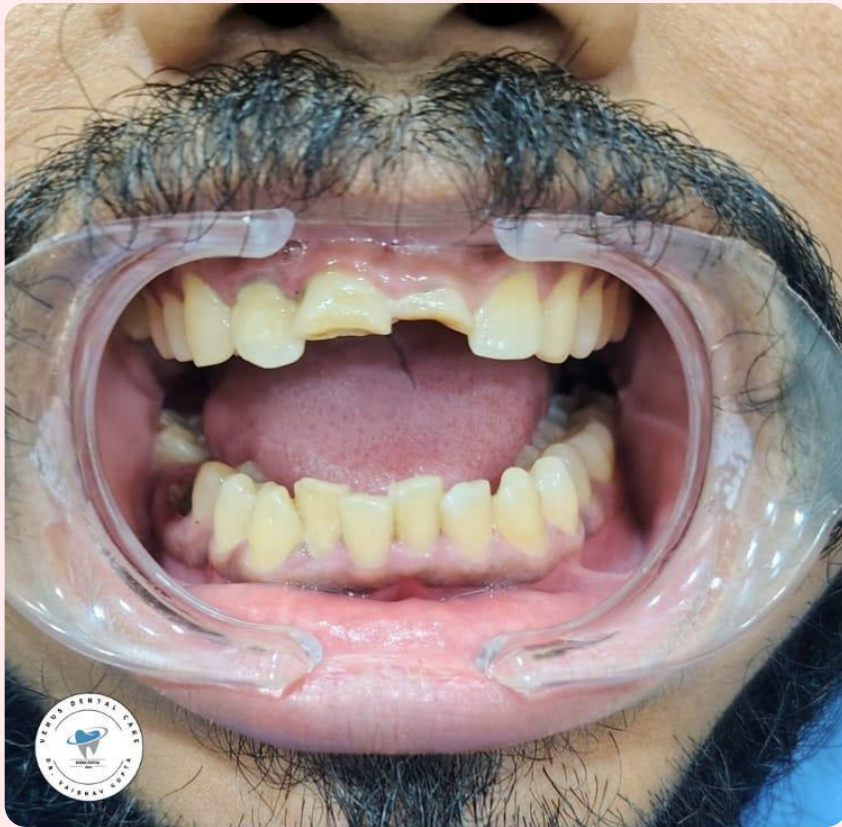


Image 1 - Intraoral preoperative



Image 2 - Radiograph of tooth no. 11,21

Radiographic evaluation

- Partial loss of crown.
- Radio-opaque linear obturating materials in full length of radicular region, suggestive of Root Canal treated teeth - tooth no. 11,21
- No periapical changes, intact lamina dura and no evidence of pathology in both teeth.

Treatment Procedure

PRE-PROCEDURE

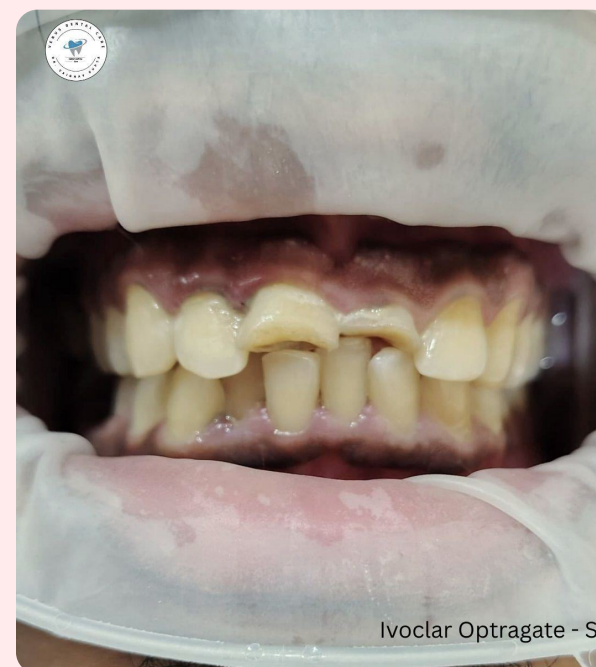
- Isolation with Optragate
- Full mouth oral prophylaxis
- Local anesthesia (Articaine 1:100000)
- Shade selection
- PTFE retraction for GCF control

RESTORATIVE STEPS

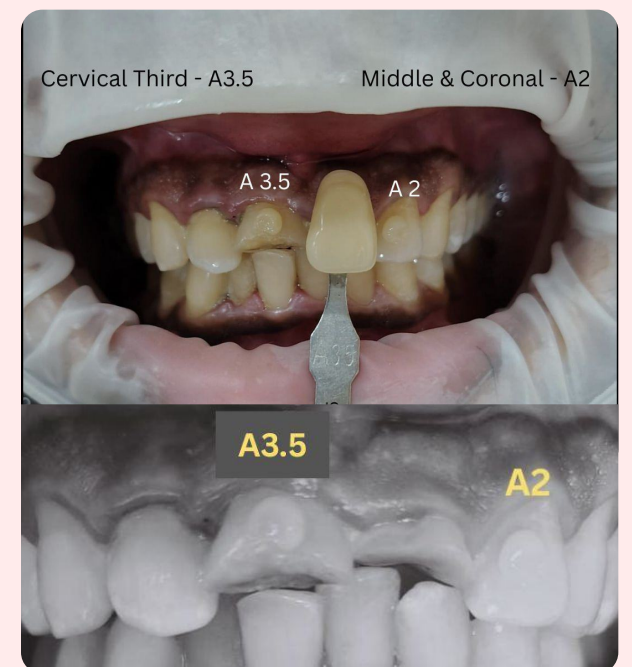
- Removal of caries & unsupported enamel
- Bevel placement
- Layering using nano-hybrid composite
- Reinforcement using fiber mesh
- Shaping anatomical contours
- Finishing and polishing (Optragloss)

MATERIAL USED :

- **Isolation:** Ivoclar Optragate S
- **Gingival retraction:** PTFE
- **Local anesthetic:** Septodont Articaine 1:100000
- **Composite:** Tetric N-Ceram (packable) + PowerFlow 2-shade A, Translucent
- **Fiber reinforcement:** Angelus Interlacing Fiber 2 mm
- **Finishing & Polishing:** Optragloss



Isolated Intraoral preoperative



Shade Selection



Contrast View & PTFE Retraction Caries & Unsupported enamel removed & bevels placed.



Treatment Results

IMMEDIATE OUTCOME

Pre-Treatment



Post-Treatment



Immediate post operative intraoral

No sharp anatomical features to blend with the neighbouring teeth.

Shade matching the natural dentition.

The transformation was immediate and remarkable. The patient was overwhelmed to see his smile restored after 15 years — a moment that reaffirmed how minimally invasive dentistry can have a profound emotional impact.

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*He expressed his joy in a heartfelt testimonial, stating he “**never thought it could look this natural again.**”*



Conclusion

Bright Smile - Reflection Of Confidence



KEY TAKEAWAYS

This case reminded me that modern restorative materials, when combined with empathy and patient-centric planning, can create life-changing outcomes.

Dentistry is not just about restoring teeth — it's about **restoring confidence, self-image, and happiness.**

- Conservative restorative dentistry can often provide an excellent alternative to implants.
- Understanding the patient's emotional and financial context is vital for case acceptance.
- A confident smile is the most rewarding result any clinician can achieve.