

FAILURES OF INDIRECT COMPOSITE VENEERS

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Introduction

Indirect composite veneers are an excellent option for economic and efficient cosmetic rehabilitation with minimal or no preparation. Because these restorations are completed extraorally, the finishing and polishing results are superior to those of direct resin composite veneer restorations.

Aim

The purpose of this study was to determinate the most common clinical failures of indirect composite veneer after 3 years of placement.

Methodology and material

In four patients, a total of n=28 indirect composite veneers were created. Microfilld light heat curing veneering composite was used to make the veneers extraorally on die models. 23 veneers were made with no preparation and 5 veneers with minimal preparation. The veneers were all cemented with light cure cement translucent shade using the total-etch technique. Over a three-year period, the veneers were examined for failiures like fractures, chipping, debonding, and marginal discoloration.



Results

In total 5 failures were observed in the period of three years, consisted of debonding n=2, fractures n=2 and n=1 chipping. No marginal discoloration was found in any veneers. All of the deboned veneers were with minimal preparation design. Percentual survival of the composite veneers was 82.1% in the period of three years.

Conclusion

Indirect composite veneers, with the development of new composite resins, can be a treatment option for patients with esthetic problems of anterior teeth when combined with good patient oral hygiene motivation. They have now matured into a predictable restorative concept in terms of longevity, periodontal response, and patient satisfaction. These veneer restorations offer a viable conservative alternative to full coverage because they avoid aggressive dental preparation, preserving tooth structure.