FAILURES OF INDIRECT COMPOSITE VENEERS

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Aim: The purpose of this study was to determine the most common clinical failures of indirect composite veneers after three years of placement.

Methodology and material: In four patients, a total of 28 indirect composite veneers (n=28) were fabricated. A microfilled, light-heat-curing veneering composite was used to create the veneers extraorally on die models. Of these, 23 veneers were fabricated without preparation, while 5 veneers required minimal preparation. All veneers were cemented using a translucent-shade light-cure cement with the total-etch technique. Over a three-year period, the veneers were evaluated for failures, including fractures, chipping, debonding, and marginal discoloration.

Results:A total of five failures were observed over the three-year period, consisting of two cases of debonding (n=2), two fractures (n=2), and one case of chipping (n=1). No marginal discoloration was detected in any of the veneers. All debonded veneers had a minimal preparation design. The overall survival rate of the composite veneers over three years was 82.1%.

Conclusion: With the development of new composite resins, indirect composite veneers can be a viable treatment option for patients with esthetic concerns regarding their anterior teeth, provided they maintain good oral hygiene. These veneers have now become a predictable restorative solution in terms of longevity, periodontal response, and patient satisfaction. As a conservative alternative to full-coverage restorations, they help preserve tooth structure by minimizing or eliminating aggressive dental preparation.