Creating esthetic smiles with Omnichroma : A Case Series

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Abstract:
Esthetic smile play an important role in day to day life of patient. Any deformity in anterior teeth creates hindrance in social acceptance. Hence the main aim becomes to restore the deformity with apt color and shade matching with adjacent natural teeth. Tokuyama dental has introduced a new product, Omnichroma in market with extensive color matching ability. Omnichroma utilizes “Smart Chromatic Technology” by which it has ability to pick up color from surrounding while traditional composite take aid of pigment and dye. In this article esthetic rehabilitation of deformity in anterior teeth with Omnichroma is presented.

Key Word: esthetic, shade, Omnichroma, colour

I. Introduction

The modern culture increasingly emphasizes the importance of physical appearance. As a result, a young and alluring smile is considered a major advantage for professional and social attainment.¹ This rationally leads esthetic and adhesive dentistry in spotlight.¹ Thus, composite resins now occupy a foremost position among restorative materials because they offer excellent esthetics and acceptableperpetuity with a much little cost compared to ceramic restorations for the treatment of anterior teeth.¹ Also, composite restorations permit minimal preparation to provide the replacement of the decayed or missing tissues.²,³

Teeth are composed of a number of colors and individual tooth color also varies from the gingival margin to the incisal edge.⁴ Dentin gives the basic color to the tooth. This color is not completely deduced by the observer, as the enamel regulates the chroma and the value of the hue according to its greater or less thickness. As composite are used by free hand technique, shade matching becomes of utmost importance. However, the countless shade matching concepts that manufacturers use to make their materials can be difficult for clinicians and may prevent the correct application of shade of restoration.⁵,⁷

OMNICHROMA is a structurally colored universal composite with a single hue designed for use with most direct restorative clinical cases.⁷ Its extensive coloring matching capability banishes the need for a shade selecting method and simplifies composite inventory, granting clinicians to rescue chair time, waste of undesirable composite shades, and reliance on shade-matching techniques.⁶,⁸ Thus providing swift and effortless approach for creating appealing and functionally aesthetic restorations.⁵ This case series represents three anterior rehabilitation cases restored with Omnichroma.

II. Case Series

Case report 1
A 36 year old patient with chief complaint of ragged upper front tooth reported to the Department of Conservative Dentistry and Endodontics and desired to get the teeth restored. Patient gave history of fall 3 months back. On clinical examination Ellis class II fracture was seen with 11 and 21 involving only enamel and dentin. Patient gave history of slight sensitivity with same teeth on consumption of cold water.

Surrounding hard and soft tissues were normal. Patient did not have pain, teeth were non tender on percussion. Electric pulp testing of fractured teeth gave normal response as that of adjacent teeth. Patient had a
normal overjet and overbite. Based on these factors, esthetic build up with Omnichroma composite resin was decided and explained to patient.

Preoperative photographs are taken before starting the procedure. The area to be restored was cleaned and dried. After air drying the etchant (37% phosphoric acid) was applied for 15 seconds on concerned teeth. Then the etchant was removed using water spray for 20 seconds and again dried. Then bonding agent was applied and slightly blown with air and then cured for 20 seconds. As Omnichroma is material of choice there is no need of shade matching, so material Omnichroma was applied layer by layer (thickness of 1-2 mm) and cured for 30 seconds each time. After complete build up, finishing and polishing was done for esthetic concern and to resist plaque accumulation.
Creating esthetic smiles with Omnicroma: A Case Series

Case report 2
22 year old patient with complaint of fractured anterior teeth due to trauma visited to Department of Conservative Dentistry and Endodontics. On clinical examination it was Ellis class II fracture with 21. The case is treated in similar manner as in case 1.

Case report 3
21 year old patient with complaint spacing between teeth visited to department of Conservative Dentistry and Endodontics. On clinical examination it was midline spacing between 11 and 21. The case was treated by free hand build up by Omnicroma.

III. Discussion
In times of need of utmost esthetic importance, an appealing smile is considered a major advantage for professional and social achievement. Unaesthetic teeth not only affect appearance but also morale of patient. Management of patients with high esthetic demands prove a challenging situation to clinician. Hence there is constant search of materials with high esthetic ability and along with simplicity to use such materials.

In the treatment plan the initial option considered should be the most conservative one that will achieve all the desired objectives of both the patient as well as the dentist. Direct composite restoration technique is minimally invasive, economical and successful in repairing tooth fracture with excellent longevity in carefully selected cases. But the process of shade selection proves enough cumbersome. As demand for better esthetics increases technology for dental materials evolves moving towards single shade composite Omnicroma.

OMNICROMA, according to the company, uses "smart chromatic technology" to capture the structural colour of its environment, whereas traditional composites require dyes or pigments. This is accomplished through the size of its filler particles. OMNICROMA is a composite that offers extensive spectrum matching in an additive colour mixing system by providing red-to-yellow structural colour similar to actual teeth.

As previously said, Omnicroma generates structural colour (smart chromatic) and covers all VITA traditional shades. Structural colour is expressed solely through the physical qualities of light, not through pigments or dyes. This is accomplished by altering the morphology of the filler particles such that they reflect colour.
Creating esthetic smiles with Omnichroma: A Case Series

IV. Conclusion

Because of its numerous advantages, the Omnichroma material is a good substitute for attractive restorative material and anterior tooth rehabilitation. It takes less time, adapts effectively to the tooth, and instantly takes the shade of neighbouring teeth, restoring normal tooth form and contour. Omnichroma is a good material to use for quick and effective results in anterior aesthetic areas.

References

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