

THE KEYS OF SUCCESSFUL POSTERIOR RESTORATIONS..

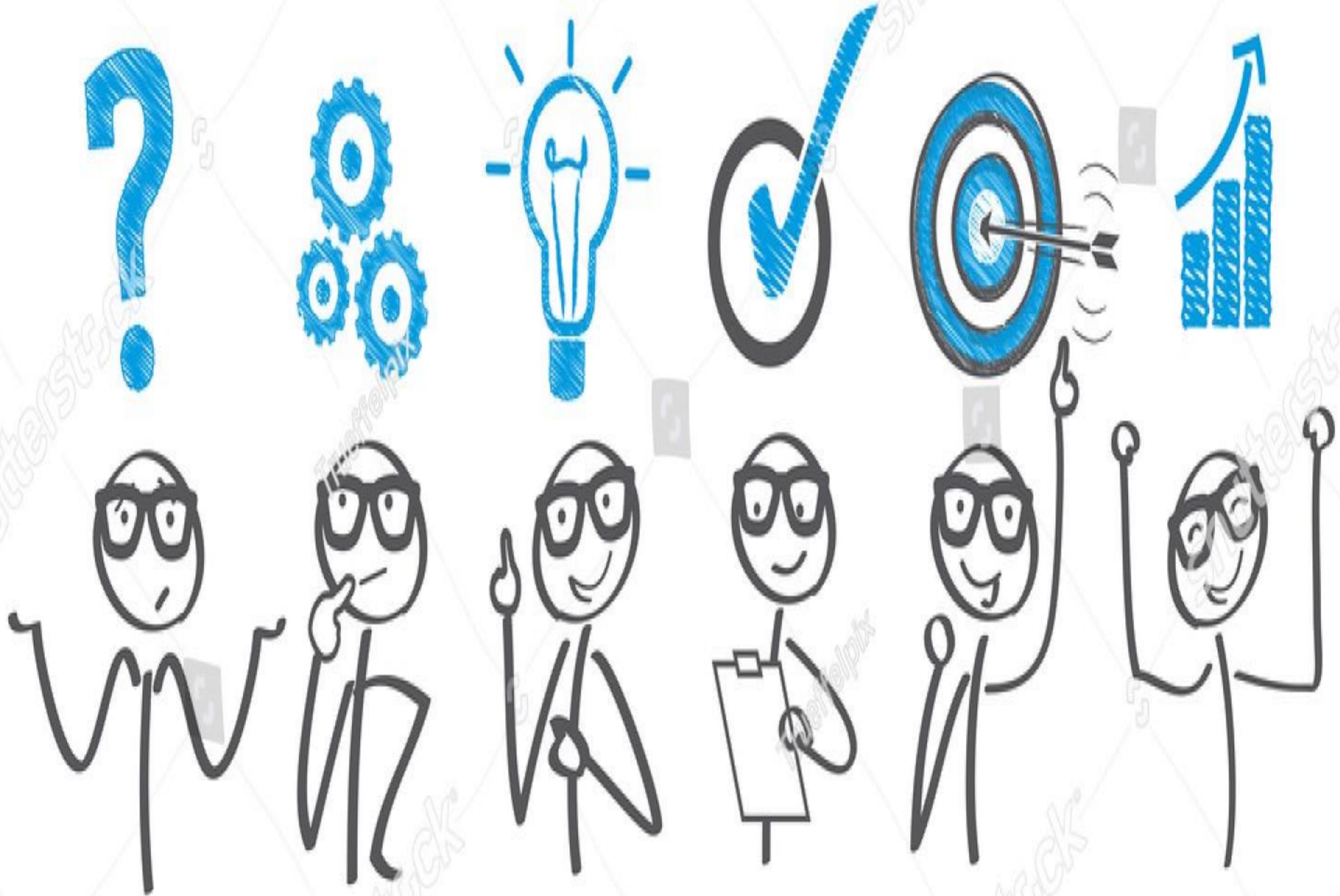


THE KEYS OF SUCCESSFUL POSTERIOR RESTORATIONS



DR. MOHAMED TALAL

DAILY CHALLENGE ..



IN YOUR FACE:

Facing the Realities of Stress
in Dentistry

by Jen Butler, MEd, BCC



Different types of head aches

MIGRAINE



STRESS



HYPERTENSION



WORKING IN
DENTISTRY

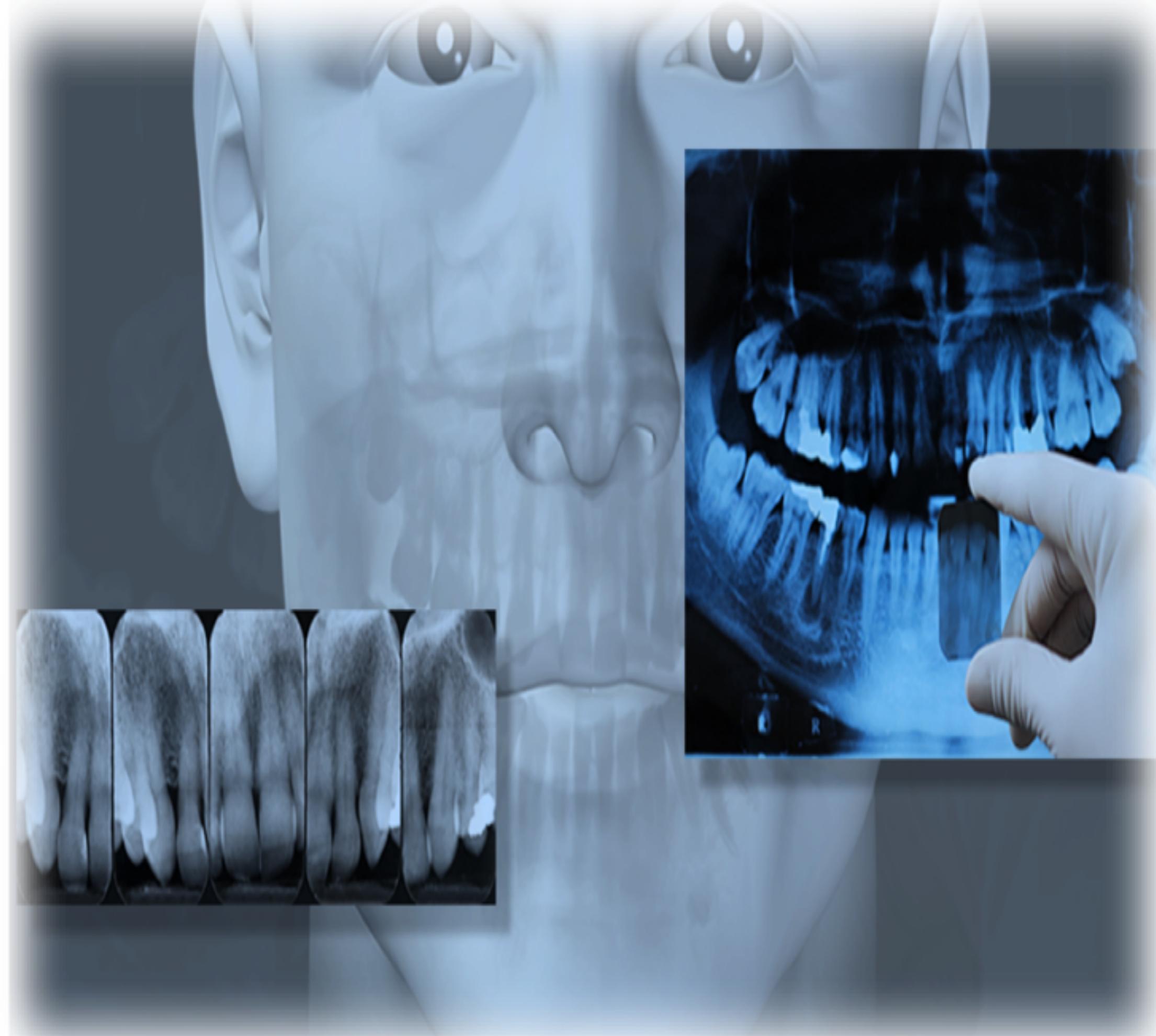


Why Composite in Posteriors ?

Esthetics .



Diagnóstico

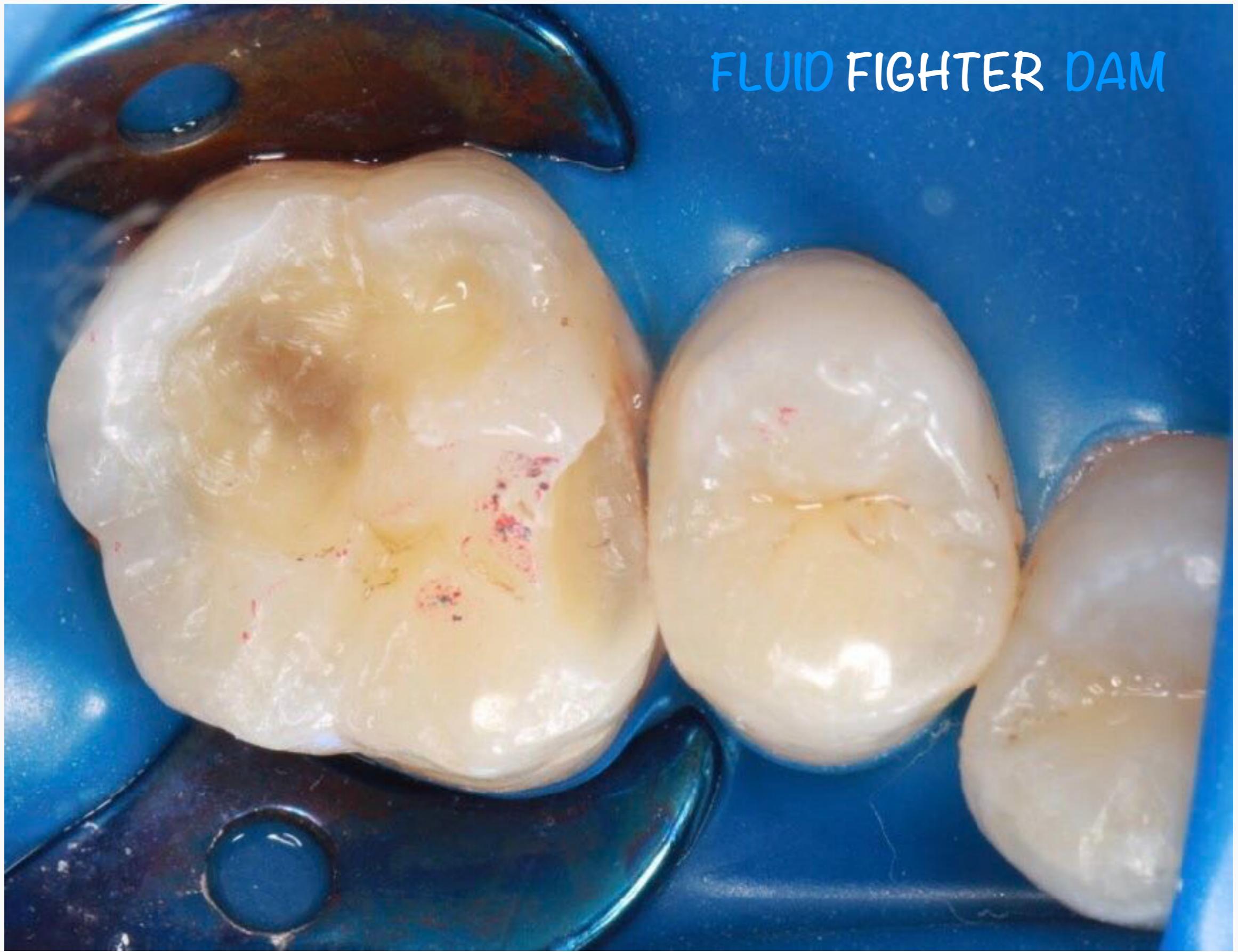




EXPOSED DENTINE OLD COMPOSITE PROXIMAL CAVITIES



FLUID FIGHTER DAM











MOHAMED TALAL



M O H A M M E D T A L A L

A photograph showing three dental crowns placed on a blue plastic tray. A metal dental holder is positioned to the left, partially covering the first two crowns. The crowns are made of a translucent, light-colored material, possibly ceramic or resin composite. They have a slightly irregular, organic shape. The tray is blue and appears to be made of a flexible plastic. There are some small, faint markings or numbers on the tray surface to the right of the crowns.

M O H A M E D T A L A L

M O H A M E D T A L A L

This image shows three dental crowns placed on a blue tray. A metal dental holder is positioned on the left side, gripping the first two crowns. The crowns are made of a translucent material, likely ceramic or resin composite, and exhibit a mottled pattern of light beige, cream, and brownish stains. The middle crown has a distinct white porcelain inlay on its mesial surface. The text "MOHAMED TALAL" is overlaid across the middle crown in a white, sans-serif font.

M O H A M M E D T A L A L

MOHAMED TALAL



A close-up photograph of three dental crowns placed on a blue tray. The crowns are light-colored and appear to be made of ceramic or porcelain. They are arranged side-by-side. In the background, there are various dental instruments, including a dental mirror, a probe, and a pair of forceps. The tray is a standard blue color used in dental laboratories.

M O H A M E D T A L A L

M O H A M E D T A L A L

M O H A M E D T A L A L



M O H A M E D T A L A L



M O H A M E D T A L A L

M O H A M E D T A L A L

MOHAMED TALAL

A close-up photograph of the upper teeth of a person with dark hair. The teeth are light-colored and show some signs of wear and discoloration. Overlaid on the image is the text "MOHAMED TALAL" in a white, sans-serif font. The letters are slightly transparent, allowing the underlying image of the teeth to be seen through them.

MOHAMED TALAL

M O H A M M E D T A L A L

A close-up photograph of a dental model of the upper arch. The teeth are light-colored and show some wear and discoloration. A faint watermark with the text "MOHAMED TALAL" is visible across the center of the image.

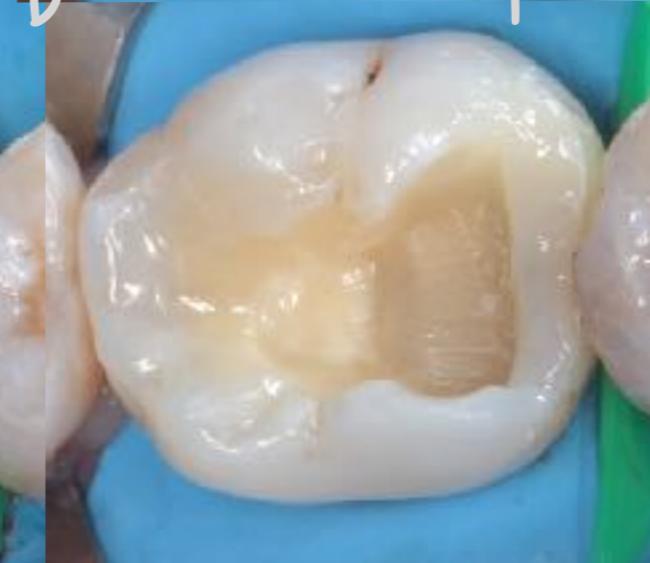
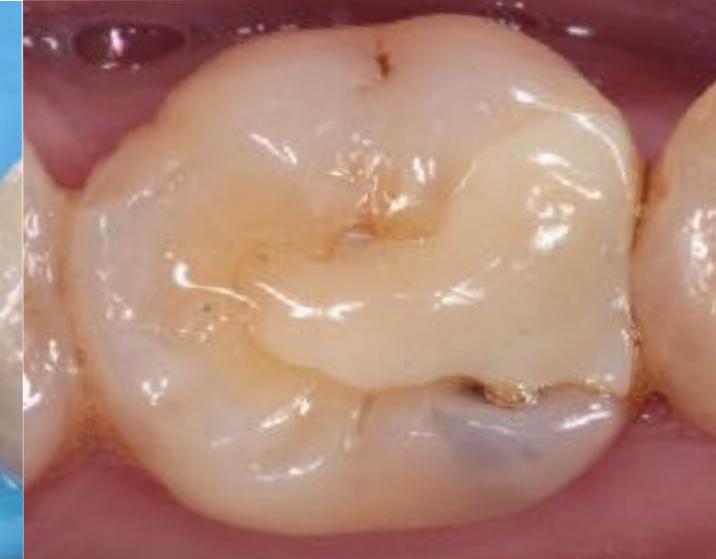
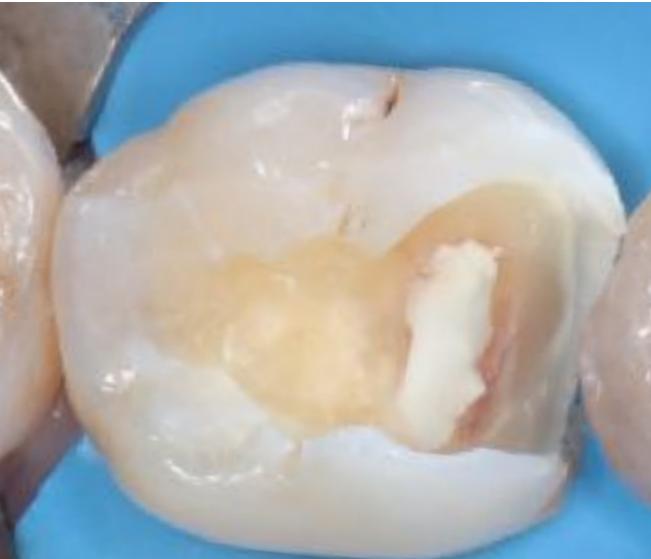
M O H A M E D T A L A L



M O H A M E D



A handwritten signature in black ink, appearing to read "Baghdad Smile".

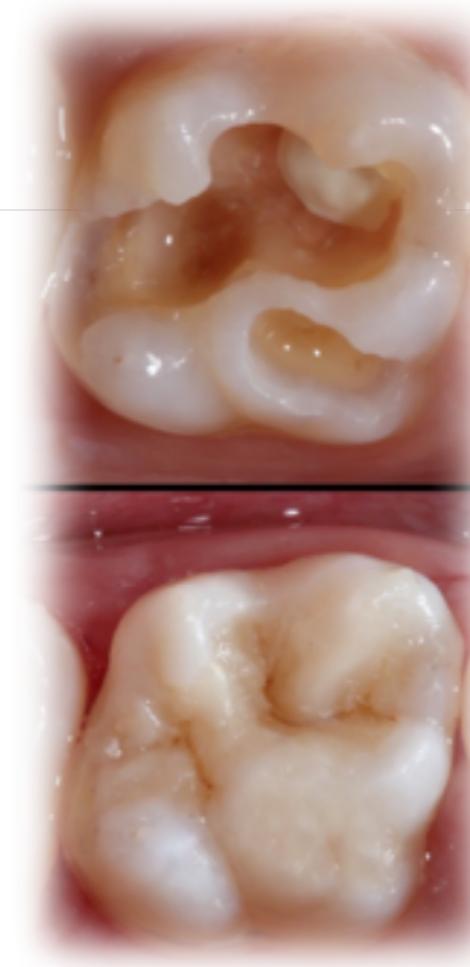


Cavity preparation

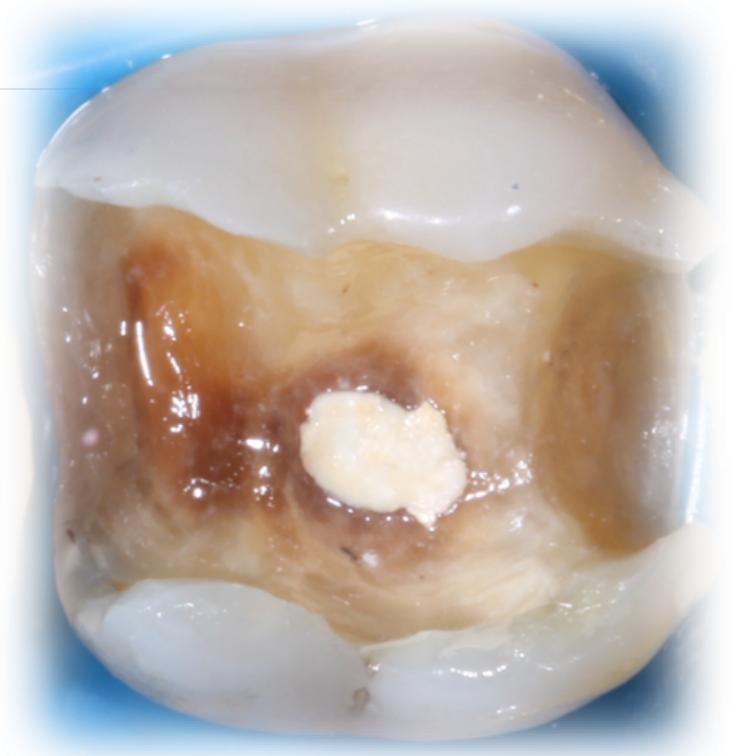




shallow..

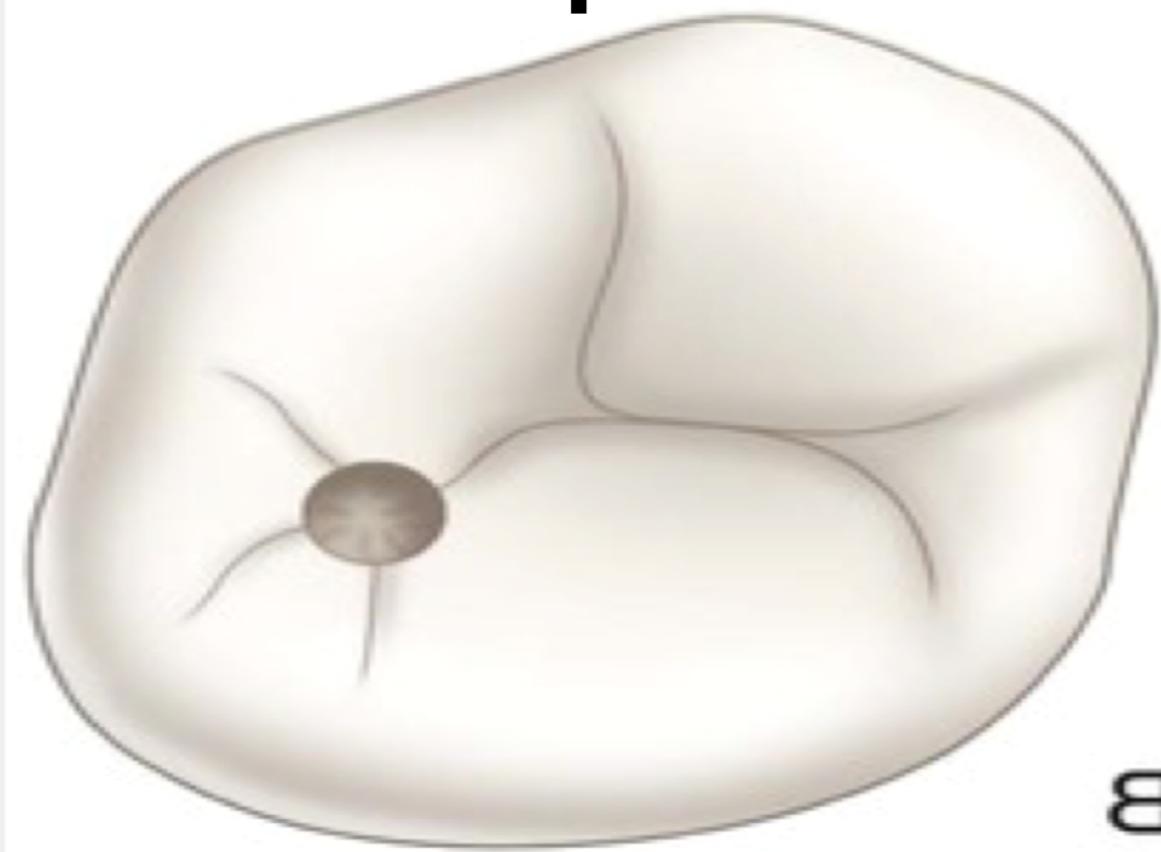


**Direct
capping..**

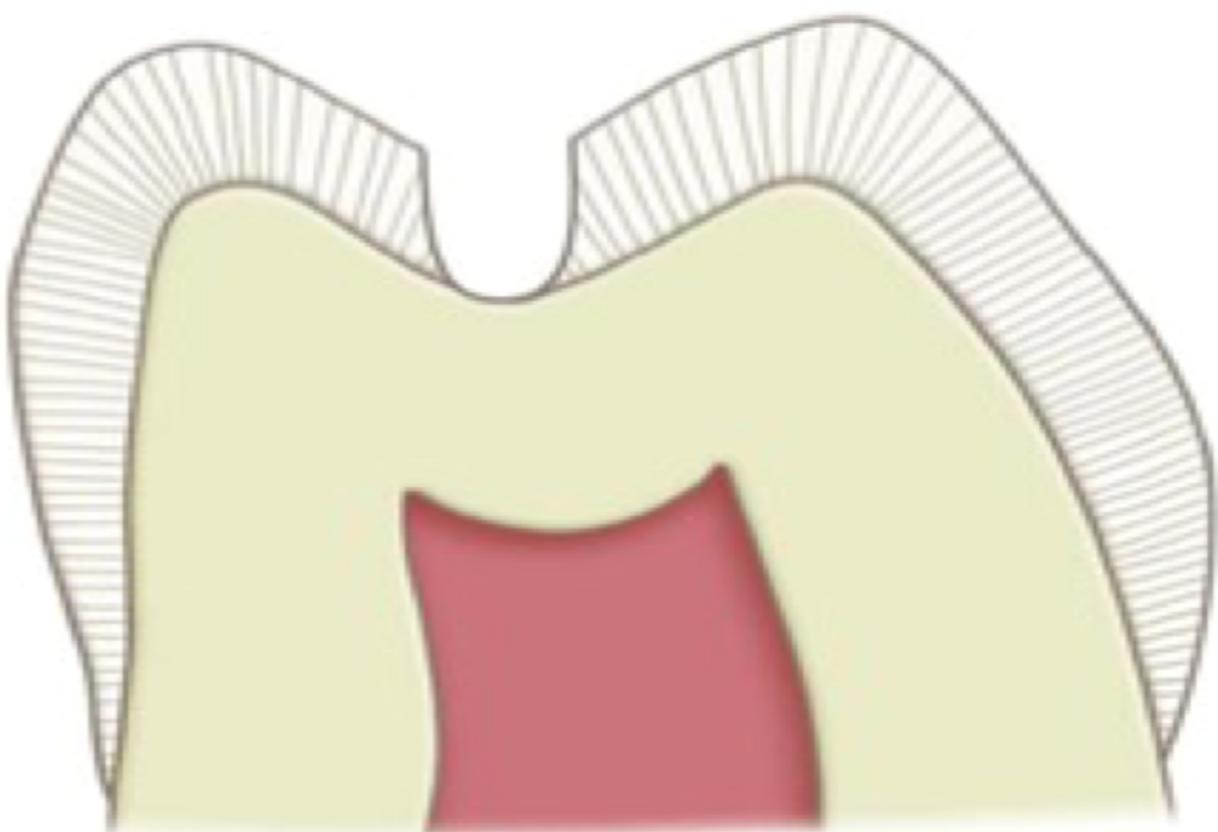


**Indirect
capping..**

**class 1 lesions scooped out appearance
with small round bur The pulpal floor
not flat
No ext. for prevention.**



B



- When only **proximal box** is carious and no lesion in occlusal surface
1. **BOX ONLY** preparation

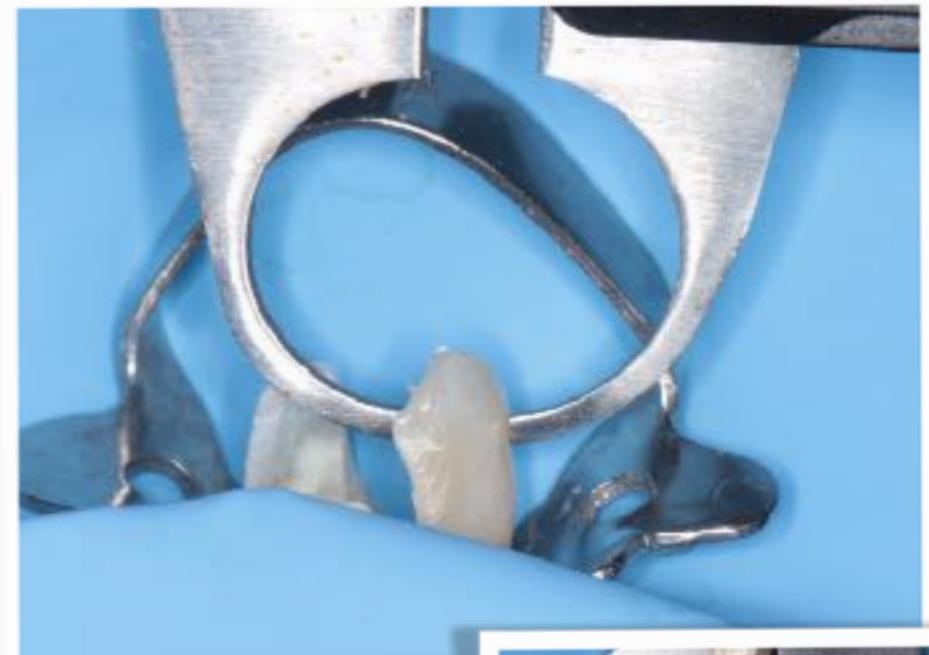


2- Slot technique

C I III design









Isolation and bonding



Isolation and bonding

Dental Materials Journal 2014; 33(4): 646–650

Effect of artificial saliva contamination on adhesion of dental restorative materials

Kiseki SHIMAZU¹, Hiroyuki KARIBE¹ and Kiyokazu OGATA^{1,2}

¹ Department of Prosthetic Dentistry, The Nippon Dental University School of Life Dentistry at Tokyo, 1-8-20 Fujimi, Chiyoda-ku, Tokyo 102-8156, Japan

² Division of Dentistry, Tokyo Metropolitan Omotesando Medical Center, 2-6-22 Muzashidai, Tachikawa-shi, Tokyo 190-0531, Japan

Corresponding author: Kiseki SHIMAZU; E-mail: kiseki-s@sky.ndu.ac.jp

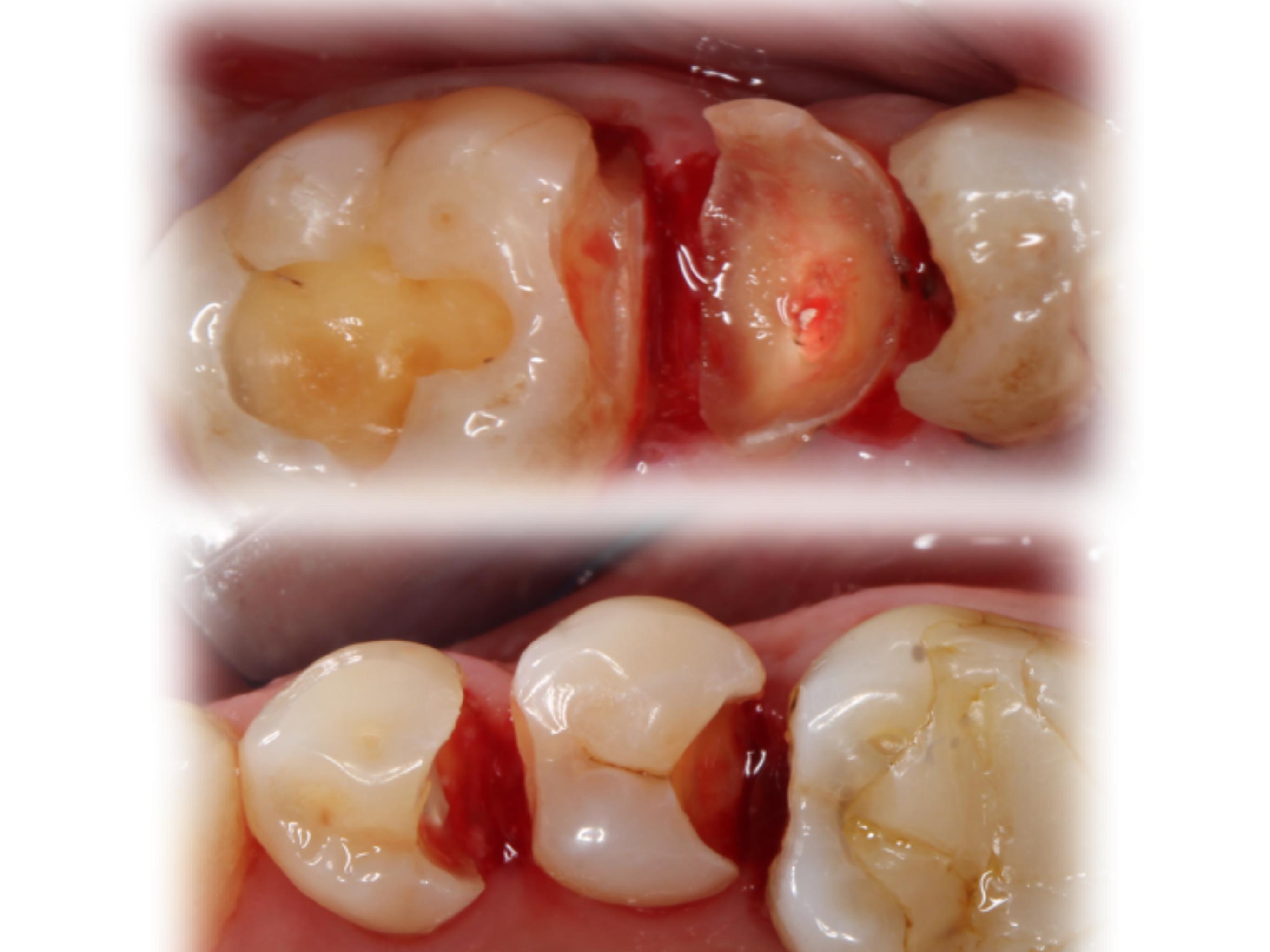
The purpose of this study was to evaluate the effects of artificial saliva contamination on three restorative materials, namely, a glass ionomer cement (GIC), a resin-modified GIC (RMGIC), and a composite resin (CR), for which two different etching adhesive systems were used. Thus, three surface conditions were created on bovine teeth using artificial saliva: control, mild saliva contamination, and severe saliva contamination. The dentin bond strength for CR was significantly lower after artificial saliva contamination. There were, however, no significant differences among the three surface conditions in terms of the dentin and enamel bond strengths of GIC and RMGIC. Moreover, CR exhibited significantly greater microleakage after artificial saliva contamination, whereas no significant differences were found in GIC and RMGIC. The results showed that artificial saliva contamination did not affect the shear bond strengths of GIC and RMGIC or their degrees of microleakage.

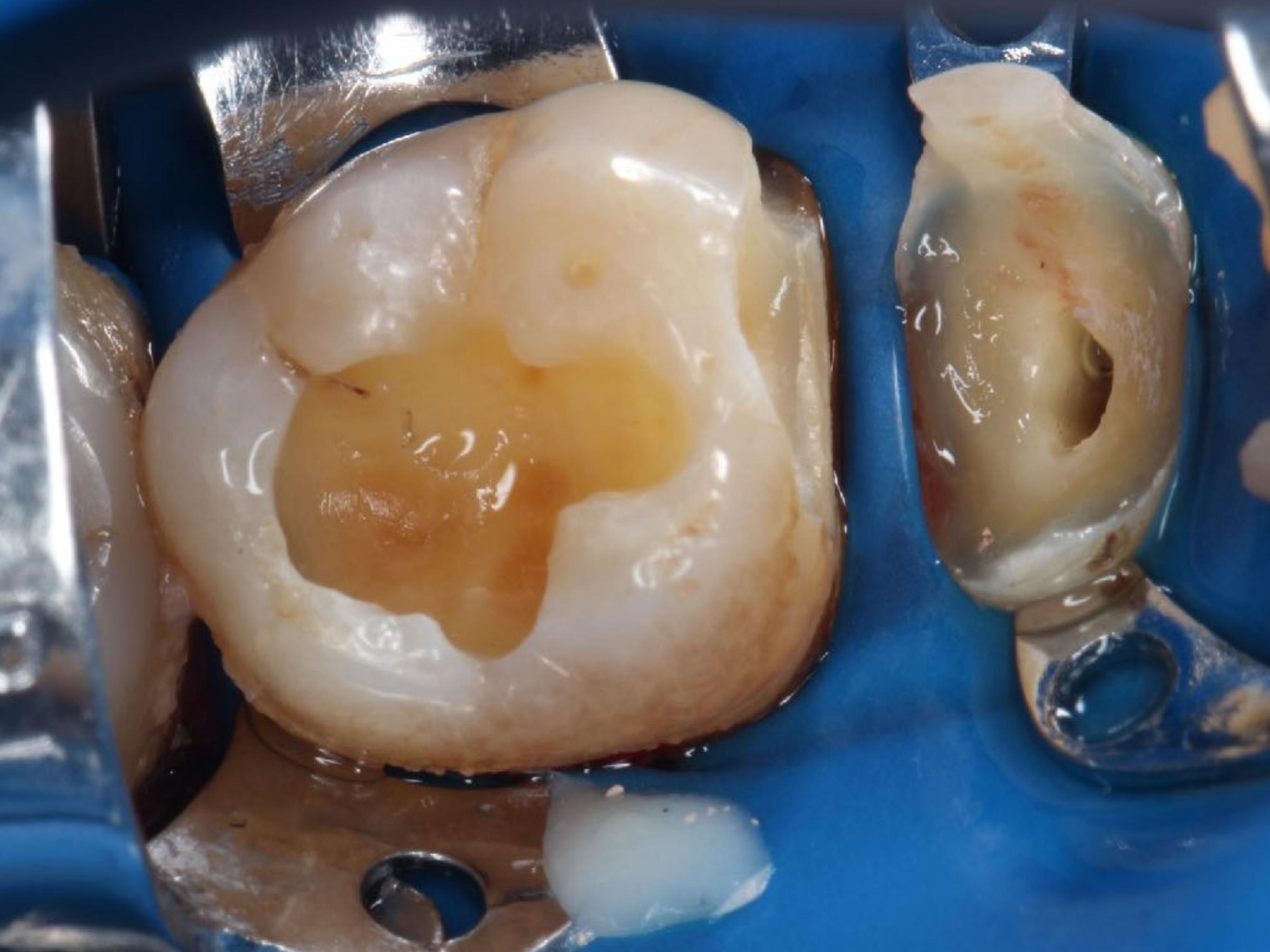
Keywords: Saliva contamination, Glass ionomer cements, Composite resins, Bond strength, Microleakage

CONCLUSIONS

On the basis of the results of the study, the following conclusions were drawn:

1. Contamination with artificial saliva does not affect the shear bond strengths of GICs and RMGICs; this is true for both bovine enamel and dentin.
2. The bond strength of CRs with bovine dentin is reduced significantly when a total-etching adhesive or a self-etching primer is used and the restorations are subjected to contamination with artificial saliva.
3. The microleakage in the case of cavities whose bovine enamel margin is filled with a GIC or an RMGIC does not increase under artificial saliva contamination after thermocycling.

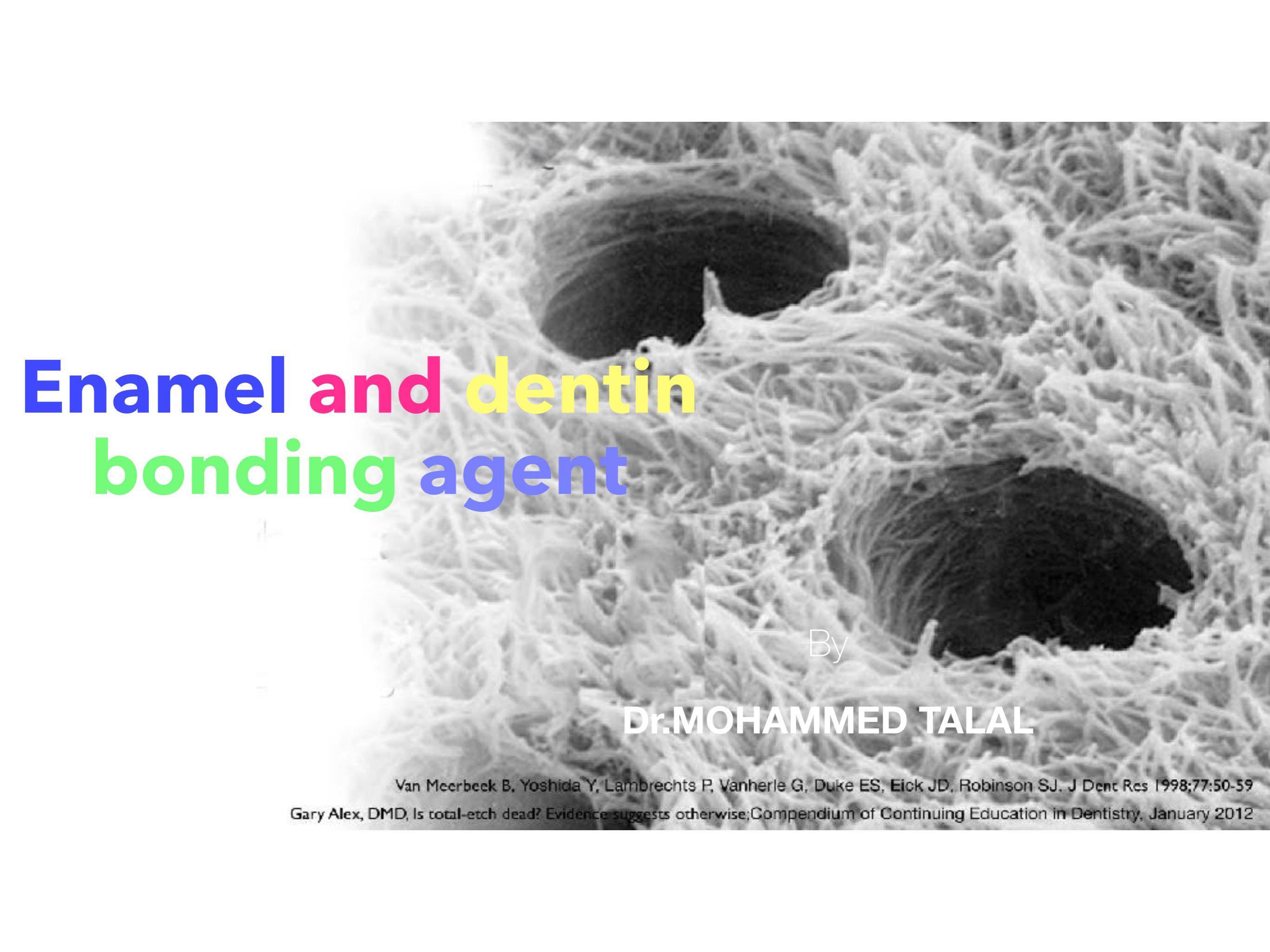












Enamel and dentin bonding agent

By

Dr.MOHAMMED TALAL

Van Meerbeek B, Yoshida Y, Lambrechts P, Vanherle G, Duke ES, Eick JD, Robinson SJ. J Dent Res 1998;77:50-59

Gary Alex, DMD, Is total-etch dead? Evidence suggests otherwise; Compendium of Continuing Education in Dentistry, January 2012

Adhesive agents



Contemporary Dental Adhesive Systems				Characteristics			Longevity
System Mode	Delivery	Adhesion Steps			Acidity	Hydrophilicity	Bond Stability ^b
		Etching	Primer	Adhesive			
Etch-and-rinse	3-step				+	+	++++
	2-step				++	++	+++
Self-etch	2-step				+++	++	++++
	1-step				++++	+++	+
Universal	1 or 2 steps ^a				+++	++	+ (+) +

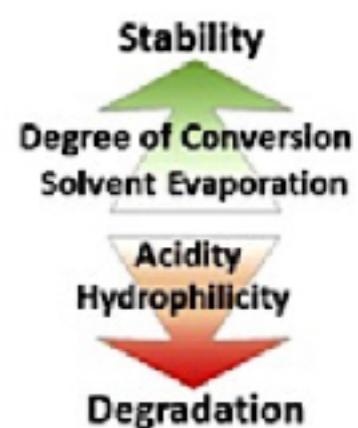
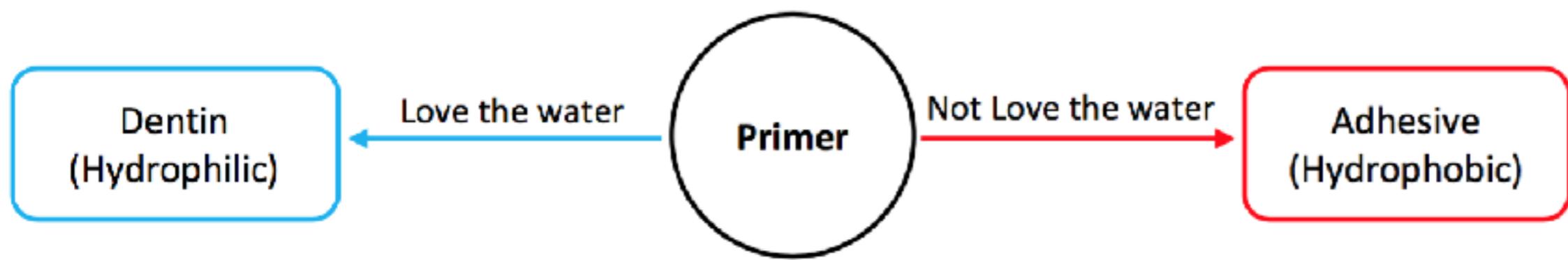
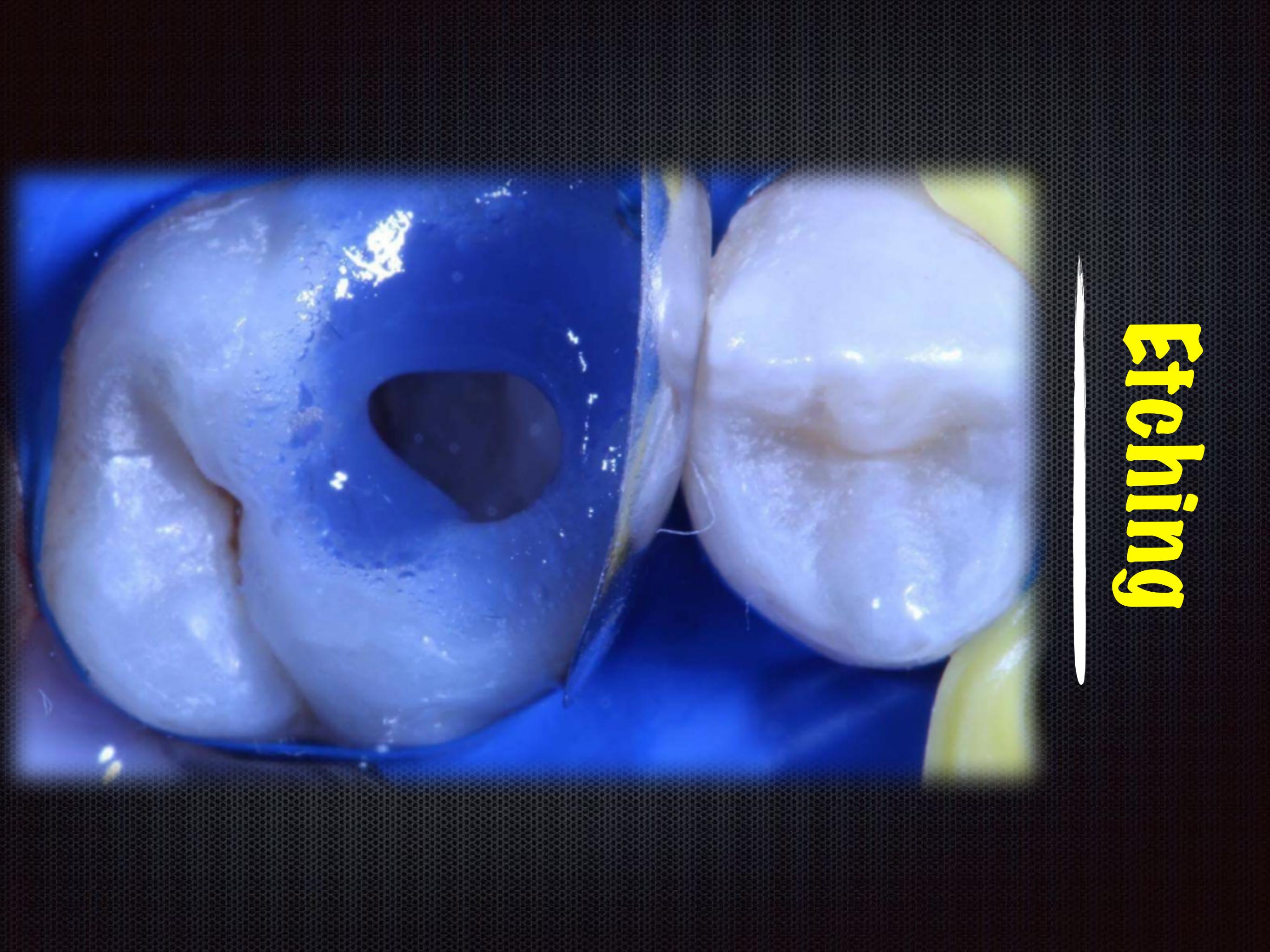


Fig. 1. Current contemporary dental adhesives systems and characteristics affecting the long-term stability of dentin–resin interfaces. Symbol (+) indicates scale ranging from lowest (+) to highest (+++). ^a The adhesive system support optional pre-etching of enamel or dentin (2-step) or self-etching mode (1-step). ^b Depicts relative values of dentin bond strength, note that average bond strengths can greatly vary among brands, studies and application modes (for universal systems). Degree of conversion = polymerization rates of adhesive.



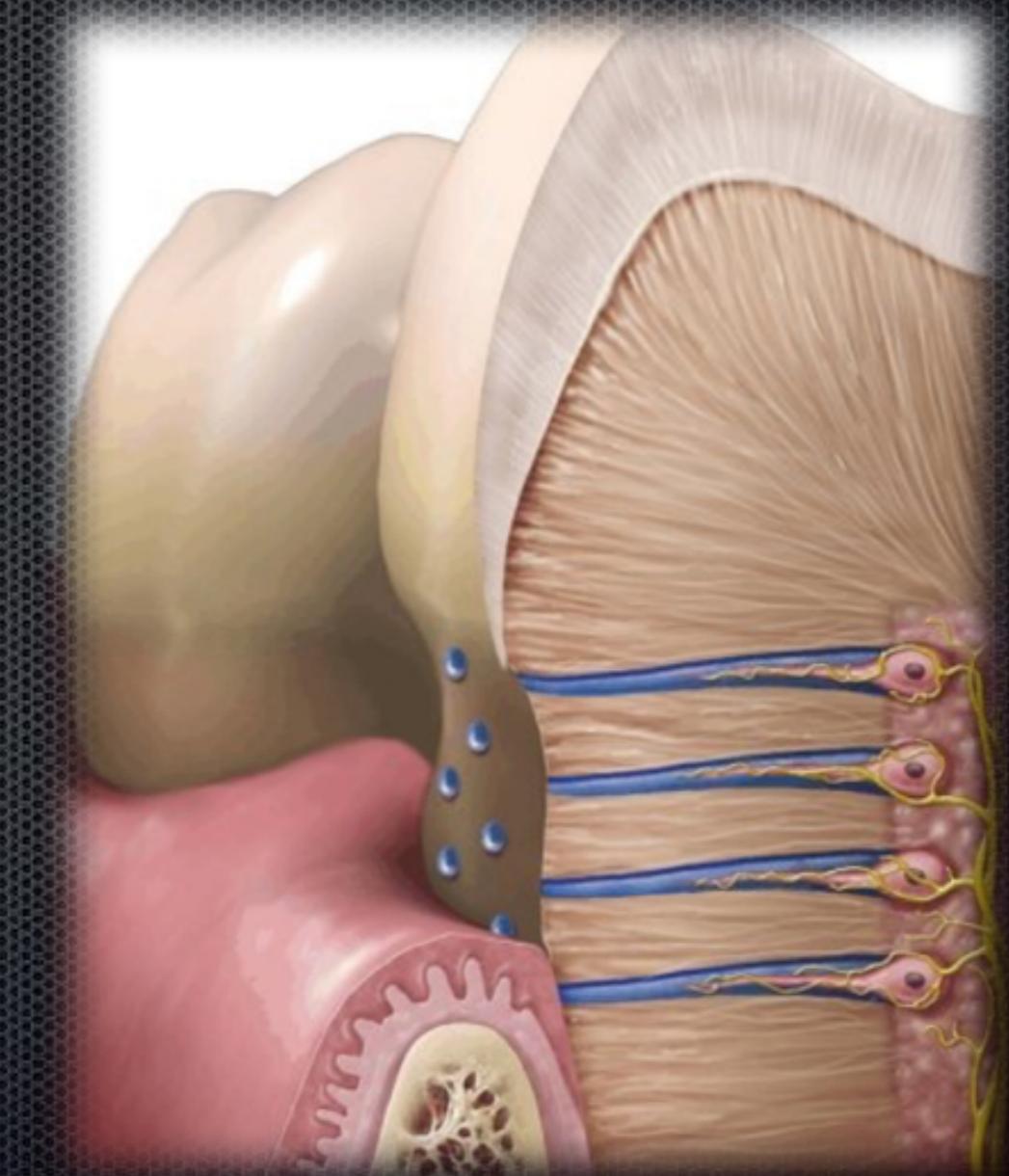


Eating

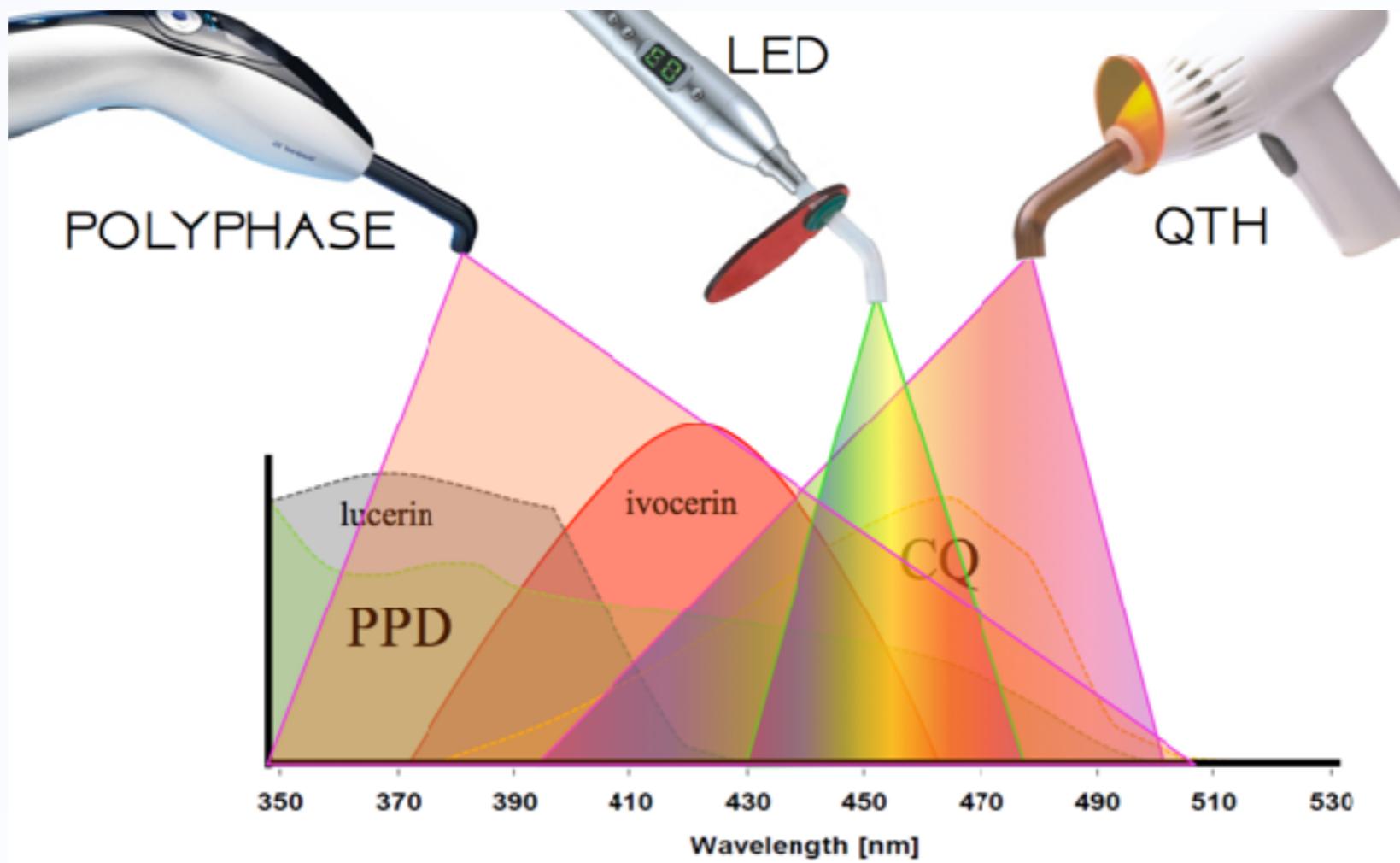


what about
sensitivity ?

NO LINING...



LIGHT CURING DEVICE SELECTION ..

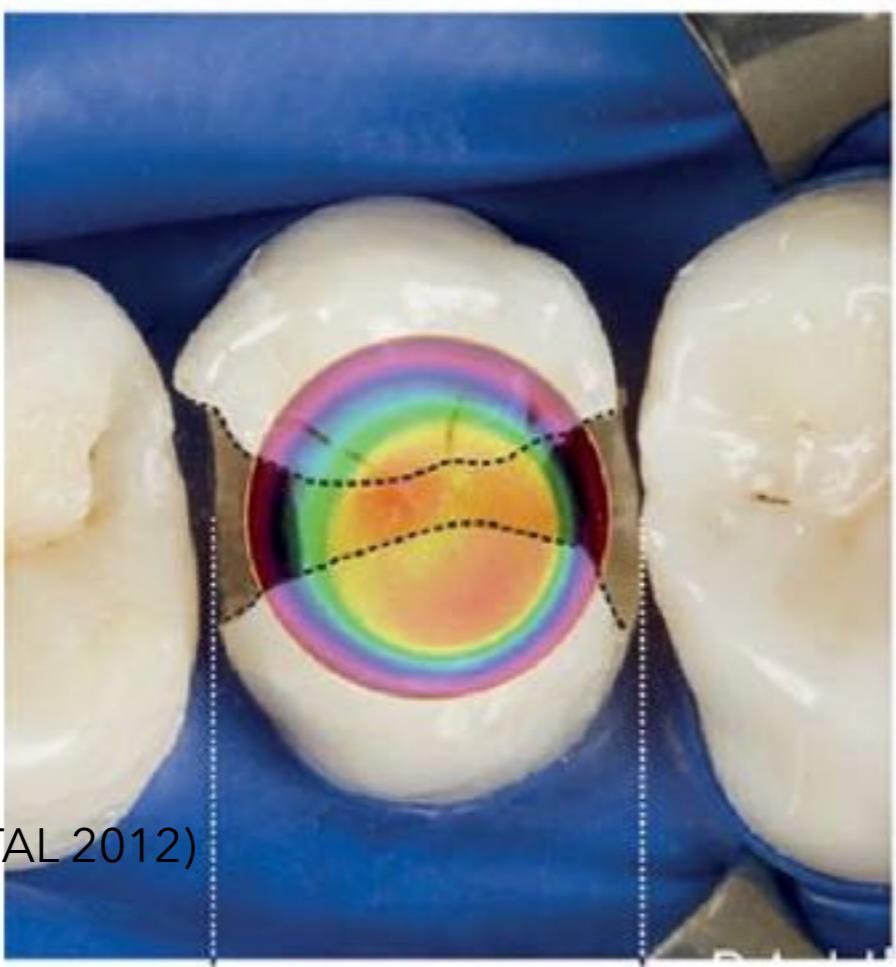
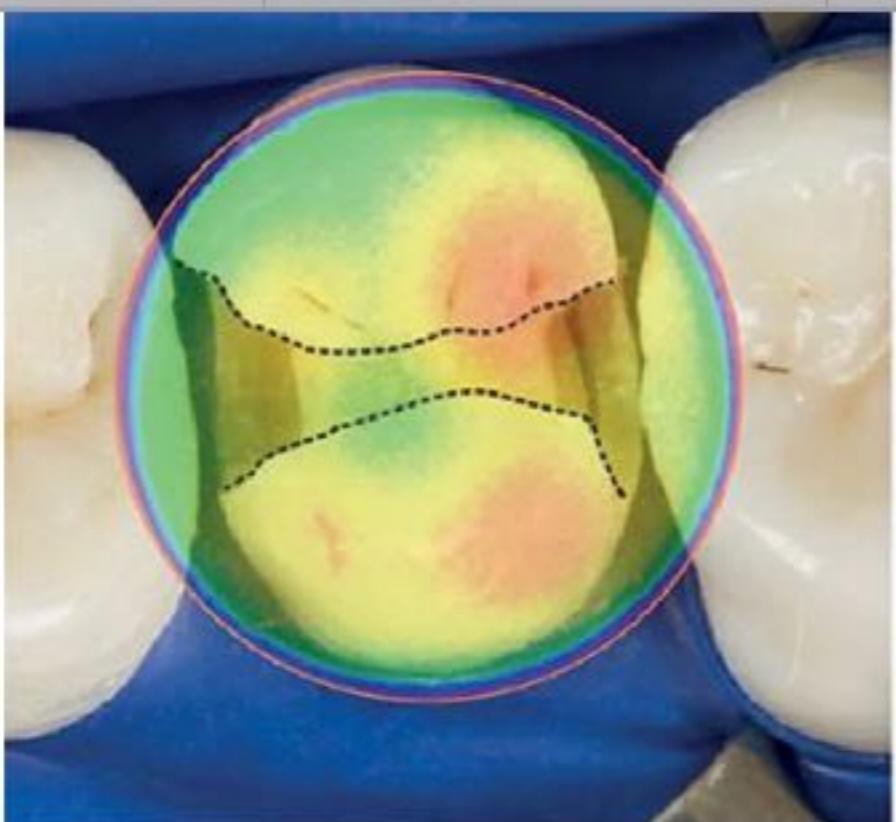


100%

50%

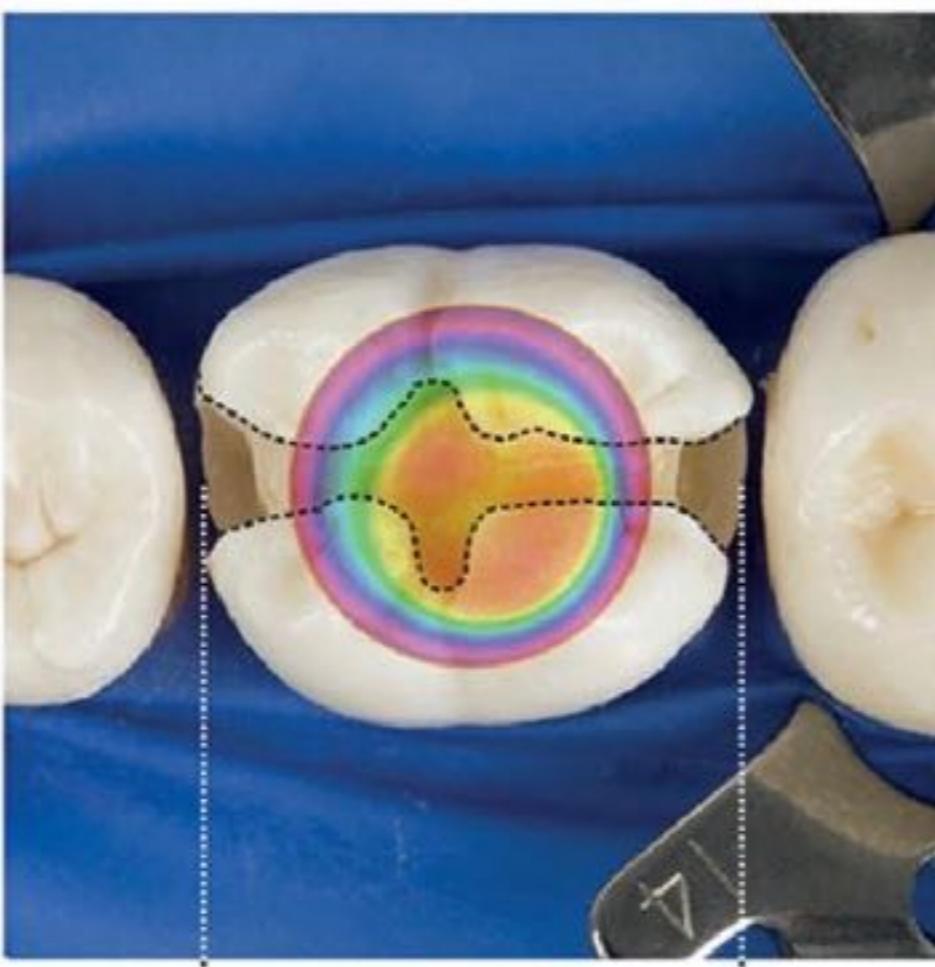
0%

Slide Name 64



LEENDERT ET AL 2012)

8 mm

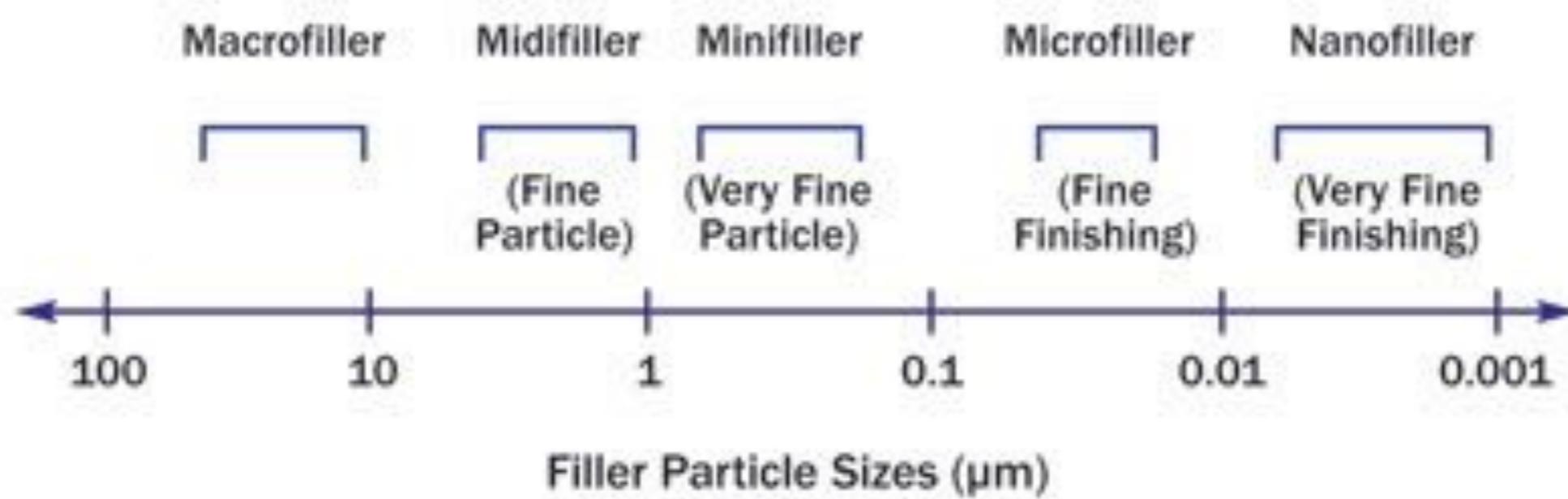


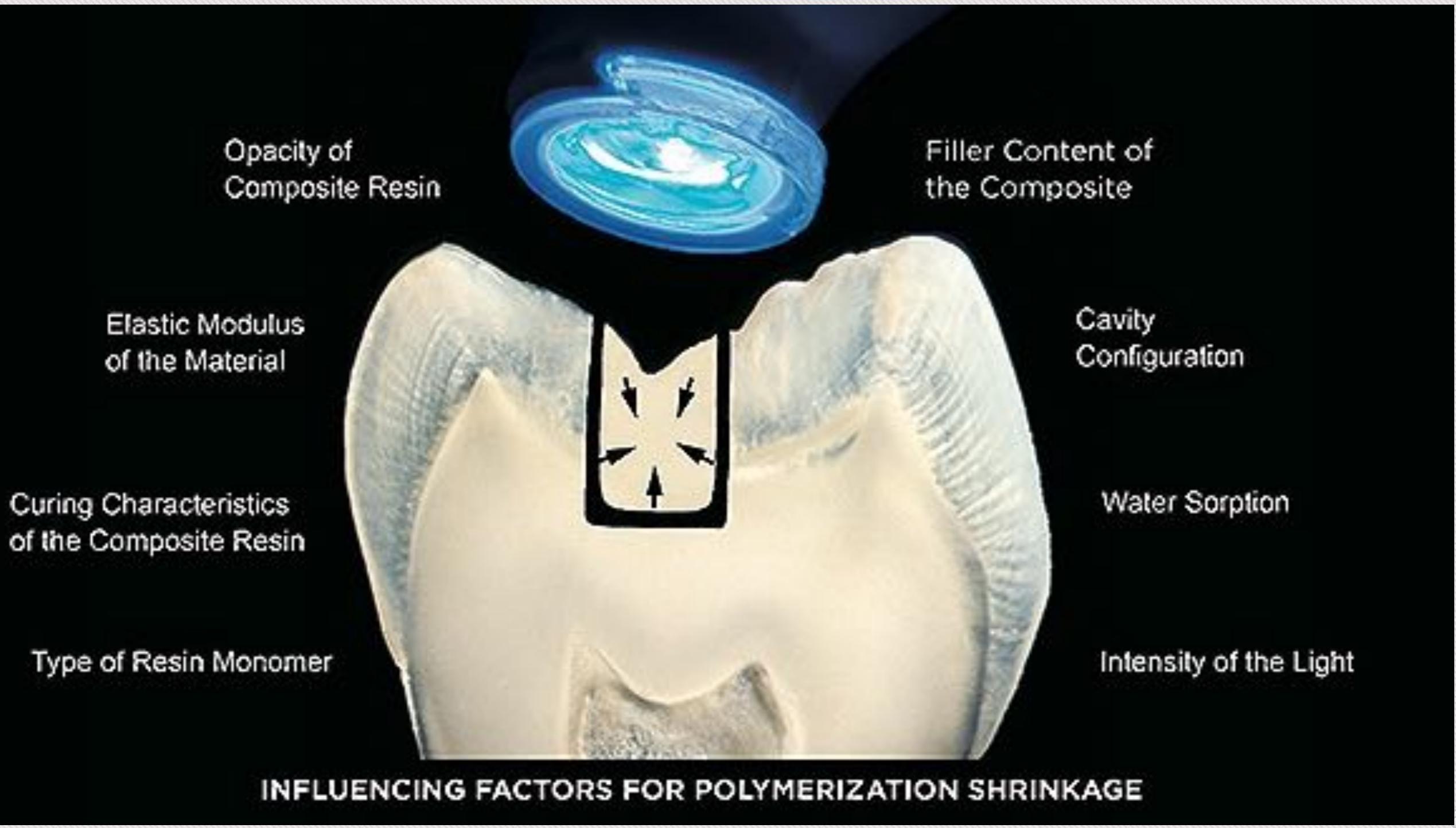
10 mm



**POST. COMPOSITE
APPLICATION**

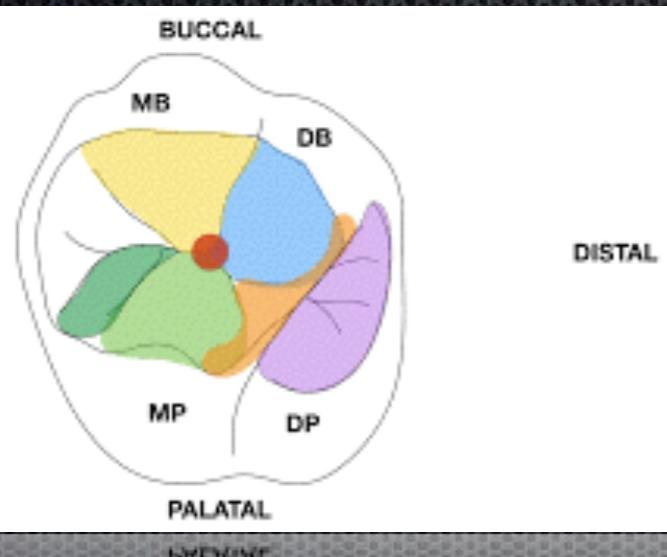
Types of Composite





METHODS :

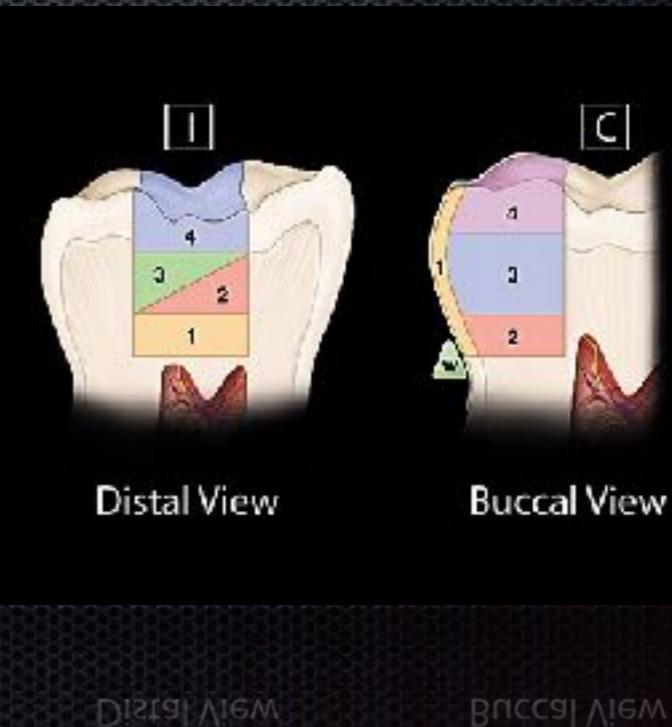
VERTICAL



HORIZONTAL

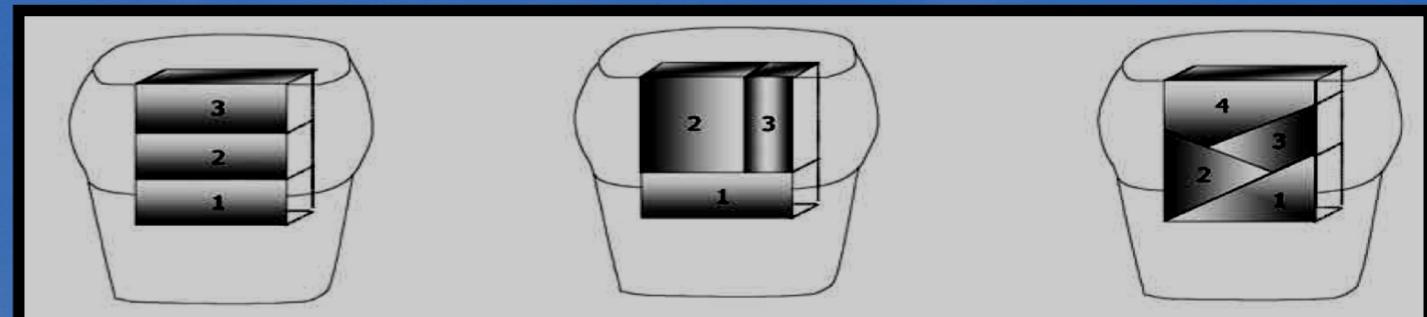


OBLIQUE

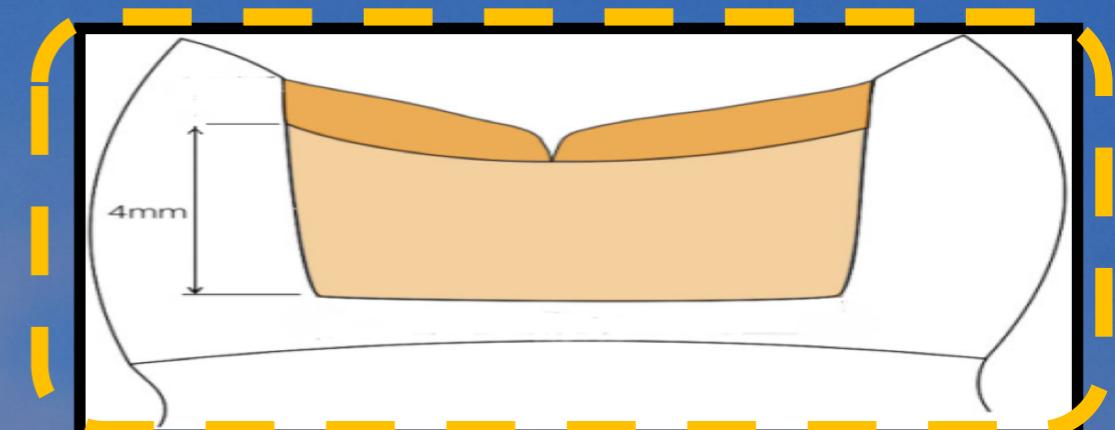


What are the Placement techniques of direct posterior restoration?

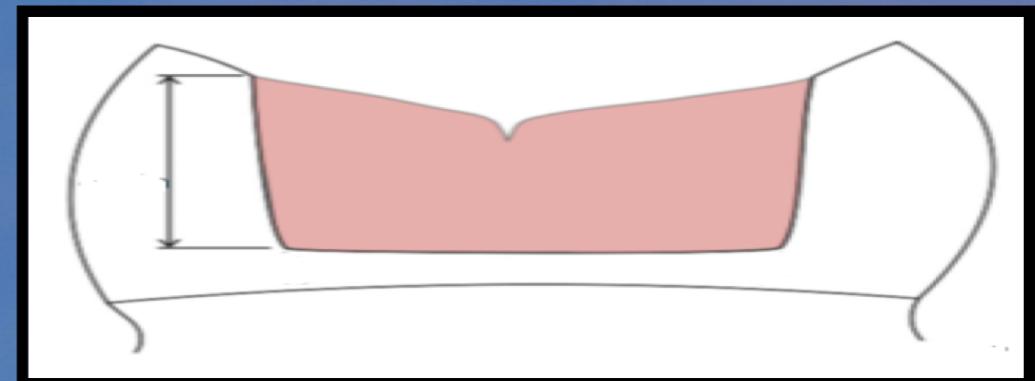
I. The Layering Technique: Horizontal, vertical and oblique

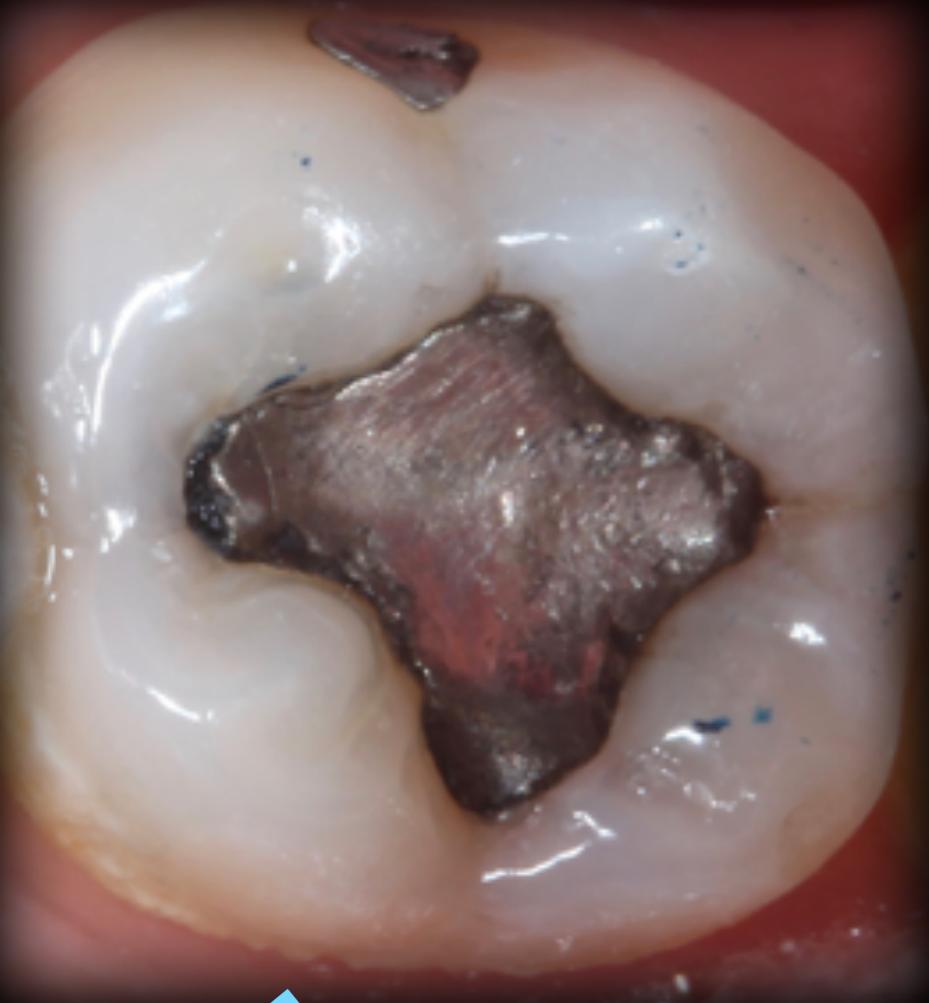


II. Two-steps amalgam-like technique (Bulk-fill flowable and regular composite): The presence of Stress Relief Monomers Specific Photoinitiators



III. Single-step amalgam-like technique(Bulk-fill regular composite)

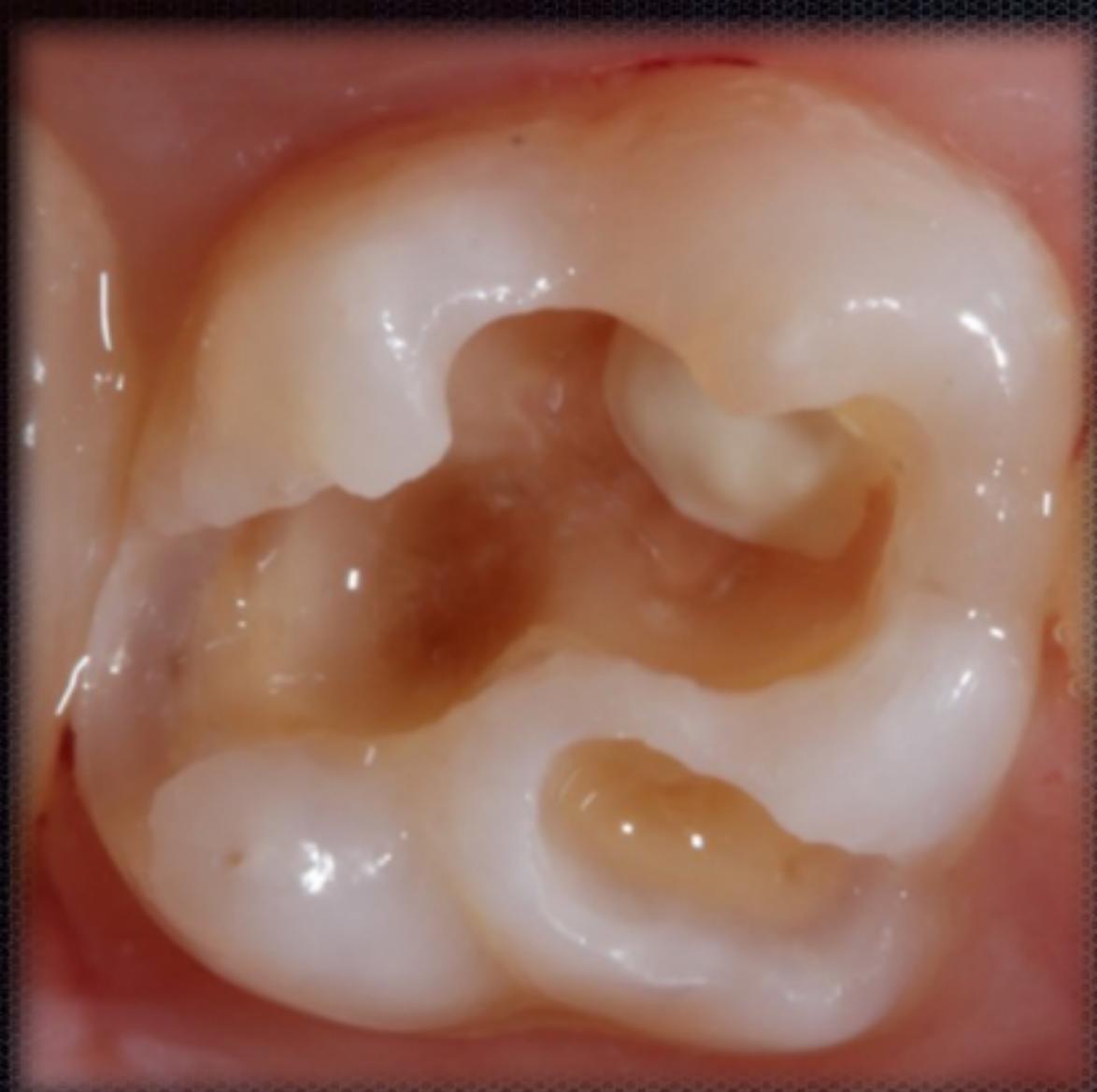




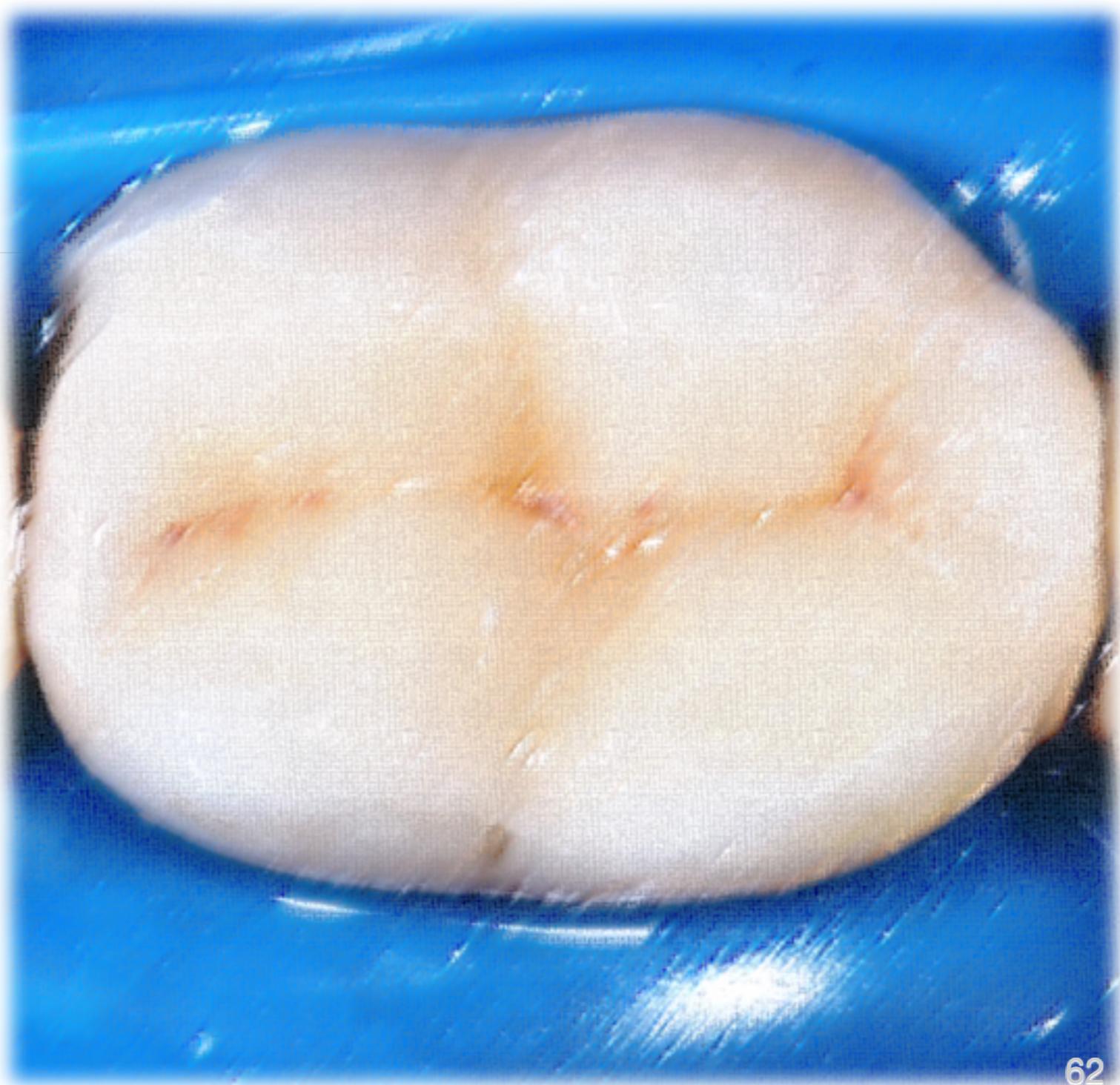
simple ..



30
minutes



Horizontal
Teck.



Which one is better ??



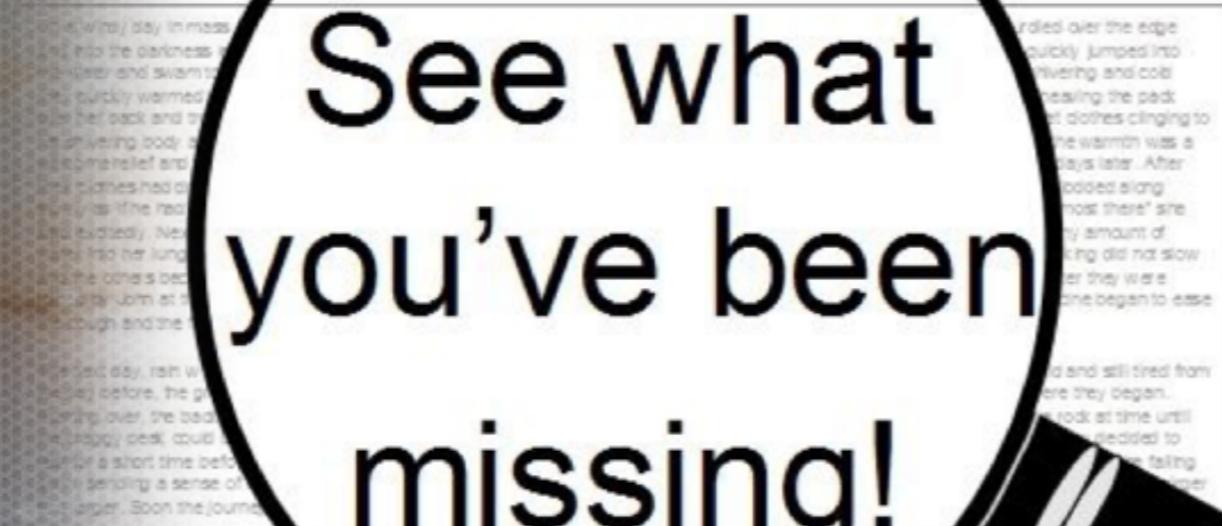
TO OBTAIN AN ARTISTIC FILLING YOU SHOULD HAVE

- **Experience**
- **Facilities (Loupes,Instrument And Materials)**
- **Time**
- **Assistant**



MAGNIFICATIONS

See what
you've been
missing!



INSTRUMENTS

- **BRUSHES**
- **FISSURA**
- **APPLICA**
- **CONDENSA**
- **MICRO BRUSHES**



CONTACT AREA

BAND SELECTION

What about PROXIMAL CONTACTS?

- Properly contour the matrix band.
- Have the matrix in contact with the adjacent tooth.

Avoid

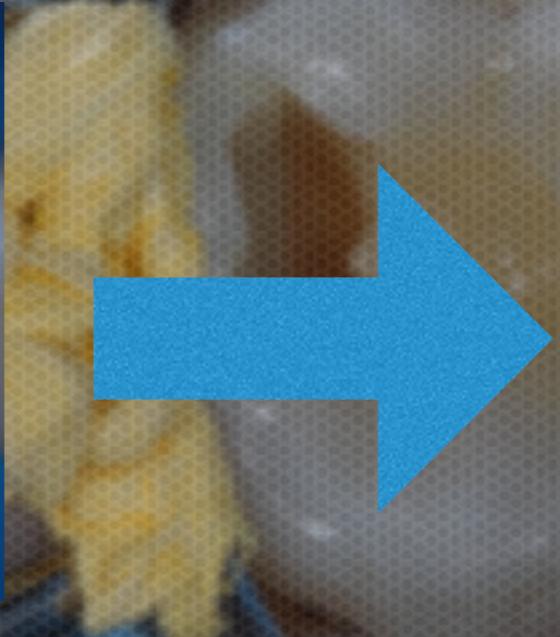
- too thick matrix
- Changing of matrix position during placement and shaping

How to obtain a contact area:

- Bands
- Matrix Retainer
- Wedges
- Teflon
- Skills And Proper Manipulation



*Important
tip*



MATRICES:

- **TOFFLEMIRRE
(1,9)**



SECTIONAL MATRIX



• OMNI MATRIX



TEFLON..

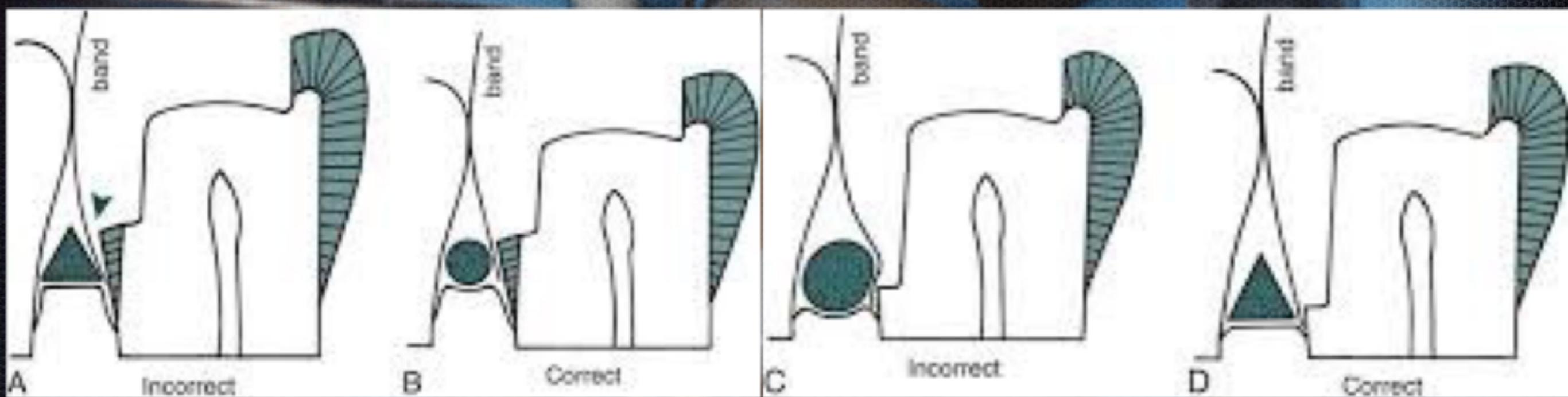


WEDGES..

PLASTIC
WOODEN

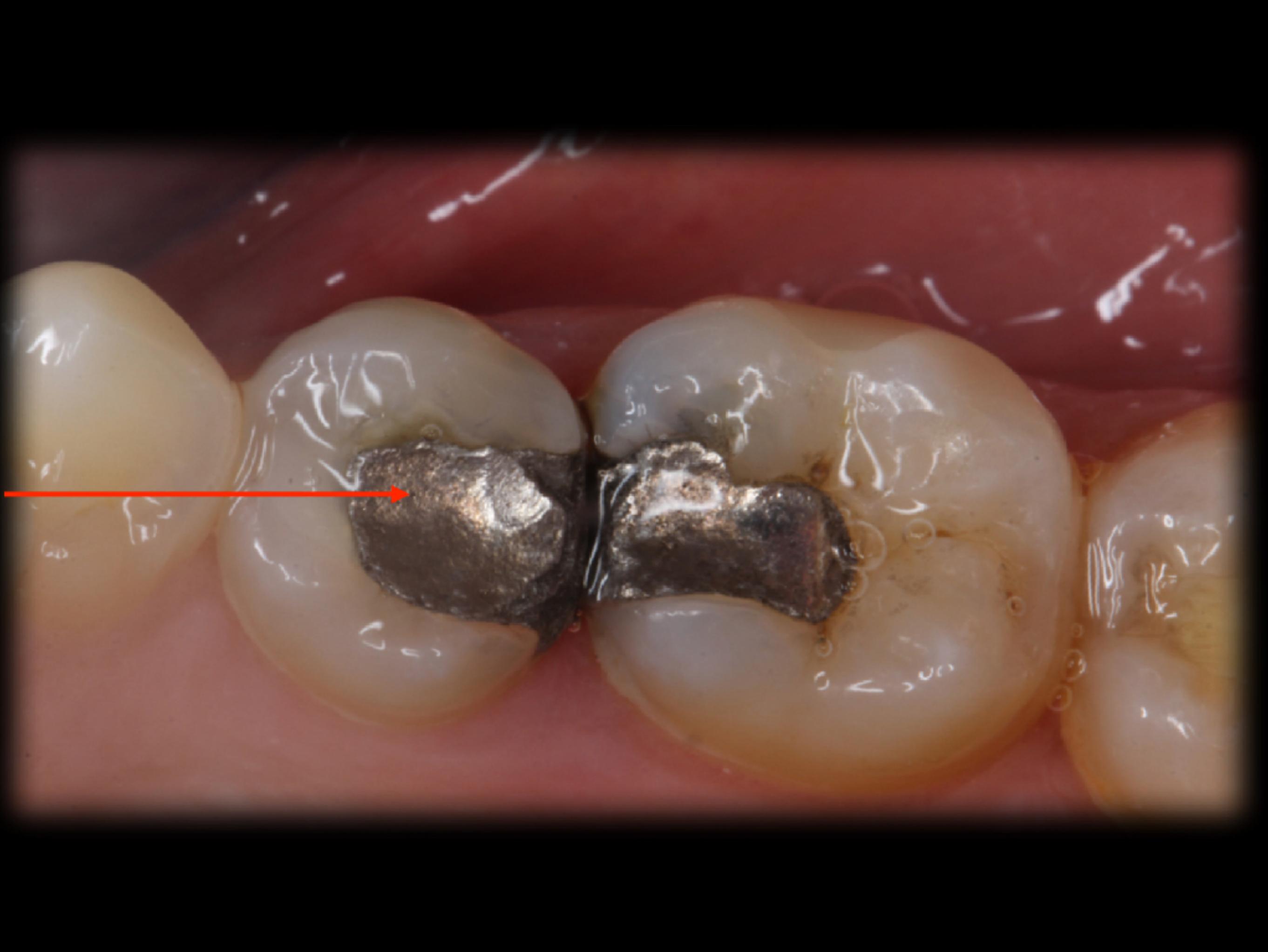


THE LOCATION OF WEDGES ..





CASES



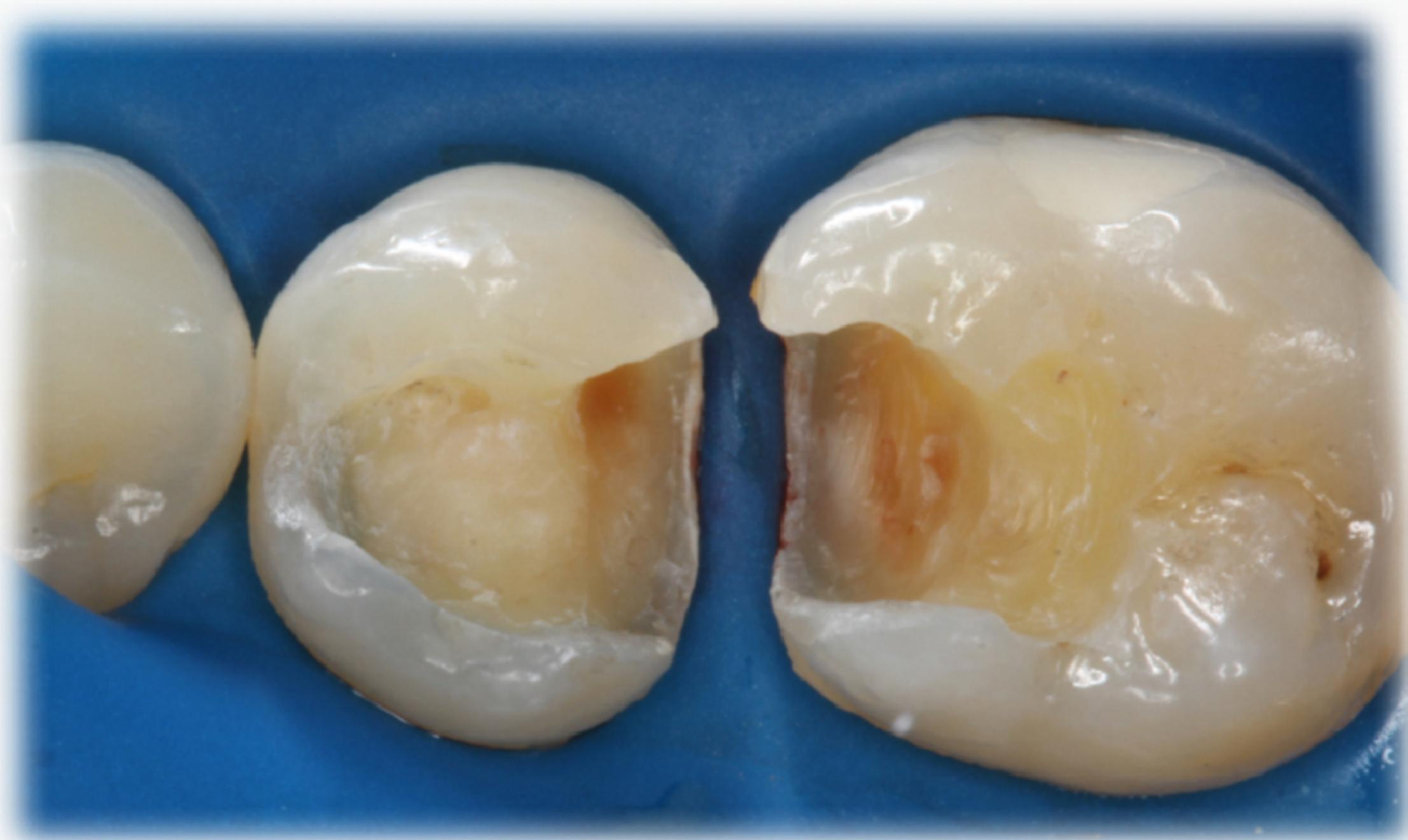
DEEP MARGINS WITH
THERMAL CUTTED
GINGIVA

3M



FLUID
FIGHTER
IN
ACTION..

3M



THE WALLS
CREATED..

3M

DOUBLE WEDGE

TECHNIQUE..



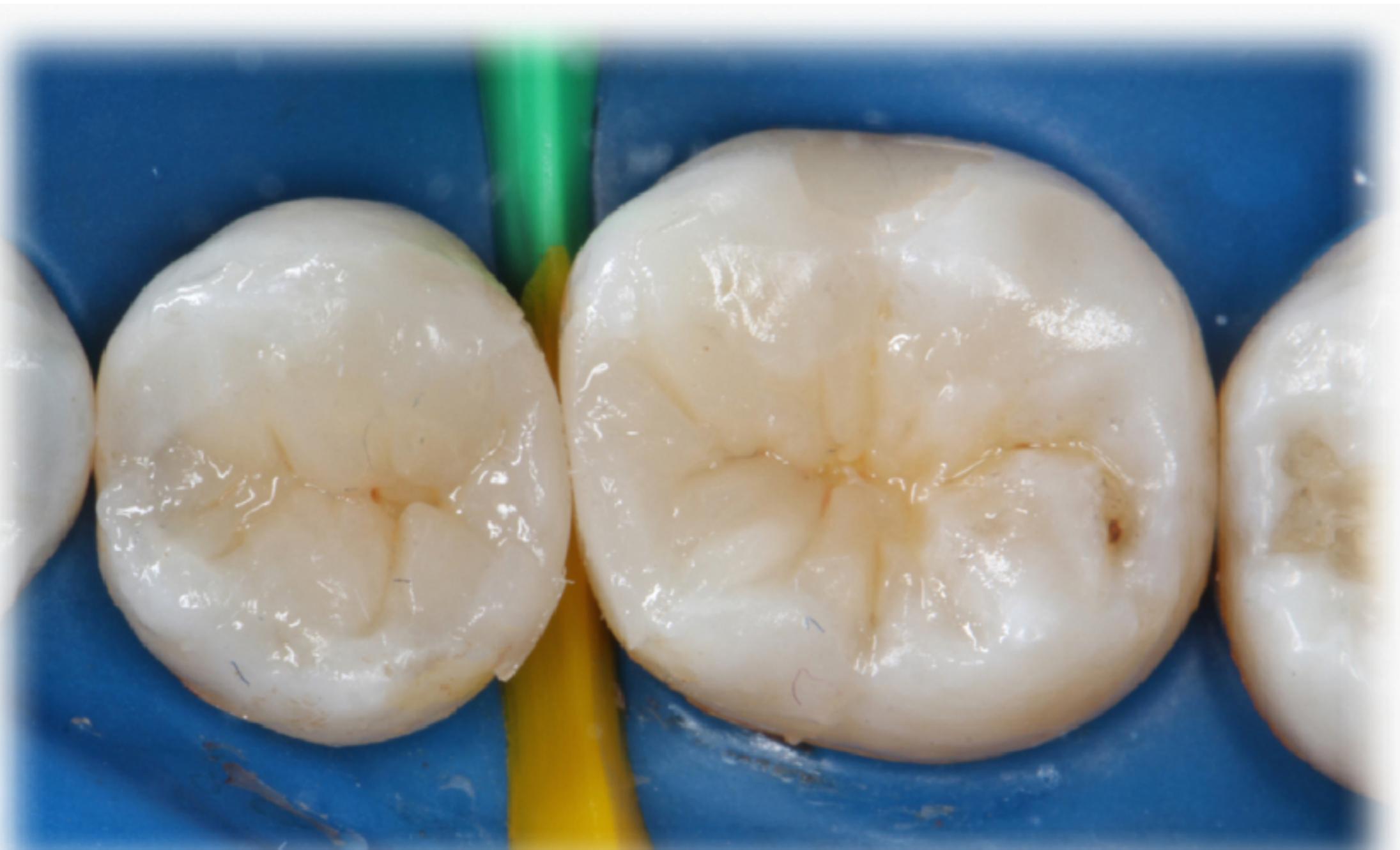


THE MISSION IS
DONE..

3M

THE MISSION IS
DONE...

3M



THE 100 MINUTES
GAME...

3M





SIMPLE CL II

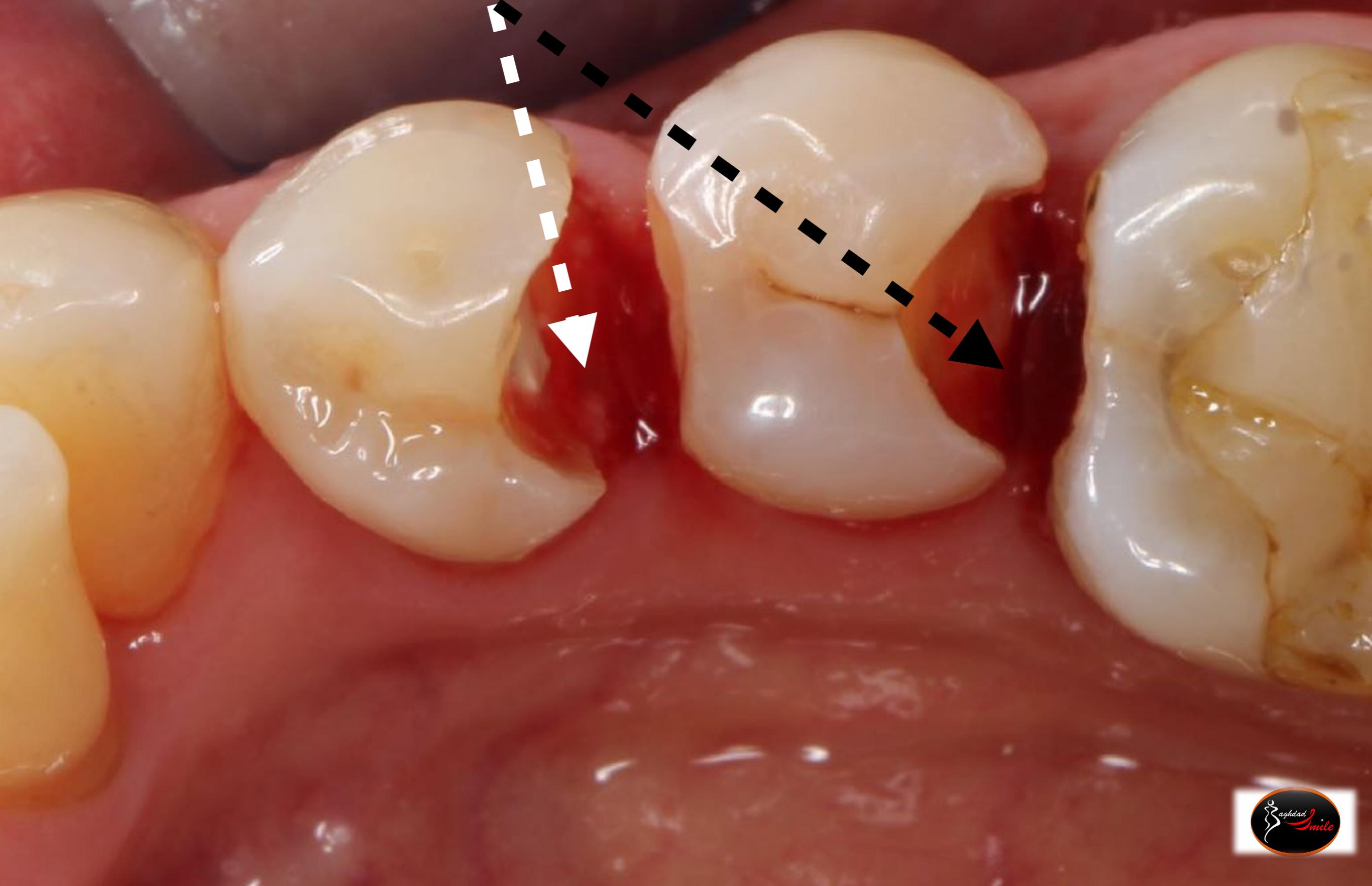








DEEP MARGINS CL II..



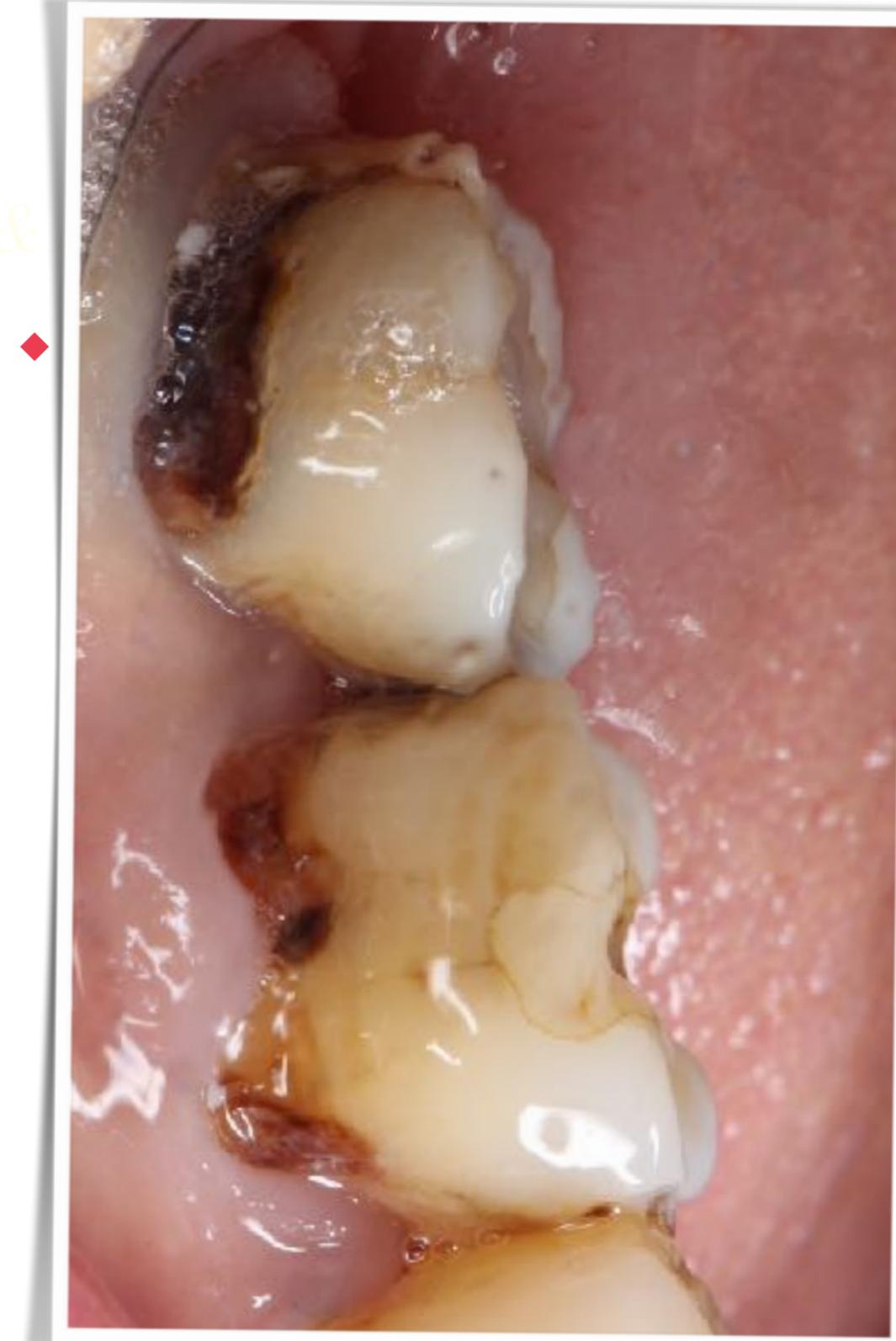
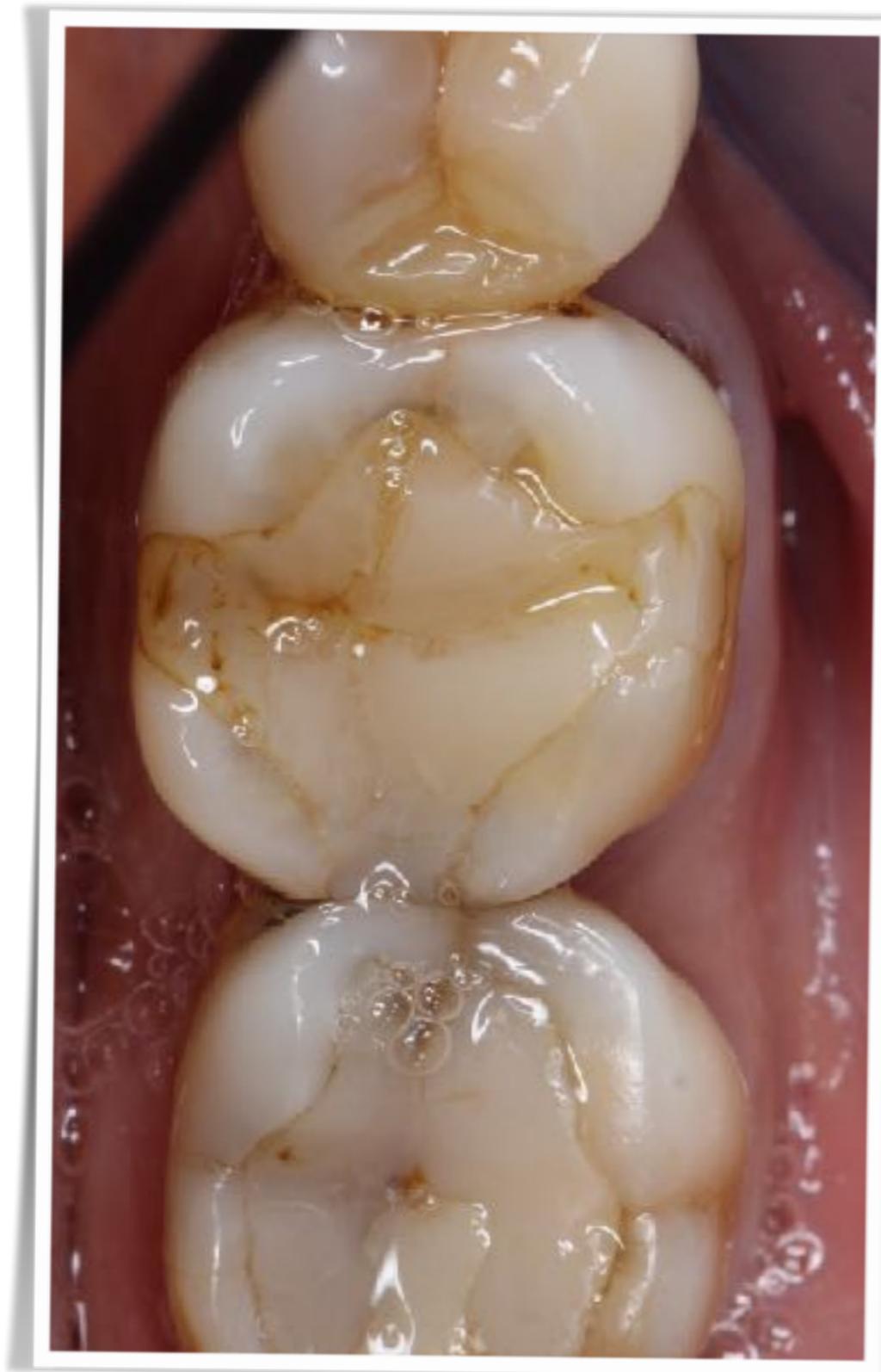




FINALLY..

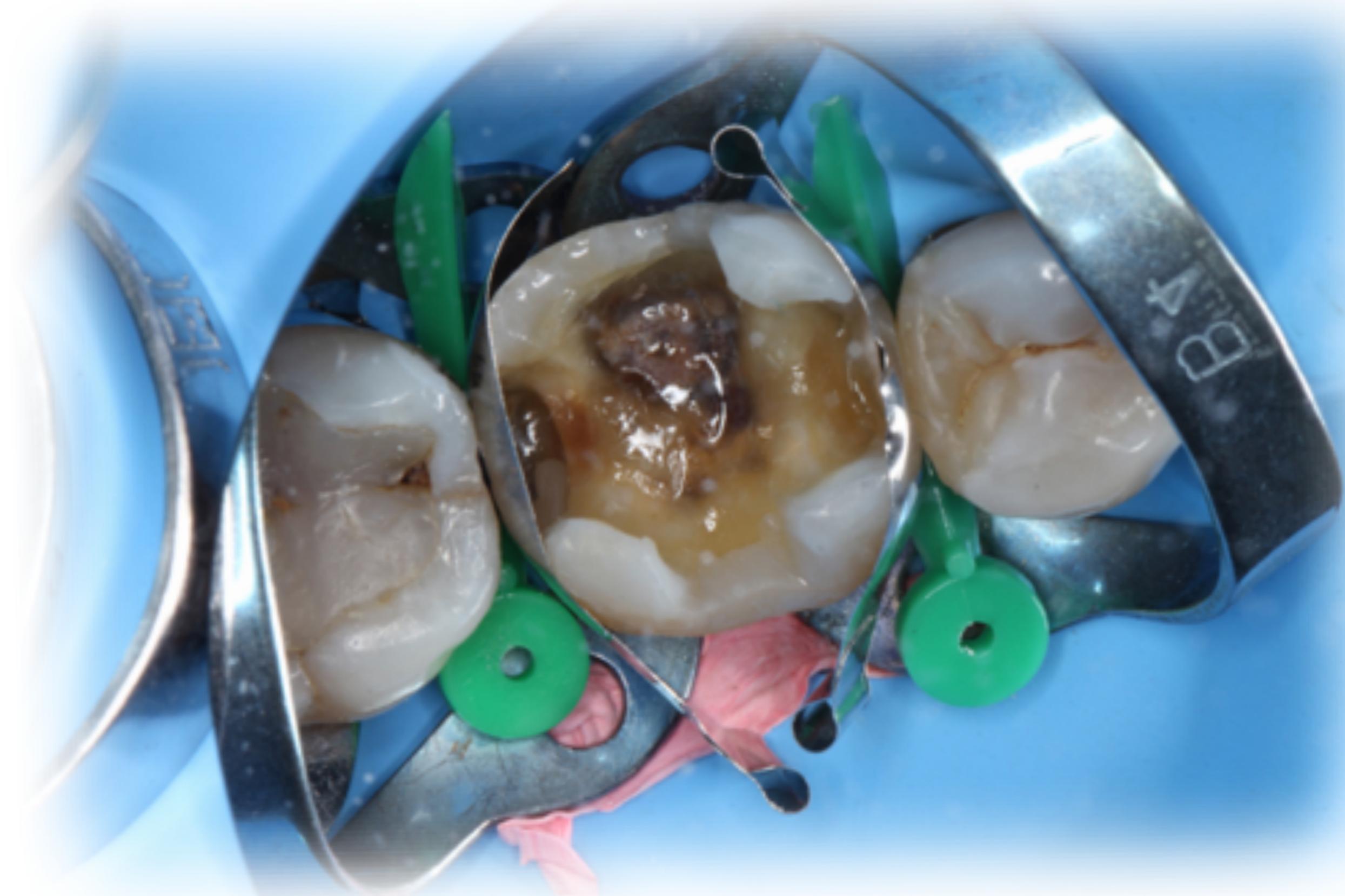


ALL IN ONE CASE..













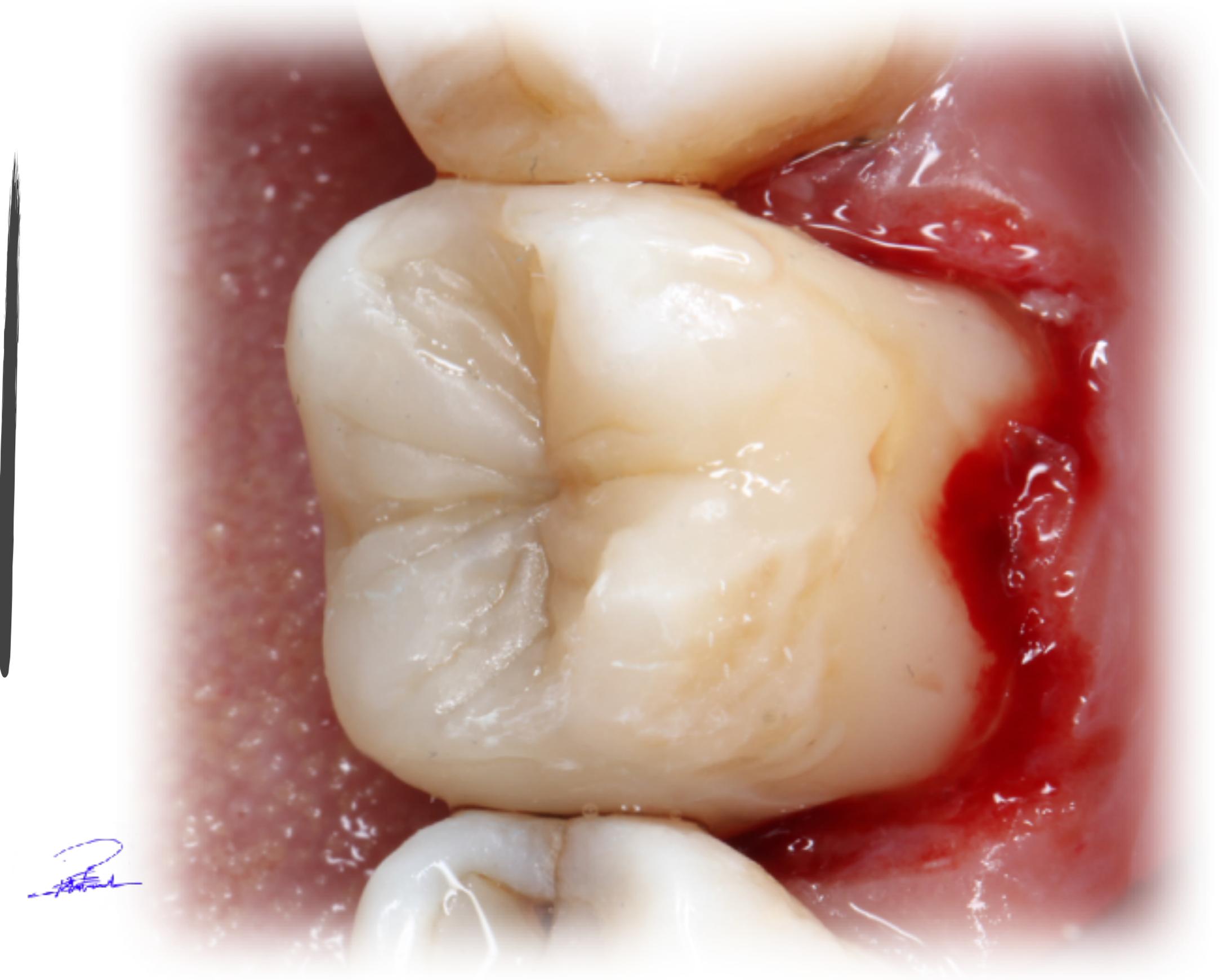
FINALLY.



FINALLY



[Handwritten signature]





**LOVELY
TUNNEL ..**

M O H A M E D T A
L A L



SINGLE SHADE
BODY ..

M O H A M M E D
L A L T A



P

M O H A M E D T A
L A L

5 MINUTES GAME



P

