



Tooth whitening as part of esthetic treatments.

FONSECA, Rodrigo Borges^{1 -} RUIZ, Luis Fernando Naldi²

1 Adjunct Professor of the Dentistry and Dental Materials area -Faculty of Dentistry at Federal University of Goiás Coordinator of the Esthetics Clinic and Courses in Anterior/Posterior Teeth - FO/UFG

2 Adjunct Professor of Periodontal Area – Faculty of Dentistry at Federal University of Goiás

Mailing Address:
Professor Dr. Rodrigo Borges Fonseca
Faculty of Dentistry – Federal University of Goiás.
Praça Universitária esquina com 1ª. Avenida, s/n, Setor
Universitário
Goiânia - GO – Brazil. Zip Code: 74605-220
E-mail: rbfonseca.ufg@gmail.com
PHONE: +55-62-32096325.
Fax: +55-62-32096054.

INTRODUCTION

Minimally invasive techniques for restoring anterior teeth were driven by adhesive processes and resin materials. However, one of the most difficult points for obtaining imperceptible restorations is the final value (luminosity) of restorations (1). Thus, the use of dental whitening techniques prior to restoring procedures makes it possible to achieve a more harmonious and clear substrate, which will benefit the final result. The present case demonstrates the application of an clinic whitening technique prior to restoration with composite resin.

Fig. 1. Patient's initial smile with generalized diastema and gummy smile.



Fig. 2. Initial intraoral view. Observe lack of dominance of central incisor teeth and generalized diastema.



Fig. 3. After periodontal surgery of clinical crown increase and filling in the bottom of the vestibule with orthopedic sealant, the patient returned for dental whitening treatment. Initial color: A3 cervical and A2 middle-third.



Fig. 4. Desensitization with arginine oxalate manually applied for 1 minute in all teeth (Colgate Pro-Relief, Colgate, Brazil)



Fig. 5. Start of protection with silicon barrier placed between the dental arches.



Fig. 6. Silicone barrier cut and adapted to the teeth, enabling mandibular stability and the patient's protection during the whitening process.



Fig. 7. Hydrogen peroxide 35%, selected for the case (Clariant 35%, Angelus, Brazil)



Fig. 8. Adapted whitening syringes, before manipulation.



Fig. 9. Material manipulated and transferred to one of the syringes, homogeneous and ready for application.



Fig. 10. After gum protection with Clariant system gum barrier, the product was applied for 45 uninterrupted minutes, in single session.



Fig. 11. Gel view, with intense orange color providing excellent visualization and optimum viscosity that results in it not draining freely.



Fig. 12. Immediate view of the whitening result, by changing the color to A1.



Fig. 13. Customized stratification and pigmentation of restorations in composite resin, made with Z350XT (3M, USA)



Fig. 14. Last layer of resin being inserted.



Fig. 15, 16 and 17. Final result after finishing and polishing procedures of the restorations. The use of advance whitening, notably provided an excellent result in resin restorations executed.





Referências

1. Manauta J, Salat A. Layers. 1ed. Quintessence Ed., 2014.