



# Mind the gap: Two different paths to one goal

## Aesthetic gap closure in the upper anterior region

By Dr Johannes Bantleon, Austria



**Johannes Bantleon** completed his dental training at the Bernhard Gottlieb University Dental Clinic in Vienna. He gained extensive work experience in private practices in London, where he enjoyed most of his postgraduate education. His treatment focus is on aesthetic-restorative dentistry with minimally invasive techniques. In doing so, he relies on the principle of biomimetic dentistry – a substance-sparing form of treatment with the aim of restoring the original function and aesthetics of teeth and gums as close to nature as possible. Since 2018 he has been working as a dentist in the group practice “Ordnation für Zahnerhaltung” in Vienna.

For the aesthetic optimization in case of diastema, the direct (dental practice) can be distinguished from the indirect procedure (dental laboratory). On the basis of two patient cases, the author presents his approach and explains in which situations he prefers indirectly manufactured ceramic veneers (e.g. , lithium disilicate Initial LiSi Block, GC) and when he resorts to direct veneering with composite (e.g. light-cured universal composite Essentia, GC).

If gaps are to be closed in the anterior region, the decision on the type of restorative pathway (direct or indirect) is guided by objective (e.g. materials science) and subjective factors (e.g. patient-specific aspects). A particular challenge is the closure of a gap between the two middle front teeth in the upper jaw.

### Composite vs. ceramics

The developments of tooth-coloured materials as well as adhesive technology enable minimally and partly non-invasive aesthetic rehabilitation. A ceramic restoration is often the preferred option for restorations of anterior teeth. However,

this seems too one-sided in view of modern, highly aesthetic composites.

### **Direct veneering with composites**

Parallel to the further development of ceramic materials, restorative composites have made remarkable progress. Modern composites impress with sophisticated filler and matrix properties due to colour and reflection features that come close to those of a ceramic. In addition, material properties have been optimized, resulting in good long-term stability. The potential of modern composites is great. For a long time now, the focus lies not only on carious lesions, but also on aesthetic indications.



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