The no prep approach: when and how?

Stefan Koubi[1]

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Indications for no-prep protocols are quite strict and may be summarised as follows:

- Post orthodontic treatment needing some small improvement
- Minor smile design corrections (embrasures, diastemas, and so on).

Nowadays, the no-prep concept is popular, but in order to plan correctly the practitioner should have a precise idea of dos and don'ts.

This article hopes to highlight the use of chips in aesthetic treatment.

Tips for this case:

- Basic way of producing the restoration in the lab: press and polish
- Bleaching was undertaken before starting the case to increase aesthetic integration of chips – bonding sequences start with chips first and laminate

Figure 1: Initial situation.

[1] Dr Stefan Koubi, Associate Professor, University of Marseille, France. Private Practice, Marseille, France

Figure 2: Intra-oral view: note the low value of the color, diastema between UR1 and UL1 and narrow shape of UR2.

Figure 3: Occlusal check: incisal edge must be reduced during preparation to allow sufficient thickness for incisal ceramic (1,5 mm).

Figure 4: Analysis of the shape.

Figure 5: Intra-oral view of upper arch (with flexipalette). Decision process should focus on the design of the augmentation of white tissue.

Figure 6: A mock-up is created with chemical cure composite (Luxatemp Star DMG) to visualize the esthetic project. Of course the final choice must fulfill biological and functional criteria.

Figure 7: Laminate veneering is chosen to enhance tooth 1.2.

Figure 8: After bleaching with 5% carbamide peroxide (White Dental Beauty Optident) slight preparation is performed to follow prep less concept in order to visualize cervical margin. Increasing the color value is key to improving esthetic integration and mimicry of restorations.

Figure 9: A no prep approach was chosen for teeth 1.1 and 2.1.

Figure 10: No prep restorations are made with emaX press and then polished. No stain is required.

Figure 11: Here you can see the opalescence of the material.

Figure 12: Try-in of the 3 restorations with glycerine paste (Vitique veneer B1 DMG).

Figure 13: Individual dam (Nictone, 212 Hu-friedy).

Figure 14: Placement of the chip prior to laminate veneer. Margins are polished with silicone wheel on low speed handpiece.

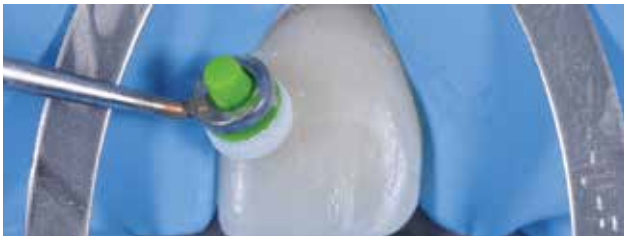

Figure 15: Use of Optrasculpt pad (Ivoclar Vivadent) with a soft pressure on the restoration.

Figure 16: Individual dam for bonding procedure of the laminate after the chip because it is less fragile.

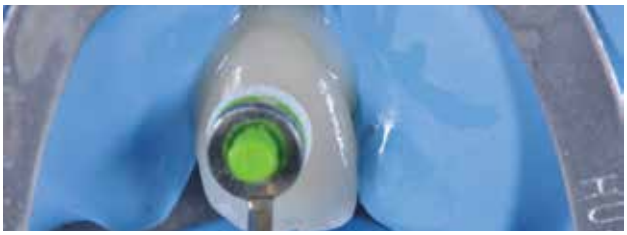

Figure 17: Same procedure for the placement of the laminate veneer on tooth 1.2.

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Figure 19: Close-up on the lateral.

Figure 20: Final (ceramist Gerald Ubassy).

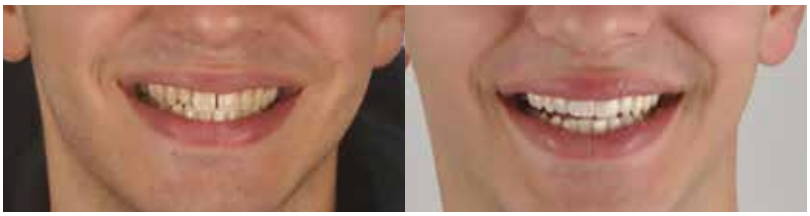

Figure 21: Before and after.

Conclusions

No-prep restorations can be very useful in contemporary treatment planning as they are able to solve some everyday cases. However, it is important to integrate this type of restoration into a basic workflow in which it is simple for both the technician and the dentist to achieve in a feasible and repeatable way.

The role of the dentist as a smile architect is fundamental in order to visualise the ideal pink/black/white ratio for top quality aesthetics and biological preservation.