Intent Research Scientific Journal-(IRSJ)
ISSN (E): 2980-4612
Volume 2, Issue 9, September-2023
Website: intentresearch.org/index.php/irsj/index

USING VENEERS IN MODERN AESTHETIC DENTISTRY

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Abstract:
The purpose of this article is to consider the advantages and disadvantages of using veneers in modern aesthetic dentistry. Veneers are ultra-thin shells made of ceramics (porcelain) or composite polymers, glued to the front surface of the tooth, and in many cases are an excellent alternative to crowns. They provide a more conservative approach to changing the color, size and shape of the tooth. They can also hide unwanted defects, for example, teeth stained with tetracycline, traumatic injuries or the results of root canal treatment.

Keywords: veneers, veneering, ceramic veneers, cosmetic dentistry.

Materials and Methods: Materials science in dentistry is developing rapidly, new materials and techniques are emerging that allow to restore and correct the color, shape and position of teeth. Modern aesthetic designs help to recreate harmonious dentition and smiles. Aesthetic dentistry has become one of the most dynamic and demanding areas of dental practice. The development of aesthetic standards has become a global phenomenon. Terms and concepts in aesthetic dentistry Aesthetic dentistry is a branch of dental science that studies the aesthetics of the maxillofacial region, its norms, anomalies and deformities, methods of their elimination and prevention. The main purpose of aesthetic treatment is to reproduce the appearance of the teeth closest to the natural, to recreate the original beauty and naturalness of the dentition. This is a type of treatment that eliminates problems and corrects functions. Modern cosmetic dentistry has a significant ethical basis aimed at improving the general condition of teeth. The most common type of dental diseases is the pathology of the hard tissues of the teeth. The most common type of dental diseases is the pathology of the hard tissues of the teeth. Indicators of the need for their treatment in the population are largely associated with the high prevalence of caries and non-carious lesions of the teeth and the lack of motivation of patients to prevent and

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treat this disease. Aesthetics and durability of restorations are the main requirements for the treatment of front teeth. Thanks to modern restoration materials and techniques, these tasks are quite feasible. However, it is necessary to take into account the indications and contraindications, the type of disease, the age of the patient and the general physical indicators of polyposis, rationally select filling materials and treatment methods, as well as follow the rules of preparation of hard tooth tissues, taking into account pathological processes and restoration techniques. The priority in dental treatment is high technology, for example, direct vinification of the front teeth with light-cured composite resin. Indications for direct veneering are defects in the hard tissues of the teeth from 1/3 to 1/2 of the crown volume and the need to correct the shape, color and position of the teeth [4]. It is known that it is easier to achieve better aesthetic results with the help of veneers than with traditional methods of aesthetic restoration using modern light-curing composite resins, and long-term data on this indicator are also good. Direct aesthetic restorations using modern light-curing composite restoration materials are the most common in restorative dentistry. The main indications for them are the need to restore the aesthetic and functional parameters of the tooth in the treatment of caries and its complications, non-carious lesions of the tooth and correction of the aesthetic parameters of the tooth. Contraindications are divided into absolute and relative. Veneers allow to achieve high aesthetic results in the presence of discoloritis of teeth and defects of their surface. Some dyes are deposited only on the surface of the tooth, others penetrate into hard tissues (enamel and dentin). Veneers are the best option for aesthetic prosthetics of the front teeth. During their manufacture, the adjacent periodontal tissues are not affected, which is very important. Modern materials used in the manufacture of ceramic and zirconium veneers are inorganic substances and compounds, such as porcelain (ceramics) and zirconium dioxide. Porcelain is a ceramic vitreous material, smooth and absolutely impermeable. Zirconium dioxide is a naturally occurring zirconium compound that has been used in dental prosthetics for 10-15 years. It is partially stabilized with yttrium and enriched with aluminum. This gives it excellent properties such as bending strength (>1400 MPa*) and rigidity.

Purpose to study the properties, advantages and disadvantages of ceramic and zirconium veneers. Veneers are a metal-free method of prosthetics. The absence

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of a metal frame allows you to improve the aesthetics of the dentition. The light falling on the veneer penetrates to different depths into the material and is reflected from the tooth tissues, so the veneer does not differ from the neighboring teeth Ceramic veneers. They are made of ceramics by an indirect method in a dental laboratory. Ceramic materials for veneers can be divided into several groups: 1) cast glass ceramics 2) hot-pressed ceramics 3) traditional feldspar ceramics. Ceramic veneers are used in various cases, the most common of which is the elimination of small defects or chips on the front teeth. The main advantages of ceramic veneers are: 1. Resistance to staining with dyes. When using light-curing materials, eating food containing dyes changes color over time, which leads to the appearance of stains on the teeth. In contrast, ceramic veneers are resistant to dyes. This is due to the properties of ceramics, since the surface of ceramic veneers is smooth and impermeable. Therefore, spots on the surface do not appear.2. Strength, durability. Ceramic veneers are durable and resistant to wear and abrasion.3. Aesthetics. Veneers are resistant to staining, and the color, shape and fluorescent effect of ceramics can be selected and changed; 4. biocompatibility with surrounding tissues. However, ceramic veneers also have disadvantages. Medical errors (for example, occlusal factors, occlusal planes, underestimation of the morphology of the chewing surfaces of teeth, overstrain and hyperactivity of the chewing muscles, inaccurate preparation) and omissions in the technical manufacture can lead to chips of ceramic veneers, which in some circumstances can lead to more serious aesthetic and functional complications and complete loss of This can occur. However, the frequency of displacement and chipping of veneers is largely independent of the type of zirconium veneer. One type of veneers is made of zirconium dioxide. The main feature of such veneers is that they are made in the laboratory in the same way as ceramic ones, but not by the hands of a specialist, but on automated, fully robotic equipment (CAD/CAM). This avoids many mistakes: the crown based on zirconium dioxide ICE enhances the strength of the veneer. These zirconium dioxide crowns have a thicker base layer, which provides increased strength in areas subject to chewing loads. Unlike ceramic veneers, zirconium dioxide microprostheses are used in the most difficult clinical cases. For example, when the color of the teeth changes, when they shine through ceramics, when there are large gaps between the teeth, when the teeth are "superimposed"

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on each other or when the teeth rotate around the axis. Zirconium dioxide is a very durable and lightweight material, so veneers based on it are thin. The main advantages of zirconium dioxide veneers: 1. high biocompatibility with tooth tissues and adjacent tissues and does not cause allergic reactions; 2. high strength and reliability without risk of chipping; 3. high strength and reliability without risk of tooth damage; 4. high strength and reliability without the risk of tooth damage. This is due to the strength properties of zirconium dioxide, which is stronger and lighter than metal; 3. durability due to the above properties; 4. high aesthetics in the oral cavity; 5. high quality and reliability without the risk of chips; 6. high durability due to the above properties. Zirconium dioxide veneers look like natural teeth. Zirconium dioxide is not stained with various dyes, so the aesthetics are preserved for a long time. There are not so many disadvantages of zirconium veneers, but the main ones are: 1. this is due to the complexity of making veneers from zirconium dioxide. 2. for the successful manufacture of teeth for plate veneers, minimal removal of hard tooth tissues is required.

Conclusion Thus, based on the analysis of scientific literature, ceramic veneers are undoubtedly one of the best options for restoration and aesthetic restoration of front teeth. At the same time, zirconium dioxide stands out as the best material. With this material, you can get the most natural color tone and light refraction. Microprostheses are not subject to chipping and firmly adhere to the tissues of the tooth, preventing loosening and the development of secondary caries. However, there is a downside. They are much more expensive than similar porcelain restorations. Veneers occupy a rather important place in modern dentistry.

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