Indirect technical approach with composite Inlays/Onlays by the dentist in-office: Two clinical reports

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Introduction: Indirect composite restorations are alternative technical approaches of posterior teeth rehabilitation, in certain clinical conditions.

Objectives: The aim of this report is to describe two clinical cases in which composite inlay/onlay, made by the dentist in-office, were used to rehabilitate posterior tooth structures considering two strategies, such as large and multi-surface restorations. Clinical/radiographic findings and treatment are presented and discussed with the literature evidence.

Material and Methods: Two female patients presenting different restorative problems were selected. Coronal rehabilitation with composite inlay/onlay made indirectly by the dentist was proposed for both clinical conditions.

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<th>Patient Age: 20 years-old</th>
<th>Patient Age: 46 years-old</th>
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<td>Clinical Condition I: 2.6 tooth showed a large extension composite restoration with loss of marginal integrity and cusp involvement. Composite Onlay rehabilitation (Fig. I-1 to Fig. I-9).</td>
<td>Clinical Condition II: The 2.6 and 2.5 teeth with secondary caries/amalgam restorations (ICDAS 44 code) and proximal contact defects. Composite Inlays rehabilitation (Fig. II-1 to Fig. II-9).</td>
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Results: This indirect technique approach with composite provided an easy, convenient and efficient method to restore neighbouring teeth, to create adequate proximal contacts without having to use the time-consuming and expensive matrix systems and to better perform occlusal/proximal anatomy by extra-oral moulding¹,². Indirect composite resin systems represent an alternative in overcoming some of the deficiencies of direct composite restorations techniques³.

Discussion and Conclusions: The indirect application of a composite is a predictable and economic approach to perform stress-free fabrication of tooth-coloured and durable restorations even in patients who are low- or non-compliant. This indirect rehabilitation is an aesthetic, functional and biological alternative face to direct techniques in coronal extensively weakened and multi-surface restorations of posterior teeth, providing a refreshing alternative that can be processed in dental office by the dentist.