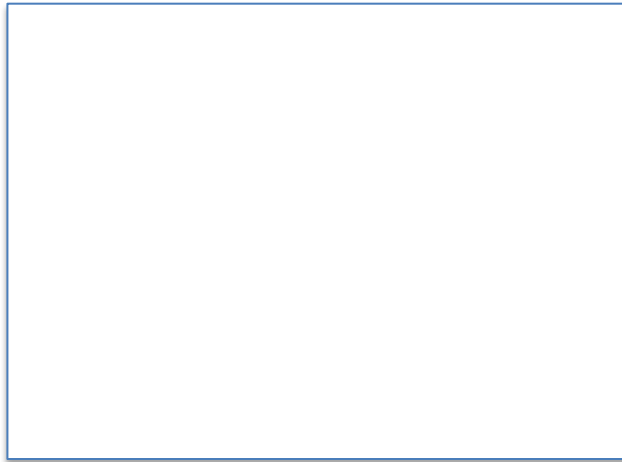


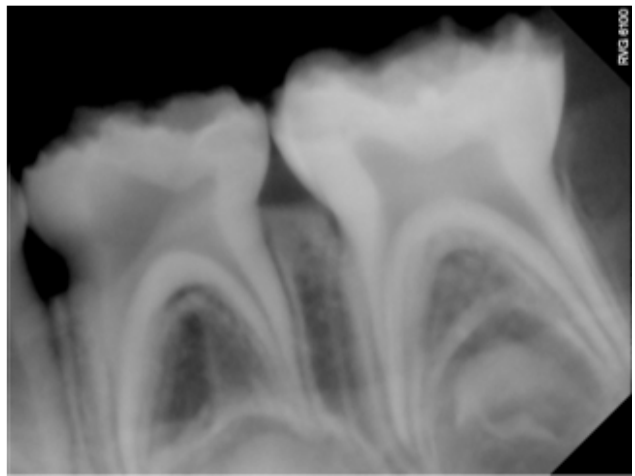
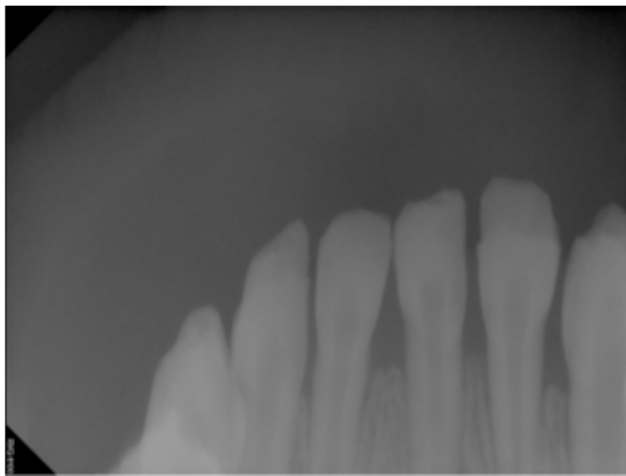
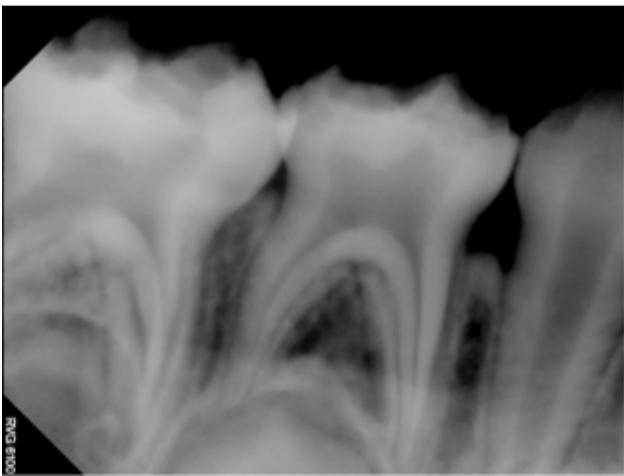
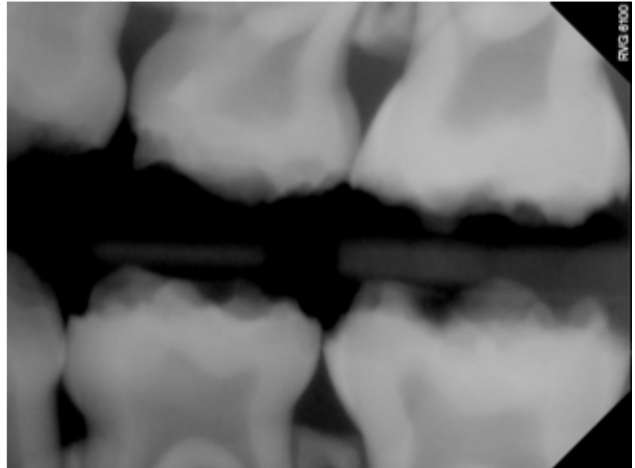
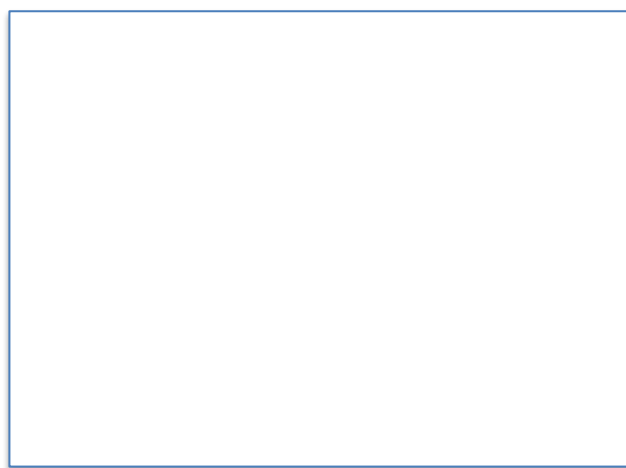
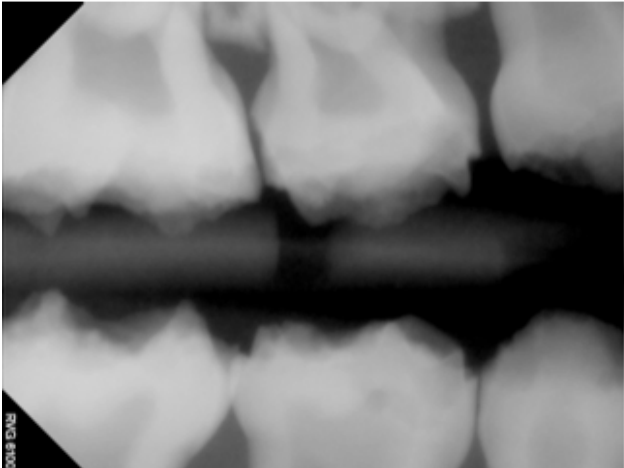
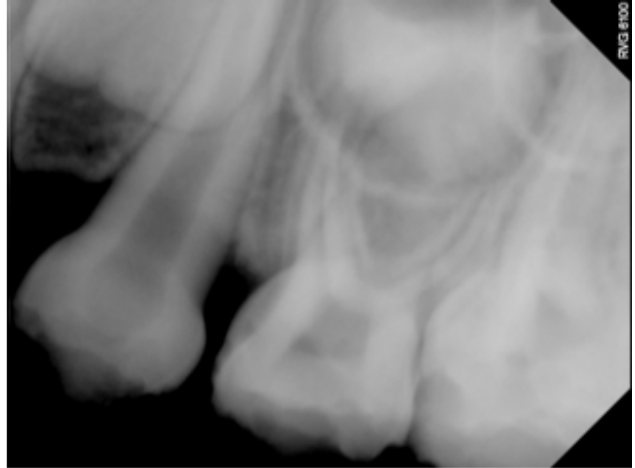
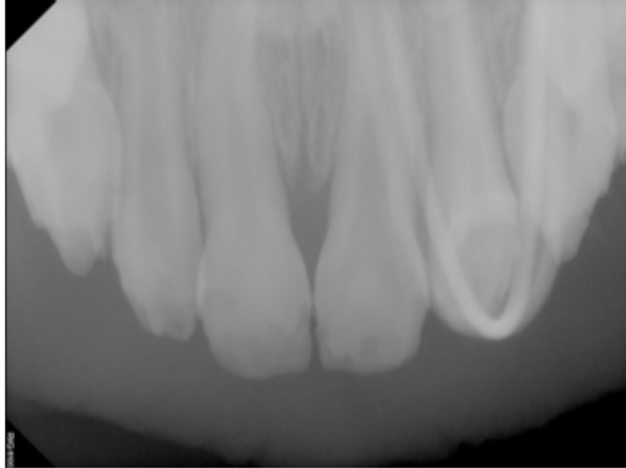
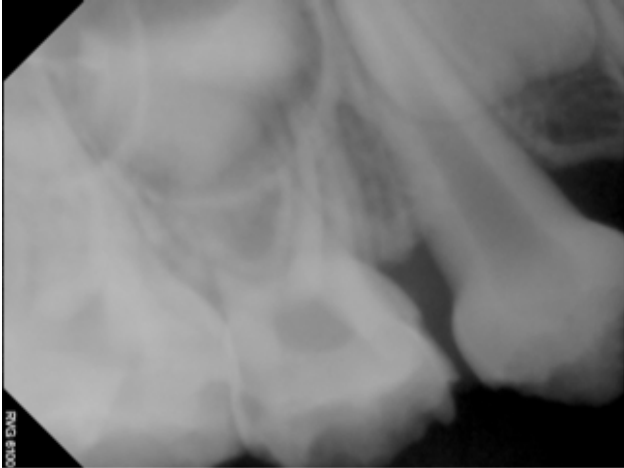
Amelogenesis Imperfecta: Genetic Diagnosis and Treatment at UCSF Pediatric Dental Clinic

Thuan Q. Le, DDS, PhD
Associate Professor
Residency Program Director

String of Pearls, CSPD 2015
Dana Point, CA

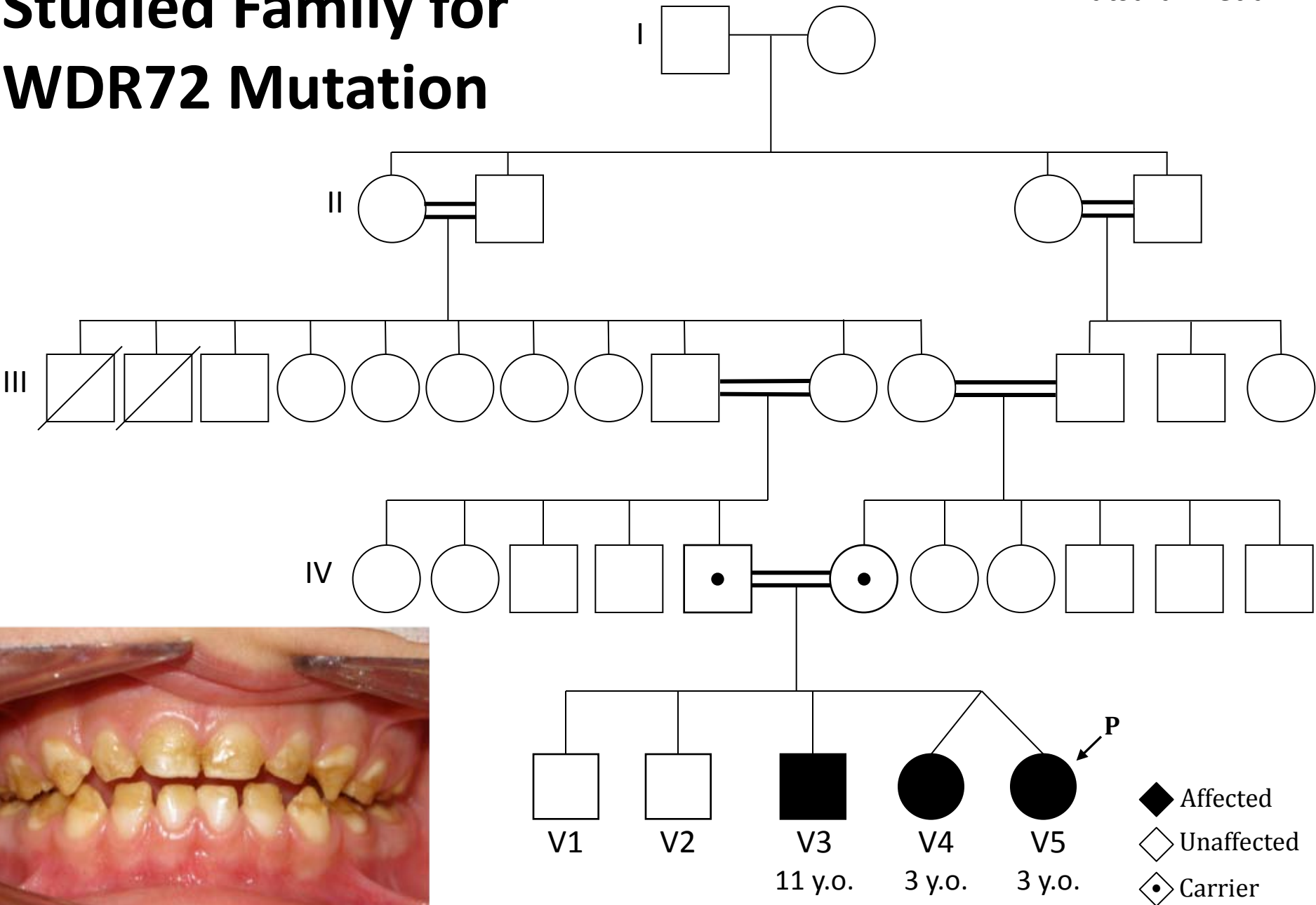
Inherited Enamel Defect in Primary Teeth (3 y.o. female patient)



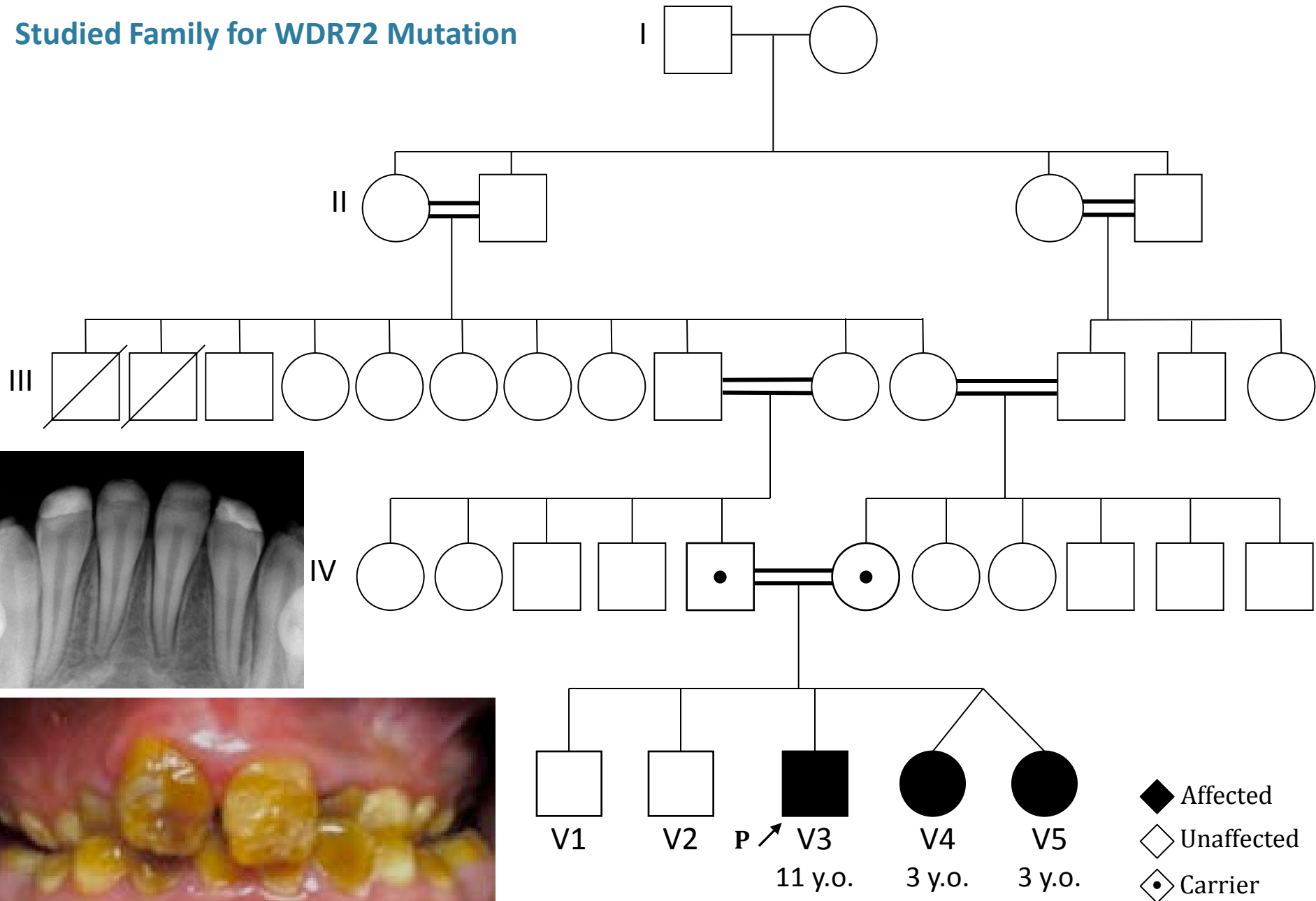


Studied Family for WDR72 Mutation

Katsura K. et al.



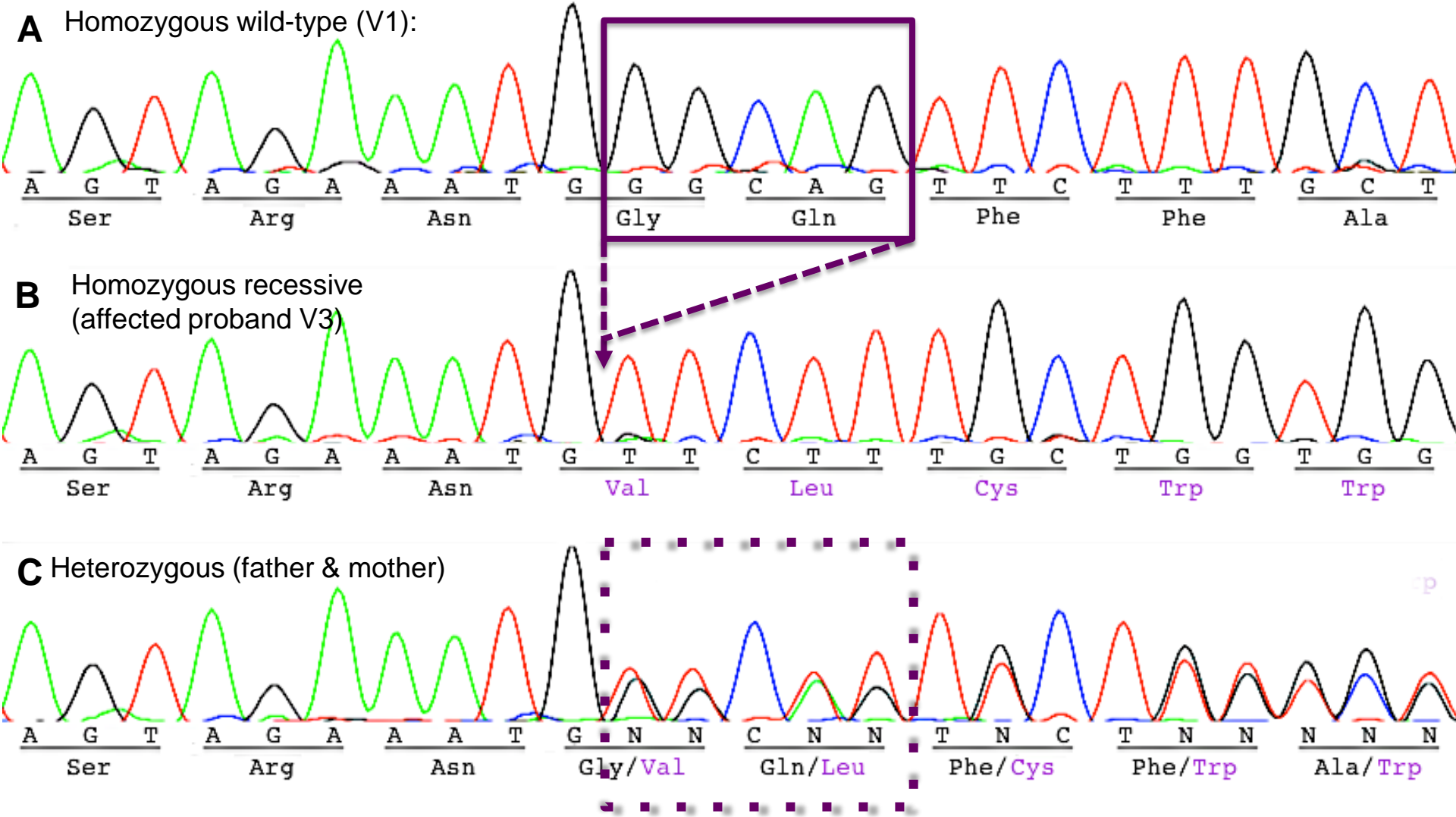
Studied Family for WDR72 Mutation



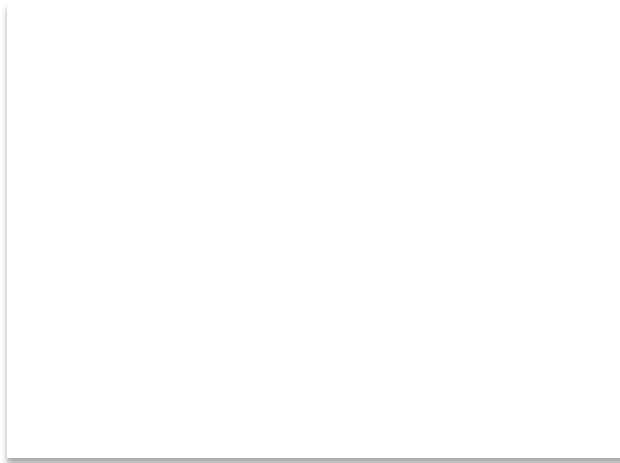
Diagnose by Collecting Saliva Samples of Subjects.



Mutational Analysis of WDR72 Results in Frameshift Mutation (p.G255fsX294)



Post Treatments with Posterior SSCs and Anterior Esthetic Composite Crowns



At 6 y.o., Congenital Enamel Defect of 1st Permanent Molars



GI Sealant Placement to Reduce Thermo-Sensitivity



Before GI placement



After GI placement

SSCs for 1st Permanent Molars Soon after Fully Erupted, ~ 7 y.o.



Pt's at 8 years old



Pictures obtained on 3/25/15

Temporary composite veneers were done for partially erupted incisors using self-etch bonding agent Clearfil S3, helping to reduce thermal sensitivity and improved esthetics.

Team of participants

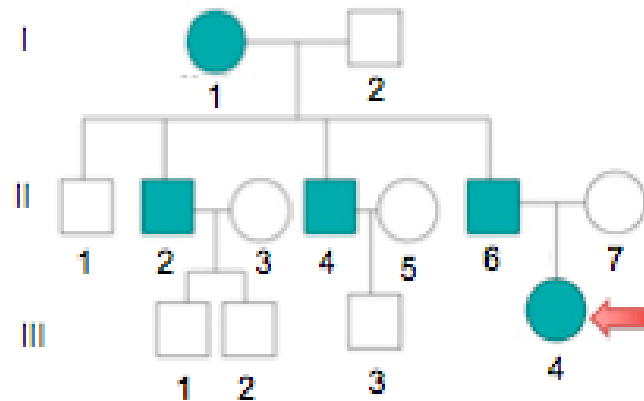
- Kei Katsura (genetic mutation work)
- Dr. Thuan Le
- Dr. Ling Zhan
- Dr. Rung Warotayanont

Family Pedigree and Patient's Clinical Presentation

(A)

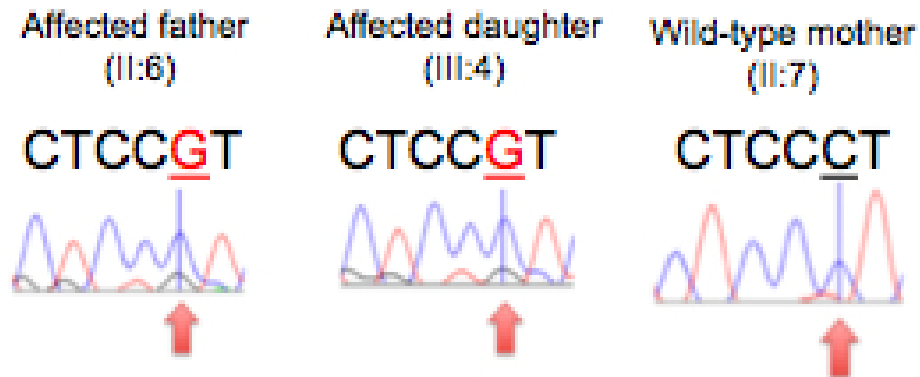
Family Pedigree

Autosomal Dominant or X-linked Dominant



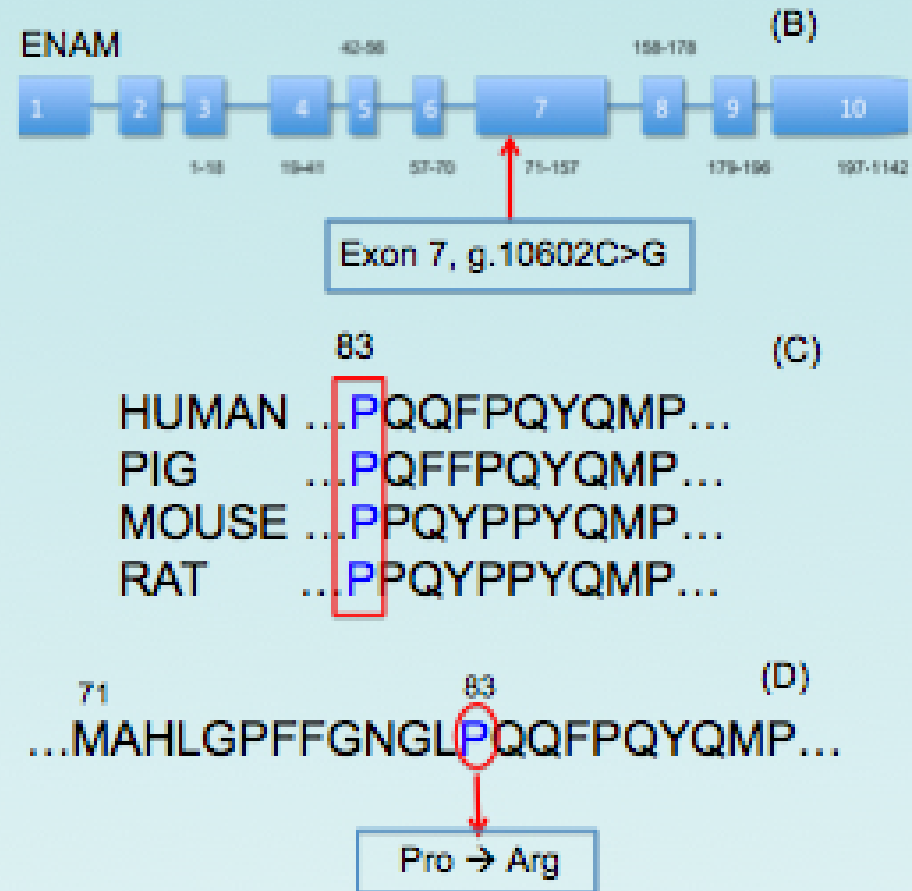
Mutational Analysis

(A) Mutational Analysis

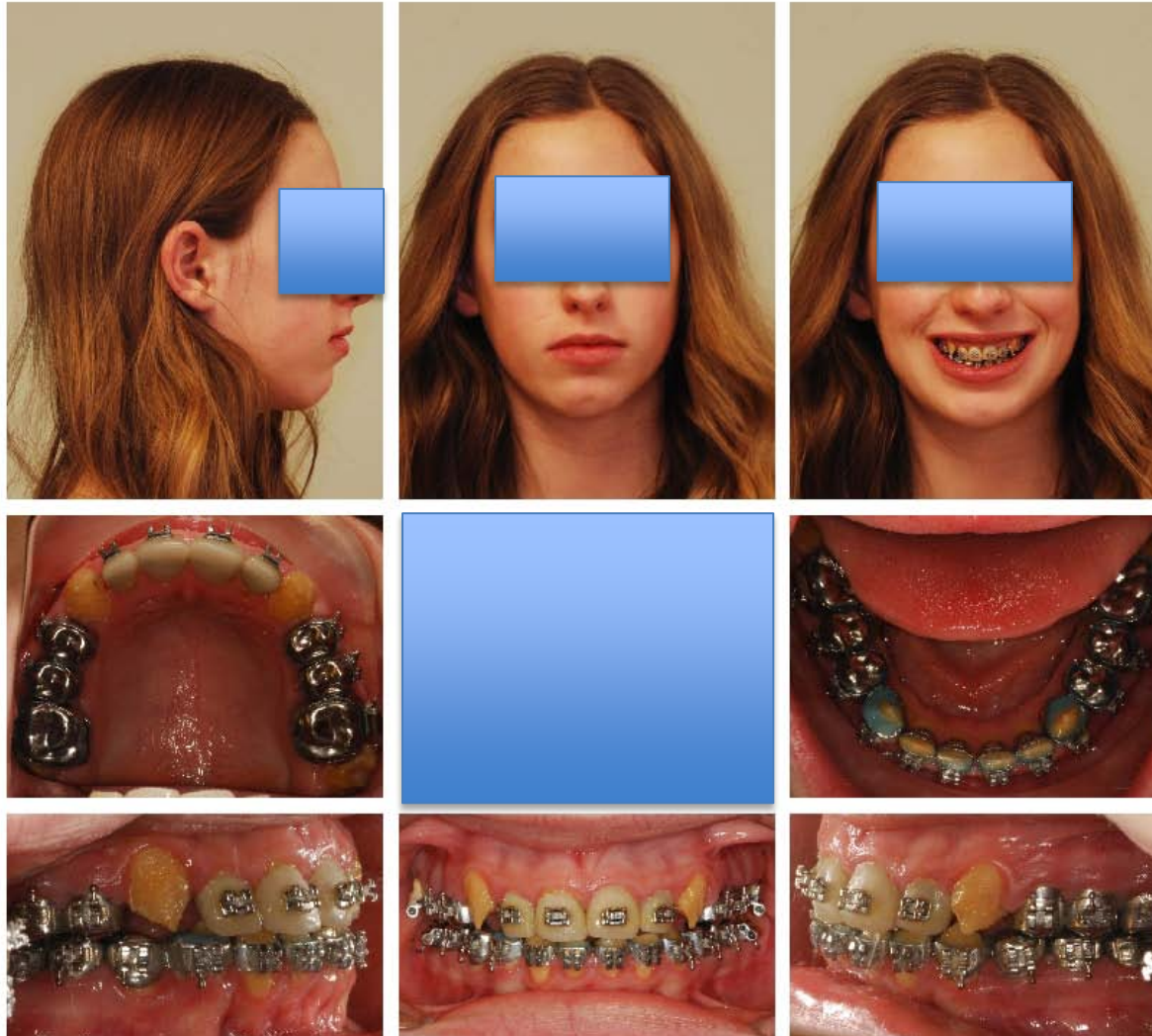


CCT → Proline (WT)
CGT → Arginine (mutation)

g.10602C>G (p.Pro83Arg)



Clinical management for ENAM mutation, 14 y.o. female



- SSCs for posterior upper and lower premolars and molars
 - Fiber-reinforced resin crowns for upper anterior teeth
 - Ortho txt completed
-
- Planning Cerec crowns using CAD/CAM system for her anterior permanent teeth

Diagnostic wax up model used for provisional crowns fabrication



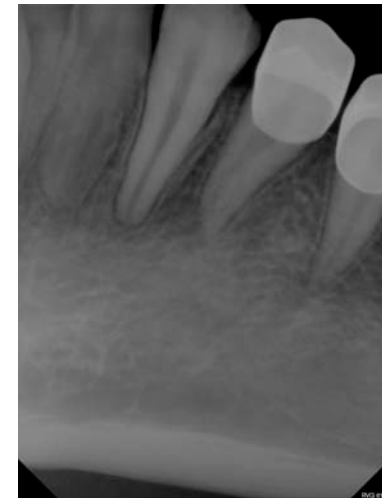
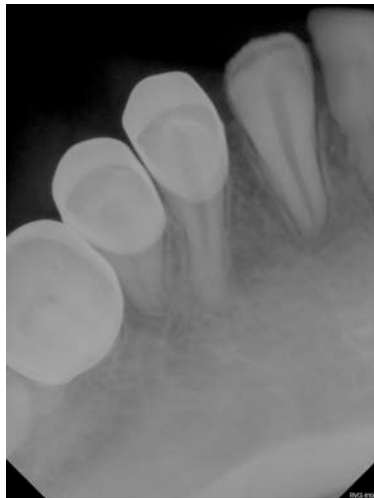
Provisional resin crowns were pre-fabricated



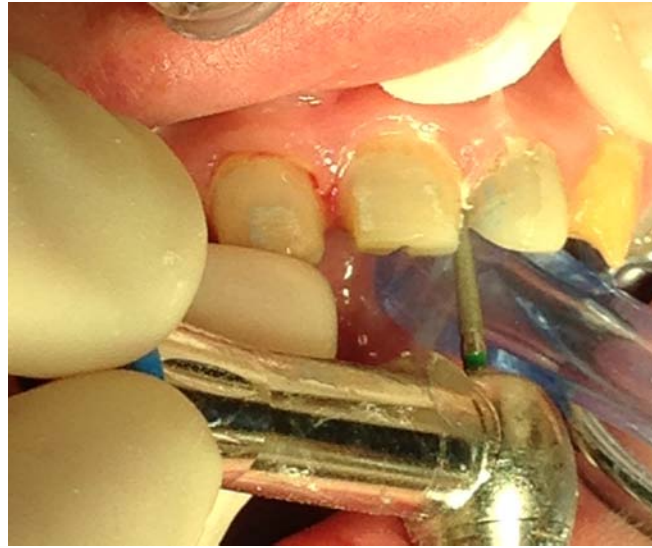
Pre-op photos in O.R.



Pre-op PA X-rays for anterior teeth



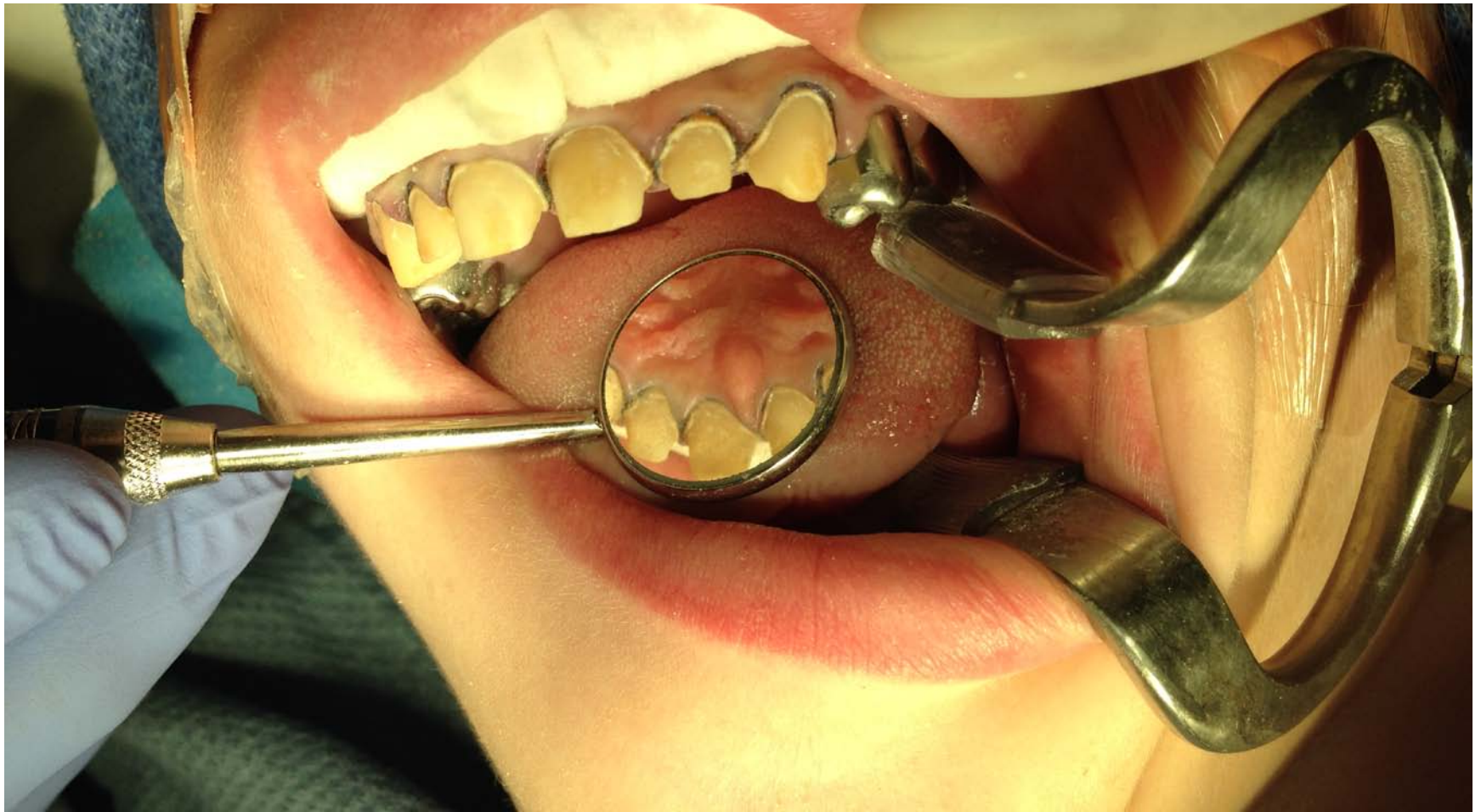
Crowns preps



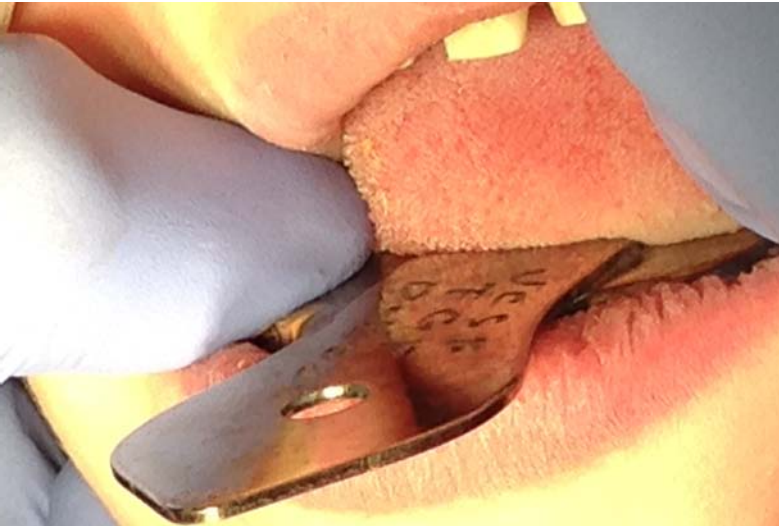
Upper anterior crowns preps and placement of retraction cords for impressions, showing crown shoulder margins



Retraction cords placement



Taking impressions techniques



Upper PVS impression



Lower anterior crowns preps



Retraction cords placement, showing shoulder margins for impression



Aluminum chloride used for retraction cords

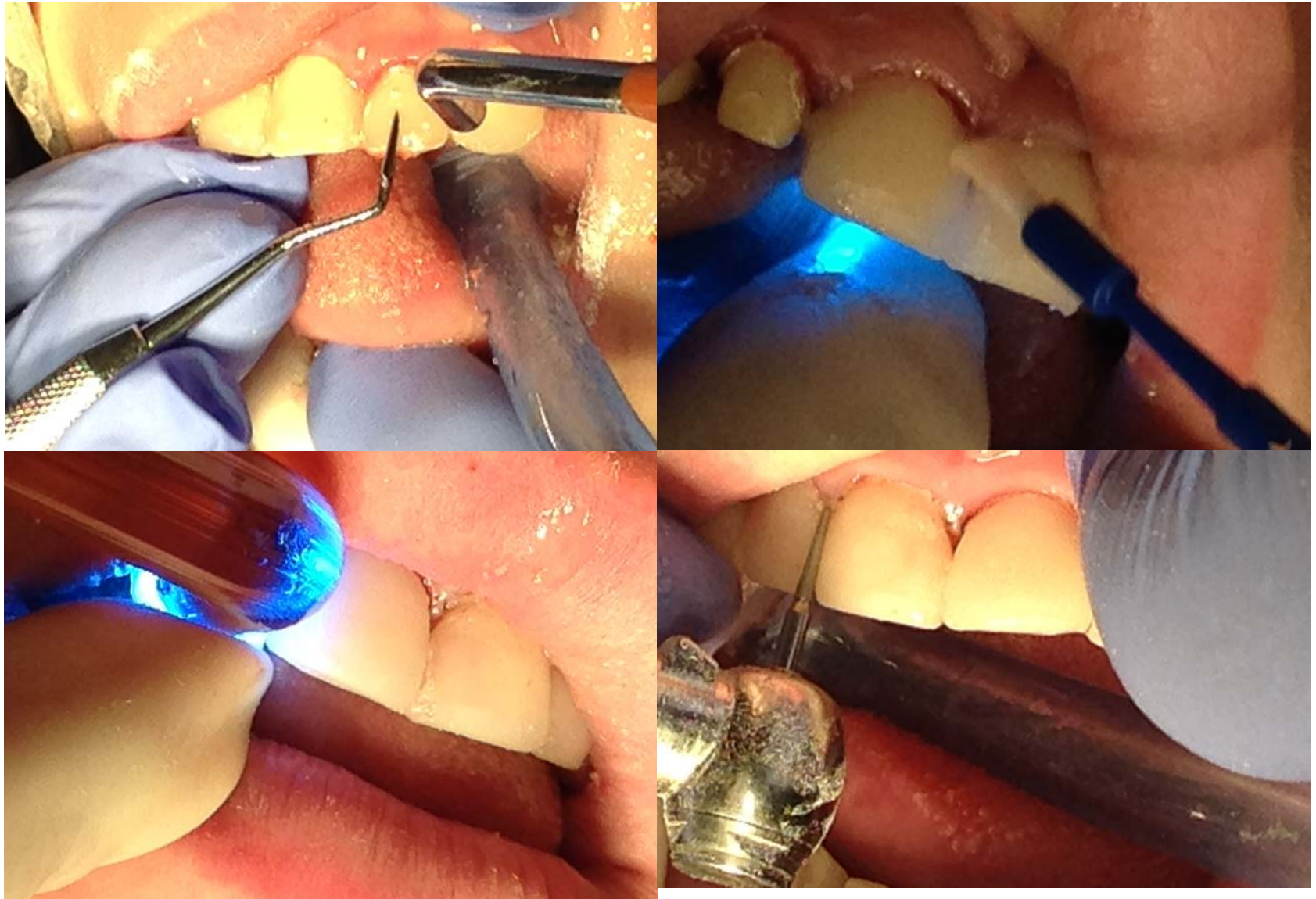
Lower PVS impression



Re-lining provisional crowns with flowable composite



Removing excess flowable composite, light curing,
further re-shaping the contour of temp crowns



Cementation of temp crowns



Provisional crowns esthetics



CAD/CAM

- After CAD/CAM milling of final crowns, which are comprised of ~ 85% ceramic and ~15% composite, the final esthetic crowns will be cemented for both upper and lower anterior teeth.
- If chipped or defect detected in the future, crowns can be restored with regular composite resins.

Completed die trimming for upper and lower anterior teeth, showing shoulder margins were captured.



Final provisional wax-ups for CAD/CAM milling procedures



Lab fabrication of CAD/CAM ceramic crowns (85% ceramic + 15% composite)



Upper teeth



Lower teeth

Crowns with adequate thickness were
evaluate on casts with proper occlusion,
and clearance



Prepared teeth after removing temporary crowns



Patient was under minimum oral conscious sedation using 10 mg of Diazepam (2 tabs, 5 mg/tab), and 50% N₂O/50% oxygen for anti-anxiety.

Crown cementing system (composite cement)



A

Composite mixing

silanate

9.6% HF

cleaning paste

Flowable composite

B

Mix
Multilink® Primer A+B (1:1)



ivoclar
vivadent

Mixing A + B = self-etched adhesive



Applied for 20 sec, then air dry gently, followed by light cure

Preparation of ceramic crowns for increased bond strength with composite cement



Etch ceramic crown with with 9.6% hydrofluoric acid (HF)



Remove debris post etching



Silanate ceramic crowns to chemically modify surfaces

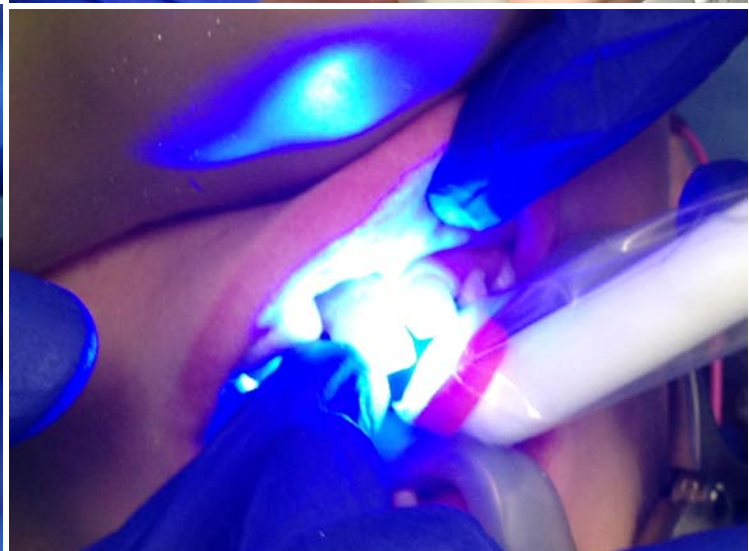
Composite cement was added to chemically-modified ceramic crowns



Composite cement



Crown placement, remove cement excess, and light curing



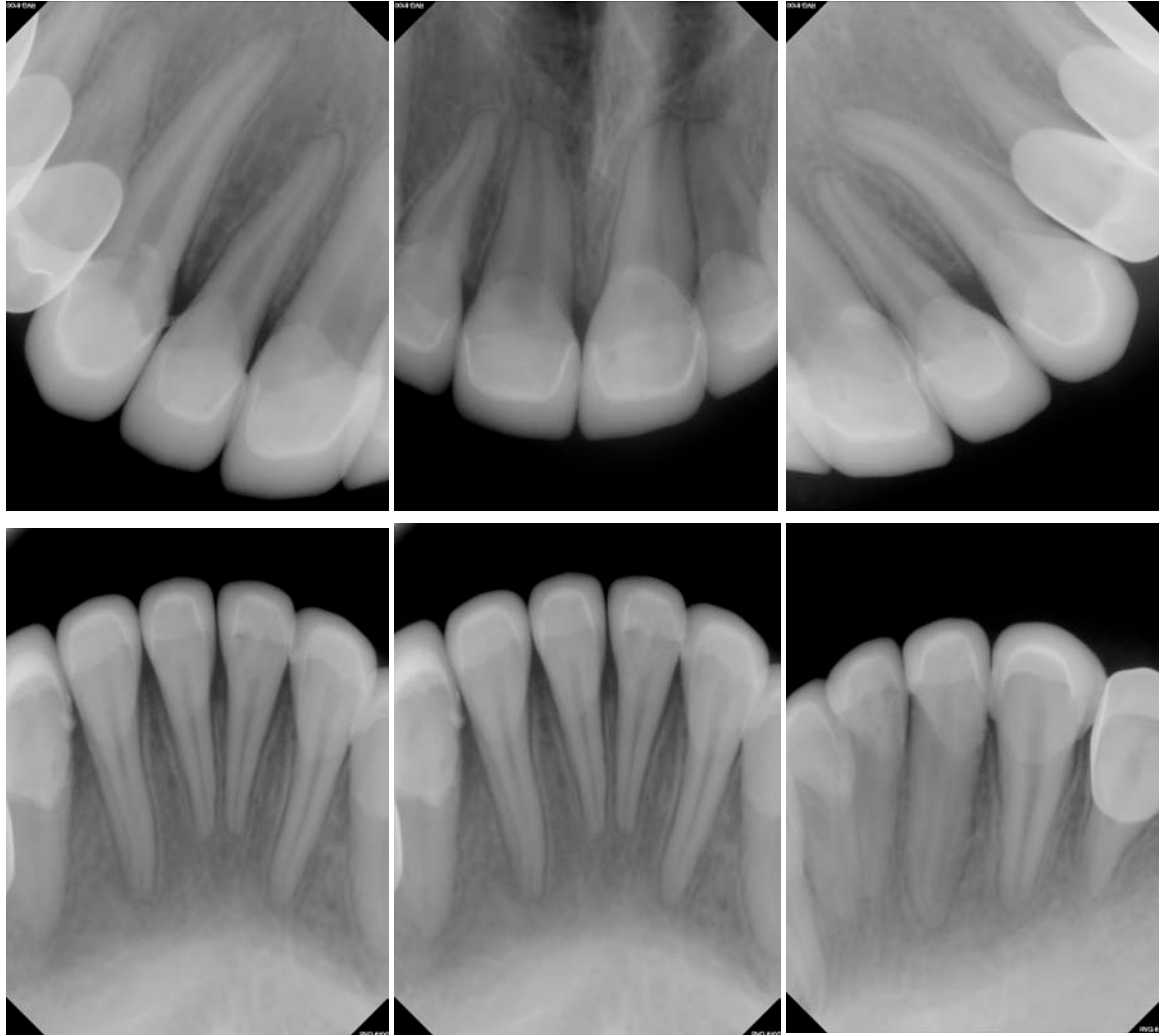
Flowable composite was added at any opened margins' areas, and removal of fine excess cement



Immediate post-op photo after crowns cementation



Final X-rays



Team of participants

- Dr. Pam Den Besten
- Dr. Sam Huang
- Dr. Thuan Le
- Dr. Jessica Massie (genetic mutation work)
- Dr. Ram Vaderhobli