Management of failed direct restorations

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Aim

- To provide a sound knowledge on how to manage failed/failing amalgam restorations

Objectives

- Define success, survival and failure
- Overview clinical signs of restorations failure/deterioration.
- Describe best management for failing/failed restorations

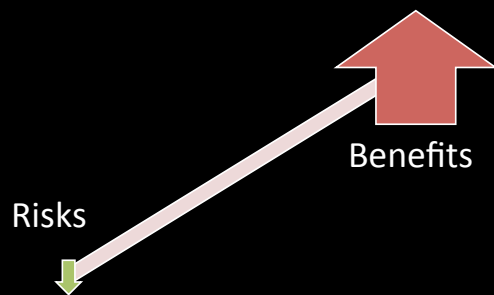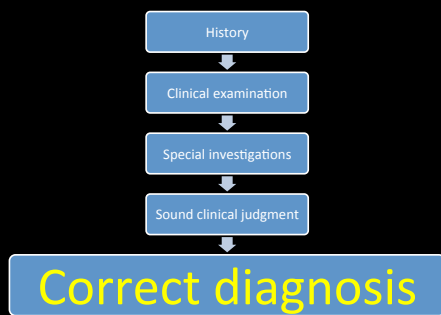## The journey of a restoration

Either

OR

Rational treatment
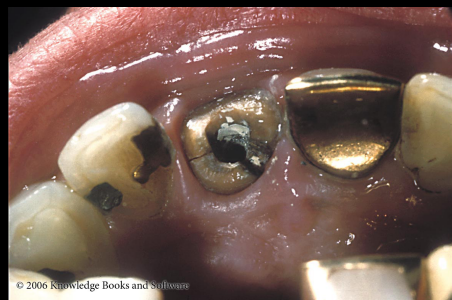
History

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Clinical examination

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Special investigations

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Sound clinical judgment

Correct diagnosis

Risks

Benefits

Definitions

- Success

- Survival

- Failure

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Failure of amalgam restorations

- Ditching

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Pitting

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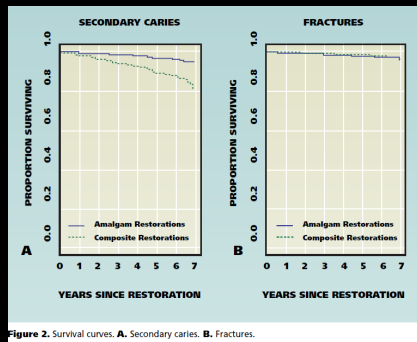
Figure 2. Survival curves. A. Secondary caries. B. Fractures.

Bernardo et.al JADA 2007

When to repair& When to replace

- locally repaired rather than totally replaced whenever possible!

Ryge criteria 1973

Alpha:
- Excellent, fulfilling all quality criteria; tooth and/or surrounding tissues are adequately protected
- 2 Highly acceptable, though one or more criteria is not ideal; minor modifications can be made to the restoration but is not necessary

- Bravo:
- Sufficiently acceptable but with minor shortcomings in areas where any instrumentation may result in damage to the tooth; no adverse effects are anticipated

- Charlie:

Unacceptable but repairable

- Delta:

 Unacceptable and must be replaced

Recall appointments

- Baseline: 1Week-1 month
- Then 1,2,3 years