

International Journal of Dentistry and Oral Science (IJDOS) ISSN: 2377-8075

Awareness On White Metal Ceramic Crowns - A Survey

Research Article

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Abstract

The metal ceramic crown was the most preferred form of tooth replacement. Hence they were at peak of their usage even if there are many disadvantages. After the introduction of zirconia crowns, the popularity of the metal ceramic crowns were lost. Hence this research is to study about the tooth coloured metal ceramic crown. This has reduced disadvantages. In order to regain its popularity, this research is to show that metal ceramic crowns are better than any other form of crowns after the modifications. A questionnaire of 15 questions were taken and they are circulated among the dental students and dental practitioners of good standardisation. They are requested to answer, data was collected and analysed by SPSS software. The graphs are also drawn using SPSS software. The obtained results were like 37% of the people prefer all ceramic crowns for the tooth replacement. 89% of the people are aware of metal ceramic crowns. 53% of the people are aware of metal used for coping. We can conclude from the survey that people are aware of metal ceramic crowns. They know the advantages and disadvantages of metal ceramic crowns.

Keywords: White Metal; Metal Ceramic Crowns; Silicon Paste And Survey.

Introduction

Crown or dental cap is the type of dental restorations that encircles a tooth or dental implant. They may be needed in the situation of large cavity threats, recommended for the health of the tooth [27]. Another example for this can be given as 'porcelain fused to metal crowns'. They are metal infused porcelain crowns. The metal used for the coping has a widespread range depending on the patient [17, 3]. The metal alloy which can withstand high temperature [2]. The metal should have a high melting point preventing the surface of the crown from melting.

The metal ceramic crown has the advantage like they are strong and durable [3]. The underlying metal makes the crown stronger and more stable. The metal helps in bonding to the tooth. They are aesthetics by having a little dark shade. There are a variety of shades available for the selection [14]. The metal ceramic crown can be placed to make a tooth [16]. Highly strong on the tilting and tipping forces [10]. They are placed by removal of the tooth structure and placing the crown above it. This is used to place the dental implant too. They can be placed for cosmetic modification [14]. Placing these crowns protects the tooth from tooth decay.

Even if there are many advantages, on the contrary there are many disadvantages too. The disadvantages include the structural weakening in the ceramic crown, prone to chipping of the ceramic or may cause fracture of the tooth [14, 15]. The chipping of the ceramic is the most form of disadvantage faced by the patients. They give a dull appearance too [25]. This is due to the presence of dark metal. After a short term usage, some tooth can have a

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Received: February 25, 2021 Accepted: March 04, 2021 Published: March 08, 2021

Citation: Venkatesh, Akash, Keerthi Sashank, Jayalakshmi Somasundaram. Awareness On White Metal Ceramic Crowns - A Survey. Int J Dentistry Oral Sci. 2021;08(03):1915-1920. doi: http://dx.doi.org/10.19070/2377-8075-21000380

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dark line [24]. This is due to metal reaction on the fusion with the ceramic. Hence in some cases, they are non-aesthetic after a few days of tooth replacement [29]. Hence they are not recommended for the anterior tooth replacement. They also needed a monthly varnish to retain its colour. And those varnishes are not effective, after the application also there is dullness [26]. The aim of this study is to create awareness on the metal ceramic and to find a new form of metal ceramic crown with reduced disadvantages.

Materials And Methods

Research Approach and Design: Cross section study taken using social media. A questionnaire of 15 questions were added in google forms and they were circulated among the people. They are requested to answer all the questions.

Population, sample, sampling: The sample size of 100 members, that too students of reputed colleges and dental practitioners of high standard were asked to answer. The data was transferred to SPSS. The data was then analysed by SPSS, statistics were made. The graphs were also drawn using SPSS. The graphs were later analysed.

Results and Discussion

The results show that the majority of the people who attended the survey are aware of metal ceramic crowns. 37% of the people prefer all ceramic crowns for the tooth replacement [29]. The only disadvantage in all ceramic crowns is removal of tooth structure which is about 2mm (fig1,2) [24, 7]. 34% of the people prefer metal ceramic crowns for tooth replacement. 17% of the people prefer metal ceramic for the tooth replacement and the remaining 12% of the people prefer acrylic crowns which don't have a long period usage. 89% of the people are aware of metal ceramic crowns [16]. 11% of the people are unaware of the metal ceramic crowns (fig 3). 53% of the people are aware that the metal used for coping is stainless steel [19]. 47% of the people are unaware of the metal used for coping (fig 4,5). 57% of the people are aware that the metal coping is attached to the ceramic by a silicon paste [5]. 43% of the people are unaware of the fixative used for the attachment of metal coping to ceramic (fig 6).

Figure 1. Pie chart depicting the frequency distribution of the preferred crown for tooth replacement.



37% of the study population responded all ceramic crowns, 34% has responded metal ceramic crowns, 12% responded acrylic crowns and 17% responded metal crowns.

Figure 2. Bar graph depicting the association of gender and awareness on preference of crown selection for tooth replace-

ment.



X axis represents the gender and Y axis represents the awareness on selection of crown for tooth replacement. Association between gender and awareness on selection of crown for tooth replacement was done using Chi square test (P value = 0.02, which is statistically significant). The most preferable crown form is all ceramic of which 32% were males and 5% were females. Hence men are more aware of selection of crowns for tooth replacement than women.

Figure 3. Pie chart depicting the frequency distribution of the people who are aware of metal ceramic crowns.



89% of the study population responded for yes and 11 % responded for no.

51% of the people opted that the removal of the tooth structure has a greater impact on the disadvantages, where as other disadvantages like separation of ceramic, non aestheticity and monthly varnishes are likely to be okay (fig 7) [18, 30]. 51% of the people consider that the metal ceramic crowns are better than porcelain crowns (fig 8,9). 76% of the people are aware of white metal. Whereas 24% of the people are unaware of the white metal (fig 10) [4]. 47% of the people are okay with the disadvantage of removal of tooth structure (fig 11) [13]. They consider that the chipping of tooth structure has the greatest impact on disadvantages [9, 13]. The main disadvantage of this is removal of the ceramic, this leads to failure of the tooth. Theories are non aesthetic because of the dullness [4, 28]. This can be more intense when the replaced tooth lasts more than a year. The varnishes fail to retain the colour of the tooth [23]. After a long duration of placing the tooth 7% of the people are aware that the metal can change its colour. 29% of the people are unaware of it (fig 12). The metal can change its colour by chemical reaction, this can be accessed by sunlight too [6]. But an intense colour change can be brought by the electroplating method. Electroplating is the transfer of ions which gives the colour of the absorbed ions [8, 22]. This should be done under a vacuum condition.

The listed disadvantages have their own impact on the tooth. But

Figure 4. Pie chart depicting the frequency distribution of the metal used for coping.



53% of the study population responded for stainless steel, 27% responded for gold, 17% responded for zinc and 3% responded for aluminium.

Figure 5. Bar graph depicting the association between gender and awareness on the metal used for coping.



X axis represents the gender and the Y axis represents the awareness on the metal used for coping. Association between awareness on the metal used for coping and gender was done using Chi square test (P value = 0.04, which is statistically significant). Stainless steel is the metal used for coping of which 28% were males and 25% were females. Hence men are more aware of metal used for coping than women.

Figure 6. Pie chart depicting the frequency distribution of the people who are aware of the substance used for fixation of coping metal to the ceramic crowns.



57% of the study population responded for silicon paste, 22% responded for metal paste, 13% responded for cyanoacrylate and 9% responded for DMSO.

Figure 7. Pie chart depicting the frequency distribution of the greatest disadvantage in metal ceramic crowns.



51% of the study population responded for removal of tooth structure, 25% responded for separation of the ceramic, 15% responded for non aesthetic and 9% responded for monthly varnishes. Figure 8. Pie chart depicting the frequency distribution of the crowns which are alternatives to metal ceramic crowns.



51% of the study population responded for porcelain, 18% responded for acrylic, 25% responded for all ceramic and 6% responded for metal.

Figure 9. Bar graph depicting the association between gender and awareness on metal ceramic crown.



X axis represents the gender and the Y axis represents the awareness on the metal ceramic crown. Association between awareness on metal ceramic crown and gender was done using Chi square test (P value = 0.960, which is statistically insignificant).

Figure 10. Pie chart depicting the frequency distribution of the people who have seen white coloured metal.



76% of the study population responded for yes and 24% responded for no.

Figure 11. Pie chart depicting the frequency distribution on awareness of disadvantage of metal ceramic crowns.



47% of the study population responded for removal of tooth structure, 32% responded for separation of the ceramic, 16% responded for non aesthetic and 5% responded for monthly varnishes.

Figure 12. Pie chart depicting the frequency distribution of the people who are aware of metal colour changing process.



71% of the study population responded for yes, 17% responded for no and 12% responded for may be.

the replacement of these disadvantages can be using white or tooth coloured metal usage in a metal ceramic and provision of boxes and groves for the metal coping, can prevent them from chipping [8, 22]. They ll withstand high stress and shearing. The tooth coloured metal gives them aesticity and provides them resistance to dullness after a long usage [1]. The monthly varnishes are not required often because the metal ceramic with tooth coloured metal is highly aesthetic and sometimes they never require them (Narayanan, Narayanan and Devanarayanan, 2020). 89% of the people opted that white metal ceramic crowns are preferable for tooth replacement option, hence this shows that people have an idea of the alternative to be used for tooth replacement (fig 13,14). The only disadvantage of the tooth coloured metal ceramic crown is the removal of the tooth structure up to 1,5mm. This leads to weakening of the tooth [20]. Or they can be used for all types of tooth replacement programmes. In future there ll be Figure 13. Pie chart depicting the frequency distribution of the people who prefer white metal ceramic crowns.



89% of the study population responded for yes, 11% responded for no.

Figure 14. Bar graph depicting the association between gender and awareness on preference to white metal ceramic crown.



X axis represents the gender and the Y axis represents the awareness on white metal ceramic crown. Association between awareness on white metal ceramic crown and gender was done using Chi square test (P value = 0.363, which is statistically insignificant).

introduction of tooth coloured metal ceramic crown which is the strongest and aesthetic too.

Conclusion

By this survey, we can say that people are aware of metal ceramic crowns. Metal ceramic crowns was leastly used crown choice for the replacement of the tooth. Sincere metal can change its colour. There is a new option of coloured metal ceramic crowns. Hence this can take away all the disadvantages present in the old form. This is a preferable option.

References

- Ajay R, Suma K, Ali SA, Kumar Sivakumar JS, Rakshagan V, Devaki V, et al. Effect of Surface Modifications on the Retention of Cement-retained Implant Crowns under Fatigue Loads: An In vitro Study. J Pharm Bioallied Sci. 2017 Nov;9(Suppl 1):S154-S160. Pubmed PMID: 29284956.
- [2]. Al-Maqtari AA, Lui JL. Effect of aging on coronal microleakage in access cavities through metal ceramic crowns restored with resin composites. J Prosthodont. 2010 Jul;19(5):347-56. Pubmed PMID: 20456026.
- [3]. Jain AR, Nallaswamy D, Ariga P, Ganapathy DM. Determination of correlation of width of maxillary anterior teeth using extraoral and intraoral factors in Indian population: A systematic review. World J Dent. 2018 Jan;9:68-75.
- [4]. Ashok V, Nallaswamy D, Benazir Begum S, Nesappan T. Lip Bumper Prosthesis for an Acromegaly Patient: A Clinical Report. J Indian Prosthodont Soc. 2014 Dec;14(Suppl 1):279-82. Pubmed PMID: 26199531.
- [5]. Ashok V, Suvitha S. Awareness of all ceramic restoration in rural population. Research Journal of Pharmacy and Technology. 2016 Oct 28;9(10):1691-3.
- [6]. Basha FY, Ganapathy D, Venugopalan S. Oral hygiene status among pregnant women. Research Journal of Pharmacy and Technology. 2018 Jul 31;11(7):3099-102.
- [7]. Biscaro L, Bonfiglioli R, Soattin M, Vigolo P. An in vivo evaluation of fit of zirconium-oxide based ceramic single crowns, generated with two CAD/ CAM systems, in comparison to metal ceramic single crowns. J Prosthodont. 2013 Jan;22(1):36-41. Pubmed PMID: 22946875.
- [8]. Ceramic and Modified Metal–Ceramic Crowns. Esthetic Dentistry and Ceramic Restorations. 1998: 215–258.
- [9]. Chaar MS, Passia N, Kern M. Long-term clinical outcome of posterior metal-ceramic crowns fabricated with direct metal laser-sintering technology. J Prosthodont Res. 2020 Jul;64(3):354-357. Pubmed PMID: 32063533.
- [10]. Duraisamy R, Krishnan CS, Ramasubramanian H, Sampathkumar J, Mariappan S, Navarasampatti Sivaprakasam A. Compatibility of Nonoriginal Abutments With Implants: Evaluation of Microgap at the Implant-Abut-

ment Interface, With Original and Nonoriginal Abutments. Implant Dent. 2019 Jun;28(3):289-295. Pubmed PMID: 31124826.

- [11]. Ganapathy D, Sathyamoorthy A, Ranganathan H, Murthykumar K. Effect of resin bonded luting agents influencing marginal discrepancy in all ceramic complete veneer crowns. Journal of clinical and diagnostic research: JCDR. 2016 Dec;10(12):ZC67.
- [12]. Ganapathy DM, Kannan A, Venugopalan S. Effect of coated surfaces influencing screw loosening in implants: A systematic review and meta-analysis. World Journal of Dentistry. 2017 Nov;8(6):496-502.
- [13]. Greța DC, Gasparik C, Colosi HA, Dudea D. Color matching of full ceramic versus metal-ceramic crowns - a spectrophotometric study. Med Pharm Rep. 2020 Jan;93(1):89-96. Pubmed PMID: 32133452; PMCID: PMC7051824.
- [14]. Hassan T, Aurangjeb AM. Comparison of fiber-reinforced composite crowns and metal ceramic crowns according to attrition of opposing teeth. Update Dental College Journal. 2014 Dec 7;4(1):21-6.
- [15]. Jaber, A. Esthetic management of diastema closure using metal ceramic crowns: A case report, Oral Health and Care. 2018.
- [16]. Ranganathan H, Ganapathy DM, Jain AR. Cervical and Incisal Marginal Discrepancy in Ceramic Laminate Veneering Materials: A SEM Analysis. Contemp Clin Dent. 2017 Apr-Jun;8(2):272-278. Pubmed PMID: 28839415.
- [17]. Jyothi S, Robin PK, Ganapathy D. Periodontal health status of three different groups wearing temporary partial denture. Research Journal of Pharmacy and Technology. 2017 Dec 1;10(12):4339-42.
- [18]. Kannan A, Venugopalan S. A systematic review on the effect of use of impregnated retraction cords on gingiva. Research Journal of Pharmacy and Technology. 2018 May 30;11(5):2121-6.
- [19]. Liu L, Li B, Yu YF. Comparison of edge fitness and metal-ceramic bonding force of base metal crowns performed using two methods. Shanghai Kou Qiang Yi Xue. 2019 Dec;28(6):597-600. Chinese. Pubmed PMID: 32346702.
- [20]. Lümkemann N, Eichberger M, Riquier R, Murphy RJ, Stawarczyk B. Fracture Load of Veneered Telescopic Secondary Crowns Made of High-Performance Polymer on Zirconia Primary Crowns: Impact of Veneering Technique. Int J Prosthodont. 2020 May/Jun;33(3):307-314. Pubmed PMID: 32320184.
- [21]. Narayanan V, Narayanan V, Devanarayanan SA. An In Vitro Comparative Study to Assess Minimal Thickness Required for Monolithic Zirconia Crowns to Resist Fracture under Load on Rapid Prototyped Models. J Contemp Dent Pract. 2020 Feb 1;21(2):183-189. Pubmed PMID: 32381825.
- [22]. Rinke S, Brandt A, Hausdoerfer T, Leha A, Ziebolz D. Clinical Evaluation of Chairside-Fabricated Partial Crowns Made of Zirconia-Reinforced Lithium Silicate Ceramic-2-Year-Results. The European journal of prosthodontics and restorative dentistry. 2020 Feb 27;28(1):36-42.
- [23]. Rinke S, Bettenhäuser-Hartung L, Leha A, Rödiger M, Schmalz G, Ziebolz D. Retrospective evaluation of extended glass-ceramic ceramic laminate veneers after a mean observational period of 10 years. J Esthet Restor Dent.

2020 Jul;32(5):487-495. Pubmed PMID: 32452164.

- [24]. Salem G. Margin design for esthetic posterior metal ceramic crowns. The Journal of prosthetic dentistry. 1988 Oct 1;60(4):418-24.
- [25]. Selvan SR, Ganapathy D. Efficacy of fifth generation cephalosporins against methicillin-resistant Staphylococcus aureus-A review. Research Journal of Pharmacy and Technology. 2016 Oct 28;9(10):1815-8.
- [26]. Subasree S, Murthykumar K. Effect of aloe vera in oral health-A review. Research Journal of Pharmacy and Technology. 2016 May 1;9(5):609.
- [27]. Vahidi F, Egloff ET, Panno FV. Evaluation of marginal adaptation of all-ceramic crowns and metal ceramic crowns. J Prosthet Dent. 1991 Oct;66(4):426-31.Pubmed PMID: 1791550.
- [28]. Venugopalan S, Ariga P, Aggarwal P, Viswanath A. Magnetically retained silicone facial prosthesis. Niger J Clin Pract. 2014 Mar-Apr;17(2):260-4.

Pubmed PMID: 24553044.

- [29]. Vijayalakshmi B, Ganapathy D. Medical management of cellulitis. Research Journal of Pharmacy and Technology. 2016 Nov 28;9(11):2067-70.
- [30]. Vohra F, Altwaim M, Alshuwaier AS, Deeb MA, Alfawaz Y, Alrabiah M, Abduljabbar T. Influence of Bioactive, Resin and Glass Ionomer luting cements on the fracture loads of dentin bonded ceramic crowns. Pak J Med Sci. 2020 Mar-Apr;36(3):416-421. Pubmed PMID: 32292445.