Restoration of An Endodontically Treated Tooth With Endocrown

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Pre operative assessment: IOPAR (left), occlusal view(right)





Endocrown preparation: IOPAR (left), occlusal view (right)





Final Impression: single step with putty and light body addition silicone for endocrown





Lab model poured with die stone

Endocrown fabricated in **Lithium Disilicate (Emax)**



10% Hydoflouric acid etching of intaglio of restoration: 10 sec



Followed by Silane coupling agent application for 60 sec





37% Phosphoric acid etching on tooth surface: 15 sec

Followed by Bonding agent application







Endocrown cemented with RelvX 200 self adhesive resin cement.

A 45 year old male patient reported to the department of prosthodontics for crown after Root canal treatment. Various treatment options for such cases include full veneer crown, partially bonded restoration, post and core followed by full veneer crown, or endocrown. Intraoral examination revealed inadequate interocclusal space and adequate enamel structure all around for bonding, so endocrown was suggested to the patient. Endocrown preparation design included 2-3mm cuspal reduction with supra gingival butt margins, 4mm intrapulpal depth, 6-8° internal taper of the pulpal chamber, and flat pulpal floor. Final impression was made with addition silicone. Endocrown was fabricated in Lithium Disilicate(Emax) and was cemented with Rely X 200 self adhesive resin cement.