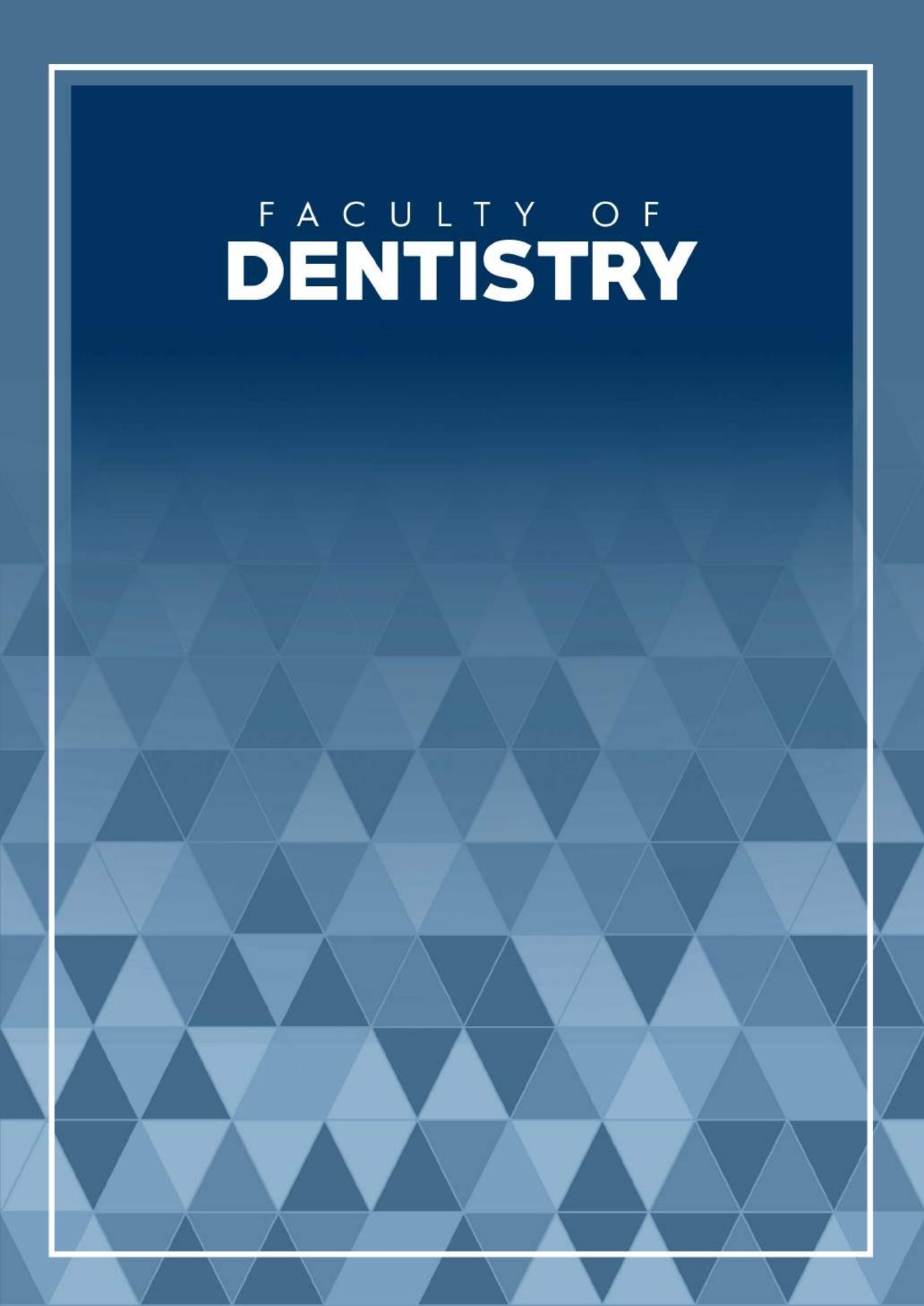


FACULTY OF
DENTISTRY

The background of the entire page is a dark blue color with a subtle, light blue hexagonal geometric pattern. This pattern consists of many small, thin-lined hexagons that create a sense of depth and texture. A thick white rectangular border surrounds the central text area, which is a lighter shade of blue than the background.

Esthetic Rehabilitation



**Yaman
Momtaz**

151997



**Mohamed El
Ganagy**

151477



**Abdalla
Mahfooz**

153029



**Hazem El
Naqgar**

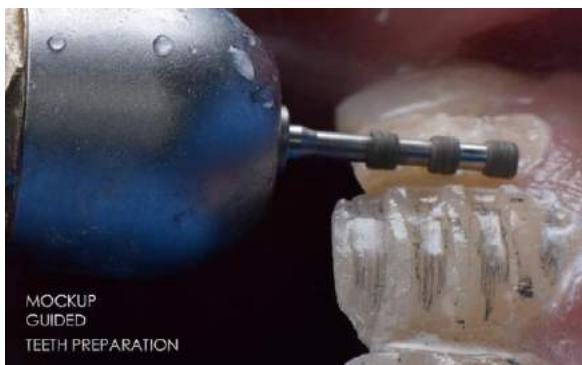
151085



ABSTRACT

A 23 years old female patient has suffered from bad esthetics and psychological insecurity about her smile due to Enamel hypoplasia, she was going to get married in a matter of weeks from the start of our project. We managed to get her smile and confidence to the highest level in time and we finished before her wedding day leaving her highly satisfied and confident. To achieve that we had to do a series of treatment for her inflamed gingiva by scaling and polishing. Then as a part of our smile design, we decided to do a simple gingivectomy procedure before preparing her teeth and delivering the final smile with e-max crown and veneers.

Supervisor:
Dr. Ahmed Wagdy
T.A. Aya Ghoneim



MOCKUP
GUIDED
TEETH PREPARATION



VENEERS AND CROWN
[ON CAST WITH GINGIVAL SIMULATION]



AFTER TEETH PREPARATION



NATURAL DETAILS

Computer-Guided All-On-Four Hybrid Prosthesis



Sarah
Abou El Fetouh
153767



Walaa
ahmed
170751



Yasmin
Hussein
151749



Yomna
abou zeid
151069



Noor Elhuda
Magdy
150079

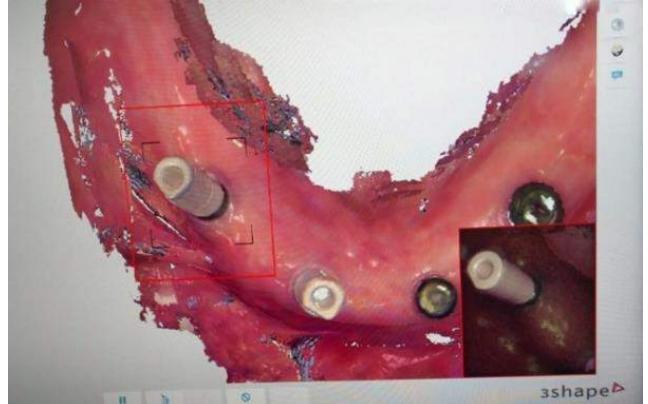
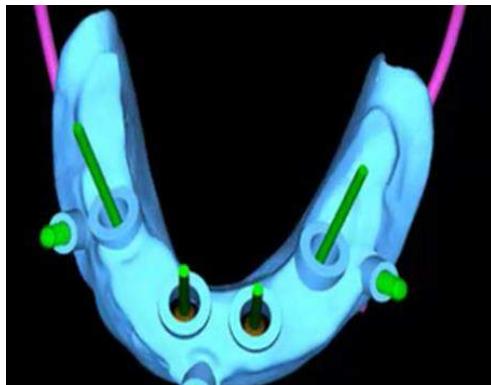


ABSTRACT

A completely edentulous patient came to the outpatient clinic in MSA University seeking a fixed solution instead of his poorly retained mandibular complete denture. Upon clinical and radiographic examination revealed that the posterior ridge was severely resorbed. Thus, All-On-Four mandibular prosthesis was indicated for this case. A CAD-CAM surgical guide was digitally designed and constructed in order to perform computer guided 4 implant placement using flapless surgical technique. After 4 months of osseointegration, implants were loaded with a fixed detachable hybrid prosthesis restoring both function and aesthetics for the mandibular ridge.

Supervisor:

Prof. Naglaa El Wakeel
Ass.Prof. Shereen Wagdy
Ass.Prof. Mohamed Elbaz
Dr. Dina Elawady



Esthetic Rehabilitation



**Mariam
Suliman**
150399



**Aya
Emad**
151621



**Nourhan
Tarek**
153241



**Ahmed
Atyia**
150457



ABSTRACT

A 29 year male patient came to MSA clinics complaining from his bad smile and discoloration of teeth. Upon clinical and radiographic examination, it was found that he had multiple teeth spacing and discoloration. The treatment Plan started with scaling & polishing and oral hygiene improvement. Followed by fabrication of motivational mockup. Then crown lengthening was performed to modify zenith point according to the pre-fabricated mockup. Teeth were prepared for guided veneers for the upper six anterior teeth and 1st premolars. Finally, isolation & cementation of veneers were performed.

Supervisor:
Dr. Ahmed Wagdy
T.A. Aya Ghoneim



Esthetic Rehabilitation



Ehab Hazem

150085



Malak Bassem

150229



ABSTRACT

A 46 years old female hypertensive patient came to MSA clinics with badly decayed anterior teeth and heavy stains in remaining teeth. She also had bilateral missing mandibular 1st molars. The chief complaint was restoring esthetics for her anterior teeth and restoring the missing teeth. Clinical and radiographic examination were performed and a treatment plan was set. Many challenges were faced such as modifying oral hygiene habits and lower the amount of unfavorable food intake in order to enhance the prognosis of the proposed treatment plan and prosthesis. Crown lengthening was performed first, then two implants were placed to restore the missing teeth, and endodontic treatment together with resin composite restorations were performed.

Supervisor:

Dr. Sherif Hefnawy
Dr. Nada Zaazou
Dr. Faisal Safwat
Dr. Ahmed Wagdy
T.A. Aya Ghonim
T.A. Tarek Hammad



Full mouth rehabilitation case using computer guided surgery for correction of occlusion and vertical dimension



**Manar
Aawd**
151473



**Aisha
Mazen**
152211



**Aya
Gamal**
152045



**Aly
Ashraf**
153741

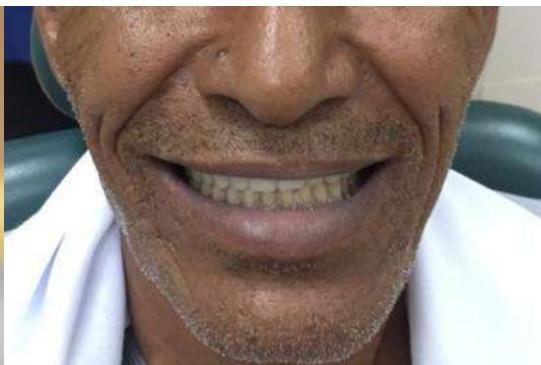
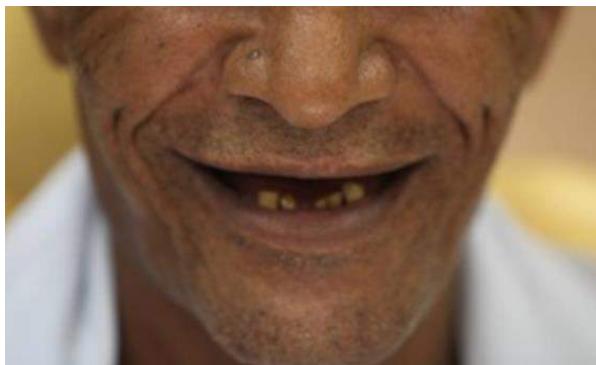


ABSTRACT

A heavy smoker 53 year male patient was a case challenge for rehabilitation and correction of occlusion and vertical dimension of occlusion. Alteration of the smoking habit gradually together with periodontal treatment were performed. Treatment of candida infection was confirmed. Then removal of remaining roots was performed. Implant placement using computer guided surgery and 3D printed surgical guide was used for implant placement in the edentulous mandible (4 implants). An over denture (all on 4) was fabricated for the lower arch after 4 months of implant osseo-integration. An upper complete denture was fabricated as well to restore normal occlusion, function and esthetics.

Supervisor:

Ass.Prof.Dr. Shereen Wagdy
Ass.Prof.Dr. Waleed Maryod



Full Mouth Rehabilitation: A Multidisciplinary Approach to Restore Function and Esthetics



Hadeer
Samir
153935



Heba Tallah
Tarek
150565



Fatma
Nashee
155525



Ahmed
Momen
154569



Abdelrahman
Shawky
153291



Abdelrahman
Mostafa
151015



ABSTRACT

A 23 years old female patient presented to MSA clinics with multiple carious lesions, badly deteriorated teeth as well as missing teeth due to bad oral hygiene. Upon clinical and radiographic examination, full mouth rehabilitation was planned. Periodontal therapy was applied followed by conservative treatment for all carious lesions and defective restorations. Moreover, endodontic treatment and re-treatment were performed in all non-vital teeth. In addition, we promoted to fixed prosthodontic therapy. Not only it included several posts and cores multiple full coverage single crowns, but also endo-crown and long span bridge. Finally, surgical extraction of non-restorable teeth was performed, and implant placement was planned. Patient's esthetics, function, and satisfaction was the achieved goal.

Supervisor:

Dr.Mona Fadel	Dr. Mohamed Mokhtar
Dr.Ahmed Wagdy	T.A.Hassan Naguib
T.A. Samar Fathy	T.A.Ahmed Ibrahim
T.A. Aya Ghoneim	



Direct Full Mouth Restorative Rehabilitation



Kareem
Abdelfattah
151791



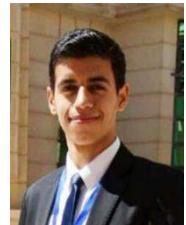
Omar
Ehab
152387



Dina
Khaled
150127



Heba
Hossam
153091



Abdelaziz
Magdy
151941

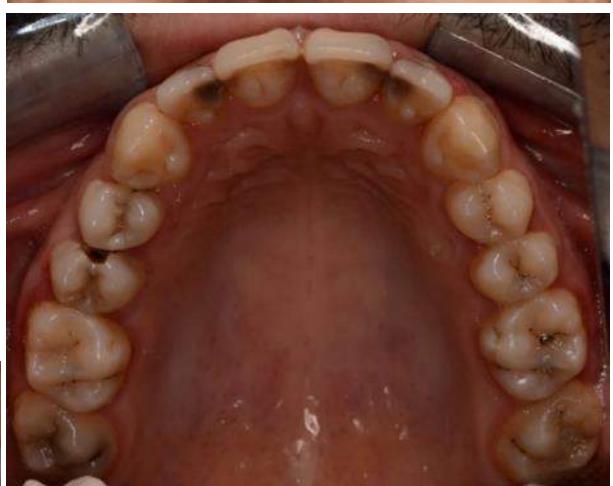


ABSTRACT

A 22 old male patient presented to MSA clinics with multiple badly decayed teeth. The patient was embarrassed form his smile. After clinical and radiographic examination, a treatment plan was set to restore esthetics without affecting the function. Regarding the patient chief complain, the treatment plan started with periodontal therapy (scaling & polishing) followed by conservative therapy for anterior teeth then posterior teeth. Endodontic treatment is done in the two exposed teeth followed by post and core placement. Finally, fixed prosthesis was performed.

Supervisor:

Prof.Dr. Heba Taher
Ass.Prof.Dr. Nermine Hamza
T.A. Tarek Nour



Restoring aesthetics for a generalized rampant caries case



Nada
Attia
153353



Mai
Sedeek
152373



Abeer
Khaled
150077



Hossam
Abbas
153119



Ahmad
Alaa-Eldin
152415



ABSTRACT

A 26 year old male patient presented to MSA clinics with multiple class III caries, multiple class V caries in all upper anterior teeth and 1st premolars bilaterally and lower canines and premolars bilaterally, multiple class I cavities in lower molars, upper premolars, with external stains due to drinking lots of coffee and internal stains due to enamel hypo-calcification. Occlusal wear in some teeth, missing teeth, and exposed teeth were also diagnosed. Patient was also presented with slight open bite. A proper treatment sequential plan was set to reach the proper function and esthetic of this challenging case.

Supervisor:

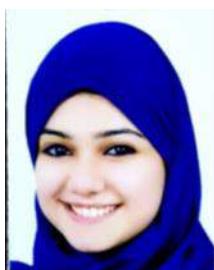
Dr. Ali Abdel Nabi	Dr Mona Fadel
L.A. Amr Khaled	T.A.Menna El-Selhdar
T.A.Shorouk Hesham	T.A. Ahmed Mohsen
T.A.Tarek Nour	



Full mouth rehabilitation and esthetic restoration of severely mutilated teeth



**Nehal
Kamal**
150679



**Yasmin
Fathy**
151565



**Mennatallah
Hossam**
154213



ABSTRACT

A 30 years old male patient came to MSA clinics with bad oral hygiene, badly decayed teeth and remaining roots .A treatment plan was set to restore function and esthetics. The treatment plan started with periodontal and surgical therapy, followed by conservative therapy to restore vital teeth with Glass-ionomer to enhance oral hygiene. Then, endodontic therapy for non-vital teeth followed by fiber posts and cores to re-build badly decayed teeth. Then PMMA crowns were used for the try-in that showed canting in upper anterior teeth. So, a face-bow record is re-taken. Finally, teeth received zirconia crowns.

Supervisor:

Dr. Ahmed Wagdy
Dr. Faisal Hamza
T.A. Aya Ghoneim



Esthetic Rehabilitation with Smile Design



**Dina
Ashraf**
151963



ABSTRACT

A 24 year female patient came to MSA clinics complaining from esthetic problem due to failed previous orthodontic treatment. Upon clinical and radiographic examination, patient had gummy smile and necrotic pulp in upper left central tooth. She refused orthodontic retreatment, and we had to finish her treatment plan within one month before her wedding time. So we started immediately with scaling, polishing, and oral hygiene improvement. Then Root Canal Treatment in the upper left central incisor was performed. Finally, veneer preparation, isolation, and cementation was performed to restore esthetics.

Supervisor:

Prof.Dr. Naglaa El-Wakeel
Dr. Ahmed Wagdy
Dr. Ahmed Ezz



Esthetic Rehabilitation



**Essam
Nasr**
152273



**Mohamed
Safi**
150263



**Omar
Mohamed**
151823



**Tarek
Adham**
150251



**Yahya
Alaa**
152199



ABSTRACT

The patient came to MSA clinics seeking esthetic problem. After proper clinical and radiographic examination, suitable treatment plan was performed as to start with supra-gingival and sub-gingival scaling, polishing and oral hygiene instructions. Followed by surgical extraction of the remaining root of the upper right canine. Then restoration of cervical caries in lower right and left 1st premolars were performed, and restoration of caries in lower left 3rd molar tooth, upper right and left lateral incisors, upper right central incisor, upper left canine, and upper right and left 1st premolars were performed. Finally, bilateral endo-treatment of lower left and right 1st molar teeth were performed.

Supervisor:

Dr. Mohamed Yehia
Dr. Nada Zazou
Dr. Mona Fadel



Full Mouth Rehabilitation of Severely Mutilated Teeth for a Periodontally Compromised Patient



**Noha
Mostafa**
150629



**Sara
Samir**
152099



**Salma Al-
Hussein**
150145



ABSTRACT

A 40 year old male patient with bad oral hygiene and severely destructed teeth complained from pain and loss of function and esthetics. The case was challenging from the very beginning due to the periodontal condition which resulted in severe bone loss especially in the upper posterior area bilaterally. After a thorough periodontal assessment and reviewing the radiographs, the hopeless and diseased teeth were removed and a strict oral hygiene regimen was followed to turn the patient into a stable periodontal condition. Restoration of decayed teeth and replacement of the missing ones followed the stabilization of the periodontium. The outcome exceeded the expectations. The treatment improved the patient's quality of life psychologically and functionally.

Supervisor:
Dr.Mohamed Mokhtar
Dr.Mohamed Moussa
T.A. Mark Tharwat



Full Mouth Rehabilitation



Habiba
Ibrahim
165545



Nada
Askalany
161429



Maisoun
Saeed
153333



Sherif Abdel
Baset
152471



Yasmine
Ayman
152607



ABSTRACT

The patient chief complaint was function and esthetic. After proper clinical and radiographic examination, a treatment plan was set. First, we did supra-gingival and sub-gingival scaling and polishing to improve the oral hygiene of the patient. Then endodontic treatment for the pulp-involved teeth was performed. Followed by, operative treatment for carious teeth, and finally, restoring the missing teeth with fixed bridges. The lower arch has a free end saddle, so it will be restored by removable denture. The main problem with this case was the oral hygiene and how to guide the patient to improve it.

Supervisor:
Dr. Ahmed Wagdy
T.A. Ahmed Ibrahim
T.A. Aya Ghoneim



Esthetic Rehabilitation



Omar
sarwat
155269



Rana
Elsharawy
154355



Omar
Ammar
153967



Mohamed A.
Khattab
152143



Nouran
Khaled
154067

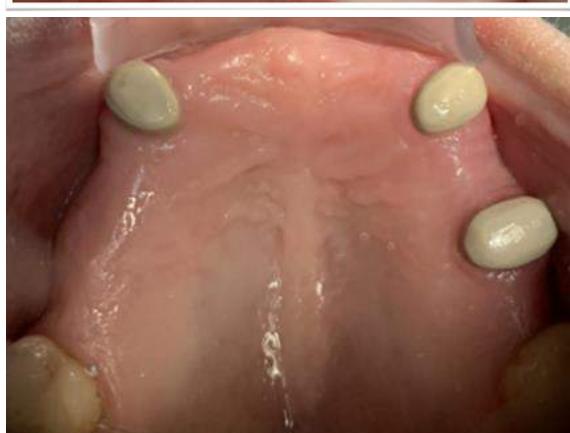


ABSTRACT

A 22 year old female patient presented to MSA clinics with multiple carious teeth and unsatisfied with her smile. After clinical and radiographic examination, a full smile makeover was planned for the patient. We started with periodontal treatment in form of scaling and polishing, followed by endodontic, and operative treatments. Restorative treatment was performed to all molar and premolar teeth of the upper arch. Restorative treatment to all molar teeth of the lower arch was performed except for the lower left 1st molar endodontic treatment was performed.

Supervisor:
Dr. Hinar El Moghazi
Dr. Sherif Hifnawy
Dr. Nada Zaazou





Bio-printing



Israa Abdelbadie
150687



Marina ezzat
155367



Mohamed tarek
151825



Kareem hatem
151225



Hossam Elkady
153119



Abdelrahman
Mohamed
151049



Rawan
Hosam
153787



Samar
Abdelhakeem
151745



Sherif
Mohamed
155293



Mohamed
Hussien
151777



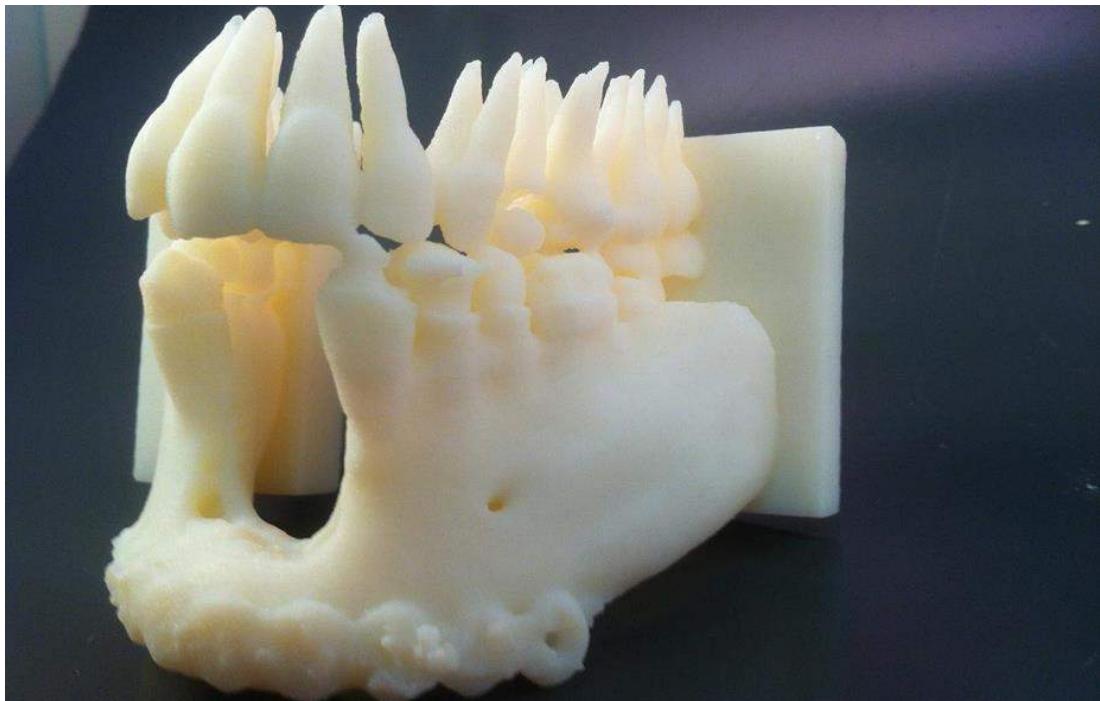
ABSTRACT

" Bio-fabrication can be defined as the production of complex living and non-living biological products from raw materials such as living cells, molecules, extracellular matrices, and biomaterials "-Mironov et al., 2015.

Bio-printing is an extension of traditional 3D printing. It produces living tissue, bone, blood vessels and, potentially, whole organs for use in medical procedures, training and testing. It provides the opportunity to generate patient-specific tissue for the development of accurate, targeted and completely personalized treatments.

Supervisor:

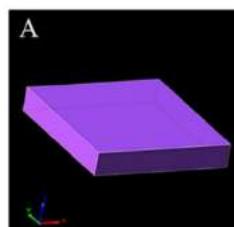
Prof. Dr. Naglaa El-Wakeel



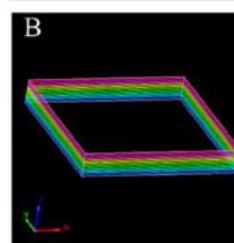
Stratasys 3D printed mandible model showing details that a surgeon cannot see with CT scan



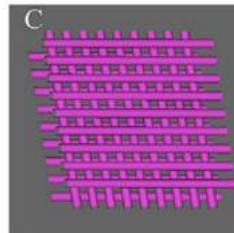
Bio-pen : modification of Bio-printing



A: Regular geometry of the printed tissue construct.



B: Blueprint recognizable by 3D Bio-plotter.



C: Diagram of the inner grid structure of 3D printed tissue construct

The application of new technology in periodontal field "Augmented Reality"



Mohamed Atef
152829



Mai Khalid
150067



Merna Maher
150805



Randa Hassan
150661



Radwa
Kamal
152953



Abdulelah
Ali
061342



Abdullatef
Mohamed
145309



Mustafa
Mohammed
150181



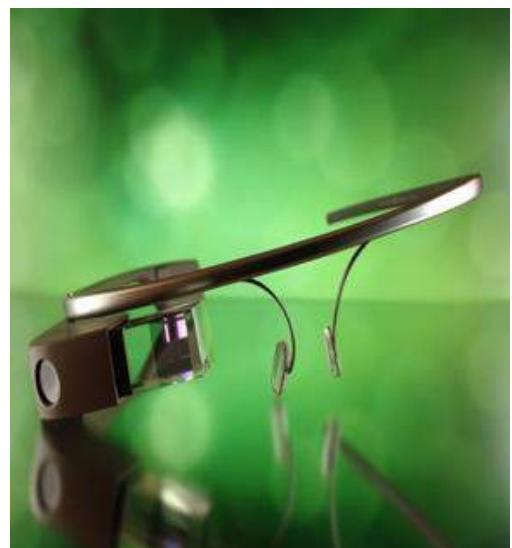
ABSTRACT

Augmented Reality:

Augmented reality is the technology that expands our physical world, adding layers of digital information onto it. Unlike Virtual Reality (VR), Augmented Reality (AR) does not create the whole artificial environments to replace real with a virtual one. AR appears in direct view of an existing environment and adds sounds, videos, and graphics to it. In dentistry, oral and maxillofacial surgery is the primary area of use, where dental implant placement and orthognathic surgery are the most frequent applications. Recent technological advancements are enabling new applications of restorative dentistry, orthodontics and endodontics.

Supervisor:

Prof. Dr. Naglaa El-Wakeel



Clinical Evaluation of the Marginal Integrity, and Internal Fit of E-Max Endo-crown Restorations with Different Marginal Preparation Designs. Ex-Vivo



Inas A. Elalem
Master thesis MSA



ABSTRACT

Purpose: The aim of this study was to evaluate clinically the marginal integrity, and internal fit of endodontically treated molar teeth restored with endo-crown restorations with two different preparation designs. Results: The marginal gaps of both groups were within the clinical acceptable range, but group 1 ($73.49 \pm 5.29 \mu\text{m}$) was statistically significantly higher than group 2 ($59.81 \pm 3.42 \mu\text{m}$), meanwhile there was no significant difference regarding the internal fit of both groups as group 1 ($83.05 \pm 11.72 \mu\text{m}$) had slightly higher mean value than group 2 ($80.29 \pm 10.59 \mu\text{m}$). Conclusion: Endo-crown restorations with different preparation designs showed a clinical acceptable range of marginal and internal fit.

Supervisor:

Prof.Dr. Rabab M. Ibraheem,
Prof.Dr. Ahmed M. Hamdy

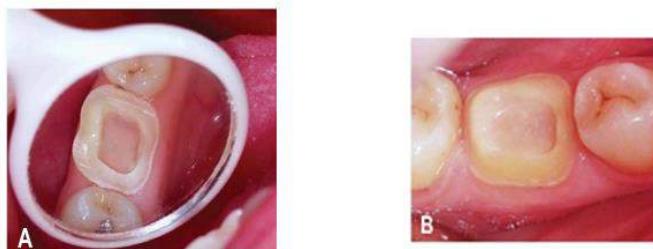


Figure 2: A; Butt joint preparations with sealed canal orifices with flowable composite of tooth # 30

B; Circumferential preparation with deep chamfer finish line and sealed canal orifices with flowable composite of tooth # 30

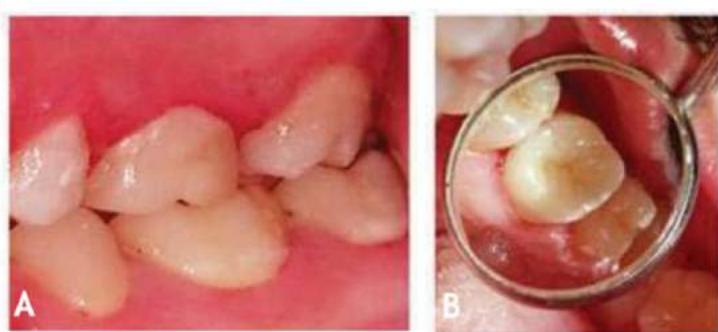


Figure 3: Post-operative endocrown restoration cemented on tooth # 14
A: Buccal view, B: Occlusal view of endocrown restoration cemented on tooth # 14

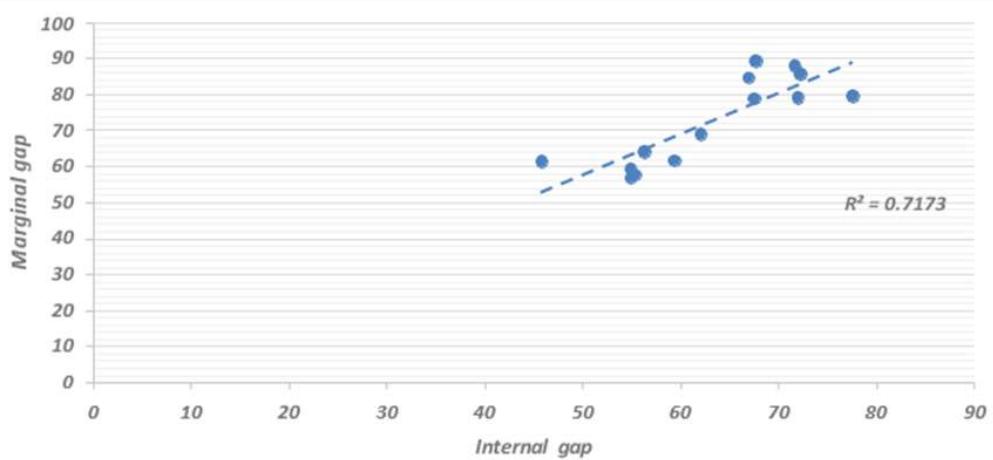
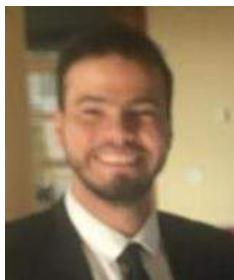


Figure (4) A linear chart of correlation between total marginal gap and internal gap

Assessment of Fracture Resistance of Endocrown Compared to Conventional Crown Retained with Fiber Post and Composite Core: In Vitro Study)



Abdallah Abusweireh
Master thesis MSA

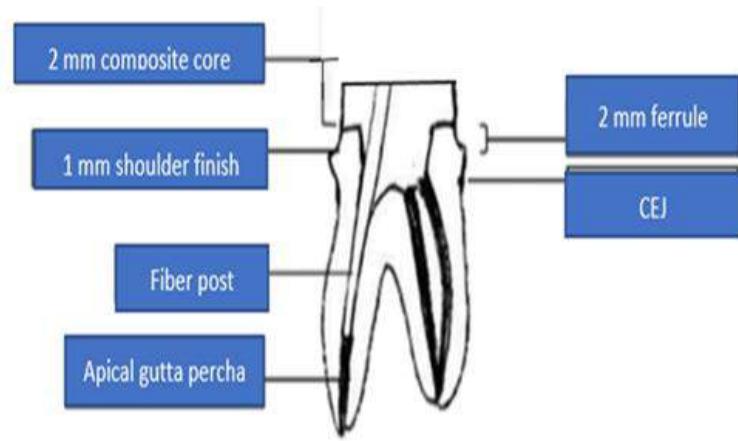
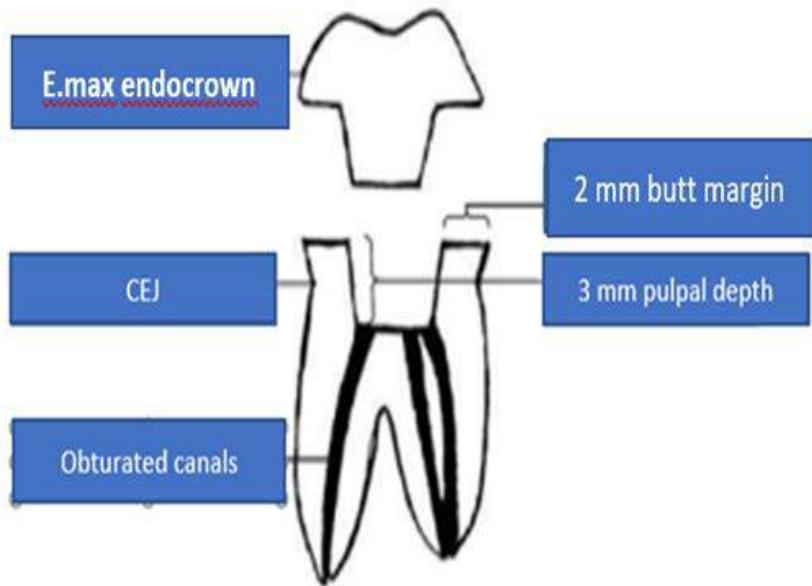


ABSTRACT

This in-vitro study was designed to compare the fracture resistance of endo-crown restoration to the conventional crown retained with fiber post and composite core. Conclusion: Endocrown and conventional crown retained with fiber post and composite core perform similarly under load. Endo-crown restoration can be a feasible restoration in badly decayed endodontically treated posterior teeth where a circumferential ferrule can't be achieved. Both Endo-crown and conventional crown retained with fiber post and composite core can withstand the clinical masticatory forces in molar area.

Supervisor:

Prof. Dr, Rabab M. Ibraheem,
Prof.Dr. Ahmed M. Hamdy



Assessment of the Cyclic Fatigue Of Inlays/Onlays and fiber-post retained crowns constructed from Lithium Disilicate on an Endodontically treated teeth



Amr Ismaeil
Master thesis MSA



ABSTRACT

This in-vitro study evaluated the fracture resistance of endodontically treated teeth restored with inlays, onlays and fiber post retained crowns. All restorations were fabricated from lithium disilicate (E-max). Twenty one freshly extracted caries free mandibular molars of similar dimensions that followed the inclusion criteria were collected. All samples were digitally scanned using (MyCrown, Fona) digital scanner and twenty one lithium dislocate restorations were constructed as inlays, onlays and conventional crowns. The failure modes were evaluated using digital microscope at 35X magnification. The results were collected and statistically analyzed.

Supervisor:

Prof. Rabab M. Ibraheem
Prof. Ahmed M. Hamdy



Figure 10: Measuring the Bucco-lingual width of unprepared molar.

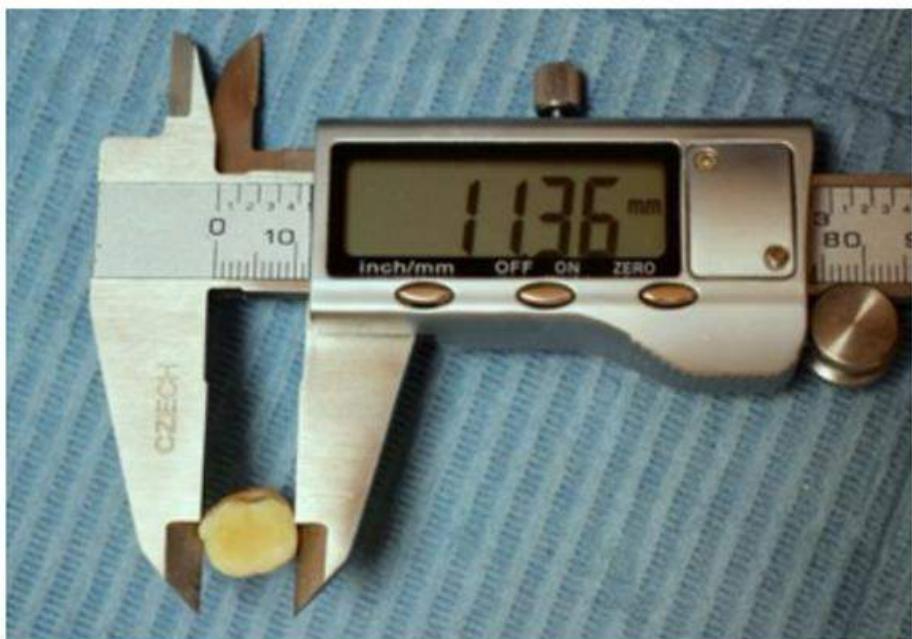


Figure 11: Measuring the mesio-distal width of unprepared molar.