Stela

High-performance self-cure composite offers chameleon esthetics and a gap-free interface

ANKUR GUPTA, DDS

Dr. Gupta graduated from the University of Michigan School of Dentistry in 2004, and after completing a 1-year General Practice Residency in Cleveland, OH, he and his partner, Dr. Nisha Gupta, opened North Ridgeville Family Dentistry. Facing early struggles with patient finances, patient growth, and professional fulfillment, he turned to self-improvement, testing personal and professional strategies on himself, his family, and his practice. More than a decade later, he enjoys strong patient numbers, high case acceptance, and a thriving team. A passionate speaker, he shares his insights nationwide, offering practical steps for success. He is a member of the ADA Success Program, Greater Cleveland Dental Society, Ohio Dental Association, and Catapult Education's Speakers Bureau.

Last year, a new patient visited Dr. Ankur Gupta's office. Routine radiographs revealed a prior MOD restoration on tooth No. 4, riddled with voids. In this common restorative scenario, the prep occupied most of the tooth, leaving 3 material options: incremental packable composite, bulk-fill flowable composite, or resin-modified glass ionomer—each with the potential for voids. But rather than judging the previous dentist, Dr. Gupta worried, could his own composites have the same issue?

I recently did an experiment with curing light testing blocks, which are trifold plastic tabs designed to simulate a tooth preparation. I filled each block with 3 materials—packable composite, bulk-fill flowable composite, and RMGI—and examined the results.

Each had its drawbacks. The packable composite had a medium-sized void, making me uneasy about my past work. It meant there could be patients in my community who trusted me and paid me that are walking around with a large void in the composite I did. The bulk-fill flowable failed to fully cure at the deepest part of the prep, and the RMGI compule lacked sufficient material, requiring a second increment and—you guessed it—more voids.

If only there was a flowable, dual-cure material that could be extruded in large amounts from a syringe. Until recently, I didn't know such a product existed. Now that I do, it has changed how I approach large restorations. The product is SDI's Stela, and it is truly a game changer. No matter the depth or complexity of the restoration, I now can fill with 100% confidence of a solid, fully cured result.

Ready to Restore in Seconds

It's a simple, 2-step process: Apply Stela Primer to the prep, which accelerates polymerization at the restoration interface—unlike traditional composites, where shrinkage pulls away from the prep. After air-drying the primer, simply fill your prep with the flowable, dual-cure, syringeable Stela composite (also available in capsules) all the way to the top, and walk away. Come back in 4 minutes and you'll have a fully cured, highly polishable restoration.

I've developed a habit of curing my composites with a light, so waiting for the material to self-cure is a little weird—albeit a small price to pay for a void-free result. I'm a believer. My large restorations and core buildups demand the restorative product that I'm most confident in, and that's Stela by SDI.

Figure 1—Patient presented with a prior MOD restoration on tooth No. 4 filled with voids. What happened?

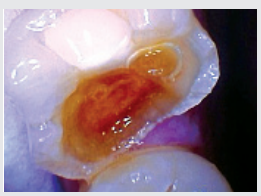

Figure 2—Relying on traditional methods to fill this very deep restoration or buildup might lead to a void or incomplete cure.

Figure 3—Since Stela does not need a curing light, I can achieve a full cure, while its flowability minimizes the chance of voids.

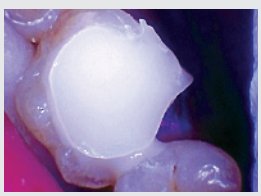

Figure 4—Thanks to Stela's unique technology, the fill was robust, consistent, and minimized any leakage at the cavosurface gap.

FOR MORE INFORMATION:

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