Introduction
Extraction of anterior teeth can be resulted from chronic peri-odontal disease trauma. Loss of an anterior tooth in a young patient compromises the esthetics and lead to psychological trauma. The immediate replacement of the anterior tooth soon after extraction can reduce this trauma. The recent use of glass fibres in dentistry has proven their strength in respect to the replacement of anterior teeth. The compressive strength of the glass fibers exhibited is excellent can also be used in posterior tooth replacement.\(^1\) A new technique has designed to immediately replace the extracted anterior tooth with means of fixed prosthesis may be helpful in all or certain cases. One more aspect of this kind prosthesis is using patients own tooth as pontic.\(^2\) This case report describes a conservative provisional treatment of the anterior missing tooth using fiber-reinforced composite woven fiber.

Case Report 1
A 26 year old patient reported to our outpatient clinic with a chief complaint of pain in relation to anterior aspect of upper jaw. On examination the periodontal status of 22 was compromised with bleeding on probing and pocket formation. The introral periapical radiograph reveled periapical pathology with bone loss (Fig1). The patient was not willing for periodontal and periapical surgery. So extraction of the tooth and immediate replacement in fixed manner using patients own tooth was planned. Tooth was extracted under local anesthesia. The root was resected 1mm above the cemento-enamel junction and the crown was secured. The coronal pulp was extirpated thoroughly through access opening and filled with GIC. A required length of fiber strip which was commonly used in periodontal surgeries was taken (Fig 2). This strip was readily bonded to the palatal aspect of the modified tooth 22 as shown in Figure 3, using restorative composite resins. The natural tooth pontic with winged retainer was bonded to the palatal surface of 21, 23 using composite resin and high points reduced as needed (Fig 4).

Case Report 2
A 42 yrs old female patient reported with missing 21 (Fig 5). Patient was partial denture wearer for last 3 months but due to some disadvantages of removable partial denture she was not satisfied with denture. Conventional fixed partial denture was ruled out because of the cost factor. Hence it was decided to manage with a fiber reinforced fixed partial denture. Primary impression made with alginate impression material and master cast was prepared. Appropriate shade for composite resin was selected. Required length and width of fiber was taken. The pontic was prepared on the master cast using appropriate shade composite resin (Figure 6). The fiber reinforced pontic with winged retainer (Figure 7) was bonded to the palatal aspect of 11 and 22 and high points reduced (Figure 8).

ABSTRACT
Extraction of the anterior teeth leads to improper phonation, esthetics and more psychological trauma to the patients. This case report describes a conservative provisional treatment of the anterior missing tooth using fiber-reinforced composite woven fiber.

Keywords: Fiber Reinforced Fixed Partial Denture; Immediate Denture; Provisional FPD; Temporization.
**Case Report 3**

A female patient was reported with missing 46. On clinical examination the edentulous space available to replace the missing molar was inadequate because the adjacent teeth were drifted to the space. On examination it was adequate to replace with a premolar in the fixed partial denture. The distal abutment was involved with asymptomatic mesio occlusal caries. After considering all aspects it was decided to replace the missing tooth with fiber reinforced fixed partial denture. The study models were prepared and mounted on a semi adjustable articulator to evaluate the occlusion. A class II cavity prepared for the removal of caries in relation to 47. An occlusal stop of depth of 1.5mm prepared on mesial abutment i.e., 45 involving distal marginal ridge. The pontic prepared using fiber reinforced composite and with fibers (Figure 9), and later bonded to the respective abutments (Figure 10).

**Discussion**

In the first case report an unique method was followed to replace missing tooth immediately in a fixed manner using patient's own tooth. The immediate replacement of anterior teeth is routinely done using removable partial denture. The said technique described here is applicable, if patient willing for a Fixed partial denture at latter stages. The main advantage with this method is it will create natural emergence profile for an ovate pontic at latter stages of the treatment. In this method the root is resected at a higher level of cemento enamel junction, so that it will compensate to the gap which will be created between the modified pontic in provisional prosthetis and gingival tissues. After root resection the contents of pulp chamber and canal is taken out and replaced with some restorative material like Glass ionomer cement or composite materials to overcome the discoloration at latter stages.

The wings of provisional prosthesis called winged retainer used in this method are the fiber stripes which are commonly used the periodontal surgeries. If not required length gauze piece taken, a thin layer of composite restorative material smeared on to the surface of gauze piece and cured keeping on the surface of the cast. Studies also show the use of ligature wires for retaining pontic.1,2

The use of fibers is extensive in field of fixed prostodontics, extended to replace posterior teeth also. The potentiality of fibers in respect to strength is brilliant with use of various woven fibers, multi-stranded fibers etc. The recent aspect with the use of fibers for fixed prosthesis is not only for provisional cases but used on permanent basis also. The immediately placed provisional prosthesis also extended for replacement of multiple teeth up to two teeth, but increase in the span may leads to flexibility of the prosthesis is a debatable issue.6

**Conclusion**

In conclusion the techniques described here using fiber-reinforced composite woven fiber was a good option for the conservative provisional treatment of the anterior missing tooth.

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