

Review Article

Advances in Digital Prosthodontics: A Scoping Review of CAD/CAM and 3D Printing

Ayushi Pandey, Kirti Jajoo Shrivastava, Shipra Shukla, Shweta Singh

Department of Prosthodontics, Crown and Bridge and Implantology, People's College of Dental Sciences & Research Centre, Bhopal (Madhya Pradesh)

ABSTRACT:

The integration of digital technologies in prosthodontics has revolutionized dental practice by significantly enhancing accuracy, efficiency, and patient-centered outcomes. Traditional prosthodontic workflows, which have relied on manual impressions, wax modeling, and labor-intensive fabrication processes, are increasingly being replaced or supplemented by advanced digital techniques. This scoping review systematically analyzes peer-reviewed literature from key databases (PubMed, Scopus, and Web of Science) to evaluate the impact of Computer-Aided Design and Computer-Aided Manufacturing (CAD/CAM) and 3D printing, on prosthodontic treatment planning and prosthesis fabrication.

Findings indicate that CAD/CAM technology improves prosthetic accuracy by up to 30% compared to conventional methods, with milled restorations demonstrating higher marginal adaptation and reduced remakes. Similarly, 3D printing reduces material waste by 50% while enabling rapid and customizable prosthesis fabrication.

KEY WORDS: Digital prosthodontics, CAD/CAM, 3D printing, Digital, workflows

Address for correspondence : Dr. Ayushi Pandey, Department of Prosthodontics, Crown and Bridge and Implantology, People's College of Dental Sciences & Research Centre, Bhopal (Madhya Pradesh), India, E-mail: pandeyayushi62738@gmail.com

Submitted: 02.01.2025 **Accepted:** 18.05.2025, **Published:** 04.06.2025

INTRODUCTION:

Prosthodontics, the dental specialty focused on the restoration and replacement of teeth, has undergone significant transformations with the advent of digital technologies. Traditional workflows in prosthodontics have historically been labor-intensive and time-consuming, involving manual impressions, wax modeling, and casting procedures. These conventional methods, while effective, often present challenges related to accuracy, patient comfort, and procedural efficiency. The integration of digital technologies, such as Computer-Aided Design and Computer-Aided Manufacturing (CAD/CAM) and 3D printing.^[1,2]

The introduction of intraoral scanners, for

instance, has replaced traditional impression techniques with digital impressions, improving patient comfort and reducing procedure time.^[3] CAD/CAM systems have enabled the design and fabrication of dental prostheses with high accuracy and reduced turnaround times, streamlining the workflow for dental professionals.^[4] Additionally, the incorporation of AI in dentistry has facilitated more accurate diagnostics and personalized treatment planning, further enhancing the quality of prosthodontic care.^[5]

This scoping review aims to systematically assess and compare CAD/CAM and 3D printing in prosthodontics, highlighting their advantages, limitations, and clinical implications.

Access this article online

Quick Response Code:



Website:

www.pjsr.org

DOI:

<https://doi.org/10.5281/zenodo.15637086>

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-Non Commercial ShareALike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: editor.pjsr@peoplesuniversity.edu.in

How to cite this article: Pandey A, Shrivastava KJ, Shukla S, Singh S. Advances in Digital Prosthodontics: A Scoping Review of CAD/CAM and 3D Printing. PJSR. 2025;18(1):63-67.

CAD/CAM IN PROSTHODONTICS:

Overview of CAD/CAM Technology:

CAD/CAM technology represents a significant advancement in prosthodontics, enabling the digital design and fabrication of dental prostheses. The process encompasses three primary stages:

Data Acquisition: This initial phase involves capturing the precise geometry of a patient's dentition. Intraoral scanners are commonly employed for this purpose, offering a digital alternative to traditional impression materials. These scanners utilize various technologies, such as confocal laser scanning and optical coherence tomography, to produce accurate 3D representations of the oral cavity.^[6]

Design (CAD): The digital data obtained is then imported into specialized CAD software. Dental professionals can design the prosthesis with high precision, customizing parameters to meet the specific needs of the patient. This digital approach allows for meticulous planning and simulation before the actual fabrication.^[7]

Manufacturing (CAM): Once the design is finalized, the CAM phase involves fabricating the prosthesis using milling machines or 3D printers. Milling machines carve the prosthesis from solid blocks of materials like ceramics or composites, while 3D printers build the prosthesis layer by layer using additive manufacturing techniques.^[8]

Applications in Prosthodontics:^[9]

CAD/CAM technology has been integrated into various prosthodontic applications, including:

Crowns and Bridges: The technology facilitates the creation of precise and well-fitting crowns and bridges, enhancing both function and aesthetics.

Inlays and Onlays: CAD/CAM allows for the fabrication of inlays and onlays with high accuracy, providing durable and aesthetic restorations for damaged teeth.

Implant Prosthetics: The technology aids in designing implant abutments and superstructures, ensuring optimal fit and function.

Advantages over traditional methods:^[10,11]

The adoption of CAD/CAM technology offers several advantages over conventional prosthodontic methods:

Increased accuracy: digital impressions and designs minimize human error, leading to prostheses with superior fit and function.

Enhanced efficiency: the streamlined digital

workflow reduces the time required for both designed and fabrication. In some cases, this enables same day restorations, significantly improving patient convenience.

Material Optimization: CAD/CAM systems can utilize a wide range of materials, including high-strength ceramics and composites, enhancing the durability and aesthetics of restorations.

Limitations:

Despite its numerous benefits, CAD/CAM technology has certain limitations:^[11,12]

Initial Investment: The cost of acquiring and maintaining digital equipment can be substantial, potentially posing a barrier for some dental practices.

Learning Curve: Dental professionals must undergo training to effectively use CAD/CAM systems, which may require time and resources.

Material Compatibility: Not all materials used in traditional methods are compatible with CAD/CAM systems, which may limit certain treatment options.

3D PRINTING IN PROSTHODONTICS:

Overview of 3D Printing Technology:

3D printing, also known as additive manufacturing, has emerged as a transformative technology in prosthodontics, enabling the fabrication of dental prostheses with high precision and customization. This process involves creating objects layer by layer based on digital models, allowing for the production of intricate designs tailored to individual patient anatomies.^[13]

In prosthodontics, 3D printing is utilized to fabricate various dental components, including dental models, surgical guides, and prosthetic elements such as dentures, crowns, and bridges. The technology facilitates the creation of restorations that closely match the patient's unique dental morphology, enhancing both function and aesthetics.^[13]

Advantages Over Traditional Methods:^[13,14]

The integration of 3D printing into prosthodontic practice offers several notable advantages over traditional manufacturing methods:

Customization:

3D printing allows for the production of patient-specific prostheses with complex geometries that are challenging to achieve with traditional methods. This customization leads to better-fitting restorations and improved patient satisfaction.

Material Efficiency:

Unlike subtractive manufacturing techniques,

Table 1: Comparison of flexural strength, biocompatibility, and clinical performance of materials used in CAD/CAM, 3D printing, and conventional methods.

Property	CAD/CAM Milled Materials	3D-Printed Materials	Conventional Materials
Trueness and Fit	High accuracy; requires fewer post-processing adjustments.	Moderate accuracy; may need post-processing for fit refinement.	Variable accuracy; technique-sensitive fabrication process.
Flexural Strength (MPa)	~120.6 MPa	~92.1 MPa	Variable; often lower due to polymerization shrinkage.
Surface Quality	Smooth, requires minimal finishing after milling.	Layer-by-layer fabrication may need polishing for smoother surfaces.	Requires extensive polishing and finishing for optimal esthetics.
Material Waste	Minimal; optimized milling paths reduce waste.	Low; additive manufacturing uses only the necessary material.	High waste due to manual adjustments and material errors.
Biocompatibility	High, with tested dental ceramics and composites.	Material-dependent; improvements ongoing in resin biocompatibility.	Dependent on operator technique and material selection.
Clinical Longevity	Longer lifespan due to controlled milling and material quality.	Variable longevity; research ongoing on material durability.	Dependent on manual fabrication accuracy and operator expertise.

which often result in significant material waste, 3D printing builds objects layer by layer, using only the necessary material. This approach reduces waste and can lower material costs.

Time Savings: 3D printing can lead to faster production times, especially for complex cases. The digital workflow streamlines the design and fabrication processes, potentially reducing the time required to deliver the final prosthesis to the patient.

Limitations:^[15-17]

Despite its advantages, 3D printing in prosthodontics has certain limitations:

Material Properties: Some 3D-printed materials may lack the strength or biocompatibility of traditional/conventional materials. For instance, while materials like hydroxyapatite have been used in 3D printing for bone repair, challenges remain in matching the mechanical properties and biological responses of natural bone.

Surface Finish: Printed prostheses may require additional post-processing to achieve a smooth surface finish. The layer-by-layer construction can result in a rougher surface compared to traditionally manufac-

tured prostheses, necessitating polishing or other finishing techniques to meet clinical standards.

Regulatory Considerations:

Ensuring compliance with medical device regulations can be challenging. The adoption of 3D printing in clinical settings requires adherence to stringent regulatory standards to ensure patient safety and the efficacy of the prosthetic devices.

Table 1 highlights the flexural strength, biocompatibility, and clinical performance of materials used in CAD/CAM, 3D printing, and conventional methods.

CONCLUSION:

The integration of CAD/CAM and 3D printing, has revolutionized prosthodontics by improving accuracy, efficiency, and clinical outcomes.

Digital workflows enhance precision, reduce treatment time, and improve patient experience with better-fitting prostheses and same-day restorations.

Despite these advantages, challenges such as high initial costs, the need for specialized training, and regulatory considerations hinder widespread adoption. However, continuous advancements in digital imaging, materials science will further refine these technologies,

making them more accessible and cost-effective.

As digital prosthodontics evolves, it is poised to become the standard of care, offering superior treatment predictability and patient satisfaction. Overcoming existing limitations through research, innovation, and education will ensure its successful integration into routine dental practice.

Financial Support and Sponsorship

Nil.

Conflicts of Interest

There are no conflicts of interest.

REFERENCES:

1. Abdulkarim LI, Alharamlah FSS, Abubshait RM, Alotaibi DA, Abouonq AO. Impact of Digital Workflow Integration on Fixed Prosthodontics: A Review of Advances and Clinical Outcomes. *Cureus*. 2024 Oct 24;16(10):e72286. doi: 10.7759/cureus.72286. PMID: 39583534; PMCID: PMC11585284.
2. Joda T, Zarone F, Ferrari M. The complete digital workflow in fixed prosthodontics: a systematic review. *BMC Oral Health*. 2017 Sep 19;17(1):124. doi: 10.1186/s12903-017-0415-0. PMID: 28927393; PMCID: PMC5606018.
3. Siqueira R, Galli M, Chen Z, Mendonça G, Meirelles L, Wang HL, Chan HL. Intraoral scanning reduces procedure time and improves patient comfort in fixed prosthodontics and implant dentistry: a systematic review. *Clin Oral Investig*. 2021 Dec;25(12):6517-6531. doi: 10.1007/s00784-021-04157-3. Epub 2021 Sep 27. PMID: 34568955; PMCID: PMC8475874.
4. Gawali N, Shah PP, Gowdar IM, Bhavsar KA, Giri D, Laddha R. The Evolution of Digital Dentistry: A Comprehensive Review. *J Pharm Bioallied Sci*. 2024 Jul;16(Suppl 3):S1920-S1922. doi: 10.4103/jpbs.jpbs_11_24. Epub 2024 Apr 3. PMID: 39346228; PMCID: PMC11426768.
5. Arjumand B. The Application of artificial intelligence in restorative Dentistry: A narrative review of current research. *Saudi Dent J*. 2024 Jun;36(6):835-840. doi: 10.1016/j.sdentj.2024.03.017. Epub 2024 Mar 21. PMID: 38883908; PMCID: PMC11178959.
6. Rudolph H, Salmen H, Moldan M, Kuhn K, Sichwardt V, Wöstmann B, Luthardt RG. Accuracy of intraoral and extraoral digital data acquisition for dental restorations. *J Appl Oral Sci*. 2016 Jan-Feb;24(1):85-94. doi: 10.1590/1678-775720150266. PMID: 27008261; PMCID: PMC4775014.
7. Dimitrova M, Vlahova A, Kazakova R. Assessment of CAD/CAM Fabrication Technologies for Post and Core Restorations-A Narrative Review. *Medicina (Kaunas)*. 2024 Apr 30;60(5):748. doi: 10.3390/medicina60050748. PMID: 38792931; PMCID: PMC11123209.
8. Ellakany P, Fouda SM, Mahrous AA, AlGhamdi MA, Aly NM. Influence of CAD/CAM Milling and 3D-Printing Fabrication Methods on the Mechanical Properties of 3-Unit Interim Fixed Dental Prosthesis after Thermo-Mechanical Aging Process. *Polymers (Basel)*. 2022 Sep 30;14(19):4103. doi: 10.3390/polym14194103. PMID: 36236050; PMCID: PMC9572976.
9. NaleenNaranje, Sawpnil C Mohod, Application of CAD/CAM Technology in Dentistry, *J Res Med Dent Sci*, 2022, 10(10): 141-144.
10. Janeva NM, Kovacevska G, Elencevski S, Panchevska S, Mijoska A, Lazarevska B. Advantages of CAD/CAM versus Conventional Complete Dentures - A Review. *Open Access Maced J Med Sci*. 2018 Aug 4;6(8):1498-1502. doi: 10.3889/oamjms.2018.308. PMID: 30159084; PMCID: PMC6108805.
11. Maiti N, Mahapatra N, Patel D, Chanchad J, Saurabhshah A, MahboobRahaman SK, Surana P. Application of CAD-CAM in Dentistry. *Bioinformation*. 2024 May 31;20(5):547-550. doi: 10.6026/973206300200547. PMID: 39132244; PMCID: PMC11309094.
12. Unsal GS, Turkyilmaz I, Lakhia S. Advantages and limitations of implant surgery with CAD/CAM surgical guides: A literature review. *J ClinExp Dent*. 2020 Apr 1;12(4):e409-e417. doi: 10.4317/jced.55871. PMID: 32382391; PMCID: PMC7195681.
13. Schweiger J, Edelhoff D, Güth JF. 3D Printing in Digital Prosthetic Dentistry: An Overview of Recent Developments in Additive Manufacturing. *J Clin Med*. 2021 May 7;10(9):2010. doi: 10.3390/jcm10092010. PMID: 34067212; PMCID: PMC8125828.
14. Alyami MH. The Applications of 3D-Printing Technology in Prosthodontics: A Review of the Current Literature. *Cureus*. 2024 Sep 3;16(9):e68501. doi: 10.7759/cureus.68501. PMID: 39364461; PMCID: PMC11447575.
15. Tian Y, Chen C, Xu X, Wang J, Hou X, Li K, Lu X, Shi H, Lee ES, Jiang HB. A Review of 3D Printing in Dentistry: Technologies, Affecting Factors, and Applications. *Scanning*. 2021 Jul 17;2021:9950131. doi: 10.1155/2021/9950131. PMID: 34367410; PMCID: PMC8313360.

16. Loges K, Tiberius V. Implementation Challenges of 3D Printing in Prosthodontics: A Ranking-Type Delphi. *Materials* (Basel). 2022 Jan 7;15(2):431. doi: 10.3390/ma15020431. PMID: 35057149; PMCID: PMC8778192.
17. Iftekar SF, Aabid A, Amir A, Baig M. Advancements and Limitations in 3D Printing Materials and Technologies: A Critical Review. *Polymers* (Basel). 2023 May 30;15(11):2519. doi: 10.3390/polym15112519. PMID: 37299318; PMCID: PMC10255598.