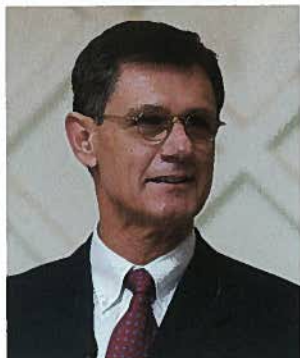


Reflections on the Evolution of Cosmetic Dentistry



Dan Nathanson, DMD, MSD

UP FRONT provides a guest editorial forum for influential leaders to share their opinions. In this issue, we welcome Dr. Dan Nathanson. Dr. Nathanson is a Professor and Chairman, Department of Restorative Sciences and Biomaterials at Boston University Henry M. Goldman School of Dental Medicine, and Immediate Past President of the International Federation of Esthetic Dentistry (IFED).

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The distinguished dental professor who invited me to lecture in his country owes me an apology. I had suggested the topic of esthetic dentistry but he dismissed it, stating that patients and dentists in his country were “not interested.” It was 1985 and the concept was new, but by then the American Academy of Esthetic Dentistry (AAED) and the American Academy of Cosmetic Dentistry (AACD) had already been established. Similar organizations would soon form in Europe, Asia, and South America.

In the days before the Internet and Facebook, news about cosmetic dentistry had not traveled fast enough to reach my host. But what was not obvious to segments of our profession, the vast majority of dental patients knew all along—that seeing a better image of oneself in the mirror can boost self-esteem and well-being.

In the last 25 years dentistry has evolved at an unprecedented pace, with many innovations coming from Europe and Asia. Think of glass ionomer, modern implants, modern ceramics, and CAD-CAM. But the seed for cosmetic/esthetic dentistry procedures was planted in the U.S., with the crucial inventions of bonding, composites, and resin and

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ceramic veneers developed in succession since the 1950s. Actually, it started even earlier with Dr. Charles Pinkus, a pioneer in the esthetic arena, who provided cosmetic treatments in the early 1930s, fabricating acrylic “facings” to improve the appearance of Hollywood actors. Dr. Pinkus would attach the facings temporarily for the filming, then remove them and keep them for subsequent use.

Seventeen years ago, the International Federation of Esthetic Dentistry (IFED) was established.

The goal was to spread the esthetic/cosmetic dentistry philosophy around the world and help newer academies establish themselves. The Federation now comprises 30 member Academies from North and South America, Asia, Europe, Africa, and the Middle East. The three U.S. members are the AACD, the AAED, and the Society for Color and Appearance in Dentistry. One of the newest international members is the Mongolian Academy of Esthetic Dentistry. It is evident that the U.S. has done a great introductory job, but the esthetic dentistry philosophy has truly spread around the globe.

As a dental resident in the mid-1970s, I treated a number of teenage cystic fibrosis patients with badly discolored teeth, the result of tetracycline intake. The procedure was not needed to correct function; it was for the cosmetic effect only! In dental school I was led to believe that we do dentistry primarily to restore function and form, yet here I was, proud of my cosmetic efforts, restoring a smile and a life with each treatment.

After decades of treating pain and dysfunction, our profession has progressed to the level of making people smile and making their lives more pleasant. Patients are often eager to come to us for elective procedures, not just to eliminate pain. The esthetic dental evolution now seems to be a normal progression, but the philosophical distance from my days as a dental student to the present is revolutionary. And don't let anyone tell you that patients are not interested in dental esthetics—you know better!