

Opt for Informed Choices



by Wm. J. Schlotz, D.D.S.

Your tooth is cracked. You've seen it, in living color, right there on the computer monitor. Or your dentist has handed you a mirror and, when you really look, the little black lines are visible. "So Doc, whadda we do about it?" The answer in the vast majority of dental offices, even in 2009 - yipes - is "you need a crown." I just realized cringing makes typing more difficult.

As a well-conditioned, amiable and trusting dental patient, you accept the sole treatment recommendation. On to your visit(s) where *all* of the enamel, along with a fair amount of the layer underneath (called dentin) is ground down, an impression is taken, and the crown is cemented in place. Usually all goes fairly well and you move on. Likely, reminiscing isn't an issue.

But crowns, according to Dr. Gordon Christensen, aka the Godfather and master guru of modern dentistry, are "tooth-coffins"; and it's not because caskets sometimes come in white. Analyzing a crown procedure, in a post-mortem sense, teeth are substantially cut down, creating trauma to the nerve and blood vessels inside. The large surface area of sensitive cut-tooth structure is negatively affected by salivary bacteria and the constant air-blasting required during treatment. As Dr. Christensen, and all dentists know, higher tooth trauma increases the odds of a future root canal problem. So then, was a crown the only viable treatment choice?

The short answer is an unqualified no. Minimally-invasive, aesthetically-appealing, long-lasting techniques, such as a ceramic onlay, have been around for well over 10 years for those dental providers willing to get past a new learning curve involving the meticulous, tooth-sparing preparation technique followed by the requisite and rigorous bonding protocol. Conversely, it is so much easier, and faster, to cut and cement a crown. Some dentists feel an onlay is worth it, many others don't. The buyer (read: patient) need beware.

The above example illustrates a pet peeve of mine. Many patients aren't allowed a proper informed consent with standard-of-care treatment options. For example, even the most simple of treatments such as tooth whitening carry with it multiple options, including Crest White Strips which are found in pharmacies everywhere. Our office believes that there is a place for CWS's in a patient's attempt at smile improvement and we offer it as one of multiple treatment choices. We also inform patients about at-home trays, Zoom Whitening and now, our absolute favorite for the very difficult to bleach cases, Extreme-Deep Bleaching.

I am passionate about educating dental patients so they may be empowered to choose the highest quality dentistry - at a reasonable fee - that suits their needs or wishes. It's not about what the DOCTOR wants anymore (not that it ever should have been). *You're* going to wear it, not him/her. The nice guy DDS playing *Doctor-knows-best* is old school. This is the information age. The next time you're told "you need an XYZ": Keep Smiling and ask "what are my other treatment options"? There ought to be some.

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