The ‘next big thing’ in dentistry

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I am asked all of the time what the next big thing is going to be in dentistry. What new technique or technology or technology is going to change dental practice?

We certainly have made huge advancements in a number of areas, such as restorative therapy, implants and esthetics.

I believe the direction of the next great thing in dentistry is actually going to take place in the oral-systemic connection. Most dentists are familiar with this connection as being how oral health affects systemic health.

I’m going to look at the oral-systemic connection from a completely different angle: the oral-systemic esthetic perspective.

We all can do a magnificent job of making teeth look great and giving people a healthy and beautiful smile.

Esthetic dentistry has been an absolute boom over the last 50 years when it comes to such innovative techniques as teeth whitening and minimally invasive veneers, such as Aurum Ceramics’ Cristal Veneers, Denmat’s Lumineers, Glidewell Laboratory’s Vivaneers, Arrowhead Laboratory’s Razor Edge Veneers and many others.

Once the teeth look good, what about the peri-oral areas around the mouth? If the teeth look good but we ignore the rest of the face, then we have really limited what we have done in esthetic dentistry.

It is time to give serious consideration to extending the oral-systemic connection to the esthetic realms of the face, which dentists are more familiar with than any other healthcare practitioner.

Botox is used for smoothing facial wrinkles by eliminating dynamic wrinkles caused by muscles in motion. Dermal fillers are commonly used to add volume to the face in the nasolabial folds, lip augmentations, oral commissures and marionette lines.

As we age, collagen is lost in these facial areas and these lines start to deepen.

These dermal fillers are injected right under the skin to plump up these areas so that these lines are much less noticeable. The face looks more youthful and esthetic, and Botox and dermal fillers are the perfect complement to any esthetic dentistry.

I have been trained and have had experience with Botox and dermal fillers for a while, and these are very easy procedures to accomplish once dentists have been properly trained.

As dentists, we give injections all the time. This is just learning how to give another kind of injection that is outside the mouth, but is in the same area of the face that we inject all the time.

We also have a distinct advantage over dermatologists, plastic surgeons, medical estheticians and nurses who commonly provide these procedures in that we can deliver profound anesthesia in these areas before accomplishing these filler procedures.

I will never forget that during my training, my patients were completely comfortable during dermal filler and lip augmentation therapy because of my ability to deliver proper anesthesia to these areas.

The patients treated by other health practitioners were quite uncomfortable and indeed this is one of the biggest patient complaints about dermal fillers.

Many state boards are allowing general dentists to provide botulinum toxin and dermal fillers to patients. Is there a market for these services?

In 2008, close to 5 billion dollars were spent on botulinum toxin and dermal filler therapy in the US. Think about this — that was money spent on non-surgical elective esthetic procedures that could have been spent on esthetic dentistry, and the patient made a choice.

Interestingly, these procedures become more popular in an uncertain economy because patients want to do something to look better that is more affordable than surgical esthetic options.

Like anything else you do, this requires some training and the learning curve is incredibly short because you already know how to give comfortable injections and are familiar with facial anatomy.

I often give training sessions in botulinum toxin and dermal fillers and dentists are amazed how easy these procedures are compared to everything else we do.

Finding practice models is easy: start asking family and friends, who will fight to have you practice on them. If you want further proof, ask women in your practice if they have had or would like Botox and dermal filler therapy.

You will be overwhelmed at the positive response.

What’s the next big thing in dentistry? It may come as we start expanding beyond the teeth and gums into the oral and maxillofacial areas, which is within every dentist’s skill set.

All you need is knowledge and practice. Then, you will be able to deliver these new services to your patients and truly complement your esthetic dental practice.