The Winning Combination: Orthodontics and Cosmedontics

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Many patients in today’s cosmetic dental practices come to a dentist because they want to improve their smiles and/or relieve dental pain. Dentists sometimes are both. Armed to the teeth with advanced dental training in bleaching and bonding techniques, a practitioner can create smiles in a very short period of time. These patients sometimes need orthodontics. The ultimate treatment is often the combination of tooth movement and cosmetic restorative dentistry.

The following is an example of how an orthodontist and cosmedontist can solve a subtle, yet complicated, dilemma.

This 22-year-old woman completed conventional orthodontics eight years ago. She has never been happy with her smile (Fig. 1). The gumline was uneven, the cuspsids looked like fangs, and she felt her smile was “constricted.” Her teeth seemed to be “darkening” with time. The shade was D-3. The incisors were hypersensitive, and the surrounding gingiva was painfully inflamed. This was inconsistent with her immaculate hygiene (Fig. 2). Further examination revealed a palatal fixed retainer on teeth Nos. 7-10 (Fig. 3). A study of her occlusion, an important first consideration in the evaluation of any case, revealed that her incisors were functionally overloaded (Figs. 4 and 5).

The traditional orthodontics that she endured as a young teenager was complicated by proportionately smaller lateral incisors and fang-like cuspid. The original orthodontist closed the spaces, but the patient was compromised with a mediocre smile and mediocre function. The functional problems could not be ignored with time. The painful gingival inflammation prompted the dental visit. It was only through an in-depth