COMMENTARY

A SURVEY OF EDENTULOUS PATIENT PREFERENCES AMONG DIFFERENT DENTURE CONCEPTS

Marc Moskowitz, DDS*

The authors begin this article by noting that while we have the ability to create solutions to the functional problems associated with complete edentulism, can we optimally restore esthetics for these patients and would it be noticed? Given that most of what we know and use in esthetics today is based on work originally proposed for edentulous patients, it is refreshing that the subject is now being revisited. This article's intent was to see if edentulous patients have the ability to discern among three types of esthetic arrangements, "natural," "supernormal," and "denture" look, and if so would one of the setup types be preferred over the others. The authors define "supernormal" as a patient-centered approach, where patient input is used to determine the final setup. Unfortunately, here lies the flaw of this study. To really understand how patients view and feel about "supernormal," their input is critical in designing the setup. Because the "supernormal" setup was done arbitrarily in the laboratory, it no longer fits the definition. The authors do acknowledge this in their commentary; however, given the effort and time to do this study, it would have made this article significantly more relevant to customize the "supernormal" setups. Aside from this, the study is an ambitious and well-thought-through research exercise that raises many questions and gives future researchers a place from which to begin.

Particularly interesting was that 45% of the subjects actually preferred the arbitrary "denture" and "supernormal" look. Does this mean that edentulous patients have a preconceived notion of how they should look because they have lost their teeth or are they more influenced by past denture associations of themselves, family, and friends?

Classically, we have been taught to set the teeth over the existing but diminished ridges in order to maximize the functional stability. This has been the prime contributor to the "denture" look, a narrow arch width with large dark vestibules and small short anterior teeth to minimize tipping and displacement during function. Today, many patients opt for the implant-retained/supported complete prosthesis. This opens up a whole new paradigm in denture setups. Teeth can now be set for optimal appearance, using the determinants of dental esthetics,¹ because retention and function are inherent in the prosthesis.

The last thing to note is the often overlooked role of the denture base in adding support and contour to the overlying facial tissues and musculature. When the teeth are lost with the resultant loss of the alveolar housing, a significant change in facial support can and does occur in most patients, diminishing their facial appeal. While replacing the teeth significantly improves the patient's appearance, it is only when all missing support is replaced that the face is truly restored. A study evaluating changes in facial contours, smile extension, and muscle coordination using identical tooth setups and variation to the buccal denture base would be a welcome addition to the literature.

REFERENCE

*Private practice in Atlanta, GA, USA

^{1.} Moskowitz ME, Nayyar A. Determinants of dental esthetics: a rationale for smile analysis and treatment. Compendium 1995; 16 (December):1164–86.

Copyright of Journal of Esthetic & Restorative Dentistry is the property of Blackwell Publishing Limited and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.