

## COMMENTARY

### REPRODUCIBILITY OF THE PINK ESTHETIC SCORE—RATING SOFT TISSUE ESTHETICS AROUND SINGLE-IMPLANT RESTORATIONS WITH REGARD TO DENTAL OBSERVER SPECIALIZATION

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This is a very timely paper in the evolutionary cycle of single-implant restorations. Over the last 20 years, the evaluation of this type of restoration has gone from judging only the success rate of the implant itself to the natural reproduction of the coronal portion of the tooth, and now to the current question of whether the surrounding bone architecture and soft-tissue texture and color can precisely reproduce nature. This indeed has been a huge leap forward in the technology and surgical expertise in modern implant dentistry. Most current observations of implant esthetics reflect the beliefs that the condition of the peri-implant tissues and the tissue contour apical to the replacement crown itself are critical determinants of esthetic success.

The authors rightly point out that single-implant restorations are now the standard of care for the replacement of anterior teeth. They likewise are wise in their thinking when they state that the fixed prosthetic alternative is still indicated when it provides a better outcome relative to the anticipated peri-implant soft-tissue environment. It is this point that is so hard to convey to novice practitioners anxious to do their first anterior implant restorations.

The thought of independent critical analysis of one's accomplishments can humble us all. In this light these authors have decided to embark on a study to evaluate a rating system for single-implant esthetics. They have accomplished the objective of their study and enlightened us as to the reproducibility of this rating system. Perhaps the best possible outcome of this paper will be that local and national study groups can now take this type of rating system and establish objective panels where practitioners can go to evaluate their individual progress in anterior implant esthetics. Although perfect scores are always hard to achieve, knowing where one needs to improve, whether it be hard or soft tissue management, or tooth form and color, can provide necessary long-term goals for all of us.

The most interesting result of this study was the conclusion that the degree of dental specialization influenced the positive scores. Orthodontists understandably assigned poorer ratings than any other group. In general, I would say that they are a very detailed specialty, and having the ability to move teeth through bone into excellent alignment, I certainly see where they would assume that the peri-implant soft-tissue color and texture (which they grade lowest) should be a better match to the contralateral teeth. I can also understand student dentists and lay persons scoring all of these categories higher. One note in regard to the soft-tissue scores, in our practice we have observed better tissue color and texture especially where connective tissue grafts have been used when photos are taken and compared many years later. There was no reference in the text as to when the postoperative photos were taken relative to the final crown placement. I would note that the further out the photos are from crown delivery, the better the soft-tissue score would be and, conversely, the lower the tooth color scores would probably be.

Esthetic standards are constantly evolving as surgical and technical advancements are made in our profession. These standards are most often set by outstanding clinicians in publications and lectures through photographic comparison of "before and after" photos. As I stated earlier, the closer we get to objective rating systems, the easier it will be for all of us to submit these kinds of photos to either local or national examiners and get vital feedback for continued individual improvement as professionals.

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