

COMMENTARY

A Survey of Dentulous and Edentulous Patient Preference among Different Denture Esthetic Concepts

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The ability to predict the final esthetic tooth display in relationship to a patient at repose, animated, and extreme smile is essential to the patient's perception and acceptance of the visible restorative cases. Understanding specific parameters dictates a close evaluation of the muscles of facial expression during various common movements.

The facial evaluation is generally correlated with the amount of muscular engrams of tonus while a patient is at repose, light smiling, speaking, extreme animated smiling, and laughing. The individual patient's display of tooth structure may or may not be visible depending on the tonicity of the facial muscles in relationship to the vertical distance and horizontal projection of both the alveolar arches when measured from the ridge crest (edentulous) or incisal tooth edges (dentate) to the lips at repose and to various facial animations. This has been termed the Esthetic Space. The greater or smaller the distance between the premaxillary and premandibular alveolar ridges to the facial mask in combination with muscular tone is a major factor to consider when restoring the esthetic smile display. Also affecting the esthetic display are normal asymmetrical lip pulls and midlines, and can be addressed in advance and minimized to measured degrees.

Generally, patients exhibiting serious tooth show prerestoratively have the opportunity to scrutinize the smile design very closely and may be a greater challenge; however, patients presenting with minimal to no tooth display have less to observe and may give the practitioner an opportunity to be more creative in developing an individualized natural result. This can be explained by understanding how the eye of the beholder makes comparisons of only what is visually available to make comparisons within their own existing smile versus a newly designed smile display.

Depending on the difference of the space between both the premaxillary and premandibular ridge crest in both a vertical and horizontal aspect in relationship to the facial mask at repose to extreme animation allows a predictable outcome prior to committing to commence treatment.

The authors of this article bring up several important concepts of tooth arrangements, and patients when given an opportunity to compare arrangements between A and B will make a choice of what they perceive is for them. Because of all the various factors involved in the final esthetic result notwithstanding the emotional factors, it is highly suggested that your patients should be aware of how their facial muscles and boney arches play a major role in the final result. Allowing each patient to become involved in the shade, size, and arrangement is prudent.

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