



COMPOSITE  
ARTISTRY  
PROVIDES  
PATIENTS WITH A  
COST-EFFECTIVE  
ALTERNATIVE TO  
PORCELAIN

## It Should Never Be **ALL OR NOTHING**

**E**xcellence in esthetic composite placement is an important skill for dentists to develop. During the years that I have been lecturing, composite artistry has become a prime focus of dentistry. The belief that placing composite restorations is somehow a less-than-ideal treatment is evident in an audience's eye rolls or smirks. Some participants want to know how realistic this approach is in actual practice or ask if a similar or better result could be more easily accomplished with porcelain. I want to be clear that this is not a debate about which is the better restorative material; both are strong, esthetic, excellent materials, and each can be used to alter tooth shape and color. They are both viable options for patients who are seeking quality restorative work. So, what is this about? The vast majority of practices in America—including mine—need to be able to work with both composite and porcelain. As clinicians, we should be able to confidently offer both options to our patients.



*A dentist who can offer composite as an alternative makes treatment feasible for patients who want to improve their smiles but have more modest budgets.*



Many patients cannot afford the cost of porcelain restorations. A dentist who can offer composite as an alternative makes treatment feasible for patients who want to improve their smiles but have more modest budgets. The high cost of porcelain restorations can be attributed to the need for multiple appointments as well as the laboratory fees necessary for designing a wax-up, the creation of a provisional stent when necessary, and the actual fabrication of the custom porcelain restorations themselves. When creating and placing a direct composite restoration, even if the appointment is several hours long, the process can be accomplished in a single visit and the cost is usually still far less than porcelain.

In addition to being less expensive, direct composite restorations can better

allow me to provide dentistry that is minimally invasive and preserves tooth structure. There are clinical situations in which the path of draw will not allow porcelain to be inserted without the reduction of otherwise healthy tooth structure. With composite, I can just add what I need where I need it.

Many patients are able to accept an entire treatment plan if it is possible to phase their treatment over several years and allow them to budget the necessary amount annually. For example, direct composite restorations can be used to open the vertical dimension, which makes phased placement of porcelain restorations possible. We know that not all patients who need full-mouth rehabilitations can afford them. In some situations, the skilled use of composite restorations can allow these patients to proceed with treatments ranging from a single tooth veneer to full reconstruction.

Many clinicians identify areas that are not in their skill set and make referrals when their patients need those services. However, when performing a smile makeover, does anyone refer a patient for composite work? I certainly have never seen it. What I do see, however, are patients seeking second opinions for cosmetic work that they cannot afford. They want to know if there are any alternatives. Our patients deserve to know what all of their treatment options are, including the risks and benefits of each approach. If you are not confident in your clinical ability to esthetically place direct composite restorations, there are many courses available, and I urge you to seek more education.

I believe we have a responsibility to offer options to our patients and let them choose what fits their esthetic and functional goals, finances, and lifestyle. It should never be a question of choosing all or nothing.

### **ABOUT THE AUTHOR**

Amanda N. Seay, DDS, maintains a private cosmetic dentistry practice in Mount Pleasant, South Carolina.