For a sexy, attractive smile, which shade is right for you?

American Academy of Cosmetic Dentistry®
Architecturally speaking, did you know that a smile comprises 60 percent of the weight of the face? That’s why a smile creates an immediate, subconscious, visual impact on people you meet.

Statistics reveal that we place a high value on our smiles. According to an American Academy of Cosmetic Dentistry (AACD) survey:

- Virtually all adults (99.7%) believe a smile is an important social asset and 96% of adults believe an attractive smile makes a person more appealing to members of the opposite sex.
- Three-quarters (74%) of adults feel an unattractive smile can hurt a person’s chance for career success.
- And when respondents were asked, “What would you like to improve most about your smile?” The most common response was: Whiter and brighter teeth.

While there are many cosmetic dentistry approaches to improving a smile, teeth whitening remains one of the most economical ways to enhance your appearance. If a more dramatic smile improvement is needed, porcelain veneers and dental bonding are two popular methods that reshape teeth and can provide a whiter color adjustment.
How White Should You Go?

Whether you are seeking consultation for whitening, veneers, or bonding, communicating with your cosmetic dentist is an important first step in deciding which treatment option makes sense for you and the right amount of whitening needed.

“Tooth colors need to be in harmony with the skin tone and whites of the eyes,” says Dr. Frank Milnar, an AACD Accredited cosmetic dentist from Minnesota. “‘Hollywood white’ smiles can be distracting because you tend to look only at a person’s teeth and not at their whole face.”

Dr. Milnar is also an educator for AACD instructing other dentists on how to achieve “natural esthetics.” A natural smile is actually “polychromatic” or a nuanced combination of colors. Over-whitening can cause teeth to become more monochromatic and opaque.

“At the extreme end of the tooth whitening spectrum, ‘whitening addicts’ can bleach out the color, which is an esthetic violation; the teeth become more fluorescent and it almost hurts to look at them,” warns Milnar.

Consumers are advised to ask their dentist which treatments are most appropriate for them.
Deciduous (baby) teeth are typically whiter than the adult teeth that appear later. As we age, our adult teeth often become darker, yellower, or stained. This is partly why white teeth make people appear more youthful.

Just as there are several ways to lighten or brighten teeth, there are also several different ways for teeth to become discolored.

The main causes of darkened teeth are:

- Genetics
- Antibiotics
- Certain foods

Internal tooth discoloration is caused by changes in the enamel of the tooth and the dentin. The main causes of internal tooth discoloration are exposure to high levels of fluoride, tetracycline, the use of antibiotics as a child, developmental disorders, tooth decay, restorations, root canal issues, and dental-related trauma.

External tooth discoloration is caused by factors outside the body, mainly foods and tobacco. The main causes of external tooth yellowing are smoking, foods with tannins, coffee, tea, and dark colored soda.
Types of Whitening Available

Getting the Shade You Want

In-Office Teeth Whitening
Professional tooth whitening in a dental office is the preferred whitening method because even though stronger agents are applied, the rest of the mouth, including the gums, is protected from these materials. The best whitening systems feature a buffer in the bleaching gel that protects the tooth enamel from damage, are extremely effective, and can transform teeth in a single office visit. Your teeth can literally brighten up by 10 shades in about an hour.

In-office whitening affects only the front eight teeth—known as the smile zone—and is a great jump start for take-home whitening, which is part of an effective whitening program.

Your dentist is best qualified to handle any issues that may arise from whitening treatments, such as tooth sensitivity. Today, most tooth sensitivity cases are easily managed.

Tooth whitening can last for one or more years, depending on how well you take care of your teeth, and if you’re following up regularly with routine dental hygiene visits and a home whitening product for regular maintenance.

Over-the-Counter (OTC) or Home Tooth Whitening Systems
Commercially available tooth whitening systems have become popular, mainly because they’re relatively inexpensive and easy to use.

“ Tooth whitening is tried and true. It is inexpensive and predictable and has great ROI (return on investment) for the patient. I recommend that patients use dentist-supervised, patient-administered tray bleaching for the longest lasting and most predictable results.”

-Betsy Bakeman, DDS, Michigan, Aacd Accredited fellow member

Over-the-counter tooth whitening methods that can be purchased without your dentist’s supervision. They include whitening strips, paint-on tooth gel, mouth trays with gel, whitening toothpaste, and even whitening gum. These are typically safe products, but if you have oral concerns, ask your Aacd member dentist if these products are safe to use.

Dentist-supervised tooth whitening remains the safest, most effective method for brightening your smile.
The Artist at Work: Porcelain Veneers and Direct Bonding

Find the Right Dentist

If you think your teeth need a bit of work or a major overhaul, look for a cosmetic dentist who works with a variety of materials and techniques, because each patient has different needs. There is not a “one treatment fits all” option in cosmetic dentistry.

Cosmetic dentistry can create a positive change to your smile—and your self-image. Most think of teeth whitening or veneers when cosmetic dentistry comes to mind, but a cosmetic dentist can provide much more.

An experienced cosmetic dentist can help to improve your smile, your appearance, even your self-esteem and confidence. Cosmetic dentistry has continued to evolve to where skilled cosmetic dentists can address functional and esthetic patient concerns.
“Cosmetic dentistry is an art because it’s not a COMMODITY... services are not the same everywhere. The art truly lies in the process of designing dental ceramics. Where the design is in the hands of the dentist who bases his or her skills on training and the Accreditation process in an organization like the American Academy of Cosmetic Dentistry. Extra training identifies a true artist who has been tested to prove their artistry in dental ceramics. The other part of the art is in understanding the adhesion process, because there are hundreds of cements and adhesives. Knowing which products to use and when to use them becomes part of the artistic package.”

-Christopher Ramsey, DMD, Florida, AACD Accredited member

“Cosmetic dentistry is both an art and a science. Technically, one can do the dentistry so that it is scientifically functional, healthy, and anatomically correct. However, it takes art to match the intricacies, esthetics, and balance of natural beauty.”

-Marty Zase, DMD, Connecticut, AACD Accredited member

“Cosmetic dentistry is one of those funny areas that seems to have different definitions depending on who you talk to. Aesthetic dentistry is usually defined as reproducing a natural looking tooth, while cosmetic dentistry seems to denote more of a smile enhancement. Either way, there is a healthy dose of both art and science in either procedure, whether you are matching a new tooth to an existing smile or enhancing the smile of a patient. Predictability and adherence to the scientific principles of smile design—and creating a bite that works properly—are of utmost importance, but that won’t matter to our patients if you aren’t able to make it look beautiful at the same time!”

-Ronald Goodlin, DDS, Ontario, Canada, 2012-2013 AACD President and Accredited member
Many Things to Consider

You’ll often hear people say that celebrities have veneers and this may seem like the best way to replicate picture-perfect teeth, but each mouth is different and veneers need to be carefully researched.

For teeth that resist whitening, veneers can make even the darkest teeth appear bright white.

Veneers are thin pieces of porcelain used to recreate the natural look of teeth, while also providing strength and resilience comparable to natural tooth enamel. It is often the material of choice for those looking to make slight position alterations, or to change tooth shape, size, and/or color.

Deciding that porcelain veneers will create the look you want is only one step in the process. There is much more to learn before proceeding.
Visiting an AACD member dentist and asking about veneers is the first step in determining if veneers are the right option for you, or if there are alternate solutions available. Communication with your dentist about what you want corrected is critical for a successful result. Spend time clearly identifying what cosmetic improvements you want to accomplish.

Your dentist will most likely begin with a smile analysis to determine the steps necessary to achieve the smile you desire. In addition, your dentist may create a diagnostic mock-up so you can “try on” veneers and other procedures to see if the final result is actually what you’re looking for.

Your dentist may also show you a photo of how your new smile will look. This is called cosmetic imaging.

“The trained cosmetic dentist must educate the patient to make wise decisions for themselves so the final result will be invisible (look like their teeth, not restorations or overly whitened teeth). Often a single tooth can be made as a trial crown or veneer (after temporaries or provisionals are placed) to give the patient a feel for shade in their own mouth.”

-Mickey Bernstein, DDS, Tennessee, AACD
Accredited member
Porcelain laminate veneers consist of a compilation of several thin ceramic layers which replace original tooth enamel, and an adhesive layer. To apply a veneer, a very small amount of the original tooth enamel must be removed, usually less than a millimeter. This is essential as it creates room for the porcelain veneer to fit within the mouth and most accurately restore natural tooth function while creating an even better appearance than the original tooth.

The bond between original tooth and porcelain veneer is critical as it not only provides the esthetic perfection desired, but also a strong bond that is essential for correct veneer function. Light-sensitive resin is placed between the original tooth and the veneer and then hardened using a special curing light.

Porcelain veneers are very successful in many situations where the original tooth has developed poor color, shape, and contours. It is also a good choice for fractured teeth, gaps between teeth, and in some situations where the tooth position is compromised and there are minor bite-related problems. For some people, superficial stains do not respond well to tooth whitening or bleaching. In these situations, a porcelain veneer may be the best option.
Some patients are looking for an alternative to traditional dental veneers or bonding, but be aware that this treatment option is not appropriate for everyone.

Just as with porcelain veneers, “no-prep” veneers—so called because they typically don’t require the dentist to remove as much tooth material—are bonded to the front surface of your teeth. Often, the placement of no-prep veneers can be done more quickly and with less discomfort than traditional veneers.

Your AACD member dentist will let you know if you are a good candidate for “no-prep” veneers and if this option is a sensible treatment plan.
Dental Bonding

Recreating a Natural-looking Smile

Bonding is a popular treatment option because it provides a successful attachment between the filling material and the tooth’s original enamel and dentin. It looks like the original tooth and functions like it as well.

Tooth bonding is used in several different ways, but is probably most useful for repairing chipped teeth. Bonding materials (high-density, modern plastics called composite resin) and porcelain—are more natural in color and can be designed to perfectly match the surrounding teeth making it difficult to discern there ever was a broken tooth.

Direct composite bonding is used to recreate a smile in an additive manner, where little or no tooth reduction is needed. Direct bonding, in the hands of a skilled operator, is less costly than porcelain veneers and crowns and can be long-lasting with proper maintenance.

Transitional bonding is used for anything from a mock-up to a full-mouth rehabilitation. It’s called transitional because it allows the patient to transition into more permanent dentistry as he or she can afford, or as the treatment sequence demands, and it allows the dentist time to work out any bite-related and esthetic issues. Transitional bonding is an important tool in the skill set of an accomplished cosmetic dentist.
A Checklist for Finding a Qualified Cosmetic Dentist

A beautiful smile is an investment. To get the most out of your investment, do your homework to find a dentist that is right for you. The American Academy of Cosmetic Dentistry can help you find dental professionals who have pursued furthering their education to bring their patients the latest advancements in cosmetic dental techniques, materials, and technology. This is more important today than ever because the field of cosmetic dentistry is on the cutting edge of technology.

Choosing the right cosmetic dentist is an important decision and one that can be mired in confusion with a choice of thousands of dentists and mountains of marketing messages to sift through. Here’s some solid advice from the book, The Naked Tooth: What Cosmetic Dentists Don’t Want You to Know, by AACD members Drs. Colleen and Jason Olitsky.

- Your family doctor or regular dentist may also know where to find a good cosmetic dentist. Check with the American Academy of Cosmetic Dentistry (www.aacd.com) to find one near you.

- Ensure that your dentist has strong credentials and is actively pursuing continuing education. Any dentist can be a “cosmetic dentist,” but those Accredited by the AACD have the profession’s most respected credential.
Schedule consultations to ask about the dentist’s experience with the procedure you would like done. Explain your expectations and inquire about cost.

Inquire about other patients who have had your procedure done, and ask to see before and after photos. Make sure the dentist’s photos are of actual cases, and not stock photography. If no photos are available, consider a different dentist.

Look for a dentist using the latest technology. Diagnostic computers, intra-oral cameras, lasers and digital x-rays indicate a leading-edge practice.

Ask about your dentist’s laboratory. The lab plays a key role in making crowns and veneers for dentists. Most likely, yours will be made at a lab. Sometimes, materials will be sent to labs overseas. A high quality lab will employ technicians with cosmetic dental training, and use CAD/CAM software and FDA-approved materials.

Be careful about cost-cutting. Cosmetic dentistry is surprisingly affordable and financing is available. Be cautious of dentists who low-ball prices as they could be cutting corners on quality of materials, or worse, on things that could affect your safety.
“Ask your dentist to show you pictures of patients that he or she has treated. The dentist should have at least 10 good case studies to share and be willing to share names/numbers of patients who have agreed to provide a testimonial. Too many dentists buy books with photos of dental work they have not done.”

-Christopher Ramsey, DMD, Florida, AACD Accredited member

“Membership in organizations, like the AACD, demonstrates a dentist’s desire to invest in his or her skill set to get better and better at what they are interested in. Before and after photography of the doctor’s own work can give a prospective patient an idea about a doctor’s skills.”

-Steven Hill, DMD, Canada, AACD Accredited member

“Request to see photos of a patient who had similar problems or concerns. A picture speaks a thousand words. If the results are of a quality with which the prospective patient would be pleased, he or she can be better assured that the dentist has the necessary skill and expertise to satisfy his or her needs.”

-Betsy Bakeman, DDS, Michigan, AACD Accredited fellow member

To find a dentist who is committed to continuing their education in cosmetic dentistry, check out the AACD’s “Find a Dentist” database on their website at: www.aacd.com
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About the American Academy of Cosmetic Dentistry

The American Academy of Cosmetic Dentistry® (AACD) is dedicated to advancing excellence in the art and science of cosmetic dentistry and encouraging the highest standards of ethical conduct and responsible patient care. The AACD fulfills its mission by: offering superior educational opportunities; promoting and supporting a respected credential; serving as a user-friendly and inviting forum for the creative exchange of knowledge and ideas; and providing accurate and useful information to the public and the profession.

The AACD was founded in December of 1984. From a small gathering of dedicated individuals nearly three decades ago, the AACD has matured into the world’s largest organization for cosmetic dental professionals.

The AACD now includes more than 6,000 dental professionals, laboratory technicians, educators, and researchers from 70 countries worldwide. This global perspective allows AACD members to gather information from the international field of cosmetic dentistry.

With the formation of the Accreditation and Fellowship programs, the AACD began offering the most stringent and respected credential in cosmetic dentistry to both dentists and laboratory technicians. AACD members are recognized as professionals dedicated to constant improvement of their skills and knowledge, and to making the life-changing benefits of cosmetic dentistry available to more people every year.