

# DENTISTRY AND AESTHETIC MEDICINE

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## Reflections of a meeting

[...] Where did it start and how did it develop my experience in aesthetic medicine? Why can you find aesthetic medicine in a dental operating room? Everything happened because of a particular situation, frequent in our outpatients that developed an unusual vision. After having finished a long, complex dental treatment, with great functional and aesthetic results that regards basically smile, teeth and occlusion. One of my patients looking at herself in the mirror said:

“nice, I like it, it is a very good job, it took two years to accomplish this results and my money were well spent.. but how about these lips.. is there anything you can do?”

So, this question was the beginning and the input to understand, get curious and realize what you have to do to refine, define and improve the result of my dental treatment. I enrolled in some congresses of aesthetic medicine and surgery. I attended them with great interest and I was immediately fascinated by this “new world”. In those days something happened and it changed my life. I attended more and more courses where the use of material as fillers, peeling and revitalizations were explained; then again more other that talked about aesthetics of face, or better how to improve it.

The participants were aesthetic doctors, dermatologists, plastic surgeons.. and obviously dentists. Back then, about nine years ago, dentists did not attend these types of courses. Entering that world allowed me to evaluate something I have never done before. Why did people want to change the look of their skin, improve the look of their face? Where aesthetic medicine was, compared to other medical specialties? I found the answer trying to understand the psychology of people who wanted those therapies. This attention led me to give more and more importance to patient instead of the used techniques.

Not only the knowledge of methods, materials, medicine, but a different approach with a person.

## Registration At The Aesthetic Medical School (Am) And The “New Dentistry”

The consequence of that “new vision” was the decision to study and get a specialization in aesthetic medicine. I chose one of the post-university schools with a complete formative training, four years long that gave, beside a well-recognized diploma, the necessary preparation to introduce these new techniques in my daily activity.

Back then, another episode marked my approach to the “new dentistry” in a very important way. Even that approach arrived after a talk with a patient who invited me to attend some lectures about “Neuro-Linguistic Programming” (NLP).

Neuro-Linguistic Programming (“something” that was not very clear to me!)

What is NLP? It has been recently introduced from the United States, where it spread out back in the '70s, it studies the behavior of people who have success, their excellence and gives the necessary instruments to replicate this excellence. Truly, it was not so clear at the beginning, but something inside me said that maybe those were the main themes that were worthy to deepen. So I received more and more ideas for my personal and professional growth.. it has been also professional because this approach was useful to myself first.

I started to attend courses to understand, to explore my limitations.. to enter in my head and broaden my horizons, my visions. It was a revolution and I found myself in a reality I did not know.

This experience, with new studies about aesthetic medicine, created the environment, the fundamental and important habitus that change my life. It changed the knowledge about myself, the relationship with my family, with my staff, with my job environment and the relationship with my patients.

## Know, Understand Aesthetic Medicine

Knowledge and comprehension trace new maps. Opening the mind brings to new experience and broadens the horizons. So, attention and effort are a must to handle coincidences and have benefits. I continued to study techniques, materials, new instruments in the field of AM, especially focusing on face. Understating aesthetic medicine is not filling lips, but it is a large world that goes from thermal medicine to dermatology, from psychology to dietetics; understating that many of its techniques and solution could be introduced in dentistry

to improve the results was the turning point that changed my job in these past few years. As it was for the NLP where I deepen my knowledge to improve the relationship I had with my family, staff, colleagues and patients. Now my profession is not just about dentistry, but it is a set of specialties that start from dentistry and use aesthetic medicine, psychology, neuro-linguistic to give wellness. I believe that these are the new boundaries and the new "challenge": not only teeth but also great attention to people.

## First Visit Being A Dentist/Aesthetic Doctor

I often say at my congress with Alessio that my first visit is completely changed. At the beginning it was a quick visit and nothing more beside the dental aspect. I listened the patient, looked at the mouth and teeth, I localized what the problems were, I told the patient to come the next time, after having done radiographies and hygiene sessions and I was used to see the patient at the end to prepare the dental treatment. Now my plans of treatment are not only dental, but in a holistic way, comprehensive of the person.

My first visits are longer (40 minutes, an hour and sometimes more). They are about what I call the active listening phase: the patient talks about his/her problems. The patient knows that is not entering an outpatient with a dentist who will take care of teeth, but the patient knows that an entire staff will take care of what his/her needs and requests are.

Those needs are not just dental. Then, we all together will decide what to do. "If" and "how" we do it, it is another important aspect.

The person who sits in my chair is not a person to whom I have to sell a product, but he/she has to be listened, understood and welcomed.

In my opinion this relationship, link and knowledge will be the bond that will hold us together with trust that will never leave us.

Thank to the new knowledge that I had, to the new studies that I did, I understood the importance of listening. Proposing specific therapies is possible only after having listened to the person and especially only after having truly understood what the person wants. At that moment you are not only a specialist of teeth, but also a "complete" doctor, in the condition to be able to, want to and know how to listen and understand the patient.

The management of this new figure of "Dentist/Aesthetic Doctor". This was my experience in these past few years. Experience that year by year I wanted to pass on to people I care: my family, who always waited for me after every single course to understand what was new and the last news I came in contact with; to my staff, that every Monday was there, impatient to know new things and what was good to immediately implement; to my patients, who were always informed about my daily routine because of their interest in what I was doing asking me to have a meeting with a presentation.

At first I selected the people I hoped were really interested in specific subjects. Then, I organized evenings dedicated to everybody.

During the first of these evenings to which I have invited patients for Christmas Wishes, I explained why I was using aesthetic medicine in my dental operating room.

The result was excellent; all of the 200 participants were interested. I had the feedback through a test proposed in my outpatient room in the following months.

Everyone agreed that the techniques of aesthetic medicine, proposed as I previously did, could enter my dental studio.

As a matter of fact it is evident, as in my other cases, that we cannot take these methods, medicines and propose and sell them to patients. It was not about selling something. It was about getting to know a new material, a new therapy, to understand the potentiality to propose to our patients helping them to maintain and find again a status of wellness.

On the most frequent questions that my colleagues ask me is how I propose these techniques in my studio, how introduce them: basically what to say and what to do.

As I said before, it is not about buying and selling a product, to sell news to use in our practice. This initial approach is a mental approach that has to be our: we have to understand that we are not great seller of the same "uniformed beauty".

In our outpatient room and in our life a changing has to happen. As I said many times, we have to firmly believe that what we are doing, that the innovations we are using are methods, solutions very useful to our patients, to our clients, to our room and to ourselves.

Basically it is about changing attitude. We do not have to change; we have to start thinking in a different way. If we want to be efficient, if we want to pass on a message we have to firmly believe in it. And the path is not easy, and sometimes not even quick.

Starting is very important. The first thing is relying on it. I keep on telling it because I often hear, see and listen to some perplexities about it.

Many colleagues come to courses because they think they are going to find business in aesthetic medicine.

I believe that the economic result is "just" a positive collateral effect. It is evident that our real business is dentistry.

We are dentists and the introduction to these new techniques, that we can still call accessory, well integrates with dentistry, improves our job concretely and, in an indirect way, our business.

For this reason I constantly try hard because I want my message to pass on and this message is that we make the difference, that we have to change and in order to do that we have to strongly believe it. We have to believe we have to change, thinking that it is possible to change. Thinking about the fact that there is a new way to do dentistry, that a new method to see our profession is out there.. and why not, that there is a better way to live our job.

This better way to live and see our profession passes through the involvement of us completely. The result will be excellent, we will be surprised about what is happening and will happen, because what is around us will have a completely different collocation, a different light. We will see and feel differently. Everything will belong to us in a different dimension, in a new way, more complete and truer.

These are the teachings that all these "quick" years of study, passion and involvement gave to me. I said passion.

Believe in it means put an effort in what we are doing, put passion in it. And the effort, passion, will give us positive, excellent and fantastic results. After our involvement, the further step will be the one to make everyone participating into it. Explaining to everyone, to whom we work with, the new boundaries and what we can do to improve. Their involvement will have as an immediate effect their enthusiasm, because it is something new. Even the patients will notice it. The mediators of changing will be people who work with us, the staff and the same patients.

We will not need to say "I have this to suggest you", they will ask us if there is something new. In fact, I do not suggest aesthetic therapies, patients ask me that, and at that point I talk to them and I try to meet their needs. Changing will involve even the image and communication of the entire outpatient: how is the first impact at the reception, how the secretaries will welcome the patients, how is the waiting room, how are the luminosity and the colors of the outpatient; what the message, even videos, in the waiting room will talk about.

Great attention will be paid for the front office communications and all the documents given to patients. It will be important to evaluate how the assistants welcome the patients, how the collaborators interact with patients, how we listen to them: previously I talked about the importance of the first visit. And then how we structure the different sessions, as we propose and discuss the plan of treatment; how we involve the patient and how the patient will feel involved; how we will be able to communicate these news to people with whom we work with and the patients themselves. Here you can understand nothing is left to chance and everything has to be prepared with care and passion. The same care, passion and dedication that lead the desire to pass on to all of you what you are reading what I have learned, understood, felt, shared during these past few years of splendid job.

## The opera

The Profession of Dentistry of the third millennium is more and more based on Aesthetics.

An operation inside the mouth, well done and technically perfect, cannot be apart from the aesthetics of perioral soft tissues. Smiling is our business card!

So, the buccal region and the medial and lower third of face with their dental and aesthetic medical implications gain more and more interest.

The Manual of Aesthetic Dentistry was conceived to satisfy these needs.

The Manual "collects" a REVIEW of CLINICAL CASES, result of the direct experience of Dentists and Aesthetic Medicine.

While presenting the Manual, it looked dutiful to us to go over the anatomic knowledge through the chapters "Mimic Muscle" and "Facial Analysis", updating through the chapter about the used "Materials", before presenting the different solutions to problems/themes that we daily face.

The idea to present the opera in a Volume with mobile sheet of paper guarantees a continuous updating.

So, we invite the Colleagues to report us the errors and at the same time, if interested, to collaborate with us sending us some Clinical Cases results of Their experience.

We ask not to send us already published Cases. Thanking the Colleagues who contributed in making this opera, I would like to thank a dear friend Nicodemo Maggiulli and His team for the active collaboration and for having represented the volume in its suitable typographic capacity. Predisposed to "improve meetings" for our activity, we wish you a good reading.

The Authors.