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Magazine Article

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Howard Speaks: Are You a Dentist or an Extremist?

Each month, Dr. Howard Farran, publisher of *Dentaltown Magazine*, shares his unique insights about the dental profession. This month, he weighs in on the amalgam versus composite debate, encouraging dentists to ditch the all-or-nothing mentality.

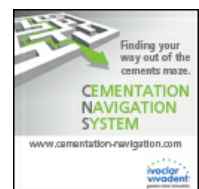
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Are You a Dentist or an Extremist?

by Howard Farran, DDS, MAGD, MBA, DICOI, Publisher, *Dentaltown Magazine*

I'm turning 50 this year, and one of the many things that still amuses me after living a half century on this planet is how a person's thoughts and ideas evolve – sometimes progressing as we learn new information, other times reverting to old ways of thinking. And it is just as interesting to see how certain points of view change over time. In my first business class at Creighton University in 1980, I learned the return on stocks was about 12.5 percent on average, bonds were about a seven percent return and the ultra-conservative, risk-free government bonds gave you about a five percent return. And if you told me back then that 30 years later bonds would have outperformed stocks, I wouldn't have believed you. Yet here we are!



While I was in dental school in the '80s, up to that point in my life I'd never had a cavity. One day, one of my classmates, Dr. Paul O'Malley – who is now, in my opinion, one of the best dentists in Texas – did an exam on me and found eight sticky occlusals on my molars. He did eight amalgam fillings on me the very next day. Then in 1987, when I graduated from dental school, I got caught up in the cosmetic revolution. All of these "gurus" were running around telling anyone who'd listen, "Amalgam expands much more than composite, and that's why they break all the teeth away. Patients don't want black metal in their mouths anymore. This new composite material is going to bond the walls together and the tooth will be much stronger than if you used amalgam. Besides, amalgam has mercury and other poison in it." I was young, got caught up in all the excitement and bought into everything they told me. God knows the patients wanted white fillings. I wanted to believe this beautiful, white filling was so much better than this black, metallic, ugly filling. Everyone wanted to believe it – especially me. A decade ago, I even went so far as to get all eight of my amalgam fillings replaced with pretty composite ones.

I don't have too many regrets in the last 50 years, but replacing those amalgam fillings with composite fillings is one of them. Every single one of those composites is now a gold inlay or onlay. When those composite fillings failed one by one, I got tired of screwing around with it. I went all gold. If I want something to last the longest, I'll go gold. But your patients can't afford gold every time (or ever, in some cases). They're also tired of coming back to your practice every 10 years or so to get the same tooth fixed and refilled with composite, since you don't offer amalgam anymore.

It's time we stopped fooling ourselves. Yes, everyone will continue to ask for composite because it looks good, but it's time to start informing your patients about the risks and rewards of using a particular filling material. Because aesthetics is valued as much if not more than functionality, if you give a woman the choice between a white composite filling or a dark metallic filling that will last much longer than the white one, she will still choose the white filling 80 to 90 percent of the time. But if it's a young man who's starting a family, is extremely busy, barely comes in for scheduled appointments as is, and doesn't want to keep coming back to get a new filling every 10 years, he might choose the amalgam. And me? Well, I'm a short, fat, bald guy, who, at 50 years old isn't interested in doing anything cosmetically. This is as good as I'm going to look, gang! I'll take amalgam any day (in fact I just did... Take a look at the the before-and-after photos on page 18. That's me last month, baby)!

I've had enough of this all-or-nothing, extremist view on dentistry. Are you telling me you can't place one amalgam in your office? You really think you're a doctor of dental surgery placing only composite? There are seven billion people on the planet and you don't see an indication for amalgam in your office? Let's look at your own six-year-old boy who has an occlusal cavity. Why would you put a tooth-colored filling in there? Is it in the cosmetic zone? Who the hell is going to see it?



The fastest growing segment of the U.S. population is women 100 and older; the second fastest is women 90 to 100. Women are living longer, and coming with it is arthritis, dementia and medications that all but shut down their saliva production. They start getting plagued with root surface decay. So you are going to put in a completely inert composite restoration instead of an amalgam or a glass ionomer? Really? News flash: you can't call yourself a doctor anymore – you're an extremist! If you don't have amalgam in your office – an option that is cheaper, easier, faster and typically lasts longer than composite – then, my friend, you're an extremist. You can't call yourself a doctor. You can't call yourself a scientist. And you think you can call yourself a cosmetic dentist? What, on an 80-year-old lady with Alzheimer's? Really?

It's time we take a closer look at amalgam and start offering our patients a choice instead of forcing the cosmetic option down their throats. It's time the debate took a fact-based turn for the better – for all sides!

This is a very special issue of Dentaltown Magazine. My editorial team and I are proud to present the close-to-definitive Point-Counterpoint debate on amalgam, composite and glass ionomer (see page 82). This process started when I met Dr. Michael Wahl – probably the dental profession's foremost expert on amalgam. He said he wanted to put a little article together for our readers, which piqued my interest because I had been looking into more information on amalgam at the time. It was kismet, I tell you! There are very few dentists alive today who have done as much research on amalgam as Dr. Wahl, and we are very pleased that he wrote an amazing article for this issue. Dr. Wahl's first draft was so large, it took him months to pare it down to its most essential points – and it's still a beast! We also invited two of dentistry's most outspoken professionals, Drs. David Clark and Lee Ann Brady to present the composite side of this important debate, because there are still some of you out there who have never joined the 21st century and placed composite. And we asked Dr. Umar Haque to discuss the oft overlooked glass ionomer angle. There are indications for all of these materials! It's time to forego this all-or-nothing crap! It was our team's goal to be fair, present all sides of the debate and then allow you to make up your own mind and join in on the discussion on the message boards of Dentaltown.com.

Howard Live

Howard Farran, DDS, MBA, MAGD is an international speaker who has written dozens of published articles. To schedule



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