



as seen in

smile

story

sends strong messages about how one 'expects' to be treated or 'deserves' to be treated by others. The better we feel about ourselves, and appearance is part of that assessment, the more positively we project ourselves and the more positively we 'expect' others to react to us. This is in fact exactly what happens.

Since this issue of the magazine is emphasizing self-improvement options for men as well as women I would like to tell you a little bit about Erick's story. Erick presented to us as a 26-year-old working in Minneapolis, MN, and living in suburban Edina. He was working two jobs diligently and looking to move upward in his career choice. He very openly admitted that he didn't like his smile and it had bothered him for a very long time. He felt it was detrimental to his career and social life because the effect it had on him was he suppressed his smile rather than let it flow freely. This is consistent with a recent survey done by the American Academy of Cosmetic Dentistry (AACD) in which 95 percent of respondents felt that people with attractive smiles get better jobs, make better impressions on others and are held in higher regard.

At our initial consultation with Erick he volunteered that his smile had a major negative effect on his self-esteem and, in fact, in most cases made him unwilling to smile even at appropriate times. He had been thinking about doing something about his teeth for five or six years but had not moved forward. He was not sure what to do, what was available and was certainly not sure where to go to seek care.

These are concerns I have seen over and over again. Even for those who have a very good idea about what is available and what they want, many are very concerned about who they should trust with their desire. One of the biggest concerns is having 'cosmetic' dentistry done and ending up with a poor result, one that could make them feel even worse than their original condition. This is a very real concern and one we can all appreciate because all of us, professional and lay alike, have seen results that look far from natural.

Erick had mentioned his desire to make improvements to his general dentist but felt that the dentist didn't seem to have or want to take the time to explore the possibilities for treatment. When he pressed for more information the

Twin Cities, MN cosmetic dentist **Steve Gorman DDS** relates the story of Erick's smile design and subsequent cosmetic dental care.

One of the things that is so interesting about doing comprehensive aesthetic and restorative dentistry is that every patient/client has a story to tell. These stories are not just about dental problems or what they don't like about their smiles but often are quite emotional. We have talked before about your smile being a 'window to the world', reflecting how you feel about yourself. We have also seen that the enthusiasm or lack of it in a smile

solution he was given seemed shallow and 'off the cuff', more of a 'quick fix' feeling.

Erick had heard about the Gorman Center for Fine Dentistry and then saw a photo in a magazine of one of our finished cases and was attracted to our website. This is what motivated him to come in to express his desire for an improved smile. After an initial consultation and discussion about general options, we recommended Erick return for a comprehensive examination and records to get specific information.

## 'Our goal here is to know everything about the mouth that can have a factor in a beautiful, functional result'

This examination includes an evaluation of all the teeth, existing dentistry, soft tissue and oral cancer screening, complete gum tissue exam, functional bite and tooth wear evaluation, jaw joint exam, evaluation of opening and closing muscles, bite records and a pre-treatment photographic evaluation of the teeth, lips, gums and smile.

Our goal here is to know everything about the mouth that can have a factor in a beautiful, functional result. Erick was very happy that we took the time to evaluate the whole system and he said later it was a major factor in making him feel comfortable about the whole process.

Erick had expressed openness to hearing about all the options and a desire to follow through with recommendations. We found that he had very healthy gum tissues and other soft tissues. He had had very little need for restorative dentistry in the past except for several small, dark metal fillings. He expressed a desire to change those to tooth-colored materials.

What bothered him most about his smile were unnatural spaces between some of his upper front teeth and the wear he was seeing on his two upper front teeth.

The main reason for this was that he was congenitally missing his 'lateral' incisors, the teeth right next to the front teeth on either side. This is a fairly common congenital issue and in this case caused considerable shifting and drifting of other teeth in an effort to close spaces. This shifting, which included some rotation of teeth, had a negative effect on the bite and in fact caused the para-function that in turn was causing the excessive wear on his teeth.

Erick also did not like the small overlap that had occurred with his upper two front teeth. In our smile design analysis we noticed he had a very narrow upper arch of teeth, which did not allow him to have the full, wide smile he desired.

There were two directions Erick could have taken to reach his goal. Both involved initial utilization of ortho-



## *Where beauty meets function.*

"When I first met with Dr. Gorman two years ago, I was struck by his "holistic" approach that aesthetics and beauty must walk hand-in-hand. His positioning is that you can't truly have a beautiful smile unless it functions properly. Because of that, we worked together, and I now have a healthy and beautiful smile that gives me the confidence to accomplish anything I want to. Thank you Dr. Gorman"

*Kathy Pinkley - client*

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# teeth

## Erick



BEFORE



AFTER orthodontics and cosmetic dentistry by Dr. Gorman

natural result. We had all the information necessary to quarterback this treatment with the orthodontist. We were in close communication with the orthodontist throughout the care and in fact helped decide when it was time for the orthodontics to end and the restorative to begin.

The aesthetic treatment consisted of whitening the teeth after orthodontics, fine-tuning the bite after orthodontics, cosmetic recontouring of several 'pointed' teeth and placement of porcelain

veneers to follow proper smile design principles. The old dark fillings were also replaced with tooth matching composite materials.

dentics to position teeth for aesthetic restorative dentistry. One was minor orthodontics to straighten and rotate teeth back to position and placement of upper veneers to reshape the teeth and fill remaining spaces.

This option would require us to make the canine tooth, which had drifted into the position of the missing teeth, to appear like the missing lateral incisors and the next tooth back to look like the canines and function in their position.

The other option was to remove a tooth on either side to

veneers to follow proper smile design principles. The old dark fillings were also replaced with tooth matching composite materials.

The biggest reward in this case is that Erick is thrilled with the results and happy to have gone through the process to get there. He says he would recommend this type of care and detail to anyone who felt like he did before and was discerning about the result. He feels his self-confidence is way up and he certainly comes across as a much happier person. He no longer worries about other peoples' perceptions or judgements of him. As he says, 'It allows me to be comfortable being me.'

Erick related that the natural look of his teeth is what he has enjoyed most about feedback from family, friends and even strangers who have no idea he had anything done. Friends who had not seen him for a while thought he had simply bleached his teeth. The person who cuts his hair said, 'There is something different about you, what is it?' These are the comments you want to hear after treatment instead of 'Oh, I notice you got your teeth done' or 'When did you get new crowns?'

To take a person's concerns, listen to their desires and use your expertise to help them achieve what they want and be happy to go through the process is what comprehensive aesthetic dentistry is all about. A case like Erick's makes us proud of what can be accomplished. **cbm**



Erick AFTER orthodontics and BEFORE cosmetic dentistry by Dr. Gorman



Erick AFTER cosmetic dentistry by Dr. Gorman and ceramics by Edgar Jimenez

# Dr. Gorman's CORNER

Twin Cities cosmetic dentist **Steve Gorman DDS** answers your questions about dental concerns.



**Q** I have been thinking about doing some cosmetic dental treatment on my front teeth. When I asked my general dentist about it, she said I might need to have some gum tissue repositioning done before I do that to make it look right. I didn't really understand what she meant by that. When is it necessary to do that?

**A** The gum tissue is a very important part of the aesthetics of your smile. There are several reasons why your general dentist could have made that comment to you. There is a natural aesthetic relationship of gum tissue heights on the front teeth. If gum levels are too high or low on certain teeth it can disrupt this natural balance. If not corrected, even with beautiful dentistry on the teeth, the result may be less than ideal and less than your desired result.

These situations can range from a general excessive display of gum tissue (the gummy smile) to one or two teeth having gum levels that do not match. In cases of gum disease or naturally thin tissue the culprit could be recession of the tissue exposing excessive tooth structure including starting to show the roots of the teeth.

A distinction usually needs to be made between whether the tissue problem is confined to the gum tissue itself (excessive or receded) or if the underlying bone is involved. In cases of too much tissue, sometimes the problem is excess underlying bone. In recession situations, often the underlying bone has receded and the tissue is simply following it.

A thorough examination of the situation can help determine the exact diagnosis of the issue that is causing

the gum tissue to present itself the way it is. From there a mock-up can be done on a model of your teeth. This helps to determine where the tissue should be given the proper lengths and widths of teeth, and aesthetic result you are looking for.

The solutions will depend on the reason for the discrepancy and how much would need to be done to reach the desired results. In situations of excess tissue a simple solution may be trimming the tissue to the proper level with a laser or laser-like instrument. This is a simple, straightforward procedure, and heals quickly, painlessly and uneventfully. If the underlying bone is involved it may be necessary to do 'crown lengthening' to expose more of the tooth structure hidden by the excess bone and gum tissue. We usually involve a periodontist in this case, and it also heals well and allows a wonderful canvas to do aesthetic restorations on the teeth with beautiful surrounding gum tissue.

If there is recession on the teeth with excess display of the tooth or tooth root, it is sometimes necessary to cover these areas with gum tissue grafting. For best results a periodontist is usually involved in this as well. This can also restore our natural aesthetic balance of gum tissue levels.

These solutions are in a general category of the dental version of plastic surgery. 'Periodontal plastic surgery' and 'smile lift' are terms used to describe what is possible today to provide or restore beautiful comprehensive aesthetic dentistry and expresses the importance of the aesthetic practitioner to recognize these issues and use all resources available to help patients achieve the very best results possible. **cbm**