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FJ Trevor Burke

Dental Olympians, 2012

*Olympian – person of great attainment*¹

Four years ago, my Comment, at the time of the Olympic Games in Beijing, proposed the dental Olympians of the preceding four years. I mentioned the move away from traditional, destructive, cavity designs, the increasing discussion about water fluoridation in the UK (which sadly came to nought) and the introduction of zirconia-based restorations to the profession. It could also be argued that nothing changes too quickly in dentistry, but it is perhaps reasonable to suggest that there have been subtle changes in emphasis since the time of those Olympics as we approach the games which are being held on home soil for the first time for a majority of readers of *Dental Update*.

Ceramics have been an integral part of dentistry since the early work carried out principally by the late John McLean, but the one thing that has eluded researchers, developers and clinicians, until recently, has been a ceramic framework for bridgework which was fracture resistant and biocompatible. In the past four years, zirconia-based bridges have undergone an exponential increase in popularity, with these (described in this issue on page 342 by Millen *et al*) now being used by 27% of dental practitioners in the UK.² This may be for a number of reasons, but could principally be related to patients' increasing desire for non-metal restorations and the potentially improved aesthetics that accrue. Additionally, the rising cost of the metals in alloys utilized in metal-ceramic restorations has helped to make zirconia-based restorations more cost neutral and, with the increasing numbers of milling centres, also making prices more competitive. Results of early clinical evaluations are positive.³

While ceramic restorations may be considered to provide the optimum aesthetics, sadly, the burgeoning rise in the number of examples of extreme tooth cutting published in the name of dental aesthetics has shown no hint of reducing, with some particularly heavy losses of sound enamel and dentine sometimes being published,⁴ adding to the ever enlarging 'Tooth Destruction Hall of Shame'. Like old Olympians defending their ground, the dental profession needs to defend its reputation, lest it becomes only aligned with aesthetics and the hairdressers, rather than being a profession which produces oral health for its patients, whose morals are high and for whom monetary gain is not the principal reason for providing treatment. In this, we have been led from the front by Martin Kelleher (whose series commences in this issue) in true Olympian fashion. He has pointed out, time and time again, that enamel is not a renewable resource and that tooth cutting cannot be condoned without just cause.

Another dental Olympian is surely the dental implant which seems to have undergone a similar exponential increase to that of zirconia-based restorations, given that, in a survey of UK dentists in 2008, 20% of respondents indicated that they were involved in implant placement or restoration.² This could be considered to indicate that the simpler forms of dental implant, with appropriate training, will eventually become a part of mainstream dental practice.

Other heroes of the past four years have undoubtedly been the NHS practitioners based in England and Wales, who have continued to endure a system (the UDA) that few practitioners like and which provides scant knowledge and little check on the treatments that NHS dentists are carrying out, sometimes using taxpayers' money. Why this has not become a national scandal is something that I am unable to work out. Nevertheless, it may be a reason why NHS treatment provision has dropped from 86% in 2002 to 57% in 2008.²

There are, without doubt, other Dental Olympians and advances which I have not mentioned. One thing remains constant! *Dental Update*, over the past four years, has provided readers with up-to-date information which is of relevance to clinicians, and will continue to do so. Let's look forward to a very enjoyable and peaceful Olympic Games in London.

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