Filling in the cracks

It's now commonplace for a visit to the dentist to include a little smoothing, plumping and tightening, as well as filling, says Dr Bob Khanna

Cosmetic procedures are no longer taboo. People are no longer embarrassed to admit that they are turning to the professionals to help them slow down the ageing process. As such, more and more people are visiting facial aesthetic practitioners for a helping hand. Popping for a shot of Botox or a little dermal filler is just as commonplace as a visit to the hairdresser.

Traditionally, a dental surgery would only be able to assist with teeth, but now it is possible to treat patients with a wide range of products designed to help smooth, plump and tighten problem areas on the face as well.

Bread and butter treatments

The most common, and most requested procedures are quick and simple to perform, with minimum patient discomfort. These ‘bread and butter’ treatments involve Botox (botulinum toxin), chemical skin peels and facial dermal fillers. More complex and in-depth procedures are available, but from my experience, these are the key procedures that patients are most interested in.

As the UK’s most popular cosmetic procedure, more than 80 per cent of Botox treatments (Botox(R), Dysport(R), Azzalure(R), Xeomin(R)) are used in general dental practice. More comfortab le and simple to perform, with minimal patient discomfort, these ‘bread and butter’ treatments involve Botox (botulinum toxin), chemical skin peels and facial dermal fillers. More complex and in-depth procedures are available, but from my experience, these are the key procedures that patients are most interested in.

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Skin rejuvenation

While Botox treatments are common in the upper region of the face, dermal fillers are used in over 80 per cent of procedures involving the mid and lower face. As people age, volume is lost as collagen and the fat pads in the face atrophy and people develop deeper folds or wrinkles in their face. Dermal fillers are particularly effective when treating these areas, such as the perioral lines and wrinkles, as well as nose to mouth lines.

General dental practitioners already work in these areas on a regular basis when carrying out dental procedures, so are already very familiar with the anatomy of the lips and surrounding areas. Additionally, this is the region of the face that frames the teeth, dental fillers can make a huge difference to the overall appearance of the face, and because of the proximity to the teeth, can be the perfect complement to many cosmetic dental procedures.

As well as combating fine lines and wrinkles, if a patient feels that their skin is looking dull and lifeless, there are procedures available to help rejuvenate it. Chemical skin peels, which can be administered by both dentists and hygienists, are simple procedures that offer a safe and comfortable method to effectively treat facial skin complaints. Peels can help combat problems such as aging skin, acne and blocked pores, while at the same time helping to reduce the effects of sun damage and hyperpigmentation. A chemical skin peel will help skin to appear smoother, healthier, plumper and tighter, and doesn’t even involve any needles.

Most patients who receive facial aesthetics return for re-treatment. On average, the results of a Botox treatment lasts around four months, meaning patients would need to return for re-treatment three times a year. The results of dermal filler procedures last a little longer, up to ten months depending on the products used.

Additional training

It is true some practitioners may not wish to offer such treatments in a purely cosmetic capacity. Hence, in addition to the cosmetic benefits, there are also many ways in which Botox can be used in general dental practise.

With additional training, dentists can gain knowledge on how to utilise Botox in the oral facial region. This ‘bread and butter’ treatment can not only help combat common problems such as gummy smiles, bruxism (grinding/clenching) and temporomandibular joint disorders. Problems like these are often only rectifiable by invasive means and sometimes surgery, (not a pleasant thought for many patients), however practices can now offer to treat such conditions with a course of relatively simple injections after appropriate training (ie. Oral facial course).

About the author

Dr Bob Khanna is widely regarded as one of the world's leading exemplars of dentistry and facial aesthetics. President and founder of non-profit organisation The International Academy for Advanced Facial Aesthetics (IAAFA), Dr Khanna heads the only UK organisation to combine medical and dental professionals. He is the appointed clinical tutor in facial aesthetics at the Royal College of Surgeons and has trained thousands of dentists and doctors through the Dr Bob Khanna Training Institute.