

SMILE LITE MDP

MOBILE DENTAL PHOTOGRAPHY

Smile Line ☺
made in switzerland

Smile Lite MDP é um dispositivo plug and play muito fácil de usar e que não requer o uso de qualquer aplicativo, procedimento de calibração ou treinamento específico. Com ele você poderá aproveitar toda a potencialidade da câmera do seu smartphone... de modo muito simples.

O MDP logo se passará a ser uma ferramenta imprescindível para:

Nova era para a fotografia

- Fotografias para tomada de cor
- Comunicação diária com o laboratório
- Videoclipes de curta duração
- Documentação dos pacientes
- Fotografias artísticas



Adaptador universal
largura: 55 - 85 mm



Imagens meramente ilustrativas.

O Smile Lite MDP é um mini estúdio fotográfico. Vem equipado com três grupos de LEDs: cada um deles pode ser aceso de maneira independente, e com quatro diferentes níveis de potência.



Para mais informações, acesse o novo site do Smile Lite MDP:

www.smileitemdp.com

Distribuidor exclusivo no Brasil:

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WHY should we understand OCCLUSION?

What would be the rationale for a dental occlusion section in a renowned Esthetic Dentistry journal? With esthetic treatments becoming more popular each year, unexplained failures are happening and require a better understanding of the masticatory system function. Moreover: the expectation relies in the belief that understanding occlusion, all the failures could be avoided. However, assigning to occlusion all responsibility for the success or failure of our treatments may not be reasonable.

A study in a population of 130 young adults, seeking to relate occlusion and satisfaction with the appearance of the smile, found that individuals presenting proper occlusion tended to be satisfied with the appearance of their smile.¹ On the other hand, around 30% of individuals presenting malocclusion related to being unsatisfied with the esthetics of the smile. Besides, 85% of unsatisfied participants did not present proper occlusion. That said, it can be stated that it is more likely for a proper occlusion to be associated with a beautiful smile than a beautiful smile associated with proper occlusion.



What can be done when the patient's occlusion is far from the ideal,² but there are no complaints regarding smile esthetics, pain, or tooth destruction? A clinical case of a 53-year-old patient exemplifying this situation is presented below (Figures 1A to 1F). This situation shows that not every malocclusion will result in destruction and esthetic impairment. However, every clinical case of destruction or aesthetic compromise needs to seek the best occlusion possible.

[A]



Figure 1A-1F: A) The patient's maximum intercuspaton exposing an anterior open bite. B, C) Second and third molars executing lateral guidance. D, E) Occlusal view showing 25-year-old resin composite restorations. F) Panoramic radiograph showing healthy pulp, periodontal ligament, and temporomandibular joint.

References:

1. Espeland L, Stenvik A. Perception of personal dental appearance in young adults: Relationship between occlusion, awareness, and satisfaction. Am J Orthod Dentofac Orthop. 1991;100(3):234-41.
2. Andrews L. The six keys to normal occlusion. Am J Orthod. 1972;62(3):296-309.