



Trevor Burke

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Optimising the bond to dentine

We have known how to bond resin composite restorations to enamel since the publication of the work of Buonocore in 1955. However, bonding to dentine has proved more problematical because of its higher organic and water content. This is of special relevance in tooth wear cases where much of the enamel has been lost. This presentation will examine the clinical and laboratory research with a view to establishing the optimum dentine bonding agent for use for use in bonding composite to worn teeth where much of the bonding is to dentine.



Dr Neil Wilson

Specialist in Prosthodontics in referral practice, Birmingham and part-time Lecturer at the University of Birmingham School of Dentistry.

'The perfect smile - dream or reality'

'The concept of the ideal smile has increasingly been put forward in makeover shows and the popular press in recent years and, in dental practices across the land, patients are being offered the chance of 'smile makeovers'. But, what are the components of a smile that make it perfect? This presentation will look at the elements of the smile, from size of the teeth to shape of the gums, indicating how changes in 'the ideal' can change the overall appearance. It will also assess the evidence on what dentists believe are the most important elements and will cover what are considered to be the most important factors for consideration when looking at someone's smile. The presentation will also enable delegates to be able to recognize the components of the smile and how they interact with each other. The information learnt will help practitioners to decide on what treatment, if any, is needed to ensure that their patients are happy with their smile.



Martin Kelleher

Consultant in Restorative Dentistry at Kings College

Tooth Wear – Pragmatism v Dogmatism

An air rotor is not the weapon of choice when dealing with worn teeth.

It seems a daft 'philosophy' to remove even more sound tooth tissue from already worn teeth or from other teeth in order to treat wear.

There are smarter ways of gaining space to improve appearance and function while maintaining the structural integrity of the teeth.

There are a plethora of causes of worn teeth and there is a wide range of available treatments with varying biological and financial costs as well as benefits.

Differential diagnosis and consent are therefore essential before undertaking treatment

Adhesive approaches have revolutionised the management of wear.

Learning objectives

This presentation :

Will point the way to the successful restoration of function and appearance of worn teeth without inflicting massive collateral damage on worn or other teeth.

Will highlight how to get the balance right between improving appearance and longevity of the teeth.

Will advise on choosing sensible materials for restoring worn teeth.

Will cover 'What works and what does not' in managing worn teeth



Karl Bishop

MScD DRD MRD FDS RCS LLM, Consultant in Restorative Dentistry and Implantology

Evolution of the 'Dahl' Concept

Tooth wear provides a major challenge to the dental profession, particularly when it occurs in younger age groups and is localized to specific areas of the dentition. In 1975 a concept was proposed which created inter-occlusal space which was in conflict with traditional concepts of managing the dental occlusion.

However, with time this concept has been accepted by many as a key part of the armamentarium available to treat tooth wear.

At the end of the presentation, delegates should be aware of the evolution of the Dahl Concept, why it may work, circumstances where the application of the principle may be contra-indicated and be aware by the use of clinical examples where it may play an integral part in the successful restorative management of patients with tooth wear.