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## Facial Rejuvenation as Part of Smile Design

### Integration into the dental practice

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Once performed mostly only at spas and by medical professionals such as dermatologists, there is definitely a place for esthetic and therapeutic Botox in dentistry. A thorough look at the facts surrounding facial rejuvenation procedures that use Botox may cause a paradigm shift in the dental profession's attitude toward these treatment modalities.

When I was very young, my father, a famous seine boat fishing captain, instilled the idea in me that the key to success is to use the latest technology to chart your course before the tide begins to change.

Recognizing that the tide in dentistry was indeed changing, we decided to include facial rejuvenation procedures into our "smile design" treatment. Our most exciting adventure to date has been opening a facial rejuvenation/esthetic dentistry clinic, and we are enjoying the practice of dentistry more today than we ever have before.

A cosmetic, dental, or medical procedure used to restore a younger appearance to the face without surgery, facial rejuvenation can include a number of treatment modalities, such as Botox and dermal fillers. These two most common procedures are both minimally invasive and reversible. The treated muscles will return to their pretreatment condition approximately 3 to 4 months after the initial Botox treatment. Hyaluronic-acid dermal filler is naturally resorbed by the body within 9 months to 1 year after treatment. Botox (which is the natural, purified protein of the Clostridium botulinum bacteria) is used to cosmetically soften lines and wrinkles of the face and neck. Hyaluronic-acid dermal fillers restore the volume that is lost through the natural aging process.

Both Botox and dermal fillers are natural adjuncts to esthetic dentistry. With their effect on tooth display and the draping of the soft tissue around the mouth, incorporating these modalities into treatment plans can have a major impact on the esthetic outcome of smile makeovers and comprehensive restorative treatment. Even if dentists are not inclined to provide these treatments themselves, they should educate themselves in how Botox and dermal fillers can influence the dental treatment they provide.

### How This Fits in Esthetic Dentistry

Photography has taken on an ever-increasing role in the provision of esthetic dentistry. Photographs are an integral part of cosmetic imaging that allow a patient to preview a potential course of treatment, laboratory communication, and accurate record keeping.

In facial rejuvenation, patients often have difficulty understanding and communicating what they want to improve. A series of photographs that allows patients to view themselves from all angles is required but, until recently, none existed. To fill this need the Pacific Training Institute for Aesthetics (PTIFA) created the Roberts Facial Rejuvenation Photography (RFRP) series of 29 digital photographs. The RFRP series helps the dentist to critically analyze the face and demonstrate how the muscles used in the facial expression affect the smile design.

At PTIFA, we were the first to begin to mark (and photograph the markings) all of the muscles prior to injection. The patients appreciate our attention to detail, our painless injection technique, and complete marking. By varying the dose, we noticed a decrease in headaches, migraines, temporomandibular joint disorder, and myofascial pain. There is a huge crossover and synergy between esthetic and therapeutic Botox treatment. A huge pearl: If you relieve headaches and migraines on a team member, they tell every patient that walks in the door.

When patients are interested in enhancing the appearance and features of their teeth, they also frequently want to improve their overall facial appearance. In the past, they would seek treatment for facial enhancement elsewhere; however, dentists are uniquely skilled to provide these treatments for their patients. Who else has better training and a more solid understanding of facial anatomy than dentists? Who else is more skilled at giving injections in this area of the body? Who else do patients trust to work in the areas surrounding their mouths? If dentists can be trained to perform delicate endodontic procedures, sinus lifts for implants, and other involved procedures, they are certainly capable of performing tiny injections into the superficial muscles of the face and injecting resorbable gels into superficial areas of the skin—especially given the fact that these injections can have a direct influence on other treatments the dentist may be providing. For example, the muscles responsible for the "mid-face expression" can have a drastic esthetic effect on some patients. Have you ever met a beautiful person only to have them smile and show an inch of gingival tissue? Very often, treatment for a "gummy smile" is an invasive surgical Leforte I procedure or surgical crown lengthening. Alternatively, Botox may significantly improve that appearance. Often all that is required to improve the appearance is a 2-unit placement of Botox. In many cases, a 2-minute, \$50 procedure every 3 to 4 months can provide an alternative, non-invasive, esthetic improvement.





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## Training

Our initial training in injecting Botox and dermal fillers was provided by a physician colleague. The anatomy training was minimal, and the acceptance of negative side effects by our medical colleagues was distressing. Additionally, the medical training does not appreciate the dramatic effects the treatment of the upper face can have on the dental exposure.

There was a lack of standardization in the area of facial rejuvenation education. In 2014 the Alberta Dental Association & College (ADA&C) developed a "standard" for facial rejuvenation, Botox, advanced Botox, fillers, extraoral lasers, and face lifts (for qualified oral and maxillofacial surgeons). It is a thorough document to provide the ultimate in patient care by establishing practitioner proficiency and competency. The program is anatomy-based, with the result being no negative side effects. An intensive review of facial anatomy facilitates an understanding of each muscle's effect on the face at various ages. The program also reviews the facial aging process and what motivates a patient to have esthetic changes performed. The RFRP series, which is an ADA&C mandatory requirement, is taught to the entire team because it is the cornerstone for successful results. Supervised, hands-on treatment gives the dental practitioner a sound foundation for injection technique. Attendees leave with the skills and support necessary to start their facial rejuvenation journey and immediately implement the training.

Furthermore, it is important for both patients and clinicians to realize that Botox and hyaluronic-acid dermal fillers have transient effects and need to be replenished at 3- and 9-month intervals, respectively. Dental offices are renowned for their 3- and 6-month recare appointments. The magic lies in incorporating Botox treatments into the practice's recare program. Facial rejuvenation can be seamlessly incorporated into an already-existing recare system, and provide patients with a discreet way of maintaining their Botox and dermal fillers.

## Conclusion

Having successfully incorporated Botox and dermal fillers into our practice, we also created PTIFA to share what we had learned with our dental and medical colleagues. The highest "standard" in the world was set by the ADA&C, and PTIFA was the first to have ADA&C accreditation for their programs. When you consider selecting a course, ask if it meets the ADA&C Accreditation.

Once we had learned the basic skills, the major challenge we faced was how to incorporate these skills into our dental practice. As is the case after taking any new course and learning new skills, the most difficult task is training your team to incorporate the newly learned information into the practice's existing systems. We provide complete team training that facilitates the immediate implementation of newly acquired skills. Although it can be challenging, this training can invigorate the team and provide stimulation for those eager to improve themselves and expand their horizons in the art and science of dentistry. The training we provide dental teams through PTIFA draws on our own experiences that we gained as pioneers in blending dentistry and facial rejuvenation.

To provide ongoing educational support, we also established the world's first Botox Study Club. Our offerings include online training, live webinars, and further hands-on training in a variety of locations throughout Canada and the United States.

It is time for dentists to take a good look at facial rejuvenation and sail with the tide. Our patients deserve our attention and commitment to learn these ubiquitous treatments.

## About the Author

Drs. Janet and Warren Roberts established the Pacific Training Institute for Facial Aesthetics in Vancouver, British Columbia, Canada ([www.PTIFA.com](http://www.PTIFA.com); 604-681-0066) where they train dentists and physicians as well as their teams in Botox, dermal fillers, and laser therapy.



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