Dental Filling Options





Tooth Decay

Tooth decay (dental cavities) is an infectious disease, meaning the bacteria that cause tooth decay can spread from person to person. The disease starts after eating or drinking something with starch or sugar. Bacteria (germs) in the mouth consume these carbohydrates which allow them to grow and collect together on the tooth. This collection of bacteria is called <u>dental plaque</u>. The bacteria in dental plaque continue to consume carbohydrates and produce acids. These acids that are produced weaken the tooth and a hole, or a "cavity," is formed.

Type of Fillings

Direct restorations are fillings placed immediately into a prepared cavity in a single visit. They include dental amalgam (silver filling) and some resin composite fillings (white filling). The dentist prepares the tooth, places the filling and adjusts it during one appointment. Thanks to advances in modern dental materials patients can recieve a look more like natural teeth. These new materials have not eliminated the usefulness of more traditional dental materials such as gold and dental amalgam. That's because the strength and durability of traditional dental materials continue to make them useful for situations, such as fillings in the back teeth where chewing forces are greatest.

Amalgam Filling (Silver Filling)

Dental amalgam is a stable alloy made by combining elemental mercury, silver, tin, copper and possibly other metallic elements. Dental amalgam has been used by dentists for more than a century and is the most thoroughly researched and tested restorative material among all those in use. It is durable, easy to use, highly resistant to wear, and relatively inexpensive in comparison to other materials. For those reasons, it remains a valued treatment option for dentists.

Amalgam fillings, like other filling materials, are considered biocompatible because they are well tolerated by patients with only rare occurrences of allergic response. Because amalgam fillings can withstand very high chewing loads, they are particularly useful for restoring molars in the back of the mouth where chewing load is greatest. They are also useful in areas where a cavity preparation is difficult to keep dry during the filling replacement, such as in deep fillings below the gum line.

Disadvantages of amalgam include possible short-term sensitivity to hot or cold after the filling is placed. The silver-colored filling is also not as natural looking as one that is tooth-colored, especially when the restoration is near the front of the mouth, and shows when the patient laughs or speaks. And to prepare the tooth, the dentist may need to remove more tooth structure to accommodate an amalgam filling than for other types of fillings.

Dental amalgam is a safe and commonly used restorative material but some questions have arisen about the safety of dental amalgam relating to its mercury content. The mercury in amalgam combines with other metals to render it stable and safe for use in filling teeth. The major U.S. and international scientific and health bodies, including the American Dental Society, Massachusetts Dental Society, National Institutes of Health, the U.S. Public Health Service, the Centers for Disease Control and Prevention, the Food and Drug Administration and the World Health Organization, among others have been satisfied that dental amalgam is a safe, reliable and effective restorative material. For any questions or concerns regarding amalgam fillings please contact the American Dental Society at (312) 440-2500 or online at http://www.ada.org and/or the Massachusetts Dental Society at (800) 342-8747 or online at http://www.massdental.org.

Composite Filling (White Filling)

Composite fillings are a mixture of glass or quartz filler in a resin medium that produces a tooth-colored filling. They are sometimes referred to as composites or filled resins. Composite fillings provide good durability and resistance to fracture in small-to-mid size restorations that need to withstand moderate chewing pressure. Less tooth structure is removed when the dentist prepares the tooth, and this may result in a smaller filling than that of an amalgam. Composites can also be "bonded" or adhesively held in a cavity, often allowing the dentist to make a more conservative repair to the tooth.

The cost is moderate and depends on the size of the filling and the technique used by the dentist to place it in the prepared tooth. It generally takes longer to place a composite filling than what is required for an amalgam filling. Composite fillings require a cavity that can be kept clean and dry during filling and they are subject to stain and discoloration over time.

Please be aware that in some cases, a dental plan will only pay for an amalgam filling (silver filling) toward the office charge of a posterior composite filling (white filling on the back teeth) and will result in a larger payment for the patient. Please contact your plan sponsor (often your employer) or the dental insurance to explain the designed features of your specific dental plan.

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