

Amalgam versus resin fillings



Thanks to technological advances, dentists and patients today have several choices when it comes to selecting materials to fill cavities. Among the choices are natural tooth-colored materials such as resin-based composite fillings and more traditional dental fillings such as metal.

Resin fillings are made of ceramic and plastic compounds. Because resins mimic the appearance of natural teeth, these fillings have been used in front teeth for years.

In the past 10 years, technology has improved enough to allow the use of resin material in posterior or back teeth. Still, many dental plans don't cover resin fillings in teeth that aren't visible in a smile, or dentists choose not to use resins for one or more of these reasons:

- With more durable resin material available for only a decade, resins haven't stood the test of time in teeth where grinding and chewing result in heavy wear; on the other hand, the durability of amalgam fillings (commonly known as silver) is well documented — the average life span of amalgams is 8 to 10 years, but many last 20 years or more.
- Amalgam is one of the best filling materials when dentists need to place fillings in areas of the mouth that are difficult to keep dry, such as molars (back teeth) or cavities below the gumline. For resin fillings, the prepared tooth must be completely dry when the material is being applied and cured.
- Resin costs more than amalgam, which can make the cost of the service higher than for a comparable amalgam filling.

For these reasons, the majority of dental health carriers pay for coverage of resin fillings in teeth that are visible in a patient's smile. For example, virtually all of Delta Dental's plans cover resin fillings on the teeth where their cosmetic benefit is critical: the six front teeth (incisors and cuspids) and on the facial (cheek side) surfaces of the next two teeth (bicuspid).

When an enrollee whose plan limits resin fillings to front teeth receives a resin filling on a back tooth, industry practice is to make an allowance toward its cost. The allowance is based on the dentist's fee for the equivalent amalgam filling. The enrollee would then be responsible for the remainder of the cost.

Deciding which type of filling to use is a decision best made by the patient and dentist, taking into account the size and location of the cavity, patient history, cosmetic concerns and cost.

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