

Esthetics and human perception

“Beautiful is what pleases unselfishly, without being originated by or remissible to a concept.”

Humberto Eco

Esthetics, from Greek *aisthesis*, means perception, sensation. It is a philosophical reflection on beauty. In health sciences, the construction of meanings and values about body esthetics is increasingly present, influencing the identity construction of the individual and the perception that this one has about himself and what he understands as health.

In orthodontics, the patient's seek for perfection is growing steadily in recent years. This increase has led orthodontists to search for new knowledge in other areas of dentistry and also in other health areas. This growing interest is strongly driven by consumption boosted by images generated by the great appeal of the media, where models with “perfect” and “white” smiles are presented to the public. It is clear, and concerning, that this appeal seems to induce the orthodontists to think as “layman”, making us forget that we are, in first place, healthcare professionals.

The senses socially used to understand the care with what is considered healthy have been suffering strong influence of esthetic parameters that are apparently outside the field of health sciences. It is unquestionable that the esthetic rehabilitation of the patient is one of the primary objectives of orthodontic treatment; however, it cannot be the only focus. Just like it is impossible to understand the concept of health, and the care it imposes on contemporary urban society, without taking into account fashion, seduction, the spectacle and consumption. However, the appeal of esthetics-based “marketing”, in its essence, has led many to think that way and make decisions based solely on the anxiety and pressure of this market, without considering the expectations of the patient.

The fragmentation of our professional view, due to the appeal of the media and the market together, often encourages us to induce the patient to treat problems that he had never realized he had, regarding both the esthetics of the smile and face. Explaining all

treatment possibilities, including plausible esthetic improvements, is one of our obligations, but this approach must be made using common sense and without impositions, because understanding that patients think in a diverse, individual and subjective way must be the premise of a cordial, honest and ethical relationship. Otherwise, the feeling is as if we were only dictators of an esthetic need, instead of spectators and connoisseurs of the needs of our patients.

The variability of esthetic perception is related to the educational, cultural and socioeconomic background, besides the emotional formatting of each individual. It is not easy to understand it. In orthodontics, it is not enough just to understand what affects the smile, it is necessary to diagnose what is outside the normal range, so we can establish a treatment plan. Just as in the functional problems we follow protocols which lead us to diagnose anomalies, the esthetic problems also require parameters so we can find the defects.¹ In this context, the scientific research on the criteria used by orthodontists and patients to define a smile or a face as esthetically pleasing could build a solid stairway to understanding the differences between professional's perception and patient's perception. This issue of Dental Press Journal of Orthodontics, composed by articles that evaluate esthetics concepts in orthodontics, pretend to be one of these steps. Let's take it...

David Normando — editor-in-chief
davidnormando@hotmail.com

REFERENCES

1. Cãmara CA. Aesthetics in Orthodontics: six horizontal smile lines. Dental Press J Orthod. 2010 Jan-Feb;15(1):118-31.