

SUMMARY 1(3)

15 December 2021

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SUMMARY OF COHERE FINLAND'S RECOMMENDATION
DENTAL FILLINGS AND CROWNS PRODUCED EXTRAORALLY

The recommendation was approved at COHERE Finland's meeting on 15 December 2021

According to the recommendation, dental fillings and crowns produced extraorally belong to the range of health care services in the treatment of extensive damage affecting a minimum of three tooth surfaces as an equal option alongside fillings and crowns made of composites. When making the decision on the method selected for an individual case, factors influencing the prognosis, especially the risk of a potential caries disease, must be taken into account. Where the damage is small (1–2 tooth surfaces), fillings produced extraorally are not included in the range of services.

The recommendation applies to repairing damage to the permanent teeth of patients aged 18 or older with fillings and crowns produced extraorally (the indirect technique). In this method, an impression is made of the cleaned damage area with an impression substance or digitally. On the basis of the impression made, a filling or a crown is produced and then cemented onto the tooth.

Today, most dental damage repairs can be done using the direct technique, in other words, the filling or the crown is made directly onto the teeth using a filling substance. The most common material used is visible light-activated composite.

Caries is the most common reason for dental damage. When it progresses, caries causes loss of dental hard tissue and pulpitis (inflammation of dental pulp) and finally it can lead to the loss of the tooth. Other reasons for dental damage include, among other things, chipping a tooth or a filling, the detachment of a filling or tooth wear due to various reasons.



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When making the decision on the treatment of a single tooth, things to consider always in-

clude the extent of dental damage, the significance of the tooth for the occlusion as a

whole and patient-related risk factors that impair the prognosis, such as the risk of the car-

ies disease. Only by tackling the disease risk factors, when necessary, can the disease be

managed successfully and repeating fillings can be avoided.

If the caries disease risk factors are under control and the damage is extensive, a filling or

a crown produced extraorally may be a dentistically equal option alongside a filling made

of composite in extensive fillings and crowns encompassing a minimum of three tooth sur-

faces. If the risk factors are not under control, the removal of the tooth can also be a justi-

fied alternative to a composite filling in case of extensive damage.

Where the damage is small (1-2 tooth surfaces), composite fillings produced using the di-

rect technique are a dentistically justified treatment method and a more sustainable treat-

ment result cannot be achieved with the more expensive indirect-technique fillings. Conse-

quently, indirect-technique fillings for 1–2 tooth surfaces are not included in the range of

health care services.

A filling or crown produced extraorally incurs higher direct costs for the patient than a di-

rect-technique composite filling. Ultimately, the treatment decision is made in mutual un-

derstanding with the patient.

COHERE Finland estimates that the additional costs caused to the public economy by the

recommendation would be, at the most, EUR 5-10 million per year if the share of the indi-

rect technique of all fillings rose to one fourth. However, it is possible that the increase in

public economy spending may level off if fillings and crowns produced extraorally reduce

the need for treatment over a longer period of time.

MINISTRY OF SOCIAL AFFAIRS AND HEALTH

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This is a summary of the recommendation approved by the Council for Choices in

Health Care in Finland COHERE. The actual recommendation and its background ma-

terials are available on the COHERE website recommendations page.

The home page also features versions of the summary in the Swedish and Finnish lan-

guages.

COHERE Finland works in conjunction with the Ministry of Social Affairs and Health. Its

task is to issue recommendations on which health care methods should be included in

health care services financed from public funds in Finland. For further information about

the choices in health care, see the **COHERE Finland website**.