

Guest editorial: Sverker Toreskog – an appreciation

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Many of you will recall that Dr Sverker Toreskog was given the 2013 BACD President's Award in recognition of his lifelong contributions to minimally invasive aesthetic dentistry.

Some of you will remember the excellent two-day seminar he presented to the BACD in 2007 together with his technician Claes Myrin and orthodontist colleague Professor Bjorn Zachrisson. Others amongst you may have heard him speak on one of his numerous lecture trips to the UK or further afield.

A few of you may have heard the sad news that Sverker passed away in February this year after a short but characteristically stoic battle with prostate cancer. Dentistry had lost a unique individual – not just a fantastically entertaining and charismatic lecturer, but a person whose passion for his work allowed him to be an inspiration to others. The enthusiastically generous way in

which he shared his clinical philosophies and methodology allowed 'normal' people in the audience to believe that they too could successfully replicate what he was showing on the screen.

One of those people was me. And I do not exaggerate when I say that I would not be the dentist I am today without having met and been inspired by him.

I first met Sverker in 1995 at the FDI World Dental Federation congress in Hong Kong. I was there as the newly-elected President of the International Association of Dental Students (IADS). As I am sure you can imagine, it is not normal for a fourth-year dental student to arrive at the dental school and say "oh, by the way, I have to go to Hong Kong next week" – certainly not in Belfast, anyway. However, thanks to steadfast support from Ian Benington, Dean of the Dental School at the time, I found myself in Kowloon, with permission to be

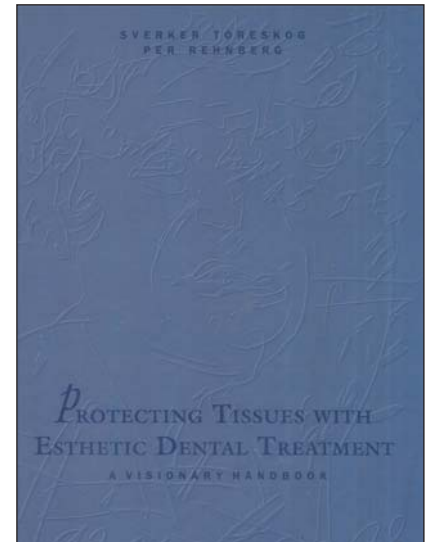


Figure 1: Sverker's book

away for the week, on condition that I attend some of the scientific programme at the conference between the business meetings – because, as he put it, "it doesn't matter who you listen to, but we cannot get people of that caliber to come to Belfast, so you'd better make the most of it".



Figure 2: Patient with amelogenesis imperfecta, who had several unsuccessful attempts to restore aesthetics and function before presenting to Sverker in 1998



Figure 3: Upper anterior preparations and fitted restorations

Professor Benington’s advice turned out to be very sound, but I almost did not get a chance to take it. Arriving at the convention centre, I met up with a group of friends who I knew through the various student and young dentist associations. We caught up over a drink and were joined by a charismatic, elderly Swedish man with wild white curly hair and a red scarf. He said he preferred the company of his younger colleagues because the older dentists were “too boring”.

After a long evening on the town, my last memory of that evening was very late, with Sverker sitting down to a huge cigar and starting an equally large brandy with the words “this had better be the last one – I need to be up early to give my lecture. I’ll see you there.”

Not wishing to lose face, the next morning, after very little sleep, I dragged myself down to the convention centre. This was not an easy task for me following the night before. Sverker was on stage, fresh as a daisy, singing songs to the audience in between slide carousel changes. The contents of his lecture was inspiring but at the same time shocking because the things he was showing were completely different to what I had been taught at the dental school.

I saw tiny, thin pieces of feldspathic porcelain bonded onto worn teeth. Porcelain restorations bonded onto preparations that ended in the middle of the tooth. Large amalgams replaced by even larger pieces of bonded porcelain. An amelogenesis imperfecta case, which at that time would have required porcelain fused to metal crowns, treated using these

techniques (Figures 1-5). These things may sound routine by today’s standards, but please remember that in the mid-1990s, the products we had were very technique sensitive and achieving good results was not easy – but step by step, he showed the audience how, instilling us with the confidence to believe that we could also do the same. It was genuinely like an electric shock to my brain.

I returned to Belfast with a copy of his book (Figure 6). Like his lecture it was part autobiography, part clinical manual, with detailed step by step instructions showing how the different treatments had been carried out. Needless to say its contents did not impress most of my teachers at the dental school, so I did not get to try any of the new techniques. However I did realise the importance of all the dental



Figure 4: Lower anterior preparations. Note the finish line in the middle of the labial surface of the teeth

materials science lectures: if you know the materials and understand how they have been designed to work, then you will be able to push their limits and achieve results that go beyond what is conventionally deemed 'possible'.

I met Sverker again the following summer at the IADS conference in Gothenburg. We talked about my teachers' response to his ideas. With a mischievous twinkle in his eye, he said "just hold on to those thoughts until after you graduate – you can

make up your own mind about things once you've been in practice for a while. The right patients will come along soon enough".

And sure enough they did. Working in my first private position a couple of years after graduation, I was preparing a lower molar for a crown when the cusps fell off along with the amalgam that I was planning to retain as the core. Containing the urge to panic, I remembered the kind of onlays I had learned about from Sverker and chose to make a large

adhesively retained onlay instead of placing a pinned amalgam core. Assisted by the detailed description of how the restorations should be made and fitted in Sverker's book, the restoration was successful both aesthetically and functionally – and it made me realise that preparations might not always need to look exactly like the pictures in the prosthodontic textbook.

This early success gave me the confidence to try more things, carefully photographing them so that



Figure 5: Posterior preparations on the model and feldspathic porcelain restorations. Note the cement venting holes in the occlusal surface



Figure 6: Patient after completion of lower arch

I could understand what might contribute to their success or failure.

Over the years we saw each other from time to time at conferences and spent a lot of time looking at each others' photos of what we had been doing 'last week', while setting the dental world to rights over several very dry gin martinis. His unrelenting enthusiasm for all things dental encouraged me to keep trying new things. When I began teaching these techniques to others, I discovered for myself the satisfaction of inspiring a new generation of dentists to strive for better, more conservative dentistry through a better understanding of materials and occlusal management.

Some years later, as BACD President, I had the pleasure of inviting Sverker and his collaborators to come to London and discuss their approach to interdisciplinary dental treatment. We had a wonderful and inspirational two days, exploring

how the interface between restorative dentist, orthodontist and technician can be combined to give an aesthetic yet conservative solution to a wide range of problems.

In recognition of his lifelong contribution to minimally invasive aesthetic dentistry it was entirely fitting that he was given the 2012 BACD President's Award. Unfortunately he was unable to collect the Award in person because he had been diagnosed with advanced prostate cancer a few months earlier and was receiving treatment in a hospice near his home.

So, on a bright, cold December Sunday morning, I set off to catch the first flight to Gothenburg to bring his Award to him. Travelling light – this would be a day trip – I brought the usual things that were required for a meeting with Sverker – gin, salami and my laptop – and my copy

of his book from 1995. Not quite knowing what to expect, I was delighted to find that he was understandably tired but in fine spirits despite his illness. During the day we talked about cases old and new, and looked back on the previous twenty years of dentistry we had shared, both as clinicians and educators, reminiscing about how all the dentistry had fitted in with daily family life. Of course, our discussions were assisted by quite a few gin martinis, mixed by the hospice nurse. We talked about his book – the inspiration for my journey in adhesive dentistry – and as I was leaving, he wrote a second inscription, almost twenty years after the first.

Sverker passed away on 13th February 2013. His final birthday party in the hospice on New Year's Eve was crammed with family and friends – a fitting tribute to someone who touched the lives of so many others, both directly and indirectly.

I for one will miss him, but will always remember him with gratitude for the inspiration that he gave me so early in my career, and the continual encouragement that followed. I certainly could not have done what I have done without him.



Figure 7: Long-term follow up – note the excellent condition of the restorations and minimal marginal degradation



Figure 8: Sverker, Zeynep and I after our last meeting in June 2011.

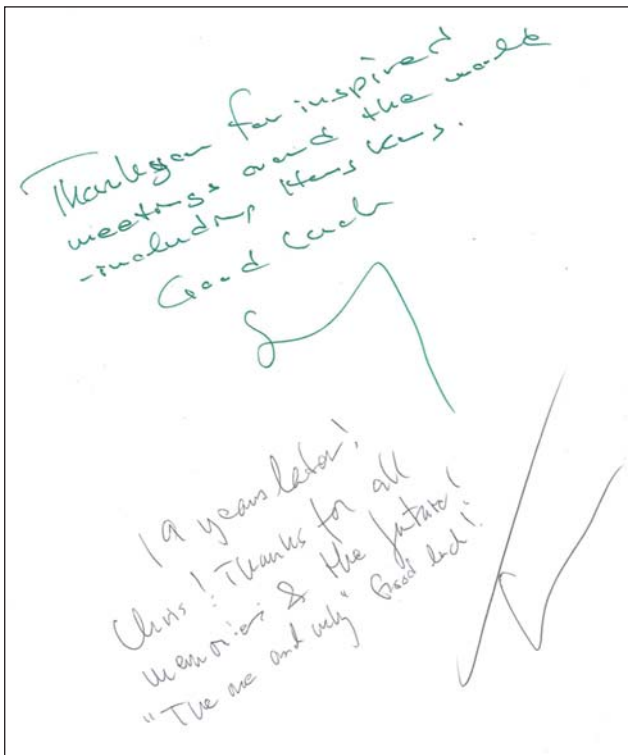


Figure 9: His inscriptions, almost 20 years apart, into my copy of his book. All our meetings were always inspiring!