

Letters may comment on articles published in the Journal and should offer constructive criticism. When appropriate, comment on the letter is sought from the author. Letters to the Editor may also address any aspect of the profession, including education, new modes of practice and concepts of disease and its management. Letters should be brief (no more than two A4 pages).

THE NEED FOR DENTAL DIGITAL PHOTOGRAPHY EDUCATION

I write in regard to Louise Brown's article 'Inadequate record keeping by dental practitioners'.¹ I wholeheartedly agree that newer technologies such as digital intraoral and extraoral photography and audio recording of patient interactions may offer a solution to record keeping problems. Clinicians with decades of experience or a student of dental history can look back at advances in dentistry and affirm that the dental profession has experienced an enormous amount of technological expansion. One is the advent of dental digital photography. Photographs have always been emblematic of memories and with the initiation of digital photography, it has become much easier to bring images together in a more inclusive and qualitative approach. Scientific upgradation in the field of digital photography has revolutionized the perception of photography as an influential means of expression and communication. Moreover, it offers a variety of perception, analysis and execution. Photography and dentistry go hand in hand for the disclosure of concealed and unnoticed defects in teeth and other parts of the cavity.²

The use of cameras in dentistry has added significantly to clinical knowledge and protocols. Dental digital photography is an incredible tool for communicating with our patients, laboratories and our colleagues. The benefit of digital cameras is the instant, digitized accessibility of photos with image quality surpassing that of traditional photography. Similarly, images can be instantly included into a practice's software and stored for future reference.³

To address the increasing health challenges and aesthetic demands of a growing population, undergraduate students in dental schools should be given comprehensive and holistic training in photography as it plays a crucial role in diagnosis and treatment planning, as well as evaluation of various treatment steps. Viewing intraoral and portrait shots in still life form generates diagnostic protocol considerations for colour, soft tissue and tooth form. Accurate composition assists in precise study and assessment, and makes it possible to predict and manage mid and post treatment complications up to the completion of dental care. Post treatment photography is also imperative for a critical appraisal of treatment results

and for educational uses.⁴ Digital records have paramount significance to prevent litigation and to resolve tedious forensic cases.⁵ Looking over these advantages, digital technology has changed the outlook of a dentist toward data collection in academia. A novel innovation in the field of dentistry called photogrammetry through which the geometric properties of objects can be determined from photographic images and has proved its effectiveness in studying the three-dimensional occlusion of dental arches, teeth and their dimensions in dentistry.⁶

The practice of dental digital photography is a type of macrography and with the arrival of digital cameras, photography has become a simple and accessible way of educating and documenting our patients. Digital images can be effortlessly stored and kept for possible use for legal or academic purposes. Hence, digital cameras must be considered as indispensable tools for dentists. It is time academics and policymakers promote photography in dentistry education and incorporate its use in undergraduate and postgraduate studies.

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