

Rubber-dam – a blessing not only in the Covid-19 era

It is one of the big mysteries in adhesive dentistry that the majority of dentists all over the world seem to perceive rubber-dam as burdensome obligation. Although the benefits of rubber-dam application are taught in every dental school, even in the course of thousands of CE lectures held by hundreds of opinion leaders, it has not been possible to significantly change this. From our point of view, it is rather simple - it is so much easier to perform adhesive dentistry properly under rubber-dam application. Period. It is an excellent standard, used in several cutting-edge clinical papers all over the globe.⁵ Of course, it's not how you isolate the working field that's most important, but that you isolate it, and this is just easier when you use rubber-dam. And to be honest, given a certain number of resin composite restorations placed, 50% with and 50% without rubber-dam, which group performs better?

Rubber-dam detractors have always argued that it is too time-consuming and that there is too little evidence in favor of our paradigm that adhesive dentistry using rubberdam is clinically more effective. One could argue that there is evidence that moisture does not affect bonding,¹ but this particular clinical trial was of course conducted under rubber-dam isolation.¹ Although there are enough hints in the pertinent literature,^{2,3} the majority of dental practitioners still weren't convinced of the benefits.

It seems unbelievable that a virus only 150 nanometers in size has been able to change this view completely. Today, rubber-dam is perceived as a blessing and protective shield for the restorative dentist,^{4,6} and if patients liked rubber-dam before, today they love it.

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