

**By Ronald E. Goldstein, DDS**

## Your Ever-Changing Practice . . . And The Media's Influence

The practice of dentistry has seen dramatic changes in the past decade. No longer can a dentist open his or her office without including esthetic dentistry as an integral part of the practice. No longer can a dentist be considered current without a working knowledge and appreciation of the newer technologies and various dental specialties that can influence his or her patient's diagnosis and treatment options. And utilizing these options helps to determine the esthetic success that a dentist can achieve. We don't have to personally be able to be a master of each treatment option -- but we do need to be able to offer the options of esthetic tissue raising, sinus lifts, ridge augmentation, space management, orthognathic surgery, and a host of other areas based on our patients' needs, rather than our own ability to perform one treatment better than another. This means we need to develop a good working relationship and referral source with colleagues we trust to accomplish a successful result in areas we choose not to master.

Your patient's expectations of how you practice is also being influenced by the media. What the media sees as "current" practice, is all too often far from what indeed is being practiced. This is caused by the media's effort to be the first to publish or broadcast the very latest in high technology . . . from the newest and most spectacular laser to a new and many times unproven technology. The

profession has always had to deal with the media's portrayal of the practice of dentistry, and it has usually been unpleasant and inaccurate. Too many people still envision painful thoughts of the "Marathon Man", and comic recollections of "Little Shop of Horrors."

But now we have seen much more emphasis by the news media's health reporters in covering new technology that has virtually changed our patients' perceptions of what going to the dentist is about. Less pain via "The Wand" when anesthesia has to be given – and the promise of no pain when lasers or air abrasion can be used! There is no question today that most patients are concerned about receiving excess radiation, so computerized radiography is becoming much more popular.

All of this adds up to additional pressure on dentists to purchase these new high-tech devices because of patient expectations that the "corner dentist" will be able to take care of their oral needs safely, efficiently, and painlessly . . . via high-tech!

The fact remains that the great majority of dentists do not rush out to purchase "the latest and greatest" technology, just because it appears in a new dental ad or is shown on the 6 o'clock news! Instead it takes considerable time for a logical, scientific evaluation of any new technology before most dentists ever consider purchasing it. Will its purchase or monthly lease payment be justified? The investment should be at least partially weighed against how much production

and income generated will be experienced. Nevertheless, the television reporters would have us believe that “this new revolutionary device will do everything,” and if your dentist doesn’t have it, then consider going somewhere else!

I remember several years ago we were evaluating a rather high-priced prototype piece of new technology for a company, when I flipped on the television and saw another dentist extolling the value of this newest technology that we had not even completed the initial evaluation! So much for “clinical research!” Now the world was being told “this is the way to go,” and yet we had found serious problems that needed correction before it was released! So I can empathize with our patient’s dilemma of what to do when they are told by the latest media story of what “state-of-the-art” dentistry is all about.

One thing you can do is to distribute your own newsletter to your patients and “speak your truth” so that you will continue to have open lines of communication with your patients. I saw an excellent example of this recently in a patient newsletter from Dr. Steven Feit of Boca Raton, Florida. He included a short article about why his patient’s latest insurance claim may have been denied (see sidebar). I think this communicates to patients one reason why their insurance coverage pays such a low percentage of their dental bills.

Despite the media coverage, there is one technology that still has not moved up in the charts of new technology desired by dentists: esthetic imaging. I predict one day the media will help convince patients not to begin an esthetic change unless they have seen a computer-enhanced image of the change being forecast -- and maybe for once, that will be a welcome source of publicity for both patients and dentists. The technology has been around for well over a decade, but it continues to escape usage by the dental profession. Plastic surgery has finally embraced the concept, as well as other surgeons helping patients to visually understand the procedures that were formerly limited to words. This technology not only helps the patient make decisions, but also aids and protects the dentist as well. And legal protection will continue to be an important part of any esthetic treatment. We need protection from failure due to the high costs of redoing a case or extra hours spent in trying to satisfy patients' unspoken esthetic desires.

One of the benefits of esthetic imaging is the capability of a patient, spouse or family member, or even friends, plus the entire dental team mutually agreeing on the esthetic goal for the patient. We have been using this technology for the past decade, and it has saved us from making numerous costly mistakes.

Unfortunately, technology has not kept up with the need to enhance the ease or perfection of imaging. That will change, and no doubt in years to come we and our patients will see holographic imaging that will provide an easier

understanding of predicting the best possible smile through various treatment options that are available with each patient's unique features. And yes -- the microchip in the software will even do what **you** may not want it to do . . . suggest a treatment option you or your team may not feel capable of providing. Then what? That is why a good referral base will be even more important in esthetic dentistry of the future!

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In future columns I plan to feature some of esthetic dentistry's practice management experts that I feel will be of interest to you. Please feel free to voice your comments or suggestions for future columns by writing to me at CERP.

Did you know? The CEO of Traveler's Insurance, Mr. Sanford I. Weill was paid the following in 1997:

|         |    |            |
|---------|----|------------|
| Salary  | \$ | 1,025,000  |
| Bonus   | \$ | 6,168,034  |
| Other   | \$ | 260,269    |
| Stock   | \$ | 3,109,288  |
| Options | \$ | 12,044,127 |
| Misc.   | \$ | 1,404      |
|         |    | <hr/>      |
|         | \$ | 22,608,122 |

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