Dental Tribune International provides readers with dental articles that are both informative and authoritative. As the world’s first regular dental newspaper and in keeping with that ideal, we are now working with Dental Protection, the world’s biggest not-for-profit provider of dental indemnity and risk management, to create an exciting risk management feature that is being launched in this edition of Dental Tribune.

What Is Risk Management?

Most simply it can be defined as the identification and containment of anything harmful in a system or process. This is exactly the sort of strategy that is regularly used in industry, but which is equally valid in healthcare. When it is applied to dentistry, it can help to create more predictable treatment outcomes and also increased patient safety. In this process, the dental team will experience increased levels of satisfaction and far less complaints.

What Is Dental Protection?

This U.K. company operates in 70 countries worldwide to protect the professional reputation of 49,000 dentists, hygienists, and therapists. Dental Protection is not an insurance company, it is a mutual organization owned by the members who subscribe on an annual basis. Dental Protection does not operate for profit; it provides commercial insurance company there are no shareholders in search of a dividend. In return for their subscription, members can ask Dental Protection to assist them whenever their professional integrity is challenged.

In addition to dental malpractice indemnity, Dental Protection also provides general advice 24-hours a day. There is a team of 32 dentists and legal advisors and an international network of lawyers available to defend members against legal challenges arising from the practice of dentistry; including the payment of compensation to patients who have suffered as a result of negligent dental treatment provided by a member. They try to prevent problems from arising by providing educational material and risk management training. If things do go wrong, then they protect the professional reputation and integrity of dentists and other members of the dental team by supporting them with the financial cost of any complaints and claims brought against them. This is made possible by a fund of over 1 billion U.S. dollars that is held in trust for membership.

Licorice Root Compounds

Dental Tribune International

By Daniel Zimmermann

Licorice has been an important herb in Chinese medicine for centuries and is now being rediscovered by Western medicine as a rich source of potentially beneficial compounds. In addition to being used as flavoring and sweetening agents in candy, tobbacco and beverages, compounds derived from licorice root have been shown to help fight inflammation, viruses, ulcers and even cancer.

More studies are needed before it is proven that the compounds effectively fight cavities in humans, says Dong-Yi Lu, Ph.D., a chemist at UCLA’s School of Medicine, and Wenyuan Shi, Ph.D., a microbiologist at UCLA’s School of Dentistry. If further studies show promise, the licorice compounds could eventually be used as cavity-fighting components in mouthwash or toothpaste, they say.

Licorice: The Source of Many Compounds

Licorice is derived from the roots of Glycyrrhiza glabra, a plant found throughout the Near East. The root is harvested and dried in the sun. It is then ground into a powder and mixed with water to make a decoction. The decoction is then filtered and concentrated. The concentrated extract is then stored in airtight containers until it is used.

Licorice is a rich source of compounds that have been shown to have a variety of health benefits.

Glycyrrhizin

Glycyrrhizin is the most abundant compound in licorice. It is a glycoside that is found in the roots of licorice. It is a potent inhibitor of the enzyme that converts angiotensin I to angiotensin II, which is a powerful vasoconstrictor. This makes it a useful compound in the treatment of high blood pressure. It is also a strong anti-inflammatory agent.

Diterpenoids

Diterpenoids are a group of compounds that are found in licorice. They are also found in a variety of other plants. They are known for their anti-inflammatory and analgesic properties.

Priscoline

Priscoline is a compound that is found in licorice. It is a potent inhibitor of the enzyme that converts angiotensin I to angiotensin II, which is a powerful vasoconstrictor. This makes it a useful compound in the treatment of high blood pressure. It is also a strong anti-inflammatory agent.

Isoliquiritigenin

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Glycyrrhetinic Acid

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Modular Training

Dental Protection recently produced a series of clinical modules, each one devoted to a different clinical topic and designed to help today’s dentists learn from the mistakes of the past. By identifying problems ahead of time and adopting a modified way of behaviour to reduce or eliminate the problem, every clinician can avoid putting one’s livelihood at risk.

The three stages of risk management

Understanding risk

If you wish to manage risk in a clinical setting, you need to involve the whole dental team in the process of identifying where the risks might be. To ensure the dental team feels comfortable enough to analyze its existing way of working, it is important to focus on the systems and processes that are used rather than the people who engage with them. Staff training and motivation is best achieved when any suggestion of personal criticism is excluded.

Controlling risk

Where risks are identified, find a modified way of working to reduce the risk.

Risk containment

Inevitably mistakes will sometimes occur, but if the situation is correctly managed it can prevent a complaint from getting totally out of hand.

To help you to apply this way of working in your own clinical environment, we will be publishing a new series of articles that describe the best risk management strategies to adopt in twelve common clinical situations:

1. Periodontal disease
2. Endodontics
3. Trauma
4. Third molars
5. Crown and bridge
6. Orthodontics
7. Full denture
8. Adhesive dentistry
9. Complaint handling
10. Implants
11. Fixed prosthodontics
12. Treating complex cases

The articles are extremely easy to read and are designed to be shared with other members of the dental team. They have already proved extremely popular with dentists and hygienists who are members of Dental Protection. Although you can only obtain indemnity from the company if you work in a country where English law is the basis of the legal system, you can still benefit from their excellent risk management program.

Full details of all the risk management material published by Dental Protection can be found on their Web site, www.dental-protection.org.

Cone beam computed tomography (CBCT) increasingly has become the newest technology for orthodontists to use in diagnosing complicated oral health problems.

Reporting on four new CBCT systems in the December issue of the Journal of Orthodontics are J. Martin Palomo and Mark Hans from the Department of Orthodontics at Case Western Reserve University and Dr. B. Holly Broadbent (Case Director of the Bolton Study).

“Risk management is a modified way of working to reduce the risk. Risk containment is the philosophy of hand. Correctly managed it can prevent a complaint from getting totally out of hand. To help you to apply this way of working in your own clinical environment, we will be publishing a new series of articles that describe the best risk management strategies to adopt in twelve common clinical situations:”

What’s in the market for 3-D dental imaging?

Dr. Marius Steigmann, Implantology, Germany
Prof. Dr. Rudolph Slavicek, Function, Austria
Prof. Dr. Georg Meyer, Restorative, Germany
Dr. Ziv Mazor, Implantology, Israel
Dr. Edward Lynch, Restorative, Ireland
Prof. Dr. I. Krejci, Conservative Dentistry, Switzerland
Dr. Howard Glazer, Cariology, U.S.A.
Dr. Karl Behr, Endodontics, Germany

3-D imaging captures pictures of hard tissues and most soft tissues components, except the color texture of the skin’s surfaces, enabling orthodontists to detect higher incidences of oral abnormalities such as oral cysts and buried teeth.

The improved images allow for better airway analyses and management of conditions related to sleep apnea and enlarged adenoids.

Images from the CBCT technology have additional applications in other specialties of dentistry such as placing new implants that are increasingly used in place of dentures, remedial efforts for TMJ and for reconstruction of cleft palates and lips.

The researchers report, “The future in orthodontic imaging seems exciting as we discover new frontiers, and as the paradigm in dentistry shifts from landmarks, lines, distances and angles to surfaces, areas and volumes.”

They also added that “Orthodontists are beginning to appreciate the advantages that the third dimension gives to clinical diagnosis, treatment planning and patient education.”

About Case Western Reserve University

Case Western Reserve University is a leading research institution. Founded in 1826 and shaped by the unique confluence of the Institute of Technology and Western Reserve University, Case is distinguished by its strengths in education, research, service, and experimental learning. Located in Cleveland, Case offers nationally recognized programs in the Arts and Sciences, Dental Medicine, Engineering, Law, Management, Medicine, Nursing, and Social Work.

http://www.case.edu

Dental Protection

The SSO spends around 250 million Baht (5 million Euro) a year to fund members. The Dental Council of Thailand recently complained about the workloads of dentists providing free dental care services, following the SSO’s decision to provide unlimited coverage for members of Social Security. The services, which started in early January, cover tooth extraction, fillings, cleaning and dentures. The Council proposed that the SSO recruit private dental clinics to join the scheme in order to solve the long waiting lists at hospitals. To reduce the workload, one dentist at a time should provide services to a maximum of 15 patients per day, Council officials said.

Dental Protection

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“The long awaited incorporation of the third dimension to our radiographic records is now a reality,” the researchers said, adding “there is still room for improvements, however the CBCT technology appears to be here to stay.”

What started as a prototype for CT imaging in 1967 has evolved into a sixth generation, with better and more focused images and lower radiation exposure for patients. The first generation scanners gave slice-by-slice images. The newest generation of the CBCT scanners sweeps the head and face and gives multiple stacks of images to give a full head view of the bone and tissue structures in three dimensions.

Current available CBCT scanners are: The NewTom 9G from Quantitative Radiology of Verona, Italy; the i-CAT from Imaging Sciences International, from the United States; CB Mercuray from Hitachi Medical Corporation from Japan; and the 3D Accuitomo from J.Morita Mfg. Corporation, also from Japan.

What are the benefits of this new technology and their applications to orthodontics? The researchers report:

• The technology generates a wide range of images of the head, teeth and airways in under one minute, reducing radiation exposure to 20% of conventional CT imaging systems.

• The images taken with CBCT technologies are so swift that they can be used effectively in isolation. The philosophy should be to use techniques that reduce exposure to radiation.

• The new 3-D images capture pictures of hard tissues and most soft tissues components, except the color texture of the skin’s surfaces, enabling orthodontists to detect higher incidences of oral abnormalities such as oral cysts and buried teeth.

• The improved images allow for better airway analyses and management of conditions related to sleep apnea and enlarged adenoids.

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