Where did all the periodontists go?

By Louis Malecnamcher, DDS, MAGD

Through my weekly travels to different cities across America, I speak to many dental specialists and their groups on the hottest topics in dentistry, practice management and total facial esthetics. There are definite trends that are changing in all specialties across the board, whether it is short-term orthodontics versus long-term orthodontics, adhesive resin endodontics versus traditional gutta-percha endodontics or the conversation as to whether or not general dentists should be providing some of these specialty services.

I would have to say that the biggest change of any single dental specialty that I have seen has been in the periodontal field. There has been a real mind-set change that deeply affects the profession. I am not commenting here on whether this change is good or bad — I will leave that up to the reader to decide.

It is certainly something to consider as general dentists who refer patients to periodontists on what your treatment will be for the long run.

I have always believed that general dentists are the quarterbacks of any patient treatment case and we certainly rely on the skills and input of dental specialists, but the ultimate responsibility should be on the general dentist.

Here is what I am being told by many periodontists whom I have spoken to over the last couple of years: they would rather remove teeth and place implants than actually treat patients through traditional periodontal surgery and try having them maintain their dentition.

The reason for this is really quite simple and every dentist knows this inherently. Patients refuse to take good care of their teeth even after they have gone through the time, cost, commitment and pain of traditional periodontal surgery. This is certainly not earth-shattering news to any of you.

For years in our own practice, we have had patients who did not want periodontal surgery and would rather maintain the state of their oral health with three-to four-month recall prophylaxis visits. We would often predict that their teeth would fall out within two to three years.

Surprisingly, many of these patients have done reasonably well 20 years later, with the occasional loss of a tooth here or there. This thought was blasphemy to periodontists for years and years, but certainly it seems that conservative non-surgical periodontal recall visits and treatment has helped many patients maintain their dentition in a reasonable state so that they can function and smile with their original teeth for years.

As general dentists we have known that even with the best periodontal surgery treatment, patients would often fall into their old habits and eventually their dentition would fail anyway. Not all patients, but many of them.

We have learned that we have to treat people as people and sometimes you just cannot change them no matter what you do.

It seems to me that periodontists have now caught up with this concept and that is where this mind-set has really changed.
cess rate of traditional periodontal surgery. This is primarily because we have to depend upon the patients to keep up their regimen for the long-term success of their natural dentition.

New procedures — such as the wavelength optimized periodontal therapy (WPT) procedure with the Powerlase AT Laser by Lares Research, and LANAP procedures done with the Periolase laser by Millenium Dental — have brought periodontics today. Patients like the concept of implants, which are still vastly underused in North America.

Many patients would rather not have to take care of their teeth and have these unsightly, mobile teeth extracted and replaced with implants, which would restore their function and their esthetics. With a 94 percent implant success rate, it is hard to argue when that success rate is so high compared to the poor long-term success rate of traditional periodontal surgery.

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