Short-term gains...long-term problems?
The emergence of STO and its future implications in general practice

By Aws Alani, UK

The provision of orthodontics can be a life-changing experience for young patients whose “crooked” teeth can affect their confidence and self-esteem. Indeed, where mature patients present with a history of malalignment, equally beneficial and fulfilling results can be achieved. In government-funded systems, patients with congenital abnormalities receive treatment that is essential to their ongoing oral health. Restorative dentists work closely with orthodontists, who can appreciate how small details can aid in achieving positive restorative outcomes.

As a young dentist, I corrected a tooth in crossbite with a simple spring appliance. It was enjoyable and brought a different type of delayed gradual satisfaction to the more cerebellar but generous molar endodontics or the more artistic and instant composite build-up. I was not a specialist, but I managed to do some orthodontics. In contrast to my experience, general dental practitioners are more routinely providing tooth movement with the emergence of short-term orthodontics (STO). This has resulted in some controversy as to the methods of achieving “straighter” teeth. Indeed, some may consider using the provision of orthodontics in the south-east of England. With this skewed distribution of specialists and assumed need for access, it might well represent for general dental practitioners to contribute to meeting the need for orthodontics.

Indeed, the long-cited managed clinical networks have yet to be fully realised, although all planning and documentation related to managed clinical networks identify general dental practitioners as integral to the function of the network. The number of orthodontic therapists has gradually increased over the last ten years or so since inception of the first courses in Wales and Leeds. Therapists are allegedly more cost-effective to train and employ in a large orthodontic practice; however, unlike their hygiene or therapy colleagues, they cannot practise without a specialist’s treatment plan and supervision.

Patients who qualify for orthodontic treatment under the UK government-funded system need to be assessed according to the index of orthodontic need. There will be an obvious shortfall of adults or adolescent patients with minor malocclusions who do not meet the criteria who would like their teeth straightened. This cohort may have to seek treatment privately from orthodontic specialists or general dental practitioners. As such, these minor or straightforward cases may be managed in a number of different settings utilising various techniques with the advent of STO. This may have resulted in some territorial paranoia between the two camps of traditional orthodontics versus STO systems. Conversely, it may be that differing scientific, technical and ethical ethos on managing the same problem is the source of the debate.

Quick and easy?

Commercialisation has modified the provision of orthodontics in the UK. Indeed, there are now orthodontic brands with courses attached and a
Advertising cosmetic treatments the fair dinkum way

The Australian health ministry recently examined the provision of cosmetic procedures and in particular the modes of promoting the treatments. The working group found that advertising and promotion can be more often than not focused on the benefits to the consumer, downplaying or not always mentioning risks. The group went on to identify advertising practices that were not driven by medical need and where there was significant opportunity for financial gain by those promoting them. They identified the need to regulate promotion and advertising ethically, factually, and clearly in order to prevent presentations that were likely to mislead or mislead consumers. The Australian health ministry is likely to result in increased litigation. The movement of teeth into the correct position may be possible in the short term, but in the long term complications may arise owing to a variety of soft- and hard-tissue factors that cannot accommodate this new and supposedly “right” position. Indeed, orthodontists require the appreciation of detail where symmetry and alignment are “king”, but long-term stability is the likely “empress”. Relapse of position is a common complaint and where patients have paid handsomely for a result they may have been happy with at the time of the treatment, over time tiny tooth shuffles can result in disproportionate and vehement dissatisfaction. Where teeth are moved indiscriminately, recession in the labial segment is a complication difficult to explain and remedy in the high lip line of a conscientious and ambitious corporate female patient. Indeed, more haste, less speed may result in a case being etched longer in the memory of the patient and the clinician for the wrong reasons.

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Clear steps to business building

A cornerstone of a successful business is the repeat customer who values the dentist and his or her service and returns with no qualms or misgivings about what the dentist feels should be provided. A successful business relies on patients returning in the long term owing to their positive experiences. Focusing on short-term gains without due consideration of quality or reliability of the treatment provided has potential repercussions for patients, the business of dentistry and perception of the profession.

What may cause fear and worry is the provision of treatment set against a backdrop of a focus on increasing revenue and patient consent. Patients may ask me all the questions we are providing the treatment. What may cause fear and worry is the possibility that a one- or two-day course is likely to result in increased litigation. The movement of teeth into the correct position may be possible in the short term, but in the long term complications may arise owing to a variety of soft- and hard-tissue factors that cannot accommodate this new and supposedly “right” position. Indeed, orthodontists require the appreciation of detail where symmetry and alignment are “king”, but long-term stability is the likely “empress”. Relapse of position is a common complaint and where patients have paid handsomely for a result they may have been happy with at the time of the treatment, over time tiny tooth shuffles can result in disproportionate and vehement dissatisfaction. Where teeth are moved indiscriminately, recession in the labial segment is a complication difficult to explain and remedy in the high lip line of a conscientious and ambitious corporate female patient. Indeed, more haste, less speed may result in a case being etched longer in the memory of the patient and the clinician for the wrong reasons.

Relapse of confidence

In a recent publication from an indemnity provider, orthodontics was identified as an emerging area for claims against their clients. This is likely to be the tip of the iceberg, whose size will probably continually grow as more and more orthodontists are provided with the requisite skills of which may only become apparent gradually in the future.

Becoming an expert in many a field learns by way of osmosis from those we are providing the treatment. In the same vein as DIY whitening and sports guards, one can now have one’s teeth straightened via online companies using products delivered by Her Majesty’s Royal Mail and so cut out the middleman (i.e. the dentist). To my knowledge, STO has yet to make it on to the price list of Samantha’s, a beauty salon in Peckham. It may say vulture) capitalists. In the same vein as DIY whitening and sports guards, one can now have one’s teeth straightened via online companies using products delivered by Her Majesty’s Royal Mail and so cut out the middleman (i.e. the dentist). To my knowledge, STO has yet to make it on to the price list of Samantha’s, a beauty salon in Peckham. It may say vulture) capitalists. In the same vein as DIY whitening and sports guards, one can now have one’s teeth straightened via online companies using products delivered by Her Majesty’s Royal Mail and so cut out the middleman (i.e. the dentist). To my knowledge, STO has yet to make it on to the price list of Samantha’s, a beauty salon in Peckham. It may say vulture) capitalists. In the same vein as DIY whitening and sports guards, one can now have one’s teeth straightened via online companies using products delivered by Her Majesty’s Royal Mail and so cut out the middleman (i.e. the dentist). To my knowledge, STO has yet to make it on to the price list of Samantha’s, a beauty salon in Peckham. It may say vulture) capitalists.