Euro Dentistry & Dental Science 2019: How to make digital dentistry pay: Tussavir Tambra - Afterburner Dental Technologies

Tussavir Tambra

Afterburner Dental Technologies, UK

The dental community is currently being swamped with clinical, research and marketing materials selling the dream of digital dentistry. Dental equipment suppliers are bombarding dentists with a multitude of claims and counter claims about the digital dentistry pathway. The push is to sell the hardware like intraoral scanners and milling machines into dental clinics. Once the sale is made there is little assistance on how to make the technology benefit the clinic financially. Dentistry is a business and as such, there has to be a return on investment combined with a clear, demonstrable benefit to the patient. Both sides of the equation are equally important. This failure to demonstrate the true benefit of the digital pathway and how the dentist can make significant savings on restorative costs has resulted in a poor uptake of new technologies. The rapid change in technology such as the shift from light projection to video imaging in intraoral scanners has left most of the early adopters with obsolete technology and created a climate of mistrust between dentists and the equipment manufacturers.

Dentists understand all the clinical benefits of a digital workflow from reducing patient discomfort, improved restoration accuracy, surgical accuracy in dental implantology and simplified orthodontic treatment, however, this is not a clinical lecture. This lecture will focus on the financial implications of becoming a Digital Dentist including understanding clinical pathways, better selection of restorative materials, providing "same day dentistry" solutions and improved time management to avoid working more hours and how this approach results in improved financial returns. The age-old adages "work smarter not harder" and "time is money" are why the digital dentistry pathway is the way forwards for the solo practitioner and the Corporate / DSO world. Dentists' reluctance to adopt digital innovations in the past had both economic and structural reasons: Other parts of the healthcare system basic equipment and consumables, as well as efforts to hire mid-level this compilation is a representative sampling of this literature in published abstract form with links to the publishing journal. With the generous support of the respective editors, these abstracts cover an intentionally broad range of topics that include investigations employees such as hygienists and nurses. Historically, the price of advanced digital solutions such as scanning and milling devices has been too high as it sets a negative imprint of the soft and hard tissues in the mouth

and utilization levels too uncertain to pay off for most individual practice owners, thereby giving them limited incentives to invest have been experiencing consolidation for quite some time, yet the dental care market has traditionally been and still is highly fragmented. In Europe, private chains make up 15% of the total number of clinics in the UK, 8-10% in the Nordics and Spain, 8% in the Netherlands, while in Germany and France this share drops to below 1% of the total dental care market. Digital innovations, even medium-sized labs and dental clinics are able to achieve lower costs and adequate quality by producing in-house on affordable entrylevel hardware paired with high-quality software. Two gleaming new spaces in the lower level of the school's Thomas Evans Building opened earlier this year and mark an evolution toward embracing digital dentistry and workflow across the school.

With state-of-the-art equipment, the new Digital Design and Milling Center and the Center for Virtual Treatment Planning, together with new staff and curriculum changes, open up possibilities for training students, conducting Similar to the size of a dental mirror IOCs have a tiny camera that is able to detect more on the 3D surface of a tooth than a 2D x-ray image is able to show. Examples include specific locations and sizes of cavities, cracked teeth, excessive erosion, abrasion and many more research and continuing education, and delivering seamless and cutting-edge patient care. In addition, the current COVID-19 pandemic has tremendously affected the supply and transport of dental products into and within the EU, and we see this as a further accelerator for the adoption of in-house CAD/CAM systems and as an inflection point for reversing outsourcing decisions. Conventional previous dental impressions are made by placing an impression material loaded on an impression tray over the dental arches. Digital intra-oral impressions made using intra-oral cameras are able to recreate the positive impression of a patient's dentition and other structures into a digital format on a computer almost instantly of intraoral and extra oral scanning accuracy, CBCT technology, the CAD/CAM milling of restorations, guided implant surgery, complete denture methodologies, removable partial denture techniques, and applications to maxillofacial prosthetics.