

iChiropro premiers

Marco Gallani on Bien-Air's latest application and why it will be indispensable soon in Asian dental practices and clinics.



Zense Healthcare

An exclusive interview with the founders of Singapore's newest practice management consulting provider.



Dental products in focus

IDEM will be an excellent opportunity to see state of the art technologies and achievements in the field of dental medicine.

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Yong praises IDEM, admits challenges

trade exhibition and world-class scientific conference this year. He

said that the meeting provides a

Dental profession in Singapore to face increasing demand for complex dental treatment, health minister says



■ Singapore's new Minister of Health Gan Kim Yong has called on dentists in Singapore to improve the transparency of dental treatment for the general public. Speaking at the official opening

and international dental associations, he encouraged the profession to develop means to provide patients with detailed and unbiased information about treatment options and the risk of various dental procedures.

Yong pointed out that the government is aiming to ensure that all Singaporeans, elderly people in particular, will have access to good dental health care through programmes like the Community Health Assist Scheme, which was introduced earlier this year by the ministry to provide adult older than 40 with better access to primary health-care services, including dental care.

good opportunity for dentists to keep up with the latest technological advances that shape and improve the delivery and practice of dentistry. Being held for the sixth time since 2000, IDEM is expected to give dental professionals from Sin-

gapore and across the Asia Pacific region an overview of the latest advances in dental materials and equipment. Over 410 companies and dealers operating in the citystate and abroad are currently showcasing their latest products and technologies in the exhibition hall on level 4.

"The strong participation from the industry has enabled IDEM Singapore to continue to present an extensive showcase of the latest innovations in clinical dentistry, dental technology and patient care that cut across every segment of the dental market," Koelnmesse's Asia Pacific Vice-President, Michael Dreyer, said.

Besides an extensive trade show, visitors will have the chance to learn about new methods in areas like implant dentistry, periodontology and endodontics during today's conference programme. In addition, Kevin Lewis, Dental Director of Dental Protection, and dento-legal adviser Dr Jane Merivale will discuss the legal issues that may arise from orthodontic treatment.

Live education sessions presented by the Dental Tribune Study Club will also continue, with presentations on the evaluation of clinical and diagnostic aspects in volume tomography, the management of dentine hypersensitivity and the use of precision dental instruments. The symposium is free of charge and being held daily from 11:00 to 15:00 at booth E29 in the exhibition hall.

For more news from this year's IDEM Singapore please scan the QR code at the bottom left or visit: www.dental-tribune.com/idem2012



Gan Kim Yong speaking at the Opening Ceremony. (DTI/Photo Daniel Zimmermann, DTI)

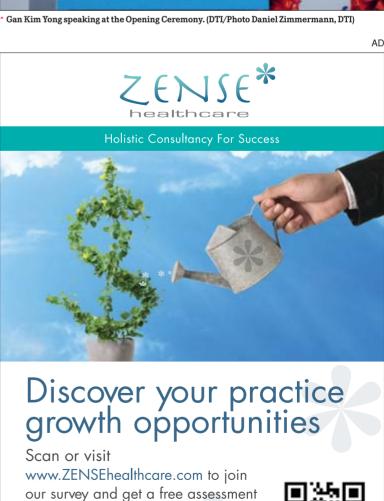
ceremony of this year's International Dental Exhibition & Meeting (IDEM) at the Suntec Singapore International Convention & Exhibition Centre, which was attended by high-ranking officials from local



The scheme subsidises treatment in private dental practices, including crowns, bridges, dentures and root-canal treatment.

"To meet the demands of a rapidly ageing population in Singapore, care and the provision of both medical and dental treatment will become more complex and there will be a greater need for our dental professionals to update and upgrade themselves regarding the management of our elderly," Yong commented.

Referring to IDEM, he congratu $lated\,the\,organiser\,Koelnmesse\,and$ the Singapore Dental Association on putting together an impressive



report. Complementary consultation

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02 today news IDEM Singapore 2012—21 April

^ Marco Gallina

An indispensable implantology system

Bien-Air's Vice-President of Product Management Marco Gallina on the company's new iChiropro application

■ The iChiropro from Bien-Air is a new implantology system equipped with an iPad user interface and high-performance instruments. According to the Swiss manufacturer, this device belongs to a new generation of medical instruments, which could significantly

simplify the workload in dental practices and clinics worldwide. Yesterday at IDEM, today international had the opportunity to speak with Marco Gallina, vice-president of Bien-Air Dental's product management, about this new device.

today international: What was your intention with the development of the iChiropro?

Marco Gallina: First of all, we wanted practitioners to interact with their physio-dispenser in a completely new and user-friendly way. After developing several sys-

tems designed for fitting implants, we wanted to push the boundaries of innovation with a revolutionary concept.

With the iChiropro, we are clearly distinguishing ourselves from the competition with a system that offers incomparable performance levels

Many companies already offer iPad-based solutions. What is the main innovation of the system?

In terms of its functionality, the application allows multiple users to customise and store their own sequences. The iChiropro is also the only device that allows users to save, export and print all operation parameters whilst documenting patient data and the implants used. It includes a database featuring the main implant brands on the market, as well as their predefined settings, making it a quick and high-performance tool.



iChiropro is currently on display at booth P02.

The iChiropro has been approved as a medical device. The iPad has a user interface function, while the motor, its various peripherals and safety devices are controlled by the system's electronics. It is also possible to apply a sterile film to the touchscreen display.

How has the device been received by users so far?

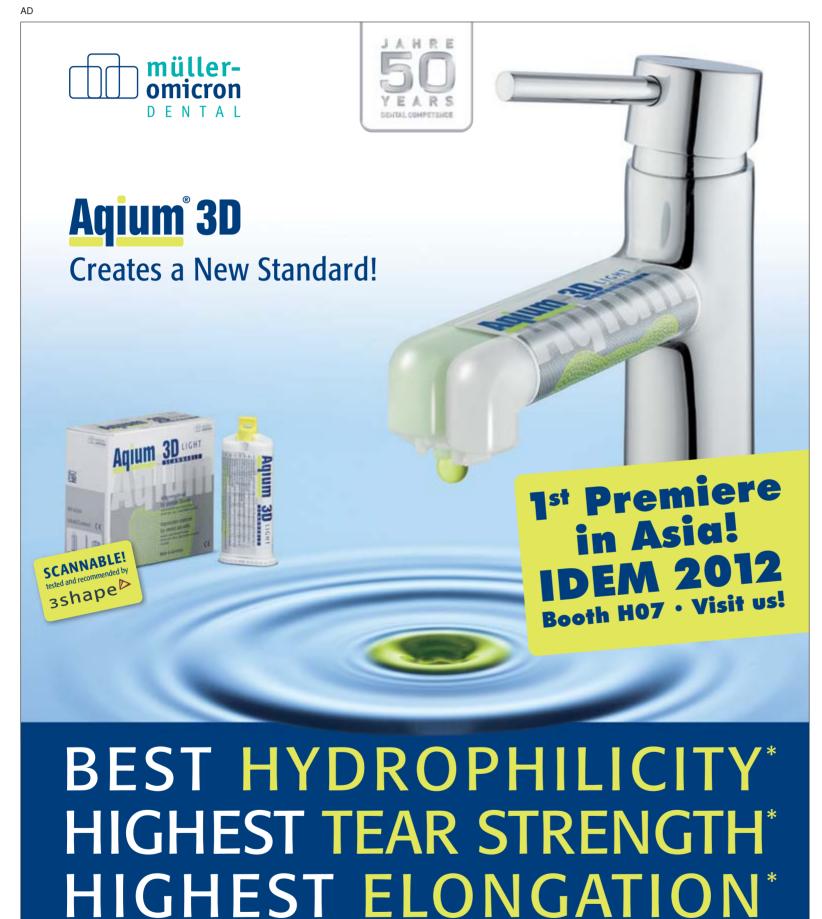
Practitioners all over the world have collectively expressed their interest and were very enthusiastic when the prototypes of this new implantology system were presented. Many of them described it as "indispensable".

Users operate and adjust the settings on the iChiropro using the iPad's touch-screen display and our attractive and ergonomically designed bespoke application. If necessary, the operation parameters can be preprogrammed outside the practice and used several times, saving a great deal of time. The option of saving operation data enables practitioners to keep a full history of each operation performed and can be vital in case of a legal dispute.

What can dental practitioners expect from the system in the future?

Bien-Air Dental will be updating the iChiropro application regularly, so it will be packed full of new innovative and practical functions.

Thank you for this interview.



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04 today news IDEM Singapore 2012—21 April

FDI moves 2013 congress to Turkey



^ FDI president Orlando Monteiro da Silva adressing IDEM delegat

■ The FDI World Dental Federation has announced that its 101st World Dental Congress, which was originally to take place in Seoul, will instead be organised in collaboration with the Turkish Dental Association in Istanbul. Owing to the difficult economic situation, the congress in Korea has had to be cancelled, the organisation said.

After a thorough evaluation of the local situation, the FDI notified its members and the public that a successful meeting could not be guaranteed in Seoul in 2013 owing to the present economic conditions. They said that the FDI Council therefore had to withdraw from the contract signed in 2010 with the Korean Dental Association. In addition, the federation announced that the Turkish Dental Association had

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agreed to host the congress in Istanbul instead. The dates of the congress will remain unchanged. The event will take place from 29 August to 1 September 2013. The FDI disclosed that it would welcome the option of organising the congress in Seoul in 2014 or 2015, since a congress had already been held there in 1997 successfully.

According to the 2010 Turkish Healthcare Industry Report,

Turkey has a growing medical devices market and was ranked among the top 30 markets in the world. The report showed that dental products account for the majority of the country's medical exports (14.2 per cent of the total export size in 2008). However, the production of medical equipment is considered to be rather small, since an estimated 85 per cent is supplied from abroad.

According to the Turkish Ministry of Health's Health Statistics Yearbook 2009, there are about 20,500 practising dentists in Turkey, which amounts to approximately five per cent of the health personnel employed in the country.

More information about the FDI and its upcoming congresses are available at booth C13.

US dental exports prosper

Greater participation at IDEM to support export initiative

■ Exports of medical and dental equipment from the US to Singapore and the ASEAN region continue to increase. Imports of dental equipment from the country amounted to US\$105 million in 2011, according to latest figures of International Enterprise Singapore.

Realising the potential that the city-state has to offer, more US companies than ever are participating at the US pavilion this year, making them one of the largest groups of manufacturers from one single country at IDEM Singapore. The US is currently one of the three leading suppliers of dental equipment to Singapore, alongside Japan and Germany. According to industry estimates, more than 30 per cent of dental imports to Singapore come from the US.

Commercial Counsellor at the US Embassy in Singapore Patrick



^ More than 25 companies are currently exhibiting at the US pavilion.

Santillo said that the increase in US companies is in line with the National Export Initiative introduced by President Barack Obama two years ago in order to double US exports worldwide over the next

five years. He said that overall exports to Singapore have increased by an average of 15 per cent annually since the programme was launched in 2009.

"There are significant opportunities and we see a really high demand across the region for these kinds of products and technologies," Santillo commented. "As the dental market here and throughout the South-East Asia region is growing, I consider our industry very well positioned."

According to Santillo, the service will continue its efforts to raise US exports to the region in the future.



* US exhibitor breakfast meeting on Friday morning.

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Treatment for dentine hypersensitivity

Prof. Seow Liang Lin to present at DTSC Symposium

■ Dentine hypersensitivity is a highly prevalent dental condition and estimated to affect up to 57 per cent of people worldwide. Triggers like cold air, hot drinks or sweet food can often cause acute sensitivity pain. Likewise, the touch of a dental instrument can make routine dental visits very uncomfortable, which may result in sensitivity sufferers avoiding regular checks-ups—neglect that can exacerbate oral health problems.

At a live session presented by the Dental Tribune Study Club Symposium at booth E29 today, Prof. Seow Liang Lin from the International Medical University's School of Dentistry in Malaysia will discuss Colgate Sensitive Pro-Relief as an innovative treatment for dentine hypersensitivity. This desensitising paste contains 8 per cent arginine, an amino acid found naturally in saliva, as well as bicarbonate (a pH buffer) and calcium carbonate. The latest research suggests that the positively charged arginine binds to the negatively



Prof. Seow Liang Lin

charged dentine surface and attracts a calcium-rich layer into the dentinal tubules to plug and seal them effectively, an occlusion that remains intact even after exposure to acids, helping to block pain-producing stimuli.

Colgate unveiled its first oral health-care product featuring Pro-

Argin Technology in the form of an in-office paste in 2009. According to the manufacturer, it can be used before or after dental procedures, such as prophylaxis and scaling.

When applied prior to a professional dental cleaning, Sensitive Pro-Relief will also provide a significant reduction in dentine hypersensitivity, measured immediately after the dental cleaning, as compared with a control prophylaxis paste, the company said.

According to Lin, both Colgate Sensitive Pro-Relief in-office desensitising paste and at-home desensitising toothpaste are effective in providing instant and lasting relief for dentine hypersensitivity. Colgate Sensitive Pro-Relief can be applied directly to a sensitive tooth using a fingertip and gently massaged for one minute. Regular brushing with Colgate Sensitive Pro-Relief toothpaste is claimed to create a lasting protective barrier that acts like a seal against sensitivity.

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"Sustainable solutions for their practice and personal growth"

An interview with Dr Wang Yi and Virginia Chan, ZENSE Healthcare



Virginia Chan and Dr Wang Yi

■ The recently established Singapore company ZENSE Healthcare aims to bring the best practice management consulting to dental practitioners in Asia. today international spoke with founders Dr Wang Yi and Virginia Chan about their business principles and what makes the ZENSE approach to management unique.

today international: What is the idea behind ZENSE Health-

Dr Wang Yi: ZENSE is a brand new practice management consultancy for health care service providers in Asia, helping them take their practice from good to great-with improvements in patient satisfaction, revenue and



profitability. ZENSE Healthcare will take care of the business side of the health care practice, while dentists concentrate on what they love to do, taking care of the clinical aspects of the prac-

tice in order to provide the best patient care.

Virginia Chan: Having worked in the dental industry for over 18 years, heading the marketing and sales development function in leading dental companies like DENTSPLY and Straumann, I had the privilege of meeting with dental professionals in over 40 countries, learning about different





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practices and their needs. Many dentists are very talented and simply love the clinical work; however, they face unfamiliar challenges when it comes to setting up and expanding their practice. This is especially true when it comes to managing areas such as marketing, finance and human resources. These are areas in which ZENSE Healthcare can be a holistic partner for their success.

How is ZENSE Healthcare different from other business consulting or marketing agencies?

Dr Wang Yi/Virginia Chan: We focus on understanding our clients and their definition of success, as different people may have very different goals. At ZENSE, our mission is to provide medical practitioners with sustainable solutions for their practice and personal growth by integrating an Eastern philosophy with Western management know-how. We partner with them through a people-orientated approach to help them achieve a balanced and fulfilling life.

What are the main principles of the ZENSE philosophy?

Dr Wang Yi/Virginia Chan: At ZENSE Healthcare, we have three fundamental beliefs, which are raising awareness, embracing holistic simplicity and exerting a single-minded focus. We believe that awakening—the realisation of the nature of reality—is the first necessary step to any sustainable transformation. By analysing the economics of their business and benchmarking it against best industry practice, ZENSE helps medical practitioners uncover the reality confronting their business.

We also believe that the most comprehensive solutions can also be the simplest in design. By using holistic but simple frameworks and systematic processes, ZENSE gets to the core business issues and gives medical practitioners powerful recommendations that will transform their practice.

Clarity of mind and quiet but relentless determination can move any mountain. ZENSE will guide medical practitioners through the execution of its recommendations, and ensure focused delivery throughout the business and its people.

How can dental practitioners benefit from your approach?

Dr Wang Yi/Virginia Chan: The ZENSE approach will benefit dental practitioners in two ways. Business-wise, we can help practices increase their revenue and become more profitable by focusing on branding and integrated patient management to increase the number of incoming patients, patient conversion and referrals.

We also look into systems, processes and staffing to optimise the efficiency, effectiveness and profitability of every practice. If needed, we can provide customised coaching services to dental practitioners to help them reach a higher level of personal effectiveness and achieve a more balanced life. This can cover areas

"...different people may have very different goals."

such as time efficiency, staff management or presentation skills for instance.

In summary, dental practitioners can benefit from our approach in terms of both business and mind.

Is this new concept applicable to every dental practice in Asia?

Dr Wang Yi/Virginia Chan: We believe this concept is applicable to every dental practice. If a practice is struggling, in a door-die situation, our solutions will help turn it around. If a practice is doing well, but you know there is still some untapped potential, we can help take it from GOOD to GREAT.

You will be holding a survey during IDEM in Singapore.

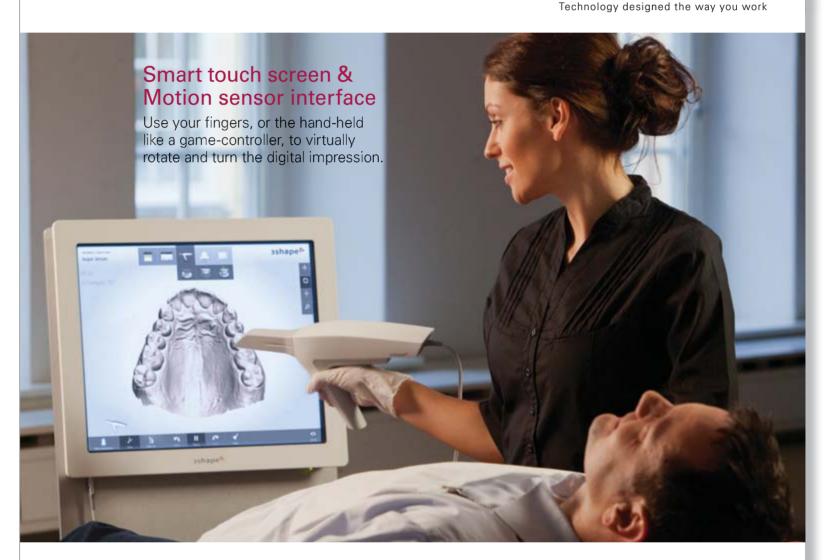
How can practitioners participate?

Dr Wang Yi/Virginia Chan: Practitioners can simply visit our website at *zensehealthcare.com* to participate. The short survey will take only five minutes and they will receive a copy of the benchmarks collected in return so they will find out the placement of their practice compared to others.

Thank you very much for this interview.

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Dento-legal issues in orthodontic cases

science & practice

By Drs Kevin Lewis and Jane Merivale, Dental Protection

Orthodontics occupies a very interesting position within the dentolegal landscape, raising some issues that are peculiar to the specialty and others that are manifestations of wider issues that apply throughout dentistry. At one extreme it shares many of the medico-legal complications of treating children (in areas such as consent and the limitation of commencement of legal proceedings), while at the other it shares some of the risks that are associated with elective, cosmetic procedures carried out for adults.

Facts and myths

It is a popular myth that orthodontics rarely results in complaints and litigation, and a further myth that orthodontic specialists encounter virtually no dento-legal problems. It is true that the majority of cases involving orthodontics, arise from non-specialist practitioners who have not undergone any recognised formal training in the field, but also worth noting that specialists and non-specialists tend to have a different 'mix' of cases and issues arising within them.

Of all the 70 countries where Dental Protection has an active presence, Singapore and Hong Kong are unusual in terms of the proportion of cases that arise from orthodontics, which has been consistently higher than average over many years. Internationally, there has been a sharp increase in cases arising from the clear aligner techniques that have become popular in adult orthodontics.

The more technical the specialty, the less likely it is that patients will be in a position to judge the technical aspects of the treatment and its outcomes. As a result, they will tend to judge the treatment by reference to other criteria and not least, by comparing what is being achieved, against what they had been led to expect. Not surprisingly, given the nature of orthodontics, more than half of all cases are concerned with appearance, cost and the length of time it takes.

What goes wrong?

There is a difference between the technical and clinical deficiencies and failures in orthodontic treatment that would be apparent to experienced colleagues working in the same field, and the deficiencies and failures that are more visible to, and more easily understood by patients (or perhaps their parents). Because of this, problems of the latter variety are more likely to result in patient dissatisfaction and therefore have the potential to give rise to complaints and claims.

 $In \, our \, experience, the \, overwhelm$ ing majority of cases arise primarily as the result of deficiencies in the initial diagnosis, case assessment and treatment plan. Most of these cases involve non-specialists because this is



where the additional knowledge and experience of the specialist orthodontist pays dividends, and also where the non-specialist can sometimes run into problems which could be said to reflect an under-estimation of the complexities of the case, and which treatment approach is most likely to result in the desired outcome.

Specialist orthodontists have most of their problems in the area(s) of communication and consent-which includes communication with professional colleagues as well as with patients and (in the case of children) their parents. In many instances the problems from this source are compounded by incomplete or inadequate clinical records of the communication and/ or consent process. Non-specialists are much more likely than specialists to create problems relating to the technical aspects of the treatment itself.

Dental Protection is a company providing professional indemnity for the overwhelming majority of dentists in Singapore. Dr Kevin Lewis (Dental Director) and Dr Jane Merivale (Dentolegal Adviser), are regularly managing cases here and elsewhere in the Asia Pacific region. Today, they provide a two-hour session in explaining where complaints and litigation tend to arise in orthodontics.

The filter principle: Is every patient a finals patient?

By Simon Hocken, UK

"Your work is going to fill a large part of your life, and the only way to be truly satisfied is to do what you believe is great work. And the only way to do great work is to love what you do. If you haven't found it yet, keep looking. Don't settle.

As with all matters of the heart, you'll know when you find it. And, like any great relationship, it just gets better and better as the years roll on. So keep looking until you find it. Don't settle."

Steve Jobs, CEO of Apple Inc. in 2005

You remember finals, don't you? Of course you do. Your examiners carefully selected a patient(s) for you to examine and diagnose and for whom to present a treatment plan. The finals patients were unlucky enough to have more than one dental problem and you were marked on finding all of them and your ability to determine a set of solutions for the patient.

 $Afterwards, most of \, us \, headed \, off \,$ into practice, where a series of finals patients are paraded in front of us on a daily basis. Now these patients willingly pay us to make our professional judgements, offer our best solutions and suggest a fee for doing the dentistry.

However, that's not always what happens, is it?

There's something that happens in general dental practice (be it public like the National Health Service [NHS] here in the UK, mixed or private practice) that is rarely spoken about in dental magazines, online forums or even at the bar at dental conferences. And it's this: many dentists consult with, examine, diagnose and treatment plan their patients, not in the way that they did for their finals patient, but by applying some sort of



filter-a filter of which the patients are completely unaware. Such filters have several elements and in my 25 years of being a dentist, followed by ten years of coaching dentists, I think I've probably heard or seen them all, or at least their effects.

7. As long as I make a note on the records, I am keeping myself within the legal rules.

The enemy within here is fear, and not the patient's but the clinician's. And so the filter is applied and the patient is offered the treatment plan that the clinician believes is absolutely necessary or the one he feels the patient needs. Presumably, he leaves the rest until such treatment becomes (as he deems it) necessary or needed. An additional filter, of course, is the one that pushes the dentist towards offering treatments that are well paid or earn the most number of units of dental activity.

Let me run this analogy past you.

Imagine taking your three-yearold. £25,000 car in for a 30,000-mile service. During the course of this,

3. The call that tells you about the faults that you will be able to see?

4. The call that tells you about the faults they think you will be willing to have fixed?

5. The call that tells you about the faults that will earn them the biggest margin?

And what will the garage do about the faults they don't tell you about? Perhaps, put a 'watch' on their records and consider telling you at the next service?

Duty of care

I know that some of you will be wincing already at my comparison between a clinician and a mechanic but there's more mileage in this analogy still to come. After paying for just the service, you drive off from the garage with the faults left unreported. A child runs out in front

cian that we had as a final-year student. External circumstances such as insurance companies, the economy, the practice finances and, probably most importantly, our lack of confidence and self-esteem have filtered our behaviour so that we agree to compromise our professional skill set and integrity in order to be liked, keep the patient or stay within our comfort zone.

So, how does that sound? Not so great from where I'm sitting and let's not tell the national newspapers. When I left the NHS in 1992, I decided to get rid of all the filters I had acquired, and simply show and tell my patients what I could do for them as if they were one of my family and money and time weren't an issue. I've used exactly the same approach in my coaching practice. I was lucky enough to be mentored by some great coaches on the idea that you often do your best coaching just before you get fired (for telling it like it is). And that's what I do for our clients.

In my view, you have to decide what sort of dentist you want to be: either an anxious single-unit, onetooth-at-a-time dentist, forever destined to gross a thousand pounds a day, whilst complaining that patients don't want your treatment; or a dentist who communicates clearly and straightforwardly with your patients about what you can see in their mouths and the best way to fix it, thereby giving them back their responsibility for their health and leaving the decision about whether to proceed with them.

Simon Hocken is Director of Coaching at Breathe Business, a business-coaching consultancy based in Kingsbridge in the UK. He can be contacted at info@nowbreathe.co.uk.

"We agree to compromise our professional skill set and integrity in order to be liked."

The filter may have some or all of these components:

- 1. Will the patient like me if I tell him about all of this?
- 2. Will the patient come back if I tell
- him about all of this? 3. Will the patient think I am overprescribing?
- 4. (For returning patients) If I tell the patient about all of this now, will he wonder why on earth I haven't mentioned it before?
- 5. Will the patient be willing to pay for all of this?
- 6. If I persuade the patient to have the big treatment plan, what happens if it goes wrong?

the technician discovers that as well as the regular service items needed, your car also has two sets of worn brake pads. In addition, the front brake discs are warped, the rear dampers are leaking and two tyres are nearly at their worn-tread marks.

As a customer, which of these phone calls would you like the garage to make?

- 1. The call that lists the faults, your options and the costs for having everything put right?
- 2. The call that tells you about the faults they think you will want to

of your car and you fail to stop in time because of the worn tyres/brake pads/discs/dampers. In the investigation that follows, these things come to light and spark a witch-hunt.

A good garage owner dare not risk this and the inevitable damage to the garage's reputation. He takes his duty of care seriously and must tell you exactly what the garage has found wrong with your car. So what's really going wrong when a patient leaves a dental surgery with half a treatment plan? In my opinion, this happens because we've lost the simple, straightforward, trusting relationship between patient and clini-

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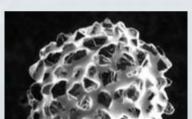
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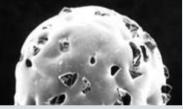
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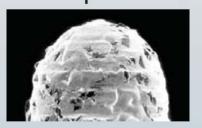


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