

DENTAL TRIBUNE

The World's Dental Newspaper 

PUBLISHED IN LONDON

uk.dental-tribune.com

Vol. 13, No. 2



UK NEWS

A new study shows how chewing properly may improve blood sugar levels in patients with Type 2 diabetes.

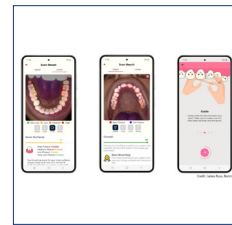
Page 2



UK NEWS

Technology helps drive reputation and extend care beyond the chair, with the latest FollowApp Care app.

Page 5



UK NEWS

A graduate at the University of Bath develops a smartphone app that scans dental plaque and can flag potential oral hygiene issues.

Page 7

Leadership: It is not about you, it is about them

By Dr Bhavna Doshi, UK

Having spent my entire career in multiple leadership positions, this has made me more cognisant of dental practice owners falling into the pitfalls of what leadership is not.

Throughout my 30 years of business experience, in both my own companies and helping grow practice owners' businesses, I became intrigued that the same questions kept popping up. Whilst many had really invested consid-

erable time and efforts in becoming good and strong leaders — socialising with their teams, awarding bonuses, promoting democracy, delegating or immersing themselves into leadership courses — the truth of the matter was that many still struggled to get their team to do the work they were 'meant to do' without having to oversee or micromanage them. And therein lies the issue!

The fact that a small business such as a dental practice offers the

owner a tremendous insight into team and patient dynamics and provides a real opportunity to see what is going on at ground level, it can also make owners hypersensitive to any mismatch in motivation levels and vision-sharing amongst their team members, which can contribute to an unhealthy working environment. If the leader senses that their staff are misaligned despite having put 'everything' in place, all parties can end up frustrated and stressed, and subsequently not in the best posi-

tion to blossom within the workplace.

I have held a variety of leadership positions and observing other dental leaders, this has made me more cognisant of owners falling into the pitfalls of what leadership is not. Looking at business from the singular perspective of the owner's point of view is a mistaken mindset, and I feel it is high time we change that erroneous thinking of it being all about the leader,

when actually it should also be about the team.

This ultimately creates the best optimal environment for all, including patients.

So, I have written a 'one-stop' book about leadership. In fact, I would rather call it a toolkit which systemises leadership, with actions the reader can take at the end of each chapter. It is not theoretical; it is a practical guide for success distilled into a formula that actually works.

► Page 2

Dental practice management software market is now worth £1.2 billion, and is growing

The dental practice management software industry is poised for significant growth and transformation in the near future. With advancements in technology and increasing digitalisation, dental practices are adopting software solutions to streamline their operations, improve patient care, and enhance overall efficiency.

Dental practice management software offers a wide range of features, including appointment scheduling, patient records management, billing and invoicing, treatment planning, and communication tools.

These software solutions help dental practices automate manual tasks, reduce paperwork, and improve accuracy in managing patient information. In addition, the integration of electronic health records (EHR) and digital imaging capabilities further enhances the capabilities of dental practice

management software. The near future will witness continued innovation in areas such as artificial intelligence (AI), teledentistry, and patient engagement tools, providing dentists with advanced tools to enhance diagnosis, treatment planning, and patient communication. As dental practices increasingly recognize the benefits of adopting digital solutions, the dental practice management software industry is expected to witness significant growth and revolutionise the way dental practices operate and deliver care to their patients.

The dental practice management software market (PMS) in terms of revenue was estimated to be worth £1.2 billion in 2023 and is poised to reach £1.8 billion by 2028, growing at a CAGR of 8.6% from 2023 to 2028 according to a new report by MarketsandMarkets. The overall growth is said to be because of the rising in de-

mand for cosmetic procedures and the technological advancements in dentistry, which in turn, increase the footfall at dental practices.

The dental PMS market is segmented into cloud-based, web-based and on premise software. The cloud based segment is forecasted to grow at the highest CAGR during the forecast period. The primary driver of this market is flexible, scalable, and affordable nature of cloud-based technology. Additionally, advantages such as remote access, low upfront costs, and data security also contribute to the high growth of the segment. Due to the rising awareness of dental disorders and their treatment, and the rising footfall in dental clinics in developing countries due to increased dental tourism, the dental clinics segment occupied the largest share of the market in 2022. The other end users segment is expected to grow

at the highest CAGR during the forecast period. The growth of this segment, which is mainly due to DSOs, can be chalked down to increasing private equity funding for DSOs, and benefits of economies of scale offered by DSOs, among other factors.

Dental PMS advantages:

· Improved efficiency: Dental practice management software automates various administrative tasks such as appointment scheduling, patient records management, and billing, reducing the need for manual paperwork and streamlining workflows. This improves overall efficiency, allowing dental professionals to focus more on patient care.

· Enhanced patient experience: The software enables seamless communication between dental staff and patients, offering features such as automated appointment

reminders, patient portals for accessing information and making online payments, and secure messaging systems. These tools enhance patient engagement, satisfaction, and convenience.

· Accurate and centralised patient records: Dental practice management software provides a centralized database for storing and managing patient records, including medical history, treatment plans, and diagnostic images. This allows for easy access to up-to-date patient information, improving accuracy in diagnoses, treatment planning, and continuity of care.

► Page 3

► Page 1 - Leadership: It is not about you, it is about them

I have tried and tested the actions over many years working with businesses across the healthcare sector (primarily dental, but also pharmaceutical and optical). My philosophy is win-win-win for the owner, team member and patient.

In my book entitled *Lead to Grow*, I talk about establishing a positive team culture that is aligned with the business vision. If practice owners can help their team members reach their best potential, they will feel psychologically, emo-

tionally and physically safe, which will subsequently make them happier, more likely to initiate creativity and ultimately engender strong loyalty. This grounding needs to be put into place in any business to help move your business forward.

Team members need to understand what the leader wants and vice versa. The reality is that people learn or take action in different ways, and hence communication methods need to be adapted for comprehensive understanding. It is the responsibility of the leader to figure this out so that the information on the business vision and tasks requested from them are fully understood. How many of you really know how your staff like to communicate? Do you really know if they have understood everything you say to them? Do you know if they need any more information? Do they need more training? What do you know about them? Have they got any self-limiting beliefs? What do you know about their personal life that could impact work? Do you know how

your team members can best work collaboratively and cohesively together?

This book is designed to give practice owners practical information which can be easily implemented, helping them truly connect with their teams at a level which is reassuring and safe for them. Simple things like creating organised communication structures, united values and systems, and alleviat-

ing fears and misconceptions. I have written the book from a clinician's viewpoint, understanding what challenges my peers face on a daily basis, as I have been there too.

My mission with this book, which is published in June, is to bridge the gap between the focused self-motivated leader and team members who may have very different needs. It is about deep-rooted values which chime with you and with which you can align all team members. Although primarily aimed at leaders or people aspiring to a managerial position,

leaders, this completely aligns with my philosophy of win-win-win aiming at patients, practices and teams altogether.

My book will be available on my website www.dentalwealthbuilder.com and on Amazon from June. I am excited to receive feedback from readers as they implement this new approach in their practices.

About Royal Philips

Royal Philips is a leading health technology company focused on improving people's health and enabling better outcomes across the health continuum from healthy living and prevention, to diagnosis, treatment, and home care. Philips leverages advanced technology and deep clinical and consumer insights to deliver integrated solutions. Headquartered in the Netherlands, the company is a leader in diagnostic imaging, image-guided therapy, patient monitoring and health informatics, as well as in consumer health and home care. Philips' health technology portfolio generated 2016 sales of €19.5 billion and employs approximately 81,000 employees with sales and services in more than 100 countries. News about Philips can be found at www.philips.com/newscenter.

Dr Bhavna Doshi

As CEO of Dental Wealth Builder (DWB), Bhavna primarily focuses on Practice Profitability and Growth Solutions. Her strategic techniques have been tried, tested and proven to work and have optimised revenues for many colleagues. The comprehensive DWB coaching programs have been uniquely designed for associates, practice owners and dental teams.

Having been in the dental industry for 30 years, she has collated an impressive résumé of various leadership roles.

She has worked as a successful practising dentist, principal to multiple award-winning practices (in dentistry and healthcare), a business coach and mentor, a judge for the UK National Private Dentistry Awards, director for the Perfect Smile Advanced Training Institute, an international keynote speaker, author for multiple publications. She also works as a consultant & coach for multiple dental practice groups conducting a variety of programs for their practices and for various suppliers within the dental industry.

Bhavna provides a unique perspective that combines clinical dental know-how and entrepreneurship with focused business fundamentals. Her mission is to empower dentists' and their teams with easy to accomplish strategies that makes owning or working in a dental practice highly rewarding.

Her main areas of expertise are: success strategies, entrepreneurship, practice growth & profitability, successful associateship, motivational transformational leadership, cost-effective marketing, gaining comprehensive case acceptances, communication skills and inspiring teams.

She now works entirely as a business coach, consultant and mentor in the healthcare industry.



Ability to chew properly may improve blood sugar levels in patients with type 2 diabetes

Health care providers are recommended to check the teeth of patients with type 2 diabetes (T2D), in a new study conducted by the University at Buffalo.

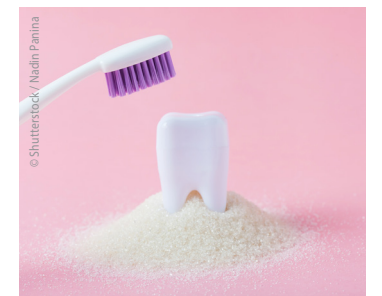
The study, published in *PLOS ONE*, demonstrates that patients with T2D who have full chewing function have a blood glucose level that is significantly lower than patients whose ability to chew effectively is impaired.

The retrospective study looked at data gathered from 94 patients with T2D who had been seen at an outpatient clinic in a hospital in Istanbul, Turkey. The patients were divided into two groups: the first group included patients who had good "occlusal function" — enough teeth placed properly and making contact in such a way that a person can chew their food well. That group's blood glucose level was 7.48. The second group couldn't chew well, if at all, be-

cause they were lacking some or all of those teeth; their blood glucose level was almost 2% higher, at 9.42.

Experts suggest this is because nutrients that are important to reduce blood glucose levels include fibre, which is obtained in large part through chewing appropriate foods. Chewing also has been reported to stimulate reactions in the intestine that lead to increased insulin secretion.

"Our findings show there is a strong association between mastication and controlling blood glucose levels among T2D patients," said University at Buffalo researcher Mehmet A. Eskin. This study did not find any independent variables that could affect blood glucose levels among the subjects because there were no statistical differences among subjects regarding body mass index, sex, smoking status, medications,



or infection as indicated by white blood cell count at the baseline.

IMPRINT INTERNATIONAL HEADQUARTERS

PUBLISHER AND CHIEF EXECUTIVE OFFICER: Torsten Oemus

CHIEF CONTENT OFFICER: Claudia Duschek

Dental Tribune International GmbH
Holbeinstr. 29, 04229 Leipzig, Germany
Tel.: +49 341 4847 4302
Fax: +49 341 4847 4173
General requests: info@dental-tribune.com
Sales requests: mediasales@dental-tribune.com
www.dental-tribune.com

Material from Dental Tribune International GmbH that has been reprinted or translated and reprinted in this issue is copyrighted by Dental Tribune International GmbH. Such material must be published

with the permission of Dental Tribune International GmbH. *Dental Tribune* is a trademark of Dental Tribune International GmbH.

All rights reserved. © 2023 Dental Tribune International GmbH. Reproduction in any manner in any language, in whole or in part, without the prior written permission of Dental Tribune International GmbH is expressly prohibited.

Dental Tribune International GmbH makes every effort to report clinical information and manufacturers' product news accurately but cannot assume

responsibility for the validity of product claims or for typographical errors. The publisher also does not assume responsibility for product names, claims or statements made by advertisers. Opinions expressed by authors are their own and may not reflect those of Dental Tribune International GmbH.

dti Dental Tribune International

PUBLISHER:
Dental Tribune UK
167-169 Great Portland Street, London W1W 5PF

MANAGING EDITOR:
Georgia Field
editor@now-learning.co.uk

CONTRIBUTING AUTHOR:
Lisa Moore

DESIGNER:
Pioneer Designs

► Page 1 - Dental practice management software market is now worth £1.2b, and is growing

· Streamlined billing and insurance claims: The software simplifies billing and insurance claim processes, reducing errors and improving accuracy. It automates the generation of invoices, tracks payments, and helps dental practices manage insurance claims efficiently, leading to faster reimbursement and improved revenue cycle management.

· Data analytics and reporting: Dental practice management software often includes robust reporting and analytics features that provide valuable insights into practice performance, financial

metrics, patient demographics, and treatment outcomes. This data helps dentists make informed decisions, optimize practice operations, and identify areas for improvement.

· Compliance and data security: Dental practice management software ensures compliance with industry regulations such as HIPAA (Health Insurance Portability and Accountability Act) and provides data security measures to protect patient confidentiality and sensitive information.

· Integration with digital imaging and EHR Systems: Many dental practice management software solutions integrate with digital im-

aging systems and electronic health records (EHR), allowing for seamless access to radiographs, intraoral images, and other diagnostic data within the software platform. This integration enhances treatment planning and improves collaboration among dental professionals.

Overall, the adoption of dental practice management software offers numerous advantages, ranging from increased efficiency and patient satisfaction to improved financial management and data-driven decision-making. As the dental industry continues to embrace digital transformation, the dental practice management software market is expected to



grow and evolve, providing even more advanced features and ben-

efits to dental practices worldwide.

Greening the dental practice

Simple eco changes every practice can adopt



By Dr Sulaman Anwar, UK

Dental practices are not particularly green. According to the Eco Dentistry Organisation, clinics generate 4.8 million lead foils, 28 million litres of toxic X-ray fixer, 37 tons of mercury waste, 1.7 billion sterilisation pouches and 680 million non-recyclable chair barriers, light handle covers and patient bibs every year.

However, there is a raft of new products and technologies which make it easier for dental practices to eliminate waste, and there are a number of other ways to green up. These initiatives will bring additional benefits beyond improving the practice's eco credentials.

Consumers are becoming environmentally savvy. They're also making purchasing decisions which chime with their beliefs; a practice which can demonstrate its sustainability awareness policies and communicate them in practice, on their website and social media will reap the rewards of its greening efforts.

The Nielsen Global Corporate Sustainability Report found that 66% of the people they surveyed stated they would be willing to pay more for sustainable goods. A further study conducted by Harris Interac-

tive found that 82% of adults claim to be well-informed about brands with a strong track record for sustainability. Businesses — and dental practices are businesses — wishing to thrive, attract and retain patients would do well to take steps to adopt a more sustainable approach.

Periodontal specialist Dr Sulaman Anwar was keenly aware of the need to make environmentally-conscious changes at the dental practices where he works. Here he details changes he has made to bring about an immediate difference to his green footprint.

Some of the swaps were easy to source and implement, while others — like finding a new energy supplier — take a little more research. However, all have been extremely worthwhile and the response to them has been extremely enthusiastic, from colleagues and patients alike.

Simple eco changes every practice can adopt:

1. Change all gas and electric suppliers to those offering 100% renewable energy.
2. Change plastic patient cups to stainless-steel cups that can be sterilised and reused.

3. Use eco-friendly cleaning products, hand wash and cream.

4. Use either biodegradable or recycled plastic bin liners (except practice clinical bags).

5. Use recycled toilet paper in both patient and staff lavatories.

6. Go paperless wherever possible. Only print necessary documents and use recycled printing paper when printed material is produced.

7. Don't offer plastic shopping bags — give paper bags instead.

8. Offer fair trade or eco-friendly tea and coffee (for both patients and staff).

9. Change all lightbulbs to LED alternatives.

10. Sundries — stock and recommend eco-friendly toothpaste tabs, change toothbrushes, interdental brushes and tongue cleaners to bamboo and eco-friendly alternatives.

11. If you have space install a potted garden to encourage bees/native wild life.

12. Change children gifts and stickers to plastic free items and eco-friendly alternatives.

13. Recycle batteries, coffee pods and actively encourage recycling paper at reception/office.

14. Initiate a recycling scheme which encourages patients to bring their plastic dental products back with them to be recycled; interdental brushes, dental floss cartridges, tooth picks and manual toothbrushes can all be returned. Consider initiating a Terracycle scheme and the practice can also select a charity to benefit from all the returned plastics.

Dr Anwar is now keen to hear from other practices all about the schemes they have initiated. For more information, please visit his Instagram page @dr.sulaman and share your green practice suggestions.

Dr Sulaman Anwar

is a registered specialist periodontist with a master's degree in periodontology. He also has a special interest in sedation and the management of anxious patients. He is a fully specialist registered member of the British Dental Association, European Federation of Periodontology, British Society of Periodontology, American Academy of Periodontology, International Academy of Periodontology and the Royal College of Surgeons, Edinburgh

Dr Anwar sits on the interview panel for the dental undergraduate programme at King's College London. His focus on helping others has led Sulaman to undertake various voluntary roles including a placement with the Royal Flying Doctor Service of Australia, and is he involved in rolling out an oral health promotion campaign targeted at young school children.

Dr Anwar is one of only a few dentists in the UK able to perform the Pinhole Surgical Technique. He also has a strong interest in the environment.



Work smarter in 2023:

How to take advantage of digitally driven patient conversations



Dr Marcos White and dental therapist Cat Edney discussed the benefits of patient communication using latest technology at a recent Digital Excellence Series educational webinar — the first in the 2023 series of presentations from dental experts and practitioners created by Align Education.

Dr White from Huddersfield and Edney from London shared their experience with digital dentistry and how they have been able to use digital tools to enhance the treatment experience of every patient, whether they are new to, or a long-time patient of a practice. Central to this is making full-use of technology — particularly the iTero™ intra-oral scanner — to create focused patient journeys, educate patients, and empower practice teams.

"Imagine finding out you can better care for patients, have better record keeping and deliver more predictable results, all with skills you already have and a tool you already own," said Dr White. "For over 200 years, dentists have seen teeth one at a time in the reflec-

tion of a very tiny little dental mirror on a stick, and patients haven't been able to see anything that we were seeing. Now we both can see the whole dentition. The iTero scanner's touchscreen allows us to demonstrate our observations to the patient in a way they understand. For the first time, they see their own problems on screen in colour. It gives them a new perspective."

Dr White's practice now uses six iTero scanners, and he describes that the very first immediately made a significant difference. "We saw 33% growth over 12 months with the first iTero scanner we ever bought. The reason it worked was because it prompted greater case acceptance — more people said yes to larger treatment plans. Digital tools impress patients, they create stories. The sheer act of showing patients their problems and the solutions on-screen blows their mind and builds their confidence in you," he told delegates.

He used a recent example of a patient who arrived at his practice wanting new veneers, but more

seriously, the patient didn't have any back teeth. The iTero scan revealed periodontal problems, and showed that the patient needed back teeth, but didn't want false teeth, so Dr White and his team were able to treat her with dental implants. "As in this case, what we've discovered time and again through this process is that there's a co-discovery going on and that the best idea in the world is always the patient's idea... as they ask questions and come up with the solutions, they end up with something that they wanted, not something we told them they needed. And that is massive."

Teamwork approach

Vital to successfully boosting efficiency is the involvement of the wider practice team to scale practice operations. Treatment coordinators (TCOs) and hygiene therapists in particular, have a wider role to play, explained Dr White, as they can also help to build patient relationship through conversation.

Dental therapist Edney, of Greenwich Dental Health in London echoed this analysis: for her, building patient loyalty is based on holistic understanding and use of technology. She explained that holistic care includes understanding general patient health, their personal situation, and any major life changes, is the key to unlocking hidden patient value.

When Edney started using the iTero Element 5D imaging system, she began having more in-depth conversations with her patients. She noticed that they were looking at their mouth and self-diagnosing, feeling there was something

wrong, and the scanner gave her the opportunity to show them and demonstrate the changes that were happening.

Now, she and the team she works with, use the iTero scanner to build comprehensive profiles of all patients to help to unlock oral health conversations - and create loyalty. This includes understanding what is happening in their lives, such as if they're having a baby, changing jobs, or getting married. "The way we do that is just to build a basic profile that outlines who they are and their social history. It's a very small document that's easily accessible by the whole team and it all relates back to their oral health and their dental care."

Edney was keen to stress in the webinar that treatment coordinators (TCOs), hygienists and therapists are well placed to build patient trust and fosters loyalty to the practice.

"When you take your patient out of the dentist's chair and put them into somebody else's chair within your team, whether it's a TCO, a dental hygienist or a therapist, the conversation often changes. Patients act and speak differently when they're speaking to a different member of the team, because our conversations often centre around improving or maintaining their health. We're not just talking about their mouth. Team members are well placed to build patients profiles: assess, explain, and communicate with them and maximise their awareness of their dental needs thanks to digital tools. With the iTero scanner we can take screenshots of the treatment, annotate those screenshots so the whole team can see what discussions there have been. This is a key

Dr Marcos White

qualified from Leeds Dental Institute in 2000. Marcos is an international lecturer for iTero and Invisalign products which is a massive reflection on his experience in Invisalign clear aligners and digital scanning technologies.

He runs courses for other dentists to see how to best utilise iTero and Invisalign clear aligners in their practices.

Cat Edney

qualified from King's College Dental Hospital in 2008 in the dual qualification of Dental Hygiene and Dental Therapy.

She now has over ten years' experience working in specialist private practice. With her focus on providing personalised care for patients, Cat takes a holistic approach to dental disease prevention and treatment.

She lectures nationally and runs hands-on Therapist courses focusing on providing gold standard training and ongoing support.

feature that facilitates the communication, so it's easier for the rest of the team to answer questions from patients if they know what is planned for them."

Dr White concludes that this new way of working also has other benefits. Creating time for a digital scan enables automated diagnostics and builds a bank of data per patient as well. "Scans equal history and that equals loyalty. We've now got circa five years of scans for some of our patients. It creates a bond with your patient that they won't want to lose."

To view the free webinar, please visit www.iTero.com/des.

Philips becomes a partner sponsor of the British Society of Periodontology and Implant Dentistry

Philips, with its clinically proven range of sonic toothbrushes and powered interproximal flossing device, has a natural affinity with the aims of the British Society of Periodontology and Implant Dentistry (BSP). So much so the company has become the latest partner sponsor of the society to help it to achieve more of its strategic objectives to promote public and professional awareness of periodontology and implant dentistry and to achieve its vision of "Periodontal Health For A Better Life".

Paula Dunn of the BSP commented: "As a charity, we rely on funding from organisations like Philips to enable us to succeed in

our aim to advance all aspects of periodontology and dental implantology and promote the importance of gum health to dental/medical professionals, undergraduate students, patients and the public.

We wish to extend our sincere thanks to Philips for becoming a partner sponsor and providing the society with funding to support many of our planned activities this year. Their help and support will enable us to achieve more of our strategic aims and objectives to benefit and support our members, the wider dental profession, patients and the public."

The periodontal care continuum periodontists have recommended the Philips Sonicare brush to patients for over 30 years. It has a legacy of 119 independent researchers affiliated with 25 universities producing 60 published manuscripts and abstracts evaluating and attesting to Sonicare's superior performance. Its range of sonic toothbrushes has been clinically proven not only to reduce overall plaque and interproximal plaque, but also reduce gingival inflammation and probing depth in the course of regular use over six months. A recent six-month clinical study demonstrated that the Philips Sonicare was clinically proven to improve gingival health

better than a manual toothbrush in patients with stage I/II periodontitis post non-surgical treatment. Likewise the company's new Power Flosser with its unique X-shaped nozzle creates four wide streams of water to remove up to 99.9% of plaque in treated areas. The Quad Stream covers nine times more surface area and requires less technique than an oral irrigator with a single stream nozzle, for a faster, more effective and more comfortable clean versus manual floss.

Emilee Walby for Philips adds "Philips shares a common vision with the BSP to help its members find ways to help tackle the incipi-



ent and intransigent periodontal disease. We have had long standing working relationships with a number of its faculty members, so extending our support to the society once more is a natural step for us. We look forward to attending its events, meeting as many of the Society members as possible, and connecting in other ways through the BSP."

How a new 'golden age' of dentistry is being driven by technology, extending care beyond the chair



Dr David Holmes

"UK dentistry sits at the forefront of innovation, and many British practices are outpacing their Australian and US contemporaries when it comes to early adoption of technological advances, such as digital scanners and use of artificial intelligence (AI) to power patient care". So says Dr David Holmes, founder of FollowApp.Care, the pioneering technology which enables dental practices to create exemplary patient follow-up protocols, triggers new appointment bookings and online reviews. Here he discusses why more clinicians should embrace this new 'golden age' of dentistry.

"As innovators, the international perception of UK dental groups is particularly high. I work a lot in Australia, and they reference UK companies and talk about how they are further ahead, particularly in terms of practice co-ownership and the way they market themselves. When looking at the US, there are a number of ambitious UK dental support organisations (DSOs) which are rapidly consolidating much in the same way as the US. Then, looking at the way we are innovating and harnessing data and to create exemplary patient communications, I think there are many learnings and opportunities for dentists worldwide to use AI to better serve their patients just as forward looking practices in the UK are embracing.

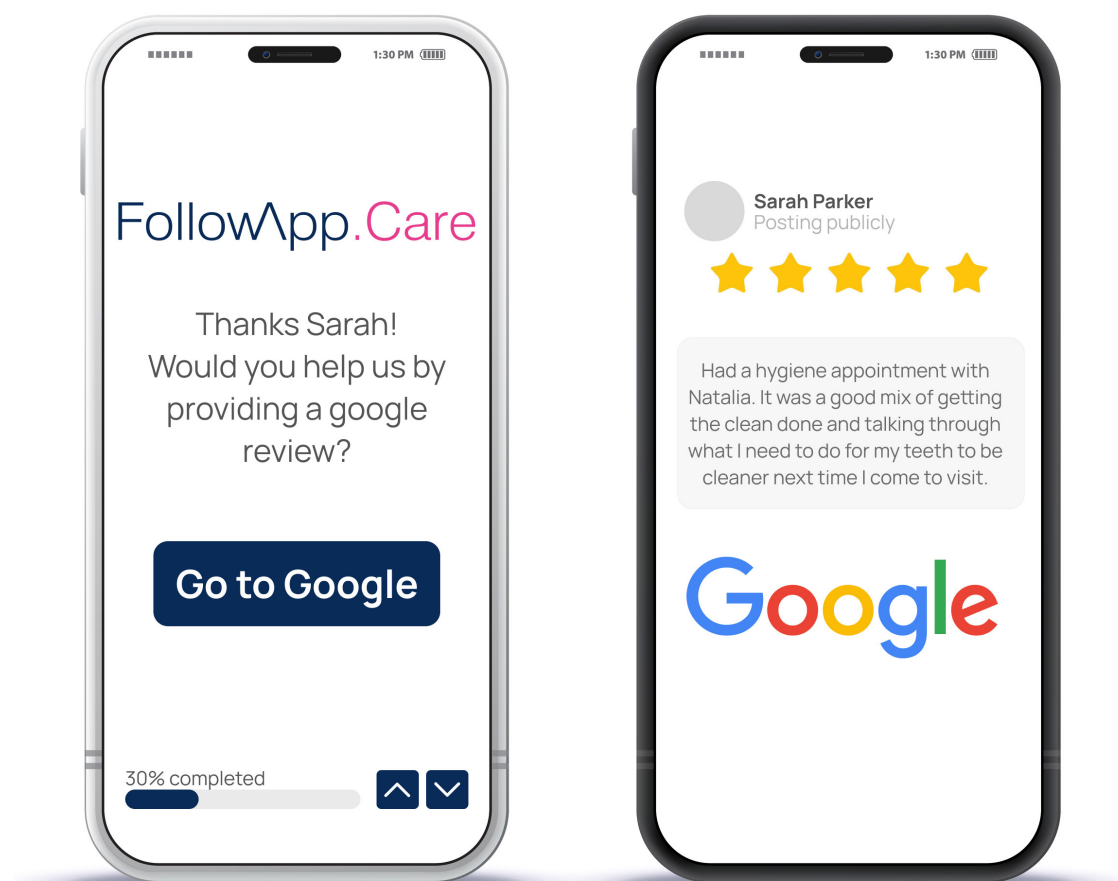
Recently there's been a huge step forward in understanding of what

AI is and how it can be used following the advent of ChatGPT, but a lot of people are still nervous about their data being used to build algorithms, and to create AI. I believe those concerns are unfounded in dentistry... it can support dentists' ambitions to improve outcomes for their patients and the performance of their business. So, I don't think there's much reason, if any, to be fearful.

For instance, AI can help practices drive much better online reviews — something that many dentists don't pay enough attention to. Having a Google rating is like having a star rating on your digital front door; every time someone opens your door, they walk past that score. When people see a score of 4.78 or 4.95, they think you are a quality organisation. Drop below that — to 4.6 or 4.0 and they might start to be a little concerned. If you drop to between four, to 3.8 or below that's really hard and doesn't necessarily reflect the service or quality of care you offer, or the happiness of your patients. They might love you, but a few negative reviews online will mean those patients are walking past a three-star, digital front door.

Technology can help to drive reputation and extend care beyond the chair

One of the things we discovered recently in the FollowApp.Care community was the belief that people loathe dentists. A major dental provider gave a presentation that cited a study reporting that dentistry has a customer satisfaction Net Promotor score of one — something that FollowApp.Care calls a loyalty score. This couldn't be further from the truth. The top performing practice we work with has a score in the mid to high 90s... even the lowest scoring practice is still above brands such as Apple, which would be in the 60s or 70s. I take a lot of pride in bursting these bubbles and trans-



forming peoples' perception of themselves and the profession. Most of the time, as dentists, we are just desperate to please our patients and technology is here to support that. But it needs to be seamless and transformational — ten times better than the status quo. I was taught that no news is good news but creating an open channel of communication flips that on its head; reaching out to patients after every visit to make sure they're ok gives you a huge amount of peace-of-mind. Asking for feedback results in a constant flood of positive feedback, plus it helps you to manage when things don't go well.

The catchphrase of one of our partners in Australia is "extending care beyond the chair" and it drives huge value for them in making sure their patients are okay post-procedure and avoids unnecessary complications.

The 'golden age' of dentistry

I'm excited by technologies that are transformational and all of a sudden people are understanding it and can see the benefits. With the advent of digitisation and AI advancements, data is becoming more accessible for clinicians to optimise the way they run their practices. This makes me more optimistic about the future of dentistry.

"When I first graduated my mentor told me the golden age of dentistry was ahead of us... he was right. I'm now hearing that again with the advent of digital technology and the transformational changes being brought about by AI automation — and I'm very excited to spend the rest of my career developing new applications in this space."

How FollowApp.Care works

1. Integration
Integrates with your practice management system to automatically extract the data needed to ensure

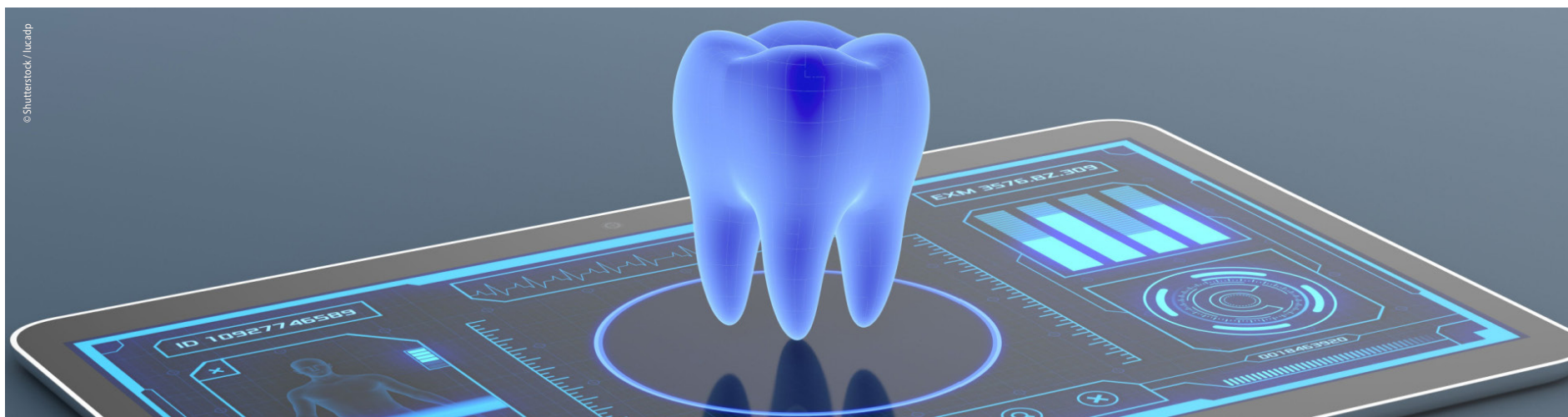
appointment notifications trigger patient communications

2. Communication
Makes patients feel cared for, while checking up on post procedural health, requesting feedback and prompting reviews.

3. Results
Results are analysed and collated in the FollowApp.Care web application where clinics can resolve flagged issues or sit back and watch FollowApp.Care work for them by garnering improved Google reviews.

More than 5,000 dentists have already used FollowApp.Care — predominantly in the UK and Australia, and millions of patients have connected with them through the app.

For more information, please visit <https://www.followapp.care>.



Evolving business systems into 2023 and beyond

An article series on five basic systems to improve practice management—Part 3: Patient experience

By Chris Barrow, UK

In previous articles of this series, I have referenced the seminal work *The E-Myth Revisited* by Michael Gerber. I looked at financial systems in Part 1 and at practice marketing in Part 2. In this third article, I would like to address the patient experience with reference to the things you need to deliver that will make your patients advocates and ambassadors for what you do.

I am going to take it as a given that every dentist strives to achieve the very best in clinical care, so my scope in this article is to share with you what I consider to be moments of truth in the modern patient experience. Let me define a 'moment of truth' in this context: a moment of delight or disappointment that has a disproportionate effect on the patient.

For an example outside of dentistry, imagine arriving at a local five-star restaurant for an anniversary dinner with your loved one to be told by a disinterested maître d' that your reservation is not on the system and there are no tables available. This would be a moment of disappointment with a disproportionate effect as said dining partner stares at you in disbelief!

Now, imagine arriving unannounced at a favourite hotel asking for a short-notice reservation and being informed that, even though the hotel has no rooms, the reception team will call similar hotels in the city, reserve a room, guarantee the hotel's rack rate and order a complimentary cab to take you there. This would be a moment of delight with a disproportionate effect, since it would make you a lifetime fan and customer of that hotel.

These two stories are of special relevance because they happened to me, so I have first-hand experience of the emotional reaction in both instances. I never visited the restaurant again, and I have regularly used the hotel group since—and perhaps most importantly, I never miss an opportunity to share my experience with family, friends and colleagues.

Online reviews have turbocharged the speed and distance that this bad or good news can travel, placing unparalleled power in the hands of the consumer—your patient. One cannot avoid the reality that both reading and writing reviews have become embedded in society and applicable to all demographics. In the world of dentistry, the Google review has become a dominant weapon for the patient and a force for good if practices recognise their influence and seek to deliver a patient experience that generates positive feedback.

Let me now share with you my six moments of truth in the patient experience and comment on each. They are:

- first digital contact;
- first human contact;
- first assessment or consultation;
- treatment plan presentation;
- treatment coordination and delivery; and
- end-of-treatment review.

hours, and do you have an online booking system?

3. Social media. Do you use multiple platforms in a responsible way to deliver my golden rule on marketing—80% patient stories, 15% team stories and 5% oral health education (see my previous article in *Dental Tribune UK & Ireland* 1/23)?
4. Blog. Do you write a regular



As attracting new patients can be difficult and expensive, dental professionals should seek to provide them with an all-round positive experience.

Regarding each of these moments, I am going to share with you a quick checklist of things to do or features to offer. You will then be able to compare what you currently do with what I suggest.

First digital contact

Most new patients, irrespective of background or need, are going to check you out online before they make human contact. This means that you must be easy to find and you must answer in just a few seconds the most important question that any new patient has.

What is that question? I rarely get the correct answer when I ask this at workshops. Most people will respond with references to price, location, access and experience. In fact, most patients want to know whether people like them visit your practice, because undergoing dental treatment can be stressful and they want to be reassured that they will be among like-minded patients. If your website home page features photographs of the practice or stock photographs of bright young things, do not be surprised if implant patients rarely show up.

Regarding the first digital contact, consider the following areas and suggestions:

1. Organic search. If a friend refers a prospective patient to your practice over dinner, when the prospective patient subsequently searches for you online are you easy to find?
2. Website. Does your website reassure prospective patients that people like them visit your practice? Bonus points for 2023: does your website include a chatbot feature so that patients can communicate outside of practice

practice blog that provides oral health education, answers FAQs and establishes you as the local expert, thus driving patients through inbound marketing to your door?

5. Practice newsletter. Before the prospective patient visits, can the patient sign up to your monthly patient newsletter and read stories about similar patients?

6. Google reviews. Do you have more than 100 reviews (so that Google's algorithms can see you) and growing, the majority of which have five-star ratings (because everyone eventually gets a one-star review) and are full of praise for what you do?

First human contact

It has been said that first impressions last a lifetime. Recognising the value of this, a client of mine once gave the head of her front-of-house team the official title of managing director of first impressions. Another client recently shared a story of a front-of-house team member arriving late for work and thus missing a new business enquiry that resulted in £25,000 of work going to a nearby competitor. You may think the patient in this case a bit flaky, but we live in a post-COVID world of diminishing patience, and we all must be on our game.

Regarding the first human contact, consider the following areas and suggestions:

1. Telephony. Do you have a front-of-house training manual that covers all FAQs and agreed answers?
2. Front desk. Have you separated your front desk from telephony so that patients arriving in the premises can have the undivided attention they deserve?

3. Patient lounge—not waiting room, since nobody likes waiting. Is your patient lounge an area in which patients can detox from the outside world, relax and prepare for their appointment while watching videos (with subtitles) of patient testimonials?

4. Toilets. An untidy or ill-maintained toilet puts concerns of unhygienic treatment and thus risk of treatment failure into patients' minds I cannot stress how important this is.

5. Delays. If a patient arrives late or a clinician is running late, do you have efficient protocols in place to deal with the consequences calmly?

6. Journey to the surgery. Are patients left to make their way to the surgery room or are they escorted by a nurse or a clinician who works on building the relationship during the few moments spent together?

First assessment or consultation

Whether it is with a treatment coordinator or a clinician, this is the first in-depth communication about the patient's problems or needs. At the conclusion of that first conversation, does the patient feel understood and appreciated? To quote an adage, "people don't care how much you know until they know how much you care".

Regarding the first assessment or consultation, consider the following areas and suggestions:

1. Introductions. Did the patient feel that the person performing the assessment or consultation introduced himself or herself properly and understood the patient?
2. Consultation. Did the patient feel that, as well as undergoing a thorough clinical examination, the patient was consulted on needs, problems, challenges, fears—and desired outcome?
3. Smile check. Besides collecting data, did the person performing the assessment or consultation connect with the patient's feelings?
4. Dental health review. Were the benefits of long-term preventive care explained to the patient as well as the solution to the patient's immediate problem?
5. Targets. Could the patient and person performing the assessment or consultation agree on targets for the desired outcome?
6. Next steps. Was there a call to action at the end of the conversation and clearly defined next steps?

Treatment plan presentation

A treatment plan is a purchasing decision for the patient and, other than for pain relief, may sit alongside comparable decisions financed from a limited budget.

Compare a £3,000 investment in a new computer, white goods, home improvements, a holiday or a business-class flight—with a dental treatment plan—and you will soon realise what I mean.

On visiting a new client, I always ask for an example of a treatment plan for a mid-sized financial investment—say a few thousand pounds. Even now, I am regularly horrified at the archaic nature of treatment plan presentation—printouts from practice management software that are impossible for laypeople to understand or lengthy word-processed documents that focus more on risk than reward, as they are driven by compliance and litigation considerations. My most innovative clients see the treatment plan as an audiovisual experience for the patient and not just another document to plough through in the endless pile of work to be done.

Regarding treatment plan presentation, consider the following areas and suggestions:

1. Executive summary. Given that we are all short of time, do you provide a one-page summary of the problem, the diagnosis, the recommended solution, the benefit of the solution and the investment?
2. Narrative. Have you embraced video technology (e.g. Loom) to provide a narrative recorded on camera so that the patient can review your recommendations and share them with any other significant decision maker?
3. Visual. Do you use intra-oral photography, radiography and, most important of all, intra-oral scanning as an integral part of your presentation?
4. Options. Do you give the patient options for treatment and options for payment?
5. Financial conversation. Do you always link the financial investment to the desired outcome—and not to the treatment modality?
6. Small print. For compliance purposes, do you keep the small print where it belongs—as an appendix?

Treatment coordination and delivery

We reminded ourselves earlier that undergoing dental treatment is a stressful experience for many patients—not a choice they would make to spoil themselves. The practice team is duty bound to make it as pleasant as it can be, even thinking about delivering nice surprises along the way to sugar the pill.

Regarding treatment coordination and delivery, consider the following areas and suggestions:

1. Free assessment. Do you allow prospective new patients to have a no-charge, no-obligation assessment with a treatment coordinator (on video or face to face) before they pay to see a clinician? A good treatment coordinator can triage the patient—either out of the practice if not a good fit or to the correct clinician depending on the treatment requirement.

2. Consultation room. Whether it is a treatment coordinator or clinician meeting, are the physical surroundings comfortable and is there access to audiovisual equipment and data that will help the patient to understand the treatment options and outcomes?

3. Options meeting. Do you present options to patients at a meeting designated for that purpose and with the aforementioned audiovisual aids?

4. Supporting technology. Do you embrace digital workflows as well as digital communication?

5. Smile design. Do you embrace the latest treatment planning technology to show patients before and after artistic impressions before they commence treatment?

6. Third-party evidence. Do you reassure patients by regularly sharing with them case studies of successful delivery to patients in their demographic?

End of treatment review

The following is some repetition from my second article (but necessary) in that a patient reaching the end of a course of treatment that improves self-confidence provides a golden opportunity to capture the patient's happiness.

Regarding the end-of-treatment review, consider the following areas and suggestions:

1. Preparation. Do you reference your end-of-treatment review at the point of sale (when the patient agrees to proceed) and again close to the end of the treatment pathway? Do you book the end-of-treatment review as a set appointment with your treatment coordinator or clinician?

2. Referral cards. Do you give patients at least three practice business cards with a QR code to your website landing page for new patients?

3. Follows. Do you ask patients who are regular users of social media to follow your business platforms?

4. Google reviews. Do you give patients a Google review card (again with a QR code) and ask them to scan it and write reviews for you?

5. Testimonials. Do you ask patients whether they will consent to short video testimonials in which they describe their experience of working with you?

6. Membership. If you offer a dental membership plan, do you ask patients to join at their end-of-treatment review?

These six moments of truth offer multiple opportunities to deliver an experience that will enrol the patient as another unpaid member of your sales force. New patients are sometimes tough and expensive to attract. It is thus prudent for dental practices to seek to deliver continuous moments of delight that have a disproportionate effect. I cannot think of a better way to ensure job satisfaction for all your team—or a better way to grow your business.



Chris Barrow

has more than 50 years of work experience and has been active as a consultant, trainer and coach to the UK dental profession for over 25 years. His main professional focus is through his Extreme Business company, providing coaching and mentorship to independent dentistry around the world via virtual consultancy, practice visits, a workshop programme and an online learning platform. His blog, Thinking Business, enjoys a strong following. During the COVID-19 pandemic, Barrow created the Regeneration Coaching Programme to help practices to survive lockdowns and to bounce back higher after their return to work. More information on his work can be found at www.coachbarrow.com.

Arriving at your happy place in dentistry

How journaling can enhance general well-being and support dental professionals in their daily work



By Victoria Wilson, UK

Throughout the year our continuing professional development requires us to reflect on the changes we want to bring about in our professional lives, and this may on occasion lead to us thinking about our personal lives. For the purpose of this article, I will explore how keeping a journal through combining professional reflective practice and personal reflection can be utilised by dental professionals to enhance their individual well-being, throughout a year's cycle.

Keeping a journal is something that has been of interest to me for many years. I have explored it, stopped writing and started again, and discovered that whenever I keep a journal I have observed a positive shift. I seem to be more productive and progressive in my personal and professional life, fac-

ing less resistance and more flow in all areas.

Keeping a journal for dental professionals

As dental professionals, our well-being is of paramount importance so that we can thrive and provide the best possible care to our patients. I firmly believe that there is always an opportunity to enhance our state of well-being through utilising protective measures, such as a journal. Journaling is the private recording of one's experiences, observations, feelings and attitudes in order to explore and reflect on these. It is thus a reflective practice, reflection being the "active persistent and careful examination of the truth and the facts that surround it".¹

Everyone would concur that dental professionals are regularly exposed to innumerable challenges.²

In order to continue providing care that meets the standards set by the General Dental Council (GDC) for UK-registered dental professionals or equivalent registry bodies, dental professionals need to implement and utilise supportive means to reduce the negative impact of the challenges they face.

The GDC supports reflective practice as a way to manage dental professionals' growth and well-being and for that reason requires reflection after participation in continuing professional development (CPD) activities.³ The GDC states that employers should encourage teams to make time for reflection as a way of aiding development, improving well-being and deepening professional commitment.⁴ Health regulators now consider reflection to be an essential aspect of clinical practice.¹

The reflective practice required by the GDC refers to professional reflection, deemed necessary for professional growth that is an essential element for all dental professionals registered with the GDC. However, it does not include personal reflection. Keeping a combined personal and professional journal could support dental professionals' well-being and have a positive impact on their personal and professional life, which although may be defined as being separate are inherently interlinked.

The benefits of journaling

The true beauty of keeping a journal is that the writer is free to make it what he or she wants it to be. It simply allows you to understand your thoughts and feelings more clearly. Keeping a journal can have a positive impact on various areas of life, some of which I will outline in this section.

Depression and anxiety

Numerous studies have shown that journaling can reduce overall levels of depression.⁵ A study showed that writing in a journal can be as effective as cognitive and behavioural therapy for reducing the risk of depression in young adults.⁶ Journaling can promote acceptance and mindful acceptance in particular—which is a valuable and effective way of freeing ourselves to move forward.⁷ In addition, study findings have suggested that accepting our feelings is linked to improved psychological health and positive therapeutic outcomes, including improved mood and reduced anxiety.⁸

Memory and creativity

Some use journaling as a means to capture ideas, organise their lives

and keep track of their goals. Keeping a journal helps you create order and organise your mind and offers the added benefit of improving your memory and cognitive skills.⁹ By unburdening the brain, you can think more clearly, spot patterns and unleash your creativity.¹⁰

Improved sleep and overall health

As a result of reduced stress and better mental health, your physical health will improve too. It has been found that journaling can help improve sleep and immune function, and even enhance physical health.¹¹

Some people even employ journaling as a form of meditation and a way to regulate emotions, as it causes actual changes in the brain, embedding life lessons and helping us to remember them.¹¹

Self-knowledge

Journaling is a good way to increase self-awareness. This is supported by science and personal experience.^{12,13} By using your journal to reflect on your thoughts, actions and emotions, you will be able to react more positively to the world around you.

Journaling is a way of keeping track of who we really are while shaping our own narrative, irrespective of who is listening. How many of us really understand themselves, know who we really are, what really fulfils and drives us? If we all knew ourselves better, this could be part of the chain of taking positive strides every day to make better decisions that align with our authentic selves and aspirations.

How to journal

Everyone is different and there is no right or wrong way to journal. What is advised frequently in the literature, however, is to just start and allow yourself to be your own guide. Your writings can be pages long or just a few sentences. If giving an account in a journal does not suit you, you could use other forms, such as mind mapping or a fish-bone diagram.¹⁴ Gillie Bolton is a leading authority on reflective practice and offers excellent resources for further reading.¹⁵ The following sets out guidance in steps on how to start journaling:

1. Your perception—regard your writing time as your personal relaxation time not as a task.¹⁵ It is a time when you can de-stress and unwind.¹⁰ It is time for your self-care, self-reflection and self-growth. Your personal reflection can contribute to your daily journey of growth and the gift of living life and thriving every day. You are doing something good for your mind and body.
2. Your why—identify why you wish to commit to journaling and dedicate your time to journaling.
3. Your vision—begin by writing a list outlining all the benefits you envisage journaling could bring to your life.
4. Beginning—through understanding your perception of, your why for and your vision for journaling, you can begin to journal in

order to realise the opportunity it offers you.

5. When to journal—write every day. Try to find yourself 15 minutes of protected time when you will not be disturbed. This may be challenging in the beginning, but once you have established a time this will help you with writing regularly.
6. Constraints—avoid imposing constraints such as spelling and grammar on your writing. It is your own private place to express your feelings however you will without regard to what others might think.
7. How long to write for—write continuously for 6 or 7 minutes about whatever comes to mind from your day. Write about topics or events you are reflecting on, including your thoughts and feelings that may be positive or negative. This is intended to help you learn to look further than what immediately comes to mind.¹⁶
8. Prompting questions—use these questions to help jump-start your writing:
 - When did you feel most engaged?
 - When did you feel most distant?
 - What action by another person did you find most affirming or helpful?
 - What action did you find most puzzling or confusing?
 - What surprised you most?¹⁷
9. Structure—you do not need to follow any particular structure, but if you prefer to start with some

structure, the following could guide you:¹⁸

- Define a specific situation on the basis of your answer to the questions of 'Who?', 'What?' and 'Where?'
- Describe your emotional state (How did this make you feel?).
- Try to make sense of the situation (Why did this happen?).
- Describe a possible personal development arising from this kind of situation (Could you have done something in a different way?).
- Reflect on how this realisation could be put into practice in the future.
- Try to think of the consequences of this realisation and try to encourage yourself.

10. Review what you have written, uncritically.

It is essential that patient anonymity is maintained throughout your journaling, and this is a requirement for all professional reflections and writing. Among the information that must not be mentioned is age, sex, gender, job title, ethnicity, ward or practice you saw the patient at or medical condition.¹⁹ It is advised to check with your regulatory body and indemnifier for guidance in this regard.

Conclusion

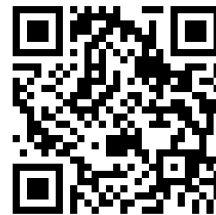
Employing journaling for professional and personal reflection could have a positive influence on the well-being of dental profes-

sionals. Patients will benefit from your enhanced well-being, so I encourage you to take the steps that allow you to focus on your well-being first. If a journal could be an opportunity for you, I would encourage you to explore it and employ it to identify your needs and make positive changes.

If you keep a journal, you are in good company! Albert Einstein, Leonardo Da Vinci, Thomas Edison, Charles Darwin and Marie Curie were a few famous journal keepers.

Editorial note: Payam Husain, a dental hygienist based in Leuven in Belgium, co-contributed to this article.

References:



Victoria Wilson

holds a BSc and a diploma in dental therapy and diploma in dental hygiene awarded by the Royal College of Surgeons of England in the UK. She has over ten years of experience as a dental hygienist and therapist, beginning in the National Health Service and private sector in the UK and progressing to the private sector in the UAE. She is passionate about her work and fully committed to oral health promotion around the world.



She founded the Smile Revolution and Smile Revolution Growth Hub, driving innovations in oral health promotion and leadership. In 2019, she launched the Smile Revolution podcast, which has over 13,000 listeners around the world, and developed the Smile Revolution Thrive, the first subscription-based platform dedicated to enhancing the well-being of dental professionals daily. In addition, she is a qualified yoga instructor and mental health first-aider.

More information can be found at www.smile-revolution.net.

Lack of fluoride in rural areas is impacting children



Since being first introduced into Australia in 1953 improve dental health, water fluoridation has been shown to reduce tooth decay by 26-44% in children and adolescents and by 27% in adults.

Now a study has found that one-third of rural towns in Victoria, Australia do not have access to fluoridated water, resulting in high levels of decayed, missing and filled teeth, particularly in children.

The study, led by Dr Virginia Dickson-Swift at La Trobe University and published in the *Australian Journal of Rural Health* found that the lack of access to fluoridated water led to people in these towns having higher than the average of preventable hospital admissions due to dental conditions in children aged 0-9 years; more than 50% of children aged 0-12 years living in these rural non-fluoridated regions had above-the-state average rates of decayed,

missing and filled teeth; and 78% of children aged 0-5 years had above-the-state average.

Dr Dickson-Swift said while fluoride occurs naturally in all Australian water supplies, in most places the levels are too low to help prevent or reduce tooth decay.

"Community-based water fluoridation is a cost-effective and equitable initiative that is supported by overwhelming scientific evidence

and internationally recognized as one of the most successful public health interventions over the past 20 years, supported by groups like the World Health Organization," Dr Dickson-Swift said.

Fluoridation of community water supplies is cost effective:

- Every dollar spent on fluoridation saves between A\$7 (£3.76) to A\$18 (£9.67) due to avoidance of treatment costs.

- Recent analyses have shown that water fluoridation in Victoria saved about A\$1 billion over a 25-year period through avoided costs from dental treatment and days absences from work/school.

- It particularly benefits children and those on lower incomes who tend to have higher rates of tooth decay and less access to dental treatment and other forms of fluoride, however there are population-wide benefits.

University of Bath graduate launches innovative smartphone app to test dental plaque

A smartphone app that scans dental plaque and can flag potential oral hygiene issues has been launched by a University of Bath Mechanical Engineering graduate.

The Testmyteeth app allows users to perform a scan of their teeth to measure the levels of plaque build-up, one of the primary causes of dental disease, and to highlight areas where users are failing to brush adequately.

The app was developed by integrated design engineering graduate James Russ, who was supported by the University's Enterprise and Entrepreneurship programme, which helps staff, students, graduates and local entrepreneurs with their enterprise ambitions. The University has a strong track record in creating spin-out companies and sharing its research expertise with the business world. In March, University of Bath entrepreneurs were shortlisted for 10 National StartUp Awards.

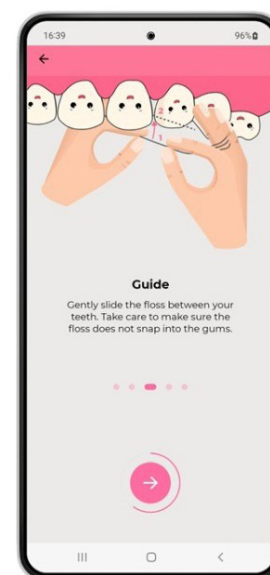
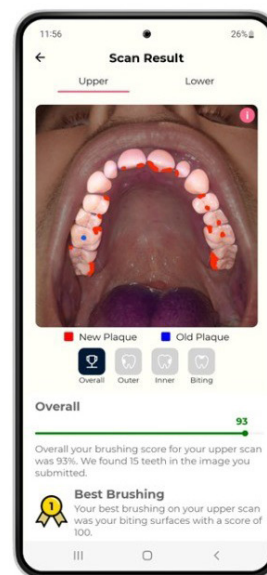
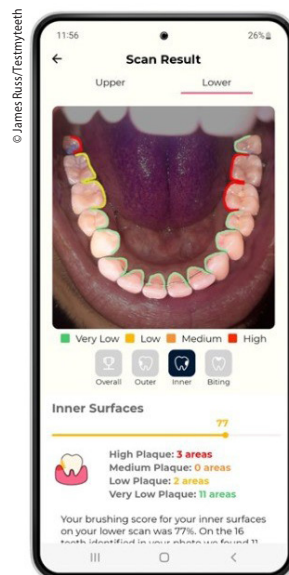
"I was in my first year of university when I had trouble with my wisdom tooth — the treatment ended

up costing over £100 of my limited student budget. This was particularly frustrating as it could have been easily prevented had I taken better care of my oral hygiene. It inspired my vision for a dental app to assist patients at home," Russ said.

He set to work on the Testmyteeth app after completing an industrial placement in the design and development team at innovative household appliances manufacturer Dyson, an experience he calls 'fast-paced and exciting'.

"Oral disease affects around 3.5 billion people worldwide and I thought it would be great to have an app that focuses on the preventative side of dentistry. Using AI, Testmyteeth will tell you areas where you have missed when brushing and highlight plaque accumulation," Russ said.

"More than that, we'll also provide educational guides on how to improve your brushing technique and what the early signs of tooth decay and gum disease look like," he said.



While his studies helped with the practical side of building an app, Russ developed his business acumen through opportunities such as Dragons' Den, part of the University's enterprise offering.

Bath students pitch their start-up to a panel of alumni donors for investment but, unlike the television show, there are no equity or stakes taken. He said the experience gave

him the confidence and the means to turn Testmyteeth into a reality.

"Additionally, since graduating, I was granted a University of Bath Alumni Innovation Award and that's been a game-changer. It enabled me to work on the business full-time, teach myself full stack app development, and build the AI which drives the app. The support has made such a huge difference

to what I've been able to achieve in a year," he said.

Russ joined business leaders, academic experts and student entrepreneurs at the University's second annual Enterprise Day event in March to share business and research expertise, and showcase their start-up successes.

A new first step in transformative orthodontics for young children

Interceptive orthodontic treatment or two-phase orthodontic treatment, begins while the child is still growing, and has most of their primary teeth. The goal is to direct a child's growth and development in order to amend or prevent problems with the size, position or spacing of the teeth or jaws, so that further orthodontic treatment to align the teeth is easier down the road. In cases like a severe under bite or overbite, for example, when the face and jaw are fully developed, it is much harder to manipulate them and get optimal results, and waiting until adulthood could mean the need for jaw

surgery or extraction of adult teeth.

Specialist orthodontist Dr Neil Counihan is one of only a handful of UK specialists offering a new, pioneering and contemporary interceptive treatment for young children using Invisalign First clear aligners rather than more intrusive braces. These are specifically designed for early intervention in younger patients with a mix of primary and permanent teeth.

According to Dr Counihan among the orthodontic issues Invisalign First can successfully treat is protruding teeth: "If a child has a trauma-prone profile, they have a high incidence of damage to teeth. If they chip or crack their teeth, or in the worst case, require endodontic treatment to save the tooth, we know that the lifespan of that tooth is significantly shortened."

Dr Counihan graduated from King's College Hospital, London in 1988 and he went on to study at the prestigious New York University in the US. His knowledge and skill with non tooth extraction and pain-free treatment for children and adults have helped to establish his reputation as one of the country's leading orthodontic

specialists. He is a regular international speaker and lecturer and judge of the Private Dentistry Awards.

Says Dr Counihan: "Invisalign First offers me more options to treat children permanently without having to extract teeth. It allows me to treat younger children, manage the eruption of permanent teeth and, significantly, achieve predictable expansion of their jaws while they are in a growing phase. All this is achieved with comfortable and discrete clear aligners rather than old fashioned twin block braces which are intrusive, uncomfortable, affect the speech and have a doubtful compliance level."

The treatment was developed building on the same proven Invisalign clear aligner technology, comfort and convenience developed by Align Technology for adults and older teenagers.

Rather than using putty impressions, Dr Counihan explains that Invisalign First treatment begins with an iTero intraoral scan to create a digital 3D impression of the child's teeth, followed by a series of clear aligners.



"It helps that I'm able to show both children and their parents a vision of what their teeth will look like at the end of this phase of their treatment and give them a definite time period in which this will be achieved. If the Invisalign First system says treatment will take 20 weeks, it will take 20 weeks. So far we've had exceptional results: The children enjoy wearing their aligners and they can see the improvement week by week which encourages them to comply."

Dr Counihan underlines that Invisalign First might not be an applicable treatment for every child but is particularly suited to com-

plex orthodontic cases requiring specialist expertise. "I'm really impressed and pleased with the results that I've achieved for my Invisalign First patients. I believe it is changing orthodontics and means we can now correct severe malocclusions earlier in the child's growth cycle.

He encourages concerned parents to make an appointment directly with him at Twoth, the newest dental and facial aesthetics practice in London's St John's Wood: visit <https://twoth.com> or call 0204 538 6330.



Dr Neil Counihan