Dear reader,

“It’s about time”

Daniel Zimmermann

Recently, a report by the US National Intelligence Council made its way into headlines around the world, forecasting that the current financial crisis on Wall Street is just the first phase of a global economic reordering, with the United States in decline and countries like China and India competing for more influence in a multipolar world. Global wealth was also seen as shifting from the developed West to the energy-rich Gulf States and beyond, as well as to Asia, a rising centre of manufacturing and service industries.

With a new presidential agenda in the United States, it might be hard to predict what is going to happen in the years to come. Maybe Barack Obama will become a great president who will help markets to re-establish and sustain America’s post-cold war role. Perhaps he will be hindered by the political and financial constraints that the politics of his predecessor leaves behind. More predictably, whatever the outcome of his politics, he won’t have much to play with on the international field.

In dentistry, we are already experiencing these developments and we are not just talking about China’s steady rise to a dental laboratory superpower. In most Asian countries, the majority of dentists are only professionally educated, but also eager to stay up-to-date with the latest technical developments in the field. They also have state-of-the-art equipment at their disposal. Nowadays you will probably find more dental practices with the latest equipment and more treatment options in Singapore or Shanghai than you will in a practice in New York, Sydney, or Auckland. In addition, local manufacturers, especially those from China, are constantly gaining more market shares, not only in their domestic markets, but also internationally.

A Wall Street Journal article recently said that more and more insurers and employers in the United States are offering their clients and staff medical or dental treatment in countries abroad (see an article in Medical Tourism). A new opinion for patients in the U.S. Dental Tribune Asia Pacific, 9(2008)8). This shows that, even in the US, people are increasingly considering the Asian continent as rising superpower in general, and particularly, in dental health care. Asian dentists should be aware of this. They could soon be on the forefront of shaping the future of the profession.

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US president elections: Change is in the air

Janet Kopenhaver

By now, everyone knows that our 44th President will be Sen. Barack Obama (D-IL). Having won a projected 365 electoral votes (270 are needed to actually win), the Senator can also boast that he received over 50 per cent of the popular vote (about 52.6 per cent). He is the first Democrat to be elected in 1976. The President-Elect overpowered his opponent Sen. John McCain (R-AZ) in several key states, including Ohio, Florida, Virginia, and Pennsylvania. The Democrat easily won most of the Northeast, the Rust Belt, the West Coast, and the Mid-Atlantic States, which normally back Democrats.

President-Elect Obama has already listed his top priorities to tackle upon taking office. They include an economic recovery package that would include middle-class tax relief, followed by energy issues. Third on the list is health-care reform; fourth is tax restructuring; and fifth, education. With the recent announcement of his economic team, Obama is already beginning work on his first priority.

In the Senate, Democrats also scored well, but did not reach the magic number of 60 seats required to control the Senate agenda entirely. However, they did pick up seven seats (Alaska, Colorado, New Hampshire, New Mexico, North Carolina, Oregon, and Virginia). Two elections are still pending (Minnesota and Georgia). This leaves the breakdown at 56 Democrats, 40 Republicans, and 2 Independents (who usually side with the Democrats). So the Democrats basically hold 56 seats. It is not anticipated that they will win both the pending Senate seats, but they do have a good chance of picking up at least one.

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In the House of Representatives, it is anticipated that the Democrats will pick up at least 20 seats. This will result in 255 Democrats and 174 Republicans in the House for the 111th Congress. Six elections are still pending a decision.

Overall, there will be more than 60 freshmen in the new Congress. Interestingly, of the Democrats, more than one-fifth will be considered moderate. Therefore, in order to move initiatives quickly through both congressional chambers, Democratic leaders are going to need the support of the moderates, which could result in major legislative reform issues being more towards the centre than the left on the political spectrum. This would be especially true with respect to any major health-care reform package.

Obviously, the challenges confronting the new president and Congress are huge. Democratic leaders therefore might focus on some smaller victories during their first 100 days. It is widely predicted that one of the first pieces of legislation that might be passed in January/February is an expansion of the State Children’s Health Insurance Program (SCHIP). This would likely include more funding, as well as an expansion of the programme, to allow families with higher income levels to be eligible. Also high on the list is a reversal of President Bush’s Executive Order imposing strict limits on stem cell research.

Although the word ‘change’ has been used far too often during this election process, it does seem obvious that there will be change coming from Washington, DC. The President-Elect is diametrically opposed to many of the policies of the current president, and he will seek to make his mark early on in his Administration by signing into law his own priorities.

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Successful implant treatments

Janet Kopenhaver

Although Implant Studies go back 40 years, implants are a relatively recent development in dentistry and have only really become commercially available for the past ten to fifteen years. Many dentists practicing today completed their initial training before implants began to feature in general practice. Nevertheless, it’s important in the context of overall public oral health as well as for the individual patient that this treatment option is available when it represents the optimum response for tooth replacement.

There are a number of training routes open to those seeking to expand their knowledge and skills in implant dentistry. A formal, university-based course can only cover the ideal but spaces are limited, and working practitioners may be deterred by financial and time constraints. Personally I found that formal training suited my purpose better than the other courses available.

For those whose responsibilities preclude full-time study, part-time courses offer a viable alternative and include mentoring programs, where a fellow professional with the appropriate experience offers guidance throughout the training process and during the novice’s first case. There may also approach implant suppliers, such as Biolhorizons, whose representatives travel to dental units or offices and deliver training in the safe and effective clinical application of their products and protocols.

The most valuable time is spent planning the proposed implant treatment. My own experience shows that the value of adequate time for careful planning of every case prior to starting treatment. As with most practical skills, experience is vital, thus intending implant practitioners should expose themselves to as much implant dentistry as possible, starting with simple ones before progressing to more complex cases. Doing this rapidly improves both technique and confidence.

For those considering a career as an implant specialist, the best advice is to undertake a dedicated, institution-based training course; for GDPs merely wishing to add a new dimension to their existing practice, the part-time option is likely to be the more cost-effective and practical introduction. Whatever the choice, all dentists today have a responsibility to acquire sufficient knowledge of implants to offer informed advice to their patients, and to be able to refer them to the appropriate specialist when they lack the time or expertise to perform the treatment themselves.