“The global dental industry is in the midst of a transformation”

An interview with Sirona President and CEO, Jeffrey T. Slovin

In September this year, DENTSPLY International and Sirona Dental Systems announced that they have entered into a definitive merger agreement, creating probably the world’s largest dental manufacturer, DENTSPLY SIRONA. Dental Tribune spoke with Sirona President and CEO, Jeffrey T. Slovin, who will assume the role of CEO of the newly combined company, about the merger and its impact on the global dental market.

Dental Tribune: Both Sirona and DENTSPLY have been operating successfully in the dental market for several decades. Why did the companies decide to join forces and how will the companies benefit from the merger?

Jeffrey T. Slovin: I am really excited about the merger and so are the dental professionals, distributors, patients and employees from around the world to whom I’ve spoken.

DENTSPLY and Sirona both have strong commitments to innovation and research and development. As you know, the global dental industry is in the midst of a transformation. The market is moving toward more integrated solutions and practitioners across the globe. Furthermore, many practitioners in new emerging markets are rapidly adopting digital dentistry. Combining DENTSPLY and Sirona will create the world’s leading manufacturer of professional dental products and technologies, strengthening our collective ability to be at the forefront of key industry trends, help dental professionals improve patient care and grow our business.

The merger is expected to be completed in the first quarter of 2016. Which regulations or closing conditions could still prevent a definitive merger process in the first quarter of 2016? There are, as with any transactions, certain regulatory approvals and other customary closing conditions that we must achieve first. These include anti-trust clearance in the US, Europe and other countries, all of which are outlined in our SEC filings. We are confident that we will receive these approvals and the approval of our shareholders and we look forward to closing the transaction. Until then however, both DENTSPLY and Sirona will continue to run their business as usual as separate entities.

Are you looking into opportunities to acquire other dental companies? Right now we are focused on continuing to run the business and execute our Sirona strategy successfully. We are also working toward closing the merger with DENTSPLY. Our future is full of opportunity and we are working hard to deliver on that promise to our employees, patients and the entire dental community.

Thank you very much for this interview.
Deviation between implant positions found

By DTI

HANGZHOU, China: In measuring the effect of surgical templates on the accuracy of implant placement, a Chinese study recently found that actual and planned implant positions varied significantly. According to the researchers, errors in computer-guided implant surgery are caused by either the operator during surgery or the surgical template preoperatively.

In order to evaluate the effect of surgical templates on the accuracy of implant placement, jaws from 16 patients were scanned using cone beam computed tomography (CBCT). Fifty-three implants were planned in a virtual 3-D environment, of which 35 were placed in the mandible and 18 in the maxilla.

For the analyses, a stereolithographic surgical template was created. The template was then fitted on a plaster model and both were scanned with a CBCT device. The images obtained were matched to images of the virtual planned implant position. The actual implant position was acquired from the registration position of the surgical template.

In comparing the data, the researchers found significant deviation between actual and planned positions caused by the surgical template. The mean central deviation at the hex and apex was 0.456 mm and 0.515 mm, respectively. The mean horizontal deviation at the hex was 0.193 mm and at the apex was 0.277 mm. The mean vertical deviation at the hex was 0.388 mm and at the apex was 0.390 mm. The mean angular deviation was 0.621°.

The results of the study indicate that clinicians should not rely solely on the safety of surgical templates in seeking to avoid critical anatomical structures.
“Must have been a rough year.”

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LONDON, UK: The latest government figures estimate that one in ten people in the UK suffer from dental anxiety. New research from King’s College London involving pre-treatment use of cognitive behavioural therapy (CBT) has shown that the method is largely effective in helping patients overcome their fear of treatment.

In a study involving patients suffering from high levels of dental phobia, the researchers found that the overall majority were able to undergo treatment without sedation after having undergone therapy at the Dental Institute Health Psychology Service at Guy’s and St Thomas’ NHS Foundation Trust. Only six per cent of the patients surveyed had to be treated with sedation.

“Our study shows that after on average five CBT sessions, most people can go on to be treated by the dentist without the need to be sedated,” said Tim Newton, lead author and Professor of Psychology as Applied to Dentistry.

A short-term therapy, CBT has been shown to help with depression and a number of anxiety-related disorders, such as obsessive-compulsive disorder and bulimia. Typically, over six to ten sessions, a therapist aims to help patients change their feelings and behaviours by restructuring their thinking and breaking negative thought cycles.

According to the researchers, the most common anxiety-inducing factors in the study were identified as drilling and having an injection.

Newton recommended that, despite the positive outcome, CBT should be viewed as complementing sedation services rather than as an alternative, the two together providing a comprehensive care pathway for the ultimate benefit of patients. Furthermore, patients should be carefully assessed by trained CBT practitioners, since they could be suffering from additional psychological conditions.

Over one-third of those patients surveyed in the study showed signs of general anxiety, while one in ten had depression or suicidal thoughts.

“CBT provides a way of reducing the need for sedation in people with a phobia, but there will still be those who need sedation because they require urgent dental treatment or they are having particularly invasive treatments,” Newton said.
“Dentists can use social media as a very powerful tool”

An interview with book author Sara Natt och Dag, Sweden

Just as social media has become a part of everyday life, so too has it entered the health sector. With patients blogging about dental visits and practitioners promoting their business on Facebook, a number of legal and ethical issues arise.

Could you describe how social media in health care.

Dental Tribune had the opportunity to speak with book author and health counsellor Sara Natt och Dag about the possibilities and risks entailed in the use of social media in health care.

Could you describe how social media has found its way into the health sector over the last several years?

Sara Natt och Dag: In Europe, social media began to influence health care maybe seven or eight years ago, whereas in the US it started maybe ten years ago, and its importance is growing exponentially. It has become normal for health care and social media to be interlinked. In Sweden, for example, the e-health sector already plays an important role. From scheduling a doctor's appointment to ordering medication, one can do virtually everything online.

However, the dental industry appears to have been a bit slower than the rest of the sector. The importance of social media in dentistry has exploded in the last year especially. Although there is probably no such thing as private dental blogs, dental topics are creeping into the lifestyle industry with people writing about orthodontic and aesthetic treatments to a large extent.

So, there is a great deal of information—both professional and personal—available on the Internet. In the Western world, most people have access to the Internet at home and virtually everywhere. Thus, they have access to unlimited information from all over the world. However, regarding health, it is natural to share their personal experiences. Medical professionals can take advantage of this as a way to better understand and familiarise themselves with what patients are doing and thinking.

Would you agree that this trend has great potential, both positive and negative?

Yes, absolutely. If a lifestyle blogger writes about his or her dental appointment, with the name of the dentist tagged, and does that several times, the dentist will rank higher in search engines. Even one person can make a difference—is that not crazy?

A blog can offer support and comfort to terminally ill people, but this frankness certainly poses new challenges for health care professionals. I meet many sick people who run blogs and always advise them not to write when they are upset or disappointed. Instead, I tell them to talk to the doctor or the nurses about their feelings instead of posting it online.

In other areas, as I mentioned earlier, health topics are starting to overlap with lifestyle topics. One can find review videos for whitening strips on YouTube, people talking about their latest dental appointment on Facebook and so on. For many young people, it is natural to share their personal experiences. Medical professionals can take advantage of this as a way to better understand and familiarise themselves with what patients are doing and thinking.

As a counsellor at Karolinska University Hospital, you have met many of these disease bloggers and even written a book, Den bloggande patienten (The Blogging Patient) (2013), on the subject. What is it that makes people turn to the Internet with their health issues?

A Swedish lifestyle blogger just recently wrote about her dental treatment and how fantastic her dentist is. She has about 200,000 readers, so you can imagine what happened. The dentist, in turn, published a link to her posts on the clinic website, because he was proud of being mentioned by an online “celebrity”. This demonstrates the interconnectedness of social media channels—which can be very good and also very bad for one’s reputation, depending on what was written online.

Focusing on the advantages: how can dentists use social media most effectively to promote their business?
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“Dental topics are creeping into the lifestyle industry with people writing about orthodontic and aesthetic treatments to a large extent.”

If practitioners do have permission from the patient, they cannot share case details online, not in health care. At least, it is illegal in Sweden.

What should be taken into account then? What is your advice for practitioners?

It is as simple as thinking before publishing online. Dentists who remain aware of their professional status at all times can use social media as a very powerful tool.

But if dentists are not allowed to discuss cases and patients in particular, what could they write about online?

They should promote themselves instead. Introduce themselves (including their education), their practice and the staff. It is all about standing out from the crowd and showing some personality. They could write about their travels to conferences, for example, send out Merry Christmas wishes, introduce new tools that they have bought for the practice, basically, it is about staying in touch with patients. One does not have to post daily, but if one writes regularly, maybe once a week, it can be an excellent way to promote one’s business.

Still one has to draw a definite line between one’s professional and private lives. One’s business page is not the place to discuss one’s children, one’s last holiday, or feelings or personal opinions regarding one’s patients. In social media, just like with any professional doctor–patient relationship, it is all about defining boundaries and maintaining them.

How should health care professionals best respond when patients cross these boundaries and write harmful comments online?

I am sure some people choose to ignore these instead of confronting the writer. Personally, I would rather address the matter directly. However, I know many colleagues who rather not respond. From a legal point, it can be difficult to erase negative comments from Facebook or the Internet in general, so maybe it is best to settle the issue privately. Still, one has to draw a definite line between one’s professional and private lives. One’s business page is not the place to discuss one’s children, one’s last holiday, or feelings or personal opinions regarding one’s patients. In social media, just like with any professional doctor–patient relationship, it is all about defining boundaries and maintaining them.

In the US, many dentists publish dental news, research data and practice information on their personal blogs too. Do you think Europe will follow that lead in the future?

I do not necessarily like that approach, but I think Europe will eventually follow suit. Bloggers have already started to do just that and further changes towards an “Americanisation” of sorts can be expected.

Thank you very much for the interview.