DDU reveals top five reasons for dental claims

The Dental Defence Union (DDU) has revealed the five areas of dental treatment which lead to the most claims for compensation, with extractions being the commonest cause of claims.

During 2017, just five aspects of dental care resulted in 80% of claims notified by general dental practitioners to the DDU. Extractions accounted for around a quarter (24%) of all claims, followed by root canal treatments with a fifth of cases (20%) and caries and fillings with 17% of claims. In fourth and fifth place respectively were claims for periodontal disease (10%) and for implant treatment (9%).

However, the DDU says that while dental professionals can expect to face three clinical negligence claims in a 30 year career, only a minority of cases succeed. During 2018, the DDU's expert advice and guidance resulted in 69% of dental claims being

successfully defended without the payment of compensation.

John Makin, Head of the DDU said: 'A lot has changed in the dental landscape in recent years such as the popularity of cosmetic treatments and technical advances in orthodontics and endodontics. Despite this, many of the allegations of clinical negligence made against DDU members relate to routine aspects of treatment such as extractions and fillings.

'If you face a claim you can be assured that our expert claims handlers and dentally qualified dento-legal advisers understand how stressful this is and the importance of mounting a robust defence of your position. Even though dental cases are often carefully selected by firms specialising in dental claims, we have an excellent track record of successfully defending cases and in the majority we make no compensation

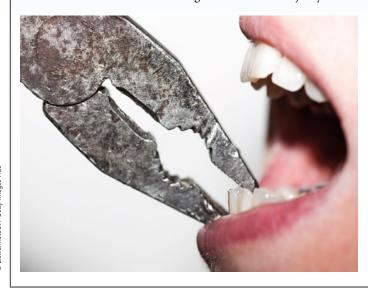
payment.

'Nevertheless, there are steps dental professionals can take to minimise risks if they understand where issues can arise.'

The DDU's advice to help dental professionals reduce the risk of issues which can lead to claims includes:

- → When obtaining consent take time to explain to patients, as part of the consent process, the material risks of treatment and the alternatives, including no treatment.

 Make a careful note of the discussion in the clinical records
- → Provide a written treatment plan and fee estimate and be sure to warn patients of the cost implications if circumstances change
- → Recognise the limits of your own clinical skills. Be prepared to refer the patient to an appropriate colleague if complications are likely, or if the patient has a complex history
- → Follow available relevant guidance to make sure your treatment would be supported by a responsible body of clinical opinion
- → Ensure patients understand the importance of looking after their own oral health. Record advice provided to patients about diet, oral hygiene, attendance patterns and factors such as smoking, drinking, medications and comorbidities
- → Be open and honest with the patient if an unforeseen complication or error occurs during treatment. You should immediately tell the patient (or their representative), apologise, and offer an appropriate remedy or support to put matters right, if possible. Explain fully to the patient the short and long-term effects of what has happened
- → Get early advice from the DDU or your own dental defence organisation if you need support with an incident which might lead to a claim.



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