Debunking digital myths

David Westgarth

Editor, *BDJ in Practice*

If you know someone who had to manually tune in their TV, they're probably quite a rare breed. These days you plug the thing in and it does it for you. It's so much simpler and you wonder how you ever had the patience to manually tune it before. Yet for those who do still manually tune their TV, they will still get the same channels as those who leave it up to the digital gods.

The same could be said of those who have fully digitalised their workflows in the dental practice. They will still get the same results as single-handed practitioners who have yet to get on board.

Or will they? I asked **Marcos White**, Practice Owner of the Courtyard, about this and other digital myths.

Why are there still so many questions about digital vs 'analogue' dentistry?

MW People like the safety of doing what they have always done. Like with anything,

behavioural change is key. We still have many practitioners who are giving themselves good reasons to remain in their comfort zone.

But as we know, in particular through this pandemic, we have all witnessed a change of mentality towards digital. People across all age groups now recognise the fact that digital, and the innovations it brings, usher in improvements.

I often hear practitioners tell me digital dentistry isn't possible on the NHS. Is that true?

MW No. But I think the question over simplifies the landscape. The truth is most NHS practices these days are 'mixed' practices. And mixed practices offer choices to patients. Choices about materials for fillings, dentures and crowns. Should a patient in a mixed practice choose a private option then it is because they have seen in their case, an advantage in the private option.

An intra oral scanner not only helps that communication process by allowing a patient to see their own teeth on screen, it also provides a tool to deliver more accurate, more predictable, more guided restorative or orthodontic treatment. Exactly the kind of

compelling reasons why a patient would elect to choose a private treatment option.

What do you say to people who tell you they can't afford the expenditure?

MW We are in our seventh year of digital. I have experienced my own digital journey and people often like to hear how you've made your own decisions along the way. If you go digital, you don't have to buy dental putty or impression trays anymore. You therefore look at the cost savings that can be brought to you by your investment.

On the one hand, you need to look at what you can possibly save, and on the other hand, you need to see whether you will be able to add to practice revenue as a result of this digital investment.

Any investment decision needs to be scrupulously assessed with a business case for it to see if you can get a real return on investment. What you are not going to be able to calculate however are the benefits linked to efficiency within the practice. I am talking about the fact there is no longer a member of staff having to take an impression, place it in a sterilisation bath, and go through the process of putting it in a box and in a bag and

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posting it to the lab. Instead it is now just carried out at a click of a button. Quite a few of these processes which are eliminated by digital cannot initially be factored in a spreadsheet but you will see these when you evolve into digital.

For the people who think they cannot afford the expenditure, I would advise them to start working on a business case with a spreadsheet, make them reflect on how the digital workflow would look from their perspective. If they put that investment on finance and they figure out how much the monthly cost is going to be for them, they will very quickly be able to justify it.

When we did our spreadsheet exercise we realised that with our implant treatments there were costly disposable components we no longer needed to buy anymore when going digital – the scanner we bought paid for itself in our first year, for example.

When you go digital, you need to commit to digital and have to use the scanner to get the return on investment, that means committing to changing habits within the practice. Align Technology with iTero are very good at putting the infrastructure and rep support behind to help with that transition. Ultimately it is about trying to change 20, 50 or 100 years of what dentists have been used to doing. That's where the hard work and commitment comes in!

'Digital is for the new wave of practitioners'. Do you agree with this assessment?

MW If you go back through the decades, dentistry has been defined by certain leaps forward. You can recollect the composite era, the advent of implants, followed by surgical guided implantology. These defined the

most forward thinking dentists. We are now becoming defined by the digital era.

The things that set innovative practitioners apart is how committed they are to digital and how much it permeates everything they do. Up until now, we were focusing on the orthodontic and restorative cases, but now at The Courtyard we scan every one of our registered patients and assess their dentition on screen through a process of co-discovery which means the patient feels and sees the scrutiny we are giving to their care in a way they have never seen before. Looking at every aspect of gingival health, dentition on the screen, it completely changes the process. Patients experiencing that will never want the old way again. So, yes there is a new wave.

How can a practice transition to fully digital workflows in the current climate?

MW The current climate has nothing to do with it other than you have to be at your most efficient. Surgery space, fallow time, etc, impact on how we can put patients and their treatment through our practice, so we have to be focused on efficiency at every turn and digital allows that. The minute we came back from lockdown, we wanted to upload the dentition of all of our patients. So if someone was calling us about a broken tooth, theoretically we could look at the scan on screen and treatment plan in advance of them attending to make that process ultra-efficient.

Everything about digital has always been about efficiency, efficiency in communication, and about a more profound level of communication. Consider a dental chart on a screen: it is really just a collection of shapes and symbols on a screen. Compare that to an actual 3D image that you can rotate on screen. The difference is mind blowing. These advances will make 'traditional' record keeping feel like the brown record keeping card of the late 20th century.

So the answer really is how can a practice NOT transition in the current climate when digital proves itself in every other area of our lives.

'Digital jeopardises labs and technicians'. True or false?

MW This question highlights the misconception and misunderstanding of this. iTunes threatened the long standing record market essentially because the industry was trying to ignore the evolution happening around it. Now that streaming is the accepted norm, more people listen to music than ever

before, thanks to digital. And it is the same story, right now, in dentistry. The problem is that certain labs which have entrenched analogue ways of working are threatened by digital.

The labs which have innovated early using digital techniques report a time saving that is transformative. So for a digital lab, it is more profitable when they receive a digital scan. And interestingly, a lot of labs are helping and trying to turn that way and even encourage dental practices to go digital for that very reason.

So digital does not jeopardise labs and technicians unless you are talking about labs and technicians who do not want to evolve. Otherwise it is a win win win. Labs can produce better products at lower costs.

Dentists get a more cost effective, more accurate crown at their end. The other important winner being the patient of course!

Further advances come when labs and dentists understand the new workflows. One of our dental designers moved back to Poland and now has everything he needs to digitally design in his home. We had an incident where a patient broke their implant bridge on a Sunday. We emailed Peter our designer and he designed a new version which he sent over to us that night. We 3D printed it the next morning and fitted it at 11am. Costs were negligible, impact to the patient immeasurable. When the broader population understands they can work this way, they will not hesitate to join the digital wave.

A decade from now, what will digital workflows look like?

MW I hope it is going to look like what we already experience at my practice every day. Neat, efficient workflows with cost effective templates and models. When proven workflows are in place, we elevate dentistry, we elevate the delivery to the patient and we make everything more predictable.

A decade from now, it is my aspiration that we are able to take the elitism out of complex restorative dentistry. The 'science' and digital protocols will level the playing field for patients and dentist alike. At least that is what I would like to see happen.

We'll know when we're there when we no longer talk about a new wave of practitioners, as digital will have become the standard accepted protocol and 'digital' dentistry will just be 'normal' dentistry.

Just with more efficiency, improved outcomes and elevated clinical record keeping as well! ♦

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