EDITORIAL

Alignment

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I am not sure if it is a case of one's words coming back to haunt one or of many a true word being written in jest but recent developments in the delivery of oral care have spookily mirrored a tongue-in-cheek editorial that I wrote for the Christmas issue in 2017.¹

In that piece I suggested that technological developments, but as importantly the application of such developments, are set to overtake our traditional view of the way in which dentistry is practised. One of my (then) fictitious examples was the loan of intra-oral cameras to patients so that they could mediate dental check-ups at a distance. As an aside, no sooner had this been published than I had an email from an entrepreneur asking to be put in touch with the company. I let the author down gently and smiled to myself but perhaps I smiled too soon. Interestingly our regular columnist on ethical matters, Shuan Sellers, picked up on a similar theme recently, going a stage further and suggesting that caries detection technology might in due course find its way into toothbrushes.²

It is perhaps slightly surprising that it is orthodontics, or maybe more precisely tooth movement, rather than caries that has surfaced as the most recent and very current conundrum in relation to the controversial application of new technology. The widely advertised and publicised availability of aligners (note, not braces) is not unexpectedly drumming up a storm amongst orthodontists both in the UK and elsewhere in the world. The customer (?) either visits a 'shop' for a 3D oral image, or requests a remote kit be sent to them, following which a review by a 'UK registered dentist or orthodontist' will guide the smile plan thereafter. Simple. Or is it? To begin with, how safe is it? How is it regulated, if at all? Does it amount to the being the practise of dentistry, because if it does then the regulatory body, the good old General Dental Council needs to adjudicate; and I believe

they have the matter under consideration currently. After all, it is what we pay them for, our annual retention fees going to fund their fundamental purpose of protecting patients.

It is not necessary to be an orthodontist to question the extent to which this process potentially undermines the value of a full assessment of a patient for the possible requirement and application of tooth movement. This might reasonably be expected to include radiographic evaluation, dental, medical and social history (any amount of research points to the necessity of motivation for successful orthodontic treatment outcome), to name but a few of the tests, checks and balances. Not to mention the clashes over the possible need for life-long retention now decisively knocked

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off the number one spot in the top ten list of orthodontic controversies by the provision of digital dental deliveries to your door. In the UK it is fair to say that orthodontists are a very well organised and professional group of practitioners; the fact that they are often referred to as the 'orthodontic establishment' neatly summarises the status they are accorded and respect in which they are held. The point here being that if this bastion of professionalism can be so seemingly, deftly undermined what hope might there be for the raggle taggle bunch of the rest of us?

If it seems that I have issued these warnings previously I do so again not in the angst of 'I told you so' but in the spirit of 'beware and be aware'. For it is not only

technology that nibbles away at the periphery of our previously apparently comfy existence. I am also led to understand that moves are afoot to recruit dentists from countries such as India to come and work in the UK. While there is nothing especially new or remarkable about that, the latest twist is that they are being recruited to fulfil roles as dental care professionals, primarily dental hygienists and therapists, pending application to take the Overseas Registration Exam to become registered as dentists. Again, something of a sleight of hand in relation to the way things have been conducted in the past.

In each of these instances there are reasons of economics, shifts in the views of society and changes in the regard of professions that have led to them bubbling to the surface.

Nevertheless, the fact remains that they are twists that we need to build into our own plans and well-worn analyses of strengths, weaknesses, opportunities and threats if we are to continue to thrive and prosper. I wish I could offer you a service whereby you popped into a premise in your nearby high street allowed someone to scan your business plan and then have an expert review it and send you periodic updates to align your future. Sadly I cannot... but it does me give an idea. ■

<https://doi.org/10.1038/s41415-020-1288-1>

References

1. Hancocks S. 'Appy Dental Christmas. Editorial. *Br Dent J* 2019; **223**: 865.
2. Sellers S. The rise of machines. *Br Dent J* 2019; **227**: 947.