The future of dentistry



Background

Dentistry has fallen foul of increased bureaucracy, heavy touch regulation, chronic underfunding, salary reductions, increased medicolegal awareness of patients, resulting in unprecedented levels of stress and low morale in the profession, aggravated by uncertainties over future contracts and commissioning, how the new government will address the unacceptable epidemic of oral disease affecting the most vulnerable citizens and the impact of Brexit.

Stand (fight) together for change, or continue down the slippery slope

Dental futurology

The future is what we make it!

Nobody else is going to do dentistry any favours

A professional responsibility to realise future potential in the interests of patients and the profession, let alone the time you have remaining in dentistry and your legacy.

The view of millennials

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82% satisfied/extremely satisfied with career choice
82% intend to work within general practice
71% intend to 'specialise'
2% to provide NHS care only - "the art of the impossible"
87% anticipate mixed practice, with emphasis on non-NHS care
52% plan to practice part-time 15 years after qualifying
38% plan to retire from clinical practice/dentistry by/before 60
              Puryer and Patel Brit Dent J, 2016;220: 183-186
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Trend: Younger, more highly qualified, diverse profession with

ambitions and high expectations, but reduced long term

commitment to clinical practice and leadership, unless...

Reasons for optimism

Anticipated growth and changes in population Growing importance of dental attractiveness 'Halitophobia'

Growing realisation of the importance of oral health
Growth and potential in the business of dentistry
Trends in public attitude to dentistry
Anticipated expansion in the scope of practice
Increasingly internationalisation of dental care
"No other healthcare profession can match the future potential of dentistry"



WARNING!

There are known knowns. These are things we know that we know. There are known unknowns. That is to say, there are things that we know we don't know. But there are also unkown unkowns. These are things we don't know we don't know



Donald Rumsfeld

The dentist of the future

Oral health expert skilled in holistic care and leadership Communicator - in a multicultural society Collaborator – interprofessional, shared care of patients Health advocate - promoting self help and prevention Scholar/researcher/teacher – proactive advancement Professional – modern ethics and professionalism Council of European Dentists (CED), May 2017 Wilson NHF, Future-proofing educational guidance BrDentJ, 2016; 221: p209

Dental workforce development

Oral clinical specialists (OCSs) dentists, typically with 'tiered' special interests and expertise

Oral healthcare providers (OHPs) (hygienists) therapists and clinical dental technologists - "mid-level providers"

Oral healthcare team members (OHTMs) dental nurses, dental technologists, practice managers, receptionists and other support staff

Fejerskov et al., 2014

A primary qualification in dentistry is increasingly viewed as the end of the beginning

The dental team

Dentists, dental therapists, dental hygienists, clinical dental technologists, digital dentistry technologists, dental nurses, treatment coordinators, practice managers and...





Trends in practice arrangements

Corporatisation – Federations – Cooperatives Oral health centres - Transnational practice

Corporatisation





WHO Framework for action on interprofessional education and collaboration



Health screening, counselling and vaccine administration are set to become integral elements of the dental contribution to the shared care of patients

Trend: Dentists becoming as much oral physicians as dental surgeons

Interprofessional working



Shared care of patients

Wilson NHF & Soni A Interprofessional working: a spearhead opportunity for dentistry and pharmacy. BrDentJ, 2016; 221: 607- 08

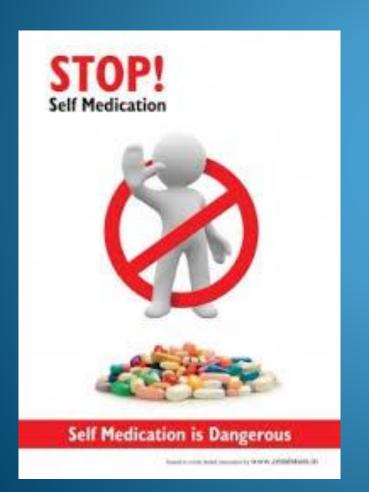
Global trends in the clinical practice of dentistry

A rapidly changing field of hi-tech healthcare provision

The rate of introduction of new concepts, technologies and management strategies is set to continue to increase –an upward trajectory trend



Self-medication



"Tests for the early of dental caries (and periodontal disease) will soon be available over the counter, together with self-medication therapies"

Amid Ismail, 2016

Minimal interventive dentistry

Risk assessment and diagnosis

"The effective application of risk assessment should largely eliminate the need for the diagnosis of disease."

"The need to diagnose disease is an indication that risk assessment strategies have failed"



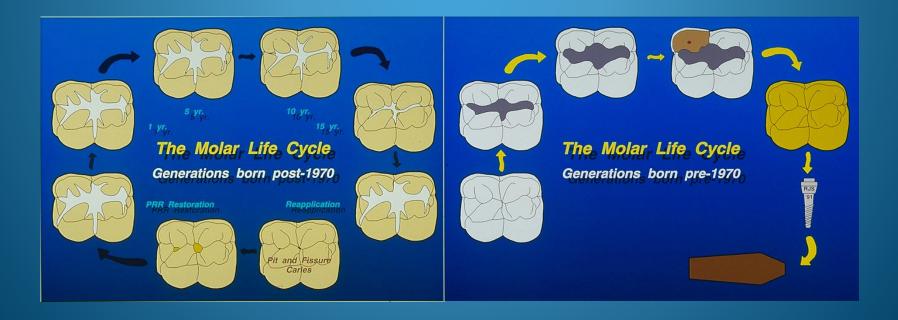




Patient-centred, preventatively orientated minimal interventive

care

Dawson AS & Makinson OF, Dental treatment and dental health. A review of studies in support of a philosophy of minimum intervention dentistry. Aus Dent J, 1992: 126-132



Scope of PC MID-MIC-MIM



Clinical excellence vs. quality of care



Endodontics vs. Implant dentistry

Regenerative Endodontics

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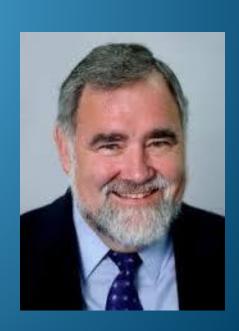


July 2012 • Volume 56 • Number 3

"... a call to action to revisit the long history of success of tooth maintenance to preserve the natural dentition without the rush to extract teeth and replace with implants."



Giannobile, WV & Lang NP J Dent Res,2016:95:5-6



Bridgework vs removable prosthodontics



Crownwork vs veneers and onlays









Crownwork vs veneers and onlays

Pulp-Dentin Biology in Restorative Dentistry

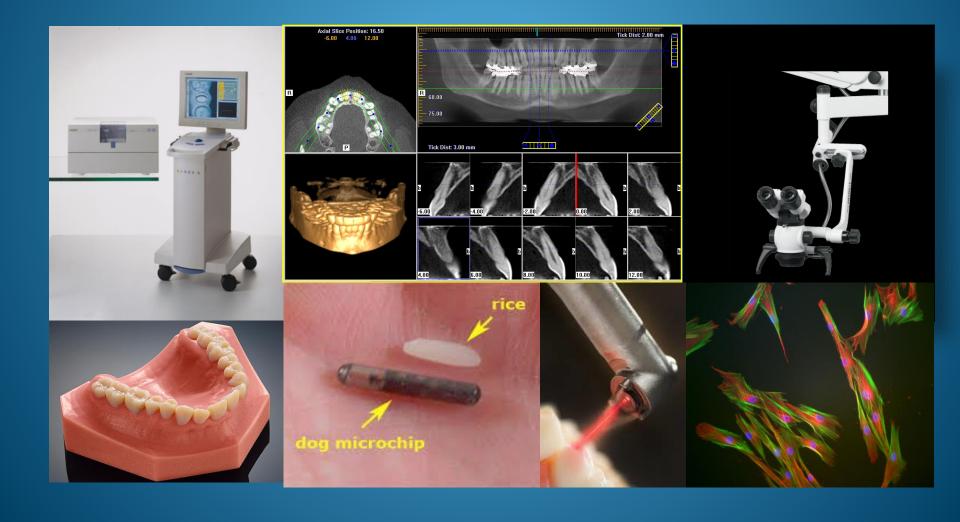
Ivar A. Mjör, BDS, MSD, MS, Dr odont







Sophistication of clinical practice



Increase in the management of older patients



Antiaging dentistry
Oral health enhancing healthy ageing
Management in terminal care

Implications of trends

Healthcare integration - Recruitment - Education - Funding - Commissioning - Marketing - Costs
Lifelong learning/retraining -Patient expectations
Stress/burnout - Combination careers - New regulation
New ethical considerations - Behavioural change

Improved oral healthcare provision – better care of more people









Doing nothing is not an option, and just complaining will get us nowhere

