It’s Time for the Real Solution

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“...we must examine current and future demographic trends and past predictions that were never realized. As of January 1, 2011, 10,000 individuals, per day, every day, for the next nineteen years will reach the mile marker of 65 years of age. The demographics further show that 76 million children were born in the United States between 1946 and 1964. That number hovers around 79 million, taking into account those who immigrated to the United States [2]. The Baby Boomer population currently represents 26% of the total population in the U.S., these people are currently retiring into their major tooth loss years. The numbers break down into these categories: More than 35 million Americans do not have any teeth, and 178 million people in the U.S. are missing at least one tooth. These numbers are expected to grow in the next two decades. In the geriatric population, the ratio of edentulous individuals is 2 to 1. About 23 million are completely edentulous, and about 12 million are edentulous in one arch. Ninety percent of those who suffer from edentulism have dentures. The number of partially edentulous patients will continue to increase in the next 15 years to more than 200 million individuals. Partial edentulism affects the majority of adult Americans. About 15% of the edentulous population has dentures made each year [3].

Dentistry, for decades, has predicted that their tooth saving skills, would eliminate the need for dentures. We all, now know, that claim has not been realized. This is all transpiring at the same time that dental laboratory educational programs are continuing to close their doors. “In 1997 there were 56 CODA-accredited dental laboratory technology programs in the U.S. In 2013 there were 19 CODA-accredited dental laboratory programs in the U.S. Today there is 13 CODA-accredited dental technology programs left in the U.S.” [4].

For years now, Dental educational institutions have been trimming their denture training courses to allow more time for an overloaded curriculum that continues to grow [5]. Some dental schools have eliminated denture training completely or made it an elective. The current white knight of saving grace to address the “impending” denture care crisis is the implant solution. Dr. Lorin Berland believes “the dental industry is focusing on treatments with increasing complexity while neglecting the denture solution that started the profession. After all, dentures were the original cosmetic dentistry. And for the vast majority of people with missing and/or doomed dentition, dentures are still the best treatment. Beautiful great-fitting dentures require a high degree of training, skill and artistic ability. Unfortunately, dental schools are cutting back on denture education” [6]. Another misguided saving solution is Cad/Cam and additive processing digital denture solutions that currently only are employed...
These are very weak answers for the size and scope of the opportunities that we must bridge. There has to be an increasing effort to match the urgency of the task. We need to begin training a cadre of elite premium denture technicians that are going to be able to create elite premium denture prostheses to satisfy the type of consumer that is emerging into the arena today. It must be realized that the Baby Boomer consumer demands the very best of everything they buy! That is how they were brought up. Make no mistake here. They were raised to expect the tip-top epitome of quality that the market will offer. They are also beginning to use social media to explore and share their experiences in purchasing with peers. Moreover, they have the means to purchase and are willing to spend for quality. Please, believe me when I tell you that if a practitioner can offer good, better and best, the majority of this generation will choose the best and not blink an eye to open their wallet.

Being able to set fees for this consumer group in a free market means that the practitioner needs to know how to present a sales process whereby they can demonstrate the quality, value and service of the prosthetics offered. This demands that not only does the practitioner have the confidence of their own technical abilities they must also have gained the confidence from their technical support. That confidence increases exponentially when their technical support is in-house. The opportunity, then, becomes how can that elite and premium support come on site?

The answer is threefold. First you can hire it if you can find it. Good luck, currently, with that. You can train it, a possibility which we will discuss. You can approximate it. By approximating it we mean using instrumentation and lab facilities which use the same instrumentation and are trained in dentogenic concept to accomplish the task. Dentogenics is the theory utilized to design removable prosthetics according to age, gender and personality of the patient [7]. It is the theory used for Swissident© Technique by Frush, Fisher and Zeck and later by Dr. Roy Smudde of the Geneva Dental Institute™ to design and produce elite premium dentures. It uses Alameter, Papillameter, Esthetic Control Base, Gothic Arch Tracing Device, all to deliver the very best denture prosthetic to the patient. The results are reproducible and reliable each and every time utilized. I am discussing analogue produced, prosthetic to the patient. The results are reproducible and reliable each and every time utilized. I am discussing analogue produced, intrinsically colored and characterized dentures. Prosthetic teeth of every high quality are arranged, subtly, to be in the right place and characterized so as to appear very natural, thus giving the prosthetic privacy demanded by high end consumers. The patient is educated and informed throughout the treatment process of the value of the service. The good news is that the practitioner needs to be educated further in elite premium prosthetics along with the technician. The true value of gothic arch tracing is a centric bite that is solid and tantamount to reducing resets of the prosthetic teeth.

Digital Denture fabrication does have a place in the industry. It will be the generic denture of choice for low end institutional denture delivery and seen as a machine delivered software designed appliance for the masses. To bring denture prosthetic to life you must have cases designed and fabricated by a being with a “Soul” to deliver “Dentures with a Soul” living, lifelike and vital! In addition, it has already been proven that when the digitally processed dentures are in the process of fabrication failure it is us, the analogue technicians, which are called in for triage and to save the day.

The challenge, then, becomes: How do we find and train this corps of denture technicians? Well, here is where we need “All hands on deck”! Here is where we need Organized Dentistry to help us so they can help themselves. First and foremost, Dentistry must accept the inevitable fact that the public is demanding better dentures and better partial dentures and better access to removable prosthetics! In every city in every state denture wearers are seeking underground practitioners for their dentures. We are not proud of this activity and are working hard with state legislatures to address the illegal activity. Secondly, Dentistry must partner with Dental Technology to promote the dignified field of Denture Technology and allow a national “Call to Hands and Minds” to mobilize training for denture technicians to be introduced to the field. Thirdly, technical training schools that are already formed across the nation could hire retired dental technicians and dentists to teach basic denture technology. Last and not least: State Dental Practice Acts must be improved to allow Denturist licensure nationwide to create a more attractive career model, thereby, attracting the best and brightest to our field. Not all candidates in training will become licensed Denturists but there will be legions that will train and be attracted to dental offices and dental laboratories that will accept them with open arms. Distance learning at all levels of denture fabrication and delivery are taught at the accredited American Denturist School: americandenturistschool.com

To Organized Dentistry I say; “Ladies and Gentleman, we are standing at the base of the mountain looking up. Why must we squabble over the pebbles at our feet?” Smart Dentists will partner with smart Denturists. We are in the midst of strife, there is no better time than now for the necessary solution.

References
1. Clausewitz on Strategy, Boston Consulting Group, pg 82.
2. IDT, Oct 2012 pg 36.
3. Ibid, pg 40.