



—TEN THINGS—

**Patients With Oral Conditions Requiring Extensive Treatment  
Won't Know About Our Specialty**

1. They will not know that prosthodontists listed in the Yellow Pages, as “Prosthodontists (Replacement and Reconstruction of Teeth) may not be “trained prosthodontists.” Neither will they know the level of training or the place of training of the listee.
  - The Montgomery County, Maryland Yellow Pages lists 24 dentists under Prosthodontists, only nine of whom are trained prosthodontists.
  - Other Yellow Pages listings further confuse the choice of a trained prosthodontist and these listings are: Reconstructive Dentistry, Cosmetic Dentistry, Artistic Dentistry, and Implant Dentistry. Is the patient thinking these are other specialties in dentistry?
  - What will help? The patient should call the dentist's office and ask if the dentist is a member of the American College of Prosthodontists. Have the patient log on to <http://www.prosthodontics.org/>, the ACP Home Page, and link to “Find a Prosthodontist.”
2. They will not know there is a specialty in dentistry dealing with the restoration and replacement of teeth (and missing oral and facial tissues). They will not know what a prosthodontist is or does. They will not know what extra (specialty) training entails. They will not know that specialty education, specialty diagnoses, special techniques and special treatment plans and treatments all demand fees in excess of those called for by general dentists. The copyrighted *ProsStars Newsletter Buzz Card* explains:

**PROSTHODONTISTS, PROSTHODONTICS, PROSTHESES**

You have wisely chosen or been referred to a **prosthodontist** for your special dental treatment needs. Added clinical and scientific training in **prosthodontics**, two to three years beyond dental school, equip this specialist to carry out uniquely different diagnosis, treatment plans and achievements of outcome in treatment. The results, using various restorations, and **protheses**, will be an unnoticeable, pleasing and natural appearance; a function that is totally comfortable; and a measurable lessening in future breakdown, unless caused by untreated disease or gross patient neglect. In addition, your **prosthodontist** is widely conversant with specialists in other phases of dentistry, and you should know that their skills will be used to your advantage when needed. No one else in dentistry is trained or has the wide scope of experience to achieve equal results. Rest assured that your dental treatment, carried out by a trained specialist, a **prosthodontist**, is today's ultimate value in treatment in dentistry.

### **YOUR PROSTHODONTIST\*—**

is a dental specialist, extensively and expertly trained to treat complicated dental problems using and incorporating the following procedures:

Crowns (Metal and/or Ceramic)	Esthetic Dentistry (Cosmetic)
Bridges (Fixed Partial Dentures)	Treatment of Temporomandibular
Removable Partial Dentures	Joint Dysfunctions
Precision Partial Dentures	Periodontal Prostheses
Complete Denture Therapy	Overdentures (on Roots or Implants)
Total Mouth Reconstruction	Occlusion (Bite) Correction and
Dental Implants	Treatment

[\*Adapted after Warren M. Stoffer, D.M.D., FACP, Upper St. Clair, PA]

3. They won't understand the necessities for referral. They will have gotten to our offices by referral, but they will not know why. They should be told that periodontists, oral surgeons, endodontists, general dentists and sometimes, even physicians need and expect our special skills in treatment. The patient should know that the referring specialists are also highly skilled, but not in the same areas (disciplines) we are. They should be told that referrals back, or back and forth to other specialties may also be required during their treatment.
4. They will not know that their oral condition is extremely poor in comparison to a healthy mouth, and that it presents problems far in excess of those normally managed. They should be told that if there was the slightest hint of a manageable treatment of their occlusion, temporomandibular joints, residual ridges, ridge relationships, and tooth structures that they would not have been referred to you, a specialist. Elaboration, explanation and education on one or more of these problems will be necessary during all phases of treatment. Why are they in the hands of a specialist, the prosthodontist? Because they need to be!
5. They will not know that the poor oral condition they present with puts them at a greater risk, a much greater risk, for success in treatment. Also, these poor beginning conditions cause great complications in treatment. The extended reparative techniques their conditions require tend to fail and/or relapse more frequently.

They know, but should again be alerted to the facts that tissues change, bad habits may not change, traumas occur, aging will progress accompanied by new diseases having new oral manifestations and finally, body dimensions are always changing throughout life. All of these conditions will influence their oral health after their treatment and during their life span. Therefore there is a great necessity to remain in close contact with their chosen prosthodontist.

6. They will be confused thinking we sell “things”; things such as crowns, implants, fixed partial dentures, complete dentures and other prosthetic devices. They may think we base our fees on these things as we outline the need for them in their treatment plan. They may be further confused when it seems difficult to understand a fee based on definite time estimates of treatment, or a fee based on “dental work”?

Fees are always difficult and the fee or its presentation will be a large determinant in the acceptance of the outlined treatment. The specialist must be extremely careful to avoid any implication that we sell things. We, too, must avoid the implication that we sell “dental work” or other “works” such as reconstructive dental work or cosmetic dental work as a recent pamphlet describes our treatments. We do not sell things and we do not sell “work.” What we do is treat extraordinarily difficult conditions; repeat “treat.”

7. They will not know that the treatment will be done in increments. There will be periods of tissue reconstructions and healing; time needed for laboratory fabrications; and time required for interim prostheses that will be used in assessing function, form and esthetics as the treatment progresses.
8. They won't know that all oral tissue is “living” tissue. They will equate porcelain and plastic materials with enamel, bone with wood, supporting mucosa as a teacup (the cup used in denture adhesive advertisements), and implants with screws. When they say—“What's that smell? Are you burning my tooth?”—you know you have some educating to do.
9. They won't know that there can be no guarantee in treatment. There can be only a well-planned and conducted treatment with frequent future monitorings that will lessen the possibility of failure and improve the possibility of continued optimal tissue health throughout life.
10. They won't know that there may be oral or facial surgical procedures so severe as to cause gross tissue defects. Those defects that are not reparable by surgery remain, and the prosthodontist and only the prosthodontist can provide facial and body prostheses that become the only possibilities in treatment. The patient should come to know that these special prostheses can and will restore their lost tissues. But better yet, they should come to understand that the replacements would also restore dignity, a degree of social acceptance, and a function that will make their life very much more tolerable.

In summary, if you saw this piece in your Sunday newspaper supplement or on the Dave Letterman Show, would you think it might alert you as to what your patients might not know? Is it valid? We hope we have provided an opportunity to discuss “patients,” and what they think and know; or as the piece points out, at least ten things they don't know about our great specialty. Now it is up to us to continue teaching them.

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Ed. Note: This piece was written before the ACP “*What is a prosthodontist*” materials were distributed to all ACP members. Please refer to this ACP marketing toolkit. The brochures, the VCR tape and the Microsoft PowerPoint CD are all superb and they should become very useful materials in our offices. Use these materials.

If you haven't seen or received the Prosthodontics Intermedica VCR, “*Teeth in a Day, A Whole New World in Just One Day*”, please log on to [www.dentalimplants-usa.com](http://www.dentalimplants-usa.com). This is another superb educational tape, telling its story in very practical, even heartwarming ways. Great credit goes to Tom Balshi and his staff including Glenn Wolfinger his associate, both of Prosthodontics Intermedica. It stresses patients and it stresses what trained prosthodontists can do. Use this tape.