Academy of Continuing Education and Department of Prosthodontics College of Dental Sciences Davangere cordially invite you to the

Inaugural Ceremony of the

MILLENNIUM LECTURE SERIES

Chief Guest
Dr. M. S. Goud
President, Indian Prosthodontic Society

Guest of Honour

Shri I. P. Vishwaradhya Chairman, College of Dental Sciences Davangere

Dr. M. L. Kulkarni Professor & Head Dept. of Pediatrics JJM Medical College

Special Invitees

Dr. Asbjorn Jokstad Associate Professor Faculty of Prosthodontics Oslo University, Norway

Dr. S. M. Joshi Prosthodntist Pune

Friday, 9th March 2001, 09.30 am Seminar Hall, College of Dental Sciences

Dr. V. V. Subba Reddy President, ACE-CODS

Brig.(Dr) K. Xavier Mathew Organizing Secretary

Is there such thing as a correct therapy in prosthodontics?

Asbjørn Jokstad Institute of Clinical Dentistry University of Oslo

at the right time... to offer an effective treatment... for the right patient... carried out correctly... and obtaining the best possible result.

Requires that the dentist possess

at the right time....

1. diagnostic abilities and knowledge of the effectiveness of diagnostic

to offer a effective treatment....

2. knowledge of the effectiveness and consequences of alternative treatments

for the right patient....

3. ability to communicate with the patient and empathy, as basis for rational strategies for treatment

Requires that the dentist possess

- carried out correctly....
 4. a minimum level of technical-manual skills and clinical experience
- and obtain the best possible result.
 - 5. the desire to prioritize the patient's preferences and values when evaluating the treatment success

Variables that may affect clinical treatment decisions

Treatment - patient parameters

Age

Personality

Values

Life style

Evaluation of risks

Attitute to oral health

Attitude towards risk

Attendance habits

Diet

Cost factors

Income/Priorities



Treatment-communicative parameters

Dentist:patient relationship
Two-way
communication



Treatment - operator parameters



Perceptive abilities

- Diagnostic abilities
- Empathy

Clinical skills

Clinical knowledge:

- alternative treatments/
 no treatment
- ⇒ Biologic costs
- -Psychosocial costs
- Economic costs Fee / Prognosis
- → Worst-case scenario

Treatment - parameters

Age

Personality

Values

Life style

Evaluation of risks

Attitute to oral health

Attendance habits

Risc attitude

Diet

Cost factors

Income/Priorities



Dentist:patient relationship

Two-way

communication



Perceptive abilities

- Diagnostic abilities
- ⇒ Empathy

<u>Clinical skills</u>

Clinical knowledge:

- ⇒ Alternative treatments / no treatment
- Biologic costs
- ⇒Psychosocial costs
- ⇒ Economic costs
 Fee / prognosis
- ⇒ Worst-case scenario

Requirements for correct treatment and treatment decision variables

...at the right time....

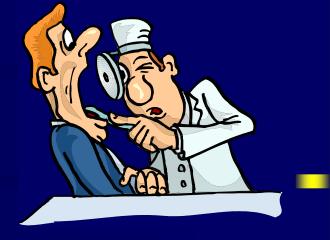
1. diagnostic abilities and knowledge of effectiveness of diagnostic tests

Dentist:patient relationship

Two-way

communication





Perceptive abilities

- Diagnostic abilities
- Empathy

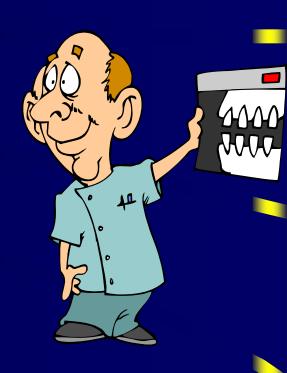


...offer an effective treatment....

2. knowledge of effectiveness and consequences of alternative treatments

Dentist:patient relationship
Two-way
communication





...offer an effective treatment...

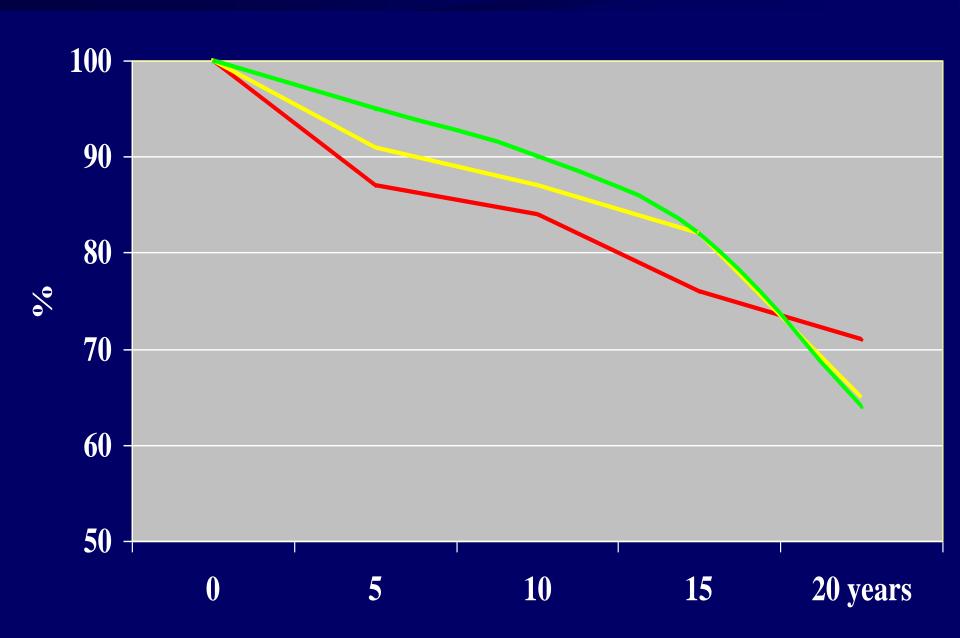
Dentist:patient



2. knowledge of effectiveness and consequences of alternative treatments

What characterises an effective therapy?

Dentists may present....



or dentists present						
Independent variables	Bi- variate odds ratios	Bivariate significance	95% Confidence intervals bivariate odds ratios	Multi-variate odds ratios	Multivariate significance	95% Confidence intervals fo multivariat odds ratios
Age group						
20-30	-	-			-	-
<i>30-40</i>	2.32	**	1.15 - 3.13	2.52	**	1.35 - 3.33
+40	2.63	***	1.43 - 3.08	2.63	***	1.83 - 3.8
Gender						
Male	-	-		-		-
Female	2.42	**	1.61 - 2.79	2.12	**	1.91 - 2.9
Material						
Amalgam	-	-		-	4	-
Composites	1.12	NS	0.13 - 1.56	1.42	NS	1.13 - 1.96
Glass ionom.	3.12	***	2.52 - 4.34	5.65	**	4.67 - 7.23
Dentists						
#1	-	-	-	-	-	-
#2	1.34	NS	0.35 - 1.61	1.04	NS	1.35 - 2.01

1.17 - 2.04

1.15

1.57 - 2.14

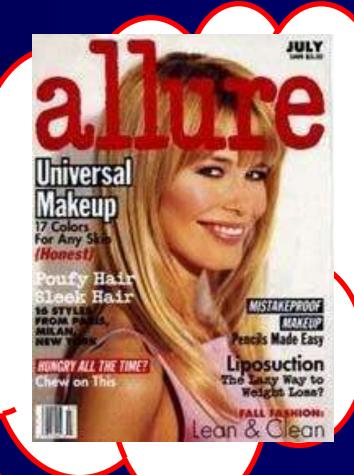
Location Mandible

Maxilla

1.55

...while patients may have completely other values and wishes





Which treatments would you offer if these people showed up in your clinic....



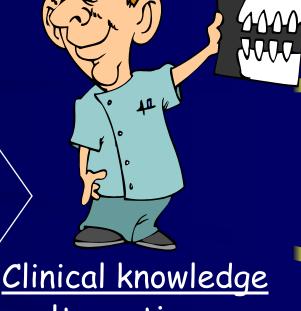
Some of these pictures are photomanipulated

...offer an
effective
treatment....

2. knowledge of effectiveness and consequences of alternative treatments





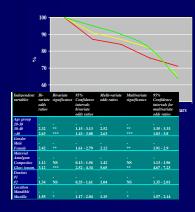




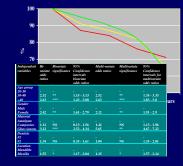




- · Etch bridge
- · Conventional bridge
- · Crown
 - implant-based
 - following autotransplantation
 - following orthopedic treatment
- Veneer/ Veneer crown / direct restoration
 - following autotransplantation
 - following orthopedic treatment
- Removable prosthesis
- No treatment









Etch bridge

DMF/endo/perio status?

2 or 3 abutments?

Metal / non- metal

Connect, Fibrekor, Fibreflex, Fibrespan, Glasspan, Ribbond, Splint-It!, Stick...

Optimal surface preparation

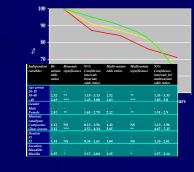
Tooth

Metal / non-metal surface

Occlusion?

Optimal cement?

- ·Beuchat et al., 1999
- ·Creugers Hansson -Marinello - Thompson
- ·Pröbster, 1997
- ·Briggs et al., 1996





- ·Scurria et al., 1998
- •<u>Creugers et al.,</u> 1994
- •Glantz Jokstad -Karlsson - Palmqvist - Öwall

Fixed bridge

DMF/endo/perio status

2 or 3 abutments?

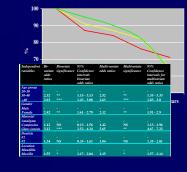
Metal /full -ceramic?

Alloy / ceram

Optimal tooth preparation?

Occlusion?

Optimal cement?

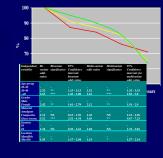




Orthodontic therapy Opening or closing of spaces? Sabri, J Am Dent Assoc 1999

Auto-transplantation
Limited to growing adolescents

- Nethander, Int J Prosthodont 1995
- Thomas et al., Br J Orthodontics 1998
- Schliephake et al., Dtsch Zahnärztl Z 1999



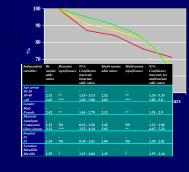
<u>Crown</u> - Veneering - <u>Direct</u> <u>restoration</u>



Das 6 Dental Vademekum DMF/endo/perio status
Metal-/ full ceramic /galvano / cad-cam?
Alloy: high gold, precious, semiprecious?
Ceramic: Low fusing, pressure, sintered,
Al-oxide?

Composite resin: Microfill, hybrid, high fill?

Optimal tooth preparation?
Optimal cement?





- ·Scholander, 2000
- ·Noack et al., 1999
- ·Meffert, 1997
- ·Andersson -Gotfredsen - Jemt -Odman

Single tooth implant

Diameter?

Bone quality/ quantity - GTR?

Implant-type?

Astra, Calcitek, Corevent, Friatec, IMZ, ITI, Nobelbiocare, Sterioss...?

Cement or screw-retained?

- ...offer an
 effective
 treatment....
- 2. knowledge of effectiveness and consequences of alternative treatments









<u>Clinical knowledge</u>

- alternativetreatments versusno treatment
- Biologic costs



RESULTAT

vesultatet

omplett system for tisk tannbehandling

ikteteknikk terende maleteknikk oatentert fullkeramisk skjelett styrken med 2 til 3 ganger genkontrast somt mot antagonistene mpatibelt





IPS Express 2 frontlannsbro retained restoration appears to most coaucing. ing indication for implant treatmen Unchallenged tissue response in combination with the flexibility in surgical techniques and prosthetic options makes the Astra Tech Dental Implant a reliable option for implant

ource are now new aunence together with the recent a wunched Prepable Abutment System, these components give clinicians and technicians a wide range of products with which to handle each individual situation A





CLINICAL DATA Scientific upsdate on ned aphater 12, 22. Figure ST ned två Maryland-

CASE REPORT st Listne Sculpharing

CALENDAR OF EVENTS



17-leig pojke som fått en Rochetteheo som coattning for 21, (sid 6). Förhatt orsakad av trauma.



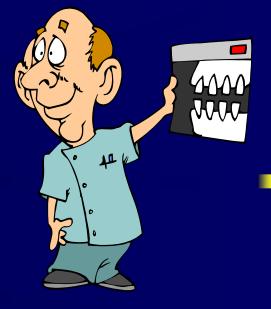


- ...offer an effective treatment....
- 2. knowledge of effectiveness and consequences of alternative treatments









Clinical knowledge

- alternativetreatments versusno treatment
- ⇒ Biologic costs
- Psychosocial costs

Reality can occasionally be -etch bridge

Perfect result%?

Grey tone %?

A CONTRACTOR

Opacity %?

Gingivitis %?





.. and sooner or later



Loosening with or without secondary caries %?

Reality can occasionally be -bridge

Perfect result %?
Ceramic fracture%?

Gingival grey-tone%?

Gingivitis %?

Cervical retraction %?

Secondary caries %?

Reality can occasionally be



Perfect result %?



Opacity due to misalignment %?

Gingival-retraction %?



Exposed fixture %?

Adjacent necrosis %?



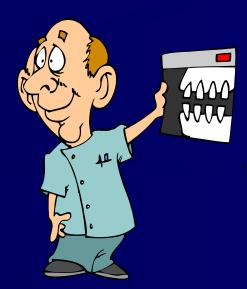


...offer an effective treatment....

2. knowledge of effectiveness and consequences of alternative treatments





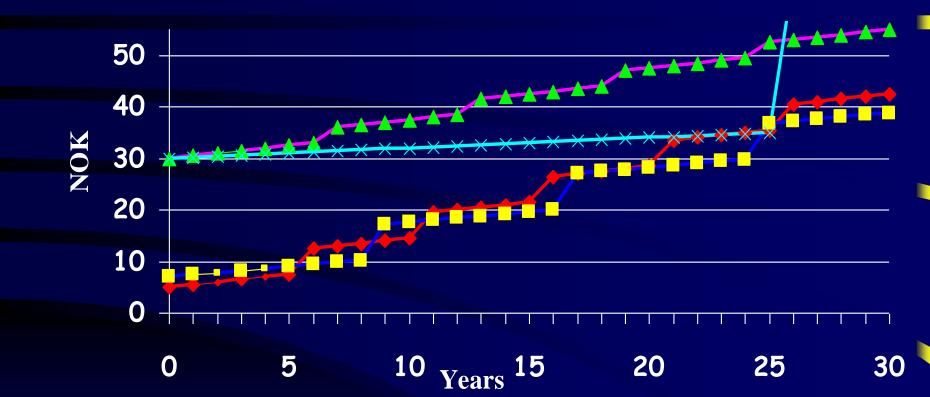


Clinical knowledge

- alternativetreatments versusno treatment
- → Biologic costs
- Psychosocial costs
- Economic costsFee / Prognosis



Costs



Inadequacies of model:

Costs are not adjusted for inflation

Replacement not always possible

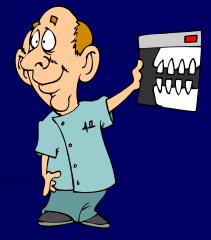
Based on average data - not on individual practitioners'

- ...offer an effective treatment....
- 2. knowledge of effectiveness and consequences of alternative treatments







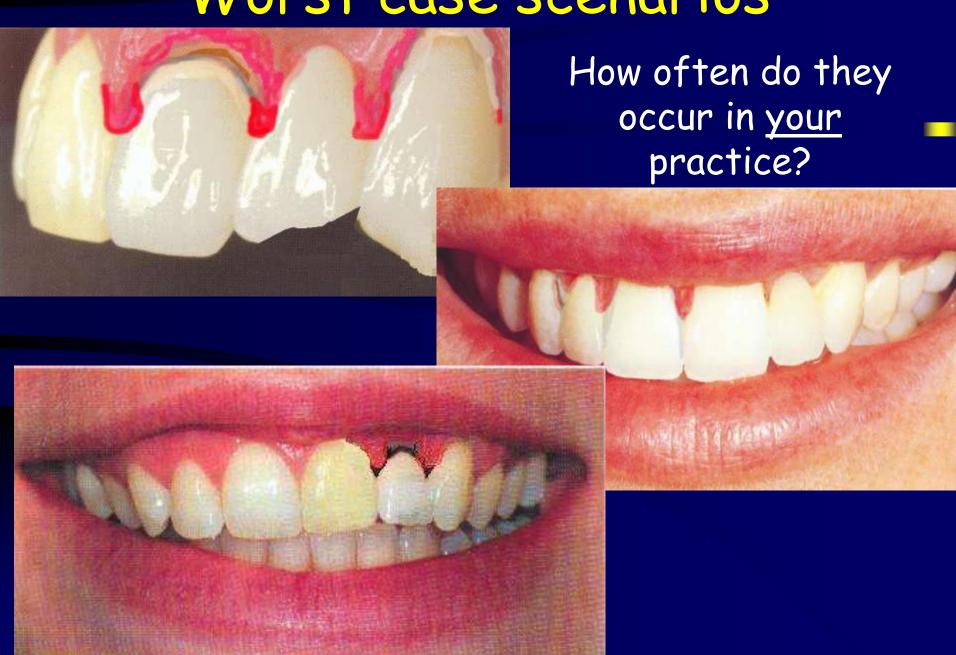


<u>Clinical knowledge</u>

- alternativetreatments versusno treatment
- → Biologic costs
- Psychosocial costs
- ⇒ Economic costs
- ➤ Worst-case

scenario

Worst case scenarios



...for the right patient....

3.ability to communicate with the patient and empathy, as basis for rational strategies for treatment



Dentist:patient relationship

Two-way communication





Empathy

Clinical skills

Clinical knowledge

- alternativetreatments versus notreatment
- ⇒ Biologic costs
- ⇒Psychosocial costs
- ⇒ Economic costs
- → Worst-case scenario

Is it probable that these patients will choose identical treatments?









Choice of therapy - preferences

Patients differ regarding views and choice of values.

Håkestam et al. 3 personality profiles health - appearance - longevity

Lutz et al.: 5 personality profiles

Orally: functional -

presentable - healthy -

beautiful - metal-free

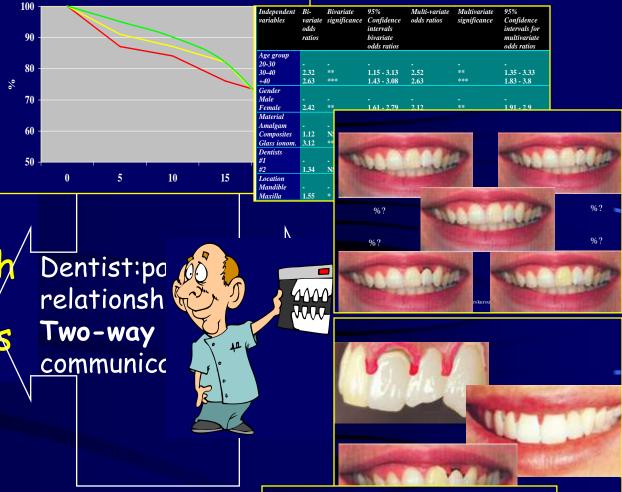


Choice of therapy - preferences

- Reflected by statements on e.g.
- Total rehabilitation or minimal solution?
- · Demand for longevity, 1 y. 30 yrs.?
- Risk attitude to iatrogenic damage,
 i.e. future prognosis of tooth?
- Demand for fixed (or removable) prosthetic solution?
- Expectance of treatment?
- · Patient economy.

...for the right patient....

3.ability to communicate with the patient and empathy, as basis for rational strategies for treatment

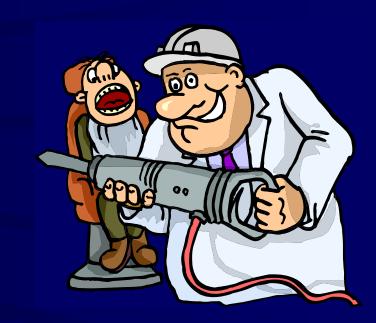






...carried out correctly....

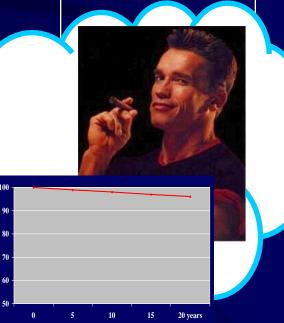
4. a minimum level of technical-manual skills and clinical experience





...and obtain the best possible result 5. the desire to prioritize the patient's preferences and -values when evaluating the treatment success







Diagnostic abilities

Empathy

Clinical skills

Clinical knowledge:

alternative

treatments versus no

treatment

⇒ Biologic costs

⇒ Economic costs

⇒Psychosocial costs

➤ Worst-case scenario

Take-home messages 1/2

- · Two-way communication is critical
- · Dentists and patients do not have similar evaluations of therapy
- Dentists and patients do not have similar appraisal of, and attitude towards risk
- Consequently, suggestions for treatments as well as descriptions of these must be based on the patient's wishes and values

Take-home messages 2/2

- Information on prognosis and treatment outcomes must be based on own clinical practice results and not on literature data.
- Do not offer patients glossy pictures
- All restorations will fail sooner or later

Is there such thing as a correct therapy in prosthodontics?

Yes!

Correct therapy in prosthodontics

For the individual patient

- ·who is satisfied with the treatment
- that is given in a specific treatment situation and circumstances
- ·and is carried out in a way that causes more benefit than harm for this patient

at the right time... to offer an effective treatment... for the right patient... carried out correctly... and obtaining the best possible result.

