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# DENTISTRY

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# *Ashish Parmar*

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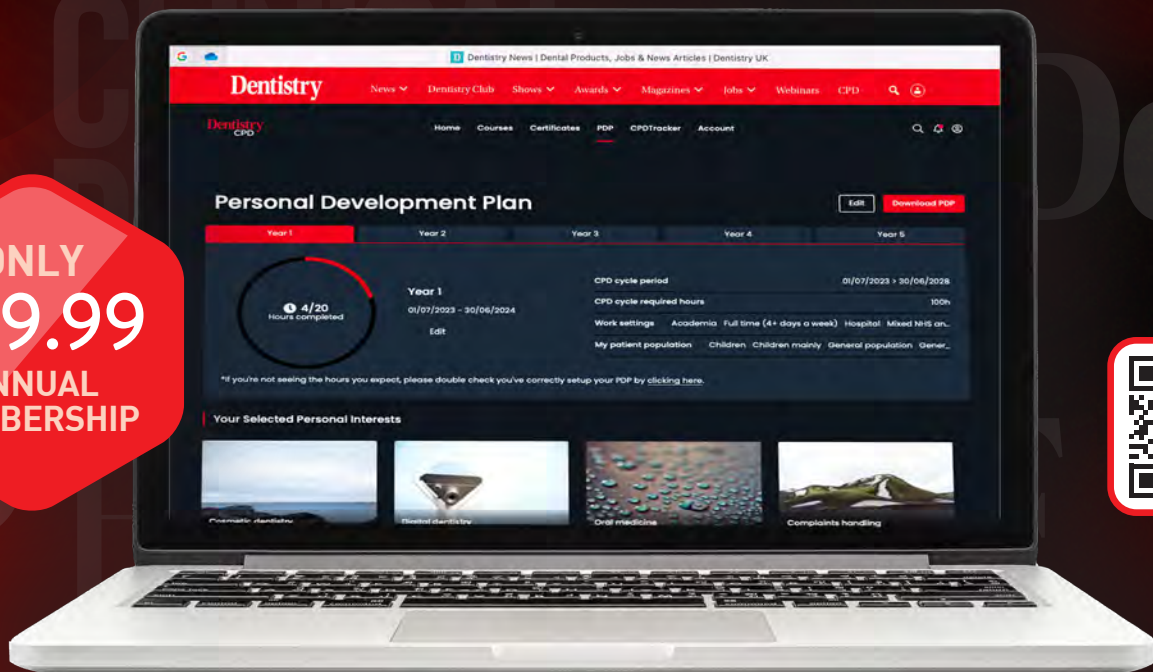
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# The epitome of private dentistry

Siobhan Hiscott

Group managing editor

It is with a great deal of sadness, and no small amount of gratitude, that I write this editorial dedicated to Dr Ellis Paul, who passed away peacefully in May of this year.

Those who had the pleasure of knowing Ellis and his contribution to dentistry will understand both these emotions. Indeed, it was Ellis who launched this very publication – or, as it was known in its first years, *Independent Dentistry*.

Ellis was totally committed to driving private dentistry in the UK forward. Even in latter years, after retiring from active duty as editor-in-chief, Ellis's passion stayed strong – even asking to have each issue of *Private Dentistry* read to him.

So rather than focusing on the loss of dental legend, I want to celebrate him and his unwavering support of the private profession.

The dental world has lost one of its truest pioneers: you may or may not be using his famous four-handed dentistry technique every day in practice, but I guarantee that you will have benefited from his work on posture, whether you realise it or not.

I first began working with Ellis in 2008. I'd heard great things about him – his commitment, his contacts, his wit – from seemingly everyone who'd met him. I must admit, I was in awe.

Very quickly I realised the profound respect and admiration that followed him were more than just hype. Not only because of the fanfare he received whenever he walked into the FMC offices, but also because authors from around the world were falling over themselves to write for him.

Throughout our time working together, Ellis introduced me to dental thought leaders, academic giants and rising stars of private dentistry.

In fact, it was Ellis who first connected me with Ashish Parmar, this month's guest editor. I know he would have been delighted to see Ashish featured so prominently throughout the issue.

I will be forever indebted to Ellis for sharing not only his connections but also his knowledge with me.

He opened my eyes to what it meant to be a private dentist (and it wasn't the money!).

Ellis's principles will always be at the core of *Private Dentistry's* ethos. As he so eloquently wrote in an editorial back in 2013, we cannot stand still, no matter how successful we become. We are honoured to be able to carry the *Private Dentistry* torch for a new generation in Ellis's memory.

Turn to page 12 to read more about the exceptional Dr Ellis Paul and some of his many achievements in the dental profession.





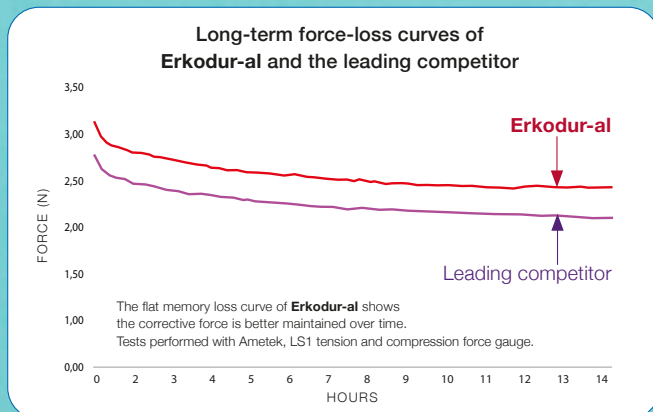
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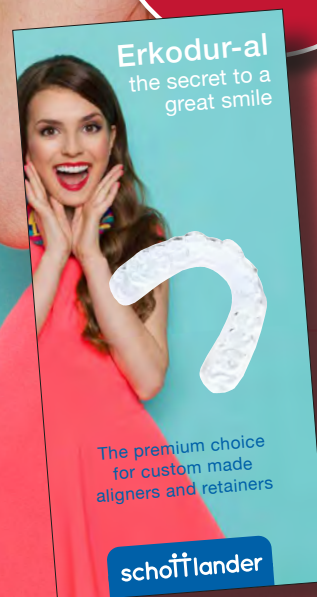
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# Strike a balance

Ashish B Parmar

It is an honour for me to have been asked to be a guest editor of *Private Dentistry* this month. In my opinion, this is the leading magazine for dentists in private practice, offering a whole range of useful articles on a consistent basis.

After COVID-19, we noticed a dramatic increase in dental treatment uptake. However, in recent years, we have been fighting various battles in private dentistry. The economic downturn has left many patients not going ahead with bigger treatment plans. On the other hand, operational costs to run a practice have increased significantly, and it is increasingly difficult to find good staff. Patients are also being enticed to go abroad (for example, to Turkey) to have their dentistry done at a much reduced fee. I feel that, somehow, we are having to work a lot harder to try and maintain our income.

There are two important words that I constantly remind my team of these days, almost a mantra: everything matters.

We have to endeavour to offer an outstanding new patient experience, create beautiful practices, ensure excellent marketing, have highly trained team members and provide high-quality dental care if we are to stand out and grow as a practice.

All these external pressures can increase stress levels for individuals. Many dentists also succumb to dental anxiety and related issues. It is therefore very important to lead a balanced life to stay healthy and mentally focused.

I find meditation early in the morning and going to the gym before work help me a lot. Taking a lunch break is also important.

In addition, I take Thursdays off work for 'me time'. I spend the day playing golf, going to the spa, catching up with meetings or emails. This can then break up the week, and you have the weekend to relax and spend time with family or loved ones.

It is important to not only work 'in' the business but also 'on' the business – you need time to develop your dental practice and motivate/train your team.

Spiritual development, I feel, is the key to achieve happiness and success. Association and inspiration from elevated souls, such as my mentor, Keshava Swami, has helped me and many others.

One of my goals going forwards is to help dentists understand the benefits of spiritual practice in harmony with running a busy and profitable practice and family life. On that note, look out for a special event that I am planning in 2025...

Wishing you all good health, happiness and success.





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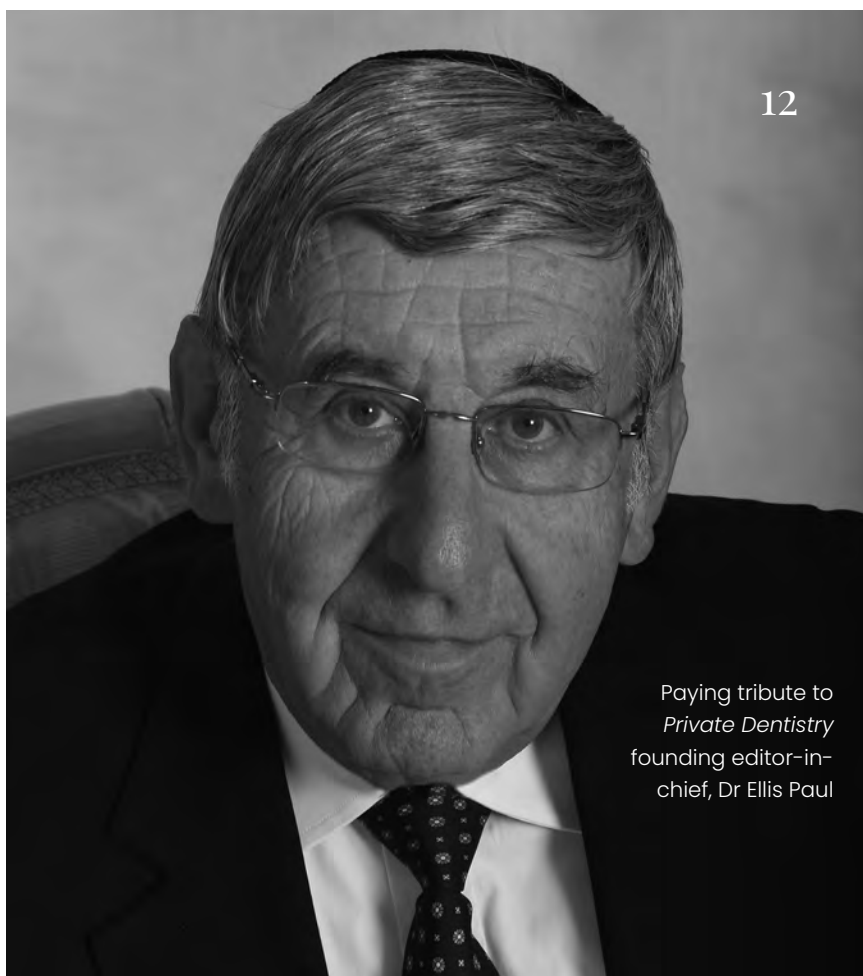
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## ***Prepare to shine***

Entry to this year's Private Dentistry Awards is now open – don't miss your chance to sparkle!



Paying tribute to  
*Private Dentistry*  
founding editor-in-  
chief, Dr Ellis Paul



# PRIVATE

## DENTISTRY

### MISSION STATEMENT

*Private Dentistry* is an essential reference for dental practice development in the 21st century, focused on helping practices evolve sustainably, operate innovatively, and thrive.

### EDITOR

Patrick Ward

patrick.ward@fmc.co.uk | 01923 851733

### GROUP MANAGING EDITOR

Siobhan Hiscott

siobhan.hiscott@fmc.co.uk | 01923 851758

### CHIEF COMMERCIAL OFFICER

Tim Molony

tim.molony@fmc.co.uk | 07595 282680

### DESIGN AND PRODUCTION

Glenn Baxter, Nick Russell, Laurent Cabache

### CONTENT DIRECTOR

Guy Hiscott

### CONTENT

Rowan Thomas, Heather Grimes, Gaby Bissett, Lucy Veal

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BDS MClintDent (Prosthodontics) PhD MFGDP (UK) FICOI FICD, has been in private practice in London for more than 30 years and is the programme director for the MSc in Aesthetic Dentistry at King's College London Dental Institute.



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BDS, co-owns Rothley Lodge Dental with his wife Dr Meghan Chard. He is immediate past president of the BACD, lectures nationally and is a co-founder of Pärila toothpaste tabs, an eco-friendly and plastic-free oral healthcare brand.



#### RACHEL DERBY

BDS MS, is an award-winning dentist and a partner and founder of Chapel Dental in Buckinghamshire. Rachel is the president of the BAPD.



#### MERVYN DRUIHAN

BDS (Rand) DGDPRCS (Lon), is one of the pioneers of cosmetic dentistry. He is one of very few UK dentists to be on the distinguished AACD President's Honour Role.



#### ELAINE HALLEY

BDS (Edin) MFGDP (UK), is principal of Cherrybank Dental Spa Ltd.



#### SUNIL HIRANI

BSc BDS FDSRCS FDS(Orth) RCs Eng MOrth MSc, is a specialist in orthodontics and practice principal of Smilelux, a dedicated orthodontic practice in Milton Keynes.



#### MARTINA HODGSON

BChD MJDF, is owner and principal dentist at The Dental Studio in Wakefield and is also known as the Dental Architect. She has an interest in orthodontics, Invisalign and facial aesthetics.



#### NEEL JAISWAL

BDS, runs a multidisciplinary practice at Neel Dentistry. He founded PDI-Professional Dental Indemnity Ltd. He is a judge on the Private Dentistry Awards. He founded the British Academy of Microscope Dentistry and is a founder of the BAPD.



#### SAM JETHWA

BDS, is the founder of Bespoke Smile Clinic & Academy, which trains dentists on occlusion, porcelain veneers, and rehabilitations. Sam is on the board of directors at the BACD, and has been a judge for the Private Dentistry Awards.



#### PHILIP LEWIS MBE

BDS, is in private practice on the Isle of Wight. He is a lecturer with a special interest in postgraduate education, oral medicine and dental aesthetics.



#### ANGELA LY

BDS, is an award-winning dentist who has featured on *BBC Breakfast*, ITV's *Save Money Good Health* and Channel 5's *Gadget Show*.



#### HANNA MIRAFTAB

BDS, is owner of Kiln Lane Dental practice and an actress in *Real Housewives of Cheshire*. She has completed a master's degree in prosthodontics and has qualifications in non-surgical treatments such as anti-ageing injectables.



#### ASHISH B PARMAR

BDS, is a cosmetic dentist offering smile design, comprehensive dental care, laser dentistry and implants. He is a national and international lecturer.



#### KISH PATEL

BDS MSc, is a director at Smile Clinic Group and director of Smile Dental Academy. Having successfully completed training in Invisalign in 2011, he offers a range of clear and cosmetic orthodontic treatments.



#### KREENA PATEL

BDS, is a specialist in endodontics. She taught on the specialist endodontics programme at Guy's. She works at Brigstock Dental Practice and Oaktree Dental Practice. Kreena runs an online endo course, The Endo Course.



#### MANRINA RHODE

BDS, has a skincare line DRMR, runs courses on porcelain veneers, Designing Smiles and recently opened DRMR, a superclinic in Knightsbridge, London. She has completed over 13,000 porcelain veneers over 20 years.



#### JASON SMITHSON

BDS (Lond) DipRestDent RCS (Eng), qualified at the Royal London Hospital in 1995, achieving a number of awards.



#### KOMAL SURI

BChD, owns Smile Design Dental Practice. The focus of her work is aesthetic and restorative dentistry.



#### PROFESSOR PAUL TIPTON

BDS MSc DGDGP UK, is a specialist in prosthodontics, president of the British Academy of Restorative Dentistry and an internationally renowned dental lecturer.



#### ANDREA UBHI

BChD, is principal of the referral practice, Andrea Ubhi Dentistry, in York. She is also chair of the charity Asha Nepal, supporting survivors of trafficking.



#### SIR NAIRN WILSON

CBE DSc (hc) FDS FFGDP (UK) FFD FKC, is emeritus professor of dentistry at King's College London. He was previously dean and head of King's College Dental School (2001-2010), dean of the Faculty of Dentistry RCS Edinburgh (1995-1998), and president of the GDC (1999-2003).





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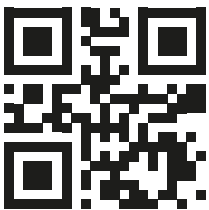
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# Ellis Paul (1930–2024): honouring a dental legend

We pay tribute to **Ellis Paul**, founding editor-in-chief of *Private Dentistry*

**D**r Ellis Paul, the pioneering clinician and editor who helped shape private dental care in the UK, has died at the age of 93.

His name was synonymous with private practice. As editor-in-chief of *Private Dentistry*, Ellis helped countless principals and businesses embrace a way of working outside the National Health Service for almost 30 years.

He did not so much ride the crest of private dentistry's wave as tell the tide exactly where to go. In 1996, he launched the quarterly FMC journal *Independent Dentistry* as a new model of practice flourished in the wake of the 1995 NHS dental contract.

'The face of dentistry is changing as it has never done before,' he wrote in the very first issue. His words were prophetic – but even Ellis could not anticipate the sea change his work would help usher in. Within two years the title had grown exponentially in readership and regularity. Further, it had rebranded to a name that endures today – *Private Dentistry* – as the UK embraced private care.

Ellis was editor in chief for 23 years until stepping back in 2018. Unable to replace him even then, the journal appointed him editor emeritus, enshrining his name in the journal that he steered from concept to astonishing success.

## AHEAD OF HIS TIME

Those who knew Ellis will no doubt smile at this. After all, it was all in a day's work for a man so consistently ahead of his time in his thinking about dentistry.

Ellis was the originator of four-handed dentistry, a concept born from his relentless, pioneering focus on teamwork and posture more than 20 years before they became the norm. The concept would inform his first book – *A Manual of Four-handed Dentistry*, commissioned



by Quintessence after a tour de force series of lectures for the British Dental Association (BDA).

He refuted the idea that neck and back pain were a given for dental professionals. His solution was to address dentists' posture – most notably the idea that dentists should sit down. This approach, unheard of when he started practising in 1955, is now the standard. If there is any doubt of this impact, just ask yourself – how many dentists now work standing up?

Ellis' teachings extended the working life of thousands of dental professionals and continue to be passed down to new generations today.

## SHARING KNOWLEDGE

His four-handed dentistry concept also revolved around teamwork, another of his calling cards. Performed correctly, the technique he described was a symphony of coordination between dentist and dental nurse.

This thinking powered his second book, *Team Dentistry: Chairsides Procedures and Management*. Here, he set out the ethos forged over 40 years of clinical practice in Manchester's city centre.

Ellis was ever keen to share his knowledge with the world, and training became a huge part of his life. Whether lecturing at Liverpool University, helping set up evening classes for nurses at

Salford Technical College, or offering hands-on training in posture, the thrill of working with new people and sharing his passions never diminished.

Inevitably, this came with recognition from within the dental profession. Ellis was the first chairman of the BDA's Independent Dentistry committee when it launched in 1993. In 2007, he was recognised with Fellowship of the BDA, an accolade followed in 2011 with Fellowship by Election of the Faculty of General Dental Practice (UK).

## BEHIND THE DENTAL MASK

All this was achieved with the humility, diplomacy and professionalism that were his trademark, mixed with no small dose of humour. Indeed, to those who knew him, no picture of Ellis is complete without his soft Lancastrian chuckle. He found the comedy in everything, though his brand of humour was self-admittedly bone-dry.

Ellis passed away surrounded by family, with his four children, Jonny, Alexis, Ben and Gideon, at his bedside. While his health had deteriorated in the six years since his beloved wife Jennifer had passed, his fierce devotion to his passions never deserted him.

He insisted on having dental media – especially his cherished *Private Dentistry* – read to him. A devoutly religious man, he proudly embraced Judaism as a fundamental part of his identity and continued to observe the daily customs of his faith even as his health made doing so more difficult.

It is impossible to imagine dentistry without Dr Ellis Paul's influence.

He was a world-leading, pioneering dentist, whose integrity and vision changed his profession for the better. But behind the dental mask he was so much more: caring father, devoted husband and selfless friend.

May his memory be a blessing.



## Study reveals ‘hidden challenges’ faced by patients with tooth loss and dentures

Dental professionals have been urged to show empathy to patients as they adapt to using dentures, following the results of a new study into the emotional impact of tooth loss and prosthetics.

The study, conducted by the University of Sheffield, attempts to understand the patient journey from tooth loss to adapting to new dentures. It is hoped that its findings will lead to improved care for the 10-15% of the UK population who wear removable dentures.

The research found that patients have feelings of self-consciousness, shame and fear, and that many worry about the impact of tooth loss on their livelihoods. Physical sensations, including pain and sensitivity, were also noted among patients. The study observed two different groups of patients: those who have had dentures fitted during the past five years and those currently receiving treatment for new or replacement dentures. Aged 22-86 years, participants were 55% male and 45% female.

Data was collected through observing the denture-fitting process, carrying out debriefing interviews and holding a follow-up focus group.

The researchers hope these findings will guide dental professionals to manage denture patients better. This could include paying closer attention to the feelings of patients, adapting treatment plans and developing better aftercare.

The study found that patients consider their denture journey as four different stages:

- Tooth loss, in which the physical loss of teeth is first experienced
- The emotional tunnel following tooth loss, during which patients may experience self-consciousness, depression, anger and fear, as well as hope
- Prosthetic hope, the third stage, represents hope and optimism while patients are getting their dentures. This may be due to the anticipation of getting their smile back or being able to eat normally again
- Prosthetic compromise leading to managing disclosure, the final stage, in which patients may adjust their expectations as they acknowledge that their dentures will take some getting used to. They may also need to learn how to talk and eat properly while wearing them and ‘develop strategies’ to feel comfortable talking about their denture use with others.

The findings also suggest that wearing removable dentures can act as a ‘hidden disability’ for many patients. They may feel embarrassed or worried that the dentures will fall out. Patients may also feel they need to hide their dentures and consequently avoid social situations.

Barry Gibson, the lead researcher and a professor in medical sociology at the University of Sheffield, said: ‘Understanding the emotional difficulties identified in the study will help dentists to improve the care given to denture patients and lead to a more successful and better experience for everyone.’

The researchers also believe their findings highlight the need for a ‘clinical care pathway’, to help support patients during their denture fit, educate them on denture care and combat stigma associated with having dentures.

The study also led to the development of a patient questionnaire designed to identify individual needs, improve communication and trigger follow-up appointments for those in need of additional support.

### Upcoming events

Key dates for FMC’s unmissable dental shows and awards. Visit [dentistry.co.uk](http://dentistry.co.uk) for more details!



#### Irish Dentistry Show 7 September – Dublin

This unmissable free one-day event on 7 September brings together hundreds of professionals from across the dental sector and promises more than 15 talks from industry leaders.



#### Irish Dentistry Awards 7 September – Dublin

The Irish Dentistry Awards return to Dublin for the 12th consecutive year on 7 September. Hosting the best in Irish dentistry, these prestigious awards celebrate dental excellence throughout Ireland.



#### Dentistry Scotland Show 21 September – Glasgow

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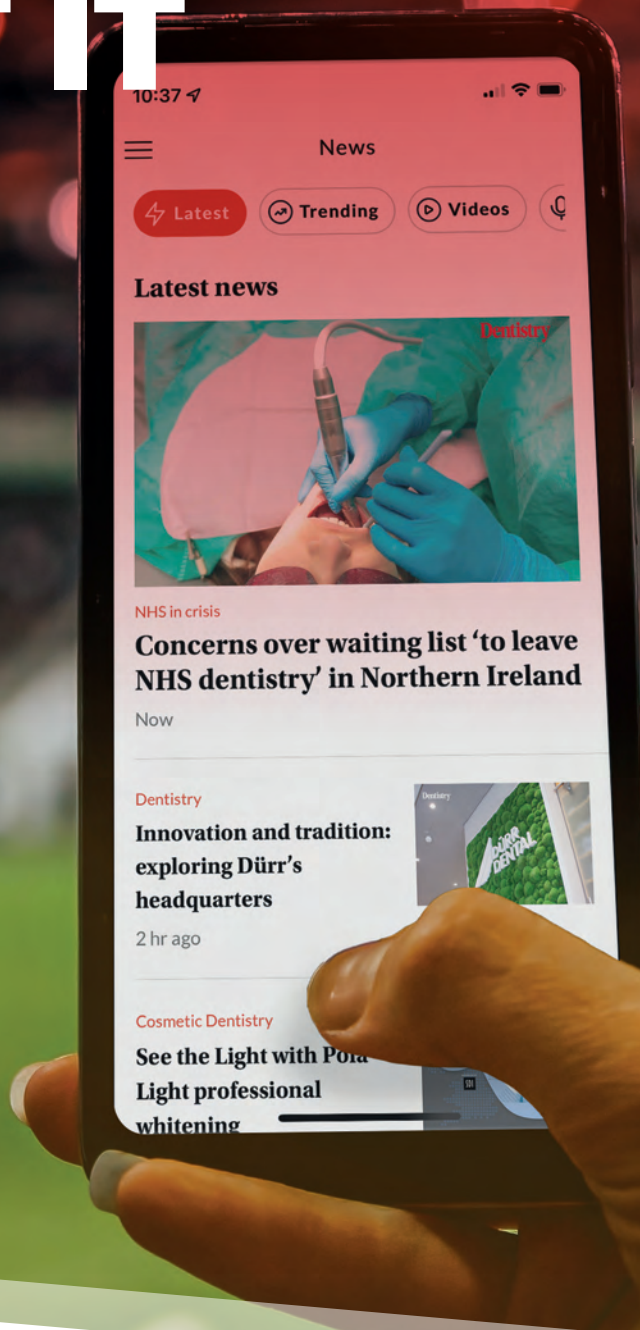
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## ‘Natural partners’ FMC and ADAM join forces

FMC, publisher of *Private Dentistry*, has announced a new partnership with the Association of Dental Administrators and Managers (ADAM).

The joint venture will unlock the power of Dentistry Compliance and Dentistry CPD products for ADAM members. Practice managers and other non-clinical members of the dental team will have access to FMC’s vast library of content and support material.

It opens up a new range of useful resources and information on everything from business management to compliance.

FMC chief executive officer Craig Welling said: ‘We’re absolutely thrilled to be working with ADAM. FMC’s mission is to connect and support UK dentistry. With this partnership, we are better positioned than ever to do that for practice managers and non-clinical staff.

‘The rate of change in dentistry has been accelerating non-stop in recent years and there are no signs that

things are slowing down. If it weren’t challenging enough already, the role of the practice manager is only going to become more complex. But keeping the dental team in the know is something we’ve been doing for more than 30 years.

‘Through Dentistry Compliance and Dentistry CPD, we’re applying that experience where it counts. We will support practice managers to focus on patient care rather than worrying about compliance and regulation.

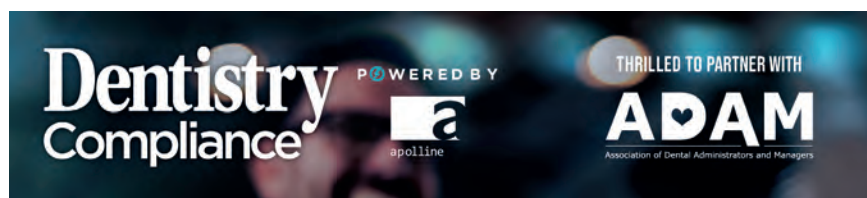
‘We’re passionate about delivering best-in-class support that helps practices become more effective, more efficient and work with confidence. In short, all the things that make practice managers’ lives easier.’

ADAM president Lisa Bainham said the partnership will allow teams to focus on building better practices.

‘FMC’s heritage of supporting the dental industry shines through, and in recent years its dedication to making the lives of practice managers easier has made us natural partners,’ she said.

‘It’s vital that any compliance support helps practice managers, rather than adding to their workload. Dentistry Compliance and Dentistry CPD do that.

‘By simplifying some of the most time-consuming tasks ADAM members face, this partnership will allow them to focus their energy and efforts on building a better practice.’



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# New name, same excellent service

**Maja Thompson**, director of practice services UK and Ireland at Henry Schein, introduces Henry Schein Dental Practice Sales – the new name for MediEstates

**I**n April 2017, the MediHoldings group of companies became part of Henry Schein, the world's largest provider of health care solutions to office-based dental and medical practitioners.

Since the start of the new millennium, MediEstates has grown and developed within the dental market to become one of the largest specialist brokers of dental practices in the UK and the Republic of Ireland.

MediEstates has taken great pride in providing a bespoke service to those looking to buy or sell a dental practice, while helping them to recruit the best staff to ensure their business is a success.

Being a Henry Schein company has brought with it the benefits of belonging to a global organisation as well as the ability to bring the combined services of the companies together to enhance the professional and personal services we can offer to our clients.

## INTRODUCING HENRY SCHEIN DENTAL PRACTICE SALES

When I joined Henry Schein as Director of Practice Services for the UK and Ireland over four years ago, a primary focus was to bring MediEstates closer to the Henry Schein group, so that we could optimise the range of services we provide in other areas.

As the next step in this process, we are delighted to announce the rebranding of MediEstates to Henry Schein Dental Practice Sales. This marks a pivotal point in our journey to align such a well-established and recognised brand with the renowned Henry Schein companies.

The close cooperation of Team Schein across all company businesses and borders strengthens our brand and also assures our clients of our shared commitment to excellence and integrity.

The team at Henry Schein Dental Practice Sales has comprehensive and extensive specialist knowledge of the dental market and how it relates to our clients' individual needs. Our experienced practice transition specialists work to ensure that both buyers and vendors are getting the best possible service from the specialist professionals whose help they have enlisted.

It is essential when buying or selling a practice to be aware of all the options, so that the entire process can be planned with confidence. Henry Schein Dental Practice Sales caters for the whole of the dental practice market across the UK and Ireland – from a small single-chair practice to large group practices.

We believe in creating life-changing opportunities for our clients, whether they are looking to buy or sell the first, second or even the 10th practice, to become part of a corporate, to retire or to pursue a new career path entirely. Together, we can help our customers achieve their ambitions.

## OPTIMISED WEBSITE

As a key part of our rebranding initiative, we have launched a brand-new Henry Schein Dental Practice Sales website, optimised for up-

to-the-minute information on the practice market. Intuitive navigation allows visitors to seamlessly navigate the way towards their goals, with the

added benefit of access to comprehensive resources and expert guidance at every stage.

Central to our rebranding is a renewed emphasis on innovation and a client-centric approach. Through the new website, we aim to

create engaging content designed to educate and inform our clients through webinars, articles and interactive tools. In this way, we will work to provide the knowledge and insights they need to make informed decisions and stay ahead in an ever-evolving industry landscape.

## SETTING NEW STANDARDS

Henry Schein Dental Practice Sales' strong presence in the market puts us in a great position to help our clients in whatever area they need – be that buying or selling a practice, staff recruitment or specialist financial advice.

By introducing a more streamlined, modern approach to brokerage and recruitment, we will continue to set the standard for service, excellence and innovation to develop great partnerships focused on our clients' needs.

## WE BELIEVE IN CREATING LIFE-CHANGING OPPORTUNITIES FOR OUR CLIENTS

*For more information on the services Henry Schein Dental Practice Sales can provide, visit [www.hsdpracticesales.co.uk](http://www.hsdpracticesales.co.uk).*



# Pedal to the metal

Columnist **Chris Barrow** on preparing for a new economic cycle



CHRIS  
BARROW

**I**n my daily blog, I've recently been commenting on the combined threat to cash flow and profitability of associate white space and a decline in new patient numbers.

The likelihood is that, by the time you read this, the results of the general election are known, and we are all hunkering down for a new (and probably challenging) economic cycle.

My advice to clients has been 'pedal to the metal' on internal and inbound marketing. To be more specific, enrolling your existing patients as your salesforce (reviews, testimonials and recommendations) and becoming Google's preferred expert on your speciality subjects in your postcode.

On internal marketing, I paraphrase business coach Dan Sullivan (of the Strategic Coach, Toronto): 'All the money that you need for the rest of your career is in the pockets of the patients that you already know and the people that they can introduce you to.'

On inbound marketing, I refer you to the book *They Ask, You Answer* by Marcus Sheridan. If you read it, you will learn a lot about fibreglass swimming pools, but you'll also learn the basics of inbound marketing.

Internal and inbound are subjects I'm covering in detail with my clients during our Q3 workshop tour of the UK, including a translation of the swimming pool stuff into dentistry.

In preparing the marketing workshops, I've been reviewing and updating the material I used to create my online Complete Marketing course back before COVID-19, and I have noted the following big changes:

- I used to talk a lot about 'Dunbar's number' (take a look on Google or Wikipedia) and the suggestion that we are all connected, digitally or physically, to an average of 150 people. New research is challenging the statistical accuracy of Professor Robin Dunbar's original work but, at the same time, revising estimates of our levels of connectivity to an even higher number of around 250. Even more opportunity for word of mouth referrals
- Dare I suggest that the motivation for existing patients to 'tell their family, friends and colleagues' about their experience with you has been magnified by three further

developments in recent years:

- The growing role of the digital treatment coordinator (TCO) in new patient assessments
- The ability of trained, skilled and competent dental therapists to identify and refer additional treatment to fellow clinicians
- The arrival of the intraoral scanner as the most effective means of patient engagement and communication in a generation.

Given the above, I'm going to stick my neck out and suggest that there is no excuse for either white space or a decline in new patient enquiries, even if the general public is distracted by the three summer months of politics, economics, sport, entertainment and leisure.

- Rule one: get your message out there (internal and inbound)
- Rule two: make your message memorable – the difference that you are making to real people (80% patient stories, 15% team stories, 5% oral health education)
- Rule three: grow the digital TCO role in your practice
- Rule four: seek out and hire the very best dental therapists and allow them to work to their full scope of practice
- Rule five: adopt the extreme business rule on intraoral scanners – a scanner in every room and scan every patient every visit. If you get your TCOs, dental nurses, hygienists, therapists and dentists scanning, you'll have no problem keeping busy.

If you follow these five basic rules, my belief (and the evidence from those in my client base who do) is that business will continue to boom.

The challenge of the summer will be distraction, the challenge of the autumn and winter will be a growing realisation that, no matter what the true colours of our government, we are all going to pay a lot more in taxation (direct or indirect) if we want to maintain any realistic level of both public and private sector resources.

Life, as we know it, is going to get more expensive, and you are going to have to use every trick in the book to keep your business financially healthy.

Start now.



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Sarah Barnard, Regional Support  
Manager at Practice Plan.

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# Boyne Dental and Implant Clinic

**David Murnaghan** reveals how the concept of ‘space’ shaped the redesign of his squat practice and opened up a more patient-centric experience

**M**y motivation for taking on this project was a drive to improve as many people’s quality of life through dentistry as possible. We wanted to build an engaging environment where patients and staff feel comfortable and secure. Changing the old practice’s more conventional ambience and approach to one that mirrors the hospitality standards of a restaurant or hotel has considerably elevated the patient experience.

When we acquired Ryebank Dental in 2020, we inherited a very good patient base. The clinic had always been very forward-thinking regarding technology, having been one of the first clinics to have chairside economical restoration of esthetic ceramic (CEREC) nearly 30 years ago. It was also milling crowns in-house before it was really heard of in Ireland.

However, it was much more traditional in its setting and, like many practices in the past, was adjoined to the previous owner’s residence. This was how dentistry had been for years and, in some cases, still remains.

The surgery was small and limited, located on the first floor and confined. Initially, we tried to keep things as similar as possible to allow for transition with staff and patients, but, slowly, we brought in more of our

## IT WAS IMPORTANT TO LEVEL UP FROM THE TRADITIONAL CLAUSTROPHOBIC DENTAL SETTING

Boyne values. During this period, we were constantly on the lookout for ideal premises. This happened in our third year – two townhouses came up for sale four doors along from Ryebank Dental. Our patients could see the new clinic from the front door! It was a prominent site in the town, and locals

had a bit of a love/hate relationship with it. It had stood empty for five years and was previously used as student accommodation. Still, the fact that it faced the junction of the main street and stood out with its gable-end wall had appeal.

### IDEAL DEMOGRAPHIC

Maynooth has an ideal demographic that fits Boyne Dental’s brand and patient base. It’s a charming university town nestled in County Kildare and boasts a rich heritage. It blends rural tranquillity with urban convenience and is an ideal spot for families. It is also just a 30-minute drive from the heart of Dublin’s city centre.

Planning and change of use permissions took nearly a year, and there were the inevitable compromises. A beautiful stone wall sits alongside the building, and we incorporated it into the renovation – although, to grant side access, we had to take some down and rebuild it exactly as it was.

Corrugated sheet metal panelling clads the exterior walls, softened with lush greenery in large planters, but it retains an industrial edge. The hint-of-gold signage, large and bold with Boyne Dental’s distinctive logo, is the only hint of what lies inside. This utilitarian feel is complemented with a much softer touch once inside – with

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**WEBSITE**  
[www.boynedental.ie](http://www.boynedental.ie)





## *The ethos*

The Boyne Dental ethos is deeply rooted in its unwavering commitment to enhancing the quality of life for all through the practice of dentistry.

To elevate the patient experience, Boyne Dental aims to redefine the traditional dental practice into a space that mirrors high-end hospitality standards. With high ceilings, large windows and beautiful artwork, patients are welcomed into a space that offers dental care in an atmosphere of efficiency, warmth and understated elegance.

The team drives the standards that have always defined its brand. Boyne Dental is confident that it offers an unparalleled patient journey.



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wood-slatted panelling throughout and a pop of purple in the faux leather seating. Our mix of pendulum and factory-type light fixtures illuminates the space and continues the industrial aesthetic. We stayed on brand – with materials, tiling and seating – with our other practices (Boyne Dental was established in 2012).

### FIRST IMPRESSIONS

We wanted people's first impressions to be that of an art gallery or coffee shop. The reception area is an open and airy space flooded with natural light, thanks to three-tiered boxed bay windows in the stairwell and a huge floor-to-ceiling window on one side. I liken it to terminal two at Dublin Airport, which has won awards for its free-flowing, expansive and contemporary design.

In fact, the concept of 'space' was one of our major focuses when we redeveloped our first and now flagship clinic in Navan in 2015 and then Dunshaughlin. Fundamentally, it is how we see the delivery of dentistry for the future – more open, customer-friendly and inviting. It was important to level up from the traditional claustrophobic dental setting to a space fostering a strong engagement in everything around us.

From the moment patients walk in, they are greeted by our attentive reception team, undistracted by phones or gadgets, to ensure they feel truly welcomed. A blend of fragrances, courtesy of candles and incense, creates an inviting ambience, and paintings by local artists bridge the open spaces.

In our surgeries, we have ceiling-mounted TVs. Our Bose speakers deliver crisp sound, and music is tailored to each room to suit patients' needs during procedures.

Boyne Dental is a progressive clinic dedicated to enhancing the patient experience by leveraging state-of-the-art technology, ensuring a seamless and superior journey for all.

## *The team*

**PRINCIPAL DENTIST AND DIRECTOR**  
David Murnaghan

**GENERAL MANAGER**  
Eve O'Hea

**PRACTICE MANAGER MAYNOOTH**  
Diana Molocnaja







## COMMUNICATION

Prioritising patient education, consent, meticulous record-keeping and optimising the speed and quality of restorations were all important to us. We've substantially invested in enhancing multichannel patient communications through our business hub. This allows seamless communication with Boyne, either by phone or online. Though the investment has been significant, we anticipate substantial returns over time – and we are already seeing signs of this.

We have 'same-day' assessments for complex treatments, and can judge the volume and quality of bone much better and plan space management of teeth and prostheses using CEREC, and we have Iteros for designing wax ups and guides.

We were mindful to take our time with the transition to the Boyne brand. We wanted to ensure a smooth integration of staff and practices from Ryebank Dental into the Boyne Dental family, but we were also keen to preserve each practice's culture and expertise. This required a thorough understanding of their importance, experience and local knowledge. As with any takeover, some people were resistant to change, and those who were have moved on.

But we have retained a vital core of the original team, who have been very loyal to us and adapted to our brand ethos. Hopefully, they are also reaping the rewards of working in a beautiful, spacious and cutting-edge environment with a multidisciplinary team.

As we enter this next chapter, we are focused on new goals for Boyne Dental & Implant Clinic. We want to



reinforce our core ethos of improving quality of life through all aspects of dentistry, empowering nervous patients to engage and those who may have recently avoided attending the dentist to re-engage. Having a holistic approach and multidisciplinary team to look after and treat patients is essential in making the experience enjoyable.

## Who was involved?

**Architect**  
Cooney Architects

**Main contractor**  
Glenthorn Joinery – Stephen Murphy and Ronan Morris

**Dental suppliers**  
DMI and Henry Schein





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# Inspirational practice design trends

**Sarah Casey** explores the latest in dental practice design ideas

**T**he field of dental practice design has witnessed a transformative shift in recent years, and it's been a while since they were stark, white clinical environments.

Today, successful dental practices strive to create spaces that are both aesthetically pleasing and highly functional, enhancing the patient experience from the moment they walk through the door.

As we're all aware, your practice interior doesn't only influence patient comfort and satisfaction, it reflects the professionalism and quality of the services provided.

The team at Apollo Interiors specialises in dental practice design and build. This article explores the key dental clinic design trends that have recently emerged and which we are increasingly incorporating in our practice design schemes.

## A SPA-LIKE EXPERIENCE

Over the past couple of years, we've seen an increasing number of clients seeking to create a spa-like environment in their practice.

With more clinics offering facial aesthetics alongside dentistry, many clients want to make their practices a destination for aesthetic treatments and strive to create a luxurious space to reflect this.

A beautiful boutique setting is appealing for patients and provides a fitting environment for premium treatments.

## FROM WALL PANELLING TO FINISHES

More and more of our practice fit-outs include wall panelling and luxury wood finishes. Darker woods have overtaken paler tones – where clients once favoured lighter oak finishes, current design schemes feature darker tones like American walnut – a wood that combines particularly well with tones of grey.

Interior wall panelling has been experiencing a resurgence in practices as well as in homes. From period style traditional panelling to contemporary slatted feature walls, it's a great way to strategically highlight certain areas and elevate your practice interior.

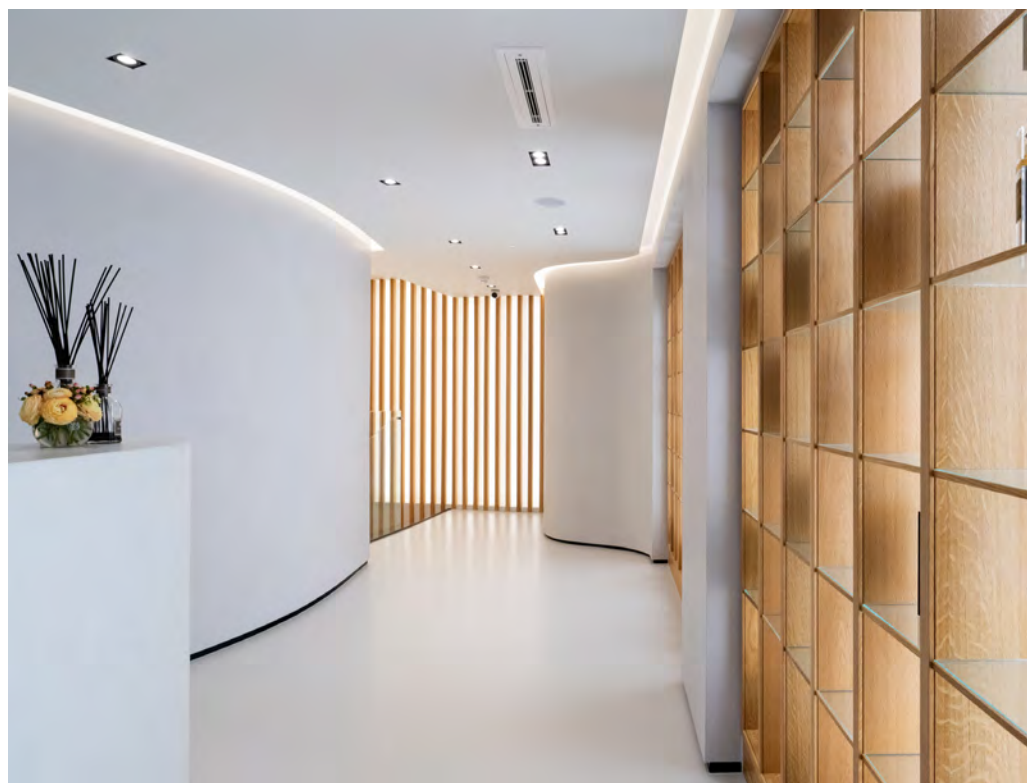
If noise is an issue in your clinic, acoustic panelling (usually backed with foam) is a good way to reduce sound – for example when insulating against noise from a plant room.

## FEATURE LIGHTING

Lighting plays a crucial role in setting the mood of your dental practice. We like to layer lighting to create a relaxed feel – for example, using concealed LED strip lights to create a soft halo effect around cabinetry, in combination with practical working lighting in surgeries and often a show-stopping feature light.

LED ambient lighting is extremely versatile. Clients love the fact that you can change the colour and brightness, enabling you to have an entirely customisable atmosphere at the touch of a button. And it's not just suitable for modern buildings – LED lighting can be added to coving in period properties to great effect.

Lighting types tend to vary across the practice, with reception areas typically incorporating warm lighting tones and surgeries cool ones. Because of this, it's a good idea to



**Sarah Casey**  
Sarah is a designer at Apollo Interiors.





incorporate warm neutral wall colours that work with all tones of lighting.

### LUXURY TOUCHES

We've touched upon luxury wooden finishes, but the use of high-end materials doesn't end there. Metal accents continue to be very popular, especially touches of brass and gold, which are often used in combination with the darker woods to great effect – for example, in light fixtures, hardware and decorative elements.

Natural materials are a good choice for creating that luxury boutique feel in your reception area. Wooden veneers, for example on doors or reception desks, can be particularly effective.

Biophilic design – the incorporation of plants in design – is another continuing trend. Long associated with increased wellbeing for patients and staff, plants are also an easy way to introduce colour and texture. Faux plants have always been a popular choice due to their low need for maintenance, however these often don't provide the same wellbeing properties as real plants. Interestingly, with plant preservation methods becoming increasingly sophisticated, we're seeing a greater number of low-maintenance real plant options becoming available.

Another key trend that also offers a practical solution is touch-free sensor taps. These are a stylish alternative to medical-style lever taps and are available in a range of colours and finishes to complement your clinic design scheme.

### VISUALLY STUNNING PRACTICES

With many dentists adding aesthetic treatments to their offering and opening up to a wider client base, the onus is increasingly not on creating a purely functional clinic but one that is also visually stunning.

With the lines between the private dental and high-end beauty industries becoming increasingly blurred, the clinic trend for luxury boutique finishes continues to dominate the private dental market.



*For more dental practice design inspiration, view Apollo Interior's recent dental practice fit outs at [www.apollointeriors.com/case-studies](http://www.apollointeriors.com/case-studies).*

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# Tax tips to *boost* your bottom line

Ashish Parmar asks Pankaj Patel for his sage advice on tax issues

## **Q** What are the most important tax related things that dentists need to look at?

**A** There are a few things to consider. Firstly, dentists must document all income and expenses accurately, only deducting business related expenses. For example, an associate dentist cannot claim commuting costs when working at a single practice. However, if they work in multiple practices and the expenses do not fall under ordinary commuting rules, such expenses could be considered valid. Dentists should know deductions like education, subscriptions, licensing and insurance.

Dentists must also comply with tax laws and regulations specific to

healthcare professionals. Moreover, considering tax planning strategies early can help dentists minimise tax liabilities and maximise deductions.

For more complex planning, there are options such as setting up pension plans, which will enable the purchase of commercial property tax efficiently, and setting up discretionary trust structures that can be used to plan the passing of family wealth down generations.

## **Q** What are your top tips for young dentists who have just qualified in terms of tax, investments, property etc?

**A** My top tips for new dentists are:

1. Maximise tax advantages: try and take advantage of tax efficient vehicles, whether you're a new associate or practice owner. This helps minimise your tax burden and retain more wealth to invest for your future. Don't ignore the compound effect of such a strategy

over the long term. For example, even putting money in an individual savings account (ISA) will provide an opportunity for investment as well as earning tax-free income

2. Property investment: property is a longer-term investment and needs careful consideration. Yields in the south-east, for example, have been low, simultaneously capital growth has also been suffering. Yields in other areas of the UK can be much higher, and if you invest in the right areas, you may also get some good capital growth. This is a complex area where we can help you explore what could be suitable for you
3. Investing in yourself and smart financial choices: consider investing in advanced training, CPD and quality equipment for long-term benefits and higher returns. Sometimes when you are young and start earning a substantial figure, it can be overwhelming. Rather than buying depreciating



**Pankaj Patel**

Pankaj is the founder and managing director of Aequitas Accountants. He is a member of the Institute of Chartered Accountants in England and Wales with over 30 years of experience and qualified with KPMG. He specialises in the healthcare sector and excels in achieving client success.

## Tax tips *at a glance*

1. Record keeping: accurately record all income and expenses, no matter how small
2. Plan ahead: consider your long-term tax strategy as early as possible
3. Young dentists: maximise tax advantages through ISAs and other tax-efficient options. Invest in yourself through advanced training and equipment. Focus on long-term investments over depreciating assets
4. Incorporation: becoming a limited company can bring tax advantages but also an increased administrative burden. Seek expert advice to see if it suits you
5. Inheritance tax planning: if you are approaching retirement, explore inheritance tax planning options like discretionary trusts and cash gifts to children for their investments or business
6. Find a good accountant: look for an accountant with expertise in the dental profession and who understands your business goals.



assets, like luxury cars or watches, focus on investments with long-term appreciation.

Making wise financial decisions early in your career sets a solid foundation for future financial stability.

**Q What strategies can dentists use to legitimately offset tax and therefore earn more?**

**A** This is a broad area and includes a wide range of information. It is essential to maximise tax benefits by covering a wide range of business expenses such as rent, insurance, professional subscriptions and training costs. Claiming any expense (even buying coffee for staff meetings) directly related to the business can help significantly reduce tax liabilities.

Strategic capital investment planning is crucial for tax reduction and cash flow management. Early involvement of family members as shareholders or partners can offer tax-saving opportunities through dividends, salaries and profit sharing. It's important not to overlook tax

advantage schemes like pensions and electric cars, particularly if the company has surplus funds.

Additionally, purchasing mobile phones and computer equipment through the business can provide tax benefits, but care must be taken as some acquisitions may attract benefit-in-kind taxes for employees.

**Q Should an associate dentist set up a limited company?**

**A** This is a question we get asked regularly, and there isn't a simple answer as there are many factors to consider. While incorporating can offer advantages in certain scenarios, it may not always be the most tax-efficient option for everyone.

## CONSIDERING TAX PLANNING STRATEGIES EARLY CAN HELP DENTISTS MINIMISE TAX LIABILITIES AND *maximise deductions*

Here are some pertinent matters that I would highlight. Incorporation can offer an immediate tax advantage for higher rate taxpayers. Instead of being taxed at 40–45% as self-employed individuals, profits can be subject to a lower tax rate ranging from 19% to 25% within a company, depending on the level of net profit. However, there would be an additional income tax on any dividends drawn by higher rate shareholders at 33.75% or 39.35%. Consequently, extracting profits from a company could cost you 52.75% to 64.35% in tax compared to the higher rate tax of 40–45% being self-employed.

So, when will it be the right time to incorporate for you? Take this case



# Dominic Hassall

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# *A skilled accountant* **SHOULD HAVE EXPERTISE TAILORED TO YOUR INDUSTRY**

as an example: you are earning more than £100,000 and your monthly expenses don't require a significant portion of your income. Here, you can strategically manage your withdrawals to stay below the basic rate threshold.

By doing so, the company would only pay 19-25% tax, and you as an individual would pay an 8.75% dividends tax. This approach minimises the total tax burden for both the company and the individual. The unwithdrawn funds will be retained by the company, and these can be utilised for various other investments.

- Incorporation could be a strategic option if you intend to leverage your partner's tax allowance. By appointing a non- or low-earning spouse as a shareholder, they can receive both salary and dividends from the company up to their tax-free allowance or even up to the basic rate threshold
- Running a limited company offers advantages but also increases administration time and costs. Meticulous record-keeping and compliance with Companies House and HMRC are essential. For low-income associates, tax savings may be outweighed by administrative burdens
- Working as a high-earning associate in an NHS practice provides significant income and supports NHS pension contributions. Changing to a limited company can be challenging since pensioning income may not be available. The NHS scheme offers lucrative benefits that may not be easily replaceable elsewhere or through private contributions. This factor is crucial to consider when contemplating incorporation.

Every individual's situation and future planning is different, hence I would recommend seeking advice from a professional accountant or tax adviser before making a decision.

## **Q For a more mature dentist, what guidance can you give in terms of inheritance tax planning?**

**A** If you are approaching the latter stages of a successful career in dentistry, chances are you will have accumulated a good level of wealth along the way. It is sensible to begin planning for your estate to avoid the high rates of inheritance tax of up to 40%.

There are several ways of dealing with this. One approach is to establish a discretionary trust and transfer assets into it to safeguard your children's future. These transfers, known as chargeable lifetime transfers, may incur taxes, but if the property value is below £650,000, the transfer can be covered by the husband and wife nil rate band.

Following the transfer, if you survive for seven years, your nil rate band is reset, allowing for additional gifting opportunities. This is a complex idea and one that should be explored further for a full understanding of what is involved.

Cash gifts to children for starting a business or investments are inheritance tax-free as potentially exempt transfers. Establishing a family investment company can be an effective tax planning tool for individuals with substantial estates. This private investment company is designed for family succession planning, with family members/trusts as directors and shareholders. The company's 'articles of association' outline different share classes, allowing directors to allocate capital or income to specific classes as needed.

Given the complexity of these strategies, it is advisable to consult specialist tax advisers for a comprehensive understanding.

## **Q What should a dentist look for in a good accountant?**

**A** A skilled accountant should have expertise tailored to your industry, going beyond number crunching to grasp your business, goals and future plans. A dental accountant requires industry-specific knowledge and benchmark data for in-depth analysis of key business ratios.

For example, managing an NHS practice requires cost control, aiming for purchase costs at 2-3% of revenue and laboratory bills at 4-6%. High-end cosmetic treatments may see purchase costs at 7-10% and laboratory bills at 10-14% of revenue. A knowledgeable accountant can help monitor these costs for optimal profitability.

Specifically, when serving NHS practice owners, understanding NHS activity statements and adeptly reconciling financial figures is vital. A proficient accountant should be capable of navigating complexities such as clawbacks and underpayments within the appropriate timeframe, thereby optimising tax implications and cash flow management.

For private practices, setting marketing budgets and effectively allocating them, along with enhancing the practice's appearance, from reception areas to customer experiences, are crucial factors. When acquiring a practice, thorough legal and financial due diligence is essential to mitigate commercial risks.

This exercise safeguards against inheriting any tax liabilities previously borne by the seller. An expert accountant can identify and address these concerns effectively.

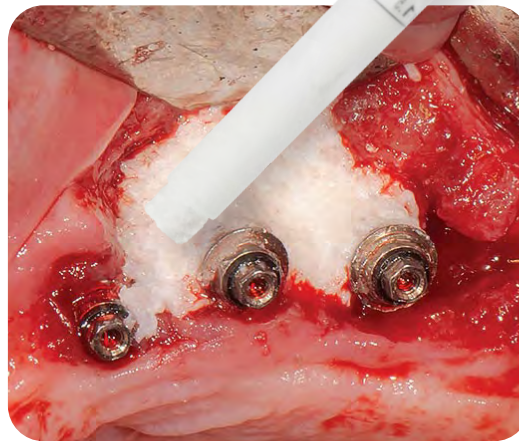
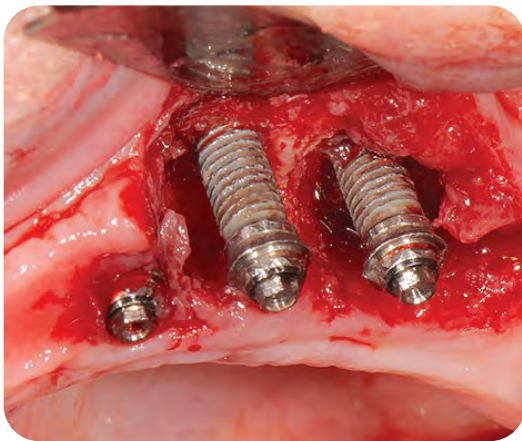


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# Capital challenges

**Arun Mehra** offers strategies for success amid the triple whammy of high taxes, borrowing rates and a labour shortage

**C**ombining a winning idea with access to capital and a skilled workforce is crucial for business success.

However, achieving all three simultaneously is not always straightforward.

As a dentist, you may be at the point in your career where you are ready to launch your own dental practice. You may have already created a comprehensive business plan outlining your services, target market, pricing strategy and financial projections. Alternatively, you may be looking to develop an already thriving clinic or open another. You may be considering expanding your team to accommodate the growth, or perhaps you're exploring new technologies to enhance patient care and streamline operations.

But, in the current economic climate, accessing capital is challenging for businesses across all sectors. High borrowing rates and stringent lending criteria make it more difficult for potential dental practice owners to secure the funding they need to launch, expand or maintain their operations.

However, dentistry continues to be favoured by the major lenders. While things may be more challenging, we are still very active in securing funds for dentists from the main banks in

the marketplace. For those seeking alternative funding avenues, there are some others to consider.

## STRATEGIES TO NAVIGATE CAPITAL CHALLENGES

- Alternative financing encompasses non-traditional funding methods beyond bank loans, catering mainly to start-ups and small- and medium-sized enterprises (SMEs). These options include crowdfunding, which can be reward-based, equity-based or debt-based. Platforms like Kickstarter and Indiegogo facilitate these campaigns
- Venture capital firms invest in early-stage high-growth companies, offering funding and mentorship, often in exchange for significant equity
- Private equity firms focus on established companies seeking expansion or restructuring, providing investment and operational expertise. Additionally, angel investors can offer capital to start-ups for equity or convertible debt, while peer-to-peer lending connects borrowers with individual lenders at competitive rates.

Out of all of the above, alternative financing stands out for its accessibility, flexibility, reduced equity dilution and benefits such as mentorship and networking opportunities. These can provide the necessary capital without the burden of high interest rates. However, as with any of these types of fundraising, it is essential to understand your commitments and the impact this may have on the ownership of your business.

For first- or second-time buyers, we still strongly recommend borrowing from a bank as the first port of call, as most lenders will support most dentists seeking to get onto the ownership ladder.

Whatever you choose, implementing efficient cash flow management practices is vital to ensure timely patient payments and reduce operational costs. This could include reviewing your billing processes and ensuring you always have the funds from a patient before you start any lengthy dental treatment. Alternatively, look at areas where you can reduce your costs in the business without impacting the service level you provide. Joining a buying group can help. For example, we now have hundreds of practices in our buying group, helping clients to save money each month.

## ACCESS TO A SKILLED WORKFORCE

While each has its own challenges, the lack of a skilled workforce is arguably the most pressing issue. Dental practices struggle to deliver quality care and meet patient demands without supportive human resources, ultimately impacting their bottom line. Recruiting qualified dental professionals has become increasingly competitive, challenging the process of finding and retaining talent.

Last year, a Dental Protection survey of 1,300-plus dental professionals in the UK revealed that more than a third (36%) feared dentolegal issues arising from staff shortages negatively impacting their mental health.

At the time, Yvonne Shaw, deputy



**Arun Mehra**

Arun has a wealth of experience in setting up and managing dental practices, marketing dental practices and helping dentists with accounting and tax solutions. He is the founder and CEO of Samera, a global provider of accountancy, tax, outsourcing and financing solutions for healthcare businesses and other accountancy firms. Visit [samera.co.uk](http://samera.co.uk).





dental director at Dental Protection, said: 'One of the many problems with staff shortages is the knock-on effect on the mental health of remaining staff who risk becoming exhausted and/or demotivated. Over half of our members tell us they are worried about how exhaustion and burnout impact the safe delivery of patient care. The effect of not being able to provide optimum standards of care on any healthcare professional's mental health – due to external factors and pressures outside of their control – cannot be overstated.'

An article published online in March 2024 by Dental Protection also notes: 'Challenges in staff retention are further compounded by concerns related to work-life balance, career advancement prospects and discrepancies in remuneration. The COVID-19 pandemic has also had a significant impact on staff retention, with increased stress and anxiety levels experienced by healthcare workers. The exceptional demands placed on dental professionals during the pandemic have sometimes accelerated existing challenges related to staff retention, leading to increased turnover rates in dental practices.'

So, what might some long-term solutions to dental staff shortages look like? While pay matters, staff value job satisfaction, a work-life balance and an inclusive workplace environment where their efforts are recognised and developed. So:

- Invest in training and develop in-house programmes to upskill existing staff and bridge skill gaps within the team

- Improve workplace culture
- Recognise and reward staff contributions
- Provide numerous avenues for career advancement
- Carry out targeted recruitment drives
- Collaborate with healthcare providers and dental schools/ educational institutions
- Implement flexible working arrangements to support staff wellbeing
- Be inventive, too! An example of transformation through innovation might be adapting consultation practices. Implementing a hybrid model combining in-person and virtual consultations could work for a practice faced with staffing shortages and rising operational costs. This allows a clinic to expand patient reach and optimise staffing resources, ensuring efficient staff utilisation.

### OVERHAUL STRATEGIES

For dental practices struggling with economic constraints, now is the perfect time to reassess and overhaul their business strategies. Every business should constantly be reviewing its purpose and operations. This means not doing what you have been doing previously but looking at a different way of solving the problem.

Focus on:

- Innovation: embrace technological advancements to streamline operations, enhance patient experience and reduce costs
- Diversification: explore new service offerings or partnerships that

can create additional revenue streams and mitigate risks, such as introducing a patient plan

- Patient-centric approach: prioritise patient satisfaction and engagement to build loyalty and differentiate your practice in a competitive market. Many options are available here – a kids-only practice or delivering an emergency dental service are two examples
- The role of technology: technological advancements, such as telehealth solutions, AI-driven diagnostics and cloud-based practice management systems, can play a pivotal role in mitigating some of these challenges. These technologies can improve operational efficiency, enhance patient care and provide valuable insights to inform strategic decision-making.

As dental practice owners look ahead, focusing on the following key areas can help them to adapt and thrive:

- Patient engagement and satisfaction: monitor patient feedback and satisfaction scores to identify areas for improvement and deliver personalised care
- Financial performance: regularly review financial metrics such as revenue, profitability and cash flow to identify trends and make informed financial decisions. Implement a system whereby you can view the practice's performance monthly and involve your team members to help you improve performance. Monthly management reporting is essential in a tough economic environment
- Operational efficiency: assess operational workflows and processes to identify bottlenecks and implement improvements optimising resource utilisation.

While the challenges facing dental practices in the UK in 2024 are significant, they are not insurmountable. By adopting a proactive approach, embracing innovation and focusing on continuous improvement, practice owners can navigate these challenges successfully and position themselves for long-term success. Now is a perfect time to reassess your business strategy.

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*For the references that accompany this article, email [patrick.ward@fmc.co.uk](mailto:patrick.ward@fmc.co.uk).*

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# The future of digital marketing

**Sumit Kumar** shares advice on making the most of emerging digital technologies

**D**igital marketing is rapidly transforming the dental industry. To stay ahead and attract more patients, private dental clinics need to embrace the latest advances. Here are the top trends in digital marketing that will shape the future of dentistry and keep your practice thriving.

## 1 BEFRIEND AI AND MACHINE LEARNING

Imagine having a digital assistant that predicts what your patients need before they even ask. AI and machine learning are making this possible by analysing patient data to forecast behaviours and preferences.

From optimising appointment schedules to personalising marketing messages, these technologies are revolutionising how dental practices operate.

## 2 GET FOUND WITH VOICE SEARCH

'Hey Siri, find me a dentist near me.' More people are using voice-activated devices to search for local services. Ensuring your website is optimised for voice search with conversational keywords can help your clinic pop up in these searches. It's not just about being found – it's about being found easily.



**Sumit Kumar**

Sumit is growth marketing strategist and co-founder of Creative Ideaz. For more details, visit [www.creativeideaz.co.uk](http://www.creativeideaz.co.uk).

## THE FUTURE OF DIGITAL MARKETING IN DENTISTRY IS FULL OF POTENTIAL

## 3 MAKE IT ABOUT THEM

Forget one-size-fits-all marketing. Today's patients expect content that speaks directly to them. Use data to create personalised email campaigns, social media ads and website experiences that make each patient feel valued and understood.

## 4 SHOW, DON'T JUST TELL

Videos are a fantastic way to build trust and explain complex procedures. Create engaging videos that showcase your expertise, share patient testimonials and provide helpful oral health tips. Live sessions on social media can also boost real-time engagement.

## 5 CONTENT IS STILL KING

Great content can set you apart from the competition. Write blog posts that answer common patient questions, create infographics that simplify dental health topics and publish ebooks that dive deeper into specialised treatments. And don't forget to optimise for search engine optimisation (SEO) to ensure your content reaches the right audience.

## 6 ENGAGE WITH SOCIAL MEDIA

Your patients are on social media, and you should be too. Regularly post engaging content, respond to comments and messages, and run targeted ad campaigns. Share success stories, behind-the-

scenes looks at your practice and educational content to build a loyal online community.

## 7 MANAGE YOUR ONLINE REPUTATION

A glowing online reputation can be your best asset. Encourage happy patients to leave positive reviews on platforms like Google and Trustpilot. Address negative feedback promptly and professionally to show that you care about patient satisfaction.

## 8 THINK SMALL SCREENS

With more people browsing on their phones, your website needs to be mobile-friendly. Ensure it's fast, easy to navigate and looks great on smaller screens. Consider mobile-specific marketing strategies like text message reminders and mobile ads to keep patients engaged.

## 9 AR AND VR: THE NEW REALITY

Augmented reality (AR) and virtual reality (VR) are no longer science fiction. Use VR for virtual practice tours or to explain procedures in an immersive way. AR apps can help patients visualise cosmetic treatments, making it easier for them to decide on a course of action.

## CONCLUSION

The future of digital marketing in dentistry is exciting and full of potential. By embracing these trends, you can enhance patient engagement, improve retention and grow your practice. Stay ahead of the curve and watch your clinic thrive in this digital age.

# Ten tips for digital growth in the aesthetic market

Adam Hampson gives his advice on making the most of your online presence

**H**aving spent 19 years in dental and aesthetic marketing, I'm happy to share some top tips to avoid common mistakes dentists often make in the aesthetic market.

## 1 STRATEGY BEFORE TRAINING

A lot of dentists start with a beginner course in Botox and fillers but fail to start treating patients after their training, which can lead to a loss in confidence.

Refresher courses are popular in aesthetics for this reason. Without a plan straight after, you will be paying for expensive training several times without making any progress.

Decide if you want to treat just the face or also the décolletage, hands and neck – and even medical symptoms, such as migraines, temporomandibular disorders or hyperhidrosis.

All are commonly treated with injectables these days. Some practitioners like to treat particular areas, such as lips, so you're going to need advanced level training in these areas. Have this in mind as part of your plan before choosing your training.

## 2 UNDERSTAND PATIENTS' MINDSETS

The mindset of patients has evolved massively. Twenty years ago, dentists would just have a single page on their website dedicated to Botox or fillers. Websites now need pages on areas of the face, symptoms, popular male treatments, age and skin type.

In the past, people were not forthcoming about having treatments, but now they openly discuss them on social media.

Price has become a more important factor in injectables than before. Patients look for before and after photos and reviews. This helps them make an informed decision about you as a provider.

There are aesthetics patients that will be interested in cosmetic dental treatments such as whitening, Invisalign or bonding, which presents a great opportunity to upsell.

## 3 REVIEW YOUR STRATEGY

Any marketing plan, especially in a competitive landscape, may need to change. What you think will do well doesn't necessarily work out that way. The more competition you have, the higher your marketing costs can be and your participation drives up the price. Whatever your strategy is to begin with, be aware that you may need to change it very quickly to adapt.

If you are working with a digital agency, make sure it has flexible ways of working to ensure any strategy can be changed quickly.

Your agency should be continually tracking your new patients and reviewing your strategy.

## 4 SHORT- AND LONG-TERM

Think of your digital marketing in terms of short- and long-term growth. Google search engine optimisation (SEO) takes time. Your SEO is essential for medium- to long-term growth, whereas paid ads can work immediately, generating new leads and patients.

Sometimes we see dentists have invested significant amounts in SEO without any traction or new patients. It is important to consider running paid ads alongside any SEO, so you're generating new patients at the same time and making a profit to then reinvest into your long-term marketing.

## 5 DIFFERENT PATIENTS, DIFFERENT PLATFORMS

The age of your patient will affect the treatments they are looking for. Patients in their 20s are likely looking for lip enhancement, shape correction or skin issues. Patients in their 30s and early 40s might be looking to remove fine lines and wrinkles, while patients in their late 40s or 50s onwards will most likely be looking for treatment for deeper lines and volume loss.

The age of your patient will likely determine the platforms they use when looking for treatment. Younger patients on social media platforms prefer Tiktok and Instagram, while



**Adam Hampson**

Adam is the director of Cosmetic Digital, specialists in aesthetic and dental marketing since 2005. Working with dentists to grow their practices.



older ones will prefer to be on Google. Trying to reach a particular patient through the wrong platform is a common mistake made by marketing companies who don't have enough experience in aesthetics and do not understand which platforms are best when targeting certain patients.

The location of your practice and patients is also important. If your practice and patients are in a rural location, your competition may be spread out, with your patients more prepared to travel further. This means you have to be even more strategic when choosing which locations you're going to target. In this situation, we recommend our rural clients use Google Ads. The reason for this is you're able to specifically target certain areas for new patients, while completely avoiding others.

Doing this saves marketing spend and increases your profitability. In large cities like London, patients may prefer clinics closer to home.

## 6 IMPROVE YOUR GOOGLE RANKING

Patients trust practices that rank at the top on Google. If your practice is not in the top three, then you're going to be missing 90% of new patients searching like this. One of the most common reasons a practice isn't able to get to the top is due to their website.

If ranking at the top of Google is your marketing priority, then go for a website built from scratch on Wordpress.

Choose keywords based on search volume (how many people are searching for a particular word or phrase).

By all means include industry jargon such as nasolabial lines or non-surgical rhinoplasty, but also think about common terms your patients use for searching.

No clinic or practice is number one for everything, no matter how big its marketing budget is. By narrowing

your focus, you can allocate more resources and attention to those specific treatments to rank higher.

## 7 GOOGLE AND FACEBOOK RULE CHANGES

Clinics are having issues with their ads on Facebook and Google being unapproved, not launching in the first place or being paused without warning. The reasons can vary from issues with keywords and images on your website to having no disclaimer, to using patient before and after photos – another reason we recommend working with an agency with expertise in aesthetic digital marketing.

Understanding the reason for an ad being stopped can save you thousands in losing new clients.

At present, Google doesn't approve websites that contain the term Botox, and there are rules set out by the Medicines and Healthcare Products Regulatory Agency for using the this



term – which we recommend you read carefully.

However, if at some point you run Google ads, you may need to think twice about whether you include the term Botox and other treatments that Google doesn't approve of, as they may not approve any Google Ads you want to run.

You could be wasting money if you have to remove all of them in the future.

Take professional marketing advice about your strategy if you're uncertain about what you should or should not be including in your website.

### 8 GENERATE LEADS WITH PAID ADS

Social media is a great marketing platform for some clinics, building trust, brand awareness and insight, but Google has not been replaced by Instagram or Tiktok just yet. It is still the go-to search platform. Also, the quality and number of new patients via Google seems to be far

higher than social at present.

Google Ads is the most expensive platform to be on, but it is also one of the best, in my opinion. This is the reason the bigger clinics use it.

One of the biggest problems to watch out for with Google Ads is negative keywords. These are keywords used in searches but by people who don't become patients. Including these negative keywords can lead to high clicks but low conversion rates and high bills.

Also, I don't recommend you manage your own ads, as doing so can be very costly. It may also potentially put you off using Google Ads, when they may, in fact, be exactly what your practice needs.

### 9 GOOGLE MY BUSINESS

Setting up your Google My Business (GMB) profile is easy and simple. You can do it yourself to boost your local SEO and drive more patients.

Fully optimised, it includes photography, business category, map location, address, opening

hours, contact number and website.

The main ranking factors for whether your profile shows up first for relevant keywords, such as 'aesthetic clinics near me', is if it is optimised with all of the valuable content detailed above. A GMB page also allows your current patients to leave Google reviews.

### 10 SOCIAL MEDIA PAID ADS

Social media paid ads can be a great platform for clinics that are starting out, or on a smaller budget. They can help build brand awareness, but they do work very differently to Google Ads. These are not as specific as the keywords Google uses, but it does allow you to narrow your audience in terms of the age range and gender, so your ads on social media are being seen by a relevant audience.

Your daily budget determines the number of people that your ads reach. Try using social media first.

Certain treatments advertised on social media can be more profitable than on Google due to their price bracket and profit margin.



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# Molaris I & II: the heavy metal side of Zirkonzahn

**Zirkonzahn's** new production sites produce metal blanks, machine parts, milling burs and more than 6,000 implant prosthetics components

**Z**irkonzahn's Molaris I & II production sites, located nearby the company's headquarters in the Aurina Valley, South Tyrol, host the high tech necessary to produce all burs, machine parts, implant prosthetics components and metal blanks.

The company's values of rigour, precision and quality are clearly reflected in this location.

By means of the latest turning, milling and grinding techniques, the company's range of manufactured implant prosthetics components achieves a particularly high accuracy, using a high-quality medical titanium alloy (Ti 6Al 4V ELI according to ASTM F136 and ISO 5832-3). The range is in constant expansion and is currently comprised of more than 6,000 components available for more than 140 implant systems.

All components are fabricated to meet the strictest quality criteria, and to reinforce this, the company assumes the responsibility by granting voluntarily up to a 30-year warranty on all Zirkonzahn implant abutments used and the corresponding screws.

The warranty also includes implants from other manufacturers used in combination with Zirkonzahn's implant abutments.

In Molaris I & II, the company also manufactures all milling and grinding tools for their milling



*Sinternit blanks, the company's sinter metal*



*Measurement equipment guarantees quality and precision*



*One of the company's three production halls dedicated to implant prosthetics components*

systems with no involvement of third parties, creating any tool geometry and making quick and flexible adjustments in close collaboration with the in-house research and development department.

Surface coating, electroplating and diamond coating procedures are also performed in this facility, along with the production of the company's range of 200 milling burs – with different geometries and shank diameters (3 and 6 mm) – milling unit parts and colouring liquids.

The company's blanks of Sinternit, the firm's sinter metal, are also produced in this location, where injection moulding machines are used to inject more than 10 different types of resins into discs and to provide them with different colours or colour gradients.

Finally, to ensure safety and prevent breakdowns, the same task is performed by two machines and measurement equipment as well as technical testing (eg optical and tactile 3D measuring, hardness and roughness measuring, microscopic analysis, etc.) are used to guarantee quality and precision.

*For further information or to arrange a company tour, visit the website at [www.zirkonzahn.com](http://www.zirkonzahn.com). Alternatively, contact Carmen Ausserhofer by calling +39 0474 06 6662 or emailing [carmen.ausserhofer@zirkonzahn.com](mailto:carmen.ausserhofer@zirkonzahn.com).*

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# The *picture* and the *frame*

Dentists are perfectly suited to the rewarding field of facial aesthetics, says **Ruth Brady** in the first of two articles

**A** cynical, middle-aged teacher, whose face was well on its journey south, once sat next to me at a local pub quiz. Watching me score well on the anatomical questions, she enquired what I did for a job. After I informed her, she delivered her judgement with real authority: should she ever feel that she'd benefit from such a treatment, she'd go straight to a plastic surgeon and never consider going to a dentist.

Thankfully, an eminent plastic surgeon in Leeds disagrees, because he sends all the patients who don't require surgery to me! I chose not to tell her this, though, as I didn't want to even tempt her to become one of my patients. I've learnt over the years that the way to continue enjoying one's work, in the latter stages, is to be a little bit more selective about who one treats, especially in this job!

Much of the general public held the same view as her until a few years ago, as well as some dental colleagues. And this is why I've been invited to write this article, to change that perception and encourage more dentists to understand why these types of treatment slot so harmoniously into the dental camp. After all, we have such a widely transferable skill set. With the correct anatomically based

training in facial aesthetics, added to our existing dental knowledge, we are actually the perfect professionals to deliver these treatments.

## WHY ARE WE SO SUITED TO THE JOB?

In the aesthetics procedures referred to as non-surgical, treatment is carried by injection-based techniques, not scalpels. Dentists handle syringes all day long, with great delicacy and stability, using multi-point finger rests on the face, something that was fundamental in our early training.

Unlike some other medical and non-medical personnel, who carry out such treatments, we understand the need to be 'anchored' onto the patient's face for precision and safety, since we handle both syringes and rapidly rotating instruments. And that is just the start!

Consider also the immense knowledge that we already possess regarding facial analysis, including jaw relationships, dental arch shapes, smile lines, lip and soft tissue support, profiles and facial angles, as well as that of temporomandibular disorders and its relation to masseter hypertrophy and widened jawlines. We also understand the psychology of how to treat a nervous patient.

All this information bears such direct relevance to the subject that we have an absolute head start on everyone else, if you will excuse the pun, before even training on the foundation level aesthetics courses.

I cannot emphasise enough how valuable my past dental experiences have been to my present aesthetics

career, enabling me to achieve some quite amazing full-face improvements. Without this background of dental knowledge, I do not feel that I could perform to the same level.

## CASE STUDY

In the full-face case pictured opposite, I made some quite dramatic changes to the structure of this dental nurse's chin, cheeks, lips, peri-oral area and jawline. One could be forgiven for assuming these results were achieved by surgery. But, in fact, during one single three-hour session, her face appeared to be transformed.

I placed various hyaluronic acid dermal fillers, at differing depths, to give the desired structure and appearance, and I used a fine blunt cannula to do this. It was inserted via tiny holes, created by a small introductory needle. Only one tiny bruise occurred on the jawline during the whole process, but nothing more. There was no downtime, and she was back at work with me the next morning, looking and feeling beautiful.

Completing the look, the botulinum A toxin, which was injected into certain facial expression muscles a week earlier, started to take effect around the same time, stabilising the gummy smile and melting away the lines on the upper face. Her increase in confidence was as obvious as her increase in psychosocial wellbeing.

These treatments are not completely permanent and could require repeating from time to time to maintain the look, but they do cause the tissues to increase collagen production and help slow down the



**Ruth Brady**

Ruth is a dental surgeon and a multi-award-winning practitioner in advanced facial aesthetics. With a wealth of experience and a career spanning almost 40 years, she was a clinical director of her own practice for 30 years, administering cosmetic dentistry, implant surgery and facial aesthetics. She now focuses on non-surgical aesthetic treatments.



## Case study

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ageing process. The permanence of surgery can have its downsides too, for obvious reasons.

### PICTURE AND FRAME

When I qualified, a good aesthetic result was judged to be when new restorations blended in with the existing teeth, irrespective of the original shade. I'm reminded here of a very embarrassing moment, when at a smart occasion, I kindly and discreetly whispered to the person next to me that there was some lipstick stuck to her front teeth. But rather than say teeth, I said 'crowns' by mistake. As the words fell out of my mouth, I wanted the ground to swallow me up. She looked at me with horror, enquiring how I knew!

Darker shades were commonly used in more mature mouths, blending in with the existing teeth, changes in scleral colour and maturing skin changes. But with new trends emerging, even older patients are asking for brighter, whiter, straighter smiles, while still desiring a 'natural' look. When the new teeth clash with the way the rest of the face looks, the word 'natural' goes straight out of the window. The beautiful new 'picture'

clashes with the older, tattier 'frame'. The thinning lips with downturned corners and radiating peri-oral lines spoil the entire new look, the whole mouth area probably demarcated by deepening folds, caused by the mid-face fat cascading obliquely downwards.

The patient's initial satisfaction with the look you have created suddenly changes gear when they realise that something doesn't match. They either realise that the teeth look 'false' or the face, in contrast, suddenly appears to look older. Worse still, as the new porcelain retains its youthful look, the facial appearance changes are in a fast decline as the hormone levels deplete. The parallel situation of wearing unnatural looking hairpieces on older heads comes to mind!

### FRAME UPGRADES

This is why it could be useful for you as dentists to be able to deliver facial aesthetic treatments alongside the dentistry. You are constantly improving the picture, so why not learn new skills to upgrade the frame?

The lips are the jewel in the centre of the peri-oral area. They frame the new teeth. When they deflate, they

lose attractiveness. They are not just the organ for speech and a sphincter to provide a tight seal to the mouth, but they are also regarded as the only visible sexual organ! They bear a direct relationship to sexual attractiveness, which in itself can have an obvious knock-on effect.


Since you have the manual dexterity and the knowledge to analyse the frame while understanding the role of the supportive structures behind the lips, why not stretch your talents further and consider training in this field? It is such a rewarding thing to do.

The better I do my job, the more natural the results look, the more it goes under the radar, because people don't look treated. Just so with restorations of the teeth, albeit with the modern desire for younger looking smiles! But the more they stand out as different from the age of the face, the more 'false' they look, just as when upper teeth are youthfully restored, but not the lowers.

Next month, I'll present even more reasons to consider branching out into facial aesthetics.

---

*Find out more about Ruth Brady at [www.drruthbradyaesthetics.co.uk](http://www.drruthbradyaesthetics.co.uk).*

A man in a white polo shirt and blue jeans sits cross-legged on a grey floor, looking up with a concerned expression. In front of him is a silver laptop. The room around him is upside down: a wooden chair with a white seat is suspended in the air, a wooden shelf with various items (a glass, a container, a lamp) is also suspended, and a round clock with a blue frame is mounted on the ceiling. A green plant hangs from the top left corner.

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# Effective conflict resolution

**Mark Topley** lays out how to grow from disagreements

**W**e all know that conflict is a part of life, and daily life in practice is no exception. While disagreements can be tough, they're not always a bad thing. In fact, when handled right, conflicts can lead to growth and stronger team bonds. But it's crucial to understand the differences and be able to call out toxic behaviour while also fostering ideas.

Leaving conflicts unresolved is, without doubt, the very worst thing we can do. Bubbling disagreements can disrupt your workflow, lower team morale and even affect patient care. Nobody wants that. Persistent issues can cause staff turnover, loss of trust and reduced teamwork. That's why it's important to address conflicts head-on and nip them in the bud.

## TYPES OF CONFLICTS

Conflicts in the team generally fall into a few categories:

1. Interpersonal conflicts: these happen when personalities clash or there's a communication breakdown
2. Work process conflicts: differing opinions on how tasks should be done, like sterilisation procedures or patient management
3. Role clarification conflicts: confusion over who is supposed to do what
4. Resource allocation conflicts: disagreements over the use of resources, like materials, equipment or budget.

In my experience, the following phrase is key in conflict resolution: 'You don't change anyone by making them wrong.'



**Mark Topley**

Mark is the founder of the Great Boss Academy and responsibledentistry.com.

Pointing fingers and blaming only breeds defensiveness and resentment. When you approach a conflict with an accusatory tone, it shuts down open communication and makes the other person less likely to listen and more likely to dig in their heels.

However, if negative behaviour or attitudes persist and are bringing the team down, it's critical to address these issues constructively. While it's essential to avoid making someone feel wrong, it's equally important to communicate the impact of their behaviour on the team and the practice.

Let's talk about how to tackle these conflicts effectively.

## IT'S ALL ABOUT UNDERSTANDING

When dealing with negativity or conflict, the first step is understanding. Instead of asking: 'Why are you so negative?', which can sound accusatory and make someone defensive, frame your question in a way that shows genuine interest in their perspective. Say something like: 'What's going on that's making you feel this way?' This approach opens up a dialogue and encourages the other person to share their feelings without feeling attacked.

## ASK QUESTIONS

Adopt a curious mindset when trying to resolve conflicts. Ask open-ended questions that dig deeper into the reasons behind someone's behaviour or opinions. For example: 'What led you to prefer this method?' This type of questioning helps uncover the underlying issues and motivations that might not be immediately apparent. It also shows that you value their input and are willing to consider their perspective.

## LET THEM KNOW YOU HEAR THEM

Validation is a powerful tool in conflict resolution. When you acknowledge someone's feelings and concerns, you let them know that they are being heard and understood. For instance, saying: 'I get that you're concerned about safety/efficiency' can make a significant difference in de-escalating tension and building trust.

## FOCUS ON OUTCOMES

When addressing a conflict, be clear about the desired outcomes. Communicate your goals in a straightforward manner. For example: 'We want to ensure safety without compromising efficiency.' This clarity helps direct the conversation towards finding practical solutions that align with the overall objectives of the practice.

## BE STRAIGHTFORWARD

A structured approach to addressing conflicts can be very effective. You might say: 'When you [behaviour], it affects [impact]; let's change it to [desired behaviour].' This method clearly identifies the problematic behaviour, explains its impact, and suggests a constructive change.

## CALL IN A PRO

If the conflict remains unresolved despite your best efforts, it might be time to call in a conflict resolution expert or human resources adviser who can offer a neutral perspective and solutions.

By understanding the types of conflicts and using strategies based on empathy, collaboration and core values, you can turn challenges into opportunities. Remember, it's not about winning or losing, but working together for the best outcome.

# An introduction to facial aesthetics

In the first part of a new series, **Shabnam Zai** and **Gizem Seymenoglu** offer a guide to dentists considering branching out into facial aesthetics

**F**acial aesthetics is revolutionising modern dental practices, offering not just brighter smiles but also youthful, rejuvenated appearances. Imagine being able to address your patients' aesthetic concerns beyond their teeth, enhancing their overall confidence and satisfaction. This article will explore why facial aesthetics is a natural extension of dental care, the types of treatments available and how this integration can elevate your practice to new heights.

Dentists have a unique advantage in offering facial aesthetic treatments due to their extensive knowledge of facial anatomy and precision skills. The same meticulous attention to detail required for dental procedures translates seamlessly into administering injectables and other aesthetic treatments.

Imagine the potential of transforming not just smiles but entire faces with your expertise.

Furthermore, dentists are accustomed to managing patient discomfort and anxiety, a skill that is incredibly valuable when performing aesthetic procedures. Their familiarity with local anaesthetics and pain

management techniques ensures that patients experience minimal discomfort during treatments. This ability to provide a comfortable and reassuring environment is a significant advantage over many other providers of aesthetic treatments.

## TYPES OF TREATMENTS

Here are some of the facial aesthetic treatments to consider:

1. Dermal fillers
  - Used to restore volume and smooth out wrinkles
  - Common areas treated include lips, cheeks and nasolabial folds
  - The procedure involves injecting hyaluronic acid or other substances to plump up the skin, offering immediate results with minimal downtime
2. Botulinum toxin (Botox)
  - Reduces the appearance of fine lines and wrinkles by relaxing facial muscles
  - Popular for treating forehead lines, crow's feet, gummy smiles and frown lines
  - Botox works by blocking nerve signals to the muscles, preventing them from contracting and thus smoothing out the overlying skin
3. Chemical peels
  - Improve skin texture and tone by removing the outer layer of dead skin cells
  - Effective for treating acne scars, sun damage and hyperpigmentation
  - Chemical peels vary in strength, from mild to deep, allowing customised treatment for different skin concerns

## 4. Skin rejuvenation treatments

- Techniques such as micro-needling and laser therapy stimulate collagen production
- Enhance overall skin appearance and elasticity
- Micro-needling uses fine needles to create micro-injuries in the skin, triggering a healing response that boosts collagen and elastin production. Laser therapy uses focused light energy to remove damaged skin layers and promote new cell growth.

## MARKET POTENTIAL AND PATIENT DEMOGRAPHICS

The demand for non-surgical cosmetic procedures is skyrocketing in the UK among both males and females. Patients seeking minimally invasive treatments are often unsure where to go. Many have heard horror stories or seen poorly executed procedures. They prefer the convenience and trust associated with their dental practice.

By offering facial aesthetics, you can diversify the services you offer and increase your income by providing this additional service, attracting new patients and enhancing loyalty among existing ones.

The demographic interested in facial aesthetics spans various age groups. Younger patients may seek treatments like lip fillers or Botox for prevention, while older patients often look for solutions to reduce signs of ageing. Additionally, there's a growing trend among men seeking facial aesthetic treatments, driven by the desire to maintain a youthful appearance in



**Shabnam Zai**

Shabnam is a cosmetic dentist, mentor and clinical director at Westhouse Dental in Pinner. She also hosts the Filling the Gap podcast. See [shabnamzai.com](http://shabnamzai.com).



**Gizem Seymenoglu**

Gizem is a facial aesthetics practitioner. She runs a successful clinic in south west London and also sees patients at Westhouse Dental.





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BEST PRACTICE

both personal and professional settings. Understanding these demographics allows you to tailor your marketing strategies effectively and meet the specific needs of different patient groups.

GROWTH IN PRACTICE

I set up my dental practice six years ago, and while word of mouth is my preferred source of new patients, I soon realised organic growth alone could not sustain our plans for the practice. Early on, we looked at additional services we could provide and introduced facial aesthetic treatments. While I was not trained to provide the service myself, I was fortunate to know colleagues I trusted who were happy to join my team.

Introducing facial aesthetics as a principal had minimal setup costs. We could use the free surgery space we had, and patients returned every four to six months for top-ups. Unlike Invisalign, it wasn't a one-off treatment but provided ongoing returning treatments like our hygiene service.

Some patients initially came for facial aesthetic treatments and then became our dental patients. The demographic for facial aesthetics aligned well with the

aesthetic dental treatments we provided. As any principal knows, getting new patients is a constant challenge, so this was a significant benefit to the practice.

Moreover, integrating facial aesthetics allowed us to create a more comprehensive treatment plan for our patients. For example, a patient undergoing Invisalign might also benefit from Botox to address a gummy smile, leading to a more harmonious and satisfying result. This holistic approach not only improves patient outcomes but also increases the perceived value of our services, fostering greater patient loyalty and word-of-mouth referrals.

ADVANTAGES FOR ASSOCIATES

As dentists, we are always looking for ways to help and look after our patients. Doing courses allows us to improve our skills and serve our patients better. Facial aesthetics has been somewhat controversial in the past but, if learned, it is straightforward to provide within our current environment.

I support holistic care, which means treating the patient and not just their teeth and gums. With so many new treatments available, patients may not be aware of minimally invasive techniques to help balance their features or reduce a gummy smile.

DENTISTS HAVE A UNIQUE  
ADVANTAGE IN OFFERING FACIAL  
AESTHETIC TREATMENTS





Having had treatment myself, I can speak firsthand of the benefits. I know colleagues who did not enjoy clinical dentistry as much anymore, and by integrating facial aesthetics into their practice it increased their job satisfaction and helped keep them in the profession. Some dentists no longer do clinical dentistry at all and only do facial aesthetics.

For instance, a colleague who incorporated facial aesthetics into her associate role saw a 20% increase in new patient enquiries within six months. Initially, she offered free consultations to introduce the new services.

Within a year, she noted a 25% increase in her overall income without increasing her clinical hours and a marked improvement in personal and patient satisfaction. Her patients appreciated the convenience of receiving aesthetic treatments from a trusted provider, and they became more diligent about returning for their Botox top-ups as well as their dental check-ups.

### PRACTICAL CONSIDERATIONS

Integrating facial aesthetics into your dental practice requires careful planning and consideration. Here are some practical steps to ensure a smooth transition:

1. Training and certification: ensure you and your team receive proper training and certification from reputable organisations. This not only enhances your skills but also builds patient trust
2. Legal and regulatory compliance: familiarise yourself with local regulations and guidelines regarding the provision of facial aesthetic treatments. Adherence to these regulations is crucial for patient safety and legal protection
3. Marketing and communication: develop a marketing strategy to promote your new services. Use social media, your website and newsletters to inform existing and potential patients about the benefits of facial aesthetics
4. Patient education: educate your patients about the various treatments available and their potential benefits. Provide informational brochures and host informational sessions or webinars to address any questions and concerns
5. Equipment and supplies: invest in high-quality equipment and supplies. This ensures the safety and effectiveness of the treatments you provide
6. Follow-up and aftercare: establish a follow-up and aftercare protocol to monitor patient progress and address any post-treatment concerns. This enhances patient satisfaction and encourages repeat visits.

### ENHANCE YOUR OFFERING

Integrating facial aesthetics into your dental practice can significantly enhance your service offerings and meet the growing demand for these treatments. As dental professionals, our expertise positions us to excel in this field.

By offering these services, you can provide a more comprehensive approach to patient care, improve patient satisfaction and boost your practice's growth and profitability.

In the next article, we'll look in more detail at the legal considerations and compliance requirements essential for offering these treatments safely and effectively.

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# Transform your practice with BTL Emface

Emface is the future of non-invasive facial aesthetics, says BTL

**I**n recent years, the landscape of facial aesthetics has undergone a dramatic shift, with a growing preference for non-invasive treatments.

This trend has spurred a wave of innovation in energy-based devices, offering exciting opportunities for dental practices to expand their services and cater to this burgeoning demand. Among these advancements, BTL's Emface stands out as a revolutionary technology poised to transform your practice and enhance patient satisfaction.

## EMBRACE THE NON-INVASIVE REVOLUTION

The appeal of non-invasive treatments is undeniable. Patients are increasingly seeking options that avoid the discomfort and downtime associated with invasive procedures. Energy-based devices, such as BTL Emface, meet this demand perfectly. For dental practices, integrating such a device is a strategic move, offering a new revenue stream and attracting a broader patient base.

BTL Emface is particularly advantageous for practices already offering facial aesthetics. This innovative device is delegable and hands-free, allowing practitioners to continue their primary dental or injectable work without interruption.

Remarkably, Emface can generate more than £1,000 per hour, making it a highly lucrative addition to any practice.

## THE SCIENCE BEHIND BTL EMFACE

BTL Emface combines synchronised radio frequency and BTL's patented HIFES technology. This dual-action approach stimulates collagen and elastin production while inducing supramaximal muscle contractions. Delivered through ultra-thin applicators, this treatment results in a 30% increase in muscle tone, a 37% reduction in wrinkles and a 23% improvement in lift – all achieved without needles or downtime.

Patients undergo just four 20-minute sessions to see these impressive results. Recently, BTL introduced the Submental applicator, the first non-invasive solution for targeting the double chin area. This applicator specifically tones the digastric muscle, sculpting the jawline and delivering visible improvements after just one treatment, with full results manifesting at the three-month mark.

## COMPLEMENTING EXISTING AESTHETIC TREATMENTS

BTL Emface isn't just a standalone solution; it seamlessly integrates with existing aesthetic treatments like toxins and dermal fillers. By enhancing collagen production and muscle tone, Emface improves patients' baseline appearance, allowing for more natural and refined results with fewer injectables.

Dental surgeon Dr Lee Walker's recent case study illustrates the synergistic

potential of combining Emface with other treatments. After three sessions of Emface, he observed a 16cc increase in facial volume, which he then fine-tuned with a small amount of dermal filler along the jawline. This approach not only maximises patient outcomes but also fosters trust and long-term loyalty.







*Before treatment with Emface*



*After three treatment sessions with Emface combined with 0.8ml of RHA 4*

## SEAMLESS INTEGRATION AND UNMATCHED SUPPORT

Incorporating BTL Emface into your practice is straightforward, thanks to BTL's comprehensive after-sales support. Thorough clinical training

is provided to ensure your staff are confident and competent in delivering treatments. Typically, training takes just half a day, reflecting the simplicity and ease of using Emface.

Since the beginning of this year, BTL has introduced a long-term partnership with digital marketing agency Ignite Growth to create bespoke digital campaigns, designed to generate leads and engage your existing patient base.

Additionally, BTL has recently implemented a new Practice Success Team to offer personalised support, from consultation training to assistance with patient events. This hands-on approach is guaranteed to create a successful launch for your practice by driving new leads and ensuring your team are well equipped to convert patients.

## THE KEY TO GROWTH

When considering expanding your facial aesthetics offerings, BTL Emface emerges as an innovative, clinically-backed option with remarkable patient outcomes. Its hands-free, delegable nature allows you to add a new revenue stream without compromising chair time. This capability is crucial for sustainable growth, enabling

practitioners to focus on core dental services while also tapping into the growing non-invasive aesthetics market.

Moreover, BTL offers industry-leading support for the practical aspects of integrating a new device – training, marketing and servicing.

BTL's bespoke digital marketing campaigns and dedicated Practice Success Managers provide the tools and expertise needed to ensure your practice thrives.

## DISCOVER THE FUTURE

BTL Emface represents a significant advancement in non-invasive facial aesthetics, offering dental practices an unparalleled opportunity to diversify and grow. By embracing this technology, you can meet patient demand for non-invasive treatments while boosting your practice's profitability and reputation.

Don't miss out on this transformative opportunity. Enquire today to learn how BTL Emface can elevate your practice and deliver exceptional results for your patients.

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# The impact of your brand

**Barry Oulton** explores the crucial link between brand, first impressions and sales in a dental practice

**I**n the competitive landscape of modern healthcare, branding transcends logos and taglines; it creates an indelible first impression that resonates with dental patients.

For dental practices, the interplay between a strong brand, the initial impression it creates and the resultant effect on sales is profound and undeniable.

This triad forms the cornerstone of patient acquisition and retention, ultimately driving the financial success of the practice.

## THE ESSENCE OF BRANDING

A brand is more than just a visual identity; it encapsulates the core values, ethos and promise of a dental practice. It reflects the quality of care, the professionalism of the staff and the overall patient experience.

In dentistry, where trust and comfort are paramount, a well-crafted brand communicates reliability, safety and excellence. This is particularly important given the often anxiety-inducing nature of dental visits.

## THE POWER OF FIRST IMPRESSIONS

The first impression of a dental practice can be a pivotal factor in a patient's decision-making process.



**Barry Oulton**

Barry is a practising dentist and the founder of The Confident Dentist, a communications training company aimed specifically at the dental sector. Barry is a qualified coach and experienced trainer, certified in hypnotherapy and a master practitioner in neurolinguistic programming (NLP).

This encompasses a range of elements:

- Online presence: a professional, user-friendly website with clear information, testimonials and high-quality visuals can instil confidence and portray the practice as modern and competent
- Physical appearance: the aesthetics of the dental practice, including cleanliness, ambience and décor, significantly impact patient perceptions. A welcoming, well-maintained environment suggests a commitment to quality care
- Patient interaction: from the initial phone call to the reception desk greeting, every interaction should reflect the practice's commitment to patient care. Friendly, knowledgeable staff who make patients feel valued can set a positive tone for the entire visit.

## THE IMPACT ON SALES

The correlation between branding, first impressions and sales is a direct one. Here's how it unfolds:

- Increased patient acquisition: a strong brand and positive first impression can attract new patients. Prospective patients often rely on word-of-mouth, online reviews and their initial interactions with the practice. A favourable impression can convert enquiries into appointments
- Higher patient retention: consistency in branding and quality of service leads to patient loyalty. Satisfied patients are more likely to return for regular dental

health reviews and additional treatments, ensuring a steady revenue stream

- Enhanced word-of-mouth marketing: patients who have a positive experience are likely to recommend the practice to friends and family. This organic promotion is invaluable and often more effective than traditional advertising
- Increased treatment acceptance: patients who trust and feel comfortable with their dentist are more likely to accept recommended treatments. This trust is often built from the first impression and reinforced through consistent branding and positive experiences.

## BE A VISIBLE AND APPROACHABLE LEADER

### STRATEGIC BRANDING FOR MAXIMUM IMPACT

To harness the full potential of branding and first impressions, dental practices should adopt a strategic approach:

- Define the brand: clearly articulate the practice's values, mission and unique selling propositions. This foundation will guide all branding efforts
- Consistent messaging: ensure that all marketing materials, from the website to brochures and social media, consistently reflect the brand's identity and values

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- Team training: equip all team members with the skills to deliver excellent patient experiences. Consistency in service is crucial in reinforcing the brand's promise
- Monitor and adapt: regularly seek patient feedback and monitor online reviews to understand the practice's reputation. Use this information to make necessary adjustments and improvements.

## TRAINING YOUR TEAM

As a dental practice owner, your team plays a crucial role in embodying and promoting your brand to patients. Ensuring that every staff member is aligned with your brand values and mission is key to creating a cohesive and positive patient experience. Here's how you can train your team effectively.

### 1. Define and communicate your brand clearly

- Establish core values and mission: clearly articulate the core values, mission and vision of your practice. Make sure every team member understands these principles and how they translate into daily operations and patient interactions
- Develop a brand handbook: this comprehensive brand handbook should outline your practice's values, mission statement, visual identity and patient care standards. This serves as a reference guide for your team.

### 2. Comprehensive onboarding process

- Introduction to the brand: during the onboarding process, provide new hires with an in-depth introduction to your brand. Explain the importance of their role in maintaining and promoting the brand
- Shadowing and mentorship: pair new employees with experienced team members who exemplify your brand values. This mentorship helps new staff learn how to integrate these values into their daily routines.

### 3. Regular training sessions

- Customer service training: conduct regular training

sessions focused on exceptional customer service. Emphasise the importance of friendly, empathetic and professional interactions with patients

- Role-playing scenarios: use role-playing exercises to practise handling various patient scenarios. This helps staff develop the skills needed to manage difficult situations while maintaining the brand's ethos
- Technical and soft skills development: provide ongoing training to enhance both technical skills and soft skills, such as communication, empathy and problem-solving.

### 4. Consistent brand messaging

- Uniform communication: ensure that all communication, whether verbal, written or digital, is consistent with your brand's tone and messaging. Provide templates and guidelines for emails, phone calls and social media interactions
- Patient interaction protocols: develop protocols for patient interactions that reflect your brand's commitment to quality care and service. This includes everything from answering phone calls to following up on treatment plans.

### 5. Foster a positive work culture

- Team-building activities: organise regular team-building activities to strengthen relationships among staff members and reinforce a sense of community and shared purpose
- Recognition and rewards: recognise and reward employees who exemplify your brand values and provide outstanding patient care. This motivates others to follow suit and fosters a culture of excellence
- Open communication: encourage open communication and feedback within the team. Regularly hold meetings where staff can share ideas and discuss ways to improve patient care and brand alignment.

### 6. Monitor and adapt

- Patient feedback: regularly collect and review patient feedback to understand how well your team is aligning with your brand. Use this feedback to identify areas for improvement and adjust training programmes accordingly
- Performance reviews: conduct periodic performance reviews that include assessments of how well team members are embodying and promoting the brand. Provide constructive feedback and set goals for improvement.

### 7. Lead by example

- Model brand values: as a practice owner, your behaviour sets the standard for your team. Consistently demonstrate the brand values in your interactions with both staff and patients
- Visible leadership: be a visible and approachable leader. Engage with your team regularly, show appreciation for its efforts and provide guidance and support when needed.

## CONCLUSION

The synergy between a dental practice's brand, the first impressions it makes and the impact on sales cannot be overstated.

A compelling brand that creates a positive initial impression not only attracts new patients but also fosters loyalty, enhances reputation and drives financial growth. By prioritising these elements, dental practices can build a robust foundation for long-term success in a competitive market.

Training your team to align with your brand and promote your practice requires a strategic and continuous effort.

By clearly defining your brand, providing comprehensive training, fostering a positive work culture and leading by example, you can ensure that your team consistently delivers a patient experience that reflects your practice's values and mission.

This alignment not only enhances patient satisfaction and loyalty but also drives the overall success of your practice.

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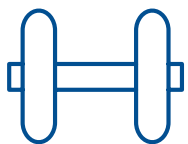
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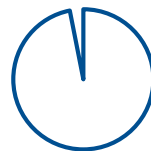
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530

MPa flexural strength<sup>[2]</sup>



97.2%

survival rate of IPS e.max CAD posterior crowns over a period 10 years<sup>[4]</sup>



2.11

MPa · m<sup>1/2</sup> fracture toughness<sup>[3]</sup>



11:10

minutes to crystallization<sup>[5]</sup>

#### References:

[1] Based on global sales figures.

[2] Average biaxial flexural strength, Outcome after more than 10 years of ongoing quality testing, R&D Ivoclar, Schaan.

[3] Hill T, Tysowsky G, AADR/CADR Annual Meeting: 1672, 2016.

[4] The survival rate of monolithic IPS e.max CAD posterior crowns was evaluated with the Kaplan-Meier method. The failure rate refers to technical failures such as fracture and chipping, R&D Ivoclar, Schaan.

[5] Programat CS6, Superspeed crystallization, 11:10 minutes, IPS e.max CAD HT, MT, LT, IPS e.max CAD Crystall./ Glaze Spray or Self Glaze, max. 2 restorations, R&D Ivoclar, Schaan.



# Can incentives *boost* team engagement?

Zoe Close discusses staff motivation with **Mark Topley**, **Polly Bhambra** and **Lesley Morgan-Barlow**

**W**ith the recruitment and retention landscape in dentistry still looking bleak, many

employers are tempted to resort to offering incentives to hang on to their employees. But does that really work?

Zoe Close addressed this question during a recent webinar with dental business and sustainability coach Mark Topley and practice owners Polly Bhambra and Lesley Morgan-Barlow.

**Zoe Close:** We all know how difficult it is to recruit good staff. So, we want to keep hold of the good employees we have already. Is offering incentives a good way to go about that?

**Mark Topley:** I'd say that incentives are the wrong way to look at staff retention. I think the way that things have gone, particularly over the last five years, is that people are very much less driven by external rewards as intrinsic rewards.



**Zoe Close**

Zoe is head of sales at Practice Plan. Zoe has more than 35 years' experience in the dental sector, including group business manager for a corporate group, dental nurse, head receptionist and practice manager. Practice Plan partners with more than 2,000 dental practices and offers a wide range of business support services.



**Mark Topley**

Mark is the founder of [responsibledentistry.com](http://responsibledentistry.com) and the Great Boss Academy – businesses that provide coaching, consultancy and training for leaders, owners and managers who want a more successful, positive and sustainable business. Mark is a fellow of the Institute of Corporate Responsibility and Sustainability and writes extensively on sustainability and leadership.

What I mean by that is, the extra 5p on the hourly rate, or the bonus, are great gestures. But if you're looking for those kinds of incentives to drive behaviour, then you're looking in the wrong place.

What you've got to do is inspire people, and that's where leadership really comes in.

You can't eat inspiration, so a fair wage has to go hand in hand with this, but if there is an intrinsic motivation to do something, then behaviour will change.

I always tell the story of my mum, who was a smoker for 30 years. We would tell her she needed to give up smoking as it was bad for her. But it never made a difference as there was no motivation for her.

When my first child came along, I told her we'd love to see her, but we wouldn't bring the baby round to the house if she was still smoking. She stopped smoking overnight because there was an intrinsic motivation for her to do something different.

I'm not suggesting you threaten your team, but it's much better to lead with inspiration rather than trying to get people to change behaviours through incentives and perks and those sorts of things.

**Zoe:** I agree. The world has moved

on from those days. I can look back and admit we tried incentives when I was in practice. It was something we all tried in the early days, and I think that we've learned that it's not just about money but about making people feel valued.

Also, it's about building trust and goodwill. Giving them autonomy and responsibility, that's how you can reward people.

Polly, you have 10 practices, you must have tried things over the years. What's your take on this?

**Polly Bhambra:** We have tried a few different incentives. So, I understand why people ask about them. It doesn't have to be a financial incentive, though. There are a range of things you could look at that could be classed as an incentive.

Additional courses for staff to develop themselves could be seen as an incentive. So, for dental nurses, that could be funding the radiography course, and in return they stay with us for X number of years. Another incentive we've tried where we did get a lot of employee engagement was tasking team members to ask every patient for a Google review or video testimonial, and in return, the company – Trident Group – would donate



**Polly Bhambra**

Polly is the director at Treetops Dental. Her journey began at Birmingham Dental Hospital, evolving into influential roles, including leading the Oral Care Division for P&G in Western Europe. As a dental nurse with her name on an NHS contract since 2010, she now co-owns 10 dental practices and has recently launched an accredited dental nurse training academy with NEBDN.



**Lesley Morgan-Barlow**

Lesley is one of the country's first non-clinical practice owners. With 15 years of practice ownership, Lesley has been at the forefront of leading and guiding Synergy Dental Care to consistent growth and success. Before her venture into the dental world, Lesley spent more than two decades in both private industry and the public sector.

money to a local charity. That has gone down really well because although it is a form of incentive, it's also a way of giving back.

To be fair, you can't just incentivise one person, for example, a treatment coordinator (TCO) for treatment uptake, because our work requires a whole team effort, from reception to the clinician to the hygienist to the dental nurse to the TCO. So, everybody needs to be incentivised.

Also, peer to peer recognition can be seen as an incentive. We've used schemes where we anonymously vote for a colleague and outline how they have gone above and beyond. They would then be awarded a token present that would be given to them during a team meeting. That's a form of reward or recognition to say we appreciate you.

Other incentives that we offer include giving the employed staff their birthday off as a gesture to say, 'thank you for all your hard work, have a birthday day off on us'. Also, you could pay for their CPD.

There are lots of different ways of getting employee engagement if incentives tick your box, but it's about being creative with those incentives.

**Lesley Morgan-Barlow:** I would add that the problem with offering financial inducements is that it's only ever going to be short-term. Once they've been given the reward, then you'll find the performance will go

back to where you didn't want it in the first place. So, you've got to build other things around it.

I think regarding most of the issues that we are looking at, you've got to make sure that people feel valued and that they are paid a fair rate for the job they do. Then anything over and above that is additional.

I think people can sometimes feel aggrieved. They don't feel as if they're getting paid fairly, and so that's what you've really got to look at.

Look at your market rates and find out what people are paying in the area. Because in former roles, I'd see people leaving for 10p more an hour. That wasn't necessarily in dentistry but certainly other fields I worked in.

However, when you sit down with them and you look at all the other benefits that you actually give people, that 10p an hour is worthless because they are losing additional holidays, pension and flexibility.

But if you give them the extra 10p, then they'll come back again and again. So, you've got to make sure the starting point is right.

**Zoe:** Following on from that, Lesley, something I'm asked about quite often is to do with staff leaving. So, you make sure your staff are engaged, you train them, you progress them, you value them and they get to a certain point, and then they want to leave to go on to do something 'grandier'.

A lot of practice owners get a bit frustrated by this because they feel 'we've given them all this and these opportunities, and now they just want to leave'. My response is that they've

been great employers. However, at the time it's quite hard to deal with because you've done all these good things, and then you've got to start again. But it really is just the natural way of things.

**Lesley:** Absolutely. I think it is a real benefit when you do move somebody along their journey, because for some people it's not going to be a job forever. They're not going to have 34 years in dentistry.

I've had people going on to do therapy from being a dental nurse, being paramedics, and it's amazing that they have started their journey with us. We have helped them develop to the point that they have the confidence to take those different avenues in their life. So, I don't think it's a bad thing.

**Zoe:** Is that something as a leader that you've just got to recognise and adopt that mindset, Mark? Is it something you would encourage?

**Mark:** Yes, embrace it. One of the most successful principals I've ever worked with said that if people stayed beyond 10 years he felt like he'd failed, because he hadn't moved them along the career path enough for them to be able to go on and do bigger and better things.

Having that attitude is important.

It's also about recognising that the way employment works has changed. It used to be that you had this transaction that went on between people: 'I'll give you my time and you'll give me a salary. Whereas now people are on a journey, and they will come into contact with you as their employer and enter into partnership with you for a period of time. While you walk together, it's about what can you do to benefit them, what can they do to benefit you.

What do you want out of the partnership? Recognise that it's not a lifelong commitment, but for the time that you are there, you are going to be great partners and they'll benefit from you, and you'll benefit from them.

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# Put patients in the *picture*

From marketing to mock-ups, photography is vital to your dental business. **Ashish B Parmar** offers his top tips

**D**ental photography is an essential part of modern dentistry. Just like taking radiographs to assist us in making diagnoses, similarly photographs can show so many things clearly.

The following is a list of the main uses of dental photographs:

1. Recording the baseline situation when seeing a new patient
2. Co-discovery: using the photographs to effectively communicate and explain the dental condition to the patient
3. Treatment planning: using the photographs in conjunction with other diagnostic data to make accurate treatment plans for the patient
4. Laboratory communication: for anterior aesthetic dentistry, it is essential that the dental technician has many different photographs as well as other records to ensure beautiful ceramic restorations are made to suit the patient
5. Referrals: digital photographs can be emailed to a referral practice as JPEGs, and this will help the specialist to understand the clinical situation
6. Marketing: once a patient has given consent, photographs can be

used in marketing, for example, on websites, social media, in framed pictures on the wall, in a practice brochure, in an article or an advert in a magazine.

## NECESSARY EQUIPMENT

I recommend that dentists buy the following:

1. Digital SLR camera body
2. Macro lens
3. Ring flash or a twin flash
4. Retractors
5. Adult occlusal mirrors
6. Black contrasters.

There are two websites I recommend:

- [www.dpreview.com](http://www.dpreview.com): this is a great website to review the latest in digital camera equipment. Most dentists either buy Nikon or Canon equipment
- [www.photomed.net](http://www.photomed.net): this is an American company from which I have bought my cameras. It specialises in dentistry and the camera comes set up ready to

use. It also provides a special abbreviated manual relevant for dentists. The backup and service is excellent.

## LEARN AND IMPROVE

The most important way to get better is to start using the camera and practising on each other as a team. You can go on photography training courses to get more knowledge - I offer this on my courses. You should also look at the British Academy of Cosmetic Dentistry or American Academy of Cosmetic Dentistry guidelines on dental photography. Additionally, there are many books written on the subject.

One of the most important things to understand is the f stop, ie aperture control. For example, when taking a face photograph, I set my Nikon camera to f5.6; when I take the 2:1 magnification ratio photographs, I set the f stop to f22; and when I take the 1:1 magnification ratio photographs



**Ashish B Parmar**

Ash works at a state-of-the-art private referral practice in Chigwell, Essex ([www.smiledesignbyash.co.uk](http://www.smiledesignbyash.co.uk)) and has a training academy offering inspirational courses for dentists ([www.theacademybyash.co.uk](http://www.theacademybyash.co.uk)). Ash offers mentoring and coaching for dentists who want to take their practice or organisation to the next level.



# What photographs do I take?

For a new patient that requires comprehensive dental care, Ash recommends the following photographs:

- Full face (with a blue background) – smiling and no smile (1:10)
- At rest (1:2)
- Full smile anterior (1:2)
- Full smile right side (1:2)
- Full smile left side (1:2)
- Retracted anterior (open) (1:2)
- Retracted right side (open) (1:2)
- Retracted left side (open) (1:2)
- Retracted anterior (closed) (1:2)
- Retracted right side (closed) (1:2)
- Retracted left side (closed) (1:2)
- Upper occlusal (1:2)
- Lower occlusal (1:2)
- Upper anterior with a black contraster (1:1)
- Upper right side with a black contraster (1:1)
- Upper left side with a black contraster (1:1)
- Retracted upper anterior with shade tabs (i.e. the current colours of the central incisor and canine, and the desired colour) (1:2)

(Other photographs may be required for orthodontic treatment).

(close up with black contrasters), I set the f stop to f40. Using the histogram on the back of the camera is also important to ensure the photograph is correctly exposed (you do not want any overexposed photographs).

The blue background that I recommend can be a large card bought from an art shop. This can easily be placed behind the patient while they are sat in the dental chair. This will standardise all your before and after photographs and make them look more professional.

I also recommend makeover photographs after the patient has had their cosmetic dental treatment. This should be done a few weeks after the anterior restorations have been fitted. The patient should wear natural makeup and lipstick colour (ideally not red), so that they feel relaxed and comfortable for the photographs.

## OTHER TIPS

A great idea to engage your patient in cosmetic dentistry is to do a mock-up or a trial smile. You can do direct mock-ups using composite (my favourite composite for doing this is Empress Direct BL dentine). It takes me about 20 minutes to mock-up the upper anterior eight teeth without any wax-ups. You can then take preop and mock-ups photos on your camera. You should also take some photos on the patient's mobile phone,

as well as a short video of them smiling and talking. The emotional impact of seeing a change in their smile is amazing!

You can also do a similar exercise by taking impressions of the preop situation and getting some wax-ups made. Using a putty index of the wax-ups and Luxatemp BL (DMG), you can create a trial smile in three minutes. This gives the patient an instant idea of how they might look if they went ahead with cosmetic dentistry. Once again, taking photos and a video on the patient's own mobile phone is a great idea.

Finally, I recommend Smile Imaging software. This is the best software available, in my opinion, to do accurate and aesthetic computer smile imaging. Check out [www.smileimaging.co.uk](http://www.smileimaging.co.uk) and contact Tracy on 07974 012542 for a free demonstration and quote.

## SUMMARY

Buying a digital SLR camera is the single most important thing for a dentist starting in general practice. This will help you communicate effectively and increase your case acceptance and ability to do more private dentistry.

Patients are often shocked at the state of their mouth when you show them pictures on a big screen! A picture can say a thousand words.





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# The human aspects of facial aesthetics

**Brian Franks** discusses how to keep patients happy and yourself protected

**S**o, what is this article about? Well, it's about protecting someone who is hardly ever given a thought – you, the practitioner – which synergistically protects your patients. Additionally, there is the question regarding the latter: 'Why should they come to you?'

There are two main aspects to consider when it comes to treating patients. Firstly, are you actually going to treat the patient – are they treatable? If 'no', then show them the door! If 'yes', we move on to the second aspect – avoiding the unhappy patient (Kern, 2017).

In many treatment modalities, the 'carpentry' (ie treatment) may be the least testing aspect of the patient journey. There are many other factors to consider.

As Albert Einstein said: 'Education is not the learning of facts, but training the mind to think,' which leads us to reflection. Reflective thinking is processes of analysing and making judgments about what has happened. Reflection leads to self-learning and professional development.

## REFLECTIVE PRACTICE

Reflective practice is the process of examining a certain procedure



**Brian Franks**

Brian is the co-producer and programme clinical director of the MSc specialist practice of clinical aesthetic non-surgical interventions, University of Bolton, Queens Institute of Medical Sciences. He is a visiting professor at City of London Dental School for the MSc programmes, University of Bolton, Queens Institute of Medical Sciences. Brian is principal of the Level 7 Accredited Dr Brian Franks Facial/Medical Aesthetic Training in Association with Wynyard Aesthetics Academy and Esthodge. He also works as a facial/medical aesthetics practitioner in London.

or experience and analysing it to determine whether things could have been done better. It allows practitioners to evaluate their own level of skill and knowledge and to create ways to improve clinical outcomes (Koshy et al, 2017).

Two well-known reflective models are those of Gibbs and Kolb.

Gibbs' reflective framework (Gibbs, 1988), which is one of the most famous cyclical models of reflection, has six stages exploring an experience: description, feelings, evaluation, analysis, conclusion and action plan.

An alternative framework is Kolb's cycle of experiential learning (Kolb, 1983), where concrete experience, reflective observation, abstract conceptualisation and active experimentation form a four-stage cycle transformed into effective learning.

## BOND OF TRUST

We now move on to the bond of trust between the patient and physician, which has been conceived as the essence of the diagnostic and therapeutic process (Riva et al, 2014).

The preoperative consultation is vital. Although an impressionistic process, it yields the essential, irreplaceable information the practitioner requires (Kern, 2017). In a large number of cases, there is an evident lack, or breakdown, of rapport at the point that legal action has commenced.

An important aspect of the

preoperative consultation is the observational consultation:

- Watch as the patient enters the clinic room
- Listen
- Note body language.

This is allied to the ABCs of rapport building:

- Active listening (I would substitute the word 'empathic' for 'active')
- Body language
- Candour
- Plus awareness and identification of patient storm warnings, red flags or 'caution signals' to avoid the unhappy 'postoperative patient' (Kern, 2017).

Spending extra time in minutes in the examination chair will avoid spending 'time in the legal witness chair and all that entails' (Kern, 2017)!

The Singapore Medical Council

## A LACK OF INFORMED CONSENT IS THE CAUSE OF A HIGH PROPORTION OF COMPLAINTS IN MEDICOLEGAL CASES

(SMC) *Ethical Code and Ethical Guidelines* state that the clinician 'must take reasonable' care to exclude psychological or psychiatric illnesses involving self or body image before providing aesthetic treatments.

A debatable point here is what training clinicians/practitioners have received regarding this and whether they are appropriately 'qualified' to be able to carry out this screening.

## BODY DYSMORPHIC DISORDER

Let's ponder on body dysmorphic disorder (BDD), for example.

'Patients with minor or non-existent deformities may have a definite or

well-established psychiatric disorder known as BDD. This occurs in about 1–7% of the population. Numerous studies have shown that no matter what is done surgically, almost all of these patients will be dissatisfied with the surgical result. In one study, around 84% of BDD patients are diagnosed after surgery...

'Some surgeons who unwittingly operated on BDD patients reported threats including: verbal abuse, physical abuse and attacks, legal attacks (malpractice lawsuits), internet slander' (Kern, 2017).

Research repeatedly cites that a lack of informed consent is the cause of a high proportion of complaints in medicolegal cases.

Part of a cross-sectional study published in the *Medico Legal Journal* concluded that medical personnel need to be educated as to what constitutes informed consent. The practitioner also needs to be aware of storm warnings, red flags or caution signals. These will alert them to consider whether or not the patient is treatable.

### SUBJECTIVE AND PERSONAL

Are you ready for some contention and debate?

Research by Maio et al (2021) notes that aesthetic practitioners should refrain from highlighting perceived physical facial imperfections in their patients. Instead, they must be able to attentively listen to their patients' own concerns and guide them towards a holistic understanding of their facial features.

A paper by McDonald and others (2022) states: 'It is crucial to recognise that patient satisfaction is closely connected to identity, and the outcomes sought by patients may be subjective and personal in nature.'

Naheed and Yousuf (2024) note that: 'Aesthetic treatments may have addictive properties', and, according to Adsett (2019), these could be 'attributed to the enhancement in self-esteem they provide, particularly in individuals experiencing depression'.

Furthermore, Ferreira (2013) asks: 'Is aesthetic medicine purely a commercial endeavour, or does it also serve as a vital component of

the healthcare system, benefiting patients?'

Conversely, the World Health Organization (2021) recognises that aesthetic treatments have the potential to enhance overall health, including mental and social benefits supported by evidence.

We will now look at the relevant law in complaints, including three of the main 'tests', McCulloch being the latest judgment.

### NEGLIGENCE/BREACH OF DUTY

To establish negligence, it must be shown that the investigation or treatment in question fell below the standard of a reasonably competent practitioner in the relevant field. The test for assessing criticisms of the investigation/treatment is whether the allegations can be justified 'on the balance of probabilities' (more likely than not) rather than the more rigorous standard of proof 'beyond reasonable doubt', as required in criminal cases.

It is a defence to an allegation of professional negligence to show that a substantial body of reputable practitioners in the relevant field would have carried out the investigations/treatment in the same way the defendant did.

It is also necessary to show that the negligence has caused pain and suffering, and it will be necessary to show how the negligent acts or omissions directly resulted in the injury or materially contributed to it.

### Bolam v Friern Hospital Management Committee (1957, 1 WLR 582)

In assessing whether care provided by clinical practitioners has been negligent, the court assesses whether a reasonably competent practitioner, in a relevant field at the relevant time, faced with the same circumstances, would have acted in the same way.

It would therefore be a defence to an allegation of negligence to show that a body of reasonable, reputable practitioners, in the particular field, would also have treated the claimant in the way in which he/she was treated.

This is known as the Bolam Test.

### Montgomery v Lanarkshire Health Board (2015, UKSC 11)

In a move away from the 'reasonable doctor or dentist' to the 'reasonable patient' as the new point of reference, the supreme court ruling outlined the new test of material risk.

Material risk can be defined as a significant potential for harm that a reasonable person would want to consider when making a decision about undergoing a medical or surgical treatment.

### McCulloch and Others v Forth Valley Health Board (2023, UKSC 26)

In the McCulloch judgment, which the supreme court handed down on 12 July 2023, it was unanimously held that a 'reasonable alternative' treatment (as described in Montgomery), but not all 'possible' treatment options, should be considered using the 'professional practice test', rather than purely from a patient perspective.

Doctors are under no obligation to inform the patient about options they do not consider reasonable (even when they have knowledge of an alternative body of opinion, which may determine the treatment to be 'reasonable').

### EVIDENTIAL SUPPORT

We will conclude by highlighting an important issue that would help not only in the case of receiving a complaint but also when seeking a new position.

Often overlooked is having training certificates (that additionally have been screened to prove their validity and authenticity) safely stored in one place and easily and immediately accessible. Esthodrome – a worldwide certificates verification database – can offer this peace of mind.

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*Contact [www.esthodrome.com](http://www.esthodrome.com) for further information regarding the Human Factors in Aesthetics course and [www.drbrfrank.com](http://www.drbrfrank.com) for Dr Brian Franks medical aesthetics training courses.*

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*References available on request; email [patrick.ward@fmc.co.uk](mailto:patrick.ward@fmc.co.uk).*



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# The dentolegal considerations of facial aesthetics

**James Kingham** explores the dentolegal considerations of providing facial aesthetic treatment

**T**he demand for aesthetic treatment is increasing, with the UK's cosmetic surgery industry currently worth an estimated £3.6 billion. But it's important to be aware of some of the potential difficulties – especially since it might be provided for cosmetic reasons rather than to treat a dental disease.

With this in mind, it is vital that dental professionals are aware of the legal and ethical implications of facial aesthetic treatment.

## ENGLAND

In England, a change in the law means that it is now a criminal offence to administer botulinum toxin or a subcutaneous, submucous or intradermal injection or filler for cosmetic reasons to a person under the age of 18. Permission to go ahead with treatment cannot be provided by someone with parental responsibility for the child. It is also an offence to book appointments or make arrangements to provide treatment to anyone under the age of 18 in England.

## WALES

The Welsh Government published the *Mandatory Licensing of Special Procedures in Wales* last year. However, at present this only covers electrolysis, body piercing, tattooing and acupuncture.

In a question to the Welsh Parliament, the minister for health and social services stated that: 'There is no firm

timetable in place at present for considering the inclusion of any additional procedures. When the Welsh Government is in a position to consider the possible inclusion of other cosmetic procedures as "special procedures", we will engage fully and consult widely with all relevant stakeholders.'

## SCOTLAND

From 1 April 2017, all clinics offering non-surgical treatment were required to be registered with Healthcare Improvement Scotland (HIS), with the exception of clinics also providing NHS services, as they should be inspected by their local health board. In January 2020, the Scottish

Government published a consultation on the *Regulation of Non-Surgical Cosmetic Procedures in Scotland*. A response followed in July 2022, which found that 98% of respondents agreed that further regulation of non-surgical cosmetic procedures was needed.

## NORTHERN IRELAND

The Regulation and Quality Improvement Authority (RQIA) regulates clinics providing laser or intense pulsed light cosmetic treatments. However, those carrying out treatments such

as botulinum toxin or dermal fillers are not required to register with RQIA. Cosmetic premises only need to register with the local authority, but there are no powers to refuse registration.

## ETHICAL REQUIREMENTS

The General Dental Council (GDC) expects dental professionals to be trained, competent and to meet its ethical standards in any treatment they carry out. This includes obtaining appropriate consent, explaining the cost and ensuring patients are able to make a complaint. Failure to do so could invite a fitness to practise investigation.

## THE GDC EXPECTS DENTAL PROFESSIONALS TO BE TRAINED, COMPETENT AND TO MEET ITS ETHICAL STANDARDS



**James Kingham**

James is a dentolegal adviser at the Dental Defence Union (DDU). Since qualifying from Bristol in 1996, he has worked as a general dental practitioner in Hampshire. He has been a dental foundation trainer since 2004 and is a training programme director for Health Education England. He currently works part-time as an associate, having been a practice principal.



## TRAINING AND QUALIFICATIONS

The GDC's scope of practice includes 'providing non-surgical cosmetic injectables' as an additional skill that a dentist can acquire post-qualification, and it would expect a dentist to be trained and competent before they start treating patients.

It's up to the individual to choose an appropriate training scheme to ensure they've had the necessary training to meet your individual needs.

Reputable training providers will set out clear anticipated learning outcomes, use suitably qualified trainers and have established systems of quality control.

The Joint Council for Cosmetic Practitioners (JCCP) self-regulates the non-surgical aesthetic industry and maintains a voluntary register of practitioners.

The JCCP has a memorandum of understanding with the GDC to share certain information, publishes a code of conduct, which includes guidance on ensuring practitioners are appropriately trained and experienced to practise safely, and has a register of approved education and training providers.

## PRESCRIBING

In its guidance on prescribing medicines, the GDC states 'you must only prescribe medicines to meet the identified dental needs of your patients'.

Botulinum toxin is a prescription-only medicine (although dermal fillers are not) and is not considered suitable for prescription under a patient group direction.

As a prescriber, the dentist would generally need to make a full assessment of the patient and accept responsibility for them.

The GDC states that dentists 'must not remote prescribe (for example via telephone, email or a website) for non-surgical cosmetic procedures such as the prescription or administration of Botox or injectable cosmetic medicinal products'.

## RECORDS

To process and retain personal data, either you, or the clinic or practice you are working at, must be registered with the Information Commissioner's Office as a data controller, and you must comply with the General Data Protection Regulation and the Data Protection Act 2018. Any clinical records you make are sensitive personal data.

## ADVERTISING AND MARKETING

When advertising or promoting a non-surgical cosmetic treatment, the GDC's *Standards for the Dental Team* 1.3.3 states: 'You must make sure that any advertising, promotional material or other information that you produce is accurate and not misleading and complies with the GDC's guidance on ethical advertising.'

It's important to avoid any offer or claim that could be seen as misleading. Patients also need to give consent for the use of their confidential information in marketing material, which should

be both contemporaneous and specific. This includes photographs and testimonials.

All marketing material must also conform to the code published by the Committee of Advertising Practice (CAP). The Advertising Standards Authority (ASA), which enforces the code, can demand the withdrawal of adverts, and CAP rule 12.12 states: 'Prescription-only medicines or prescription-only medical treatments may not be advertised to the public'.

This is supported by the 2012 Human Medicines Regulations Act, which states you're not allowed to advertise or promote a prescription-only medicine, so you can't use the word 'Botox' or the words 'botulinum toxin' in an advert or on a practice website or information leaflet. You can instead refer to 'facial cosmetic treatment' or 'anti-wrinkle treatment'.

An enforcement notice compiled by CAP in 2020 also makes it very clear that the advertisement of botulinum toxin and its trademarks towards the public is prohibited and that enforcement action will be taken for any breaches of the guidelines on social media and failure to rectify them.

At the DDU, we regularly advise members on the issues that need to be considered when undertaking facial aesthetics treatment and would recommend contacting your dental defence organisation if you have any questions or concerns.

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*For further guidance and advice from the DDU, visit [www.theddu.com/guidance-and-advice](http://www.theddu.com/guidance-and-advice).*

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The advertisement features a white tube of BioMin Fluoride Toothpaste with a green 'F' logo. The background is green with white leaf patterns. The text 'BioMin® Armour for Teeth' is in the top right. Below the tube, it says 'Scientifically proven fluoride & mineral therapy...'. To the right of the tube, it says '...not just toothpaste.' in green. At the bottom left is the Trycare logo with the number 01274 88 55 44. At the bottom right is a QR code with the text 'Scan for more info now!' and an FDA APPROVED logo.



A portrait of Ashish B Parmar, a middle-aged man with a balding head and glasses, smiling. He is wearing a brown ribbed sweater over a dark blue collared shirt. The background is dark and out of focus.

# Professional success and inner *happiness*

This month's guest editor, **Ashish B Parmar**, explains his holistic approach to helping other dentists to thrive and the importance of personal development

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**D**r Ashish B Parmar has done many things since first qualifying as a dentist in 1991. He has owned four practices, been a television personality through appearances on programmes such as *Extreme Makeover UK*, *This Morning* and *The Only Way Is Essex*, and has been the driving force behind a range of successful training courses for dentists.

He chose to focus on cosmetic and advanced restorative dentistry after he was inspired by a course he attended in London, which was organised by FMC, more than 20 years ago. The speaker was aesthetics pioneer Dr Larry Rosenthal. Since then, he hasn't looked back – developing his skills and now sharing them with many other dentists.

'I think if you have to summarise what drives me in one sentence, it's like this: changing people's lives and making them smile,' he says. 'I'm aiming for perfection; I'm aiming for creating beautiful smiles to suit that person's face.'

Ash set up his current practice, Smile Design by Ash, in Chigwell, Essex, in 2010. This state-of-the-art private squat practice was launched with the help of his wife, Jyoti, and his father, Bhikhu. It was recently sold to Portmandentex.

Specialising in cosmetic dentistry and with an interest in dental implants, Ash puts his success with patients down to clear communication. He aims to work with them to ensure their vision is brought to fruition, while keeping them at ease throughout the process in his spa-like practice.

Much of his focus these days is using his 30 years of experience to train a new generation of dentists. 'It's heartwarming to see dentists enjoying success, setting up their own practices and earning six-figure sums and thriving because of the knowledge that I share with them,' he says.

'They really want to go up to the next level. I want to help dentists rise to higher levels and enjoy inner happiness and success in ways that they've never imagined before.'

### INSPIRATIONAL TEACHING

Ash runs the Academy by Ash, the popularity of which he puts down to his 'inspirational style of teaching'.

'I'm quite a giving person,' he says. 'So, when someone comes on my courses, I want to "wow" them and give them more than they expected in terms of knowledge, materials and information.'

'I like to give very clear and succinct explanations on things. Sometimes there are certain subjects, like occlusion, which are complex. But luckily, I've got the gift of making a complicated subject easy to understand.'

Academy by Ash has two main courses. The first is Veneers by Ash, a popular two-day course in London. 'It's at a beautiful venue called Om Nom; it's a fantastic facility and I

do these three or four times a year,' he says. 'We have about 20 dentists at a time. This is the A to Z learning of doing ceramic or porcelain veneer dentistry, with an emphasis on occlusion.'

He also runs his signature Eight-Day Aesthetic, Restorative and Occlusion hands-on course, which is held at his practice. The special thing here is that six dentists can bring a patient to the course,' he says. 'Not only will they learn in the lectures and training, but then they will treat their own patient under my supervision, providing eight to 10 units of porcelain restorations.'

'It's a tremendous sense of achievement that they get, and patients love the results. From a financial point of view, the income that they earn from the patient, they keep. So, this largely pays the course fee.'

### HANDS-ON EXPERIENCE

Hands-on experience is vital in learning new skills, says Ash, and he draws on the ideas of US educator Edgar Dale, specifically his concept of the Cone of Experience, which illustrates how much knowledge people retain after different forms of learning.

'He showed that if you read something, for example, two weeks later you will remember only 10% of what you read. If you hear something, you'll only retain 20% of what you heard. But if you have something experiential, where you're actually taking part under the mentorship of a really top clinician, then that's 90% learning!'

One of the most important areas of development for younger dentists, according to Ash, is confidence. 'There's an innate fear factor, a fear of failure,' he says. 'You do a big case and what if things go wrong, like porcelain veneers break or one comes off, or something like that? This goes hand in hand with dentists possibly not having enough



Ash talks to dentists during a retreat at Bhaktivedanta Manor

knowledge. Knowledge is powerful. When dentists get knowledge, then they will have more confidence.

'My training is twofold. It's not only showing the successes that I've had; my teaching also shows the failures that I've experienced. It's not just about teaching technical skills; it's the holistic growth of the dentist and how to create a great vision, how to have amazing goals, how to motivate and inspire your team and how to become fantastic at ethical selling. All these areas are not taught so well to undergraduates, and dentists may have lack of knowledge in these important areas.'

### REFERRALS

Much of Ash's clinical work is based on referrals. 'It's always best to refer on if you can't take on the patient and manage the case,' he says. 'If you were a 60-year-old patient and your teeth are all broken because you're scared and haven't been to the dentist for 30 years and a younger NHS dentist or mixed private/NHS dentist takes just one look and thinks "Wow, I can't do this", I would like my name to be high up on the list for help.'

'But as a thank you, when the patient comes to my practice, I offer dentists to come and watch the treatment being done live, free of charge. That's almost like one-to-one mentoring as a thank you for them referring to me. It's a win-win-win situation, because the patient gets the best care in the best facilities, I'm getting financial remuneration, and the dentist is getting a very special educational experience. It's the way I share knowledge. I'm saying, come and watch me work. It's in your own interest to do that. You'll learn a lot.'

### WORK-LIFE BALANCE

With his practice, referrals and training, Ash is a busy man. As so many dentists experience stress and burnout, he has developed a routine to ease the pressure – and is keen for others to take heed.

'I get up early in the morning, at 4:30am every day, and the morning time is very sacred,' he says. 'I spend two hours doing meditational chanting. Most people only feed their body, but I'm trying to feed my body, my mind and my soul.'

'When you use your time wisely in the

morning – whether you do journaling, listening to relaxing music, doing some exercise, doing meditation or whatever appeals to you – you're very focused and productive for the whole day.'

Ash also ensures he takes six weeks of holiday each year, and he also opts for a four-day working week. This keeps a day free for recreational activities, like playing golf or visiting the spa, but also gives him space to catch up with emails and think about his business.

'One key phrase that my business coach told me years ago was to find time to not only work in the business but also on the business,' he says. 'Sometimes you find the less you work, the more you will actually earn.'

'It's finding time to do the fun things you want to do, and everyone's fun things are different. It could be a basic thing, like spending time with your partner or children. We need to remind ourselves that this is important.'

On top of this, Ash ensures that his personal development is taken as seriously as his professional development. He regularly attends courses that have 'nothing to do with dentistry', noting that he found the first

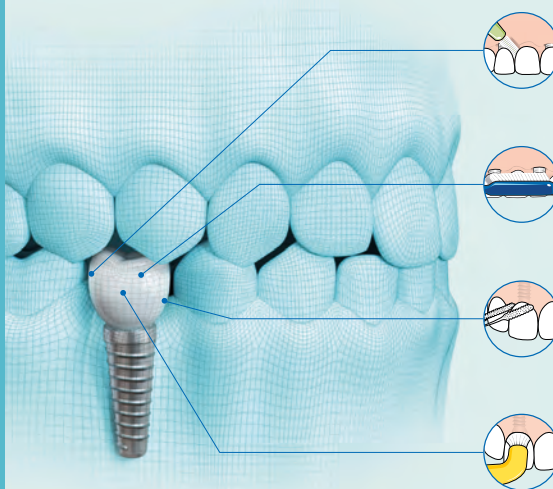
# Keep them smiling

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Ask your TePe wholesaler about our Dental Implant Care Kit.







*Ash teaching during an academy class*

one he went on, Unleash the Power Within by Tony Robbins, so valuable that he did it three times.

'All human beings have insecurities, and when you go on a course like this, it's very humbling to learn from other peoples' experiences, which makes you a stronger person,' he says.

### **A NOURISHED SOUL**

Beyond this, Ash also finds time to nourish his soul, attending spiritual retreats and courses. 'This inspires me in different ways, which dentistry alone can't do,' he says.

'There's one particular monk that I admire enormously, Keshava Swami. He wants to make wisdom go viral globally, so I'd encourage taking a look at [www.keshavaswami.com](http://www.keshavaswami.com). He uses ancient Vedic wisdom and applies it in a modern way that is easy to digest and understand; it's brilliant. This is not religious teaching; it is spiritual non-sectarian knowledge. This gentleman is my mentor.'

In 2023, Ash worked with Swami on something special – a spiritual retreat for dental professionals in the grounds of the 78-acre Bhaktivedanta Manor in Watford. The manor, which was donated to the Hare Krishna movement by the Beatle George Harrison, features everything from a temple to a cow sanctuary.

'The grounds are amazing, and the venue is a lovely place to have a retreat,' says Ash. 'Part of me was worried about taking dentists to an environment like a temple to do a course, naturally. But the feedback from all the dentists was unbelievable! It was just a beautiful day. They had delicious food. The lecture material was inspirational. The guests enjoyed a tour of the grounds, they fed the cows and took part in meditational chanting in the evening, which was very uplifting and purifying.'

Ash now aims to organise another event, on a bigger scale, to benefit dentists and medical professionals.

### **CHARITY WORK**

Aside from this, Ash's belief in helping the less fortunate has led him to become a supporter of Food For Life Vrindavan ([www.fflv.org](http://www.fflv.org)), a charity for which he has previously served as a trustee, vice-chairman and chairman.

'This great charity helps young girls living in poverty in India to have some hope in their lives – free education and food are two basic things our children take for granted here in the UK,' he says. 'For the sum of about £32 a month, someone in the western world can sponsor one of these girls. She will be taken care of, she gets food, free education and medical care.'

'We are seeing transformational change in girls that were on the street or would often be married off in the villages at the age of 13. So, this is a beautiful charity.'

### **OPPORTUNITIES AHEAD**

After 30 years of dentistry, Ash is showing few signs of slowing down. Aside from his academy, retreats and other projects, he is now looking at ways to branch out into online training to reach a global audience.

'My wife Jyoti is supporting me with my academy,' he says. 'We are really excited about the opportunities that lie ahead, in terms of me sharing knowledge, online courses and dental coaching. At a professional level, that is what's giving me the buzz and the drive to do everything I'm doing.'

'I'd love to inspire and help dentists not just on the dentistry side of things, but also those who are looking to see something beyond that and who want a more holistic, overall growth.'

'I'm not a life coach, but I'm working with individuals who are truly inspirational for me. By sharing deeper knowledge, I want to genuinely help dentists to achieve inner happiness and success.'

*Follow Ash @ashparmardentist or visit [www.theacademybyash.co.uk](http://www.theacademybyash.co.uk).*





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Dentistry Scotland Awards 2023



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# Is it really all change at the CQC?

**Pat Langley** provides insight into what is and isn't changing under the new CQC framework and what this means for your practice

**S**ince its inception in 2011, the Care Quality Commission (CQC) has evolved the way it inspects and regulates. Another evolution is currently underway with the creation of a new single assessment framework.

This time it has taken things slowly and tested every element to ensure it is fit for purpose before going live with it. At every stage during the development of the new framework, it also sought and acted on feedback from all involved.

The CQC has also launched a new portal, and this continues to present challenges to the developers with work still required for it to be fit for purpose. Of course, 'challenges for the developers' means there are challenges for users, but I am confident it will get there!

## WHAT IS THE NEW FRAMEWORK?

So, what is the 'single assessment framework'? It sounds scary but it really isn't. In plain English, it is a framework in which health and social care service providers, local authorities and integrated care systems are inspected using a single set of criteria.

Prior to implementing the single assessment framework, this was not the case. The CQC started inspecting dental practices using the new framework as of 13 May 2024.

Practices are keen to know what is different and how this will affect them. In practice, it is unlikely that your inspection will feel particularly different if your last inspection was in the past few years.

Practices that will notice a significant difference are those that were last

inspected before April 2015. There are also practices that have never been inspected, and the CQC will be prioritising both of these groups.

One of the biggest challenges with compliance is that you don't know what you don't know, so I think it's worth looking at what is not changing as well as what is changing.

## WHAT IS NOT CHANGING?

Perhaps the most important thing that isn't changing is that good will still be good. That means if your practice is currently compliant or 'on balance' compliant, it still will be under the single assessment framework. This is not surprising since infection control and the methods for controlling or eliminating infectious microbes and preventing their transmission have not changed.

A similar argument is also true of radiation protection and all the other elements that contribute to having a safe and compliant practice, such as health and safety requirements and having sufficient competent staff.

Practices that need to make improvements will still need to improve.

The five key questions are also not changing, with inspectors wanting to know whether your practice provides care that is safe and effective, whether the service you provide is responsive and caring and whether, with the governance systems you have in place, this means your practice team is well-led.

Other things that aren't changing are:

- The regulations are still governed by the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014
- Risk-based assessments will still be important – this means practices the CQC has concerns about
- The CQC will continue to inspect 10% of dental practices every year

- Dental practices will still not be rated
- The key areas of focus will be very similar to their current areas of focus.

## WHAT IS CHANGING?

The key lines of enquiry (KLOEs) that have been used to guide inspections since 2015 have been replaced by 34 quality statements, with practices being required to provide evidence of compliance with the relevant quality statement.

For each evidence category, practices will be assessed as either:

- Regulations met
- Regulations not all met.

## FEEDBACK

There will be a significant emphasis on feedback from patients and team members, and good methods of obtaining this are likely to be of particular importance. While an interest in feedback has always been important to the CQC, it seems feedback will assume an even more important role under the new single assessment framework.

Feedback is critical to the success of all businesses – how do you know if your patients and team members are happy unless you ask them?

## WHY BOTHER WITH COMPLIANCE?

My belief is that practices should not 'do compliance' because the regulators tell you to, but rather because it's the right thing to do and has considerable benefits.

So, if your practice is already compliant – well done! And if it isn't, please get help.



**Pat Langley**

Pat is a dentist and founder and chief executive of Apolline. Apolline provides a complete end-to-end dental compliance management solution comprising innovative software and in-practice support together with online and in-practice training.

*Fulfil all your compliance requirements with Dentistry Compliance. Visit [dentistry.co.uk/compliance](https://dentistry.co.uk/compliance) for more information and to sign up.*



# Dental Practice Accelerator: the training day

The Dental Practice Accelerator programme is fully underway for winner **Hannan Saleem** and his practice. Here's what happened at the recent training day with **Shaz Memon** and **Ramin Semsar**

**H**aving won the Dental Practice Accelerator, Hannan Saleem and his practice, London Dental Centre, are looking forward to reaping the benefits of the programme.

Hannan and his team took part in a training day, with Shaz Memon and Ramin Semsar, designed to help them hone their social media management and customer service skills.

## ATTRACTING THE PATIENTS YOU WANT

Shaz Memon, founder of Digimax Dental, kicked off the training day with a focus on social media management, giving the team tips on harnessing the power of Instagram to make people feel connected to the London Dental Centre brand.

Shaz effectively helped the team to see things a little differently, he explained: 'Instagram can build our brand. It can give us a captive audience of people who follow us and like our messages and like us for who we are; a bit like the patients that you gel with right now.'

'There's never been an easier time to leverage social media to get whatever we want in life, especially the kind of patients that you want.'

Based on the idea that, underneath it all, most of us are interested in everyone else's business, whether we like to admit it or not, Shaz helped

the team to unlock different ideas about the content they could create.

Using the things that are individual to the practice, such as location, hobbies and personalities, they can build on the 'behind the scenes' posts, stories and reels that people really want to see and engage with.

This resonated well with Hannan: 'It was a lightbulb moment for me when Shaz was talking about building the rapport before the patient even enters the practice. A lot of the work is done before patients even arrive as they have seen our dentists on our Instagram or on our website.'

'It's also really important to make sure that all of the imagery on our social media is personable and relatable. I think that's something patients really appreciate.'

## DELIVERING A FIVE-STAR EXPERIENCE

The London Dental Centre team was then treated to the superb insight from Ramin Semsar, one of the trainers at Clinics, on delivering five-star customer service.

With a wealth of experience working in guest relations for luxury hotels and training the hospitality industry for more than 15 years, Ramin has plenty

of insight to share, so the team was in for a real treat.

Ramin gave the team advice and practical tips on giving its customers a fantastic

customer service experience every time, in all areas of the practice. He explained: 'It's all about the customer service experience. We tend to forget that customers are not technical, and the product is not the key, it's



## Lightbulb moments

Hannan Saleem shared his stand-out moments from the training day with Shaz Memon and Ramin Semsar...

'It was a lightbulb moment for me when Shaz was talking about building the rapport before the patient even enters the practice. A lot of the work is done before patients even arrive as they have seen our dentists on our Instagram or on our website.'

'A crucial moment for me during the branding session was learning about meeting the patient at eye level and really taking control of those interactions and those conversations.'



the experience they encounter. How do we make them feel? How do we treat them? What do they walk away thinking about us as a business and the experience that they've had? For me, that's always the main focal point.'

Hannan was delighted with this element of the training. 'Ramin showed us that it's not only about giving patients the standard minimum expectations, but it's about setting our own standards, how we carry ourselves and how we interact with patients,' he said.

'I think it's really important to reaffirm that to the team, and for me it's important for the system of managing expectations of patients and to really set the tone of future interactions.'

Dr Ioannis Piastargias, one of the dentists at London Dental Centre, commented: 'The training has changed my approach in many different ways. The way we communicate with patients, the way we communicate with the members of our team – everything is going to improve. I think we're taking further steps in enhancing both ourselves, the image of our practice and everything that our practice has to offer both the patients and the community.'

## REFLECTION

At the end of the training day, the team spoke about its key takeaways from the day.

Hannan shared: 'A crucial moment for me during the branding session was learning about meeting the patient at eye level and really taking control of those interactions and those conversations.'

'We've never had too much formal training on customer service so it brings a fresh perspective on how we should be interacting with patients.'

'Levelling up our online presence will help the business because the patients will know what they can expect when they come to the London Dental Centre, which can essentially help to make it quite a seamless journey.'

'I think it really helps the patient experience if they know they will be greeted by the front of house staff once they enter, then they will see a dentist who they've seen on social media or on our websites. In this way, a lot of the work will be done before any treatments are even carried out.'

Ioannis concluded: 'The dental practice has been fantastic since the launch of the Dental Accelerator Programme in October 2023. I think

it has brought about significant improvements in the practice; staff management has improved significantly, as has communication between members of our team.'

'The practice has purchased a new Itero scanner, which is very helpful for Invisalign cases – I think we're always trying to improve now, and we are only going to enhance further.'

Shaz was extremely pleased with the reaction from the team on the day. He said: 'I'm really hopeful that the next time I come to the London Dental Centre, Hannan's team is going to be creating some amazing content and really opening up to the world and sharing its story, more behind the scenes, more real authentic content and doing away with the generic content the practice has been putting out so far.'

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*If you would like to accelerate your practice and clinical growth, Align Technology can help you get to the next level, leveraging the Invisalign system, Itero intraoral scanners and the Align Digital Platform. For more information about its education and growth support programmes, visit [www.invisalign.co.uk/gp/become-a-provider](http://www.invisalign.co.uk/gp/become-a-provider).*

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# Prepare to shine

Entry to this year's **Private Dentistry Awards** is now open  
– don't miss your chance to sparkle!

**H**ere at *Private Dentistry*, we're continually impressed with the innovations, successes and breakthroughs seen across the profession.

There really is plenty to celebrate, and we're always proud to recognise this amazing work with the Private Dentistry Awards as well as in the pages of this magazine.

That's why we'll be really excited to bring together some of the best of the profession in London on 8 November for the prestigious Private Dentistry Awards 2024. It really is going to be a night to remember!

Perhaps you will be one of the lucky winners, called to the stage to collect your award and open a new chapter in your career as a Private Dentistry Awards winner.

It sounds good, doesn't it?

## HOW TO ENTER

Of course, to be in with a chance of winning, you must enter!

To view the full list of categories, visit [dentistry.co.uk/awards/private-dentistry-awards](https://dentistry.co.uk/awards/private-dentistry-awards).

Each category has its own criteria to be followed, which must be met within 750 to 1,000 words. Be sure to supply supporting evidence too, be it photos, testimonials or marketing material.

Entry is now open – and you have until 11 September to submit your entry!

The Private Dentistry Awards will be a night of grandeur and glamour, as you join your peers for the industry event of the year. There will be entertainment, amazing food, dancing and celebrations galore.

And all of this happens amid the splendour of London's historic Grosvenor House Hotel, an opulent venue next to Hyde Park.

But the Private Dentistry Awards is about more than the event itself. The whole process can be transformative for your practice and your team, as you take the opportunity to reflect on and celebrate your strengths.

And the satisfaction at winning an award lasts more than just a night. A Private Dentistry Award shows that you are the best of the best, and promoting your awards success can boost your profile, patient numbers and profits.

If you need convincing any further, have a look at this video of some of the highlights from 2023: [youtu.be/FAzAsYiVlv8](https://youtu.be/FAzAsYiVlv8).

Be sure to keep an eye on these pages over the coming months as more will be revealed about this year's event – it promises to be better than ever.

*To enter, visit [dentistry.co.uk/awards/private-dentistry-awards](https://dentistry.co.uk/awards/private-dentistry-awards).*

# PRIVATE

## DENTISTRY AWARDS 2024

## Key details

**11 September:** entry closes

**8 November:** awards night at the Grosvenor House Hotel, London

[dentistry.co.uk/awards/private-dentistry-awards](https://dentistry.co.uk/awards/private-dentistry-awards)

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## 2024 categories

- Young Dentist
- Team of the Year
- Practice Principal
- Treatment of Nervous Patients
- Child-Friendly Practice
- Charity or Community Project
- New Practice
- Most Improved Practice
- Referral Practice
- Digital Practice
- Website of the Year
- Hygienist, Therapist, Receptionist, Practice Manager and Dental Nurse
- Practice Design and Brand
- Patient Care
- Practice of the Year

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## CHARITY PARTNER



# Unlock your true implant potential

Getting the most out of your implant practice requires a partnership providing the heritage, brand legacy and portfolio to support you, says **Biohorizons Camlog**

**T**he decision-making process of partnering with an implant provider extends far beyond the simple selection of an implant – it encompasses every aspect of the journey, from in-surgery support to unwavering customer service and ongoing education. It's about embracing the complete package. This approach holds the key to unlocking the full potential of your implant career as well as the patient experience.

Achieving excellence in implant dentistry involves a blend of high-quality products, innovative technologies and comprehensive support systems. It's about finding a provider that offers more than just implants – one that provides an array of premium products, cutting-edge implant technologies and regenerative materials, backed by exceptional support to assist your practice.

## INCREASED IMPLANT VOLUME

Revolutionary progress in implant dentistry requires an innovative support system. Trust in your chosen system is paramount. Clinically proven solutions, advanced surface treatments and ground-breaking regenerative products can significantly boost clinical success and patient satisfaction. Enhancing your implant volume involves not only the right products but also confidence in the entire system. Key advancements such as biologically responsive surfaces that inhibit epithelial downgrowth and promote connective tissue attachment are essential. These features enhance both the clinician's and the patient's confidence in the treatment's long-term success.

## BIOMATERIALS

Growing your implant practice necessitates a wide range of regenerative and patient-centric materials. An extensive portfolio that includes xenograft, allograft and synthetic solutions, along with advanced collagen membranes, enables clinicians to create robust foundations for hard and soft tissue growth. This flexibility ensures that patient needs are met with tailored solutions, supporting natural aesthetics and long-term functionality, thus increasing patient acceptance.

## DIVERSIFY TO AMPLIFY

Diversifying your implant services with immediate and delayed protocols, or advancing from single to full-arch, can help attract a wider patient and referral base. Diversification of services can enhance your practice's appeal, allowing for efficient treatment of a wider range of cases, therefore enhancing the overall volume and success of your practice.

## CONTINUOUS EDUCATION

Ongoing education is vital for unlocking the full potential of your implant practice and achieving long-term success. Comprehensive implant education programmes, supported by masterclasses, symposiums and webinars, provide dentists with opportunities to engage with industry experts and gain practical insights.

Additionally, mentorship through a chairside visitation programme can offer invaluable support during surgical procedures. Focused learning and practical insights gained through such initiatives are key for professional development and clinical excellence.

## STRATEGIC SUCCESS

A successful implant business strategy involves more than just exceptional products. Comprehensive support services, including dedicated education websites and patient education tools, are essential. Engaging with platforms that provide access to the latest news, clinical articles, educational resources and case studies can enrich the implant journey and facilitate continuous learning and growth.

Research real-world experiences from clinicians to highlight the potential transformative impact of a robust implant support system. For example, the ability to grow an implant business through access to courses, advice and practice visits shows the importance of comprehensive support in taking the next step in an implant journey.

## A JOURNEY OF OPPORTUNITY

Unlocking your true implant potential means getting the most out of your practice by partnering with those who provide the heritage, expertise and support you need. An all-encompassing approach is needed that covers every aspect of the implant journey, from in-surgery support to ongoing education and comprehensive care.

In this journey, continuous learning, skill enhancement and strategic diversification are key to achieving long-term success. By focusing on these elements, you can enhance your practice, increase patient acceptance and build a robust implant business.

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*Drive your practice forward with Biohorizons Camlog, visit [maketheswitchtobiohorizonscamlog.co.uk](http://maketheswitchtobiohorizonscamlog.co.uk) for more information.*

## Continuous 12-hour fluoride protection!

### Trycare

Conventional 1450ppm and above fluoride toothpastes only deliver fluoride for a maximum of 90 minutes, whatever their fluoride content and provided the patient does not rinse.



Despite its lower 530ppm fluoride content, Biomin F remains active for up to 12 hours, continuously releasing fluoride to strengthen teeth and protect against decay, even if the patient's toothbrushing is erratic and inefficient.

Available from Trycare, Biomin F contains tiny bioglass particles made up of fluoro calcium phosphosilicate bioactive glass that bonds to teeth and enters the dentinal tubules, where they gradually dissolve for up to 12 hours, slowly releasing calcium, fluoride and phosphate ions. These combine with saliva to form fluorapatite, which strengthens teeth, aids effective remineralisation of enamel and provides effective treatment for hypersensitivity.

Patients also report that teeth feel smoother and cleaner, there is a noticeable absence of background oral sensitivity and that gums are healthier and less prone to bleeding.

A genuine practice builder, Biomin F enables patients to enhance their smile and improve their oral health and comfort. The toothpaste is approved by the Oral Health Foundation for sensitivity relief and remineralisation.

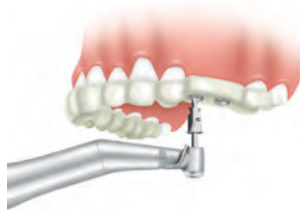
01274 885544

[www.trycare.co.uk/biomin](http://www.trycare.co.uk/biomin)

## Hassle-free, predictable placement

### Trycare

Using guided surgery for implant placement has become increasingly popular among implant dentists. Dramatically reduced surgical time helps improve patient comfort. Plus, flapless surgery significantly improves the healing process and time and minimises risk of complications.



For the implant dentist, it significantly improves placement accuracy, reduces the risk of complications and minimises chair time, leading to greater efficiency and cost savings.

The Adinguide guided surgery system delivers effortless procedures plus accurate and predictable implant placement. It delivers everything you need in a guided surgery system.

It is a keyless system that helps save surgery time, while ensuring accurate and predictable implant placement. It features Activeflow Irrigation Technology, which delivers coolant directly to the surgical site. This helps prevent bone overheating, thereby maintaining healthy bone for optimum osseointegration and minimised risks of complications.

Built-in stoppers ensure precise and accurate drilling to the desired depth, while keyless, self-centring drills and tools enable implant dentists to perform faster, easier and more intuitive surgeries.

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[www.trycare.co.uk/adin](http://www.trycare.co.uk/adin)



# Tokuyama

## Spherical composites ... restorative magic in your hands.



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*Ensures restoration longevity.*



### Mirror Reflection

*Emulates natural aesthetics.*



### Diffusion & Transmission

*No bevelling.. margins disappear.*



### 10 Second Polish

*An unrivalled, lasting gloss.*

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# Trycare



## State-of-the-art bone regeneration Trycare

Tecnoss's Osteobiol GTO is the state-of-the-art second-generation guided bone regeneration material distributed by Trycare.

All Tecnoss Osteobiol products contain a dual-phase resorbable bone matrix incorporating both mineral component and collagen. Unlike ceramised first-generation materials that are never completely replaced by newly formed bone, dual-phase biomaterials do resorb progressively and are replaced by adequate new vital bone.

Handling like a sticky putty, Osteobiol GTO is Tecnoss's state-of-the-art ready-to-use pre-hydrated biomaterial that can be easily dispensed into defect sites direct from the syringe. It enables clinicians to skip the hydration phase with saline or blood, saving time and decreasing the risk of accidental exposure to pathogens. Osteobiol GTO contains Tecnoss's innovative Osteobiol TSV gel, which ensures optimal stickiness of the material, allowing easy adaptability to the recipient site and extreme stability.

Conceived as a universal biomaterial, easily adaptable to any bone defect, it has proven clinically valid for horizontal augmentation of two-wall defects and socket preservation with compromised buccal plates. It can also be used to treat peri-implant lesions and severe bony defects, also in combination with Osteobiol Soft Cortical Lamina.

01274 885544

[www.trycare.co.uk/osteobiol](http://www.trycare.co.uk/osteobiol)



## Bio-Emulation Symposium in London GC

GC is thrilled to announce its anticipation for the upcoming Bio-Emulation Symposium 2024, set to take place in London on 29 and 30 November. It promises a transformative experience dedicated to the latest advancements in dental research and technology. This year, dental technicians specifically will find themselves in the spotlight.

The Bio-Emulation Group was founded in 2008 as a think tank, challenging traditional dental dogmas and advocating for minimal intervention practices. Today, it has evolved into a thriving community of highly skilled clinicians and technicians dedicated to preserving and replicating natural teeth.

Attendees can look forward to an impressive line-up of 20 speakers sharing their cutting-edge research and expertise. As gold sponsor, GC will naturally have a strong presence at the event, which celebrates its 10th anniversary.

'By close collaboration between dentists and dental technicians, learning from each other's expertise, all parties can enhance their technical skills, improve patient outcomes, and stay at the forefront of dental innovation,' said Kerstin Behle, EMEA professional services manager at GC Europe.

[www.bioemulation-symposium.com](http://www.bioemulation-symposium.com)



## Natural mineral bone material Augma

Augma's Bond Apatite is a natural mineral bone regeneration material that does not wash away.

Supplied in an all-in-one syringe that enables immediate dispensing directly into the bone defect, it is incredibly quick and easy to use. Simply depress the plunger to activate the ingredients, dispense it into the defect and apply pressure using a sterile gauze and it's set. The whole process takes literally seconds.

Bond Apatite sets hard, so it won't wash away even in the presence of blood and saliva. Because of this, there is no need for a membrane, which saves additional time and unnecessary expense.

There is no need to achieve tension-free closure, this is actually contra-indicated, or even complete primary closure for gaps less than 3mm. Small dehiscences can be left exposed without any risk of infection or breakdown. Larger dehiscences can be protected by suturing an Augma Shield protective layer over it.

Formed from a patented mixture of biphasic calcium sulphate and hydroxyapatite in a two-to-one ratio, Bond Apatite sets like a cement in the oral cavity. After a few weeks it transforms into a radiolucent matrix, before calcifying and becoming radiopaque new bone. According to the manufacturer, it produces 90% new bone after three months and over 95% new bone after eight months.

[www.augmabio.co.uk](http://www.augmabio.co.uk)



# Bond Apatite®

CALCIUM SULPHATE BASED BONE GRAFT

## Mixes, places & sets in 30 seconds

Trycare

Bond Apatite is a **synthetic bone graft cement** consisting of **2/3 Biphasic Calcium Sulphate** and **1/3 slow resorbing Hydroxyapatite granules** presented in a **1.0cc ready to use syringe**.

## New implant prosthetic components Zirkonzahn

Zirkonzahn's line of implant prosthetic components, which includes Scanmarkers, White Scanmarkers, White Metal Scanmarkers, Scananalogs (laboratory analogues used as scanmarkers), impression copings, laboratory analogues, Multi-Unit Abutments, Raw-Abutments and healing caps has expanded with new products:

1. Zirkonzahn LOC-Connector, a snap attachment system for implants and bars
2. Multi-Unit Abutments 17°, characterised by a 17° angle to compensate for any implant inclinations with two different anti-rotation connection types
3. Titanium Bases K85, with the chimney height adjustable to the individual tooth length and available in different gingival heights
4. Titanium Bases K80 Angled Screw Channel, with a chimney height adjustable to the tooth length and the possibility to tilt the screw access channel from 0° to 30°; also available in different gingival heights
5. White Metal Scanmarkers, reusable scanbodies to acquire the implant position and orientation during intraoral and model scans.

All Zirkonzahn components are available for more than 140 implant systems and are fully integrated in Zirkonzahn.software. Zirkonzahn also grants up to a 30-year warranty on all implant abutments.

[www.zirkonzahn.com](http://www.zirkonzahn.com)



**Zirkonzahn®**  
Human Zirconium Technology



## Miracle shade matching Trycare

Trycare Ltd is UK distributor of Tokuyama Dental's range of spherical composites including Estelite Sigma Quick.

Featuring Tokuyama's patented RAP monomer and aesthetic spherical filler technology, Estelite Sigma Quick delivers an extended working time in ambient light yet cures in only 10 seconds!

There is also less residual monomer and minimal after cure colour change for long-term aesthetic satisfaction.

In addition, Estelite Sigma Quick offers miracle shade matching! Because of its spherical filler particles, it offers inherent shade mimicking so that, in most cases, just one shade will blend perfectly with the natural teeth, leaving invisible margins and undetectable restorations.

These spherical fillers also facilitate outstanding polishing and a lustre that lasts and lasts, allied to high wear resistance and very low abrasion of the opposing teeth.

Estelite Sigma Quick is ideally used in combination with Tokuyama's award-winning Universal Bond II, which can be used to bond all direct and indirect restorative materials, Garrison Sectional Matrix systems and, for the ultimate aesthetic finish, Eve polishers!

If you prefer layering techniques, Tokuyama's Asteria delivers outstanding results that can be characterised using Estelite Color.

01274 885544

[www.trycare.co.uk/estelite](http://www.trycare.co.uk/estelite)



## Straumann's portfolio on display Straumann

Known for supporting clinical excellence across dentistry, Straumann Group demonstrated an array of its industry-leading brands at the recent British Dental Conference & Dentistry Show Birmingham.

Implant dentists had an opportunity to discover the different implant systems available, including those from Straumann, Neodent and Anthogyr. With varying features, these solutions afford a spectrum of benefits for different patients and situations.

Clinicians interested in providing predictable aligner treatment were interested to discuss the Clearcorrect system, which offers an unparalleled level of customisability and control of tooth movements.

Other brands on display included Medentika and Dental Wings, showing the breadth of Straumann Group's comprehensive product portfolio.

[www.straumann.com](http://www.straumann.com)



## Treat hypersensitivity in minutes Parkell

Predicta Bioactive Desensitizer by Parkell swiftly alleviates dentine hypersensitivity using natural tooth elements, calcium and phosphate. Upon application, it forms hydroxyapatite plugs in the dentinal tubules and adds a mineralisation layer that broadens the seal, protecting pain-sensing A-delta nerve fibres.

Ideal to treat sensitivity from exposed roots after perio-surgery, bleaching, scaling, root planing and gingival recession, this syringe-dispensed, ready-to-use gel is highly biocompatible, free from methacrylate, and does not irritate soft tissues.

Patients report immediate relief from sensitivity lasting up to six months.

[europe.parkell.com/predicta-bioactive-desensitizer](http://europe.parkell.com/predicta-bioactive-desensitizer)





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## IN THE HOT SEAT

This month we get to know dentist **Sam Jethwa**, founder of Bespoke Smile Clinic and Academy

**Q When and where was your last meal out?**

**A** Bottomless Sunday roast at Soho Farmhouse at the weekend. It was excellent!

**Q Who would play you in the movie of your life?**

**A** I pretty much have no idea about actors, but my wife says Stanley Tucci, and friends confirmed it. Apparently, it's to do with how gracefully passionate he is about things, and that reminds them of how I am about our patient and delegate results. I guess that is true.

**Q What's the best advice you've received?**

**A** It sounds rather depressing, but as an only child, I was brought up with the message from my mum that I cannot learn to rely on anyone, so be as self-sufficient and fiercely

independent as possible, as ultimately it comes down to you when tough times hit.

**Q What's your guilty pleasure?**

**A** Biscoff spread. Except not spread on anything. Just my spoon.

**Q What was the last gift you gave/received?**

**A** Received: wine, flowers and a luxury home fragrance from a group of my mentees at Bespoke Smile Academy. I'm very grateful to them.

Gave: a spa weekend for one of our clinicians to celebrate five years of amazing work at Bespoke Smile.

**Q Describe your perfect holiday...**

**A** Skiing in the morning, pitstop at a South African vineyard, beach club in the afternoon.

**Q What's your all-time favourite book/movie?**

**A** Book: *Building a Storybrand* by Donald Miller. I can't do fiction, and the time commitment needed for movies isn't for me.

**Q What song is guaranteed to make you want to dance?**

**A** That's a big fat zero. I'm not a dancer, but B\*Witched's C'est La Vie was the theme song for our wedding so has a special place.

**Q What keeps you up at night?**

**A** A difficult patient whose unrealistic expectations I may have underestimated. Thankfully, it's extremely rare.

**Q How do you unwind?**

**A** A Sunday afternoon nap with Snoopy, my sausage dog, a summer drive with the top down and any real estate show on Netflix/Prime (I fast forward the fake drama and focus on the properties).

**Q If you won the lottery, what would you do with the money?**

**A** For work: build and design houses for a living.

For me: never fly economy ever again. To give back: start a dog rescue and rehab.

**Q What was the last photo you took on your phone?**

**A** Snoopy lounging on the sofa (picture below)!







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Dental  
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