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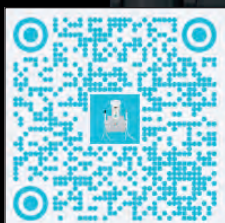


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Guest editor

# James Goolnik

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# Joining the dots

Siobhan Hiscott  
Group managing editor

Working with guest editors is always a pleasure. Without fail, they bring fresh energy and unique insight that shines through in the pages of the magazine.

But even so, rarely have I seen a guest editor take on the role with so much enthusiasm: Dr James Goolnik's commissioning has been so prolific that we've decided to dedicate a whole section to his ideas!

Starting on page 31, this section – our Holistic Care Special – champions the growth of integrative dentistry. From post-surgical nutritional advice and utilising homeopathy in dentistry to tackling tongue ties and holistic approaches to orthodontics, this section sets out to explore how to combine traditional dental care with alternative and complementary therapies to achieve holistic health and wellness.

At its core, holistic dentistry promotes a whole-body approach to oral health. But I know too it's a term that courts some controversy. Let's openly address the elephant in the room – there are many dental professionals that dismiss alternative, unconventional approaches, criticising the lack of scientific evidence base to the practices.

Scepticism is, of course, understandable – after all, dentistry is not immune to pseudoscience. But dismissing the entire field outright risks ignoring emerging research that links oral inflammation to systemic diseases such as diabetes, cardiovascular issues, and even Alzheimer's.

Functional medicine and integrative health are entering mainstream dialogue – and dentistry must not lag behind.

As James demonstrates, keeping an open mind does not mean abandoning scientific rigor. It means engaging critically and constructively with new ideas. When grounded in evidence and ethics, holistic dentistry can offer valuable insights into preventive care and patient empowerment. It encourages dental professionals to treat the mouth as part of the whole body, rather than in isolation. That, to me, is joined up thinking.

Approaching dental care that considers the interconnectedness of oral health and overall wellbeing can surely only be of benefit to patients?

As James points out overleaf, holistic dentistry is not a trend, it's the future. Today's modern patient is seeking care that integrates oral health with overall wellbeing, which leaves you, dear reader, with a choice: embrace new approaches or risk being left behind.

As the dental landscape evolves, professional adaptability will become essential. Dentists who understand both conventional and holistic paradigms will be better positioned to serve diverse patient needs and stand out in an increasingly competitive field.

The future of dentistry lies not in rigid adherence to tradition, but in a balanced, informed openness. By

approaching holistic trends with curiosity rather than cynicism, much like James has done throughout his career, dental professionals can remain leaders in a field that's always changing – because patients expect nothing less.





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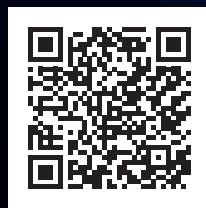
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# Expanding the boundaries of care

James Goolnik

Guest editor, dentist, speaker, author and chair of the Private Dentistry Awards judging panel

It's an honour to guest edit this month's edition of *Private Dentistry*, a publication that continues to reflect the energy, innovation and ambition within our profession.

As I read through the contributions to this issue, one thing became immediately clear: dentistry is changing. Not just in how we diagnose or treat, but in how we think.

Across the articles in the Holistic Care Special section, you'll find clinicians pushing the boundaries of what private dentistry can be, from exploring the oral microbiome and functional diagnostics, to integrating myofunctional therapy, cranial osteopathy and herbal medicine into daily care.

It's no longer just about teeth. It's about breathing, sleeping, posture, habits, and the hundreds of micro-decisions that shape a patient's lifelong health. What once sat outside the dental world – nutrition, sleep science, bodywork – is now sitting at the heart of it. And that's not alternative; that's progress.

We see it in Brooke Shipp's compelling use of microscopy to engage patients in their gum health. In the nuanced conversation around bruxism and airway instability from Dr Aoife Stack. And in the collaborative, preventive focus of practitioners working with tongue ties, saliva diagnostics and integrative orthodontic care.

There's also a growing sense that patients want more. More understanding. More agency. More connection. Articles on diagnostic testing and patient-led data echo what many of us are seeing in practice: the rise of an informed, health-literate public who want to be partners, not passengers, in their care.

This shift isn't without its challenges. It asks us to be more open-minded, more collaborative and sometimes to question the models we were trained in. But it's also an invitation, to be more curious, more holistic and more human in the way we work. As someone who's spent the past 30 years delivering

private dental care, I can say with confidence that this is not a trend. It's the future. One where private dentistry leads not just in aesthetics or technology, but in whole-person care that's rooted in science and delivered with integrity.

If this sounds like you or your team, if you're innovating behind the scenes, empowering patients, or offering care that goes the extra mile – then it's time to let the wider profession know. Entry for the Private Dentistry Awards 2025 is now open, and this is your opportunity to shine a light on what makes your practice stand out. Here are my top tips for submitting a strong entry:

- Read the criteria carefully and stick to the word count
- Back up your claims with clear, relevant and tangible evidence: figures, photos, videos, testimonials
- Keep your examples recent. We're interested in what you've done in the last 12 to 18 months, this reflects current impact and momentum
- Submit everything in one file (such as PDF or Powerpoint)

rather than multiple attachments. It makes judging smoother and more coherent

- Highlight how you engage with your community. How do you give back, educate, or support others beyond your practice?
- Tailor each entry. If you're entering more than one category, don't just copy and paste. Make it specific and show why it fits
- If you're shortlisted, celebrate! Show up to the event and support your team. Awards are about recognising effort, not just winning. I would love to see you there!

Putting together an award entry isn't just about winning a trophy, it's a chance to pause, reflect on your achievements, and tell your story. One that might just inspire the next wave of innovation in private dentistry. The deadline is 12 September. Make the time – you deserve to be seen.





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*special*



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# 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.

### GROUP MANAGING EDITOR

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

### CHIEF COMMERCIAL OFFICER

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

### MEDIA PARTNERSHIPS MANAGER

Ivana Perkins  
ivana.perkins@fmc.co.uk | 07760 887016

### DESIGN AND PRODUCTION

Glenn Baxter, K-Marcelyne McCalla

### CONTENT DIRECTOR

Guy Hiscott

### CONTENT

Rowan Thomas, Heather Grimes, Gaby Bissett, Lucy Veal

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---

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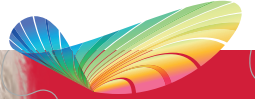
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BDS, owns an award-winning practice in Leamington Spa. She has developed her career in general dentistry, while also specialising in cosmetic dentistry with a particular interest in facial aesthetics. She is a member of the BACD.



#### SUBIR BANERJI

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 FDS RCS Ed, is a specialist in oral surgery. He is clinical director of The Campbell Clinic and director of The Campbell Academy.



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BDS, co-owns Rothley Lodge Dental with his wife Dr Meghan Chard. He is a past president of the BACD, lectures nationally and is a co-founder of Pärila toothpaste tabs.



#### RACHEL DERBY

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



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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.



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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.



#### 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, is principal of DRMR Clinic in Knightsbridge. She also runs DRMR Academy with a mentorship programme, online course and in-person course on porcelain veneers. She has completed more than 14,000 porcelain veneers over 22 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.



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CBE DSc (hc) FDS FFGDP (UK) FFD FRC, 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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# Several members of the dental profession named in this year's **King's Birthday Honours** list

The 2025 King's Birthday Honours list, released each year on the King's official birthday on 14 June, included several members of the dental profession. Jason Wong, chief dental officer (CDO) for England, said: 'Congratulations to colleagues on the King's Birthday Honours list. Delighted to see so many from the dental and oral health family.'

**SARA HURLEY, CBE**

Sara, who held the position of CDO for England between 2015 and 2023, has been awarded a Commander of the Order of the British Empire for services to dentistry. As CDO, Sara made updates to the UDA system including enhanced UDAs for higher needs patients, issued instructions to suspend and resume primary care dentistry during the COVID-19 pandemic, and advocated for greater use of skill mix in dental practice.

**PETER BRENNAN, OBE**

Peter is a consultant surgeon and an honorary professor of surgery at the Portsmouth Hospitals University NHS Trust. He was awarded an Officer of the Order of the British Empire for services to surgery and patient safety.

**ROSLYN MCMULLAN, OBE**

A retired consultant orthodontist, Roslyn (Roz) is chair of Probing Stress in Dentistry NI, raising awareness of mental wellbeing in the dental workforce. Her Officer of the Order of the British Empire was awarded for services to mental health and wellbeing in the dentistry profession in Northern Ireland.

**PETER CRANFIELD, MBE**

Peter is a dentist and training programme director and associate postgraduate dean for NHS England. He has been awarded a Member of the Order of the British Empire for services to dental education. Peter is regional adviser for Health Education East of England and is heavily involved in organising and teaching in dental foundation training.

**LINDA GREENWALL, MBE**

Linda is a dentist specialising in restorative dentistry and prosthodontics, and chair of the British Dental Bleaching Society. In 2011, she founded the Dental Wellness Trust, a charity promoting the general health and wellbeing of young children through dental wellness – especially those most in need in the UK and worldwide. She was awarded Member of the Order of the British Empire for services to dentistry and to charity.

**FIONA SANDOM, MBE**

Fiona has been awarded Member of the Order of the British Empire for her outstanding services to dental therapy and the NHS in Wales. Fiona serves as the DPSU lead and north Wales regional lead for Health Education and Improvement Wales (HEIW). She completed her PhD at Bangor University, where she helped to introduce the dental hygiene programme. She also committed to the prescription-only medicine exemptions project that spanned over 11 years, resulting in a pivotal change in legislation allowing dental therapists and hygienists to be fully autonomous clinicians.

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# Eight in 10 dental nurses keep working despite poor mental health

More than eight in 10 dental nurses (84%) said they have continued to work despite a negative impact on their mental health in a new survey.

Two thirds (65%) of the dental nurses said they feel guilty if they take time off due to mental wellbeing issues. This figure was similar among all dental professionals (66%), while around half (49%) said they feel they should keep working even when their mental health is suffering.

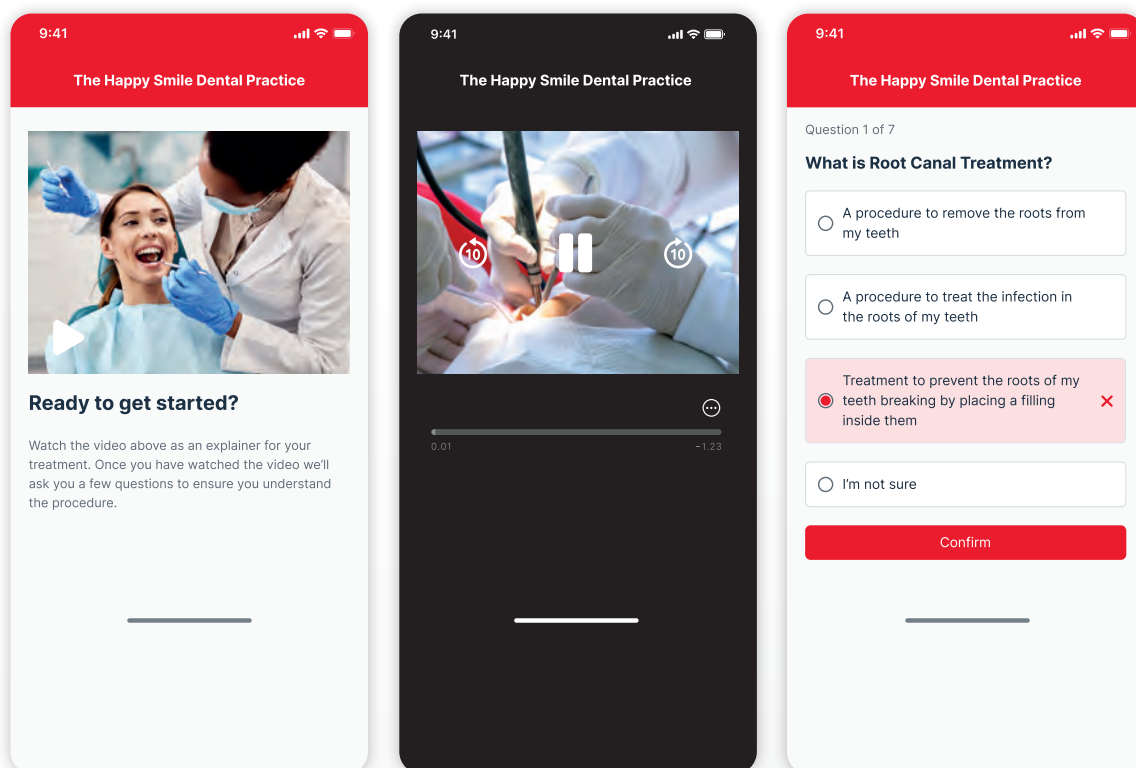
More than half (56%) of the dental professionals cited financial reasons for not taking time off, and 47% said there would be no one to cover their absence if they did. One third also felt pressure from the demand for NHS appointments and the target-driven culture this creates.

The survey of 1,600 UK dental professionals, conducted by Dental Protection, also explored the effects of working despite mental health issues on dental professionals' work.

A lack of concentration was noted by 56% of dental professionals, which increased to 65% among dental nurses. A further 46% of dental professionals noticed a lack of empathy with patients and greater fear of making mistakes. More than one third (34%) felt this could have contributed to a lower standard of care.



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# Tomorrow's tech

**Chris Barrow** shares a glimpse of what the future might hold in the form of a dedicated personal digital concierge



CHRIS  
BARROW

I've just watched, with fascination, a Youtube video of an interview between former Apple chief designer Sir Jony Ive and the founder of Open AI, Sam Altman.

Admittedly, it is a very self-congratulatory conversation filmed in a San Francisco coffee shop, between two extraordinarily innovative tech billionaires, but it did also deliver a tantalising glimpse into what could be a very different future for us all in as short a time as 2026.

## COMPANIONSHIP

Following the end of his active career at Apple, Ive has gone on to form his own technology, design and AI-venture company called Io.

In the meantime, Altman has created Open AI, the most public facing aspect of which is Chat GPT, becoming the AI search engine of choice for the general public.

During their 'coffee break', they shared that Ive's company has been acquired by Open AI (at a valuation of around \$6.5 billion), and that they are developing a brand-new 'device'.

Any search online to enquire as to what this new device will look like will draw a blank (believe me, I've tried). The only thing that we can reliably discover is a list of the things this new device isn't. We know it's not:

- A watch
- A phone
- A desktop, laptop or tablet.

We also don't know if this device is going to be wearable, and if so, in what way. But it will be permanently connected to Open AI, and it will act as a permanent companion to its owner (that's you and me).

Ive and Altman are suggesting that we will not want to be without such a device and that, frankly, it's going to change the world, specifically stating that it will eliminate the dreaded 'screen time' – now there's a bold claim.

## PRO POWER

I'm a power user of Chat GPT at the 'pro' level of subscription and, as such, I've recently been given access to the new service called Operator, which works alongside Chat GPT.

If I ask Operator to find me a good dentist that has new patient availability in my postcode (and I may also specify a particular treatment modality in which I'm interested), a sub screen will open on my device and I can watch as the AI search takes place for an appropriate practice and then continue watching as the practice website is accessed, then the online booking system, followed by the availability of appointments.

Operator will come back to me once it has reached the point at which personal details are required to confirm a booking.

All I need to do is then take command of the keyboard to enter my own information and confirm the appointment.

So far, I've used Operator to identify a restaurant table in a town I'm visiting, as well as to find me the best and most economical long-haul business-class flight to get to an overseas conference.

Each time, the research is done, the appropriate service provider is identified, and the online booking system is 80% completed before I have to participate.

It's not an unreasonable assumption that once a device is given secure access to our personal details it can just go ahead, confirm and pay for the dental appointment, the restaurant table or the flight.

## LIFE CHANGING

Now think about that in the context of every purchasing decision we make.

A glimpse of what the future might hold – a dedicated personal digital concierge that can do our consumer research and buying for us, as well as being the world's fastest encyclopaedia of all knowledge.

Ive and Altman have an existing track record in changing our lives.

I suspect that all I can see of this right now is the tip of the iceberg, but there is a high degree of confidence that the first iteration of their device will be available for public use next year.

That it is going to have us all rethinking our marketing strategies, to ensure that the new personal digital concierge can find us – and our patient experience systems so that it can speak to us.





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# Harley Private Dental

How **Ehsan Naghieh** and **Abdul Matin Azizi**'s shared vision shaped a dental practice that places complete patient wellness at the forefront of its care

---

**O**ur journey began when we met at university. Abdul and I wanted to create a dental practice that reimagined the in-clinic experience and encompassed a more comprehensive approach to patient health.

We felt dentistry could and should be more holistic – a bridge to whole-body wellness. If this was the future, we wanted to be ahead of the curve.

With a master's in pharmacy and a bachelor of dental surgery, I've always viewed dentistry as a significant part of healthcare. Over years of postgraduate training, I've honed my skills and broadened my knowledge to help me craft tailored solutions for every patient.

Abdul brings a complementary expertise to our partnership with a bachelor's in biomedical sciences and a bachelor of dental surgery from Plymouth University.

Since qualifying, we have both embraced a lifelong learning approach to our dentistry. This and our shared holistic philosophy formed the foundations of Harley Private Dental.

## A PIVOTAL MOMENT

We didn't want any limitations placed upon us in our bid to create a more personalised experience. This had

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not been feasible where we were practising – and certainly not within the constraints of the NHS system. So, the transition from associates to practice owners was driven by all of the above and a shared disillusionment during the pandemic when we both felt somewhat undervalued. For us, COVID-19 proved a pivotal moment.

Choosing Sheffield city centre as our location was based on a lot of research and planning, including polling people in the community.

We considered other cities but ultimately identified Sheffield as an underserved market for premium dental services. Many patients were travelling to Manchester, Leeds or even Leicester for treatments, and we saw an opportunity to bring a high-end clinic to a relatively affluent area.

Sheffield's demographics aligned perfectly with our vision, offering a blend of affluence and accessibility that matched our target market.

A central location also provided a personal practical advantage, as it is midway between where we both live.

## TAKING SHAPE

Building our dream was a huge undertaking that required a lot of our time and effort. The practice is in a traditional Victorian building that had





# HARLEY PRIVATE DENTAL

## *The ethos*

Harley Private Dental redefines dental care, blending dental treatments with wellness therapies. Rooted in a shared vision of holistic, patient-centred care, the clinic goes beyond conventional approaches by prioritising overall health and embracing a whole-body philosophy. This innovative perspective, shaped by the team's academic and professional expertise, ensures every treatment is precise, personalised and cutting-edge. The calming and luxurious environment has been thoughtfully designed to create a sense of comfort for every patient, reflecting its dedication to delivering an exceptional experience. More than just a dental clinic, Harley Private Dental offers transformative care that enhances oral health and promotes overall wellbeing – all within an elegant space.



## HOW I DID IT



previously housed various offices, including a medical negligence solicitors and property developers. Interestingly, it was the property developer who recommended Kelham Concept to us. The team specialises in building consultancy and project management, and immediately understood our vision, knew what was required and helped us craft a design that met our expectations. We worked closely with its director, Joe Elwood, who proved invaluable.

We wanted to strip back to expose the building's original interior period features, and the process wasn't without its challenges.

Structurally adapting it to create a modern dental practice presented significant obstacles, and the building's load-bearing capabilities and internal layouts required careful consideration. Joe's team had to determine the strength of the floors and increase circulation space to accommodate the heavy dental equipment, so floor-strengthening work was essential.

Compliance added another layer of complexity. Ensuring patient accessibility also meant rethinking the layout.





While Kelham Concept efficiently managed these logistical details, Abdul and I concentrated on the project's progress. We were on-site daily, and the team's regular updates proved invaluable, allowing us to maintain a proactive stance and them to fix any issues straight away.

We were involved in every detail – from the mood boards and colour palettes to selecting materials and furniture. It took six or seven iterations to finally achieve our vision – a space that feels premium but not clinical.

### **WARMTH AND SOPHISTICATION**

The designer we initially worked with grew up in Dubai and London, and this

## **LOOKING BACK, LAUNCHING JUST AS WE WERE EMERGING FROM THE CHALLENGES OF COVID-19 WAS A BOLD MOVE**

international perspective shaped the luxurious aesthetic we were looking for.

From the bronzed metal mesh partition in the waiting area and the neutral tones throughout to the

bespoke sofas, light wood effect herringbone flooring and long marble-effect wall panels, everything was carefully chosen to create an environment of warmth and sophistication.

Brushed gold signage and subtle lighting enhance the ambience, while the scent of Arabian oud provides a calming sensory experience and leaves a lasting impression. Despite a few hurdles, the results have been worth every challenge.

I must credit Joe and his team for their outstanding project management. From start to finish, they ensured every target was met, every decision was cost-effective and every detail was executed to the highest standard.

For anyone considering opening a squat practice, I'd recommend finding a project manager before you do anything else. Having that point of contact was crucial.

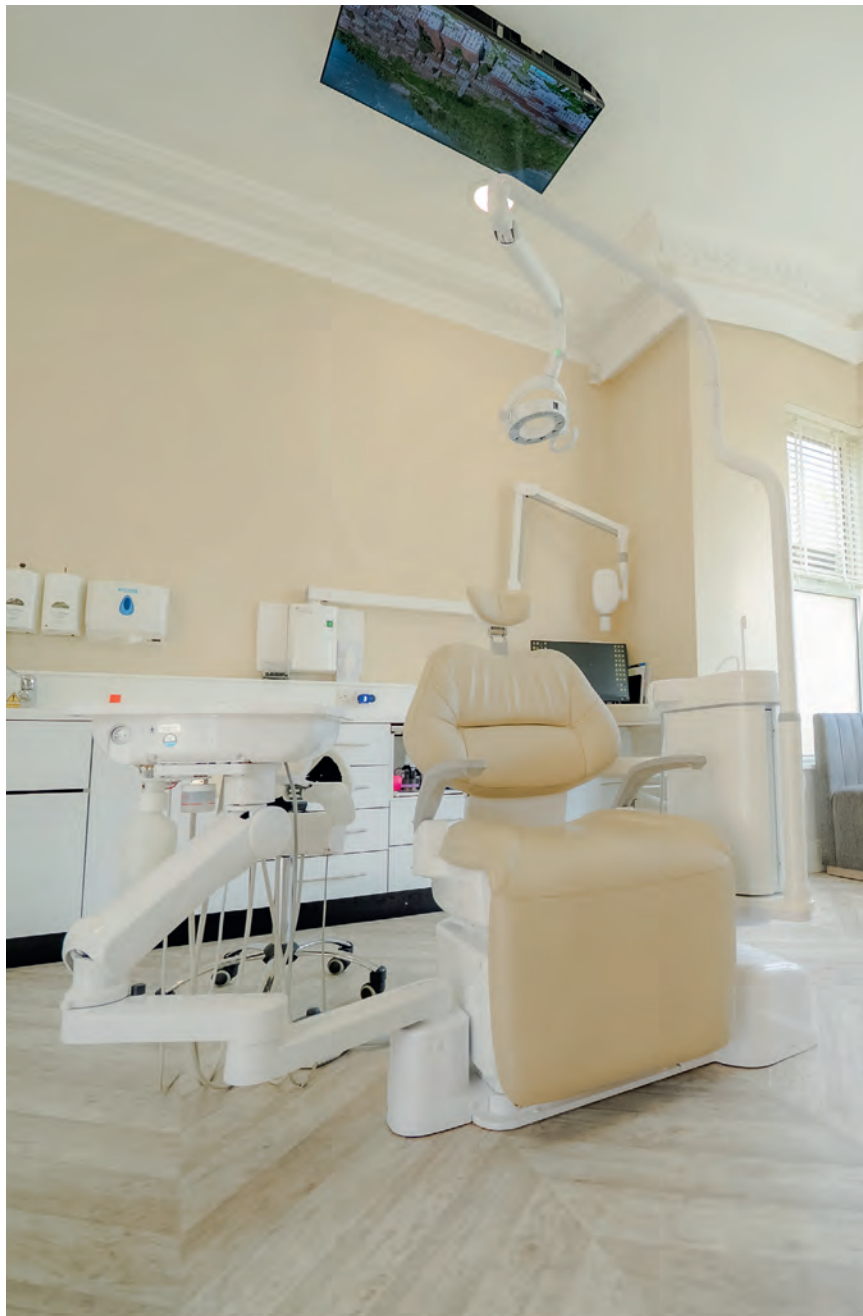
### **OPENING UP**

When we finally opened our doors in mid-2021 – on time and within budget – the result exceeded our expectations. Looking back, launching just as we were emerging from the challenges of COVID-19 was a bold move.

Abdul and I initially worked full-time in the practice, taking a financial hit to ensure we could meet patients' needs and build momentum. We provided out-of-hours services and addressed emergencies post-pandemic, which fast-tracked our growth and helped us establish a loyal patient base – people who appreciated that we were there for them when they most needed it.

From day one, we have placed quality and time at the centre of our business and have invested heavily in the latest dental technology to ensure it remains at the forefront of modern dentistry. Our clinic is fully equipped with advanced 3D scanning and 3D printing capabilities, allowing us to create restorations and models with incredible precision.

We utilise controlled scanners and microscopes, including those designed for endodontic procedures, and our implant system is fully digital. Every step has been taken to make the practice as technologically advanced as possible.



HOW I DID IT



Beyond the technology, we have built strong community connections. As of September, we have become Sheffield United's official dental partners, partnering with their first, second and third teams and academy. We also work with GBM Sports, a boxing promotion brand, to provide dental care for its athletes. Our reputation has extended far beyond our local area, too, with patients travelling from London, Scotland and other distant locations to receive treatment.

TEAM SPIRIT

Today, we have a dedicated team of 15 to 20 and continue to grow. Our vision is to evolve into a comprehensive wellness and health clinic, integrating general practice dentistry, medical care and overall wellness into our services.

Facial aesthetics has long been intertwined with dentistry because dentists are excellent injectors. However, longevity medicine is a relatively recent addition, and its potential

is only now being realised. By blending cosmetic and restorative dentistry with complementary medical therapies, we want to elevate the patient experience while helping them understand oral health's links with their overall wellness.

Dentistry has evolved significantly from its barbershop roots. We have just launched HPD Health and Wellbeing, which provides healthcare diagnostics, longevity medicine with a newly appointed private GP, holistic wellness consultations and other therapies that will help redefine the concept of the patient experience.

Who was involved?

**Builder**  
Kelham Concept

**Treatment centre**  
Belmont




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# Holistic approach

James Goolnik shares the journey that led him to opening Optimal Dental Health

**H**aving been a dentist for 33 years, I've seen lots of changes within the industry. My first practice was in the City, where I soon gained an insight into the type of dentistry that both worked best for me and was most effective for my patients.

It's an honour that several of my patients have stayed with me for many years, and I've witnessed how diet and lifestyle changes can influence oral health over time. This has led to an appreciation of which factors can really make a difference, not only to oral hygiene, but to overall wellbeing.

A key factor has been understanding what motivates individuals to make positive lifestyle changes – and paying regular visits to the dentist and hygienist definitely help motivate people to better look after their oral health.

## A POSITIVE PATIENT EXPERIENCE

From the early 2000s, I was at the forefront of making dental practices more relaxing and welcoming for patients. We were one of the first practices to move away from the more traditional colour schemes associated with dentistry (namely green and blue), adopting purple as



## Step inside...

**THE PRACTICE**  
Optimal Dental Health  
1 Melcombe Street  
London NW1 6AE

**TELEPHONE**  
020 3921 1000

**EMAIL**  
hello@optimaldental.co.uk

**WEBSITE**  
optimaldentalhealth.co.uk







our brand colour (we were the first clinic to order a purple dental chair from A-dec in the UK!)

For me, purple is vibrant, aspirational and joyful, and the colour immediately set our practice apart from the rest.

From the early days, we incorporated aromatherapy scents to help create a more relaxing atmosphere, and we also offered video glasses to patients so they could watch films during treatment (now all our surgeries have ceiling-mounted screens that stream Netflix or Youtube).

### NUTRITION AS A KEY ELEMENT

I recognised early on the importance of diet in improving both the oral health and general wellbeing of my patients, and my interest in nutrition quickly grew.

In 2020, I set out to help individuals reduce their sugar consumption by writing a cookbook *Kick Sugar: Reawaken Your Taste Buds and Boost Your Health*, in which I consulted chefs and nutritionists.

I'm currently midway through a diploma course with the Institute of Optimal Nutrition to further my understanding of functional nutrition and how dietary, nutraceutical and lifestyle changes can optimise patient health.

These personal interests all came together to form the concept of Optimal Dental Health, my new practice on Baker Street in London.

The clinic is first and foremost a dental practice, but we aim to go beyond our patients' oral health to improve their overall physical and mental wellbeing. This is achieved through a multidisciplinary approach – we have a psychotherapist to assist patients experiencing dental anxiety and/or general anxiety (and a beautifully calming therapy room); a nutritionist on hand to offer dietary advice, and a myofunctional therapist to help support better breathing, and sleeping in our patients. We also have a health coach who puts it all together and helps make the patients accountable.

We also work in conjunction with Radox Health to offer our patients screening services, referring them to their GP if any particular concerns are picked up. Eventually, we aim to have a phlebotomist on site to conduct health screening at the practice.

Our ethos is to always go above and beyond for our patients. When a new patient joins, we conduct a 15-point dental health assessment – this includes their medical history, general health, sleep habits and any additional supplements they may be taking, as well as their oral health, to form a complete picture of their wellbeing and personal health journey and make suggestions on how it might be improved.

### A NATURAL, PREVENTIVE APPROACH

In terms of treatment, our focus is very much on prevention combined with a reduction in the usage of chemicals. We're committed to using natural alternatives wherever possible but always ensure these are proven to be as effective as their chemical counterparts. For example, we don't use

fluoride – instead, our hygienists use products containing hydroxyapatite, which offers similar remineralising and decay-prevention benefits to fluoride, without the associated health concerns.

We also opt for flavour- and preservative-free products.

Thanks to our Clark Dental CBCT scanner, we're able to provide accurate 3D scans to help determine what treatment each patient requires on an individual basis and only perform procedures that are strictly necessary. We believe strongly in ethical and evidence-based methods.

### CREATING A NEW PRACTICE

Our holistic approach was also a key element in the design and build of our clinic. I appointed Apollo Interiors to carry out the clinic build, working alongside interior design company, Walker Malagoni.

I'd previously worked with Apollo Interiors so knew the build would be carried out to a high standard and by a fantastic team. I was especially pleased I had chosen the company when it came to the new building controls that had recently been introduced for high-rise buildings – ours was the first dental clinic to be created under the new regulations and the Apollo Interiors team was adept at finding solutions and approaching everything with a 'can-do' attitude.

In keeping with our eco-credentials, the reception area at Optimal Dental Health features a natural, decorative clay finish from Clayworks. We've worked hard to source eco-friendly furniture wherever possible and run the practice as sustainably as we can – for example, opting for sterilisable instruments rather than single-use disposables.

We are also a Terracycle recycling hub for oral hygiene products and welcome everybody – both patients and non – to dispose of their old toothbrushes and dental products in our bins for specialist recycling.

The practice design scheme features our trademark purple, as well as interesting artworks – including 3D art and one based on local Baker Street crime-fighting resident, Dangermouse!

Our patients are always amazed at how big the practice actually is.

On the ground floor, we have our reception area, a surgery designed for disabled access as well as disabled WC facilities. The majority of our treatment rooms are located at the basement level, which we have developed to be a bright and welcoming space, thanks to the plentiful natural light that comes from newly installed lightwells as well as expertly designed feature lighting.

### ACCESSIBLE AND EMPOWERING

I'm really excited about this next step in Optimal Dental Health's journey and where it will take us. We aim to educate and empower our patients to improve their lives and this is our key motivation behind the clinic.

We've tried to make holistic dentistry more accessible and we're looking forward to transforming the lives of a growing number of people. Watch this space!

# Get the look

From soft furnishings to bathroom fixtures, this month's *Private Dentistry* vision board shares a range of purple accents perfect for every practice interior



**1 Essex Lounge Chair**  
Sentta, £POA

**4 Amazonas Purple Marble Effect Semi Polished Porcelain Tile**  
Tile Mountain, £36.99

**2 Metal Round Wall Clock**  
Click Style, £145

**5 Pelt No. 254 - 2.5l**  
Farrow & Ball, £63

**3 Sophie Robinson Glass Vase**  
Dunelm, £16

**6 Art Deco Style Stained Glass Bookends**  
Violet Flame Glass Art, £95



7



8



9



10



11



12

**7 Purple Reign No.109 – 2.5l**  
Victory Colours, £44.95

**10 Jasmine Accent Chair**  
Peppermill Interiors, £150

**8 Harbour Concrete 400mm Wall Hung Cloakroom Basin – Periwinkle Purple**  
Drench, £199.99

**11 Sophie Robinson Wavy Metal Tray**  
Dunelm, £20

**9 Digital Lavender Kagera Bathroom Tap**  
Dowsing and Reynolds, £136.99

**12 Diamond Amethyst Sideboard**  
Boca Do Lobo, £POA



# Website masterclass

**David Nelkin** reveals how to build an award-winning dental website that drives practice growth and converts visitors into patients

**W**hat makes a truly exceptional dental website? Not just one that looks pretty, but also actively drives practice growth and converts visitors into patients.

Let's be honest, most dental websites are, well, a bit dull. They tend to look the same, say the same things and use stock photos – thus fail to generate meaningful results. But in today's competitive landscape, your website needs to be more than just an online brochure – it should be your hardest-working team member.

## A CHANGING ROLE

I recently wrote an article about the future of dental SEO, which discussed how the rise of zero-click searches means fewer people are visiting websites directly.

With 60% of searches now ending without a click, you might wonder if websites even matter anymore. They absolutely do, but their role has evolved.

Those who do visit are consuming more content before making decisions than ever before. Our data shows that prospects who convert

into actual patients typically engage with multiple pieces of content – your team stories, patient testimonials, treatment explanations – before making that first enquiry.

This creates both a challenge and an opportunity. Every dental practice can offer the same treatments, but no one can replicate your team's approach to patient care, your practice philosophy, or the experience you create.

The question is: does your website showcase what makes you different?

## A PATIENT-GENERATING MACHINE

Your website isn't just about attracting traffic – it's about converting the traffic you do get into actual patient enquiries.

Think of it this way: if your marketing efforts bring 100 visitors to your site but only two enquire, that's a 2% conversion rate. Double that to 4%, and you've doubled your new patient leads without spending an extra penny on marketing.

This is why conversion rate optimisation (CRO) has become so critical. Your website needs to work smarter, not harder, especially as search traffic becomes more challenging to capture.

## ESSENTIAL TIPS

Here are 12 actionable strategies to turn your website from a digital brochure into a patient-generating machine.

### 1 Focus on conversion rate optimisation, not just aesthetics

The most beautiful website in the world is worthless if it doesn't generate patient enquiries. Use analytics to track how visitors interact with your site, identify drop-off points, and continuously test improvements. Small tweaks like changing button colours, adjusting form lengths, or repositioning key information can dramatically increase conversion rates.

### 2 Make it easy to contact you

This sounds obvious, but don't bury your contact information or make booking an appointment needlessly complicated. Every page should have clear, prominent calls-to-action. Offer multiple contact options (phone, form, Whatsapp etc) and ensure none require more than a click or two to access.

### 3 Showcase real people, not stock images

Today's patients are increasingly savvy about authenticity. They can spot generic stock photos a mile away, and with the rise of AI-generated content, real human connection has become more valuable than ever.

Use high-quality photos of your actual team, practice and real patients (with permission). Video content is even more effective and will



**David Nelkin**

David is the founder and CEO of Xcelerator Dental, a specialist dental marketing agency that helps practices grow through digital marketing, website conversions and helping practices convert the leads they generate.

also help boost your SEO performance – short clips introducing your team or showing patient testimonials create an emotional connection that generic content simply can't match.

## **4 Write conversational, bite-sized content**

Few will read long blocks of text about dental implants. Break content into short, scannable sections with clear headings. Write as if you're talking directly to a nervous patient sitting in front of you. Make sure your copy is conversational – this will give you the best chances of boosting your SEO performance for your dental practice, and appearing in the AI overviews in the search engines.

Use bullet points, icons and visual elements to make information digestible. Remember, most visitors will only skim read your content, so make sure your key messages stand out.

## **5 Optimise for lightning-fast speed**

Site speed isn't just about user experience, it's a critical ranking factor and conversion driver. According to Google, 53% of mobile users abandon sites that take longer than three seconds to load. Every additional second of load time reduces conversions by 7%.

Compress images, minimise code, leverage browser caching and use a fast hosting provider. Tools like Google Pagespeed Insights can help identify specific improvements. Your website or marketing company should look after this for you.

## **6 Prioritise mobile experience**

More than 70% of dental website traffic now comes from mobile devices, yet many practices still design for desktop first. Your website must be fully responsive, with tap targets large enough for fingers, text that's readable without zooming, and forms that are easy to complete on small screens. Test your site on multiple devices – what looks perfect on your computer might be unusable on a patient's phone.

## **7 Organise information logically**

Little things make a big difference in user experience. For example, always arrange dropdown

menus in alphabetical order so patients can quickly find what they're looking for. Group related treatments together and create clear pathways for different patient needs (cosmetic, restorative, preventive etc).

Think about how real patients search for information, not how you categorise treatments internally. If you're not sure what's best, your marketing company should be able to analyse data to help with this, or run user studies with your patients to ensure you are optimising in a way that's best for them.

## **8 Highlight your unique value proposition**

Your website needs to clearly communicate what makes you different; it's not about the services you offer, but the fundamental reason why you offer them – your core purpose and belief in patient care – that will truly connect with people and earn their trust. Don't just say you're 'friendly and caring', show how you demonstrate these values through specific policies, patient stories, or community involvement.

## **9 Design for engagement**

Engagement metrics like time on site and bounce rate now directly impact your SEO performance. Create interactive elements, embedded videos and other features that encourage visitors to explore.

Each additional minute a visitor spends on your site increases the likelihood they'll convert – and signals to Google that your content is valuable.

## **10 Ensure compliance without compromising experience**

Your website must comply with GDC, CQC and GDPR regulations, but that doesn't mean it has to be boring or filled with legalese.

Work with a designer who understands how to integrate compliance elements seamlessly into your site's design. For example, we design cookie consent notices that match our clients' branding.

## **11 Create clear patient journeys**

Different visitors have different needs. A patient in pain needs an immediate appointment option.

Someone considering cosmetic treatment wants to see results, credentials and financing options. Design your site with clear pathways for each type of visitor.

Heat mapping tools can show you exactly how visitors navigate your site, allowing you to optimise the most common journeys for maximum conversion.

## **12 Partner with dental marketing specialists focused on ROI**

Work with a dental marketing company that understands both the aspects of dental marketing and the technical elements of website conversion.

General web designers might create beautiful sites, but they rarely understand the psychology of dental patients or the specific compliance requirements of the industry. Similarly, general marketing agencies might not appreciate the particular challenges of converting dental patients, who – for example – often have significant anxiety around treatment.

## **FOCUS ON RESULTS**

An award-winning website isn't just about sleek design or flashy features – it's about creating a digital experience that effectively converts visitors into patients.

In today's evolving search landscape, maximising the value of every visitor has never been more important.

Remember: your website should be a powerful growth engine for your practice, not just a digital brochure.

By implementing these principles, you'll not only create a site that looks impressive but one that also actively contributes to your practice's success – generating enquiries, reducing administrative workload and delivering exceptional return on investment.

And, if you're wondering whether these principles really work – they helped us win every major website award in the dental industry last year. But more importantly, they've helped our clients achieve remarkable practice growth, even in the most competitive markets.

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*To find out more and to book a free website audit with Xcelerator Dental, visit [xceleratordental.com](https://xceleratordental.com).*



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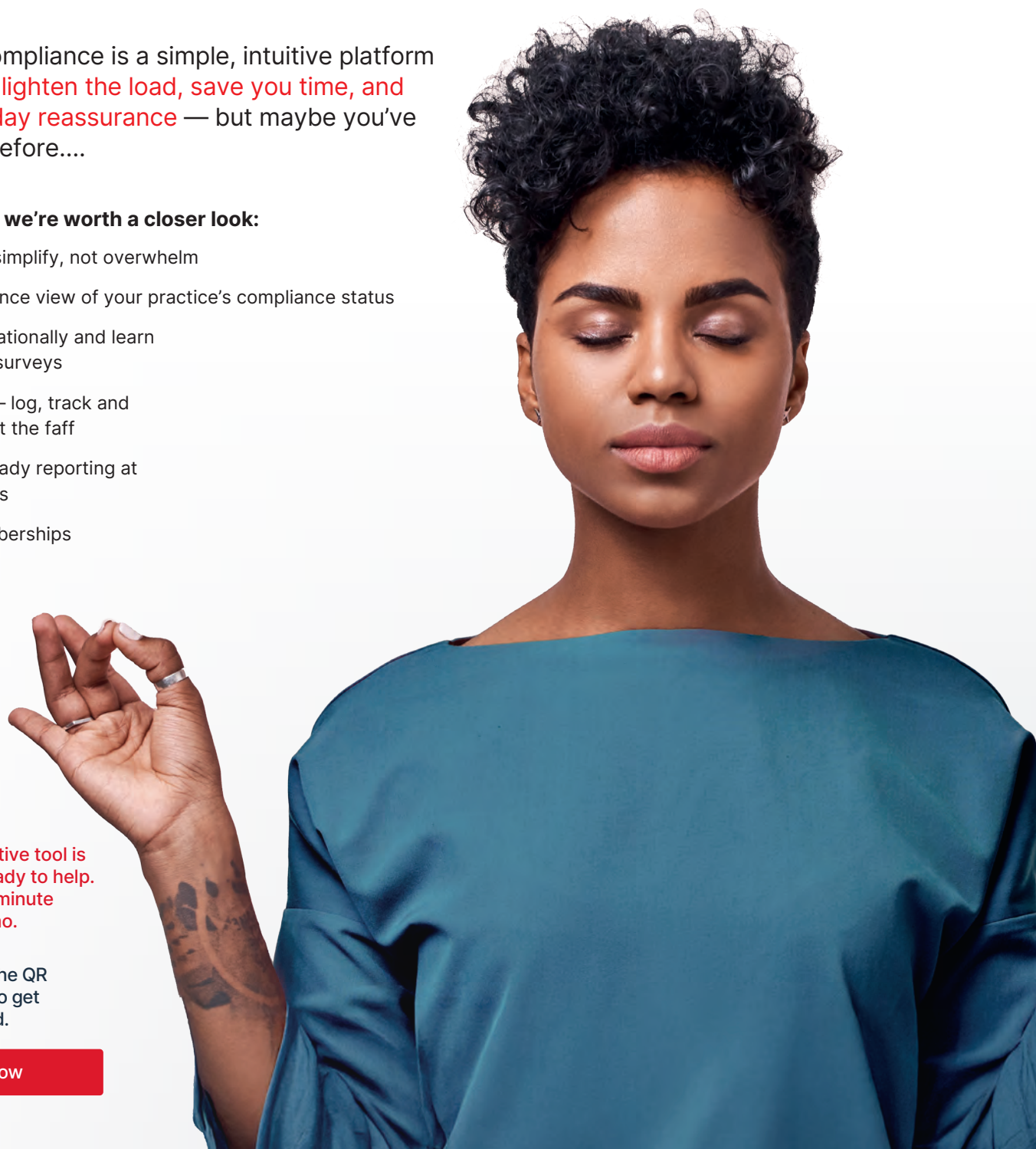
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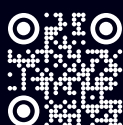
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# Setting up a holistic practice

James Goolnik shares his journey to setting up a holistic dental practice

**M**y journey into holistic dentistry started not in the surgery, but as a frustrated father. As a parent of three, I couldn't ignore the flood of sugary 'rewards' my children were receiving at school. It felt completely at odds with everything I believed about health.

Then I read a paper by Bartolotto (2015) that changed my thinking. It explored how sugar alters our taste buds and condition us to crave more. I realised this wasn't just about teeth it was about long-term health and addiction. In 2020, it spurred me to write a cookbook called *Kick Sugar*, aimed at helping families reduce sugar intake without sacrificing flavour or taste. The project sparked a deeper exploration into the relationship between diet, oral health and systemic disease.

I came across the work of Canadian dentist Weston A Price, whose book *Nutrition and Physical Degeneration* deeply influenced my thinking.

His research into traditional diets and their impact on facial structure, dental health and chronic disease provided a historical foundation for the modern link between nutrition and oral wellbeing. I was surprised to discover how few dental practices integrated this perspective. That is when I decided it was time to create one.

## HEALING SUPPORT

While there is currently no qualification in 'holistic dentistry', terms like biological,

functional and holistic all share a similar principle: support the body's natural ability to heal. To me, it means removing toxins, reducing inflammation and making space for the body to return to balance. I realised that dental treatment, if not approached thoughtfully, can contribute to systemic issues. For example, extractions or orthodontics might unintentionally narrow the airway, contributing to sleep apnoea.

To me, holistic dentistry means looking at whether the mouth could be the root cause of a patient's symptoms, and delivering minimally invasive treatment when the body is ready to receive it. Working with alternative healthcare providers can help achieve this.

I became an accredited member of the International Academy of Oral Medicine and Toxicology (IAOMT) and received SMART certification. This is where I saw the alternate view on fluoride and how, with a balanced diet, it is not needed in preventive care.

I travelled to America to study the healing power of ozone therapy and enrolled on Dr Dominik Nischwitz's course on biological dentistry. Learning about myofunctional therapy with Myobrace taught me how to screen for airway disease. Now I'm studying for a diploma in functional nutrition with the Institute for Optimum Nutrition, twinned with the University of Portsmouth.

## A NATURAL APPROACH

When I set up Optimal Dental Health, I carefully selected materials and products that were effective but also biocompatible, preservative-free, colourant-free, and as natural as possible. Our eco-conscious oral hygiene products aren't just sustainable, they actually work. Because being

'green' means nothing if your toothbrush disintegrates after two weeks.

## A SEISMIC SHIFT

Having qualified more than 30 years ago, I've witnessed a seismic shift in our understanding of oral-systemic links. We now know that periodontal disease is not just about the gums. It's intricately tied to systemic diseases like diabetes (Preshaw, 2012), cardiovascular disease (Paizan and Vilela-Martin, 2014), and cognitive decline (Beydoun et al, 2020). Our focus is preventive, early interceptive and food-focused care.

I see my role as actively listening to my patients and identifying potential antecedents, triggers and mediators, so I can develop a personalised care plan for my team to support their overall health and wellbeing. We have a health coach who works with patients to create long-lasting behavioural change. We collaborate with physicians to track blood markers like HbA1c, vitamin D, and omega 3:6 ratio before performing surgical procedures. These help us optimise healing and reduce complications. Ideally, patients work with our in-house nutritionist for two weeks prior to and four weeks after implant surgery, to ensure their body is in a low-inflammatory state and give the best chance of success.

I believe the future of dentistry is collaborative. It is about listening to patients, co-education rather than instructing, and giving them real choices.

Holistic care is not a trend, it is a necessary shift. By viewing the mouth as a gateway to the body, we offer care that heals, not just fixes.



**James Goolnik**

BDS MSc  
James is an IAOMT-accredited dentist with a master's in conservative dentistry. He founded Optimal Dental Health in London, is chairman of the judging panel of the Private Dentistry Awards and is author of *Brush* and *Kick Sugar*.

For the references for this article, email [siobhan.hiscott@fmc.co.uk](mailto:siobhan.hiscott@fmc.co.uk).

# Approaching orthodontics holistically

**Biju Krishnan** explores the key aspects of a more integrative approach to orthodontic care in children

Orthodontics has traditionally focused on straightening teeth and correcting bites. However, a growing movement advocates for a more comprehensive, integrative approach that looks beyond dental alignment to address underlying functional issues affecting growth, health and wellbeing. This is the philosophy of holistic orthodontics.

In children, especially, the early years present a valuable window of opportunity. Interventions that guide proper craniofacial development, optimise airway function and support healthy oral habits can have profound long-term benefits.

## WHY SHOULD WE APPROACH ORTHODONTICS HOLISTICALLY?

If we take a whole-body approach, orthodontics should not be defined by a single appliance or technique. Rather, it represents a philosophy of care that considers the interconnectedness of teeth, jaws, airway, posture, breathing and overall health. The primary goal is not just cosmetic tooth alignment but to restore and support normal function.

This approach recognises that dental crowding and malocclusion are often symptoms of underlying functional imbalances, such as poor tongue posture, mouth breathing or disrupted craniofacial growth. Addressing these root causes – particularly in a child's

formative years – can lead to more stable and healthier outcomes.

## CHAOS, DYSFUNCTION AND SYSTEMIC IMBALANCE

In biological systems, 'chaos' refers to unpredictable changes arising from disruptions in normal function. In the context of craniofacial growth, factors such as mouth breathing, low tongue posture, and poor muscle tone introduce chaotic elements that can divert the natural growth trajectory.

This often manifests as:

- Crowded teeth
- Poor facial aesthetics
- Compromised airway development
- Sleep-disordered breathing
- Functional disorders like TMD.

Rather than viewing these issues in isolation, holistic therapies approach them as symptoms of a broader systemic imbalance, aiming to restore normal function and balance.

## AIRWAY DEVELOPMENT AND NASAL BREATHING

One of the most significant shifts in holistic orthodontics is the focus on airway development and nasal breathing.

Proper breathing through the nose is fundamental for healthy facial growth and overall systemic health.

Airway matters for the following reasons:

- Facial growth: chronic mouth breathing alters tongue posture, leading to a high, narrow palate, retruded jaws, and long-face growth patterns
- Functional impact: a compromised airway can affect sleep, cognition,

behaviour and general health

- Malocclusion link: restricted nasal airways contribute to dysfunctional oral postures, which may exacerbate dental crowding and bite problems
- Sleep-disordered breathing (SDB): conditions like snoring, upper airway resistance syndrome (UARS), and paediatric obstructive sleep apnoea (OSA) can often stem from underdeveloped jaws and narrow airways.

Breathing through our noses allows us to:

- Filter, warm and humidify inhaled air
- Stimulate nitric oxide production, enhancing oxygen uptake
- Encourage correct tongue posture on the palate
- Correct tongue posture supports proper arch development and facial balance.

A holistic approach to orthodontics places strong emphasis on identifying and correcting mouth breathing early, often collaborating with ENT specialists, myofunctional therapists and other allied health professionals.



**Biju Krishnan**

BDS FICD FCGDent  
Biju is a dentist with a special interest in orthodontics and cosmetic dentistry. He is the developer of Cfast, author, lecturer and a clinical director at FMC. He is also a co-founder of the Society for Dentofacial Growth and Function.



## TONGUE POSTURE AND FUNCTION: THE ARCHITECT OF THE FACE

It is the functions of the face that form the face. Genetics gives us the basic blueprint but function ultimately defines the results.

As such, the tongue plays a pivotal role in shaping the maxilla and influencing overall facial development.

The ideal tongue posture:

- Rests gently against the roof of the mouth
- Maintains lip seal and supports proper nasal breathing
- Provides a natural 'expansive' force to develop a broad, U-shaped dental arch.

Consequences of dysfunctional tongue posture include:

- Narrow, high-vaulted palate
- Dental crowding and malocclusion
- Reduced nasal airway space
- Functional issues with speech, swallowing, and chewing.

Myofunctional therapy is often prescribed to retrain tongue posture and function, restoring correct swallowing patterns and supporting nasal breathing.

## CRANIOFACIAL GROWTH

A child's face and jaws are not static structures; they are dynamic, responsive to functional stimuli. Proper nasal breathing, tongue posture and chewing function are essential for harmonious growth.

In a growing child, the face ideally develops forward and outward, allowing for proper jaw alignment, airway space and balanced facial proportions. Disruptions in growth patterns can lead to considerable adverse effects:

- Vertical growth tendencies with mouth breathing, leading to long-face syndrome and open bites
- Transverse deficiencies, resulting in narrow arches and crossbites
- Sagittal discrepancies, such as a retruded maxilla and/or mandible, affecting facial profile and airway dimensions.

A holistic approach to orthodontics aims to guide craniofacial growth through functional correction, minimising the need for extractions or surgical interventions later in life.

## AN INTEGRATED ORTHODONTIC APPROACH

Taking a more holistic view of orthodontic care in children typically involves a combination of the following interventions.

### 1 Functional orthopaedic appliances

Functional orthopaedic appliances play a central role in holistic orthodontic treatments by addressing the root causes of malocclusion – namely, underdeveloped jaws, poor oral posture and compromised airway space.

Unlike traditional braces, which primarily focus on aligning teeth, these appliances aim to guide jaw growth and correct functional imbalances during a child's crucial developmental years.

The primary goals of functional appliances in holistic orthodontics are to:

- Stimulate natural, forward and lateral jaw growth
- Correct dysfunctional habits such as mouth breathing, tongue thrusting, and poor lip seal
- Increase airway volume, supporting better nasal breathing and reducing the risk of sleep-disordered breathing
- Create a stable foundation for future dental alignment, reducing the need for extractions or invasive treatments later.

When used during the growth phase, functional appliances not only influence dental alignment but also have far-reaching benefits on facial aesthetics, airway health and overall craniofacial function.

### 2 Myofunctional therapy

Myofunctional therapy is a type of exercise-based treatment that focuses on improving the strength, coordination and proper function of the tongue, lips, cheeks and facial muscles.

It aims to correct habits like mouth breathing, tongue thrusting and incorrect swallowing patterns, which can affect jaw development, bite alignment, and even breathing.

### 3 Breathing re-education

A cornerstone of holistic orthodontic treatment is restoring nasal breathing as the child's default mode of respiration. Many children develop compensatory

mouth breathing due to factors like enlarged adenoids, allergies, chronic nasal congestion, or simply poor habit formation.

While it may seem innocuous, persistent mouth breathing has significant implications for craniofacial development, dental health and overall wellbeing.

### 4 Cranial osteopathy

Cranial osteopathy is a gentle, hands-on therapy that focuses on releasing tensions within the cranial bones, sutures and fascial system. While subtle in application, these techniques can have a significant impact on a child's craniofacial development and overall function.

During growth, any restrictions or asymmetries in the cranial structures – whether from birth trauma, posture or functional imbalances – can influence how the face and jaws develop.

Tightness or strain in these areas can impede optimal growth patterns, contributing to jaw asymmetry, bite issues, and even airway restriction.

Cranial osteopathy is often used in conjunction with functional orthodontic treatments, helping to create a more responsive and balanced environment for growth.

### 5 Lifestyle and habitual guidance

When adopting a more holistic orthodontic perspective, correcting malocclusion is not just about appliances and exercises – everyday habits and lifestyle factors also play a critical role in shaping a child's craniofacial development:

- Diet and chewing. Modern soft diets reduce the need for vigorous chewing, which weakens jaw muscles and limits natural growth stimulation
- Oral habits. Prolonged thumb-sucking, pacifier use, and mouth breathing can negatively impact jaw shape, dental alignment, and airway space
- Posture and environment. Poor posture can influence head and jaw position, further affecting facial growth.

By addressing these lifestyle factors, holistic orthodontics takes a preventive, whole-child approach, which can reduce the need for invasive treatments later on.





### **CONTROVERSIES AND THE LIMITATIONS OF CURRENT EVIDENCE**

While the functional principles underpinning a holistic orthodontic approach are compelling, it is essential to acknowledge that robust scientific evidence remains limited in some areas.

Many techniques – such as myofunctional therapy, functional appliances for airway development and cranial osteopathy – are supported by clinical experience, case studies and smaller trials, but lack the breadth of large-scale, long-term randomised controlled trials that traditional orthodontics demands for widespread acceptance.

Consequently, holistic orthodontics often finds itself at the centre of professional debate. Sceptics argue that certain claims overstep current evidence, while advocates highlight the gaps and limitations within conventional approaches that often ignore function and airway health altogether.

A balanced, evidence-informed perspective is essential.

Holistic orthodontics should not be viewed as an alternative to scientific rigor but as an evolving discipline that integrates clinical expertise with emerging research.

The field stands to benefit from further high-quality studies to validate protocols, refine treatment guidelines, and bridge the gap between traditional and holistic models of care.

### **A COLLABORATIVE APPROACH**

Recognising the need for an integrative platform, the Society for Dentofacial Growth and Function (SDGF) was established in 2024. The society brings together dentists, orthodontists, general medical practitioners, myofunctional therapists, osteopaths, ear, nose and throat surgeons, sleep specialists, breath workers, allergists, lactation specialists and other health professionals committed to advancing holistic, function-focused care.

The SDGF's mission is to increase paediatric health potential by promoting early screening and integrative treatment approaches in order to optimise children's structural and functional development. The aim is to fully develop the structure and function of children's airways, faces and jaws. This includes optimising the oral functions of chewing, swallowing, speech, breathing and sleep, while also developing the biomechanics of the whole body. By addressing these

critical areas, the objective is to optimise future health outcomes in the population at large.

The SDGF represents a unifying force in the drive towards more holistic, health-focused orthodontic care.

## **A HOLISTIC APPROACH TO ORTHODONTICS AIMS TO GUIDE CRANIOFACIAL GROWTH THROUGH FUNCTIONAL CORRECTION, MINIMISING THE NEED FOR EXTRACTIONS OR SURGICAL INTERVENTIONS LATER IN LIFE**

### **BREATHING NEW LIFE INTO ORTHODONTICS**

Holistic orthodontics represents a paradigm shift from reactive tooth straightening to proactive, health-centred care. By focusing on airway development, nasal breathing and functional harmony, clinicians can influence not only the aesthetics of a smile but also the overall health, sleep quality, and wellbeing of their young patients.

Through early intervention, interdisciplinary collaboration and a commitment to understanding the root causes of malocclusion, holistic

orthodontics offers a comprehensive approach that supports children in reaching their full growth potential.

Organisations like the Society for Dentofacial Growth and Function are at the forefront of this movement, working to ensure that form and function are prioritised in orthodontic care.

As scientific understanding grows, so too does the potential for holistic orthodontics to become a cornerstone of modern paediatric healthcare.

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*Find out more about the Society for Dentofacial Growth and Function by visiting [www.connectingheads.com](http://www.connectingheads.com).*

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# Bruxism

## and the airway

**Aoife Stack** explores the connection between bruxism and airway instability

**A**ccording to Lobbezoo and colleagues (2013a), bruxism is a repetitive jaw-muscle activity characterised by clenching or grinding

of the teeth and/or by bracing or thrusting of the mandible. Bruxism has two distinct circadian manifestations: it can occur during sleep (indicated as sleep bruxism) or during wakefulness (indicated as awake bruxism).

It has long been considered a parafunctional habit associated with stress or occlusal imbalances. However, emerging evidence increasingly implicates sleep-disordered breathing (SDB) and airway obstruction as major contributors – particularly in cases of sleep bruxism (Kostrzewa-Janicka et al, 2015).

This connection has profound implications for how we diagnose, treat and refer patients – not only in adults but also notably in paediatric populations, where early intervention can significantly alter craniofacial growth and long-term health outcomes.

Bruxism is broadly classified into two types:

1. Awake bruxism – often linked to stress, anxiety or concentration habits
2. Sleep bruxism – occurs during sleep and is considered a sleep-related movement disorder, often associated with micro-arousals and changes in autonomic nervous system activity.

While the aetiology of sleep bruxism is multifactorial, airway instability during sleep is now considered a key contributing factor, particularly in patients exhibiting signs of respiratory effort-related arousals (RERAs) or obstructive sleep apnoea (OSA).

### THE BRUXISM-AIRWAY LINK: WHAT THE EVIDENCE SHOWS

#### 1. Micro-arousals and protective mechanisms

Several polysomnographic studies have demonstrated that sleep bruxism episodes are often preceded by brief arousals related to increased respiratory effort (Lavigne et al, 2007). This includes RERAs – subtle, non-apnoeic breathing disturbances that cause arousals without full airway collapse.

In this scenario, bruxism may serve as a protective reflex to reopen the

## Detecting bruxism: what to look for

These key clinical signs, particularly when combined with reports of snoring, daytime fatigue, headaches, ADHD-like behaviour, or clenching upon waking, should prompt further investigation into airway health:

- Tooth wear – flat occlusal surfaces, chipping, or enamel cracks
- Masseter hypertrophy
- Scalloped tongue or tongue indentations
- Cheek ridging
- Tori or exostoses – often linked to chronic oral parafunction
- TMJ symptoms or muscle tenderness
- High Mallampati scores
- Narrow arches.

airway by activating upper airway dilator muscles and repositioning the mandible forward, thereby improving airflow (Kato et al, 2003).



**Dr Aoife Stack**

BDS (hons) PGCert (ortho) PGDip (prim dental care) PGDip (ortho)  
Aoife is a myofunctional therapist and general dentist at Optimal Dental Health with an interest in orthodontics and dental sleep medicine.

## 2. RERAs: the missing link in 'normal' sleep studies

Many patients with classic OSA symptoms (eg, snoring, fatigue, behavioural issues) have normal apnoea-hypopnoea index (AHI) scores.

In these cases, RERAs may be present and significant. This is sometimes referred to as upper airway resistance syndrome (UARS) – a condition where bruxism may be one of the only physiological signs of disturbed sleep (Guilleminault et al, 2001).

Unfortunately, RERAs are frequently missed without full polysomnographic analysis that includes oesophageal pressure monitoring or other airflow resistance assessments. Working with a skilled sleep medicine team will help the dentist to diagnose this condition.

### BRUXISM IN CHILDREN

Paediatric bruxism is common and often dismissed as a phase, but research increasingly ties it to nasal obstruction, enlarged tonsils/adenoids and mouth breathing – all classic signs of airway dysfunction.

Key studies have shown:

- Children with mouth breathing and tonsillar hypertrophy have a significantly higher prevalence of sleep bruxism (Serra-Negra et al, 2012)
- Snoring and sleep-disordered breathing are strong predictors of night-time grinding in children (Lobbezoo et al, 2013b)
- Bruxism in children may precede or coexist with behavioural issues, poor sleep quality and neurocognitive delays, likely due to fragmented sleep from undiagnosed RERAs or UARS. Sleep-disordered breathing was associated with 40% and 60% more behavioural difficulties at four and seven years, respectively (Bonuck et al, 2012). This supports a shift in thinking: bruxism in children is not benign, and should prompt airway screening.



### THE DENTIST'S ROLE IN AIRWAY SCREENING

Dentists are uniquely positioned to identify the interplay between bruxism and airway instability. Incorporating airway-focused assessments into routine dental visits – especially in paediatric and orthodontic evaluations – is becoming standard practice in progressive practices. In 2017, American clinical guidelines introduced this as a directive.

The following tools can help flag patients who may require referral for ENT evaluation, sleep study or myofunctional therapy:

- The Fairest 6 screening tool for paediatrics (Zaghi et al, 2020)
- The STOP-bang questionnaire for adults
- Observation of tongue posture, lip seal, tonsil size and breathing pattern.

### TREATMENT IMPLICATIONS

Historically, bruxism treatment focused on nightguards to protect the dentition. While these remain valuable, especially in managing symptoms and protecting teeth, they do not address underlying causes such as airway instability.

A more comprehensive approach may include:

- Airway management: referral for ENT, CPAP therapy (in diagnosed OSA), mandibular advancement devices or surgery for anatomical obstructions

- Myofunctional therapy: exercises to improve tongue posture and nasal breathing
- Orthodontics: especially in children – palatal expansion can significantly improve nasal airflow and reduce SDB symptoms
- Behavioural therapy or stress management in awake bruxism cases.

It is critical to match treatment to aetiology, not just symptoms.

### RETHINKING BRUXISM AS AN AIRWAY SYMPTOM

Bruxism, particularly during sleep, is more than a mechanical habit. In both children and adults, it may represent a neurophysiological response to airway compromise, such as those seen in RERAs and UARS.

Recognising this link changes how we approach diagnosis and treatment – encouraging a collaborative, airway-centred mindset in dentistry.

As the understanding of craniofacial and airway development continues to evolve, the dental profession must embrace its critical role in recognising early warning signs of sleep-disordered breathing.

By doing so, we not only preserve the dentition but also contribute to the patient's broader health and quality of life.

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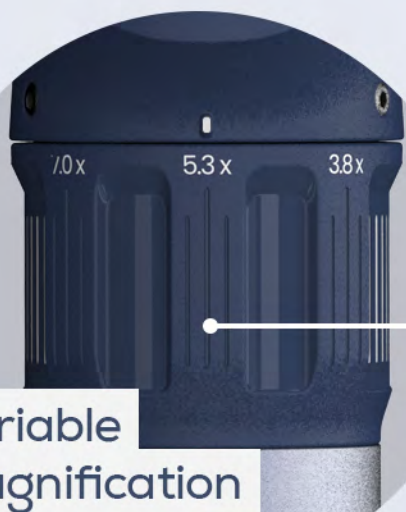
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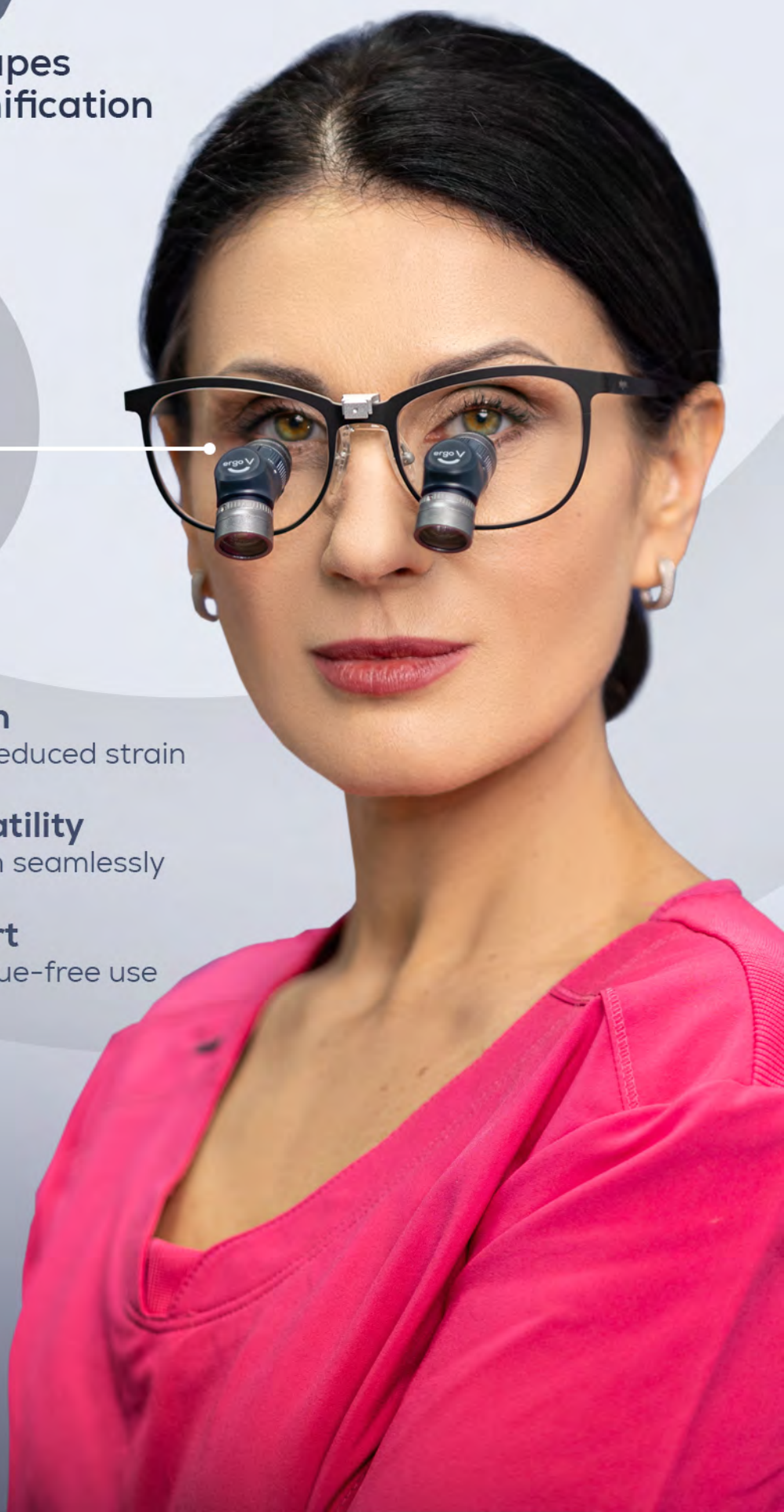
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# Understanding cranial osteopathy

**Chris Harris** explores the relevance of cranial osteopathy to dentistry

**I**s an understanding of cranial osteopathy relevant for dentistry? Yes, it is. In fact, I would argue that it is not only relevant but essential. The following is a condensed whistlestop tour of some important points. It will likely stimulate more questions than provide answers, but these questions will be welcome.

## CRANIAL OSTEOPATHY: A BRIEF EXPLANATION

The fontanelles in an infant skull close over as the bones grow together, the largest at the vertex at about 18 months. The skull then fuses into a solid one-piece structure: this is the understanding of most medics. The bones are initially separate at birth to allow a needed shape adaptation for a vaginal birth. This is not correct: they do not fully fuse. They approximate, interdigitate and form joints – joints designed for movement.

The anatomy of the sutures suggesting this was spotted by Dr Sutherland in 1899. He was student of the original osteopath Dr Still. Anyone with a little patience can feel the movement with their hands.

The movement is often described as fluid pump for the cerebrospinal fluid. With patients I talk about a slow-motion heartbeat of the nervous system: roughly eight cycles a minute. The whole body minutely changes shape, a bit like a big domed jellyfish as it moves along.

We call it flexion and extension.

Movement is roughly symmetrical along the midline: left and right do opposites. Flexion equals broader and shorter, extension equals narrower and longer. This includes the supposedly fused head, but actually goes throughout the body.

All 22 bones of the skull move and jostle and give a little to allow it. If the movement is disrupted by strains and compressions there will be a health consequence, sometimes a profound one.

It's a complicated system, and probably the most complicated aspect of it all is the face. There is a series of well-designed anatomical shock absorbers that allow the strong forces of mastication to happen without disruption elsewhere. These are the vomer, the zygoma and, my personal favourite, the palatines. These provide an essential bit of slip and slide between the maxillae and the sphenoid.

These areas are frequently affected by dental work, particularly by dental orthopaedics and orthodontics – even if performed by good hearted, well trained and highly skilled practitioners. If there is not an understanding the structures affected, then there can be real-world consequences.

## THE WORK OF A CRANIAL OSTEOPATH

Working in the cranial field is a wonderful and many tapestried thing. I have been doing it for 30 years and will continue as long as I'm able, irrespective of any possible lottery wins.

Using these techniques allows us to feel into a smorgasbord of strains, compensations, compressions and tissue quality changes that can occlude

healthy homeostasis. When you can feel them, you are more than halfway to helping facilitate a release. This frequently leads to a positive functional change. Otherwise intractable issues can become relatively straightforward to help.

There are many clinical examples I could give both from paediatric and adult patients – complex trauma, birth strains, recovery after surgery or childbirth, promoting and supporting correct dentofacial development and so on. This last being of most interest here, of course.

## BACK TO DENTISTRY, AND CONTROVERSY

This section will start as rather negative, please do persist as it will end positively!

A perennial grumble within cranial practitioners is relating to the after-effects of some common dental practices.

We often moan about the problems we associate with fixed braces, three to three retaining wires, reverse pull elastics and so on. We share our bemused horror regarding the extraction of beautiful healthy recently erupted premolars. Prematurely destined for the clinical waste bin, rather than 70 odd years of smiling and happily chewing tasty food.

The functional consequences of such practices are of such breadth and occasional severity that it's hard to know where to start. The further compression of already underdeveloped arches crowds airways, impairs nasal breathing, forces tongues into unnatural postures, and shifts postural balance by changing head and neck relationships. Mandibles are kept retruded and put pressure on the TMJs because they cannot fit far



**Chris Harris**

BA (hons) DO FSCCO  
Chris qualified from the European School of Osteopathy in 1994, and has focused on osteodontics since 2003. He has since trained in dento-orthopaedics with Skip Truitt and works closely with dentists and myofunctional therapists to support optimal craniofacial development, particularly in children.



enough forward within the narrowed maxillary arch.

It gets worse. Any cranial practitioner will describe system wide effects from the locking up of the zygomae, the vomer and the palatines. On palpation, it can feel like a spanner in the workings of a well-oiled machine. The whole wonderful fluctuation of fluid is disrupted. This can result in system wide issues. I have observed plenty where there was an occlusal dental connection. Confirmed to my satisfaction by osteopathic work in this area proving useful.

### THE CHALLENGES AND SOME POSITIVES

The situation today is that malocclusion and poorly developed dental arches are becoming more and more common. This process possibly started centuries ago, and there are a variety of possible reasons why this has happened – a softer diet requiring less masticatory effort, possibly changes in our nutrients affecting intrauterine development. We don't know exactly, but we have to do something about it. There is a need, and it is basic.

Human responsibility 101: do your best to support the subsequent generation's robust health. Also do your best to not mess it up.

There is a persistent misconception that facial growth is predominantly a given from genetic factors. In other words, our growth is largely predetermined. Environmental factors we have experienced during our lifetime are not significant. Therefore, that it is not possible to change the shape of bones without surgery.

Many people are told – as I was – that they have their 'mother's mouth and their father's teeth', hence, the need for extractions to 'make room'. To all the osteopaths I've ever spoken to, and almost all the dentists I now speak to, this is clearly nonsense. We are given a basic genetic blueprint. How it grows and shapes itself is then down to how are lives are lived from conception onwards.

Bones are in a constant state of change. Both internally and, within limits, in overall external shape. Osteoblasts lay down bone and osteoclasts take it away. This goes on until we die and leave just the calcium matrix behind.

The orientation of the trabeculae, the honeycomb within a bone, is precisely orientated to be as strong as possible and as light as possible for the job at hand. It changes throughout life in response to the uses we put our bodies to. Uses such as a hearty and healthy suckling at a breast, or taking up running. The former will stimulate facial growth, the latter will increase the sturdiness and knobblyness of the muscle attachment just below the kneecap. So why wouldn't it be possible to gently stimulate growth when needed? It is possible. In skilled hands and using exquisitely designed devices such as the ALF. I believe the results coming through anecdotally are irresponsible to deny. This goes further. Myofunctional

therapy normalises patterns of muscular activity, changing forces acting on bones, which then get to work reorganising trabecular patterns. This then changes morphology: overall shape. This is particularly useful if the muscular activity was abnormal before.

Development of multiple millimetres across the maxillary arch is common. This also happens with cranial osteopathic treatment. I find that poor development is associated with a rubbery, compressed tissue quality and I am frequently working to release this within maxillae.

There is growth afterwards as the bones remodel, and certainly ortho work takes place more smartly. At twice the speed with half the side effects is a rule of thumb me and dental colleagues I work with can agree on.

A favourite of mine is making space for undescended upper canines. Decompress the maxilla and correct the strains along the embryological seam between the pre- and post-maxilla (between the twos and threes) and there's often a nice dentally unexpected result.

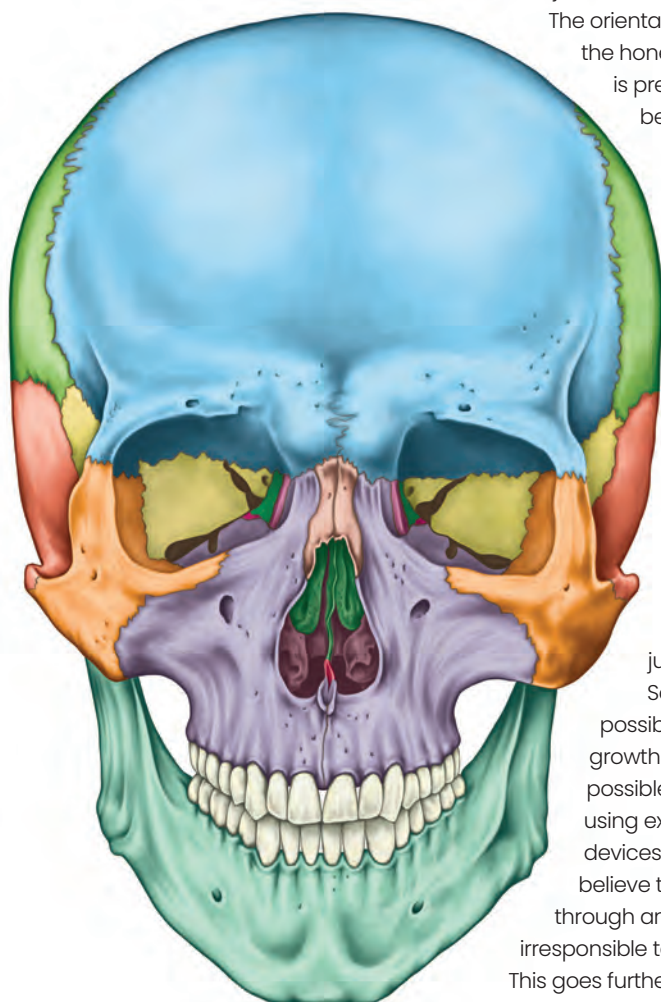
### THE BIGGEST POSITIVE

These dentofacial developmental problems are preventable. With the understandings developed across the disciplines, treatments can be effective in promoting lifelong health.

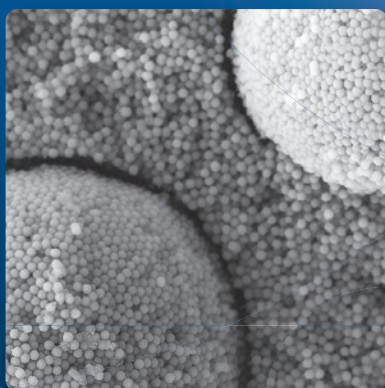
What is more, the work is fascinating, profoundly helpful to patients, and deeply satisfying all in equal measure. It is also common sense. More obviously so when a practitioner becomes familiar with what I have touched on here.

The Society for Dentofacial Growth and Function, a lively and rapidly growing organisation, is at the centre of this work. I have no doubt, not one scintilla, that this kind of integrative work is on the right side of history.

The examples of observed benefits and my osteopathic explanations are not based on rigorous double-blind trials, so cannot be considered as proved. However, they are based on many years of direct experience, both my own and that of many colleagues. I present them here to illustrate osteopathic thinking and to encourage dialogue. As a primary care practitioner, it is my responsibility to refer to other medical professionals when necessary. This I do regularly.






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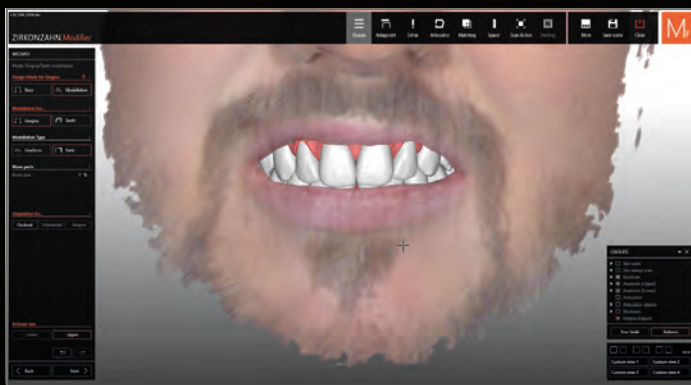


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# Tackling tongue ties

**Suraj Vatish** explains how early diagnosis and collaborative care of tongue ties can improve oral health and overall lifelong wellbeing

**I**n holistic health, the body is viewed as an interconnected system where a single issue can have widespread effects.

This is particularly evident in the mouth, especially concerning the tongue. Tongue ties, also known as ankyloglossia, might seem like a minor concern, but they can significantly impact breathing, sleep, posture, swallowing, and overall wellbeing.

## WHAT IS TONGUE TIE?

A tongue tie occurs when a band of tissue, the lingual frenulum, connecting the tongue to the floor of the mouth restricts tongue movement. While some tongue ties are easily noticeable, many are considered mild and often remain undiagnosed, especially if they don't interfere with infant feeding. However, even subtle restrictions can affect growth, development, and function over time.

From a holistic dental perspective, the tongue's role extends beyond speaking and eating; it's crucial for the structure and function of the entire face and airway.

A properly functioning tongue rests against the roof of the mouth, guiding the growth of the upper jaw and helping to maintain an open airway during sleep. When the tongue is tethered, it may rest low in the mouth

or fall back during sleep, potentially contributing to mouth breathing, snoring, and even sleep apnoea in some cases.

Restricted tongue mobility can also hinder its natural cleaning action after eating, potentially increasing the risk of dental decay and gum disease.

Mouth breathing, in turn, has been linked to a variety of issues, including dry mouth, an imbalanced oral microbiome, narrow dental arches, forward head posture, and even behavioural or concentration challenges in children.

Additionally, it results in approximately 20% less oxygen intake compared to nasal breathing, which can affect energy levels, cognitive function, and sleep quality.

## TREATING TONGUE TIE

A comprehensive evaluation for tongue tie should involve not only a physical examination but also a functional assessment. This includes examining how the tongue moves and how the individual breathes, sleeps, eats and speaks.

Treatment often involves a collaborative approach, including myofunctional therapy (exercises to strengthen oral muscles and retrain habits), bodywork (such as osteopathy), and a tongue tie release using tools like a CO<sub>2</sub> laser to minimise

trauma and support optimal healing.

The primary goal is not just to 'clip a tie' but to restore proper function, encourage nasal breathing, and support optimal growth and development. In infants, this could lead to improved breastfeeding, reduced reflux and better sleep. In older children and adults, it may result in better posture, clearer speech, deeper sleep, and a reduced need for extensive dental or orthodontic interventions.

**THE PRIMARY GOAL IS NOT JUST TO 'CLIP A TIE' BUT TO RESTORE PROPER FUNCTION, ENCOURAGE NASAL BREATHING, AND SUPPORT OPTIMAL GROWTH AND DEVELOPMENT**

## A HOLISTIC APPROACH

Tongue ties serve as a reminder that the mouth is an integral part of the entire body. As awareness increases, more families are seeking dental professionals who adopt a holistic, airway-focused approach.

Early diagnosis and collaborative care can make a significant and lasting difference, not only in oral health but in overall lifelong wellness.



**Dr Suraj Vatish**

Suraj is a tongue tie expert and a dentist with an interest in implant dentistry, oral surgery and periodontics.

# Seeing is believing

**Brooke Shipp** on using microscopy to visualise gum disease in real time

**A**s dental professionals, we often speak to patients about plaque, biofilm and periodontal disease, but how often do they really understand what that means? Despite our best efforts with diagrams, charts and models, many patients still struggle to grasp the invisible reality of gum disease. That's where high-magnification microscopy has revolutionised my clinical practice.

## MAKING THE INVISIBLE VISIBLE

Recently, I integrated a microscope into my periodontal assessment workflow. This tool allows me to collect a plaque sample from the tooth surface and display a live image of the bacteria directly onto a screen for the patient to view. This real-time visualisation immediately shifts the dynamic of the consultation. The patient is no longer hearing abstract explanations they're witnessing the pathogens moving on screen, in their own mouth.

One patient, in particular, had been struggling with bleeding gums and chronic halitosis, yet was inconsistent with home care and unsure why treatment was necessary. Once I placed their plaque sample under the microscope and projected the live video, their reaction was immediate: shock, curiosity, and finally, motivation.

I used the opportunity to explain how the gram-negative anaerobic bacteria I observed are linked to periodontal destruction, inflammation, and tissue breakdown. This visual connection between what they saw and what they felt made the disease real and urgent to them.

## CLINICAL IMPACT

From a clinical standpoint, using the microscope allows me to tailor treatment more effectively. I can identify the dominance of specific bacteria and better explain why periodontal therapy, improved home care, or changes in lifestyle are essential.

It also becomes a tool of accountability. During follow-ups, I can compare samples and visibly demonstrate bacterial load reduction – a compelling way to reinforce progress.

In a private setting, where patients are investing in their health and expect a premium service, providing advanced diagnostics like microscopy enhances perceived value. It elevates the hygiene appointment from routine to personalised, science-led care.

Moreover, it sets the stage for interdisciplinary collaboration, whether with periodontists or general practitioners, to create comprehensive treatment plans backed by microbial evidence.

## A POWERFUL TOOL

Using the microscope isn't just a diagnostic aid, it's a communication tool, a motivator, and an accountability partner. For many of my patients, it was the first time they truly saw their gum disease. And once they did, they took ownership of their health in a way I hadn't seen before.

Bringing bacteria to the screen brought compliance to the surface and that, to me, is one of the most powerful tools we can offer in preventive care.



**Brooke Shipp**

Brooke is a dental hygienist and therapist, qualifying from King's College London in 2013. She uses a phase contrast microscope to identify oral pathogens linked to periodontal and systemic disease, allowing for targeted and effective care. She works at Optimal Dental Health in London and is currently working toward her biological hygiene certification with the IAOMT.



# Pre-surgical nutritional support

**Zara Stella** explains how optimising nutrition ahead of dental surgery provides a functional approach to better healing

**D**ental surgery, whether implant placement, extractions or bone grafting, is a physical stressor that requires a sound immune system and tissue repair capacity. Yet, the nutritional status of patients is often overlooked in the lead-up to these procedures, despite growing evidence that even subclinical deficiencies can impair recovery, increase infection risk and delay wound healing.

In my experience, integrating targeted, pre-surgical nutritional support into patient care can enhance outcomes, not just for healing, but also for patient satisfaction, compliance, and long-term oral and general health.

Tissue repair, immune defence, collagen production and inflammation resolution all depend on micronutrient availability, glycaemic stability, and a resilient gut-immune axis. When nutritional reserves are low – especially protein, vitamin D, zinc, iron and vitamin C – even in seemingly healthy patients, the healing process is compromised.

Unfortunately, patients are rarely counselled on dietary preparation ahead of surgical procedures, but vitamin and mineral insufficiencies can be present, particularly in adults over the age of 40, vegetarians, teenagers, those with gut issues and people with metabolic conditions.

Supporting the body before surgery allows us to optimise the inflammatory response, reduce oxidative stress and improve tissue repair mechanisms.

## CORE GOALS

From a functional perspective, our focus is to:

- Reduce systemic inflammation
- Enhance immune resilience
- Stabilise blood sugar to reduce oxidative stress
- Support collagen synthesis and tissue regeneration



**Zara Stella**

Zara is a nutritional therapist, health coach and functional medicine practitioner at Optimal Dental Health in London.

- Correct subclinical nutrient deficiencies
- Promote gut health to minimise post-surgical digestive issues and support nutrient absorption.

Ideally two to three weeks before surgery, the patient's diet should be as anti-inflammatory and as hypoallergenic as possible. Ultra-processed foods and refined sugars should be avoided as they are low in nutrients, spike inflammation and impair immune response. Alcohol should also be avoided as it negatively impacts liver and immune function.

## HYDRATION

Adequate hydration is essential for overall health. It plays an important role in supporting the body's natural healing processes as well as reducing the risk of complications such as infections.

Dehydration may increase the inflammatory response post-surgery, exacerbating pain, swelling and healing time. Therefore, it's important to encourage patients to drink at least 1.5 to two litres of filtered water in the three to five days before the surgery.

Herbal teas, water infused with lemon/ginger/cucumber and broth provide excellent additions to plain water, but caffeinated drinks should be limited or, ideally, avoided.

## FINAL THOUGHTS

As we continue to move toward a more integrative model of dentistry, we can't ignore the foundational role of nutrition in oral tissue recovery, systemic inflammation and patient outcomes.

Encouraging even small dietary changes – such as increasing omega-3 fatty acids, vitamin C-rich foods or reducing sugar – can make a measurable difference.

Better still, working collaboratively with a trained nutritional therapist allows patients to feel supported, prepared and more in control of their surgical journey.

It's time we treated the mouth as part of the whole body, and started fuelling our patients for optimal recovery, from the inside out.





# Five nutrients to prioritise

## **Vitamin D: osseointegration and inflammation modulation**

Vitamin D receptors are present in every cell in the body, including oral tissues and immune cells. Deficiency is associated with implant failure, delayed healing and increased infection risk.

Encourage vitamin D rich foods like oily fish, egg yolks, liver, mushrooms as well as moderate sun exposure.

Testing vitamin D (25(OH)D) levels ideally four to six weeks before surgery is highly recommended so, if needed, supplementation can be tailored to the individual needs.

## **Vitamin C: collagen synthesis, antibacterial/antiviral action and immunity**

Essential for collagen synthesis, wound healing and reducing the risk for infection.

Encourage a diet rich in vitamin C foods like kiwi, red peppers, cruciferous vegetables, berries, parsley and citrus fruits.

Consider supplementation (1000mg/day) two weeks prior to surgery especially if dietary intake is low.

## **Protein: tissue repair and immune defence**

Amino acids are essential for immune cell function, detoxification and collagen repair. High protein intake improves surgical wound healing and reduces complication.

Emphasise protein rich foods like organic poultry and eggs, fish, tofu, legumes, quinoa and bone broth while aiming for 1g to 1.2g protein per kg of body weight (depending on age and inflammatory status).

## **Omega-3 fatty acids: anti-inflammatory action**

EPA and DHA help regulate the inflammatory cascade and may reduce postoperative pain and swelling.

Include at least three servings/week of omega-3 rich fish like wild salmon, sardines, mackerel. Plant-based sources of omega-3 include chia seeds, flaxseed, and walnuts.

Consider supplementing with a high-quality fish oil (1-2g daily).

## **Zinc: tissue repair and immunity**

Zinc is crucial for epithelial integrity, wound healing and immune defence.

Increase consumption of zinc rich foods like pumpkin seeds, beef, lentils, poultry, cashews and oysters.

Supplementation (15 to 30mg/day) can be considered for short-term use in those with poor dietary intake.





# Clinical hypnotherapy in dentistry

**Munir Ravalia** discusses clinical hypnotherapy – what it is, how it works and its practical applications in dental settings

**D**ental anxiety is a widespread issue, affecting a large percentage of any population, with approximately 12% experiencing extreme dental fear. These patients often avoid dental care until emergencies arise, leading to worse outcomes and more invasive treatments.

While sedation and behavioural strategies are commonly used, an increasing body of evidence supports clinical hypnotherapy as a safe, effective and underutilised tool in managing dental anxiety, pain perception and phobic behaviours.

This article aims to introduce dentists to clinical hypnotherapy – what it is, how it works, and its practical applications in dental settings.

## WHAT IS CLINICAL HYPNOTHERAPY?

Clinical hypnotherapy is the evidence-based application of hypnosis to treat medical or psychological conditions. Unlike stage hypnosis, clinical hypnotherapy involves guiding a patient into a focused, relaxed state (trance), during which they are more responsive to positive suggestions and therapeutic interventions. It is not mind control or unconsciousness – the

patient remains aware and in control throughout the session.

The British Psychological Society and the American Psychological Association recognise hypnosis as a valid clinical intervention, particularly for anxiety, pain and habit disorders.

## THE ROLE OF HYPNOTHERAPY IN MANAGING DENTAL ANXIETY AND PAIN

### 1. Anxiety reduction

Clinical hypnosis engages the parasympathetic nervous system, reducing heart rate, respiratory rate and muscle tension – classic signs of anxiety.

A patient guided through hypnotic relaxation can shift their focus away from feared stimuli (eg needles, drilling sounds) and instead visualise calming scenes or experiences.

### 2. Pain management

Hypnosis alters the perception of pain by modulating sensory input at the cortical level. Studies using functional magnetic resonance imaging (fMRI) have shown reduced activity in the anterior cingulate cortex and somatosensory cortex under hypnosis. This has been successfully applied to reduce reliance on local anaesthetic and, in some cases, eliminate the need for it entirely.

### 3. Control of gag reflex and bruxism

Hypnotherapy can help desensitise exaggerated gag reflexes through suggestion and imagery, and also address parafunctional habits like bruxism, often rooted in subconscious stress or anxiety.

## Clinical hypnotherapy: advantages

- Improved patient cooperation and rapport
- Reduced need for sedation and its associated risks
- Fewer cancellations and no-shows
- Enhanced reputation as a patient-centred practice
- Potential to treat previously unmanageable patients.

## HYPNOSIS IN DENTISTRY: SCIENTIFIC EVIDENCE

A 2019 systematic review in the *Journal of Dentistry* concluded that hypnosis significantly reduces dental anxiety and improves patient cooperation.

In a randomised controlled trial by Appukuttan and colleagues (2016), patients receiving hypnosis prior to extractions reported lower pain scores and reduced salivary cortisol levels.

Lang and colleagues (2000) demonstrated that hypnosis reduces the need for pharmacological sedation and shortens recovery time post-treatment.

## HYPNOSIS OFFERS A UNIQUE AND EMPOWERING ADDITION TO THE DENTAL TOOLBOX



**Munir Ravalia**

BDS MFDS Rcs Eng Cons Sed DChyp  
Munir is trust dentist and clinical lecturer in conscious sedation at the Royal London Hospital. He has acquired additional skills, including training in acupuncture for the head and neck region, a medical diploma in clinical hypnosis and postgraduate training in conscious sedation. Get in touch with Munir at [munir.ravalia@nhs.net](mailto:munir.ravalia@nhs.net).

## INDICATIONS FOR HYPNOTHERAPY IN DENTISTRY

Hypnotherapy is suitable for a range of dental issues, including:

- Moderate to severe dental anxiety or phobia
- Needle phobia or fear of injections
- Strong gag reflex
- Bruxism or clenching
- Painful conditions (eg TMD, atypical facial pain)
- Smoking cessation prior to oral surgery
- Preparation for extensive procedures without sedation
- Children or patients with special needs (with appropriate modifications).

## CONTRAINDICATIONS AND CAUTIONS

While hypnosis is generally safe, it is not suitable for all patients. Contraindications include:

- Severe psychiatric disorders (such as schizophrenia, dissociative disorders)
- Cognitive impairments that limit comprehension or focus
- Patients with unrealistic expectations or fears of 'mind control'.

Importantly, hypnotherapy should be conducted by a licensed clinician trained in both hypnosis and dental care. Informal or improperly applied techniques can worsen anxiety or damage trust.

## WHAT A HYPNOSIS SESSION LOOKS LIKE

In practice, a typical dental hypnotherapy session includes:

- Pre-talk – clarifying misconceptions and gaining consent
- Induction – guiding the patient into a relaxed trance using progressive muscle relaxation or focused breathing
- Deepening – using imagery (eg descending an escalator) to deepen the trance
- Suggestion phase – positive affirmations tailored to the procedure, for example: 'You feel calm and safe; your mouth feels numb and comfortable'
- Reorientation – gently bringing the patient out of trance, typically with counting or suggestion of alertness.

In-chair hypnosis sessions can last between five and 15 minutes, while more complex phobias may require separate appointments.

## CONCLUSION

Clinical hypnotherapy is not a mystical art – it is a legitimate, science-backed adjunct to modern dentistry. When performed by a trained practitioner, it can profoundly reduce patient anxiety, enhance pain control and improve treatment outcomes.

As dentistry continues to embrace holistic, patient-centred care, hypnosis offers a unique and empowering addition to the dental toolbox.

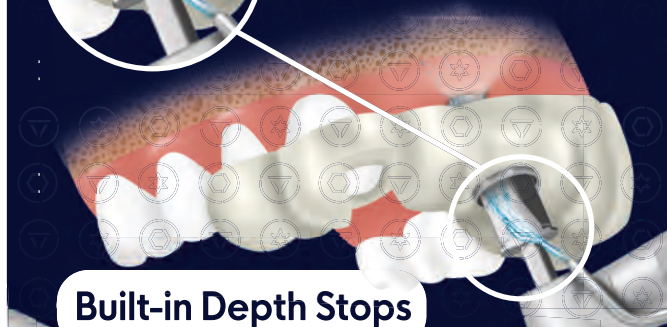
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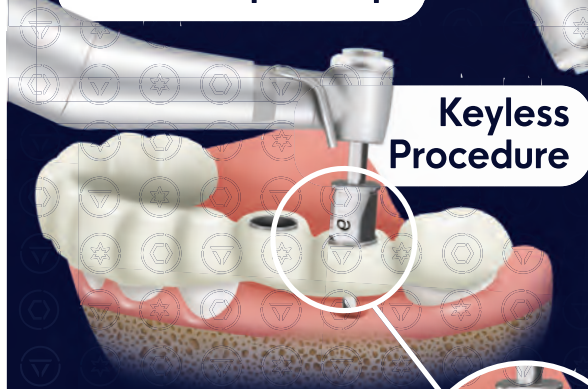
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# The advent of *diagnostic testing*

**Victoria Sampson** explores diagnostic testing and how it can improve the patient journey

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**F**or nearly a century, our medical colleagues have been using diagnostic testing – such as blood chemistry and bacteriology – to improve diagnostics and enhance the patient journey. In the early 1950s, scientists started to realise the need for evidence-based medicine. They found that although individuals are 99.1% identical, the remaining 0.9% of interindividual genetic variability is responsible for varying responses to treatments and medications.

With the completion of the human genome project in 2003, it catalysed the use in genetic information for tailored healthcare (National Institutes of Health, 2007).

In the last two decades, the shift has gone from evidence-based medicine to personalised medicine, whereby combining the human genome, environmental factors, disease assessments and medication, doctors can achieve a better therapeutic outcome (National Institutes of Health, 2007).

Fast-forward to the last decade, the shift has now gone from personalised medicine in the hands of clinicians to direct-to-consumer testing, thus allowing patients to feel empowered by their own health.

By the start of 2019, more than 26 million consumers had taken an at-home DNA ancestry test, with 10 new genetic tests entering the market every day (Regalado, 2019).

In 2022, Zion Market Research predicted that direct-to-consumer blood testing market will rise by 60% from 2021 to 2028, further illustrating the huge interest in this area.

The saliva sector of this market has been predicted to be the fastest growing sector of direct-to-consumer and chairside tests due to its ease.

## **EMPOWERMENT AND AUTONOMY**

The direct-to-consumer testing industry may be disruptive to the classic model of healthcare, but it also shows a huge change in the attitude patients have towards their health and healthcare.

It highlights that patients want to feel empowered, and they want to understand their health better. It illustrates that patients fear they may not be receiving the standard of care that they feel they deserve – or worry that they are unable to access the care that they need through their healthcare practitioners.

When utilised correctly, self-testing provides empowerment and autonomy. While there is clearly a huge interest in diagnostic testing both from clinicians and consumers, numerous concerns have been raised about the use of at-home medical tests due to their questionable validity, reliability and utility.

Due to the lack of regulatory red tape on many private direct-to-consumer tests, there is concern that many tests may not provide valuable

insights to patients or may over-promise and under-deliver.

Unfortunately, many tests are not often processed in a UKAS-accredited lab and often do not disclose their threshold values for how they diagnose a patient. This means that you could potentially do multiple tests from different companies and get different outcomes as there is no cross centre validity or internationally agreed on thresholds for certain biomarkers. Furthermore, patients may have difficulty understanding implications of results and how to act on them if they do not have a supervising clinician.

However, there could be a middle ground where patients still feel empowered and understand their health but under the care of their clinician.

## **EMBRACING TESTING**

More clinicians are now understanding that instead of rejecting this new trend in direct-to-consumer tests, they need to embrace it and understand it.

If clinicians can empower patients and help them understand their health better, patients may feel less inclined to buy their next Instagram targeted advert.

The idea of 'doctor knows best' needs to be changed to a 'patient-centred approach' – in which patients can understand their health and perhaps track it at home too. For example, the use of continuous blood glucose monitoring (CGM). While realistically a blood test with a doctor is enough to diagnose and manage blood sugar levels, more clinicians are



**Victoria Sampson**

Victoria is a dentist and researcher based in central London. She obtained her BDS from Barts and The London and is now known for her work in developing salivary diagnostics and microbiome testing. She is a scientific adviser, board member and clinical lead of multiple dental companies as well as a topical team member of the European Space Agency and NASA and Harvard. Victoria is also the co-founder of a multidisciplinary health centre in London as well as oral microbiome test, Oralis 1.



now providing CGM's to their patients to help them understand the impact food has on their blood glucose levels at home.

While the use of a CGM will not change the diagnosis or treatment plan offered to the patient, it educates them and therefore motivates them to control their blood glucose levels better (Lind et al, 2017).

In dentistry, the use of diagnostic testing and tracking is in its infancy. Understandably, there is apprehension surrounding the worth of these tests to patients if they are unable to change a patient's diagnosis or treatment plan. However, the worth of these types of tests is in their ability to empower patients and help them understand what common diseases – such as periodontal disease or decay – actually are, and how important at-home care and nutrition is.

Often, the language we use to explain dental terms is very different to the terms patients may understand. Many patients want to understand why they have gum disease, and once they understand that they are much more likely to be motivated to change it.

There has also been a lot of interest in the use of saliva tests to look at general diseases such as Alzheimer's, heart disease and hormone levels. Saliva testing has already been utilised by our medical colleagues, with easily available tests such as hormone tests and prostate cancer tests being available on the NHS.

### **THE PROMISE OF GREAT POTENTIAL**

Dentistry is always seen to follow the trends of medicine – be it through the use of artificial intelligence or diagnostic imaging, or diagnostic testing and looking beyond the teeth and gums at the microbiology and genetic composition of patients. There is no doubt that consumers are driving the demand in testing as they start questioning why they have diseases, what is their risk of diseases, and search for a more personalised approach for themselves.

While dentistry is not yet at a place where we can diagnose diseases such as periodontal disease or decay through direct-to-consumer tests, we can illustrate risk of disease and activity of disease effectively

through tests such as saliva tests, microbiology slides and even blood tests.

Although this may not change our treatment plans or diagnoses, it significantly improves our patients' journeys and helps them feel more empowered as we try to adopt a more patient-centred approach.

As the 20th European Workshop on Periodontology outlined, there is great potential in the use of salivary diagnostics, particularly by using artificial intelligence to look at a combination of factors such as microbiology, genetics, medical history and age to predict a patient's disease remotely.

With a rise in direct-to-consumer tests for dentistry, it's important that they are validated, reliable and useful, and private companies work in close proximity to academic institutions to ensure both dental professionals and patients benefit the most from the extremely promising world of diagnostic testing.

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*For the references for this article, email [siobhan.hiscott@fmc.co.uk](mailto:siobhan.hiscott@fmc.co.uk).*



# Myofunctional therapy

**Jennifer Nicoll** explores myofunctional therapy and how it can benefit patients

**T**here is growing awareness of the strong links between oral health and wider health and wellbeing. A symptom that originates from the mouth, jaws or tongue can have a larger impact on the entire body.

Myofunctional therapists, who are most often from a dental or speech and language background, are increasingly part of the interdisciplinary team of professionals treating patients, playing a pivotal role in addressing the root causes of functional issues.

## WHAT IS MYOFUNCTIONAL THERAPY?

Myofunctional therapy is a specialised physical therapy that retrains the muscles in the tongue, mouth, face and neck on how they need to work and behave. It does this through repeatable exercises to ultimately help improve how patients breathe, chew, swallow and sleep.

There are four key goals with myofunctional therapy:

- Nasal breathing at all times
- Tongue rests in the roof of the mouth
- Closed lip seal at rest
- A correct swallowing pattern.

Though actions such as chewing, breathing and swallowing seem relatively simple, when performed incorrectly they can have a cumulative effect and create longer term issues. For example, when swallowing – something we do 500 to 1,000 times every day – is not performed with the proper function it can often cause dental, cosmetic and digestive problems.



### Jennifer Nicoll

Jennifer is the owner of Myo & Me, a myofunctional therapy practice based at Optimal Dental Health in London. Jennifer has more than six years' experience as an orofacial myofunctional therapist, and more than 15 years' experience as a dental hygienist and therapist.



# Areas myofunctional therapy can help

If a patient presents with any of the following symptoms, an airway-savvy dentist, orthodontist or myofunctional therapist will be able to help:

- Mouth breathing
- Snoring/sleep apnoea
- Open mouth at rest
- Forward tongue thrust when swallowing
- Teeth grinding/clenching
- Misaligned or open bite
- Overcrowded teeth
- Tongue/lip tie impeding tongue movement.

Repatterning the muscle function and helping a patient relearn how to swallow correctly is a crucial part of myofunctional therapy.

## MAIN FOCUSES

One of the key goals of myofunctional therapy is achieving proper resting oral posture, where the tongue, teeth and lips are naturally positioned correctly. When this isn't happening, a patient may have visible signs such as an open mouth at rest, a dimpled or pebbled chin, or the tongue sitting on the floor of the mouth or protruding outwards.

Another primary focus of myofunctional therapy is to enact a shift from mouth to nasal breathing and realising many of the benefits this can bring. A chronic mouth breather typically presents with dry lips, dark circles under the eyes, bad breath and even some dental issues with overcrowded or misaligned teeth. Nasal breathing can significantly reduce the severity of these symptoms.

Transitioning to nasal breathing can also bring positive changes in the way patients eat – by focusing on keeping the lips together, chewing food becomes more efficient. This reduces the likelihood of swallowing air, lessening the potential for digestive problems.

## REACHING GENETIC POTENTIAL

It is a shared belief of those working with an interceptive or preventive approach that form follows function. This is not a new discovery – Wolff's Law (1892) is the idea that healthy bone will adapt and change to adapt to the stress that it is subjected to. For example, patients who exhibit a tongue thrust swallowing pattern can present an open bite, which will show intraorally (Fraser, 2006).

Similarly, a patient who presents with sleep disordered breathing symptoms, and is very often a habitual mouth breather with low tongue posture, is more likely to have a high and narrow palate (Huang and Guilleminault, 2013).

Myofunctional therapists often work alongside or closely with airway-savvy orthodontists. By collaborating in the development of treatment plan together, they can realise the best outcomes for improved craniofacial growth and occlusion in children, and in the effort to help prevent relapse in both children and adults (Saccomanno et al, 2012).

Orthodontists who are proactive, rather than reactive, in their treatment style are focusing on helping create more space for the emerging adult dentition, as well as the tongue, rather than the focus being on teeth straightening, which can include extraction of adult premolars.

## THE BREATH-SLEEP CONNECTION

One of the most important areas that myofunctional therapy can play a positive part in is sleep quality (Guimarães et al, 2009; Suzuki et al, 2021; Kayamori and Bianchini, 2017).

Those who mouth breathe extensively may have a more serious underlying issue, particularly when it comes to how they breathe during sleep. Sleep-disordered breathing can have a large impact on the quality of sleep, leaving patients feeling drowsy, unable to concentrate and with 'brain fog'. But it can also leave a patient at higher risk of developing other, more life-threatening conditions if untreated.

Through the continued emphasis on nasal breathing, and the wider muscular re-education and strengthening, myofunctional therapy plays a pivotal part in reducing the symptoms of sleep-disordered breathing (Camacho et al, 2015).

## SCREENING TOOLS AND IMPROVING OUTCOMES

Dental professionals are in the perfect position to be screening all patients for sleep disordered breathing symptoms as part of their regular examinations, as per the National Institute for Health and Care Excellence (2021).

Dr Zagh's screening tool for sleep disordered breathing – 'Fairest 6 + 4' – is a suggested tool for paediatric and adult patients (Oh et al, 2021) (visit [bit.ly/3ZUx29w](https://bit.ly/3ZUx29w) to download the tool).

The STOP-bang questionnaire for adults is another useful screening tool that is widely used.

Myofunctional therapy, with its focus on improving how we breathe and how our tongue is working, can often help to realise positive change in sleep quality, focus and concentration, posture, and, in the case of children, improved craniofacial growth.

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*Email [siobhan.hiscott@fmc.co.uk](mailto:siobhan.hiscott@fmc.co.uk) for the article references. For more about the British Society of Myofunctional Therapists, visit [bsmft.org.uk](https://bsmft.org.uk).*



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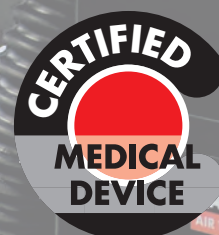
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# Homeopathy

## in general dentistry

Homeopathy, especially for acute conditions, is quick and easy to use within dentistry and can bring an increased sense of job satisfaction to the dentist and an improved sense of health and wellbeing to the patient, says **Samantha Jugdev**

**T**he Homeopathy Research Institute estimates that, in the UK, 32 million people use homeopathy and there is an increasing number of the population taking an interest in complementary healthcare as a whole. As healthcare professionals, we cannot ignore this number.

Often, these interventions are chosen to complement rather than instead of conventional treatments – and this is an opportunity for us to engage with our patients to support their health.

The criticism that homeopathy is often subjected to is that it is 'implausible'. One of the principles of homeopathy is that of dilution and succussion (the vigorous shaking during preparation).

In many preparations, the dilution is carried out beyond the probability of Avogadro's number and would suggest that there should be none of the original substance remaining in the solution. The science behind this is still in the process of being discovered but headway is being made.

Currently, the most promising theory to explain the action of homeopathy is based in physics and energy-based mechanisms rather than in chemistry.

This would suggest that the energy of the original substance is transferred to the homeopathic solution rather than it being present in material doses.

The next criticism, claiming that there is no evidence that homeopathy works, is incorrect.

As of the end of 2022, 271 randomised controlled trials of homeopathic treatment for a range of 144 medical conditions have been published in peer-reviewed journals.

Only 3% of these trials found that homeopathy is ineffective, compared to 43% proving effectiveness and 54% being inconclusive. These are comparable to the findings of research carried out for conventional medicine where 10% of studies show ineffectiveness, 45% show effectiveness and 45% are inconclusive, according to the Homeopathy Research Institute.

### WHAT IS HOMEOPATHY?

Homeopathy is a system of medicine that was originally developed, researched, taught and practised by Dr Hahnemann more than 200 years ago. It was founded and developed at a time when conventional professional medical interventions involved often poisonous substances and the practice of bleeding – a kill or cure approach.

Medicine has come on a long way since these times when the basic

understanding of human biology and physiology was still based on Galen's four humours:

1. Phlegm
2. Blood
3. Yellow bile
4. Black bile.

Homeopathy offers a system of medicine that is more in tune with the individual's experience of disease with medicines or remedies that stimulate the body's natural healing process to bring about homeostasis.

### Basic principles

Homeopathy continues to be used today and is still primarily based on Dr Hahnemann's original principles. It is the medical system of choice for many people all over the world due to its gentle mechanisms of action, lack of adverse effects and affordability.

The basic principles are:

- The Law of Similars where the symptoms brought about from taking a certain substance can be used to heal similar symptoms observed and experienced during illness or disease
- The Minimum Dose, which is when the substance is diluted enough times that the substance no longer has toxicity or brings on adverse effects.

Potentisation is the process of a series of dilutions and succussions to prepare and make the remedy.



**Dr Samantha Jugdev**

BSc (hons) BDS PGCE FFHom  
Samantha is a dentist at Thirty Three Dental where she uses homeopathy, hypnosis and acupuncture alongside dentistry.





### HOMEOPATHY IN DENTISTRY

So, how is this relevant to dental care? Firstly, talking to our patients with an open mind encourages a better rapport and allows our patients to be honest with us about their healthcare choices. It is better to know how they are managing their health and should be able to discuss this with us without judgement. It builds trust and increases satisfaction as we understand our patients better.

Secondly, using simple homeopathy alongside our dental care gives us an extra tool in our surgeries to support the healing and ongoing health of our patients.

Homeopathy can be used to help our patients on a deep, whole-person level to improve health or used simply in acute conditions. Homeopathy has always recognised the importance of the mouth in general health and also as a window into the rest of the body.

In homeopathy, there are several thousand different remedies and most of these have aspects that are relevant to oral health. However, some remedies can be particularly useful in the dental surgery and can complement dental care in a very simple, quick, safe and cost-effective way.

#### Arnica

Arnica is a very well-known remedy and used by many people as tablets or cream as soon as they experience bruising or trauma.

It has an affinity for small blood vessels and soft tissues, making it a great remedy for using in the dental

surgery for any interventions from hygiene treatment to extractions or placing implants.

Arnica is readily available and having a bottle of tablets in a 30C dilution is easy to have on the side to administer to patients. They may only need one tablet just before treatment and another just after. They can continue taking it every few hours for the next few days until they feel better.

#### Chamomilla

Chamomilla is probably the saviour of many parents with teething babies. The baby often has one red cheek, and can be bad tempered, not knowing what they want – to be carried, to be put down, that toy, another toy.

The teething powders that are widely available contain chamomilla in a 6C dilution, are safe to give very frequently and can have a rapid, calming effect. This can also be a useful remedy for the agitated and sensitive patient and can be more effective in a 30C dilution.

#### Traumeel

Traumeel is a complex of different remedies, including arnica, combined to help manage symptoms of redness, heat and swelling; pain; infection; and promote wound healing. This gives us an invaluable adjunct to dental treatment and has been well researched.

Das and colleague (2019) carried out a randomised triple-blind clinical trial comparing ibuprofen and Traumeel after periodontal flap surgery. They

found that the patients that had been given Traumeel consumed fewer tablets and had a better tissue response with no adverse reactions compared to the patients taking ibuprofen.

### A GENTLE, NATURAL APPROACH

Homeopathy has a close relationship with a more gentle and natural approach to disease within the body, which is often well accepted by the patient. With a small number of useful remedies within the surgery and that are easily accessible to patients, a wide range of conditions and situations can be managed alongside conventional dental treatment (Eames and Darby, 2011).

Although dental practitioners should only treat what they would treat as an oral physician, this approach still offers extensive possibilities.

Homeopathy, especially for acute conditions, is quick and easy to use within dentistry and can bring an increased sense of job satisfaction to the dentist and an improved sense of health and wellbeing to the patient.

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# Navigating the tax trap

**Adam Thompson** explains how high-earning dentists can keep more of their hard-earned income

**P**ivate dentistry offers significant financial rewards, but for those with higher earnings, it also comes with a complex set of tax challenges that can quietly chip away at income. Among the most punishing is the lesser-known but highly impactful 60% tax trap. Many dentists unknowingly fall into it, particularly after a profitable year or following changes in earnings structures. However, with informed planning, it's possible to mitigate its effects and retain more of what you earn.

## UNDERSTANDING THE TAX TRAP

At first glance, the top rate of income tax in the UK is 45%. However, for those earning more than £100,000, the effective tax rate can become significantly higher due to the gradual withdrawal of the personal allowance.

As income exceeds £100,000, the tax-free personal allowance – currently £12,570 (2025/26 tax year) – is reduced by £1 for every £2 earned over that threshold. This means that by the time income reaches £125,140, the allowance is lost entirely. The result is that any income within this band is effectively taxed at 60%, as you're simultaneously paying higher-rate tax and losing your allowance.

This stealth tax increase often hits dentists during peak earning years – whether through increased private work, business profits, or one-off payments such as bonuses or dividends.

For those who are unaware, it can come as an unwelcome surprise at year-end.

## ADDITIONAL TAX PITFALLS

Compounding the problem is the tapered annual allowance, which affects how much you can contribute to your pension while still benefiting from tax relief. For most individuals, the annual pension allowance stands at £60,000. But once adjusted income – which includes total earnings plus pension contributions – exceeds £260,000, this allowance starts to reduce. It can taper down to as little as £10,000 for the highest earners.

Breaching the allowance triggers a tax charge, and because many dentists contribute to both employer and private pension schemes, it's easy to overstep the limit without realising. Income over £100k will also impact free childcare, further adding to the tax burden.

## WHY DENTISTS ARE AT RISK

Private dentists, especially practice owners, often experience fluctuating income due to variable patient demand, seasonal treatment patterns and the timing of dividends or goodwill payments. This variability makes it challenging to accurately predict tax exposure across a given year.

Other factors that heighten vulnerability include:

- Operating across both NHS and private sectors
- Holding multiple income sources (eg consultancy, lecturing or investments)
- Lack of proactive tax planning aligned with income patterns.

These dynamics make dentists particularly susceptible to creeping into higher tax bands or breaching allowances without strategic intent.

## PLANNING STRATEGIES

Fortunately, several measures can help reduce your tax burden and make the most of available reliefs.

For instance, reducing your hours would not only support your tax position, but you could also benefit from a more enjoyable work-life balance.

Pension contributions can reduce taxable income and help keep you below the £100,000 threshold, though it's important to watch out for the tapered annual allowance if your total income is high. ISAs don't reduce taxable income but do offer tax-free growth, making them a useful long-term savings tool.

Charitable donations can also lower your adjusted income, offering valuable tax relief while supporting good causes.

For those with variable earnings, deferring income – such as dividends or bonuses – across tax years may help avoid triggering higher tax rates.

Finally, sharing assets or income with a lower-earning spouse can sometimes reduce your household's overall tax bill, if done within HMRC rules.

## TAILORED ADVICE

The UK tax system is intricate, and the costs for missteps can be significant so working with a financial adviser who understands the financial profile of dental professionals is essential.

With the right strategy in place, you can safeguard your income, take full advantage of reliefs and allowances, and ensure that your financial success in dentistry translates into long-term personal wealth.

When it comes to your finances, it's not just about what you earn – it's about what you keep. Remember, tax treatment depends on individual circumstances and may be subject to change in future.



**Adam Thompson**

Adam is a dental specialist financial adviser with over 15 years' experience at Wesleyan Financial Services, as well as a chartered financial planner and a Fellow of the Personal Finance Society (FPFS).

*Visit [wesleyan.co.uk/dental](https://www.wesleyan.co.uk/dental) or call Wesleyan Financial Services on 0808 149 9416. Charges may apply, but costs are agreed with you in advance.*



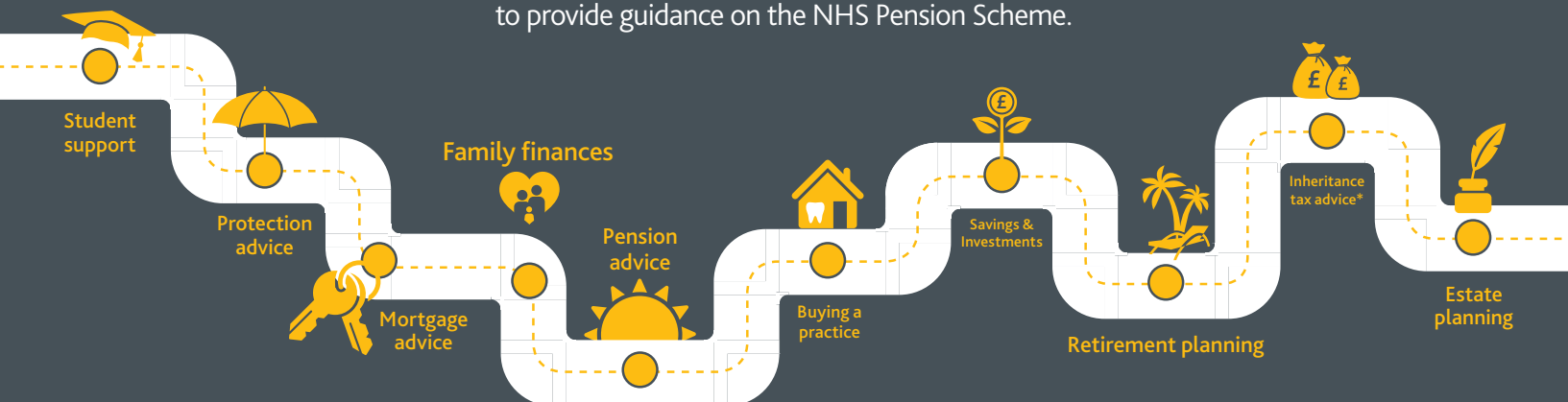
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# Improving treatment uptake

**Emma Flunt** shares hints, tips and suggestions to help encourage more patients to say 'yes' to treatment

**T**he cost of living only ever goes in one direction – up! Over the last few years, it has been doing so at an alarmingly rapid rate.

The COVID-19 lockdown – when we were unable to go out or on holiday – meant there were a lot of people who had more disposable cash than they'd been used to having.

Coupled with the fact that life was lived on screens where we could see ourselves as others saw us, it spurred more people than ever before to think about improving the appearance of their smile.

Wars, disastrous budgets and the lack of growth in the economy now mean patients are having to watch their pennies a great deal more. Consequently, when I have visited some dental teams recently, they have mentioned that fewer patients than they'd hoped are taking up treatment plans.

While the high cost of living is likely to be playing a large part in this, there are still ways to make it easier for dental patients to say 'yes' to treatment plans.

## RED, AMBER, GREEN

Employing the red, amber, green (RAG) system is a great way of dividing a treatment plan into more manageable sections if a patient is struggling with cost.



**Emma Flunt**

Emma is a regional support manager for Practice Plan Group and has more than 20 years' experience in dentistry working in general and specialist referral practices, and training environments where she won multiple awards.

## Red

Anything flagged as 'red' is something that should be done urgently and can't wait. That could be a deep cavity that may need root treatment. This would be something that could cause problems with being able to eat and so on. I would also place periodontal disease in the red category, where they need to see a dental hygienist urgently if they are starting to show signs of gum disease.

## Amber

The amber category consists of things that can be put on a watching brief. This might be signs of some sensitivity, maybe where a crown needs to be placed on top. This can be monitored over the next few appointments and its progress reviewed. It can be treated with fluoride in the meantime.

Also in the amber category would be any treatments the patient is considering that are cosmetic, as there isn't a clinical need for it; all the 'nice to haves'.

## Green

The green category is where everything is okay and there's no need for action.

So, the patient can just be called in for their next routine examination.

By prioritising treatments in this way, it allows patients to split their treatment plans and address the urgent issues first. Once the important treatments, the ones that will have the greatest effect upon their oral health, have been completed, they can consider tackling the less important or cosmetic procedures.

Having the RAG rating helps to underline to the patient which parts of a treatment plan can be postponed until a later date and which ones need action now. It helps to focus their attention and so they are more likely to take up an urgent treatment plan.

## FEES AND FINANCE

If patients are showing reluctance to take up treatment plans, then it's worth reviewing your fees. Check if they are in line with what is currently being charged by other practices in the area.

Having benchmarked fees for some of my practices in the past, it's shown that the costs of certain treatments are higher than the 'going rate' for local practices and that has proven to be a barrier to treatment uptake.

Know your competition and ensure your pricing structure is in line with local expectations.

If dental patients are balking at the cost of the suggested treatment, this can sometimes be overcome by offering patient finance. If you aren't already working with a finance provider such as Practice Plan's sister company, Medenta, then you may be missing out on an opportunity to help patients afford the treatments they need and want.

By spreading the cost of the treatment plan over a period of months, often interest free, then the patient need only be concerned about affording the monthly payments rather than the total cost of the treatment plan. This overcomes the cost versus affordability issue in many cases.

At times it can even result in patients consenting to more extensive (and expensive) treatment plans than were originally suggested.

### COMMUNICATION

There are occasions when patients are nervous about the treatment being recommended. In this case, reassurance and clear explanations of what's involved can help allay their fears. Perhaps invite them back in for another appointment with your treatment coordinator to run through their concerns.

I also recommend providing testimonials from patients who have already undergone something similar to reassure them that this is the right thing for them to do. This is especially important for high-end treatments.

## KNOW YOUR COMPETITION AND ENSURE YOUR PRICING STRUCTURE IS IN LINE WITH LOCAL EXPECTATIONS

Before and after pictures of patients and even a video of what the treatment journey was like, how it felt and the effect it's had upon them work well for cosmetic treatments. A lot of these types of patients are often happy to express how much the treatments have changed their lives. They feel more confident, are able to go out more, and smile more. A short video that patients can relate to can work wonders.

Another barrier to treatment uptake might be appointment times. People who work traditional office hours may not find it convenient to come to the practice during working hours.

Could you be more flexible to meet your patients' needs, perhaps by offering late night, early morning or weekend appointments?

### BENEFICIAL PROMOTION

If you have a membership plan, then this is a great way to promote membership as many of them include a discount on treatments.

If you're offering a treatment plan to a pay-as-you-go private patient who is concerned about the cost, you could point out that by joining your plan they could save money off the cost of the treatment as well as the annual pay-as-you-go expenditure on their

oral health examination and hygiene appointments.

Also, some practices are moving away from the traditional two examinations and two hygienist appointment plans to a single examination, two hygiene appointment structure. This is because many patients these days place greater value on their hygienist appointment than their examination.

If a patient is dentally fit, then they may not need two examinations annually and can manage with only one. This can be beneficial to everyone. For the patient, this works out to be a cheaper plan than a two plus two. While for the practice it means an extra appointment space for a new or existing patient.

It's useful to bear in mind that treatment plan uptake often falls off at expensive times of the year such as Christmas and the summer holidays. So, a slight drop may not be a reason to panic!

Hopefully, these tips will help to ensure a healthy level of uptake throughout the year.

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# Leading to inspire

**Sarika Shah** shares five top tips for dental leaders to implement to start inspiring their teams

**O**ver the last few months, numerous dental practice owners and associates have approached me, essentially wanting to know more about how to consistently inspire their teams to stay motivated.

Being a dental practice owner myself as well as a mindset and leadership coach and the founder of Flourish as a Female – In Dentistry, I have been on a long journey trying to understand what specifically drives individuals and teams to thrive, but more importantly, grow sustainably.

## WHAT'S THE BIG IDEA?

If we want to build motivated, resilient and truly thriving teams, we have to start by looking at how we lead.

As practice leaders, our day-to-day behaviours shape the experience our teams have at work. We set the tone and create the environment where people can either flourish or feel drained.

It's time we move past quick fixes and start looking at the deeper issues – what's really causing our teams to feel stressed or disconnected. Only then can we create a culture where high performance and wellbeing go hand in hand.

In this article, I'm going to share five key insights from my own experience.

## 1 ACTIVATE INTENTION, LASTING RECOGNITION

I've found that when people truly understand the difference they're making at work, it lights a spark. It gives them energy, purpose – even pride. One of the most powerful ways we, as leaders, can nurture that feeling is through meaningful recognition.

I like to think of it as the kind of recognition that sticks – it's more than a passing thank you, it actually makes someone feel like they matter. When people feel like their efforts are recognised and valued, that's when they really start to thrive.

There are two small but powerful ways to do this. First, say thank you but take it one step further. Instead of just saying 'thanks', say why it mattered. It's the 'why' that makes it meaningful. It tells the person their work had an impact.

The second is calling out someone's strengths in the moment. In a busy dental practice, we often move quickly from one task to the next, but those quick moments of genuine feedback can be incredibly powerful.

It's about noticing the qualities behind the actions – whether it's empathy, precision or teamwork – and reflecting those strengths back to the person. That kind of recognition helps people feel truly seen, not just for what they do, but for who they are in the way they show up at work.

Autonomy is all about giving people more ownership in their roles. Perhaps your dental nurse could lead a new protocol rollout, or your receptionist could take the lead on patient follow-ups. When people feel trusted to make decisions and think creatively, they grow – and so does the practice.

Belonging matters more than ever. In a busy dental setting, it's easy to rush from patient to patient, task to task. But taking time to connect – checking in, listening, showing genuine interest – builds a stronger, more emotionally invested team. People need to know they're not just part of the workflow, they're part of the why.

And finally, challenge. People want to feel like they're developing, not stuck. I always ask my team members what skills they'd love to build – responses have included leading a huddle and speaking at an event. Growth doesn't always need to be big or formal, it just needs to be intentional.

These A, B, and C elements are simple, but powerful. When we nurture them, we don't just build better teams, we build people who believe in themselves and their place in our shared mission.

## 3 SUPPORT CONSISTENT, HEALTHY PERFORMANCE

When it comes to creating sustainable workloads, as leaders, we have more influence than we realise. Two areas I focus on are how we work together as a team and how we build in time to recover.

A simple place to start is by looking at meetings. Take a moment to reflect on the following:

## 2 AMPLIFY A, B, C NEEDS

In my leadership journey, I've found three things truly help a team thrive: autonomy, belonging and challenge.



**Sarika Shah**

Sarika is the founder and owner of Platinum Dental Care in London. She is an Invisalign and cosmetic dentist. She created the leadership course, Flourish as a Female in Dentistry for women in dentistry. For more details, visit [www.flourishasafemale.com](http://www.flourishasafemale.com).

- How many meetings are happening in your practice each week?
- Are they all necessary?
- Could some be replaced with a quick message or a shared update?
- Could they be shorter, more focused, or even less frequent?

Adding a clear agenda and purpose to each meeting brings structure, and it also respects everyone's time.

When team members see that their time and energy are being protected, it sends a strong message: their wellbeing matters just as much as their efficiency and performance.

#### 4 BUILD RESILIENCE INTO THE WAY YOUR TEAM WORKS

Resilience is one of those words we hear a lot but is often misunderstood. It's not about just pushing through – it's about learning to adapt, recover, and even grow from challenges.

In dentistry, resilience shows up at every level – individually, as a team and across the practice. Resilient teams share four key strengths:

- Confidence in its ability to handle challenges together
- Clarity around roles and responsibilities

## HOW YOU LEAD MATTERS MORE THAN EVER

- Flexibility to adapt when things don't go to plan
- Psychological safety – the trust to speak openly, especially when things go wrong.

One of the simplest and most powerful ways to build team resilience is to talk after things go slightly off track and not at crisis point.

Even after a busy clinic, a missed detail or a stressful interaction, take a few minutes to pause and reflect together. That's where real growth happens – not in perfection, but in learning. This also promotes a culture in the team of giving and taking healthy feedback.

#### 5 PROMOTE VALUES, ALIGNMENT AND MEANING

Being a practice principal, I've learnt that one common, but overlooked, driver of burnout is values misalignment. When there's a gap between what we say we stand for

and how we actually work, people feel it – and it wears them down.

As leaders, we can bring values to life by:

- Talking about the bigger impact of our work
- Recognising potential
- Building real connections
- Embedding values into hiring
- Leading by example
- Allowing autonomy.

When values are lived, not just listed, they create meaning – and meaning fuels motivation

#### FINAL THOUGHTS

Inspiring your team isn't about grand gestures – it's about being intentional in the everyday. When we lead with clarity, connection and care, we create the kind of environment where people want to give their best.

As dental leaders, we have the opportunity – as well as the responsibility – to shape a culture where both performance and people can flourish.

Start small, stay consistent, and remember when it comes to consistently inspiring your team, how you lead matters more than ever.

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# Making plans

With autumn on the horizon, **Faye Mear** explains why the planning starts now for patient events

**O**rganising a patient event can be a brilliant way to showcase your practice, connect with your community and create a welcoming space for people to meet your team and learn more about what you offer.

While the middle of summer might not be the best time to host an event – many of your patients (and team!) will be away or in holiday mode – it is the ideal time to start planning for one for early autumn. September, in particular, is a great time as people settle back into their usual routines and they have time to focus on other things, before Christmas starts to loom!

Events and open days can be incredibly rewarding, not just in terms of generating more income and attracting new patients, but also for raising awareness of your practice and reinforcing the positive image you want to project. However, they do require careful planning. Giving yourself a lead time of eight weeks is about right. That allows you to get all the details sorted, promote the event effectively and build interest gradually without last-minute stress.

## WHERE TO START

### 1. Pick your message

The first thing to think about is what your offering for the occasion will be.



**Faye Mear**

Faye is client liaison at Corona Marketing, a dedicated dental marketing agency. She's passionate about helping dental professionals and practices grow, thrive and achieve success through better marketing and communication. Email Faye: faye.mear@coronadc.co.uk.



It can be tempting to want to showcase everything your practice offers, but in our experience, it works better to choose just one area. Patients tend to respond more positively when there's a clear message and a specific reason to attend.

We have found that consumers can struggle with more than one clear message at a time. If you attempt to target everything, you are likely to appeal to no one.

Perhaps there's a particular treatment you'd like to do more of or maybe you want to increase awareness of your facial aesthetics offering, promote Invisalign or implants, or grow interest in cosmetic whitening. Keeping things focused makes it easier for people to understand what's on offer and decide whether it's relevant to them.

### 2. Think about attendance

Once you've chosen the focus, think about what will encourage people to take that first step and book in.

People are far more likely to respond if there's a clear benefit to attending. Perhaps it's a free consultation, a discounted treatment package or an added extra like complimentary whitening or a hygiene appointment if they decide to go ahead.

If you're promoting a higher-value treatment, it's also worth considering how you can help patients manage the cost – having payment plans or finance options available and clearly signposted can really make a difference for those who are interested but hesitant.

Choosing the right date is essential! It needs to work for your team, of course, but also for potential attendees. You'll likely get a better response if the event is held outside of normal working hours – perhaps in the evening or on a weekend – so more people can come along without having to rearrange their day.

Make sure the clinicians and team members you'll need for the event are available and on board well in advance.

### 3. Involve the team

Once you've got your date and offer in mind, bring the whole team into the loop.

Everyone – from the clinicians to your reception team – should be confident talking about the event and the treatment being promoted so they'll be comfortable mentioning it to patients during routine appointments and have a plan for handling enquiries.

Your front desk team will be key here. Ensure the reception team knows what the event is all about, how to answer common questions and how to book

# Event planning: top tips

- Decide on your focus
- Be crystal clear on your offering
- Set the time and date
- Prepare your team
- Promote through multiple channels
- Confirm appointments
- Make it special
- Follow-up after the event.

people in. If the team is informed and enthusiastic about the event then the better the uptake, because team members will feel happy to talk to everyone about it.

## 4. Shout about it

Promotion is where things really start to come together. There's no one-size-fits-all approach, but spreading the word through as many channels as possible is always helpful. Posters inside and outside your practice, flyers delivered to nearby homes, mentions in local magazines or newspapers, and of course, social media.

Make use of your Facebook and Instagram accounts, and if you have a little budget to put behind some paid advertising, targeted online campaigns can work really well. The key is consistency – people often need to see something several times before they act on it. Keep reminding them, in different friendly ways.

Don't forget about your existing patient base – your most valuable resource. Make sure the messaging is clear and the action you want them to take, such as booking a consultation – is as easy to do as possible.

## 5. Make a great impression

When the day arrives, treat it as a special occasion and use the opportunity to make the best impression.

You don't need to go over the top, but a little effort to make the practice feel welcoming can go a long way. Some flowers and decorations, offering refreshments and giving complimentary goody bags or a free gift will create a warm and friendly atmosphere that puts visitors at ease.

Most importantly, make sure your team is ready to greet people with genuine warmth and enthusiasm. For many attendees, this might be their first real interaction with your practice, and those initial impressions can be incredibly powerful.

## 6. Confirm attendance

To make sure you get the best turnout possible, it's worth confirming appointments with a quick call, DM or email a day or two beforehand. People's schedules change, and a gentle reminder can make all the difference. We recommend taking a small, refundable deposit at the

time of booking to give the event a value that encourages people to show up and take their booking seriously.

## 7. Stay in touch

Of course, not everyone who attends will be ready to commit to treatment there and then – and that's absolutely fine. What matters is keeping the relationship started with patients going, so consistent follow-up is a key part of making these events successful.

Your treatment coordinator or reception team must reach out to attendees afterwards and be able to answer any lingering questions, offer further information or simply keep the conversation going. If someone isn't quite ready yet, don't lose touch. Add them to your practice's follow-up list and stay in contact through your patient management system over the coming weeks and months.

When done thoughtfully, a patient event is so much more than just a marketing tool. It's a chance to invite people into your practice, to show them who you are and what you stand for. It's about trust, comfort and connection – qualities that are especially important in dentistry.

## HERE TO HELP

If this sounds like something you'd love to do but aren't sure where to start or don't feel you have the time, you're not alone. Planning an event can feel a little daunting, but there's help available. With guidance and support, you can give patients a great experience that will make them want to entrust their treatment to you and your team.



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# Culture as currency

**Mark Topley** explains how to build a team that works with you, not just for you

**W**e've all seen it – a beautifully equipped practice, a full appointment book and a rock-solid strategy yet, somehow, the wheels still wobble. People are tense, teamwork is patchy, morale is low. You're pulling harder than ever, but it feels like you're dragging the whole buggy yourself. That's not a strategy problem – it's a culture problem.

In today's climate, culture isn't a 'nice to have'. It's currency. It's what helps you attract the right people, retain them and unlock their best work. It turns a staff into a team – and a team into something powerful and productive.

## WHY CULTURE NOW?

We're seeing a generational shift that's backed up by the data. Surveys from Deloitte, Gallup and Glassdoor all point to the same thing: younger professionals – particularly gen Z and millennials – are not just looking for a job. They're looking for purpose. They want to work with you, not just for you.

In fact, nearly half of gen Zs have turned down roles that don't align with their values, and more than three quarters of adults now say workplace culture matters more to them than

salary. Add in what Google found in its Project Aristotle – that psychological safety is the top trait of high-performing teams – and the picture becomes very clear.

They'll work hard, but only if they feel safe, seen and part of something they believe in. That's the shift. It's why the unspoken rules of your practice – the way people treat each other when no one's watching – matter more than ever. Because culture isn't just a vibe, it's a decision-maker.

## PURPOSE, NOT PERKS

You can't plaster over cultural cracks with pizza Fridays and vouchers. Real culture starts with purpose. As Simon Sinek said: 'Start with why'.

When team members understand why your practice exists, what role they play in the story, and how their day-to-day work connects to something bigger, everything changes.

That's why I developed the creed framework – to help

practices define their culture in plain English, not corporate jargon. It answers four key questions:

1. Why do we do what we do? (Your purpose)
2. What result are we trying to achieve for our patients? (Your story)
3. Who are we? (Your identity and values)
4. Where are we going? (Your vision).

One practice I worked with had strong instincts about what it stood for, but nothing written down. The team consisted of good people working hard, but they weren't aligned. After a one-day reset, the team created its culture creed together. For the first time, the practice team had shared language, clarity and energy. As one dental nurse said: 'It just cemented how good our team is.'

That's culture. Not hype. Not HR wallpaper. It's clarity.

## THE THREE PILLARS: SAFETY, VULNERABILITY, PURPOSE

Once your creed is clear, the job becomes bringing it to life – not through posters, but through behaviour. In my work, I focus on three cultural pillars:

1. Belonging and safety. People thrive when they feel safe to speak up, be themselves, ask for help. Fear shuts people down. Safety brings them to life
2. Vulnerability. When leaders go first to admit mistakes, ask for help, share their



**Mark Topley**

Mark is founder of [responsibledentistry.com](https://responsibledentistry.com) and the Great Boss Academy – businesses that provide coaching, consultancy and training for leaders, owners and managers.



learning they set the tone. Trust grows when people see you're human

3. Purpose. Tie the daily tasks back to the bigger mission. Celebrate real patient stories. Remind people that they're not just doing fillings, they're changing lives.

These three don't need a big budget, they need intention. Say thank you (and be specific). Ask how people are. Celebrate the small wins. It's not rocket science, but it will propel your practice forward.

### CULTURE TRIGGERS

The mistake most practices make is that they talk about culture once a year and expect it to stick. But culture isn't an event, it's a habit. Just like all habits, it needs trigger and a system to respond.

To make it last, I use four culture triggers:

1. Calendar. Build culture into your schedule: monthly team check-ins, birthday shoutouts, Friday huddles. Breakfast Thursdays. If it's not in the diary, it won't happen
2. Transitions. Culture is felt strongest

when someone joins, grows or leaves. Is your onboarding inspiring or just HR admin? Do you celebrate milestones?

- These are make-or-break moments
3. Incidents. When things go wrong – or brilliantly – how do you respond? What you tolerate (or ignore) becomes the culture. How does your team face up to mistakes together?

4. Environment. Your space sends a message. What do the staff room, noticeboard, and reception say about your values? Culture is visible.

These are your leverage points. Small shifts here create big ripple effects.

### CURRENCY THAT PAYS YOU BACK

Even the CQC is shifting its focus toward leadership and culture under the 'well-led' statements. It has recognised what we all know instinctively: culture impacts care. It shapes how your team shows up for patients and each other.

But long before CQC inspectors notice it, your team will. Team members feel it in how problems are handled, how feedback is given, and how safe it is to be themselves.

Culture costs time and energy, there's no denying that, but the return is real:

less drama, more initiative, staff who stay, and patients who notice.

And, let's be honest, it's about you enjoying your work again. Because when your team works with you, not against you, everything gets lighter.

As Gary Vaynerchuk put it: 'Love and empathy are the fuel of culture'. When people feel seen and supported, they give their best.

### CLOSING REFLECTION

You don't need to overhaul your entire practice to start shifting the culture. You just need to take one step – it might be:

- Asking your team members what values matter most to them
  - Sharing your own 'why' in the next huddle
  - Picking one creed question and exploring it at the next team meeting.
- Because culture isn't built in a day, it's built in the moments that matter.

If you start now, by this time next year, you'll have a team that doesn't just work for you. it works with you. That's the power of culture. That's the real currency.

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# Advanced communication

**Rana Al-Falaki** explains how to crack the culture code and transform your practice

**W**hen you think about communication in dentistry, you might picture awkward

role-play scenarios or training slides on active listening. But true communication goes far deeper than what's said aloud. It's the silent tension in a room, the misunderstanding that never gets cleared up, the email that lands badly, or the decision no one challenged – until it was too late.

At its heart, communication is connection. And when you know how to connect – clearly, consistently, and confidently – you unlock better relationships, higher performance and a practice that flows and grows with less effort and more energy.

That's why communication isn't just a soft skill but a business-critical one. And nowhere was that more evident than in the case of Dr CJ.

## MASTER THE MOMENT

Picture the following: you're the owner of a busy practice. Even on your non-clinical days, you're there – finishing notes, catching up on admin, seeing the odd patient to cover for an associate who's cancelled... again. You

don't want to rock the boat by calling it out. Good associates are hard to come by.

Your weekends are clouded by Sunday dread: who'll call in sick? Who'll be late? Who's just not going to be on form?

You long to focus on the dentistry, to trust that your practice manager has the rest under control. But you can't let go, because they don't do it like you do. They wander in after you, disappear into an office with a closed door, and your resentment simmers but remains unspoken.

You find yourself asking team members to tidy the waiting room, double check the day lists, ensure the morning autoclave cycle has been run, making sure surgeries are stocked and all equipment ready and working – tasks you wish your team just handled without needing your instruction. Instead, your dream of running a fulfilling, profitable practice has morphed into a draining full-time firefight.

That was the daily reality for Dr CJ – until I stepped in.

She described her practice as 'leaking money and energy'. Recruitment was tough, staff retention even tougher. Absenteeism was high, and the team culture left her feeling unsupported and spread too thin.

On the surface, these looked like HR and operational issues. But underneath it all? A breakdown in communication.

## THE MISCONCEPTION: WHY MOST LEADERS GET COMMUNICATION WRONG

Like many practice owners, Dr CJ believed:

- 'If you don't have anything nice to say, don't say anything at all'
- 'It's easier to just do it myself'
- 'Our communication is fine – we talk all the time!'

## Elevate your everyday communication: five top tips

1. Speak with clarity and care. Don't confuse niceness with vagueness. Be kind, but clear
2. Choose timing wisely. Some feedback lands better mid-morning than Monday at 8am
3. Learn to listen. Real listening builds trust. Don't rush to fix; reflect back what you've heard
4. Tailor your message. Different personalities require different styles. One-size communication doesn't fit all
5. Invest in training. Don't assume people know how to communicate. Make it part of your CPD and culture.



**Dr Rana Al-Falaki**

Rana is founder of Meddent Leadership & Wellbeing Academy, a multi-award-winning periodontist, coach, author, speaker. She blends more than 25 years' experience with the groundbreaking NAIL-IT system to transform lives. For more details, visit [www.meddent.co.uk](http://www.meddent.co.uk).



But we helped her see that avoiding difficult conversations isn't diplomacy – it's dysfunction. What's more 'doing it yourself' doesn't lead to brilliance, it leads to burnout.

We were also able to explain how communication isn't just talking – it's how we lead, motivate, align and empower.

Data backs this up:

- A Salesforce study found 86% of employees and executives cite poor communication as a key reason for failure
- McKinsey reports teams with strong communication practices enjoy up to a 25% productivity boost
- In healthcare settings, improved communication links to less errors, greater patient satisfaction, fewer complaints, and higher staff engagement, and increased revenue.

In short? Better communication improves performance, retention and revenue. It's the hidden superpower of successful practices.

## MAKE IT MATTER: THE FIVE PS OF ADVANCED COMMUNICATION

At Meddent, we teach advanced communication as part of our titanium-level NAIL-IT leadership training. For Dr CJ, we focused on the following five key areas.

### 1. Persuading

We introduced Dr CJ to persuasion psychology – rooted in Robert Cialdini's six principles of influence:

- Reciprocity – when you give value, your team gives back
- Consistency – getting clear commitments breeds accountability
- Social proof – publicly celebrating wins encourages buy-in
- Authority, liking and scarcity all played a role too.

With these tools, Dr CJ began influencing behaviour subtly and strategically – without confrontation.

### 2. Personality

Using 'Everything Disc' catalyst assessments, we helped Dr CJ and her team understand their behavioural styles, their managerial ability, their interaction with each other and their emotional intelligence and mindset to adapt beyond comfort zones and of course the underlying adaptation of

## BETTER COMMUNICATION IMPROVES PERFORMANCE, RETENTION AND REVENUE

their communication accordingly:

- Some needed detail and space to think
- Others needed fast-paced, people-first messaging.

We also introduced needs-based communication, EQ typing, and diversity-aware language, ensuring everyone – from introverts to high-energy extroverts – felt understood.

The result? Less friction, more flow.

### 3. Purchase

We reframed 'sales' as simply helping people make decisions that benefit them.

Through Everything Disc sales training, every team member – from reception to clinicians – learned how to:

- Recognise their own communication style
- Identify a patient's style and motivation
- Tailor how they presented treatment options.

Associates improved case acceptance. TCOs, PMs, and even admin staff felt more confident in conversations. Sales became a team sport.

### 4. Power

We coached and mentored Dr CJ to:

- Speak up about her needs and boundaries
- Inspire action without micromanaging
- Use language that created respect, alignment, and cohesion

We also taught her how to empower her team, so the practice manager felt trusted to step up, and clinicians took greater ownership.

### 5. Practicality

Communication lives in the micro-moments:

- Timing a request well
- Pausing to let ideas land
- Using body language to reduce resistance

- Choosing the right words – and tone – for each situation.

These nuances became second nature with practice, feedback and repetition.

## THE OUTCOME: REBUILDING A THRIVING PRACTICE CULTURE

Over several months, Dr CJ took part in titanium-level NAIL-IT training, which consists of online lessons with practical toolkits, one-to-one mentoring sessions, group coaching with other Meddent leaders and a full team workshop using Disc insights.

Dr CJ found the transformation included:

- Associate contracts were renegotiated, expectations clarified, and attendance improved. Clinicians began using motivational techniques to bring in new patients
- The practice manager began daily walk-arounds, ensuring everything was prepped, stocked, and flowing – freeing Dr CJ from the morning madness
- The team became tighter, there was less gossip and more trust. Absenteeism dropped. Retention rose. Morale lifted.

Most importantly? Dr CJ was no longer working on days off, dreading Mondays, or firefighting alone. The practice was profitable, energised and enjoyable again.

## MOTIVATION STARTS WITH MEANING

Many leaders try to fix retention by throwing money at the problem. But pay rises alone don't create loyalty.

Motivation isn't about money, it's about meaning

When you understand each team member's values, communication needs, and personality, you can lead them in a way that inspires effort and commitment. But first, you need to understand yourself. That's where our NAIL-IT model begins – with awareness of your own needs, habits, and communication tendencies. Because when you nail communication, you build the culture, team, and practice you truly want.

Advanced communication isn't a bonus skill – it's the foundation of great leadership. And when you get it right, everything changes.

# From storming to performing

**Barry Oulton** explores the stages of development that can help dental teams thrive

Every dental practice relies on a cohesive team to deliver exceptional care, but building and maintaining that cohesion isn't always straightforward.

Teams often go through predictable stages of development, including the 'storming' phase, where conflicts, misunderstandings, and growing pains are common. While this stage can be challenging, it's also an essential step toward achieving high performance.

Helping your team navigate from storming to performing requires intentional leadership, clear communication and a focus on shared goals.

If you want to know how to guide your team through this process and foster an environment where everyone thrives then read on.

## THE STAGES OF TEAM DEVELOPMENT

Bruce Tuckman's model of team development outlines four key stages that all teams experience:

1. Forming: team members come together and get to know each other. Excitement and uncertainty are common
2. Storming: differences in working styles, personalities, and expectations can lead to conflict and tension
3. Norming: team members find common ground, establish norms, and begin to collaborate effectively



**Barry Oulton**

Barry is a practising dentist and the founder of The Confident Dentist. He is a qualified coach and experienced trainer, certified in hypnotherapy and a master practitioner in neuro-linguistic programming (NLP).

4. Performing: the team operates at its best, achieving goals with efficiency and mutual support.
- While the storming phase can feel uncomfortable, it's a critical step toward reaching the performing stage. How you manage this phase as a leader will determine how quickly and effectively your team can progress.

## STUCK IN STORMING

Teams can become stuck in the storming phase for several reasons:

- Unclear roles: without defined responsibilities, misunderstandings and frustration arise
- Lack of trust: team members may hesitate to share ideas or address conflicts
- Poor communication: miscommunication leads to assumptions, resentment, and inefficiency
- Resistance to change: adjusting to new processes or leadership styles can create tension.

Recognising these barriers allows you to address them proactively and set your team up for success.

## STRATEGIES FOR SUCCESS

To move your team from storming to performing, focus on the following strategies.

### 1. Establish clear roles and expectations

Clarity is essential for effective teamwork. Ensure every team member understands their responsibilities and how their role contributes to the practice's success.

- Define roles: create detailed job descriptions that outline specific tasks

and expectations

- Set goals: align individual and team goals with your practice's mission and vision
- Provide feedback: offer regular, constructive feedback to help team members stay on track.

### 2. Foster open communication

Encourage a culture where team members feel comfortable expressing ideas, concerns, and feedback.

- Hold regular meetings: use team meetings to discuss goals, address challenges, and celebrate successes
- Active listening: show genuine interest in what team members have to say, and validate their perspectives
- Clarify misunderstandings: address miscommunication promptly to prevent resentment from building.

### 3. Build trust and collaboration

Trust is the foundation of a high-performing team. Without it, collaboration and cohesion are impossible.

- Lead by example: demonstrate honesty, accountability, and respect in your interactions
- Encourage teamwork: assign projects that require collaboration to strengthen relationships
- Resolve conflicts: address conflicts constructively, focusing on solutions rather than blame.

### 4. Invest in professional development

Providing opportunities for growth shows your team members that you value their contributions and want to support their success.

- Training programmes: offer workshops on communication, leadership, and

technical skills

- Mentorship: pair experienced team members with newer employees to foster learning and connection
- Recognise achievements: celebrate milestones and accomplishments to boost morale and motivation.

#### 5. Align the team around a shared vision

A unified vision gives your team a sense of purpose and direction.

- Revisit your mission: regularly remind the team of your practice's core values and goals
- Involve the team: include team members in decision-making processes to foster ownership and engagement
- Celebrate progress: highlight how the team's efforts contribute to the practice's success.

#### LEADING TEAM DEVELOPMENT

As a leader, your role is to guide, support, and inspire your team through every stage of development. This requires emotional intelligence, adaptability, and a commitment to ongoing growth.

It's important to remember that team development takes time, so be patient.

## Steps to help your team thrive

1. Clarify roles and goals: ensure everyone understands their responsibilities and how they align with practice objectives
2. Promote communication: create opportunities for open dialogue and actively listen to your team
3. Build trust: foster collaboration, address conflicts constructively, and lead by example
4. Invest in growth: provide training, mentorship and recognition to support professional development
5. Unite around a vision: align the team with a shared purpose that inspires and motivates.

Allow space for growth and learning.

Also, stay positive – your attitude sets the tone for the team. Approach challenges with optimism and resilience.

Finally, regularly ask your team for input on how you can improve as a leader.

This feedback can prove invaluable.

#### THE BENEFITS OF A HIGH-PERFORMING TEAM

When your team reaches the performing stage, the benefits are undeniable:

- Improved patient care: a cohesive team delivers seamless, patient-focused experiences

- Increased efficiency: clear roles and collaboration reduce errors and enhance productivity

- Stronger morale: team members feel valued, supported, and motivated to contribute their best

- Practice growth: satisfied patients and a harmonious team drive referrals and long-term success.

By guiding your team through the storming phase and into performing, you can create a thriving practice where everyone feels empowered to contribute their best. The result? Exceptional care for your patients and a fulfilling, successful workplace for your team.

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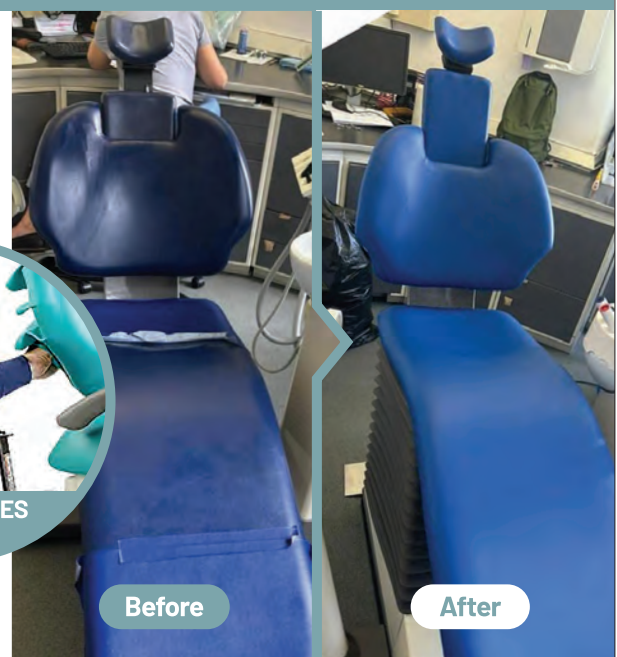
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# Wellness writ large

Reimagining dentistry has shaped **James Goolnik's** aspirations for a healthier world. Here, he shares what drives him as he takes on the role of chair of the judging panel for the Private Dentistry Awards

Words: Julie Bissett

**J**ames Goolnik is at an age when many of his peers might be considering stepping back from their clinical practice, or at least streamlining their businesses for a more straightforward work-life balance. Put this to him, and he baulks at the suggestion – 'I am only 56!'.

The concept of 'straightforward' doesn't appear in his lexicon, which may explain how he remains at the forefront of innovative thinking. A desire to link oral health to wellbeing has long been at the heart of his practice – way before '#holistichealth' became a hashtag shared by influencers aplenty across Instagram and Tiktok. And he continues to nudge dentistry toward a broader goal of promoting holistic wellness, championing a vision beyond simply fixing smiles.

But where did this drive begin? Blessed with what appears to be an innate entrepreneurial spirit, he secured his first job at 13, keen to earn his own money. That business acumen has carried him through every stage of his career. It was certainly evident when he founded Bow Lane Dental in 2000.

Setting up the squat in the heart of the City of London, he strategically positioned himself in a high-footfall, affluent area where bankers and other movers and shakers in global finance were his passing trade. His marketing techniques were refreshingly unconventional – and successful. A simple A-board smartly positioned outside the practice doors in the narrow pedestrianised alley, and a campaign distributing apples adorned with branded stickers worked wonders.

'It was all about awareness,' he says. 'People don't always need a dentist immediately, but six months

down the line when they do, they remember that apple and our name.'

Despite others embracing the expansion and franchise route, James resisted the temptation, focusing instead on refining what is now a highly respected and multi-award-winning clinic. So much so that it recently caught the eye of Portmangentex, who added it to its stable of practices two years ago.

## A WELLNESS VISION

At the tail-end of last year, James opened Optimal Dental Health, a new multidisciplinary clinic where dental care professionals work alongside health experts, nutritionists, sleep specialists and coaches to look beyond 'just teeth and gums'.

James's vision is to empower patients to actively change their overall wellness using the latest evidence and a collaborative approach. Its list of natural treatments is impressively all-encompassing – including biological dentistry, ozone therapy and biocompatible treatments. This focus on toxic-free oral health maintenance, particularly fluoride, has divided opinion outside of and in dentistry. So, is there a danger of misinformation – even from those within?

'Insanity is repeating what we have been doing for the past 40 years and expecting different outcomes,' he says. 'It is abundantly clear that dental decay is 100% preventable and mainly due to diet. Fluoride does assist in slowing down caries topically. However, there is no evidence of any systemic benefit, so why add it to water?

'Hydroxyapatite is naturally present in teeth and



has a similar effect as fluoride. Let's examine the root cause and address that. Most of the time, the mouth is merely responding to what is happening metabolically. Our current food system – the availability of ultra-processed foods and the prevalence of sugar in everything we consume or drink – is the issue. We have ceased eating real foods that are grown locally and consumed seasonally.

'Weston A Price [a Canadian dentist who sparked controversy over his views on root canals but was primarily known for his theories on the relationship between nutrition, dental health and physical health] understood this in the 1940s!

'If we could encourage dental teams to educate patients about diet, sleep and hydration, we would see fewer cases of dental disease. We have developed long-term relationships with them, and they trust us. It is time to start discussing more than just toothbrushing and flossing. We need to test their HbA1c, check their blood pressure and engage in more comprehensive conversations about their health.'

The new practice encapsulates this ideal. Conveniently situated just a stone's throw from London's Baker Street, Optimal Dental Health offers an opportunity to 'unlock the health metrics beyond your smile'. So, what inspired the location?

'I was looking for somewhere I could walk to work – it's such a luxury not to use the Tube to commute. I cycle most days in seven minutes. I also wanted somewhere with great transport links. This location came up – a shopfront with enough space for a DDA surgery, waiting room and cloakroom with a huge basement below. Currently, I do four days a week and aim to build up the patient base until I can drop down to three days, which is my sweet spot for high-quality care, running a business and spending more time with family and friends.'

It's a balance many would envy – and has pulled on skills he has honed over the years.

## PIVOTAL MOMENTS

Lived experiences often shape life choices, and James is no exception, though he seems exceptionally singular in his focus. Milestone events such as notable setbacks during his early academic years and a divorce have helped build his resilience, mental fortitude and ability to adapt. Examples include choosing a life of sobriety after his first girlfriend was killed in a drunk driving accident. Rather than succumbing to peer pressure, he found a way to engage with university life by becoming a DJ.

His decision to focus on nurturing Bow Lane rather than spreading his business interests also suggests a reluctance to conform to expectations.

'Thinking back, I have always been resilient and love setting myself challenges,' he explains. 'If someone tells me it cannot be done, I will find a way.'

A self-confessed 'fixer', James's approach often challenges the norm. He has an insatiable curiosity and a determination to research everything thoroughly before making decisions. So, what other pivotal moments have shaped his approach to life – and his business?

'Apart from my three children, I would say writing my first book, *Brush*. Having the discipline to sit down every night and most weekends to write was incredibly hard at first. But seeing it in print was so satisfying, especially as English was my worst subject at school.

'By the time I started to research the cookbook *Kick Sugar*, I had a better idea of the formula and hired a recipe developer, food photographer and editor to make it more of a team effort.'

## A THIRST FOR KNOWLEDGE

One constant throughout his career has been membership of the British Academy of Cosmetic Dentistry (BACD), which he regards as 'a supportive family'. 'Over the years, it has



# ONE OF THE KEY THINGS WE CAN DO IS TO KEEP CHALLENGING OURSELVES. I HOPE I NEVER STOP LEARNING

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given me the confidence to stand up on stage and share our knowledge about dental practice in the UK. It is not just the clinical skills I have acquired that help me convey knowledge and insights with an attitude of abundance. I am proud to call the ex-presidents my friends, and we are eager to share training and developments with the younger generation, watching the academy go from strength to strength while patients reap the benefits.'

He is studying for a graduate diploma in integrative functional nutrition from the Institute for Optimum Nutrition, having enrolled part-time for over two years. 'I have passed the first year and am on the behaviour change module, which is fascinating. I hope to use the techniques to make more lasting changes to my patients' health. They all know they should use floss or interdental aids, but most cannot sustain it regularly.'

Chameleon-like in his adaption to circumstances and eager to broaden his skill set, James has had to learn on the hoof. Business training, in particular, is often said to be conspicuous by its absence in dental schools. But what else is the BDS course missing? Is the academic arena now adequately connecting the dots, or is considerable work still to be done?

'I received no training in business, leadership or running a team at dental school – and our nutrition training was about telling patients to stop eating sugar and brush after each meal! It is still not deep enough. My colleagues still cannot understand why I spend so long listening to my patients, asking them about their diet, supplements, sleep and stress levels. However, overall health starts in the mouth, and reducing inflammation has a knock-on effect on the rest of the body. Whether that is reducing their diabetic medication, improving their insulin sensitivity (HbA1c levels) or just stopping them from having another cavity. This needs to be incorporated in the training new dentists receive.'

## A NEW CHALLENGE

He has always been a staunch advocate for transforming perceptions of dentistry. But how easy is it to inject positive change in a field that is not quick to accept change, or blessed with a raving fan base?

'It can get quite intense sometimes; however, if I want to implement change, I need to express my opinion and be heard. For example, taking on the chairmanship of the Private Dentistry Awards is an exciting challenge. I have been involved as a judge for over seven years and have seen all the good it does for our profession. It inspires young dentists to strive to achieve goals that previously took 20 years. There is so much more giving back to the community and positivity that we want to showcase.'

'Despite the economic climate, there are some outstanding dental practices out there that are thriving because they are passionate about helping their patients. And the trend from a focus on cosmetic dentistry towards total health is inspiring.'

With Ben Atkins, chair of the Dental Industry Awards, James is working to streamline the judging process.

'We have developed a judges' charter to which all prospective judges must commit. It is a privilege to be on the panel, and we recognise that the considerable time they dedicate needs to be acknowledged. The winners will better represent what is cutting-edge in healthcare, further highlighting the incredible work dental teams do across the UK. And if practices are motivated to embrace total body wellness, then that is even better.'

## FIXING ISSUES

His legacy in dentistry is impressive and wide-ranging. One notable standout is that in 34 years in dentistry, he has never had legal proceedings by a patient, team member, or even the GDC. 'We all make mistakes, but I am quick to admit them, find a solution, and refund the patient. With all the tools at our disposal, it is even easier now to explain to patients what is happening in their mouths and bodies and the different solutions to fix them.'

His thirst for knowledge and new experiences is impressive, and he's not stopping anytime soon. So, where does this incredible drive to keep learning come from? Is it a fear of losing grey matter or ongoing curiosity?

'I am curious and want more answers to help patients when they say "why?". I spent last year learning from Dr Dale Bresdon about halting cognitive decline, and one of the key things we can do is to keep challenging ourselves. I hope I never stop learning.'

Beyond dentistry, this drive is evident in his commitment to push hard on his own physical health. 'I have always been resilient and love setting myself challenges, whether running the marathon, swimming The Serpentine, or recently, a Hyrox. I find it more challenging to keep fit without a goal.'

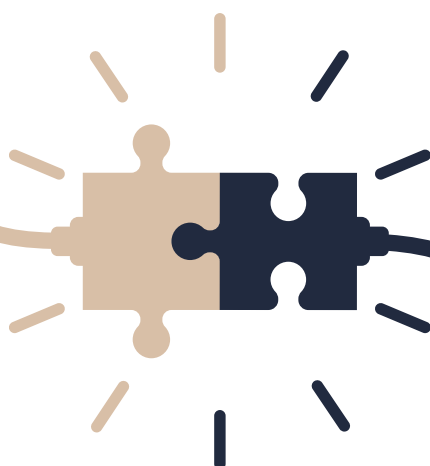
James is an art aficionado, too. The curated and unique aesthetic of Optimal Dental Health is testimony to his love of eclectic artwork. Eco-friendly and artistic elements, such as Volker Kühn's box art and pop-art-inspired mouth mirrors, add style and substance to the clinical setting.

A keen theatre-goer, it is here where he is happiest – 'in the audience at the theatre, ideally at the Donmar in Covent Garden'. Only a good crime novel keeps him awake at night.

His reimagining of dentistry is as much about transforming his own approach to wellness as it is fostering a more holistic experience for his patients. Always grounded in science, the answer to one final question comes as no surprise: is he guided by his heart or his head? 'Head,' replies a clinician for whom an evidence base is paramount. However, one can't help but sense that the heart is never far behind.

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*The 2025 Private Dentistry Awards are open for entry. Visit [dentistry.co.uk/awards](https://dentistry.co.uk/awards) for more details.*



# *Collaboratively* speaking

Dietitian **Sophie Medlin** on why dental clinics should take a joined-up approach to patient wellness

**T**he connection between oral health and overall wellbeing is gaining widespread recognition.

Today's health-conscious patients are increasingly drawn to dental practices that go beyond traditional care, with teams that understand the mouth as a vital gateway to overall health. They value practitioners who emphasise the critical link between nutrition and oral health, helping them make informed choices that benefit both their smiles and bodies.

Patients are eager to understand how their diet influences their dental health, how specific treatments may affect their microbiome and how improved oral care can contribute to their

quality of life. As a result, we are now witnessing a shift in how private dental clinics market themselves regarding wellness.

Dentists who address these concerns can help foster a more comprehensive, patient-centred approach to care and position themselves as modern-thinking business owners.

To this end, collaborating with a dietitian brings many benefits. By referring patients to dietitians, dentists and their teams can be assured that patients receive appropriate advice and support for making dietary changes that enhance their dental health.

Dietary changes are often essential yet challenging; dietitians can recommend the most significant adjustments and how to implement them using counselling techniques to foster behaviour change.

As we know, poor oral health is rarely an isolated issue. Dietitians can also help identify the underlying causes of oral health problems and involve

the patient's GP when necessary to investigate and address any additional medical issues that may contribute to poor oral health.

## **WHOLE SYSTEM APPROACH**

A dental clinic can effectively commit to holistic patient care by listing a dietitian or dietetic practice as a partner on its website and recommending a reliable dietitian to patients.

As a gut health dietitian, patients often ask me about oral health issues such as the oral microbiome, bad breath problems and concerns regarding antibiotic use in dental procedures, making it essential to have a dependable dental partner for referrals.

While the tangible financial benefits to the dental practice may be limited, it is well understood that addressing patient concerns is crucial for attracting new clients. For this reason, publicly engaging with a dietitian shows a commitment to patient care



**Sophie Medlin**

Sophie is a consultant dietitian specialising in gastrointestinal and colorectal health. She has extensive experience working in acute hospital settings and academia, notably as a lecturer at King's College London. For further information, visit [www.citydietitians.co.uk](http://www.citydietitians.co.uk).

and highlights to them the importance of holistic teamwork and a whole-systems approach.

At my nutrition clinics, patients often express concerns about using antibiotics during dental procedures and confusion regarding how certain whole foods – such as dried fruit – affect their teeth. While I always encourage them to follow their dentist's advice on medication, I have experienced first-hand how a collaborative approach between dentists and dietitians can lead to significantly better patient outcomes.

### GOOD ADVICE

So, how can we best structure these partnerships? Dietitians often work remotely, enabling a dental practice to connect with a dietetic practice anywhere in the country for support. That said, a local dental practice collaborating with a local dietitian is more likely to facilitate referrals to the dental practice.

Once a partnership is formed, collaborating on website content, social media information and presentations from the dental team to the dietitians – and vice versa – for continuing professional development can be beneficial. Sometimes, a small referral fee from the dietitian to the dental practice may be appropriate. However, it is essential to understand that margins within dietetics are slim since we don't sell products; we only offer our advice.

If there are shared patients, constructive communication between the dietitian and dentist is crucial for providing coordinated care. There are numerous ways to establish interdisciplinary collaboration, and a successful business model can take various forms.

Knowledge is power, and by collaborating effectively and sharing information, dietitians and dental professionals can improve patient outcomes, particularly regarding oral health, nutrition and the oral microbiome.

Consider a case of a patient with diabetes and poor oral health. If we can reduce the patient's blood glucose levels through a dietetic partnership and educate them on healthy eating to support oral health, there is excellent potential for

## How to build strong referral pathways

1. Identify willing partners: locate local dietitians, private GPs, or other healthcare professionals open to collaboration. Discuss possible referral pathways and explore mutual benefits, such as discounts for shared patients
2. Offer CPD opportunities: invite a dietitian to deliver a virtual or in-person CPD session for your dental team. This helps the team better understand the scope of a dietitian's work and encourages stronger referral relationships
3. Streamline referrals: create simple referral letters or email templates that can be quickly sent to the dietitian, detailing the reason for the referral. This keeps the process clear and consistent
4. Consider an in-house GP: partnering with a private GP can significantly reduce patient wait times for medical issues impacting oral health. Offering a multidisciplinary approach under one roof may enhance patient outcomes and satisfaction
5. Foster long-term relationships: building regular communication channels with your referral partners ensures seamless, ongoing collaboration that benefits your practice and their practice and patient outcomes
6. Collaborate on content creation: develop joint content for your social media posts, website or newsletters to educate patients on the relationship between oral health, diet and overall wellness. This will showcase the benefits of collaborative care to patients.

interdisciplinary collaboration. Other examples include individuals with gut dysbiosis, which also affects the oral cavity; inflammatory bowel disease; elderly patients who are malnourished due to dental issues; patients with osteoporosis impacting their teeth; children needing education on eating for better oral health, and many more.

A dentist can refer a patient to a trusted dietitian by letter or email or by providing leaflets for the dietetic practice within the surgery to distribute to patients who may hesitate to request a direct referral.

Once the dietitian has met with the patient, a letter can be sent back to the dentist outlining the plan and outcome of their care. This allows dietitians and dentists to collaborate for optimal patient outcomes by working together toward common goals.

Patients or their dentists often notice the benefits of lifestyle changes in the oral cavity sooner than other health markers, further motivating the patient.

### COLLABORATION

I've been lucky to have been introduced to dental practices through patients and friends. My knowledge of dental issues and the dentist's knowledge of when to use nutrition information has been dramatically enhanced. This may be just a quick text to clarify a potential problem, such as asking for advice or a referral from a dentist to a dietitian or vice versa.

Patients paying for private dental care and those paying for a dietitian are clearly motivated to take care of their health and have the financial means to do so, making them fall into the same pool of people whom the dental and dietetic practices aim to attract as patients.

By collaborating, we can engage with the same audience and benefit from cross-referrals within the partnership. This also helps the dental practice achieve optimal positioning to attract patients.

At the same time, dietitians can share their knowledge about the relevant holistic health enquiries patients raise, thereby aiding the dental practice's profile.

By promoting whole-body wellness in your practice, you elevate patient care and position yourself as a thought leader in modern dentistry.



# The edge of leadership

Honest reflections and bold ideas from dentistry's quiet leaders... **Andrea Ubhi** outlines what her new column – Voices from the edge – is set to share

**D**entistry is changing – and not just in terms of digital workflows, implant protocols or AI diagnostics. Beneath the surface, something deeper is shifting, the inner landscape of leadership.

After more than three decades in dentistry, I've noticed a rising hunger among practice owners and dental professionals for more than CPD hours and polished marketing strategies. What we're craving is truth – a space for real, candid conversations about what it takes to lead in this profession today. Conversations that make room for burnout as much as for breakthrough. For reinvention as much as for revenue.

This column is an invitation to those of us working at the edge: of innovation, of personal change, of responsibility. It's for the leaders shaping the future of private dentistry – not just through their business acumen, but through their character, their clarity, and their courage.

## DOING THINGS DIFFERENTLY

The aim of the column is to share interviews with practice owners and leaders who are doing things differently – quietly changing the game in their own way. Some of them may be familiar names but many won't be.



**Andrea Ubhi**

Andrea is director of Andrea Ubhi Dentistry. She was awarded Cosmetic Pioneer of the Year 2024, and named as one of the 10 Significant Leaders in Dentistry in the World by CIO World.

## Are you leading from the edge?

Voices from the edge is looking to reflect the full range of what leadership in dentistry really looks like.

If you are – or know – a practice owner, manager, leader or dental professional who is quietly leading with courage, creativity and integrity, get in touch with Andrea via Instagram @andreaubhi with a few lines about who they are and why they inspire you.

I'm particularly interested in finding the hidden exceptionalists, those running remarkable teams, making bold decisions or innovating with quiet integrity behind the scenes.

Alongside these conversations, I'll occasionally write thought pieces on the real challenges we're facing as leaders in dentistry. From managing financial stress and navigating team dynamics, to addressing burnout, purpose, ethics, and what it means to grow a business that doesn't just look good from the outside, but feels right on the inside.

I want this to be a space where we can be honest about the hard stuff – and inspired about what's possible on the other side of it. The tone will be reflective and practical, rather than performative.

Let's be honest – the highlight reels of dental conferences and social media can sometimes feel a world away from the reality of running a practice in 2025.

Yes, there's joy and success and innovation but there's also decision fatigue. Quiet anxiety about finances. Leadership loneliness. The pressure to appear perfect while holding it all together.

Many of us came into this profession with a clear vision of what leadership would look like. Few of us were taught how to manage the emotional load of team conflict, patients in distress, or the mental calculus of choosing between profit and values.

Leading a practice takes more than a strategy. It takes self-awareness, resilience and knowing who you are – especially when things go sideways.

This column won't pretend to have all the answers. But it will shine a light on the real questions being asked in practices across the UK right now.

## THE REAL EDGE OF LEADERSHIP

In mountaineering, the edge is the place where things get interesting. Where there's risk but also perspective. Where you can see the whole landscape clearly, because you're not buried in the valley anymore.

That's the metaphor I want to carry forward in this column.

The edge isn't dangerous – it's where growth happens and truth lives. And if you've been there – if you are there – then this space is for you.

You're not alone – let's talk about it.

The edge isn't the place we go when we've failed. It's where we grow.

When you lead from the edge, you stop pretending, you stop performing and you start making decisions that come from alignment rather than fear.

That's what I want for all of us. Leadership that is sustainable, rooted and real.

We don't need more noise. We need more truth.

### QUIET COURAGE

If there's one thing I've learned from working with exceptional dental leaders over the years, it's that courage doesn't always look the way we expect it to. It's not always standing on a stage or smashing a growth target. Sometimes, courage looks like having a tough conversation with a toxic team member. Or admitting that you're struggling – and asking for help. Or choosing to stay small on purpose, so you can stay aligned with your values.

We need to celebrate that kind of leadership more.

We need to talk about the people who lead from the heart, even when it's not loud or flashy. The ones who are quietly building something exceptional – not for the applause, but because they care.

### BACK TO THE WIRE

Let me tell you a little of my own story...

During COVID-19, I was diagnosed with non-Hodgkin lymphoma. It was a time of global fear and isolation, and here I was, facing a diagnosis that dropped the bottom out of my world. As a business owner, a mother, a leader, I was used to moving fast, solving problems, staying strong. But there's something about facing your own mortality that cuts through the noise.

Everything that wasn't essential just fell away.

I stopped caring about what people thought of me. Stopped needing to be 'brave' or polished or impressive. There's no energy for performance when you're bald, exhausted, and wondering if you'll see your children grow up.

What I didn't expect was the relief. The deep, exhaling relief of finally dropping the armour.

I remember lying in bed during treatment, too tired to think straight, and realising that I don't need to prove

## WHEN YOU LEAD FROM THE EDGE, YOU STOP PRETENDING, YOU STOP PERFORMING AND YOU START MAKING DECISIONS THAT COME FROM ALIGNMENT RATHER THAN FEAR

anything anymore. I don't need to win at dentistry, or leadership, or life. I just want to live it fully, honestly, and calmly.

It stripped me right back to the wire – and what I found there surprised me. Not weakness. Not failure. But clarity.

Coming back to the practice after treatment was surreal. Something in me had fundamentally changed. I no longer needed to be 'the confident one'. My amazing team has supported me throughout my absence. I didn't need to have all the answers or pretend I was always okay. I started showing up differently – with more softness, more steadiness, more realness.

It changed the way I led. The way I listened. The way I made decisions.

And it's part of what's led me here, to this column.

Because I know I'm not the only one who's been through something – whether it's illness, grief, burnout, divorce, financial strain, or just the quiet undoing that sometimes comes in midlife when all the plates stop spinning.

We've all had moments that stripped us down to our core, but we don't always talk about them. We curate the glossy version. Share the wins, not the wrestles. In doing so, we leave each other feeling alone – like everyone else has it all together while we're quietly

unravelling behind the scenes.

This column is for the unravelling and the rebuilding. For the strength that comes after the storm. For the leadership that's forged not in strategy meetings, but in chemo chairs, early morning tears, and difficult, holy recalibrations.

### LEADERSHIP AFTER YOU'VE FACED THE FIRE

Here's what I know now, on the other side of it all:

- I don't need applause to feel worthy
- I don't need to be the loudest voice in the room to be heard
- I don't need to say yes to everything to be successful
- I don't need to hide my humanity to be a good leader.

When you've been cracked open by something bigger than your to-do list, you come back with a different compass. You start to lead with more intention, less urgency. More presence, less perfection.

You realise that how you build something is as important as what you build.

You choose your team not just for skill but for soul. You create spaces that feel safe, not just slick. You start asking better questions – for instance, rather than 'How can I grow faster?' you ask, 'How can I grow wiser?' And, most of all, you start listening to your gut more than your inner critic.

This isn't a 'comeback' story. It's a rewrite.

### AN INVITATION TO THE QUIETLY COURAGEOUS

If you're reading this and thinking: 'That's me. I've led through hard times. I've stayed standing when it would've been easier to quit. I've grown in ways that don't show up on a balance sheet...' then I want to hear from you.

Maybe you've reinvented your business after a personal crisis. Maybe you've turned down expansion to protect your wellbeing. Maybe you've built something beautiful in a corner of the country no one notices but your patients and team adore you.

That's leadership – and we need to see more of it. Let's begin.

---

*Get in touch with Andrea on Instagram @andreaubhi.*



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# Zirkonzahn's Military School welcomes university students

Training that builds a bridge between academic preparation and a professional environment, focusing on modern dental technologies and manual modelling

**T**he Zirkonzahn School ('Die Zirkonzahn Schule', founded by MDT Enrico Steger) has grown to become a very special place to learn dental technology. Located amidst the fascinating scenery of the Alps, every year the vibrant school facilities host dental technicians and dentists from any country and any level of expertise, to strengthen their craftsmanship, techniques and skills in digital technologies by means of a diligent and complete working schedule.

The Zirkonzahn School includes six educational programmes developed considering the specific and differentiated targets' needs. They last from a few days to several months and, in some cases, run in an international ambiance. Among these, the Military School is the most traditional training. Specifically tailored for young students of dental technology, over five days participants are challenged to learn and practice with modern CAD/CAM technologies and manual modelling, working on simple cases made of Prettau® zirconia. The programme is focused on the concept of discipline and for this reason it is characterised by a military orientation: after getting up early, morning exercises and working tasks are performed following a strict and well-planned schedule with a diligent attitude. With intensive practical work and strict schedules, the school program aims to creating a bridge between school or academic preparation and real-world experience.

## IN THE STUDENTS' WORDS

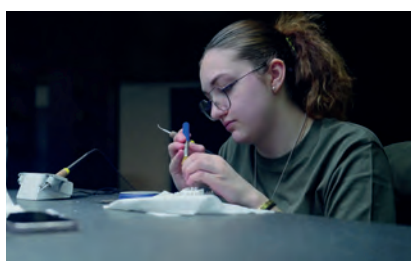
Last April, the Military School welcomed students from Trinity College (Dublin) for the first time. Four students of dental technology shared this unique experience accompanied by two of their instructors:

'What struck me the most was how work was structured at the Military School. We lived together the entire time, fully immersed in dental technical work, with nothing external to distract us from our focus. The biggest challenge

for me was shifting my perspective — from the more manual approach we had at university to a digital one — while learning modern workflow procedures' — Valerie Tsukanova.

'I really enjoyed learning a new software from scratch. At first, it was a bit challenging, but the software was so intuitive that we managed to learn how to use it in a very short time, especially considering how brief this experience was' — Maja Borkowska.

'It was truly a pleasure to spend this time with my colleagues — it felt like we were a real team. The early wake-ups, combined with sports activities and a sense of discipline, helped us build a strong group spirit. Even though we already knew each other from university, this experience was completely different, and I really enjoyed living at the same place where the school activities were performed' — Justine Brotarlo.



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For more information about the programme and participation at the Military School, contact Zirkonzahn's Education Team at: +39 0474 066 650, [education@zirkonzahn.com](mailto:education@zirkonzahn.com) or visit [www.zirkonzahn-education.com](http://www.zirkonzahn-education.com).

Visit Zirkonzahn's YouTube channel to see videos and interviews from past participants — scan the QR code!



## A sphere of its own!

Tokuyama

Tokuyama uses patented spherical filler particles within its composite materials. Each variant utilises spherical particles of different diameters to maximise their optical and physical properties for the desired indication.

Tokuyama's spherical filler particles offer other significant advantages compared with irregular shaped filler particles. Quicker and easier to pack into undercuts, they reduce the risk of voids; easier to sculpt and carve, producing enhanced morphology of the final restoration; and a much smoother surface finish that has a natural high sheen that requires minimal if any polishing.

Tokuyama's development of spherical filler particles has culminated in Omnichroma, a colourless universal composite that matches every tooth colour.

Omnichroma Flow Bulk is a low viscosity composite that can be placed in 3.5mm increments. Like the other Omnichroma materials, it delivers unprecedented colour matching, high polishability and stain resistance. It also has low polymerization shrinkage compared with other bulk filled composite materials.

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## Driven by innovation

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Planmeca is delighted to announce the unveiling of its brand-new mobile showroom Plandemo. Packed with the latest in cutting-edge technology, the new vehicle provides the perfect opportunity for you to explore Planmeca's full product range at a time and location that suits you.

On board, you can try out the innovative Compact i5 dental unit, which is kitted out in sumptuous Metallic Gold Ultra Relax upholstery.

See just how easy it is to use the Promax 3D Classic CBCT imaging unit first-hand, and the high-quality clinical images it produces.

Experience the rich selection of tools and features available in Romexis with a software demonstration, and find out how same-day dentistry can be incorporated into your surgery with the Planmill 35 milling unit.

[www.planmeca.com/plandemo](http://www.planmeca.com/plandemo)



## Schottlander Poster Prize at BSSPD

Schottlander

From an entry of 26 posters, the winner this year was Bethany Revert from St Georges University Hospitals NHS Trust for her poster 'Surgical management and dental rehabilitation of a Brown's tumour in the anterior maxilla'.

The case report described the multidisciplinary care of a rare case of a Brown's tumour located in the anterior maxilla, occurring as a side effect of secondary hyperparathyroidism.

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



## Overcome limitations

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The Quad Matrix System overcomes the limitations of traditional matrix systems, effectively addressing complex scenarios. Whether it's a single restoration or an entire quadrant of class IIs, the Quad system provides the solution with its design features:

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- The split tip design of the Quad wedges easily adapts bands to both cervical margins in a back-to-back restoration for deeper seal and a more natural emergence profile.

The Quad Matrix System supports a wide range of clinical scenarios:

- Back-to-back restorations: simultaneously restore both sides of adjacent class IIs using two matrix bands, one Quad Wedge, and one Quad Ring
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## Zirkonzahn Shade Guides

Zirkonzahn

With the new Zirkonzahn Shade Guides, the patient's tooth colour can be precisely determined with monolithic sample teeth made of zirconia. This allows the most suitable Prettau Dispersive zirconia material to be determined in a safe and quick manner.

The colour spectrum is inspired by the Vita classic range, comprising 16 dentine colours (A1-D4) and three bleach shades. The sample teeth are monolithic

and glazed with 3D Base Glaze. Colour theory shows that shape and surface structure considerably influence the colour effect. Striving for perfection, Zirkonzahn creates shade guides in all respective Prettau Dispersive zirconia materials in the shape of a premolar as well as lower and upper incisor. If the material of the shade guide and the material of the zirconia prosthesis are identical, it is ensured that the colour of the zirconia restoration corresponds one-to-one with the natural tooth colour of the patient.

The shade guides are also available with minimally reduced, sintered sample teeth (minimal cutback), which can be further characterised by the application of different incisal materials. This results in shade guides that precisely reflect individual approaches and aesthetic demands.

For the dental practice, the manufacturer recommends the Zirkonzahn Shade Guide Prettau Line in the shape of a premolar as well as a lower and upper incisor (also with minimal cutback for individual characterisation), to identify easily the natural tooth colour on the patient.

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



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# Seeing is believing

How **Hello Pearl** helped enhance patient trust and boost treatment at Bush Dental

**B**ush Dental, a bustling multidisciplinary practice in West London, uses cutting-edge technology to deliver exceptional patient care. When Dr. Vishan Patel first encountered Hello Pearl's Second Opinion – a diagnostic AI tool that enhances X-ray analysis – he recognised its potential to elevate both clinical accuracy and patient communication.

Through the use of Hello Pearl, Dr. Vishan has enhanced diagnostic precision, strengthened patient trust, and ultimately, increased treatment acceptance and revenue for the practice.



## Results

# 14%

increase in the number of patients with a filling

# 22%

increase in total fillings completed

# 1,436%

increase in sales of fluoride mouthwash

### CHALLENGE

Dr. Vishan Patel, a dentist at Bush Dental, needed to facilitate patient education and improve treatment acceptance by making diagnoses more accessible and transparent.

### APPROACH

The practice integrated Hello Pearl's Second Opinion software to simplify patient communication, enabling patients to "see" their diagnosis more clearly and understand their treatment options with confidence.

### RESULTS

Between March and August 2024, Bush Dental observed improved treatment acceptance driving a 14% increase in the number of patients completing one or more fillings, and a 22% increase in total fillings completed.

### HOW HELLO PEARL BUILDS TRUST THROUGH PATIENT EDUCATION

Second Opinion allowed Dr. Vishan to streamline patient communication by transforming traditional greyscale X-rays into colour-coded visuals that are easy for patients to interpret.

### Improved diagnostics

Second Opinion's precise detection of caries and radiolucencies enabled Dr. Vishan and his team to diagnose confidently. In one case, Hello Pearl caught an otherwise undetected carious lesion on a lower right molar that allowed Dr. Vishan to perform a minimally invasive treatment, sparing the patient from more extensive future care.



### A picture worth a thousand words

Hello Pearl transformed standard X-rays into colourful presentation aids. Second Opinion backed up Dr. Vishan's diagnosis, streamlining communication and building patient trust. He spent less time trying to translate greyscale radiographs and more time educating patients about their treatment needs.

### Empowered patients accept treatment

This transparency fostered clarity and confidence among Dr. Vishan's patients, who became more engaged and proactive in their treatment decisions. Working with Second Opinion significantly improved acceptance rates, as patients are more likely to proceed with recommended treatments when they can visually verify and understand the need.

To book a live demo, visit [say.hellopearl.uk/book-live-demo](https://say.hellopearl.uk/book-live-demo).





## IN THE HOT SEAT

Get strapped in! **Nilesch Parmar** takes the fast lane on his love of motorsport, strong coffee and thank you notes

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

**A** Last Saturday in Soho. We had a spontaneous dinner at Kiln. Smoky Thai food, no fuss, and packed with flavour. We ordered too much and finished everything. No regrets!

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

**A** Dev Patel for the soul. Christian Bale for the work ethic. Put them together and that would be my guy!

**THERE'S SOMETHING ABOUT STRAPPING INTO A RACE CAR AT FULL THROTTLE THAT CLEARS THE MIND BETTER THAN ANY SPA DAY**

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

**A** 'Enjoy what you do – don't worry about the money, that will come'. That stuck with me ever since Dr Parmar (my dad) told me.

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

**A** The last present I gave was a mentoring session to a young dentist starting out.

And the last present I received was a handwritten thank you card. Never underestimate those!

**Q What's your all-time favourite book/movie?**

**A** My favourite book is *Shantaram* by Gregory David Roberts. It's raw, real and relentless.

And my favourite movie of all time has to be *The Dark Knight*, directed by Christopher Nolan. Enough said!

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

**A** Motorsport. There's something about strapping into a race car at full throttle that clears the mind better than any spa day.

**Q Describe your perfect holiday...**

**A** Early starts, strong coffee, no emails. Mountains in the background, a racetrack nearby, and people I don't have to explain myself to!

**Q What song is guaranteed to make you want to dance?**

**A** Freed from Desire by Gala. It gives me instant energy. If I'm ever spotted dancing, this is probably the reason!

**Q What keeps you awake at night?**

**A** Ideas. That annoying moment your brain decides to become creative at 1am when you're trying to sleep.

**Q How do you unwind after a busy day?**

**A** Weights, espresso and movies. In that order.

**Q If you won the lottery, what would you do with the money?**

**A** Buy back time – outsource more, mentor freely, build a track-ready clinic and drive between surgeries in a Ferrari.

**Q What was the last photo you took on your phone?**

**A** In true Nilesch style, it's of a Lego Ferrari kit that my uncle Charlie bought for me!





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