Rushing dentist syndrome

re you comfortable being uncomfortable? Are you always irritable, or over-adrenalised? Do you have coffee as a daily fix, inhale your food without chewing, and rarely ask for help? Do you take your phone to the toilet? Would it be fair to say that you rarely notice special moments, you compromise on sleep to get tasks (practice administration/treatment plans) done late at night? And when people ask how you are, do you invariably reply 'hectic'?

These signs and symptoms may be those of 'rushing dentist syndrome'. It affects multiple dentists who lead an excessively busy lifestyle with high expectations upon themselves to accomplish all that is required of them.

Many dentists are unaware that they may be affected. Others may classify this as classic stress. It is widely recognised that dentists are subject to high occupational stress (Moore et al, 2001). Many dentists lead a stressful work life that may affect their personal lives too as they try to fit it all in.

A recently-published book by Dr Libby Weaver, an Australian nutritionist, describes all the symptoms of 'Rushing Woman Syndrome: the impact of a never-ending 'to do' list on your health, which may draw parallels with Rushing Dentist Syndrome.

It's the effect of stress on the busy lives that we lead; sleep being compromised, living a lifestyle where things are on the go 24/7. This perceived need to rush – whether a woman displays it on the outside or keeps it under wraps – is changing the face of women's health as we know it in a detrimental way, from PMS and IBS, to losing our tempers or feeling like we can't cope (Weaver, 2014).

Patient impact

This urgent and perceived rushing also affects our patients in many ways. Their lives are

under constant pressure too, adding to the sense of urgency for all dental appointments. The immediacy of appointment scheduling, treatment undertaking and their increased expectation of all aesthetic dentistry piles further pressure on the dentist attempting to treat these patients.

In addition, because these patients may be trying to disguise their stress patterns, they clench and grind their teeth more, fracturing lower incisal edges at an almost exponential increase and chipping upper incisal edges from central and lateral teeth, creating unusual patterns of wear from lateral excursions and anterior repositioning. Fractured cusps are a daily occurrence and we are treating the effects of stress on the dentition as part of our bread and butter.

Finding solutions

The answer to all this for dentists and patients? Downtime. And what better way for dentists to get some downtime than by taking time out and read this journal? Practising mindfulness and 'being in the moment' reduces stress and your own sense of urgency. Not only will you be undertaking CPD and gaining a deeper insight into aesthetic dentistry, you will be relaxing and reading your favourite journal too – and gaining the benefits of very valuable, extremely rare 'me time'.

This month we have some exciting articles for you to read. Brenda Baker and David Reaney give us a fascinating look at restorative materials, while Raj Ahlowalia offers an insight into what malocclusion can to the dentition.

We also have the full breakdown from this year's Aesthetic Dentistry Awards – the biggest ever ceremony, and the best yet, which is saying something! We hope that everyone there enjoyed the evening and look forward to receiving your entries next year.



Turn to page 55 onwards for a closer look at the aesthetic lectures on offer at this summer's major dental event, Dentistry 15. The World Aesthetic Congress (WAC) is taking top billing at what is sure to be a fantastic two days. Don't miss out – call 0845 184 1498 to book your ticket today.

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References

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