Seeing things that others don’t

As dentists treating patients, we have a duty and responsibility to care for the oral and dental health of our patients. We need to listen to their concerns, have an understanding of their dental problems, and provide comprehensive dental care to help them sustain and maintain their oral health.

This dental knowledge should be evidence based. In order for patients to make decisions on their oral and dental health, they need to be given all options for treatment, the advantages and disadvantages, the risks and the benefits, and the opportunity to consider these options for 24 hours in order to sign their informed consent sheets.

This dental knowledge should be based on scientific literature, studies, and accepted guidelines and recommendations for treatment. This includes Cochrane reviews, systematic reviews, and meta-analyses.

**Observations**

However, there are those doctors and dentists that have noticed things in their patients and pieced together parts of a puzzle to diagnose new diseases, which led to further research for the benefit of their patients, dentistry, medicine, and thus human kind.

'A mindset is a belief that orients the way we handle situations – the way we sort out what is going on and what we should do’

This thought process begins as an observation, such as in the case of Dr Bill Klausmer, the orthodontist who in the late 1960s, noticed the swollen gingivae of his post-orthodontic young patients. He advised these patients to use a hydrogen peroxide mouthwash inside their orthodontic retainers to heal their swollen gums.

When he reviewed these patients, not only was the swelling significantly reduced, but the teeth were whiter. This led to a quest to understand the alternative mechanism that initiated hydrogen peroxide to whiten teeth.

This knowledge was shared to other dentists, which led to the first research study undertaken in 1989 by Van Haywood and Harald Hayman, and published by Quintessence. Thus, millions of patients have benefitted from his ideas, thoughts and research, and as a result have whiter teeth, and are happier with the aesthetics of their smile than they otherwise would have been.

**Gaining insights**

Gary Klein has written a fascinating book, entitled *Seeing what others don’t. The remarkable ways we gain insights*. It examines the way we gain insights into situations and observations, looking specifically at our mindsets.

A mindset is a belief that orients the way we handle situations – the way we sort out what is going on and what we should do. Sometimes we have flashes of insight and notice coincidences, curiosities and connections.

Our mindset helps us to spot these coincidences, such as in the case of Dr Michael Gottlieb, who noticed several of his patients being admitted into hospital with an unusual form of pneumonia, called pneumocystic pneumonia.

After the fifth case, he started to see a pattern and the same symptoms, which led to further investigation. He published his findings in 1981, which turned out to be the first published cases of Aids.

**Never events**

However, recently, the main concern is patient safety, and ensuring a safety culture at all times in dental and medical procedures (Renton and Master, 2016; Dargue, 2016). Protecting the patient from harm has led to new guidelines being issued, and a discussion about ‘never events’ and the need for a new approach in dentistry has begun by the Care Quality Commission (CQC), and the Royal Colleges.

What is the most common ‘never event’ in dentistry? The answer is, extracting the wrong tooth. The second most common never event? Administering a local anaesthetic mandibular block on the wrong side (Renton and Sabbah, 2016).

'Discussions ensure that patients are cared for within a safe environment with dentists undertaking the safest and best treatment’

The CQC definition of moderate harm is a ‘moderate increase in the treatment means unplanned return to surgery or a readmission, prolonged episode of care, extra time in hospital or as an outpatient, cancelling of treatments or transfer to another treatment area’.

All these discussions ensure that patients are cared for within a safe environment, with dentists undertaking the safest and best treatment option for the patient. This also applies to aesthetic dentistry and it is important that dentists who dedicate their practice to aesthetic dentistry are aware of these factors for the safety of their patients, their team and themselves during their practicing life.

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**References**


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