

SS White® Dental

Addressing the general practitioner's preference shifts impacting endodontics

There are a number of major dental market trends which have led to a -7% annual growth rate for Endodontics over the past 2 years. They are as follows:

- GPs have a shrinking pool of fully insured patients, resulting in business pressure to make up lost revenue by doing more RCT cases in-house.
- Large clinic /DSOs refer less RCT cases outside, and they are at growing at 20% a year for the last 3 years.
- A very aggressive, highly marketed implant movement has more referring GPs performing implants and previous RCT cases to Implantologists.
- A growing GP concern over endodontically treated tooth fractures and other retreatments.

As a restorative dental company serving both Endodontists and GPs, we constantly engage our customers in regards to their latest challenges and successes. We have discovered some very interesting facts on GP preferences for patient treatment options and their desires regarding performance and quality.

Our research delved into questions like, “Why would GPs refer to an Implantologist?” “Why would they choose to refer to an Endodontist?” “How do they choose a referring Endodontist?” “What causes them to change Endodontists?” Some of the questions GPs ask themselves are —“How am I going to place the crown?” “Will this crown fracture?”

The third leading reason Americans will lose a tooth in their life is due to tooth fractures. An RCT treated tooth fracture is often blamed on the Endodontist. This is amazing and scary for our industry — a real threat. It can be a hidden threat to the Endodontist because he/she will likely never hear about it from the GP. However, be certain the Implantologist will have the discussion with the patient and the GP.

We've also had the opportunity to work with Endodontists who are growing their practices in excess of 20% a year. We benchmarked these top performers to pinpoint common traits and beliefs.

General Practitioner Beliefs:

- General practitioners believe 10%-30% of endodontic procedures result in tooth fractures.
- 87% of general practitioners are likely to stop referring cases to an Endodontist who returns patients with insufficient dentin.
- 92% of general practitioners have experienced frustration with aggressively prepared teeth.

General Practitioner Expectations of Modern Endodontics:

- Think about the whole tooth. Not just the lower apical third.
- Reduce my complexities, time, and concerns with placing this crown.
- Leave enough healthy dentin for a long lasting crown and a second crown when necessary, 10-15 years out
- Help me provide more options for my patient.

Traditionally, we have conflicting vantage points — The Endodontist looks at the lower apical third, and the GP looks at the upper apical third. Today's modern RCT approach takes a holistic view of the entire tooth. Endodontists embracing the modern approach are growing dramatically

in the marketplace. Why? Simply put, they're giving their GPs what their GPs want: more periocervical dentin for a stronger long life restoration with less time and complications during the restorative procedure.

If you were to go to a GP and show



“The tool should serve the concept/ technique, the tool should not drive the concept/technique.”
 Dr. Eric Herbranson,
 Endodontist,
 San Leandro, CA



INITIAL ACCESS		RC ACCESS		GLIDEPATH (HAND)			SHAPING				RC ACCESS					
ZIRCONIA ACCESS		METAL ACCESS		EG1A	EG2	8	10	15	17	20	22	25	30	856-016	V-Clean 25(04)	V-Clean 35(06)
856-018	801-018	GW4R	GW2	EG1A	EG2	8	10	15	17	20	22	25	30	856-016	V-Clean 25(04)	V-Clean 35(06)
856-018	801-018	GW4R	GW2			8	10	15	17	20	22	25	30			

them the preceding images, which one do you think they would have done on them? Which one do you think they want done on their patients? Which one are they currently getting from you or from your peers? The market research states that GPs prefer the minimally invasive approach 5:1.

87% of general practitioners are likely to stop referring cases to an Endodontist who returns patients with insufficient dentin.

SS White is the only endodontic manufacturer that designs its products with dentin conservation as the focal point of its instrumentation. No matter what your clinical methodology, our instruments easily match your treatment goals. Using our specially designed burs for access, canal location, and pulp chamber refinement in combination with our V-Taper H2 endodontic files, you will be maximizing the conservation of healthy dentin 4 mm above and 4 mm below the orifice. Our RCT instruments serve your technique; they don't dictate the technique. This full

SS White is the only endodontic manufacturer that designs its products with dentin conservation, general practitioner preference and lifetime restoration as the focal point of its instrumentation. No matter what your clinical methodology, our instruments easily match your treatment goals.

system we developed contains carbides, diamonds, files, and obturation material.

The SS White Endo system will have GPs thanking their Endodontists and providing more referrals. These Endodontists know they're helping create a longer lasting restoration and better patient outcomes. The strength is left in the tooth because as you know, the perio cervical dentin is the source of strength.

What SS White has done is work with GPs and Endodontists to incorporate the minimally invasive techniques common to Endodontics. This new approach helps you create longer life restorations, loyal GPs, and better patient outcomes.

To learn more about what GPs prefer, or how we can help you conserve healthy

tissue and grow your practice, please contact SS White through the options below. **EP**

info@sswhitedental.com
 800-535-2877

Marketing communications info
 Upcoming events
 Webinar: June 12, 5:00 PM (PST)
 Viva Learning
 "Practice Building with Modern Endodontics"

This information was provided by SS White Dental.