



By Michael Scherer, DMD, MS, FACP
MidWinter Speaker

Friday

10:00am–12:30pm • 2.5 CEU, CORE
Are We Ready For Digital Dentistry,
Intraoral Scanning, and 3D Printing?
What Works and What Doesn't

1:30pm–4:30pm • 3 CEU, CORE
Diagnosis and Treatment Planning
Full-Arch Implant Rehabilitation



What Holds Us Back FROM IMPLEMENTING Digital Dentistry in Our Practices?

We are at the proverbial “digital tipping point” in our clinical practices and it seems that we can’t turn a page in a magazine, journal or attend a lecture that doesn’t have something highlighting something digital or someone fabricating something via a digital process. Is digital dentistry finally mainstream for clinical practice? That really depends on what we consider “digital,” as some would consider a digital practice as simply one that has digital charting! In today’s clinical practice, a digital dentist is one that uses at least one or several of the following technologies: intraoral scanning, cone-beam computed tomography (CBCT), 3D printing, and milling.

Inside Dentistry in January 2019 conducted a survey evaluating what clinicians and technicians were looking at; what they found is that 28% of respondents indicated they were using intraoral scanners, 17% using CBCT, 15% using in-office milling, and 4% using 3D printing.¹ These reported numbers indicate an overall trend of greater implementation of the digital technologies for everyday clinical practice, however, the reality is that while we are getting there, we have quite a few things that tend to hold us back from making the jump from analog to digital.

What Holds Us Back?

The big factors that tend to make a dentist think twice about implementing anything new, especially digital systems, into clinical practice are the following: cost, access, and indifference.

Costs of digital systems can be astounding, and certainly we must look at the implementation costs of the systems, not just the actual purchasing cost. While the cost of scanners, milling, and printing equipment has become much more affordable in the last few years, these systems can still be expensive. A new intraoral scanner can cost anywhere between \$17,000 at the affordable side for a basic scanner, it can also run as much as \$70,000 if one wanted to get the latest same-day crown

acquisition machine. On top of that, CBCT scanners can range from \$20,000 upwards of \$180,000! In addition to these costs, many systems have monthly, quarterly, or yearly fees to keep their systems up and running.

IS DIGITAL DENTISTRY FINALLY MAINSTREAM FOR CLINICAL PRACTICE?

How do we justify such a large expenditure? In this author’s opinion, it really depends upon what each individual office’s goal is for implementing. Do you want to do same-day ceramic crowns? Do you just want a scanner to replace PVS? I recommend seeking help before you buy!!

Access to the technology can be a significant barrier; although when referring to access, I mean, are you ready for a scanner in your office? Do you have high speed internet connections, a HIPAA compliant wifi hot-spot, do you have physical room for a cart to move around your offices? I recently ran up against this challenge when completing a new office build-out here in Sonora!! We moved locations just across town, but our new location doesn’t have high speed internet!! Yes, as crazy as that sounds, it’s true. We had to really engineer a creative solution, but we were able to get it done. Thankfully I am the IT department in our office, but are you ready and prepared for technology bumps in the road when implementing digital systems?

Lastly, a huge barrier that I encounter each time I speak at meetings and interact with dental colleagues, is indifference. If you have been practicing dentistry effectively for 10, 20, 30+ years and it works with your current impression techniques, labs, materials, why change now? Are you ready to handle a bit of “dental disruption” or a “dental learning

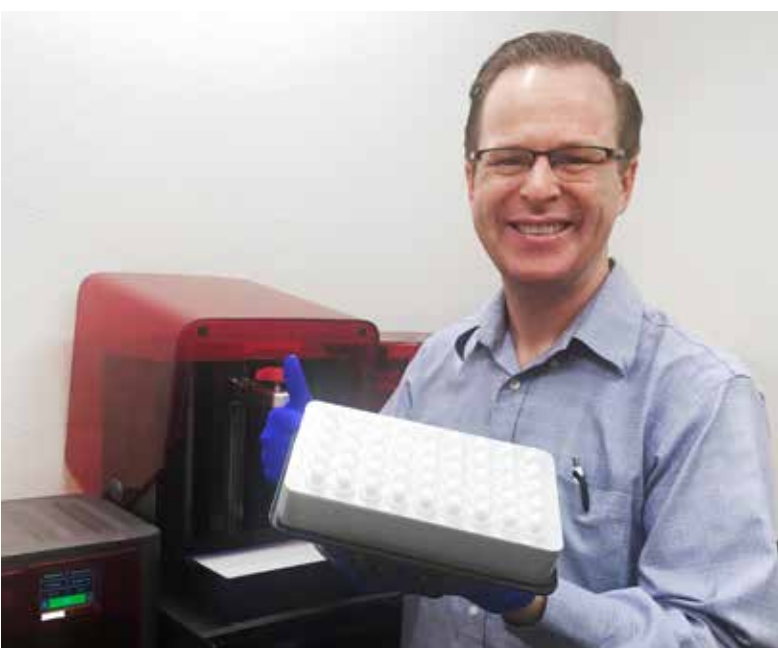
curve” when you get that scanner into your office? For some, this is the biggest barrier to go up against as it’s easy to get comfortable doing our everyday workflows. For others, this is the biggest reason to get into digital dentistry! Are you bored in clinical practice? Looking for something new and exciting to learn?

Bringing It All Together

As we look at various methods for implementing digital systems and take a hard look at what holds us back, it can be daunting!! What I can tell you as someone who got started on the bleeding edge is that digital dentistry is exciting, financially rewarding, and fun! My assistants love it, my office has become more streamlined and productive, and I have had more fun in dentistry in the past five years than my entire career. Is it challenging at first? Of course, but remember so many things are! Remember the first time you prepped a crown in school or the first time you had to hire a new staff member? Digital dentistry is a natural step forward for all of dentistry and make sure you reach out to others to help guide you on the way! ■

References

1. Mazda, Jason. Trends in Dentistry. Inside Dentistry. 2019 Jan;15(1)-8.



Dr. Scherer showing a set of temporary crowns printed on a Sprinray Pro 3D Printer



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