Overtreatment in Implant Dentistry

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Overtreatment (or overservicing or unnecessary treatment) is when medical or dental services are provided with a higher volume or cost than is appropriate.¹ Overtreatment or the acceptance of unnecessary, inappropriate, excessive, or fraudulent treatment is regarded as sanctioned lying, cheating, or stealing and thus constitutes unethical conduct and a breach of the integrity of the profession.² Dental implant treatment is one of the most vulnerable procedures in dentistry to be practiced with the overtreatment for the sake of financial gain and clinician’s own psychological satisfaction. Some overservicing may be due to patient-initiated demands.² Some dentists may overtreat unintentionally due to their own fixed thoughts and rejection toward updating self with newer concepts in diagnostics or treatment procedures. To place (unnecessary) more number of implants or to perform unnecessary bone-grafting procedures could be few of the examples of the overtreatment. However, overtreatment at any context that is beneficial to the clinician at financial or professional level can never be justified. In this regard, an interesting vignette-based survey has been conducted by Kazemian et al¹ in a total of 732 dentists in Switzerland and as per their views, unnecessary treatments to patients are ethically unacceptable conduct. However, due to the presence of huge evidence-based clinical practices and research in implant dentistry, overtreatment in one clinician’s eyes may not be overtreatment in other clinician’s eyes. Due to a varying culture of implant practice worldwide, in terms of different diagnostic and planning procedures, surgical philosophies, occlusal loading protocols, prosthetic options, implant biomaterials, and so on, the absolute clinical guidelines for overtreatment are hard to define. Moreover, rapid technological innovations and modifications in diagnostic and treatment procedures in implants and implant-supported prostheses make it even complicated to define the “overtreatment.” However, as members of one of the most well-respected professions, we (the dentists) must base our treatment decisions, first and foremost, on the needs of the patient³ and should consider it our moral, ethical, and professional responsibility.

REFERENCES

3. Palcanis K. How do I deal with what I perceive to be overtreatment by another dentist when his or her patients come to me to discuss their proposed treatment plans? J Am Dent Assoc 2011 Apr;142(4):447-448.