

# Bronx County Dental News

A PUBLICATION OF THE BRONX COUNTY DENTAL SOCIETY

## Smile Direct

**IN RECENT YEARS, COMPUTERS** were developed to more accurately and prospectively adjust orthodontic appliances, both wires and aligners. Some practitioners feared that the “craft” of the manual wire adjustments would be supplanted by a more “robotic” and automated technique, diminishing their perceived value as the “chef” of the treatment. As I would lecture or blog about these newer, computer-guided techniques, the occasional concern from orthodontists

boiled down to a fear that they would be replaced by robots; ignoring the apparent benefits to the patient. The subtext being that the orthodontist’s own vitality as the superstar of a conventional and increasingly archaic process was paramount to modern progress.

Uber is a ubiquitous and obvious model for the argument that newer, faster and more available is more important for the public good than keeping the status-quo livelihood of privately-owned cab drivers around the world. Such is the mantra of the highly visible dental start-

up Smile Direct, a company that believes dentists are not needed to examine a prospective patient, monitor them during the active treatment phase of the orthodontics, nor to sign off on a final result. The Smile Direct product, a series of clear aligners, are delivered by mail and the patient inserts the aligners on their own.

Smile Direct aligners are not entirely dissimilar, in concept, to dentist-driven aligner products like Invisalign. At one-third the usual cost of conventional orthodontics, perhaps some reduction in quality is to be



BCDS Members enjoying the second annual Job Fair

expected. If the Smile Direct product was merely “not as good” as Invisalign, many dentists might dismiss the product as a cheap and fairly harmless option, not a threatening entity to dentistry as a whole. Traditional orthodontic techniques, as all forms of dentistry, are hardly immune to potentially poor outcomes.

At issue is something much greater. The founders of Smile Direct now possess a company with a market cap of over a billion dollars, and they did it by challenging a respected profession and institution. They did it when there wasn't a need or a public outcry for it; not everyone deserves straight teeth, not in a country where everyone isn't even guaranteed healthcare. They did it by eluding the licensing laws as they essentially perform orthodontic treatment without having a dental license.

They did it by claiming that they have a dentist that is supervising each treatment and yet that doctor is not allowed to see the patient should a problem arise and the patient has a concern they want examined. They did it by providing treatment to patients without looking at a single radiograph or even examining the patient.

Currently, various states are challenging the SDC in the face of an aggressive and litigious SDC legal department that confronts

not only associations but their individual members. They also threaten to sue dentists who post YouTube videos that disparage the product. It will be interesting to see if organized dentistry can have success in combating a company that seeks to make their own members obsolete. Or will this be another example of an entity, be it corporate or political, using powerful momentum, deep pockets, and an aggressive legal counsel to steamroll over accepted and respected norms? ■

“The founders of Smile Direct now possess a company with a market cap of over a billion dollars”

## The Editorial Board of the BCDS salutes former President Paul Hertz

**PAUL THIS PAST YEAR COMPLETED HIS 15TH** consecutive year as a BCDS Council Representative. He initially sat on The Council on Dental Practice, taking over the position vacated by his father, BCDS luminary Matthew Hertz. After an 8 year term, he served one year on The Council for Education, two on Council on Governmental Affairs, while simultaneously serving as an EDPAC representative for five years. The former BCDS President (2003-2004) has taken a well-earned leave from the State Councils. Paul still serves on the BCDS Peer Review and Executive Board and continues to practice dentistry in Riverdale.



# Talking to Our Patients About Substance Abuse

## IN JANUARY 2018, ADA

President Joseph Crowley urged all dentists to reflect on how we manage dental pain and stressed four specific steps to help keep opioid pain relievers from harming our patients.

- Consider using non-narcotic pain relievers as a first line of treatment. The data on opioids finds they are not as effective as other treatments and are associated with more adverse events. Often, some combination of nonsteroidal anti-inflammatory drugs and acetaminophen or aspirin can be just as effective.
- When an opioid pain reliever is indicated, consider prescribing fewer pills in accordance with the latest pain management guidelines and your own state law.
- We should counsel our patients about the benefits and drawbacks of using opioid analgesics, especially how these drugs can be addictive. We should also instruct them how to safely secure, monitor and dispose of them at home. Many people who

abuse prescription opioids get them for free from a friend or relative, and those drugs are often obtained from the home medicine cabinet and sometimes the trash.

- Learn to recognize when a patient might have an abuse disorder or be prone to addiction. We should all know how to briefly counsel these patients and refer them for appropriate treatment.

It is this last point that is difficult and uncomfortable for many practitioners. It is likely that most of us have unknowingly treated patients with substance abuse issues or those in recovery. We should be screening our patients and having a discussion about substance abuse. Some tips from [Drugabuse.gov](http://Drugabuse.gov) include:

- Take a health history that includes discussing substance abuse.
- Always check the New York State prescription drug monitoring database (ISTOP) before prescribing a controlled substance. This will tell you if your patient is drug

shopping or possibly abusing drugs.

- Refer patients with untreated addiction to a local behavioral health provider. To find a resource near you, go to the website of the Substance Abuse and Mental Health Services Administration (SAMHSA). Click on "Find Treatment" and you will see under "Treatment Locators" - Behavioral Health Treatment Service Locators. This site lists substance abuse and mental health facilities by zip code.
- Explain the research on opioids versus over-the-counter pain medications.
- Reassure patients that are in addiction recovery that you will be able to manage their dental related pain.

Dentistry has made great strides in the last five years in reducing the prescribing of addictive drugs. Only by educating ourselves will we be able to comfortably manage patients who are struggling with addiction.

Don Safferstein represents the Bronx County on the NYSDA Committee for Chemical Dependency. If you want help in dealing with addiction, call 1-800-255-2100. Confidential assistance is available from dentists who have suffered the damage of addiction and experienced the benefits of treatment in their own lives. ■

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# Legal Requirements Regarding Sexual Harassment in the Workplace

**IN THE PAST YEAR, BOTH NEW** York State and New York City have passed legislation dealing with the prevention of sexual harassment in the workplace. Some aspects of this policy should already be in effect in your offices and some must be implemented in the near future. The State and City have requirements that are slightly

different, so it is important that you consult both websites to ensure complete compliance. Here is a brief summary of the requirements.

- Effective October 9, 2018, all New York State employers were required to adopt a written sexual harassment prevention policy. A model policy is available on the state website at <https://www.ny.gov/combating-sexual-harassment-workplace/employers>
- By October 9, 2019, all New York State employees must complete interactive anti-sexual harassment training. This training must be completed yearly. All new employees must complete this training as soon as possible

after their start date. A training course is available at the New York State website indicated above. New York City also offers a training course that meets New York State requirements. It can be found at <https://www1.nyc.gov/site/cchr/law/sexual-harassment-training.page>. You can use either course to train your employees.

- New York City requires that an anti-sexual harassment poster in English and Spanish be displayed and that an anti-sexual harassment fact sheet be given to all new employees. These documents can be found at the same New York City website in the above hyperlink. ■



Dr. Kirti Tewari's staff - Rabia Tariq, Nella Vivon and Keisha Walker - at the PS 87 Career Fair.



## Let Us Hear From You

Contribute to BCDS news · Write an article for the newsletter  
Have something you want to present? · Ideas for community outreach?

Email [GoodmanY2K@yahoo.com](mailto:GoodmanY2K@yahoo.com)

## The BCDS Welcomes New Members

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Dr. Moshe Glick

Dr. Denny Chem-Kelk

*"I helped a lot of others now I am the one that's in need."*

— RUSS  
Army Veteran

Will you see *one* vet?

TO VOLUNTEER VISIT:  
[WillYouSeeOneVet.org](http://WillYouSeeOneVet.org)

You Can Change the Life of a Veteran

Volunteer with Dental Lifeline Network's Will You See ONE Vet program to honor and support veterans with special needs in your own community who have served our country. From clearing up painful dental infections to being able to eat again—providing comprehensive dental care will make a life-changing difference for veterans.

Dental Lifeline Network