“Teeth and ice hockey sticks do not get well together”

Interview with Dr. Bendicht Scheidegger and Dr. Hans-Peter Frei

When Dr. Frei was chosen to lead the emergency dental unit during the Championship, he asked me to draw up plans for it. The 52 games played over the 17 days of the Championship are equal to a season of the Swiss Ice Hockey League. Besides the injuries in the games, we also treat players during training sessions, as well as all the other staff members of all eight qualified teams. In total, we provide dental care to 500 to 600 people—perhaps a workplace! Our team consists of Dr. Frei, Marco Frei, two assistants and me.

Are you paid for your services?
Dr. Scheidegger: Our work during the Championship is voluntary, and we are only paid for certain treatments and our expenses. But as a fanatic ice hockey fan, I benefit from being able to watch all the games.

How does the dental emergency unit work?
Dr. Scheidegger: During a game, we have to decide quickly if the player needs further treatment or is able to play. What we can do on-site, for example, is treat intra-oral soft tissue injuries caused by blows to the mouth guard, and seal open injuries of the denture. After dislocations and avulsions, bones are immediately set and splinted in the dental office. Fractures without pulp exposure are treated conservatively provisionally or later in the dental office.

Does treatment usually continue after the games?
Dr. Scheidegger: Owing to the charged environment, players are very resistant to pain during a game. In the dental chair, this changes immediately. If we decide upon a special treatment, we admit the patient to our practice in Bümpel near Bern, where another dentist is on standby. When injuries turn out to be more serious than originally anticipated, we treat the patient facing either after the game or the next day when the practice opens.

When does final treatment take place?
Dr. Frei: In most cases after the end of the player’s career. We do not take special measures here and act in accordance with traumatology guidelines.

Do you cooperate with the dental clinics of the University of Bern and do you admit players to them, if necessary?
Dr. Scheidegger: Of course. A player is admitted to the University dental clinic if the jaw bone has sustained an injury that is more serious than dislocation. The specialists there can make decisions and take measures for which we are not qualified.

What do you do when a tooth is knocked out?
Dr. Scheidegger: Teeth that are fragmented or avulsed are stored in ice or, for example, in special tooth rescue boxes like the SOD Zahntraumatologen by Hager & Werken. Avulsed teeth are set on-site, if possible, and provisionally splinted while the player is prepared for transit.

Who pays for your charges?
Dr. Scheidegger: All the players are covered by insurance and the International Ice Hockey Federation requires every player to give proof of insurance. Our charges are reimbursed through these insurance policies.

Hockey League in the US, a number of these accidents have already occurred—neck protection is not mandatory in the US. In Switzerland, neck protection was recently made non-compulsory. Although he was playing with a visor, NHL Star Dan Heatley almost lost his sight during a friendly match in Bern. His helmet shifted slightly during a fall and he was hit near the cheekbone by a puck. Prevention of such accidents would require full protection with a grille or plexiglas and a mouth guard, but, as proven by the latest play-offs, players will go to the extremes to win a game. Apiercing look and a few missing teeth have a more impressive effect on the opponent than a grille, which hides facial expressions. For these reasons, full facial protection in professional ice hockey is unlikely to be achieved in the years to come.

In my opinion, however, visors, mouth guards and neck protectors should be made mandatory. We also need more and tougher penalties for checks against the head, from behind or against the board. I cannot understand why there are dentists that still use neither visors nor mouth guards.

Why don’t all hockey players wear mouth guards and why do insurance companies or associations not make them mandatory?
Dr. Frei: As far as I know, all SC Bern players wear mouth guards during their games but not during training sessions which is when more injuries definitely occur. Unfortunately, there are players who still wear mouth guards from unlicensed manufacturers that do not offer sufficient protection.

Convincing insurance companies to make mouth guards obligatory is a matter that has not been raised. Periodically, we ask them to add mouth guards to the list of expenses they cover for protection against injury of the teeth. Unfortunately, our efforts haven’t been successful.

How can tooth accidents be prevented and should prevention begin with youth development work?
Dr. Scheidegger: In Switzerland, players under the age of 18 have to wear full protection. Other players, however, remove their grilles after they reach that age. Some years ago, SC Bern Manager Chris McSorley made players play with full protection as punishment after a lost game. Such measures give the wrong message to players and do not increase the acceptance of full protection.

Thank you very much for the interview.