Use of dental materials: Are we all deviants?

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When I was training at university, every stage of a procedure was supervised, step by tedious step. The “idiot sheets” (as our restorative dentistry professor called them) for each material were available to be referred to and followed religiously. Deviating from those instructions was not an option.

A few years into practice, it begins to be difficult recalling what was said about which particular materials. You know that you were told what was compatible with what, and what was not. When a sales representative turns up with something wonderful and new and better, a little alarm rings in your head, cautioning you that what the representative is telling you is contrary to what you were taught. But no, the representative quite confidently assures you that the research says, the representative is telling you is not an option.

The next time you are placing or cementing or layering, stop and ask yourself: am I being deviant? Refer to your idiot sheet and take the time to recall the correct process step by step. And deviate back to normality.

Maybe we all have a bit of that in us. All of the exact details of every process can be lost in the day-to-day stresses of the workload: that little step being skipped just this once, then once again, and then another step gone the next time.

It is the normalisation of deviance: people becoming so accustomed to deviating a little from procedure that “they don’t consider it as deviant, despite the fact that they far exceed their own rules for elementary safety”.

Just skipping that little step this time, not performing the process exactly as the manufacturer’s instructions, finding a way that is convenient, and assuming no responsibility for the results of the deviance. When something goes wrong, when a restoration fails, when a patient is in pain, it is the fault of the material, or the patient, or the laboratory or the nurse.

As an example, someone who uses it badly.

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The truth of the matter is, of course, that virtually all of the mainstream products out there are fit for purpose. What makes any material good, bad or indifferent is how the clinician uses it, including skill, time, effort and the amount of care. Even the best of products is going to fail if not used, and the amount of care.

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Conditions

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