Dear reader,

The latest figures from Japan about complications due to dental implants are indeed alarming. While officials seem quick to downplay the issue, blame cannot be easily transferred to only a few bad examples in the dental community.

Of course, there are problems with training when clinicians with no former surgical experience are able to gain certificates for placing implants through courses that run over just a single weekend. The other side of the coin is the dental implant industry, whose interests are not always compatible with those of the patient.

While big manufacturers invest a great deal in clinical testing, a number of smaller companies have entered the market in recent years that simply duplicate designs. Therefore, it is not an exception that nowadays a number of implants are thrown on the market with only a few months of clinical testing or even no testing at all.

Unfortunately, with most of these implants, patients have more or less become guinea pigs for medical devices on the edge. These implants, patients have months of clinical testing or even an exception that nowadays a number of implants are thrown on the market.

The first law on dental technicians, introduced in 1969, legalised this profession and issued them with the authority to provide patients with removable full and partial acrylic dentures only. This regulation, however, was never really enforced for unknown reasons. Therefore, it has become common for dental technicians to also place fillings, fabricate and place fixed dentures, and perform orthodontic treatment and even extractions without the necessary education. As a result, no new registrations of dental technicians have been permitted since 1989.

Last year, the Indonesian government announced legislation to stop dental technicians from performing dental treatment. This regulation was originally planned to come into force six months later in order to give the government time to implement short- and long-term planning and to reach consensus among all stakeholders on this issue.

The Indonesian government has demonstrated its willingness to improve the nation’s dental health by committing itself to the establishment of a universal health-care coverage system. However, it also time to evaluate the dental workforce shortage, and start distinguishing clearly between the authorised roles of dentists, hygienists and dental technicians. Moreover, re-sisting globalisation is like defying the law of gravity; therefore, increasing the quality and quantity of the dental work force based on need is necessary for competing in the global market.

Yours sincerely,

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