

Newsfeature

Tried, tested, trusted

Eddie Scher looks back over 25 years of his hugely successful dental implant certificate course and shares his views on the changing face of clinical practice

Dentistry Magazine: You celebrate 25 years of your implant certificate course this year – how does that feel?

ES: I can't believe how the time has flown! We've probably had 600-700 students pass through the practice on our training courses over the last 25 years.

It's something I'm very proud of. We've always filled every course we've ever put on; there are many courses around and knowing that mine is one people want to attend is very humbling.

And I'm still in touch with most of my students – they are probably my main referrers these days. The only cases I tend to see are the difficult ones!

But that reassures me that people are listening to what I teach: a key part of the course is helping dentists understand what constitutes a complex case, and when to refer things on.

DM: How did it come about?

ES: I was asked to give my first course way back in 1988 by a dental company, and I realised very quickly that it wasn't possible to educate someone properly about dental implants in just one day.

I pushed for it to be two days, but at the end of the weekend, I realised that I still hadn't told the delegates anywhere near enough to be able to go out and start placing implants themselves.

That was back in 1989, and at that stage I decided I couldn't compromise myself, or the people coming to listen to me, in that way, and set up my own course.

I started out running it over about nine months and within a year or two I had so many delegates that I was having to run three courses side-by-side!

It's changed format a little bit over the years, before settling down into the current format. For a while, we looked at a six-day programme that ran in one go, but although we covered all the information we needed to, I was never satisfied that there was enough time for reflection.

About ten years ago we moved to the current system, which is a 10-day course that runs over two days a month for five months. This approach has been really popular over the years.

DM: Who is the course for?

ES: Often, our students have a lot of knowledge about dental implants in the first place – but they've picked this knowledge up from weekend courses or evening lectures, without having gone on a formal teaching programme.

They often may have placed some implants before realising how little they understand, and our course is the perfect jumping off point to start rectifying that.

But even with that said, we actually aim the course at someone who has no knowledge of implants whatsoever.

I always apologise to the students who do have some knowledge for going through this introduction, but I point out that I do something like 250-350 hours of verifiable CPD hours per year, and I'm still learning new things, or having my existing knowledge reinforced.

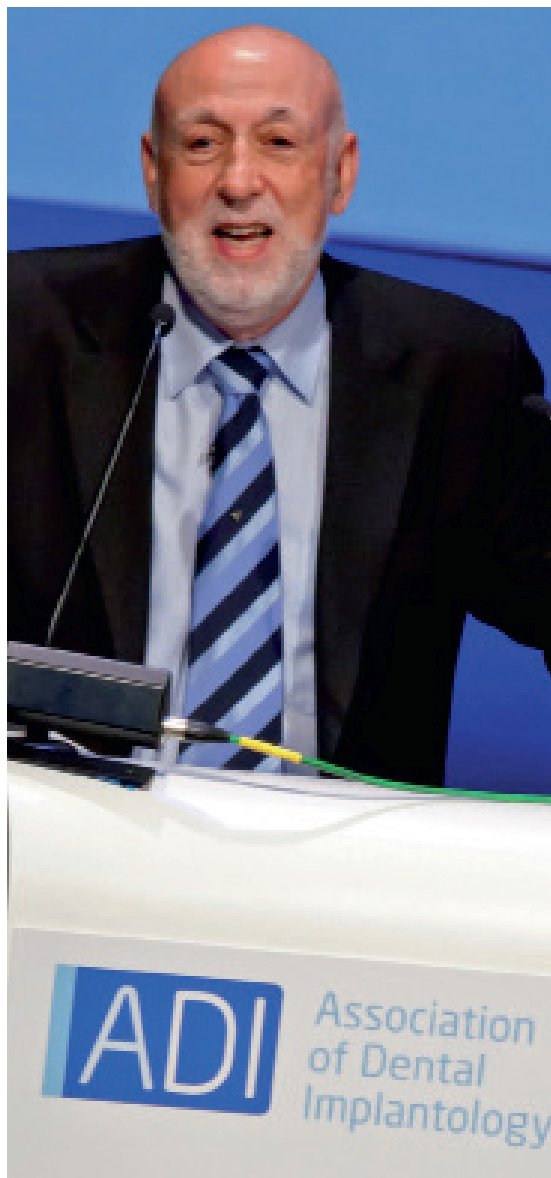
I speak at many congresses every year, and I always make sure to sit and watch the other speakers while I'm there, so I often end up seeing a lecture twice. The amount of extra information I pick up the second time is unbelievable!

But it's more than that: when I go to a lecture and hear the lecturer teaching what I do, I call it reinforcement. I revel in the fact that I can look a patient in the eye, make a recommendation, and know that other people are recommending the same thing.

I think it's very important that things are repeated and reinforced, and of course – that's all part of education.

DM: What can dentists expect to get out of your course?

ES: The delegate that completes my course will have total knowledge about every aspect of implant dentistry. They



will be able to diagnose and treatment plan a case – and be able to recognise a complicated case. Crucially, they will be able to recognise what they can do, and what cases they should refer.

It's mandatory that they only attempt very simple cases in the first instance, and that they must be mentored, so we reinforce that very strongly. That isn't just since the GDC first said it a few years ago, either – we've been making this point to our students since about 1990!

Understanding when to refer is a key part of the training. It's probably the most important part of my course in some ways, because that's what saves you from getting into trouble.

DM: How big a role does the issue of consent play in your teaching?

ES: Consent is a huge issue in dentistry at the moment, so it goes without saying that we focus on it heavily. It's a huge part of implant dentistry in particular and I think any course without a discussion of it is incomplete.

Consent is an ongoing process – it isn't just getting a signature at the end of a letter. Consent is making sure that at each appointment the patient understands what's happening, and that the process is open for discussion at any time.

Specifically, it plays heavily into the main model we use for reflection. We get our students to write treatment planning letters between the days they attend the courses, moving on from writing up simple cases to more complex ones.

Most importantly though, the students leave with an understanding of how to obtain proper, informed consent for the treatment they plan to carry out. I think that's a really important part of what we do. Not only do our students learn about all the different aspects of clinical implant dentistry over the 10 days of the course, we also make sure they are capable of obtaining and documenting consent effectively.

DM: How has the course changed over time?

ES: Certain concepts, like knowing when to refer, or the focus on mentoring, have always been a part of the course. But over the last 10 years in particular, I've found myself paying even more attention to them, and to areas such as obtaining and understanding consent as well, as the practising climate has changed for all of us in dentistry.

But that's only one aspect of it – the clinical content has changed every year as well, because we always make sure that it keeps in step with the latest techniques.

For instance, next year we will almost definitely be involving digital impression taking. This is something we're introducing to the practice at the moment; we've waited until the technology is consistently effective and dependable before moving forwards with it, but now we're satisfied, it's in the course.

Platelet-rich plasma (PRP) is another technology that's starting to gain a lot of traction now... I've been using it for 15 years! It's been part of the course for a long time; I'm a big supporter of it because of how it helps the healing of the tissues and prevents infection.

Another example is piezosurgery. There is always a piezo unit on my operating table, because it's such an important piece of equipment as far as I'm concerned. You can be so gentle with piezo; you can cause so little heat with it – we're talking something like 18% of the heat of a surgical drill – and the patient's recovery is so magnificent when using it that to me, it's madness not to.

All these innovations have come into the course over time, and I'm sure many more will follow in future!

DM: How do you hope you've helped your students over the years?

ES: I'm desperate to impart knowledge to my students that helps protect them from any problems in future. But there is more to it than that.

Patients want a professional opinion; they don't want to feel like they're being sold something, or to be told to go off and do their own research, particularly when the treatment is as complicated and expensive as something like dental implants.

There are a lot of factors that are crucial to the success, survival or failure of dental implants, and they all need to be put together and computed in order to decide what's appropriate for that patient.

I want to give my students all the knowledge I can – so they can actually look their patients in the eye and say: 'I recommend this.' If I have achieved that over the last 25 years, then I'm happy! **D**

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EDDIE SCHER'S IMPLANT Certificate Course runs from September 2017. It is accredited for the MFGDP, MGDS, FFGDP and gives 72 hours of verifiable CPD, and delegates are eligible for ICOI fellowship without further examination. For more information or to book, call 020 7584 9833 or email reception@walpolestreetdental.co.uk.