Survey shows fear of being sued often leads to stress and anxiety for dentists

By DTUK

LONDON, UK: Often, dentistry-related stress is only looked at through the lens of the patients’ experience and their fear of dental procedures. A recent survey, however, has found that there is an entirely different source of stress and anxiety for dental professionals in the UK: the fear of being sued, receiving a claim or complaint, or being the subject of an investigation by the General Dental Council.

The survey was conducted by Dental Protection, part of the not-for-profit Medical Protection Society for doctors, dentists and healthcare professionals. It asked more than 1,100 UK-based dentists for feedback regarding the sources of their work-related stress, and 77 per cent responded that the fear of being sued by an unsatisfied patient had caused them to become stressed and anxious.

The results of the survey come just months after the findings of an analysis published in the British Dental Journal showed that general dental practitioners exhibit the highest levels of stress and burnout among UK dentists. The findings of this research suggested that, while practice ownership could possibly reduce burn-out due to regulatory stress, it does not positively influence patient-led stress for dentists.

Remarking upon the findings of the survey, Dr Raj Rattan, MBE, Dental Director at Dental Protection, said: “Stress can impact on a dentist’s health and practice in a number of ways. It can affect confidence, clinical judgement, morale and even lead to performance issues. Research confirms that high stress levels affect performance and increase the potential for adverse outcomes of error. These may in turn spark patient complaints and claims and a self-perpetuating vicious circle is established.”

“Modern life is full of challenges, stressors and pressures—and the dental profession is no exception. Dental Protection would like to encourage dentists to seek help and advice to manage the condition before it causes irreversible changes to health and well-being,” he concluded.

A recent survey of more than 1,100 UK-based dentists found that the fear of being sued by an unsatisfied patient is a primary source of work-related stress. (Photograph: VH-studio/Shutterstock)

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Case report presents rare incidence of retained tooth in nasal cavity

By DTI

AARHUS, Denmark: Besides everyday diagnoses, there are some real rarities to be found in the world of medicine. This was true for a patient at the Department of Otorhinolaryngology, Head and Neck Surgery of the Aarhus University Hospital. After two years of a stuffy and runny nostril and the loss of his ability to smell, doctors discovered that a retained tooth growing in his nasal cavity was the reason for his symptoms.

A CT scan of the 59-year-old patient revealed a mucus-covered mass on the floor of his nasal cavity. As a result, the doctors suspected that the patient had either a dermoid cyst—a growth that some people are born with that contains structures such as hair, teeth, fluid or skin glands—or an impacted tooth.

The medical team decided to use an endoscope to perform a surgical extraction. The examination of the extracted mass revealed the retained tooth, which was covered with inflamed nasal tissue.

Usually, a condition like this is caused by trauma, infections from a cyst, or developmental disturbances such as cleft lip or cleft palate, but the doctors had no obvious explanation for this particular case, as stated in their report.

“Our patient most likely had the intranasal retained tooth most of his life, but had late onset of symptoms,” stated co-author Dr Milos Fuglsang, who had carried out the tooth extraction.

According to the BMJ, only 23 patients have been identified as experiencing similar incidents over a period from 1959 to 2008. It is most common in males and more common among adults than children.

For Fuglsang, this was the first case of its kind in his medical career.

The case report, titled “Retained tooth in the nasal cavity: A rare cause of nasal congestion”, was published on 21 February 2019 in BMJ Case Reports.