

THE READERS' CORNER

(Editor's Note: The Readers' Corner is a regular feature of JCO in which orthodontists share their experiences and opinions about treatment and practice management. Questions are sent periodically to JCO subscribers selected at random, and the responses are summarized here.)

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How long have you been in the practice of orthodontics?

Of the respondents to this online survey, 68% had been practicing for more than 20 years, 19% had practiced between 10 and 20 years, and 13% had been in practice for less than 10 years.

Do you use intraoral scanners in your practice?

Sixty-two percent of the respondents reported using intraoral scanners. These users listed a number of advantages over impressions, including enhanced precision for aligners, patient friendliness, and neatness of the procedure. Those who did not use scanners mentioned concerns about costs, a steep learning curve with developing technology, and increased chairtime.



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If you do not own a scanner, are you planning to buy one in the near future?

Half of the clinicians who did not own scanners said they were planning to buy them in the near future, 25% believed they might do so, and 25% said they would not.

Representative comments included:

- “Yes, because we want to use it for orthognathic preparation, clear aligners, and laboratory appliances.”
- “Yes, they are a big improvement in saving time, providing patient comfort, and marketing.”
- “When they are vastly cheaper and the technology has plateaued.”
- “I don’t have one, but am looking provided (1) the price is cheaper; (2) the scanning time is shorter; and (3) it is compatible with Invisalign.”

If you do own a scanner, which brand do you use, and why?

The Align Technology iTero was by far the most popular model, used by 48% of the respondents. This was followed by the 3M Unitek True Definition, with 17%, and the Ormco Lythos, Carestream, and 3Shape Trios, each with about 10%.

Compatibility with Invisalign or Suresmile was the most common reason for selecting a particular brand. Other factors included cost, size of the wand, and integration with current practice software.

What do you use the scanner for (diagnostic records, appliance fabrication, aligner prescriptions, etc.)?

A little more than half of the respondents used their scanners for all three of those general applications. The rest were evenly divided, using just one of the three.

Other specific uses mentioned by a few clinicians included treatment simulations, case setups, lingual-appliance prescriptions, and fabrication of appliances such as rapid palatal expanders, Herbst appliances, splints, and transpalatal and lingual arches.

Do you take your own scans or delegate them to assistants?

Ninety percent of the practitioners delegated their scans to assistants.

Has the scanner improved your practice efficiency? If so, how?

Fully 84% of the respondents felt the scanners had improved their treatment efficiency. Specific comments included:

- “Yes, by allowing instant and accurate model analysis without the need to pour, trim, and mount models. Also by allowing for digital storage of images for future reference.”
- “Yes. We quickly review the models and show them to new patients during their initial appointment. We also get aligners much quicker and more accurately.”
- “Yes and no. It is faster at creating SureSmile scans and more efficient for aligners, but not for retainers, as we don’t have a three-dimensional printer yet.”
- “No, not really. It takes longer than expected, but the patients prefer it over impressions.”

How do you handle asepsis/disinfection of the scanner heads?

Many of the clinicians simply responded that they “followed the manufacturer’s instructions”. These included using disposable tips for the wands

and disposable sleeves for the head; cold-sterilizing the heads; and wiping down the monitors, cords, and wand handles.

How do your patients respond to the scanner compared to impressions?

Eighty-six percent reported favorable patient responses, while the other 14% said they’d had mixed responses. Positive reactions focused on comfort and the perception of keeping up with the latest technology; the most common negative reaction involved the time required for scanning compared to impressions.

Do you think that the return on investment has been worthwhile?

Sixty percent of the respondents said yes, 20% said no, and another 20% said it might be worthwhile at some point in the future.

Do you have any other comments you would like to share regarding intraoral scanners?

Answers included:

- “They will only get faster, cheaper, and better with time. This is the future of our profession.”
- “I believe that intraoral scanners will facilitate and improve our communication with other specialists and technicians.”
- “The lab I use has not been pleased with the images they receive. While they look detailed on the screen, the lab must spend time manipulating them in order to use them effectively.”
- “Some companies do not accept all the different files done by various scanners.”
- “Need faster scan times with less patient irritation, along with the ability to manipulate your models chairside.”
- “Intraoral scanners are ideal in that they are noninvasive, highly accurate, and a more comfortable experience for the patient.”
- “If you are not planning to get one, then you should be planning your exit strategy from the profession as you are becoming the dinosaur you never wanted to be.”

JCO would like to thank the following contributors to this column:

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