

## The key to adult orthodontics

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Let me tell you a story about my introduction to interdisciplinary dentistry. After I had been in private orthodontic practice for about 5 years, I thought that I had a good grip on the clinical knowledge that I needed to manage my patients. In fact, I had just secured the adult referrals from one of the finest restorative dentists in my community. Life was good.

Then one afternoon, my receptionist received a call from this fine restorative dentist, who told her that he wanted to take me to dinner to discuss something. Since I was busy with a patient, I asked my receptionist to find out why he wanted to take me to dinner. She stated that he would tell me when we met. Frankly, at that time in my life, my wife and I were busy raising children, and going out for dinner with a referring dentist wasn't that convenient. But he was a good referral source, and I did not want to offend him. So, I agreed to meet with him.

What I did not know was that he had similarly called a periodontist, an endodontist, a pediatric dentist, and an oral and maxillofacial surgeon and invited them to the same dinner. In fact, when we met, we were all rather surprised that the group was so large. This nice restorative dentist had reserved a small conference room at a local hotel and had prearranged for dinner to be served to our group at his cost. Nice guy. But I knew that there must be a motive for this gathering. Then, when dinner was finished, the restorative dentist asked the servers to clear the plates, leave the coffee, and close the door on their way out of the room.

When the door was shut, the room became quiet. We, the "specialists," were waiting for the explanation of why we had been called together. Then the nice restorative dentist shared his vision with us. He told us that he was changing his style of practice. No longer was he going to extract any teeth. He would send all extractions to the oral surgeon at the table. No longer would he restore teeth in children. He would refer all children to the pediatric dentist sitting to my right. No longer would he do any more root canal therapy. He would refer all of

these patients to the endodontist across from me. No longer would he treat periodontal patients. He would refer those to the periodontist who was sitting to my left. Finally, he had never done any orthodontics and said that he would refer all of his orthodontic patients to me. You see, his plan was to limit his practice to implants and esthetic dentistry. At that time, these were 2 new and emerging areas in dentistry.

I thought this was great: a new pipeline of orthodontic patients. But here was the "catch." In exchange for receiving his patients, we would agree to meet with him as a group, on a regular basis, to keep him educated about all aspects of dentistry. In this way, he would know how we as specialists could help his patients. At this point, I was wondering why would I want to meet with a group of dentists from different disciplines. After all, I am an orthodontist. I don't need to know anything about dentistry to treat my patients. But just when I was thinking these thoughts, the nice restorative dentist looked directly at me and said, "And you, the orthodontist who knows nothing about dentistry, perhaps you might learn something by meeting on a regular basis with 'real' dentists." That was certainly a provocative thought.

So, since I did not want to lose his referrals, I agreed. That dinner was 26 years ago. The interdisciplinary study club that was born that evening has been the single most important continuing education vehicle in my professional career as an orthodontist. This group is my lifeline to treating adult patients. In fact, I wonder how other orthodontists can manage to keep up with all of the advances in dentistry that affect the treatment plans of the complicated multidisciplinary patients who are referred to orthodontists today. Do you treat adults? Do you belong to an interdisciplinary study club? Why not?

