

THE ALABAMA

# Composite



DEDICATED TO THE CONCERNS  
OF GENERAL DENTISTS IN ALABAMA

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*Spring Blossoms Abound*



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# Editor's Notes

Bill Chesser, DMD, MAGD

## REFLECTIONS

Your Editor has just passed a Milestone in his dental career. My fellow classmates and I, in the Class of 1967, have just celebrated our 50th Anniversary, while attending the 2017 Alumni meeting in Birmingham. Dean Reddy presented each attendee with a Medallion which signified we had indeed survived for this momentous occasion.

Truly mind-boggling are the differences in 1967 lifestyles and dental procedures when compared to 2017! Our class included only one female, Dr. Joye Wright, of Ozark. Today the ratio is close to 50/50.

We were in the midst of the Viet Nam war in '67, and many of us were subject to the draft. A major portion of us volunteered for the military or public health services. A few entered private practices or residencies right after graduation.

Cell phones, computers, laptops, Facebook, even most dental insurance – none of these were even imagined. Today, one cannot imagine life without them!

Amalgam was the restorative material of choice, silicate for anterior restorations, and gold the ultimate choice for a posterior restoration. My, how things have changed! Today, we have a myriad of dental materials from which to choose, primarily driven by esthetics. The ability to bond restorations to teeth revolutionized restorative dentistry.

Implant treatment is an integral part of dental education today, but in 1967, this option was still many years in the future. Does anyone remember the “blade implant” or the “ramus frame”? Both history. Today’s implant therapy for replacing dentition has a success rate that rivals most other procedures of treatment.

I could go on and on, but let me note such advances as the use of lasers, cone-beam tomography, cad-cam restorations, and digital impression scanners—all stunning developments in dentistry.

As I contemplate the last 50 years, I am faced with the awesome mystery of the next fifty! What will today’s grads of 2017 learn before their fiftieth reunion in 2067? How will dental education change? Will mid-level providers become a national reality? Will we see an end to dental decay or periodontal disease? Who knows?

Research already exists to arrest decay and re-mineralize tooth structure. Growing teeth from stem cells is another idea being explored. I have no more idea what the next fifty years will bring than I did 50 years ago! But I guarantee that the trends in advancing technology for dentistry and medicine will be phenomenal. My advice to our newly graduating friends: Hang on, keep up, and enjoy the ride!



# President's Message

Toni Neumier DMD, MAGD



## GREETINGS TO ALAGD MEMBERS AND FRIENDS!

Pink and white Azaleas are blooming now, and students are in full Spring-Break mode. I now have the enjoyable opportunity to communicate with you in our Spring Composite. In our last newsletter, I addressed four goals for ALAGD in 2017. Let's revisit them now.

**My number one goal** is to recruit more new dentists to AGD, as well as to reactivate inactive members. Coincidentally, National AGD plans to start a recruiting campaign March 31st. I implore that each of you call your friends to join or reactivate in AGD. Membership is our strength!

With AGD's recently redesigned website, we are hoping to make AGD more recognizable to the public, as well as to all dentists. AGD has great power in advocating our positions in the current health care system, and more members means a greater opportunity for spreading the word.

Our own ALAGD Student Chapter was created just last year, and national AGD awarded \$500 to aid in its success. 51 student members of D1 have been recruited, and D2 student Bright Chang has volunteered his talent and time to serve as president. A proposal has been written for forming a student organization at UAB dental school.

**My second goal** is to offer C.E. courses which will help members stay on top of changes in our profession. We also hope to encourage more AGD members to become Fellows and Masters in AGD. There are some excellent courses now in the planning stages, details TBA.

**The third goal** is to provide a greater variety of educational programs at our annual meeting, to provide the most current dental knowledge to all attendees, and offer opportunities for networking with our professional colleagues. Our brochure will soon be available online, and online registration and Hilton Hotel reservations will also be offered. Thanks to Dr. Derrick Mendez for donating his talents to make this possible.

**Our fourth goal** is to utilize social media to advertise ALAGD, as well as to touch base with each other. Check us out at ALAGD.com, Facebook, and Instagram.

Our Annual Meeting will be held **September 7-9**, with

the theme "Leadership in Oral Health". To facilitate time for travel and fun on the beach, Saturday's schedule is for only a half day. Our Keynote Speaker will be a past AGD president, Dr. Jeff Cole.

A welcome reception will be open to all attendees, and there will be e-poster presentations, members' case presentations, and presentations from CEO's of commercial labs. Rules and deadline dates for these will be posted soon online. I strongly encourage each of you to consider sharing your interesting or challenging cases with others at our meeting.

Dentistry has made astounding changes in the last ten years, and we must keep up with the current trends to best serve our patients, to better communicate with our dental labs, and to make our daily jobs easier. Please register online for our 44th Review of Dentistry Annual Session. And remember, stay tuned to our ALAGD.com website. See you in September.

Toni Neumeier, DMD, MAGD

President, 2017 Alabama Academy of General Dentistry

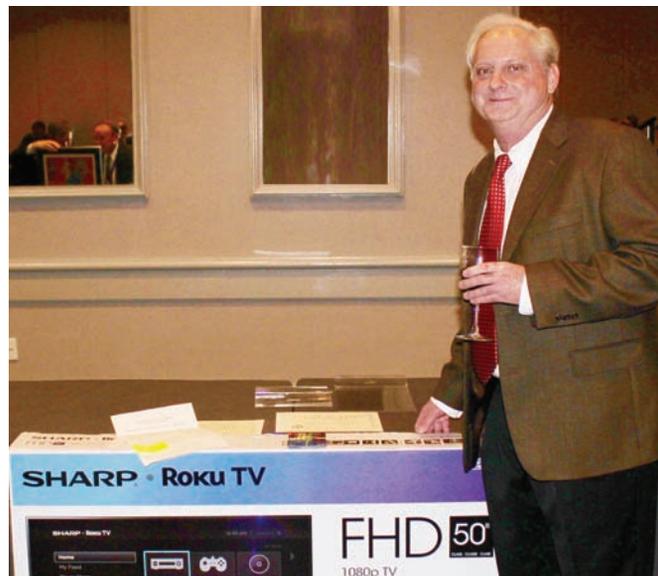


*Dr. Neumeier introduces Bright Chang, D2 Student and President of the newly formed Student AGD, to the Board of Directors.*

# 2017 ALUMNI MEETI



*Dr. Gary Myers, Alumni President, presents Dean Michael Reddy with an Endowed Chair by the Alumni Association.*



*Dr. Bob Jones wins the BIG prize at the President's Reception.*



*Dean Emeritus Charles McCallum chats with Dr. Jim Jenkins at the 1967 reunion.*



*Dean Michael Reddy speaks to the class of 1967 while Class President Dr. John Fleming looks on.*



*Installation of ALAGD Officers for 2017 (l-r) Gary Myers, Executive Director; Bill Chesser, Editor; Toni Neumeier, President; Derrick Mendez, President Elect; Ross Isbell, Vice President; Rachel Osborne, Immediate Past President.*

# NG/CLASS REUNION



*The class of 1967 gathers for the 50th reunion during the Alumni Meeting.*



*Past President Bill Ingram explains his point to newly elected Vice President, Ross Isbell and Past President Bob DeShazer.*



*President Neumeier and Immediate Past President Rachel Osborne.*



*Class of 1967 attending the 50th reunion.*

# HOWARD GAMBLE MEMORIAL SENIOR SEMINAR



*Mr. Doobrow consults with some of the seniors after his program, "What They Don't Tell You in School, But I Will".*



*Dr. Gary Myers introduces Mr. Todd Doobrow to the Seniors.*

## AGD D1 PIZZA LUNCHEON

The meeting started with the D1 students watching a YouTube video introducing AGD. Afterwards, Drs. Scarbrough, Mendez, and Neumeier further explained AGD and its benefits to students. The AGD website, sample publications, and CE transcripts were shown to the students by the Chapter President. To wrap up the meeting, D3 and D4 representatives discussed why they valued the AGD student membership. In total, 51 D1 students signed up for the AGD/ALGD student membership in Fall 2016.



*D1 students being introduced to AGD at a pizza luncheon.*



*Speakers (left to right): Justin Bishop, D3; Mac Hendrix, D4, Dr. Roddy Scarbrough, DMD, FAGD; Dr. Derrick Mendez, DMD; Bright Chang, D2, UAB SOD AGD Chapter President; Dr. Toni Neumeier, MS, DMD, MAGD, UAB SOD AGD Faculty Representative and Local Constituent Chair.*

# VIEWPOINT: WHAT ABOUT US?

*By Dr. Ray McLaughlin, Past President ALDGA*



*Dr. Ray McLaughlin*

Access to care—still the big buzz words to those of us in health care and, in particular, my profession of dentistry. Sadly, what I have seen are limitations dictated mainly by insurance companies and their varying policies.

One obvious example is a major company in our state which hard-sells subscribers to buy their dental plans, but which offers nothing but minimal care coverage for one year, plus artificially low reimbursements paid to network dentists that has seldom increased in years.

This turns out to be little more than a “lay-away” plan, offering something the patient might pick up next year. Not really insurance, when he or she is stuck paying the company for benefits unavailable while needing immediate care. As a result, said patient ends up postponing care, while waiting it out – resulting in more expensive and possibly uncomfortable dental treatment.

By coincidence, JADA’s February, 2017, issue offered a study on access to care, addressing unmet needs in dental health. Historically, dentists in rural areas are paid considerably less by the insurance companies for some procedures than in urban areas.

I propose the solution to attracting new practitioners to rural areas would be an equitable compensation applied equally to all areas, rural and urban. This would allow more investment in facilities in rural areas, as well as the purchase of newer equipment, and the ability of the dentist to pay for it. It could be an enticement to attract graduating dentists to rural areas, instead of requiring a mid-level provider.

Corporate dental practices are shying away from less-populated areas because, even with a cattle-call schedule approach, they have a difficult time covering costs. Treadmill dentistry will only result in rushed-up care, uncomfortable patient experiences, and yet another generation of dental phobia.

This equality in reimbursement would be a huge step in dental practice for rural settings. It would help fully-trained doctors to earn a fair salary while serving rural areas. Right now, they are fleeing these regions because they know they will be underpaid. About half of our dental school grads become specialists, choosing to eventually practice out of the very state which provided their excellent training.

If I were starting over, I would discourage new practitioners from participating in contractual dentistry, unless this huge inequality is met. As dentists, we provide an important service to our patients and our communities. We should not be working for a third party! It is too late for me, but not for you new doctors. Go out and make a difference!



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