## Introductory Notes by Dr John Clark

I'd like to thank the Standing Committee on Health, Ageing, Community and Social Services in allowing me to contribute towards this Inquiry into the Sourcing and Supply of Dental Prostheses and Appliances to Australian Dental Practitioners from Overseas (Asia).

If committee members have had the time to visit my dentalaware.com.au web site, they would appreciate that I first became aware of the sourcing and supply of dental prostheses and appliances from Asian labs in about 2010, when my lab tech first advised of his deteriorating business. Since that time, upwards of six Brisbane dental labs have now closed and the largest local laboratory, Brisbane Gold and Ceramics has only just recently been bought out by one of the largest dental laboratories in the world, Modern Dental of China!

Committee members will understand that this issue covers a lot of ground and so, in the interests of brevity the following is a quick summary of my views upon which I am happy to answer any question.

No matter what degree of spin is put forward by dentists that use Asian labs, dentists that use these labs do it to decrease their lab bill and increase their profit margin.

My specific objections to this practice are as follows:

a lack of patient awareness (consent) that their prosthesis is being sourced from Asia,

the discounted lab fee is rarely if ever passed on to the patient,

a lack of patient awareness that their unknowing involvement in Asian sourced labwork is causing the loss of Australian jobs

the lack of consideration by dentists of any 'pro Australian made' values that the patient might have,

the collapse of the Australian dental technician industry,

the deterioration of quality standards within the Australian dental industry brought about by dentists choosing to use overseas labs.

not acting in the best interests of the patient,

the deceptive measures employed by dentists in concealing their use of Asian labwork,

the gagging of debate on the subject within the ADA both locally and federally,

the accepting of inducements/gifts from outsourcing companies contrary to paragrapgh 8.11(e) of the Dental Board of Australia's Code of conduct, and

the lack of reporting of adverse events (poor fit/colour etc) as required by the TGA.

## Recommendations

This is a difficult thing to come up with when you consider how ingrained deceptive practice now is in Australia. For example, consider the ADA's Federal President Dr Karin Alexander's response to NIBs decision to outsource some of its dental (and medical) patients to Thailand in October 2013. As reported in the media, Dr Alexander was quoted as follows..

"while prices for offshore treatment seemed cheaper, there was no way that the quality of work performed overseas could be guaranteed, and she questioned NIB's claim that it could "quality-assure" work done in Asia.

"We have a very high level of regulation in Australia to ensure safety and we also have rules about security of the workforce and those elements aren't there in most Asian countries," she said.

"Dentistry is rarely a one-off operation, but instead requires ongoing consultation, and that requires an individual dentist who knows an individual and what their issues are. Any work done overseas can't really be followed up anywhere in Australia."

The hypocrisy of this statement is revealed when you consider that approximately 60-70 % of Australian dentists now use Asian laboratories and the idea that the local industry can say the overseas dentist is crap but the technician is ok is a nonsense. There is no mechanism in Australia for assessing quality of a clinician's skills beyond dental school (other than asking a local technician for a recommendation) and the fact remains that Dr Alexander could no more guarantee the quality of an Australian dentist than she could a dentist from Thailand. Dr Alexander's comments on workforce security are also a joke as the ADA's inaction on this subject for many years, has now led to the decimation of the local tech industry.

With this in mind (endemic self interest and deceptive practice) and a declining industry, I feel the only recommendation that can be made is for the ACT government to override the current TGA loophole that allows for the use and importation of Asian sourced labwork under the 'Custom Made Medical Device" exemption and instead mandate that all ACT dental prosthesises be fully fabricated within Australian located dental laboratories.

The ACT Government should also release a press statement advising why they have made such a decision which will give publicity to what has been going on. The only

reason outsourcing has survived is because it has been hidden by the clinicians and the ADA has acted to protect their dentist members by gagging any negative debate on the subject (the ADAQ even going to the trouble of enacting a local bylaw to prevent the publishing of a letter from my tech!!).