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The Dental Board of Australia

Breaches of the Code of Conduct for Registered Health Practitioners - Dentists

My name is John Clark, I am a Brisbane based dentist working both full time for Q Health and part time privately and I write to inform you of my concerns that the rewards scheme actively promoted by an Australian company that imports Chinese dental prosthetic items, results in all dentists who participating in the program acting contrary to the Code of Conduct for Registered Health Practitioners.

Background

For approximately 2 years I have been assisting the Australian Dental Tech Industry in their efforts to expose the non consensual use of Asian (predominantly Chinese) dental labwork by dentists, which is causing the local dental tech industry to collapse. Once you get through all the smoke and mirrors that will come from dentists that use Chinese lab work, it all comes down to greed, with dentists off shoring their labwork, to reduce their lab costs, but not passing on the savings to the patient. All of this is non-consensual in that the patient is completely unaware that they are being charged the same fee for a crown which is being sourced and fabricated in China for \$20, in comparison to a crown which typically costs \$400 to fabricate in Australia. Patients are not informed of the substitution of an Australian-Made crown for a cheaper Chinese product.

One of the marketing tools the largest importer of Chinese labwork (Southern Cross Dental Laboratories – SCDL established 1983) has in place, is the provision of a rewards scheme based on client expenditure – not unlike the Coles Fly Buy scheme! Further detail is available on the SCDL website at <http://www.scdlab.com/rewards/scdl-2012-how-it-works>.

Once you review the program, it is clear that all dentists receiving rewards from SCDL are acting contrary to Section 8.11 paragraphs b, c, d, e and h of the Code of Conduct.

Noting that approaching 60% of Australia's dentists are now using Asian sourced dental prosthetic items entirely without consent of the patient and that SCDL has the lion's share of this market, it is recommended that the Dental Board advise SCDL to close down its

rewards program immediately. It is also recommended that the Dental Board immediately forward a letter to all Australian Dentists on their obligations under Section 8.11 to observe good practice and not accept any inducements that may be seen to effect their prosthetic prescriptions.

I feel any continuance of the rewards scheme and subsequent confirmation of dentist participation in the scheme would provide legal grounds for patient litigation of their dentist and indeed, perhaps members of the Dental Board.

I also believe that any dentist off shoring their lab work to Asia in lieu of using local Australian lab work, is not acting in the best interests of the patient (Section 8.11 para c.). Once the facts concerning supposed TGA compliance of Asian products are understood (please refer to the attached letter by Dr Matthew Athanassiadis which was published last year in the ADAQ News), it is clear that a measureable difference in the auditing of material standards exists that the patient should be made aware of. Though the TGA has yet to close the loophole that allows for the importation of Asian labwork, the Dental Board, I believe, has the authority to advise dentists that they do not act in the best interests of the patient, by their choosing to use any item of Asian labwork without consent of the patient.

Further, I am aware of the practice of many dentists misrepresenting their lab fee costs to their patients. For example a patient visiting a technician for a shade appointment takes the opportunity to winge over the excessive \$2000 lab fee her implant retained crown is costing her (as advised by her dentist) not knowing that the actual fee is \$1100 and the lab is being misrepresented. The lab owner, whilst justifiably upset, dare not advise the patient of the misrepresentation for fear of the dentist taking his business elsewhere. Because this behaviour is ongoing, it would seem the requirements of Section 8.12 are not clear enough to the average practitioner and so it is recommended that this section be specifically amended to have a new 3rd sub paragraph added to paragraph f which reads; 'not misrepresenting the cost of any incurred lab fees to patients'.

While it is clear that many members of Australia's dental profession no longer function in the best interests the patient, I remain hopeful that the Dental Board does and will accordingly act on my recommendations as soon as possible.

Summary of Recommendations

1. That the Dental Board advise SCDL to close down its rewards program immediately.
2. That the Dental Board immediately forward a letter to all Australian Dentists on their obligations under Section 8.11 of the Code of Conduct to observe good practice and not accept any inducements that may be seen to effect their prosthetic prescriptions.

3. That the Dental Board advise all dentists, prosthetists and prosthodontists that they do not act in the best interests of the patient, through their choosing to use any item of Asian labwork without informing, or without consent of the patient. It is further recommended that 'being informed' of an intent/desire to use an Asian source lab item, shall include the patient being given a copy of Dr Athanassiadis's letter of explanation.
4. That the Dental Board amend Section 8.12 (f) of the Code of Conduct by adding a new 3rd sub paragraph which reads; 'not misrepresenting the cost of any incurred lab fees to patients'.

Sincerely yours,

Dr J.A. Clark
Principal Dentist
Browns Plains Oral Health

Attachment A. Letter by Dr Matthew Athanassiadis