



The share of implant treatments in dental claims in Iran

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ABSTRACT

Introduction: Dental malpractice is the failure of a professional person to render appropriate services through reprehensible ignorance or negligence or through criminal intent, especially when injury or loss follows. Since dental implants have gained a special place in modern dentistry and this new treatment is a costly one, paying more attention to the prevention of malpractice is more important. In this study, we decided to survey the proportion of complaints of dental implant treatments and compare them to the total rate of dental claims in a period of 5 years.

Materials and Methods: This was a retrospective cross-sectional study. Data was collected in Medical Council of Iran during 2006 to 2011 by the means of a checklist inquiring about the date of complaints, main complaint field, gender of doctor and complainant, degree (specialist/general) of the therapist, and the court decision. In regard to ethical issues, the name of dentist and complainants were not mentioned in any document. Data was analyzed using chi-squared test by SPSS.

Result: From the total 44 dental claims, 93% were for general practitioners and 86.5% of the accused dentists were male. Moreover, 33 complainants were female. In 57% of cases the court found the dentist guilty. The complaints of male dentist in the field of surgery had the greatest percentage (50%). The second field according to complainant frequency was implants and prosthodontics accounting for 27% of all dental claims. There was only 1 implant complaint submitted about a specialist, and all the others were from general dentists. There was no gender difference regarding dental implant complainants.

Conclusion: According to study findings, implants and prosthodontics complaints are in the second rank of dental claims. Therefore, paying greater attention to the training process in universities and continuing training programs is necessary.

Keywords: Complaint, Dental, Implants, Claim

Introduction

Despite the increasing facilities and medical equipment and science development, dental practice, like any other medical practice, is associated with mistakes and failures. Dental malpractice is the failure of a professional person to render appropriate services through reprehensible ignorance or negligence or through criminal intent, especially when injury or loss follows [1].

Various factors and causes play roles in the occurrence of malpractice; among them are performing treatments without the necessary scientific and specialty potency, unethical

behavior with patients, increased expectations of patients due to level of public awareness increment. Patient dissatisfaction and prosecution will end in a legal-punitive process for dentists. Condemning dentists has shown an up-going trend in recent years in Iran. This event can cause spiritual impairment and reduced quality of provided services by the dentist; thus, eliminating malpractices should be on agenda of educational systems.

Since dental implants have gained a special place in modern dentistry, traditional treatments such as hemisection has been rendered obsolete and replaced by extraction and placement of implants. Moreover, as this new treatment

is a costly one, paying more attention to prevention of malpractice is more important. According to a published study in 2006, dental implant malpractices have a proportion of 5% among total dental malpractices in the United States [2]. It is noticeable that judicial quarrels show an evident amplification parallel to development of implantology [3]. It seems that inadequate consideration to legal needs in dentistry, especially in the field of dental implants, place dentists in arbitral circumstances [4].

As was published in 2006 in the USA, prosthodontics (28%), endodontics (17%), and reparative dentistry (16%) had the most frequent complaints in dental malpractices. According to this report, dental implants had the proportion of 5%. In the mentioned study, the necessity of profiting professional insurances cannot be renounced.

In one other study published in 2000, it was mentioned that, according to the increase of litigation in the area of dental implants, dentists should be familiar with medicolegal issues in this field [5, 6]. In this study, we decided to survey the abundance of complaints raised from dental implant treatments in a 5 year period in Iran in comparison to other dental claims prevalence.

Material and Methods

This was a retrospective cross-sectional study carried out in the Medical Council of Iran during 2006 to 2011. The aim was to survey the dental malpractice claims which were propounded in this organization.

In the first step, data of linked dossiers was extracted by means of a checklist inquiring about date of complaints, main complaint field, gender of doctor and complainant, degree (specialist/general) of the therapist, and the court decision. Regarding the ethical issues, the name of dentist and complaints were not mentioned in any document.

Then the data were imported to SPSS (version16; SPSS Inc., Chicago, IL, USA) and analyzed with chi-squared test.

Results

The results showed that from the total 44 dental complaints, which were referred to Supreme Court of IRI Medical Council for judgment, the majority were propounded in 2009 (23%) and 2007 (20%). From the 44 accused dentists, 93% (n = 41) were general practitioners and 86.5% (n = 38) were male. Moreover, 33 complainants (75%) were

female. In 57% (n = 25) of the total dental claims, the court found the dentist guilty. Most of the complaints were in the field of surgery (41%), followed by prosthodontics and implants with 27% of the total complains.

Complaints of male dentist in the field of surgery had the greatest percentage (50%) and orthodontics the least (5%). The complaints of female dentist in all fields (surgery, prosthodontics, reparative dentistry, and orthodontics) were equal (n = 1 for each field).

The reason of 24 of the claims (55%) was dissatisfaction with received treatment, 34% (n = 15) had after-treatment problems, and 11% (n = 5) mentioned ethical issues.

The patients' gender showed no relationship with dentists' gender (P > 0.05). From 41 general dentist, about 60% were guilty (n = 24), but just 1 (33%) of the 3 specialists was found guilty. No association was found between the court decision and dentist's gender or degree (specialist/general, P > 0.05). The relationship of the practitioners' degree and the field of complaints are shown in Table 1.

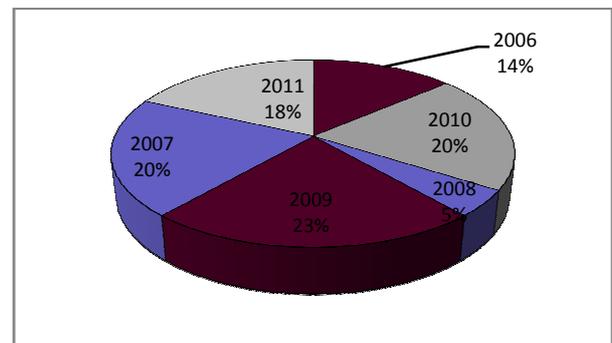


Chart 1. Percentage of dental claims in 2005-2011

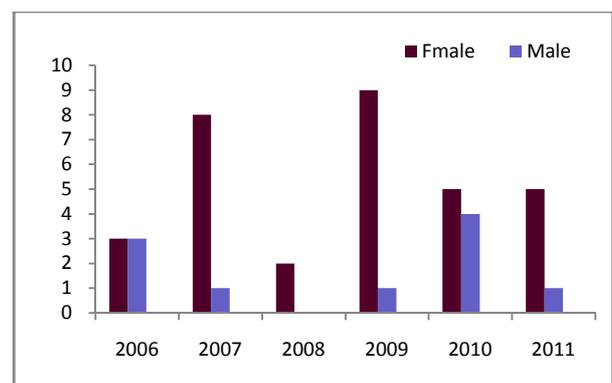


Chart 2. Number of dental claims from 2006 to 2011 according to gender of complainant

Table 1. The percentage and number of complaints in each field according to the degree of the dentist (specialist/general)

Field of complaint	General practitioner (n = 41)		Specialist (n = 3)		P-value
	%	n	%	n	
Surgery	39.1	16	33.3	1	0.54
Operative dentistry	17.4	7	0	0	
Prosthodontics and implants	26.1	11	33.3	1	
Orthodontics	4.3	2	33.3	1	
Endodontics	13	5	0	0	

Statistical analysis by chi-Square test

Implants claims

As was mentioned previously, the second field, according to complainant frequencies, was prosthodontics and implants accounting for 27% of all dental claims. Only 1 complaint was submitted about a specialist and all the others were from general dentists. There was no gender difference regarding dental implant complainants.

Discussion

The present study revealed the prevalence of dental claims to be 44 during 2006 to 2011 in Tehran. In a previous study by Kiani and Sheikhezadi, 135 complaints were propounded in the Iranian Medical Council between 2002 and 2006. Regarding the improper collaboration of one of the dental claims' resources (Forensic Medical Organization), we cannot judge this decrease, as one assumption might be more complaints in another resource of dental claims records. However, the most frequent fields were surgery and fixed prosthodontics in the previously mentioned study; the same as what was revealed in our study. Most of the accused dentists were general practitioners, which is in accordance with our study [7]. There was a significant difference between the number of accused general dentists and specialists in the present study. This may refer to the better practice or better problem management in specialists [8].

In the study of Hapcook in 2006, it was mentioned that in the United States 28% of complaints were in the field of prosthodontics, and endodontics and operative dentistry were at lower levels [2]. Bjorndal and Reit surveyed dental complaints from 1995 to 2004 in Denmark [9]. From 3611 cases 43% of dentists were guilty and the first and second fields were prosthodontics and endodontics, the same as the report in the United States. However, this was not in agreement with our results. On the other hand, like the current study, the majority of complaints were of male dentists and complainants were mostly females [9].

Ozdemir et al. performed a study from 1991 to 2000 in Turkey [10]. Of the existing 14 dental claims, 11 were complaints of dentists and 9 of these 11 cases were male dentists. Moreover, in 8 of these 11 cases, dentists were guilty, and similar to our study the most frequent fields were surgery, prosthodontics, and endodontics, respectively [10].

In a study in Sweden, most complainants were females. This was in accordance with our study. However, contrary to our study, most of the complaints were in the field of prosthodontics [11].

Schwarz in a study which was done in Denmark in 1983-1986 announced that there were 533 complaints in 4 years. The majority of complaints were in the field of prosthodontics. This was not in agreement with our study. In addition, in two third of the complaints the dentists were found guilty, but in our study the percentages of shortcomings and acquaintances were approximately equal [12].

Studies which were similar to the present study and were

performed in neighboring countries showed that people had less complaints in these countries compared with European countries and the USA. This may be a result of unawareness about social rights in developing countries.

Conclusion

According to our findings, prosthodontic and implant complaints have the second highest rate of dental malpractices. Therefore, paying great attention to the training process in this field in universities and continuing training programs are necessary. Furthermore, we recommend a comprehensive study with the data of the Iranian Legal Medical Organization for a more precise conclusion.

Conflict of Interest: 'None declared'.

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