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Oprea Valentin BUŞU & Elena Cristina ANDREI

DOI: http://dx.doi.org/10.18662/lumenss.2017.0601.10

Covered in: CEEOL, Index Copernicus, Ideas RePeC, EconPapers, SocioNet

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Managing a Dental Practice and How to Deal with the Patient’s Emotions

Oprea Valentin BUŞU¹, Elena Cristina ANDREI²

Abstract: Managing a dental practice is not strictly limited to good administration, but also the efficient management of patient emotions. Therefore, in a contemporary society, a successful dental practice is one that manages to harmoniously combine the standard work of the medical staff with the help of a psychotherapist. Signing a cooperation agreement between the dentist and the psychotherapist does not only represent a managerial strategy but also a necessity. There are frequent situations when the dentist is faced with complex psychological pathologies that prevent performing the dental act correctly. In this case, the aid of a psychotherapist is mandatory. It is assumed that most individuals present anxiety over certain dental procedures. The psychotherapist is an authorized person that knows and is able to apply various methods which help in combating the fear of dentist. The dentist will use the art of communication and the development of a doctor-patient relationship, based on the affective component. In the case of the doctor-patient relationship, the patient’s ability to tolerate pain will increase if their connection is a compatible one, based on empathy, respect and sincerity and affection. The psychotherapist plays a major role in the case of the patients dealing with anxieties caused by the dentist due to traumatic experiences. The psychotherapist is not only responsible of finding out the cause that led to the outbreak of this state but also of using an adequate approach in order to prevent the patient from ending up in a situation to deteriorate his/her health.

Keywords: dental practice, traumatic experiences, managing, psychotherapy, cooperation agreement.

Introduction

For this article we used two research methods: meta-analitical, anamnesis and experiment in order to achieve the understanding of how psychotherapy can improve the patients perception about the dental health. We all know how stressful a visit to the dental office can be. The control and management of the fear of the dentist can be achieved by applying

¹ Assistant, PhD, University of Craiova, Romania.
² Student, University of Medicine and Pharmacy of Craiova, Romania.
techniques aimed at relaxing the patient. A first stage of this process is represented by the detection of the presence of unresolved emotions. Often it happens that a person goes through different states when experiencing dental treatment, some acceptable, some unbearable in terms of mental and organic. The idea is that, although it seems that we get over an emotion that marked us in a negative sense, in reality this emotion becomes trapped within us and reactivates whenever we are placed in a similar situation.

**Literature review**

The dentist by carrying out a medical history interview method will detect the presence or absence of anxiety related emotions towards the dentist, but also its instilling causes (Patroi, 2014, pp. 13-19). Anamnesis plays a dual role, serving both as a method of psychoanalysis of the patient-the patient is free to answer questions about previous experiences related to the dental field (Filimon, 2013, p. 22) and as tool for recording his medical history. Unresolved negative emotions can have numerous harmful effects on the entire body: the emergence of anxiety or depressive neurosis, circulatory disorders of the type of arrhythmias (inconsistent rise and fall in blood pressure ), digestive disorders like gastritis and ulcers caused by the growth of gastric acid due to stress or muscle spasms. All this psychological preparation of the patient before the therapeutic act is done by explaining the need to know in detail his emotions in connection with other treatments previously made. To capture the attention of the patient on the importance of this technique his curiosity must be aroused (Szekely, 2003, p. 94). Therefore, by exposing to them the relationship between negative emotions and organic disease, the patient will realize that maintaining captive emotions will damage his physical and mental health.

A good dentist is one who has information related to anxiety that you can install on an individual after his visit to the dental office. As benchmarks, the doctor may refer occurrence indicators of anxiety in the patient noting: sweating, flushing, rigidity of muscles of facial and body manipulation excessive objects (in order to reduce stress), dilated pupils (difficult noting the persons carrying the contact lenses) (Collett, 2003, pp. 35-41).

Managing emotions is heavily influenced by the patient's physician possesses the knowledge in the psychological field. A first step that the doctor can do is to start a dialogue with the patient. Communication plays a major role in health care, and if it is carried out effectively will lead to success odontal therapeutic act. Another step is to build a doctor-patient...
relationship in component which makes its place besides other many aspects (honesty, respect, empathy) and affectivity. A patient becomes more cooperative and gain more confidence in front of the doctor who show affection (Andronic, 2004, pp. 88-89). Also, the patient is motivated to maintain but also to improve the health of the oral cavity. Also, one of the mistakes with a strong impact on dental health sphere is represented by the emphasis falling on the biological health. Thus, the mental component of the patient is treated lightly, causing more anxious feelings (Baban, 2002, p. 8).

**Communication in the dental office**

Communication is a means of transmitting information and is therefore very important how it is done. In a dental unit communication is extremely important and is divided into two categories:

- organizational communication;
- communication with the patient.

Organizational communication is not done spontaneously. This type of communication is planned so that the entire medical team can participate and be accompanied by an agenda which comprises all major issues facing the office.

In an organization, there is an internal communication which can be formal or informal, and an external communication. Formal communication focuses on the exchange of information aimed at the functioning of the cabinet. This can be achieved both top-down (manager transmits directives to subordinates) and bottom up (subordinates emit messages that have a role in decision making at the management level and helps officials to express their views). Informal communication occurs spontaneously and is usually installed in offices where formal communication has not reached its goal or was misunderstood. External communication is made between the different organizations. Much of the time, the manager will take care of it, because usually he is the person delegated to represent the organization (Cojocaru, Gavrilovici & Oprea, 2015, pp. 215-216).

**Communication with the patient**

Patient communication is a special type of communication that requires an in-depth knowledge of medical psychology. Patient communication is performed according to his state of health. There is currently much emphasis on the organic, the patient being treated lightly.
Regarding the communication preferences, depending on the patient, the following characteristics have emerged:

- children - medical act is presented as play;
- teenagers - they are growing up and claim to be heard and to be treated like adults. Preferably, the doctor has to avoid telling them they are mistaken, because every word has an emotional impact and can trigger feelings of disappointment, anger, rebellion. The doctor will operate and communicate with them in a subtle way without criticizing, will ensuring the confidentiality of the discussion (Pasca, 2006, pp. 287-303);
- adults- in the discussion with the patient the doctor must show respect, understanding and responsibility;
- elderly people - are people who bring to the fore the physician professionalism, focusing on how they are listened to by the doctor, their giving symptoms (Pasca, 2006, pp. 299-306).

Also, another reference element that influences the perception of the patient on the operating mode of a dental office is the typology (type) of the Manager-dentist. The way the manager puts his mark on the team he leads, and the medical staff exerting either positive or negative emotions towards the patient. This is a process in which emotions spread from person to person, like links on a chain.

Currently, one cannot speak of a perfect managerial style. Every person is different both in terms of personality and temperament, as well as influencing factors in the environment he lives and works. However, the management style of an individual may fall into these dominant categories:

- Standard authoritarian;
- Standard participatory;
- Standard libertine.

- The manager with an authoritarian style tends to have full power and influence in the dental office. He makes all the decisions alone, without consulting with the team. It's the kind of domineering person who sees the medical personnel as ordinary dental care providers who have no right to interfere in the administration and economy of the cabinet in which it operates. This style is contraindicated in a medical unit, as it will not be able to maintain harmony in the team and will never be particularly interested in the problems faced by the patient. All attention will focus on achieving its profit, providing marketing strategies that will always attract customers and bureaucratic operations. This domineering type of person can be distinguished by the presence of specific indicators of dominance: postural - "rider" - legs are apart and the arms placed elbows out; seated (in a chair) -
such a person would keep his legs stretched dominant to suggest the trend of expansion (Collett, 2003, pp. 179-194).

- Participatory manager - he wants to be involved in everything about his business. He takes into account the views of the working team, consuls constantly with them for the better networking and functioning of the cabinet. However, participatory manager attaches great importance to patients, trying to provide quality services and permanent consultancy. This managerial style is the best, because it is concerned with business evolution and the patient's needs.

- The libertine manager is characteristic of people who work as a routine. Often, it does not pay interest in activities and new procedures, preferring to perform maneuvers that he already knows. It leads to a decrease of the number of patients and may lead even to bankruptcy because science is constantly evolving, new treatment techniques appear, new technologies, and patients want to be treated in a according to the latest techniques (Carausu, 2015, pp. 17-29).

For a manager to work effectively with both staff and patients, he must have a number of features such as:
- responsibility;
- the ability to make correct decisions in a short time;
- intelligence;
- empathy and confidence in his team;
- to be sociable (Vulcu, 2006, p. 93).

If external support is not available from the environment and the individual believes he does not have sufficient self-support then impasse results. This is when the person divides their energy between impulse and resistance. Resistance is a manifestation of energy and can be passive or active. It is often a way of protecting oneself from an actual or perceived threat or lack of support and as such needs to be respected by the therapist. There is always a story behind every resistance. Part of the process of heightening awareness is the telling and understanding of the client’s story (Mann, 2010, p. 72).

Discussions

In the dental field is distinguished short term psychotherapy. As forms of psychotherapy that are used often in dental practice we find: occupational therapy (melotherapy and therapeutic tales) and cognitive psychotherapy or cognitive-behavioral through which is trying to change the incorrect perception of the patient over the medical act or over ludotherapy.
(Paşca, 2006, pp. 361-377). In the case of using psychotherapy on patient with dental affections, the aim is to introduce him in a state of relaxation, trust and remove any nervous tension and anxiety. Also, communication is adapting depending of age category in which the patient is fitting, and depending of patient’s condition (Paşca, 2006). Therefore, psychotherapy is a completion of medical act succeeding to offer a good psychical integrity of patient.

In the first 10 months of the year 2016, at a dental cabin in Craiova came 171 patients: 11 children, 26 teenagers, 131 adults and 4 old people. It shows redundancy that 4 patients adults presented psychiatric disorders (2 of them have been diagnosed with severe illness as schizophrenia and bipolar manic-depressive and one patient had a mild depression under deterioration). From the patients with visible psychiatric illness, in case of 25% of them, it has reached to a guidance to a psychologist who restored the patient’s self-esteem and improved the problems that he was facing through psychotherapy.

Results

In the case of the patient: D.R. (age, 37 years, jurist):

The reason of presentation: depression caused by unaesthetic look of front teeth and yellow colour

The session's steps: in the first session, the patient presented her entire historic of experiences with dental doctor. The negligence at the level of teeth has been produced by a series of unpleasant experiences. Having a high social position with a job who needs some pretensions regarding a tidy physical appearance, the patient suffered a mild depression who was manifesting in a social isolation, self-doubt and disinterest in physical appearance.

For the patient to regain the lost trust, we proposed in the first session to focus in the relation doctor-patient and then we started some operations that required a minimal complexity, following that in the next sessions to increase the operations.

Results: the patient had a successful dental treatment and she regained confidence in dental treatments and self-confidence and she recovered her smile.

In the case of children as patients, we applied a differential treatment with some particularities: patient I.A., age 6 years old. Before we begun the
experiment, we received approval from the parents, and from an ethic commission.

The reason of presentation: the 6-year molars sealed
The sessions steps:
- Providing dental illustrated with images from the dental sphere to color (little teeth, Tooth Fairy, toothpaste / toothbrush)
- watching on laptop the educative movie: „The story of Little Tooth”
- applying the method Tell Share Do to familiarize the patient with the instruments and the equipment from dental cabinet and also, to establish an understanding of the procedure as one painless who has benefits for her health
- non-formal communication with fun moments in order to relieve the patient's tension
- at the final of the sessions, we offered to the patient books with educative dental content („Răul Gingiei”, „Căpitanul Aquafresh și agenții 00 Carii”)

Results: -the treatment went without problems
- patient did not experience pain
- physical state: very good

Conclusion

We can say that the management of a dental practice requires both effective economic management and a management of patient emotions. Basically, the two processes are in a state of permanent interdependence: if sound management is lacking, the office will not be successful on the market (will not attract patients), and if the patient does not psychologically tolerate the treatment, the result will be the same as in the case of a failed administration.

For a dental clinic to excel in this field, it requires cooperation between the dentist and the psychotherapist. However, this does not exclude the need the dentist's need for knowledge in the field of psychology. Frequently, most individuals had previous bad experiences related to this specialty that have strongly marked the psyche, changing their perception on the medical act. This is why lately both psychologists and dentists seek to interact with each other, exchanging views on the application of techniques to combat anxiety. At the same time, we can highlight that dentistry covers a wide range of ages from infants to the elderly.
Therefore, for each age category a certain psychological approach is needed along with a different way of communication, centered on the needs and mindset of the patient. So, in a dental clinic, the focus is on the patient care: providing a corresponding dental treatment is the foundation of a relationship between patient-medical staff in which the main goal is to provide psychological support and enhance the patients' confidence.

References


