

Will I ever be a good teacher?

Jose A. Bosio

At the Society of Orthodontic Educators (SOE) Meeting held during the 2015 San Francisco AAO Annual Session, Gene Roberts stated that “if one wants to reach success in research, one must be focused.” And, keeping that in mind, I went on to attend the lectures for the remainder of my time in San Francisco.

Since we guide students at school, we are required to understand government guidelines. Martin Palomo and Steve McEvoy presented evidence regarding HIPAA (Health Insurance Portability and Accountability Act from 1996) rules and regulations that we must know in order to practice dentistry in the US. Soon, I realized we need to learn how to encrypt computers, use zip files for emailing PHI (Personal Health Information), and manage where to store these messages or present links for downloading secure messages. Needless to say, rules are different for every US state. Okay, I will learn all that... Then, I attended Aaron Molen’s presentation on cool technology for orthodontic practices. After all, I need all the information I can gather to share with my students. That is when I submerged myself into a completely different internet universe. I was scared to know that Google+, Yahoo, Bing, Amazon, and many other search engines have already created a profile on me, whether I use them or not. I might as well just take control of it all myself if I want to be “noticed.” Okay, I will update my profiles everywhere... Enough of technology? No. It is my second passion after orthodontics... So, off I went to see Crystal Washington give tips on social media. She presented information on how to improve your visibility in social media (of course I want that too), such as with Youtube (I’ve got to make a film...), Facebook (I’ve got to create a group and feed my posts...), Twitter (I should get more followers and start tweeting), Instagram (I will post more photos for the youngsters; they might influence their parents to seek orthodontics in my school), LinkedIn (ahah, this is the largest professional network, so I will fill out my complete profile), and Pinterest (70% of moms use it, so I should do

something about it). What is Pinterest, anyway? OMG! (Oh, My God!). What is all of this? I know they are all important. But for what???

Wait. I am an orthodontist, so I should see more orthodontics presentations, right? Sure. I came to learn new “stuff” in orthodontics. Two-phase treatment is not new, but it seems to be a never-ending topic. Hopefully, a final conclusion will come along at some point. Unfortunately, despite strong evidence favoring one-phase treatment, we, as orthodontists, find our reasons for treating patients in two phases. As we look for stronger evidence-based dentistry (orthodontics), we realize that orthodontic research has advanced, and we see more systematic reviews and meta-analysis results than ever. However, is it my impression, or are most of the studies really coming out with the same conclusion? “We need more studies to reach almost any conclusion.”

Wait, wait. My wife is calling me from NYC to complain that she cannot find a parking spot near Central Park. Honey, what can I do to help you??? I am in San Francisco!!!... So, when I get the chance to see David Sarver, I wonder if he will present anything different this time. I have attended “zillions” of his lectures; he can’t possibly be presenting anything new in esthetics... Wrong again, José. He pulls another trick on us. Besides the great clinical tips, he manages to get immediate response from his audience through phone technology. We had to use our phones to text to a number to get our answers registered (everyone has a mobile phone. What? You don’t have one??? Then you don’t exist. Sorry.). If Sarver can do this, wouldn’t it be cool, too, to get my students to answer my questions immediately on their phones? They are connected all the time anyway. Many pretend to be taking notes on their devices when they are actually interacting with other friends on social media. I’ve got to learn this new trick. It is really cool.

Wait. Wait again. My daughter has just texted me on WhatsApp. “Whats” what??? Forget it... Mom still hasn’t found a parking spot!!! Baby, I can’t help Mom... Another great buzz is “accelerated tooth movement”, either by vibration, photobiomodulation, piezocision, micro-perforations, surgery or “mentalism.” It seems we are all in a rush to get cases done faster. Well, is faster, better??? Do we want to finish faster just to

have more time to socialize digitally?? What are we doing with the extra time we gained? Are we serving our community better? Or learning more new technology? Well, I am still using the PowerPoint program for my lectures. Am I getting obsolete? Probably. I should be looking for the next big thing. Maybe if I bought a new Mac and an iPhone, then I would be on top of the world. But I love PC's, and I am happy with my Android. Let them be.

What about lingual or robotic orthodontics? Which one will I choose to guide my students to practice? Insignia, Suresmile, Harmony, Incognito? Or invisible orthodontics, Invisalign or Clear Correct? What about Temporary Anchorage Devices (TADs)? Do I want my students to practice these techniques? Absolutely. Patients are asking to be treated this way. Does it mean that I have to learn it too? After all, I have been practicing for almost 30 years. The techniques I have been using all along have served me well all these years. But I am curious, so I will try and use some new technology.

Wait one more time. My brother is calling me on Skype/Facetime. I have to answer... What if he is also having trouble finding a parking spot in his hometown in Brazil? Just kidding. Well, back to the lectures in San Francisco. My real interest is intraoral digital scanning. I don't want to use alginate anymore. If I start scanning, which "gizmo" should I use? What important features should I look for? Ultrasound, optical or radiation? Do I pay per model? Does the model belong to me? Why do I need pictures of the case if I am optically scanning the mouth? Am I crazy to say that we soon won't need photos or impressions of patients anymore?? If we are scanning teeth in

color, then photos are unnecessary, and we can print the models. Great, two steps being substituted for one. That's progress, which means I will have to learn the new scanning technology to teach my students.

When I get back to New Jersey from this meeting, I will need to learn the new eIRB (electronic Internal Review Board) process, and Dolphin, Axium, Moodle, D2L, Dimaxis, Citrix, MeshLab..... Do I also need to teach that? I constantly ask myself, are we supposed to teach orthodontics or "techno orthodontics?" Then you will ask me: Are you really teaching??? I hope my Chairman and my Dean don't see this editorial. But isn't it interesting to know we are getting paid to learn? Soon, we will be scanning teeth, then printing appliances immediately with inserted vibration devices on them, and then bonding them with superfast bonding agents using laser precision techniques. The bottom line: "it is really difficult to focus, nowadays, in one area of research, especially with all of this technology around us." Nonetheless, we manage to do it well. But I am scared by the amount of technological information we need to learn to succeed in orthodontics. And then I wonder, will I ever be a good teacher??? By the way, have I mentioned that I have four daughters???? I want my free time. Aaah... and before I go, a Facebook Messenger ring lets me know that my wife has finally found a parking spot near Central Park on a sunny Sunday. Phew!!!

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