



HOW GPS WERE ABLE TO SUCCESSFULLY DISRUPT THE US IMPLANT DENTISTRY MARKET

Abstract

Over the past 20 years, GPs have attracted an increasingly high volume of implant patients with lower than average treatment costs. Today, digital technology offers oral surgeons new opportunities to regain--and expand--their current market share.

Dr.Hamid Shafie, CEO & Principal

hrshafie@olulo.com

What is Disruptive Innovation?

The downfall of many successful and seemingly invincible industry leaders—including Steel Industry, American automobile manufacturers—has been precipitated by disruptive innovation, defined as innovation that makes a complicated and expensive product simpler and cheaper, thereby attracting a new set of customers. The theory of disruptive innovation was first introduced by Clayton Christensen, Professor of Business Administration at the Harvard Business School.

By embracing disruptive innovation, smaller competitors with fewer resources and immature foundations have been able to challenge established industry leaders. The process of disruption typically begins with these new competitors establishing a foothold in the less-profitable areas of a vulnerable market. The smaller players then expand their market share dramatically as they migrate up the quality chain and further displace incumbents. Ultimately, disruptors restrict the original industry leaders to the highest tiers of the market, where there is simply not enough volume to sustain them all.

How have GPs disrupted the US implant dentistry market?

GPs demonstrate both essential characteristics for disruptive innovations described by Bower and Christensen: (1)

they “present a different package of performance attributes—ones that, at least at the onset, are not valued by existing implant patients,” and (2) they have developed “the performance attributes that existing implant patients do value,” such as reduced fees, until they “invade established oral surgeons’ implant business.” As a result, they have become increasingly present within the US implant dentistry market, an industry in which oral surgeons and periodontists have traditionally had a duopoly, since the late 1980.

This disruption has occurred as the result of a number of factors. Most notably, improved product ease-of-use and reduced cost of supplies has made implant surgery practical from both a technical and financial standpoint. Implant companies have introduced less expensive products, while implant software and hardware designers have developed a digital workflow—including CBCT, intraoral scanning, and 3D printing technologies—that has allowed for guided surgeries. This has enabled GPs to perform high quality, precise implant surgery for a significantly reduced cost relative to specialists. Digital technology has also enabled GPs to precisely deliver prostheses, offering patients the convenience of containing all aspects of their treatment to a single office.

The effect of technology is bolstered by the fact that implant surgery is an intangible service product, meaning that patients cannot qualify the difference between implant surgeries performed by an oral

surgeon compared to surgeries performed by a GP. As a result, price and convenience play a major role in a patient's decision-making process. Furthermore, as oral surgeons have focused on the more profitable sectors of implant dentistry, particularly full arch rehabilitation, they have not responded rigorously to this intrusion. Thus, GPs have been free to steadily increase their market share in implant dentistry despite their lack of clinical expertise.

How can oral surgeons overcome the rise of GPs?

To effectively respond to the significant increase in GPs performing implant surgeries, oral surgeons must consider other instances of disruption in the healthcare system. Of these, one of the most compelling and analogous examples is the disruption of bypass surgery by the interventional cardiologist:

In the mid-1990's, stents were first introduced as an alternative to bypass surgery in patients with coronary artery disease. Stents allowed surgeons to reestablish healthy blood flow while simultaneously avoiding the invasive nature of open heart surgery and minimizing potential risks. Despite the revolutionary quality of this treatment, it was ignored by the majority of cardiac surgeons, who felt bypass surgery was a better and more advanced treatment

option. This rebuke by surgeons led to the development of the sub-specialty of interventional cardiology. Currently, interventional cardiologists can treat coronary disease by inserting stents at a fraction of the cost of bypass surgery performed by a cardiothoracic surgeon. Since their rise of interventional cardiology, the number of bypass surgeries performed by cardiac surgeons has plummeted.

From this example, it is clear that inaction on the part of the oral surgeon is not an option. In order to remain prominent in implant dentistry, oral surgeons need to embrace the change we see in the dental industry, and adapt accordingly. Oral surgeons can no longer rely on clinical skill alone to differentiate their services from those of the GPs. To maintain their dominance, oral surgeons must adapt their own form of innovation, and learn to disrupt the disruptor. They must leverage their current resources to adopt new, completely digitally based business models that will allow them to regain a competitive advantage.

Digital transformation has a number of benefits for oral surgery practices. Establishing a digitally integrated practice allows oral surgeons to perform the highest quality implant surgeries with efficiency and precision. Simultaneously, digital integration incentivizes GPs not to perform their own implant surgeries by reducing their chairside time and prosthetic overhead.

Conclusion

Due to its heavy financial requirements, complete digital integration has a high barrier of entry for GPs and periodontists, who typically have much lower buying power relative to oral surgeons. This presents a unique opportunity for oral surgeons to establish a digital ecosystem that creates high-level collaboration and connectivity among clinical providers and encourages GPs to refer patients to their offices. Now is the time for oral surgeons to leverage their buying power and embrace new technology as their most effective competitive advantage over GPs performing implant surgery.

Related Readings:

- [*What Is Disruptive Innovation?*](#)
- [*4 Keys to Understanding Clayton Christensen's Theory of Disruptive Innovation*](#)
- [*A Brief Historical Perspective on Dental Implants, Their Surface Coatings and Treatments*](#)
- [*Implants have arrived*](#)





White Paper



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