

THE LINKS BETWEEN QUALITY, PROFITABILITY, AND THE DENTAL MARKETPLACE

by Michael Perry, D.D.S.

I often speak of the “golden age of dentistry” which seems to have occurred some time between the late 1950’s and the early 1970’s. Even though I am uncertain about the dates, I know the age ended before I graduated from dental school. As the son of a dentist, its interesting for me to talk with my father about those years -- a time when he was in the prime of his professional career.

There was a shortage of dentists rather than patients, and overt marketing was only for the unethical. Lending institutions would provide all the funds a dentist needed on his signature alone. It took months rather than years in private practice to establish a consistent flow of patients. No one even acknowledged that a dental marketplace existed.

With dentists’ financial success all but assured, the sole emphasis during the golden age was quality of care. The moral structure of the profession did not make room for a focus on practice profitability. The unspoken litany was: *focus on quality and the financial rewards will follow in their natural course.*

In spite of the dramatic changes that have occurred in the dental marketplace since the golden age, I still often find vestiges of the litany in our profession. Even with the significant risks abundant in today’s marketplace, I still see dentists who don’t wish to acknowledge the link between their profitability and their ability to deliver their best for their patients.

I maintain that delivery of quality in private practice today requires significant initial capitalization, a healthy cash flow, and continual reinvestment in the practice. How do dentists compete for the best employees when they are in short supply? How do they maintain physical offices that create value in the minds of patients? How do they obtain the finest continuing education and equipment? How do they design and implement effective marketing programs? Quality is not possible without these, and none of these are possible if a practice is not profitable.

Just as strategies can be developed and skills obtained for creating quality care, so can they be for creating profitability. We have rightfully always taken quality seriously. Its time we do the same with profitability.