Rise of non-premium dental implants in Asia Pacific region

By Jeremy Booth, Dental Tribune International

BEIJING, China: Sales of dental implants are set to grow at a phenomenal rate in the coming years in major dental markets in the Asia Pacific region. The value implant segment is driving volume growth, but still trailing behind the premium segment when it comes to overall dollar value. International implant manufacturers are investing in the value category, and cheaper solutions in implant therapy may be the key to boosting some of the region’s developing markets.

The world’s population is growing by an estimated 82 million people per year, but an increase in candidates for implant therapy is not the only factor driving growth in the dental implant category. The 2016 Global Burden of Disease Study underscored the prominence of the leading conditions behind edentulism. The study found that dental caries in permanent teeth was the most prevalent of the oral diseases that affected an estimated 3.58 billion people globally – half of the world’s population – and estimated that severe periodontal disease was the 11th most prevalent disease on the planet. The category is segmented into dental implants, final abutments, instrument kits, planning software and surgical guides.

Other factors driving its growth include an increasing incidence of sports-related injuries, ageing populations, rising demand for prostheses and more dentists being trained to place implant restorations.

Singapore to ban advertisement of certain sugary drinks

By DTI

SINGAPORE: Excessive consumption of sugar-sweetened beverages (SSBs) can have a deleterious effect not just on oral health but on systemic health conditions, such as diabetes, as well. With this in mind, the Singaporean government has announced that it will ban the advertising of high-sugar drinks across all domestic mass media platforms.

The move is in response to growing global recognition of the contribution of excess sugar intake to a range of negative health outcomes. As Dental Tribune International has previously reported, the promotion of high-fat, high-salt or high-sugar food or drinks in traditional media and online media aimed at children has been banned in the UK, and the state government of Queensland in Australia has forbidden the advertising of unhealthy food and drinks on the advertisement spaces that it owns.

Singapore has one of the highest rates of diabetes in the world, and 13.7% of its adult population has been diagnosed with the condition. This is commonly attributed to an ageing population and to the increasingly widespread adoption of a diet high in added sugar.

Edwin Tong, the Senior Minister of State for the Ministries of Health and Law in the country, stated that the advertising changes would only apply to those carbonated beverages and fruit juices that are deemed to be the unhealthiest.

“We will introduce an advertising prohibition of product advertisements for the least healthy SSBs on all local mass media platforms, including broadcast, print, out-of-home and online channels,” Tong said in a statement.

It has been confirmed that consultations with consumers, drink producers and the advertising industry will take place prior to making a decision on the specific date for the ban to be implemented.
According to Global Market Insights (GMI), the global dental implant market was worth US$3.9 billion last year. A compound annual growth rate (CAGR) of 5% will mean that the category increases in value by around one-third to be worth US$5.4 billion (CNY 35.4 billion; JPY 542.2 billion) by 2025. In the Asia Pacific region—the fastest-growing area for dental implants—GMI forecasts a CAGR rate of 6.5% between 2019 and 2025.

According to medical market research company iData Research, which published a new report this year on dental implants in the Asia Pacific region, the region is the third largest for dental implants and currently accounts for 28.1% of the total value of the global market. The market researcher revealed last year that implant sales in the region were expected to experience high levels of growth in the coming years, to be worth US$890 million by 2024, and that the region was transitioning towards inexpensive implant solutions.

In 2018, according to iData, the region’s key dental markets, Australia, China, India, Japan and South Korea, had a near fifty-fifty split in terms of the market value for premium versus non-premium dental implants. The non-premium segment edged slightly ahead to account for 51.2% of market value versus 48.8% for the premium segment. Cheaper implant solutions are expected to hold a 55% share of total market value in the region by 2024, according to iData’s analysts. Are value implants set to transform Asia Pacific markets?

Jeffrey Wong, Analyst Director at iData, says it is not that simple. The value segment in the region is experiencing a healthy growth rate and an increase in volume sold, but the contribution of cheaper implants, in dollar value, is much smaller when compared with that generated by the premium implant segment. This trend is expected to unfold in the burgeoning Chinese market and in the lesser-developed Indian market, and significant growth has been forecast for dental implants in both of these countries in the coming years.

“Within the Asia Pacific region, both the Chinese and Indian dental implant markets are poised to exhibit year-on-year market growth rates of over 20%,” explains Wong. “In both countries, the value and discount segments will exhibit higher growth rates compared with the premium segment. However, the premium segments will be adding more to the overall value of the markets, despite the lower growth rates.”

Wong also points out that not all growth rates are created equal: “Even though both the Chinese and Indian markets are expected to experience similar rates in market growth, it is worth noting that the Chinese market is nearly four times the size of the Indian market.”

Despite a lower contribution to overall market value, an increasing prevalence of dental implants being placed will boost visibility and acceptance of this form of dental therapy.

Investment required on several fronts

Implant manufacturers are planning to do more business in the Asia Pacific region, and iData says the market landscape in the region is becoming increasingly competitive. Major implant manufacturers, such as the Straumann Group, have increased investment in their implant portfolios in key Asia Pacific markets, particularly in the growing non-premium category.

The Straumann Group acquired the popular Indian implant brand Equinox in 2016 and Anthogyr’s Chinese implant business. This year, the company’s acquisitions have continued. The company said in its 2019 half-yearly report that it was...
investing in the South Korean company Warantec to boost its penetration into the non-premium implant segment. Straumann said that it would provide a capital injection to bolster the established implant manufacturer’s production and international business and would gain in return a stake of just over one-third in the company and the exclusive rights to distribute Warantec implants outside of South Korea. Straumann said that the company’s Oneplant implant system offers affordability in the segment and that product registrations had been obtained in China and in the leading dental implant regions, the US and Europe.

The Asia Pacific region makes up 18% of the Straumann Group revenue and is the company’s fastest-growing region. The company said in its report that it had strengthened its foothold in powerhouse China’s non-premium implant segment by rolling out a fully tapered implant made by daughter company Anthogyr and that it had benefited from intensified training and educational activities in the country. “This is significant because only a very small proportion of the dentist population in China has received training in implant dentistry,” the company stated.

A key enabling factor in the success of companies like Straumann will be a greater investment by dentists in the Asia Pacific region in offering implant-supported restorations. Of course, a vital part of the equation is that consumers are willing and able to invest in their oral health.

In an April interview, Claire Li, Clinical and Scientific Manager at Dentsply Sirona Implants in China, commented that the dental implant market in the country was expanding quickly. “Different sources estimate a growth rate between 15 and 30% in the coming years, and the market is likely to exceed US$700 million by 2020.” She explained that the main drivers behind the rapid growth in numbers of implants placed in the country were an increasing familiarity with implant-supported restorations, more dental practices now offering implant dentistry, and economic factors that are making Chinese more willing to spend money on their oral health.

Earlier this year in China, the Global Times quoted business news portal 21jingji.com as saying that “A full set of implanted teeth could cost as much as a brand-new BMW sedan.” The English-language daily tabloid reported that demand in China for oral treatments such as tooth replacement was surging, but that a lack of domestically made implants meant consumers were paying high prices in a market dominated by international dental companies. The newspaper said that calls have been made in China for the development of domestically manufactured dental implants in order to lower the costs of implant therapy for consumers.

In the South Korean market, larger international dental companies face stiff competition from domestic implant manufacturers, who have helped to transition the market towards more inexpensive implant solutions. But the situation in South Korea also reminds us that growth in the implant market requires investment from other parties. The country’s National Health Insurance Service lowered the age of eligibility for dental implant coverage to 65 from 70 in 2016, which iData says has helped to transform South Korea to the region’s most highly developed market for dental implants.

“Calls have been made in China for the development of domestically manufactured dental implants in order to lower the costs of implant therapy for consumers.”

Europe and the US dominate implant sales

According to iData, Europe and the US still take the lion’s share of the global dental implants market. Europe accounts for 34.1% of the total value of implants placed annually and the US accounts for 29.5%. Together, these two regions hold almost two thirds of the entire market. At 28.6%, the Asia Pacific region is currently the third most valuable for dental implants, followed by the Latin America region at 8.1%.
Coca-Cola criticised by NZDA for culturally appropriating Maori language.

By DTI

AUCKLAND, New Zealand: New Zealand has an oral health problem. Expense is one of the main factors that prevent people from visiting the dentist, and this results, in some instances, in oral health conditions similar to those of developing countries. However, sugar is another major issue, and in a recent statement, the New Zealand Dental Association (NZDA), Te Ao Mārama (the New Zealand Maori Dental Association) and Hāpai te Hauora (Maori Public Health) have criticised the use of the Maori language on Coca-Cola products.

The new marketing ploy by Coca-Cola focuses its sights directly on the New Zealand Maori population by labelling its products with slogans such as “Share a Coke with whānau [family]” and “Share a Coke with kuia [grandma]”. “This has shades of the tobacco industry here—a subversive insidious way to connect with people who suffer a disproportionate amount of dental disease and harm from a public health perspective,” said NZDA sugary drink spokesperson Dr Rob Beaglehole.

According to Kirsten Robertson, a senior lecturer in the Department of Marketing at the University of Otago, New Zealand has a significant problem regarding the consumption of sugar-sweetened beverages (SSBs). As reported by Dental Tribune International, New Zealand is the third most overweight nation in the Organisation for Economic Co-operation and Development area, and 17% of adults’ total sugar intake comes from SSBs.

“This corporation which cares nothing for our mokopuna [children], our kuia and kaumātua [seniors], has appropriated our language to make a profit. Worse—they’ve singled out one of the worst areas of inequity in health outcomes—our whānau’s oral health. They should be ashamed,” said Hāpai Te Hauora CEO Selah Hart.

The introduction of a sugar tax is still to be debated in parliament, and direct action to protect some communities from persuasive marketing is also greatly needed. According to the NZDA, 2017–2018 data shows Maori are 1.36 times more likely than non-Maori to have teeth removed as a result of dental caries. According to a 2018 Best Practice Advocacy Centre New Zealand study, it was estimated that, in the Auckland region alone, over 40% of people of Maori, Pacific or Indian ethnicity aged 35–39 years have prediabetes.
SHANGHAI, China: China is a powerful ally in achieving global community commitment to health. Recognising that health is fundamentally linked to successful economic and social development, the Chinese government is making progress to protect and promote the health and well-being of its citizens. When its World Dental Congress is held in Shanghai from 1 to 4 September 2020, FDI will be putting special focus on the country.

In China, significant differences exist between urban and rural populations in terms of oral hygiene practices and access to oral care. Results of a study published in the International Dental Journal in 2005 revealed that regular toothbrushing was three times more frequent in urban than in rural areas. There are also a limited number of oral health professionals to serve the population: the dentist to population ratio is 1:100,000. As might be expected, the use of oral health services is somewhat lower in rural than urban areas. Significantly more rural residents in the study had never seen a dentist during their lifetime. Owing to the limited availability of dentists, most people have a symptomatic, rather than preventive, approach to dental care. The most frequently cited reasons for dental visits are toothache, need for tooth extraction and prosthetic treatment.

Dental care is offered on a fee-for-service basis that not everyone can afford: the fees for restorative services are approximately twice the cost of tooth extraction and are ten times higher than for preventive services. The 2005 study reported that many people living in urban areas had at least part of their dental costs covered by their employers, which was not the case in rural areas, keeping oral care in these areas even more out of reach.

Healthy China 2030

The Healthy China 2030 initiative is an ambitious vision to incorporate health into all policies and engage the whole of government in health. Healthy China 2030 includes special provisions to improve oral health. As part of its vision, Healthy China 2030 implements special campaigns to raise awareness of oral diseases, among other health concerns. FDI congratulates the Chinese government for ensuring that oral health is recognised as being integral to overall health and well-being and is grateful that the policy landscape provides such a welcoming setting for the 2020 FDI World Dental Congress.

FDI and Chinese Stomatological Association join forces for better oral health outcomes

FDI and the Chinese Stomatological Association (CSA) have worked side by side to increase access to oral care and improve oral hygiene habits in China’s rural areas, most notably through the Smile Around the World initiative. Smile Around the World aims to introduce the importance of oral health through a series of educational workshops that will help children establish good oral health habits from a young age. The latest initiative was implemented earlier this year in three elementary schools in the cities of Pingxiang and Ganzhou in Jiangxi province.

The 2020 FDI World Dental Congress, which is being co-hosted by the CSA, shows a joint commitment to continue strengthening this partnership to improve the oral health of populations. By working together to build the scientific programme, the goal is to give global relevance to local research and learning, as well as share best practices on how to address the oral health challenges that are common to all geographical settings. Attendees will also learn more about the Healthy China 2030 initiative and how this translates globally. The congress will offer hundreds of continuing education opportunities and cover hot topics in clinical practice, research and public health and will feature numerous hands-on workshops.
Improved instrumentation to reduce endodontic complications

By DTI

Busesan, South Korea: Reducing complications in root canal therapy is in the best interests of dentists as well as patients. To improve the clinical performance of endodontic files, a research team led by Dr Sang Won Kwak from Pusan National University tested instruments with specially designed rotary motion. Over the years, root canal preparation has been improved by the use of engine-driven NiTi files. Compared with stainless-steel manual files, NiTi instruments offer better flexibility and cutting efficiency in addition to reduced iatrogenic errors. However, the NiTi files may have cyclic fatigue and torsional failure problems during root canal preparation. To reduce the risk of file fracture, Kwak and his team tested heat-treated NiTi alloy files with specially designed rotary motion.

The scientists tested three combinations of instruments and motions for root canal preparation. These were the K3XF rotary system with continuous rotary motion, the K3XF rotary system with adaptive motion and the Twisted File system with adaptive motion (TFA), all from the endodontic product manufacturer Kerr Endodontics. Adaptive motion combines continuous and reciprocating motion, rotating 60° and stopping when the file is exposed to minimal or no load. “Adaptive movement helps to reduce torque generation during instrumentation with NiTi rotary files,” said Kwak. Torque generation occurs while removing root dentine by engine-driven NiTi files. The generated torque indicates the energy required to cut the root dentine, but also represents the reaction stress on NiTi files as well as the root dentine.

To ensure consistent test conditions, endodontic training resin blocks were used. Each block contained an S-shaped artificial canal, with a working length of 16 mm. The instrumentation was performed for a total of 45 tests (15 per instrument) by a single experienced endodontist in order to reduce operator errors.

The researchers found that TFA generated the lowest torque. Kwak and his colleagues thus concluded that the adaptive motion for NiTi files may reduce torque generation without increasing preparation time. Kwak also suggested that the “torque generation is more likely to be affected by the cross-sectional area rather than the movement of the file system.” A smaller cross-sectional area may account for the lower torque generation by the TFA file system.
Australian agency has launched investigations into clear aligner providers

By DTI

The Australian Dental Hygienists’ Association has launched investigations into four providers of clear aligner therapy amid claims of hushed incentives being provided to dentists and the breaching of advertising laws.

The complaints surfaced through articles in The Age and the Herald and accused health regulators of failing to enforce the rules. The authors of the articles said that federal regulators had received complaints about social media influencers promoting clear aligners without proper disclosure, which, if true, would be a breach of the law.

The Therapeutic Goods Advertising Code stipulates that any payments received for the advocacy of therapeutic goods—clear aligners, in this case—must be disclosed and a failure to do so carries a maximum fine of A$1.05 million (€649,000). Undisclosed promotion through social media would also breach the Health Practitioner Regulation National Law, the authors pointed out, which attracts fines of A$1,000 per advertisement for individuals and double that for companies.

“Nobody is even bothering to pretend to follow the law,” read one of the complaint letters from a dental industry insider, who believed that revealing his identity would cause him to lose his job.

One letter from a Melbourne prosthodontist said the undisclosed promotion presented “a clear and present danger to vulnerable health consumers.”

Industry insiders also complained to health regulators. Dental Hygienists Australia was offering volume discounts to dentists. The company said that such discounts are permitted under Australian law and common in the industry. In addition to the AHPRA investigations, the Therapeutic Goods Administration confirmed to the Herald that it had opened investigations into potential breaches of its advertising code with respect to clear aligners.

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Promoting clear aligners on social media without disclosing payments is a breach of Australian law. (Image: edwardolive/Shutterstock)
Recent proposal revamps Australian oral healthcare system

By DTI

Melbourne, Australia: Australia is facing several challenges when it comes to oral health. Access and education are among some of the most significant issues, not to mention cost, and a more modern health system might be the way forward. In an interview with Dental Tribune International, Grattan Institute Health Program Director Dr Stephens Duckett spoke about a recent proposal his team developed for a universal dental care scheme for Australia.

In the proposal titled, “Filling the gap: A universal dental scheme for Australia,” Duckett and co-authors Matthew Cowgill and Prof Hal Swerissen said of the current system: “State public dental schemes vary in terms of who is eligible, the extent of co-payments, and the amount of funding provided per eligible patient. The result is a postcode lottery, where a person’s access to public dental care depends on where they live. And people who are eligible for public dental services are confronted with excessive waits—often well over a year—for basic oral care. Access and education depend on where they live. And people who are eligible for public dental services are...”

The proposal that Duckett and his team put forward would be phased in over ten years. It would involve a mixture of public and private provision, and payment would be according to a national fee schedule. As part of the scheme, there would be tight monitoring requirements for participating practices and patients would be able to choose freely from accredited dental clinics. The authors suggest that both public and private providers should be eligible to participate.

Proposal implementation

Speaking about cost and implementation, the authors said: “It would be impractical to move to a universal scheme overnight. The net cost would be large—around $5.6 billion in extra spending per year—and the oral health workforce would need to be expanded. So, the Commonwealth should announce a road map to a universal dental care scheme for Australia, Duckett said, “This is certainly true. We partly recognise that, in proposing the monitoring of practices, preventive orientation would be part of the conditions of participation. We also proposed an emphasis on public oral health education.”

Speaking about job creation, Duckett said: “The scheme would involve a significant expansion of public spending and thus a significant expansion of jobs. We also contemplated in our funding, and in the way in which we priced the national fee schedule, that the employment expansion would be in all categories of the oral health workforce,” explained Duckett.

In a 2018 Dental Tribune International article, it was revealed that the Australian Dental Association and Australian Health Policy Collaboration (AHPC) at Victoria University had released a national oral health report card. According to that report, more than 90% of Australian adults had experienced caries in their permanent teeth. In the article, Prof. Rosemary Calder, Director of the AHPC, said: “In 2015 to 2016, there were 62,266 potentially preventable hospitalisations for oral health problems and almost one-third of these were children under the age of 9 years. Worryingly, there’s a growing number of children in this age group who are being admitted to hospital for dental health reasons.”

Future of oral health care in Australia

As alluded to in this recent report, most Australians pay for dental care straight out of their own pockets. This means that patients who are not able to afford treatment might not be able to afford treatment either wait until it is too late for any kind of restorative treatment or go to the hospital emergency department. To combat this issue, Duckett and his team suggested: “The first step is for the Commonwealth to take over funding of existing public dental schemes, fund them properly to the tune of an extra $1 billion per year, and enable private-sector providers to deliver publicly-funded care. Coverage should then be expanded—for first to people on Centrelink payments, then all children. After that, the Commonwealth would take the final step to a universal scheme, ideally within a decade.”

Many Australians suffer from preventable oral health issues, and the current system puts a strain on states and health institutions whose time could be better served working on other areas. Consequently, it might not be too long before a change comes. Speaking on the possibility of proposing any monitoring take up, Duckett said, “The first few stages of our scheme are inevitable, it’s only an issue of timing.”

The Grattan Institute is an Australian public policy think tank that was established in 2008. It has no connection to any of the country’s political parties, and its primary goal is to contribute to the discussion around Australian public policy.