## Lessons learned: reacting, rebounding and recovering from dental clinical failures

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Dental professionals all endeavour to provide their patients with the best possible care, utilising their skills, knowledge and experience to ensure positive results. Nevertheless, despite their best efforts, dental clinical failures can occur, leaving the patient and dentist to deal with the repercussions. In this article, we will discuss how to react, regroup and recover from dental clinical failures, drawing from strategies for dealing with the aftermath and learning from these experiences.

A proactive and compassionate approach is necessary when addressing dental clinical failures. It is essential to acknowledge and address the situation promptly and professionally. The first stage is to communicate openly and honestly with the patient, providing a detailed explanation of what went wrong, accepting responsibility for the failure, and expressing genuine compassion for the patient's concerns and emotions. Dentists should also engage in self-reflection and self-evaluation, conducting an objective analysis of the failure and determining its fundamental cause. Colleagues, mentors and professional organisations can provide valuable insight and direction when consulted.

Recovering from clinical failures in dentistry requires resilience and adaptability. Dentists should be prepared to take the necessary corrective measures to rectify the error and prevent its recurrence. This may involve revising the treatment, providing the patient with additional care or referring them to a specialist. Dentists should prioritise the patient's best interests even if it requires incurring additional expenses or time commitments. It is crucial to maintain a positive and proactive attitude, concentrating on finding solutions rather than ruminating on the failure itself.

Recovering from dental clinical failures may necessitate overcoming legal, ethical and financial obstacles. Dentists must be aware of their legal and ethical responsibilities and adhere to the proper protocols when handling clinical failures. This may involve documenting the failure, discussing it with coworkers or mentors, and potentially involving legal or insurance experts. Refunds, reimbursements and insurance claims should be handled in a transparent and accountable manner. Dentists should also take measures to safeguard their professional reputation by addressing patient concerns, communicating openly with patients and implementing corrective measures.

Aside from the immediate aftermath of a clinical failure in dentistry, dentists should also prioritise long-term recovery and development. Failures can provide a valuable opportunity for professional growth and development. Dentists should consider the failure lessons and implement changes to their practices to prevent similar incidents in



the future. This may involve refining treatment protocols, enhancing patient communication, enhancing clinical skills through continuing education or seeking out mentorship or peer support.

After a dental clinical failure, dentists should prioritise their emotional health in addition to their professional development. After a failure, it is normal to feel guilty, frustrated and apprehensive. Dentists should acknowledge and process these emotions healthily by seeking support from trusted colleagues, mentors or loved ones, practising self-care and engaging in enjoyable and relaxing activities. Obtaining professional assistance from a therapist or counsellor can also be advantageous for grappling with the emotional effects of a clinical failure.

In addition, dentists should maintain a positive attitude and not allow a failure to characterise their entire professional careers. It is essential to keep in mind that failures are an integral part of the learning process and that every dentist, regardless of experience or expertise, will experience clinical failures at some point. Instead of ruminating on the failure, dentists should concentrate on their strengths, achievements and positive impact on the lives of their patients.

In conclusion, clinical failures in dentistry can be difficult experiences that can plague us as dental professionals. Nevertheless, how we react, rebound and recover from these failures can have a significant effect on the outcome. It is essential to respond proactively and compassionately by engaging in open communication with the patient and engaging in self-reflection. Regrouping requires resiliency and adaptability, as well as the execution of corrective measures.