

Balancing the Scale: Reconsidering the Overemphasis on Electronic Scaling in Dentistry

Sir,

As dental professionals dedicated to the well-being of our patients, it is our responsibility to critically evaluate the methods and tools we employ in our practice. In recent years, we have witnessed a notable shift in the field of dentistry, with electronic scaling procedures taking centre stage. While the advantages of electronic scaling in terms of efficiency and time-saving are evident, we must not lose sight of the potential drawbacks that accompany this trend.¹

Electronic scaling, characterised by high-frequency vibrations and oscillations, has gained popularity for its ability to streamline the scaling process. However, the indiscriminate preference for electronic scaling over traditional manual scaling has raised legitimate concerns.^{1,2} A growing body of evidence suggests that the aggressive action of electronic scaling devices may contribute to unintended consequences, including enamel erosion, gingival recession, and dentinal hypersensitivity.^{3,4}

Unlike manual scaling, which allows for precise control and a tactile understanding of the tooth's condition, electronic scalers may inadvertently remove more tooth structure than intended. This overzealous approach can lead to enamel thinning and, over time, a host of dental issues that could have been prevented.^{3,4}

Furthermore, electronic scaling may not be generally fitting for patients with hypersensitive teeth; in whom, preferably hand scaling should be the right choice in order to prevent exacerbation of dentinal hypersensitivity. In addition, patients with specific medical conditions (e.g. having pacemakers and cardioverter defibrillators) may experience some discomfort due to the mechanical oscillation generated by the electronic devices.⁵

As dental practitioners, we must strike a balance between the convenience of electronic scaling and the potential risks associated with it. We must recognise that a one-size-fits-all approach may not align with the principles of personalised patient care that underpin our profession. Each patient's unique oral health needs should guide our choice of scaling method.⁶

This is a call to the dental community to engage in thoughtful and evidence-based discussions regarding the judicious use of electronic scaling devices. It is essential that we prioritise the long-term oral health and comfort of our patients by taking a comprehensive approach to patient care.

Our primary goal as dental professionals should be to provide the highest standard of care while minimising potential risks. Achieving this goal requires a reevaluation of our current practices and a commitment to patient-centered care.

In conclusion, we urge our colleagues to consider the implications of an indiscriminate reliance on electronic scaling. Let us promote a culture of balanced decision-making, thoughtful assessment of patient needs, and the responsible use of technology in our pursuit of excellence in dental care.

COMPETING INTEREST:

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AUTHORS' CONTRIBUTION:

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