

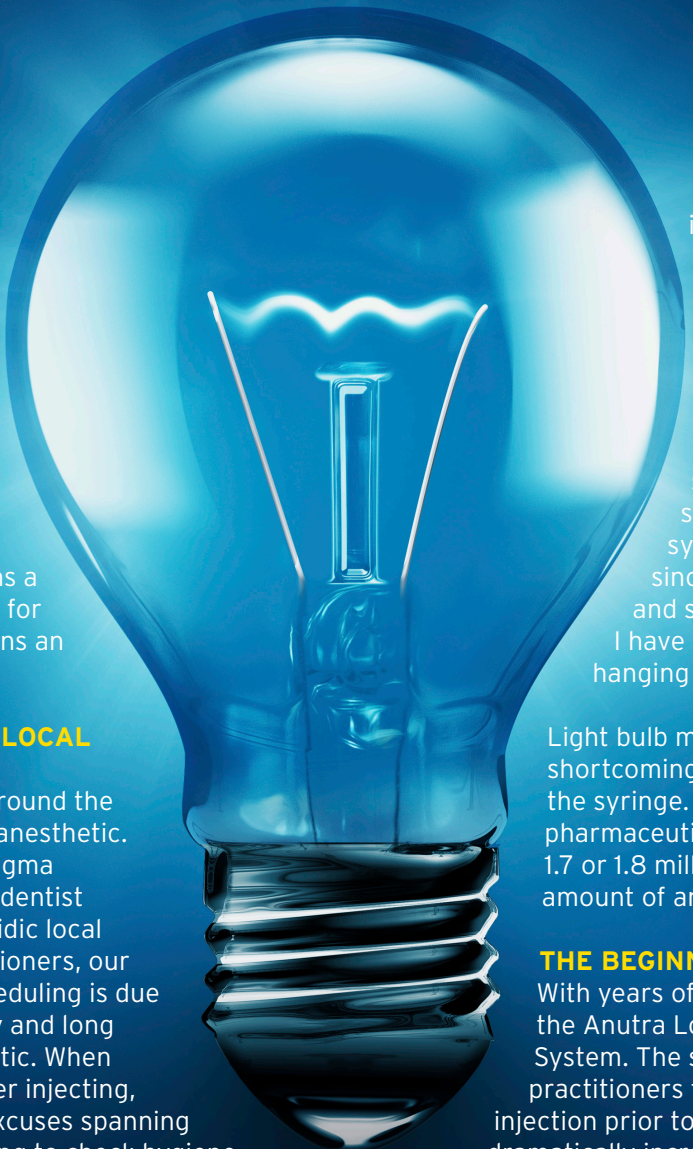
# THE Light Bulb *moment*

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It was not uncommon for our family dinner time conversations to revolve around best practices in healthcare. You see, my father was a medical anesthesiologist and my brother is a dental anesthesiologist. I myself am a sedation dentist. In each of our specialties, reducing patient pain is critical.

Thinking back, I can vividly remember my father asking why dentists did not buffer. Frustrated, I would explain, "It's complicated. You have this little carpule and you have to expel a bit of anesthetic and then push the precise amount of sodium bicarbonate into the carpule. The bicarbonate can't be exposed to air and...." It was virtually impossible to buffer accurately and efficiently let alone safely and precisely.





Buffering is a chemical process that neutralizes acids and bases. When you buffer lidocaine by adding sodium bicarbonate, you're bringing the lidocaine up to physiologic pH thus neutralizing the acid. For patients this means a comfortable injection, for practitioners this means an efficient schedule.

### **INEFFICIENCIES OF LOCAL ANESTHETIC**

Our industry is built around the inadequacies of local anesthetic. For the patient, the stigma surrounding pain of a dentist is attributed to our acidic local anesthetic. As practitioners, our entire convoluted scheduling is due to the unpredictability and long onset of local anesthetic. When we leave a patient after injecting, we have a library of excuses spanning the gamut from needing to check hygiene, catch up on charting or just checking our phones. It dawned on me, "Why do we leave the patient in the first place?"

According to a study published in *Entrepreneur*,<sup>1</sup> uninterrupted time is 40% more efficient. It explained that the average person saves at least 90 minutes each day if they focus on the task at hand. So, how could our industry have a streamlined workflow?

Realizing the extreme inefficiencies at the cornerstone of our daily practice, I took my father's challenge to heart. I set out to discover a way in which dentists could buffer. The power of buffering

in the hand of a dentist could absolutely transform practice efficiency and radically enhance a patient's experience.

### **LIGHT BULB MOMENT**

A physician friend of mine strolled into my office. He saw the metal syringe—the syringe I have used everyday since dental school. He laughed and said, "Is that an antique? I have a picture of one of those hanging in my office."

Light bulb moment! The other major shortcoming in our anesthetic delivery is the syringe. Why have we let some major pharmaceutical company tell us that a 1.7 or 1.8 milliliter cartridge was the right amount of anesthetic? That's ludicrous.

### **THE BEGINNINGS OF ANUTRA**

With years of engineering, I developed the Anutra Local Anesthetic Delivery System. The system makes it easy for practitioners to simply buffer every injection prior to administration. This dramatically increases patient comfort and transforms the workflow in your practice. Additionally, a key component of the system is the multi-dose, disposable Anutra Syringe. This syringe eliminates the need for the antiquated metal syringe and confining 1.8 milliliter carpules.

Being a sedation dentist, I constantly receive referrals of patients that struggle with anesthetic. Some are high-fear; others simply do not get numb. There is nothing worse than watching your patient wince when you inject or having to constantly stick them if they are difficult-to-numb. With a more predictable

<sup>1</sup> [www.entrepreneur.com/article/226991](http://www.entrepreneur.com/article/226991)



and comfortable anesthetic, my patients were almost always profoundly numb, the first time, in about 2 minutes. Not to mention, I consistently use less than one milliliter on many injections—even hard to numb patients because of the profundity of buffered anesthetic.

Very quickly I realized that I loved buffering for more than pain reduction, my schedule was more streamlined than it had ever been. It was difficult for me to get in the habit of staying with my patient after injecting. When I forced myself to stay chair-side and go to work immediately, I had an epiphany—I was walking the patient out of the room having completed their procedure at the same time I would normally be returning to their room to begin. It changed my scheduling forever.

### **A DAY WITH ANUTRA**

One of my favorite days as a practitioner was dealing with multiple emergency cases back-to-back while having to catch a flight in the evening. Normally, I would have said it was a disaster, but with Anutra I felt so fulfilled.

It was 2:30pm. Two hours and thirty minutes until departure. A patient was in the hygiene chair. I went in to do my check and found cavities on 28 and 29. We all know that if we ask a patient to reschedule, there is a probability they might not return. Plus, same-day treatment is best for the patient and it helps our bottom line.

Without hesitation, my assistant set up the room. Meanwhile, a longtime patient and close friend walked in. He had knocked off a good portion of number nine. With only two hours left before I took off, I confidently told my staff to seat him.

On patient one, I went in for a lower block with Anutra. By the time I had put down the syringe and prepared to drill, it had been two minutes and the patient was profoundly numb. I went to work immediately.

Racing against the clock, I went to the next operatory where my friend anxiously awaited treatment. I infiltrated number nine. He did not flinch. After evaluating the remaining prep, adjustments were made to replace the previous crown. Using the Omni-cam, the prep was scanned for the design of the crown.

By 3:20pm the crown had finished milling and went through the Ivoclar Custom Staining Oven for a perfect finish. By 3:45pm I had comfortably seated the crown, checked occlusion and ensured all was aesthetically pleasing.

The clock was running out. Battling the start of rush-hour traffic, I had 10 minutes to get to the airport. Without Anutra, there is no way I would have been able to provide the high level of service and unparalleled comfort to these unscheduled cases. Not only did I make it to the airport, my staff was able to leave on time without the added stress emergency cases previously brought.

This is just one example where I have provided unprecedented patient experience without sacrificing the schedule and the precious time of my staff.

Originally, I created Anutra to honor my father and to reduce the pain of my patients. Little did I know the transformative power of utilizing buffered anesthetic in my practice daily for me, for my staff and for my patients.

**Visit [www.anutramedical.com](http://www.anutramedical.com)  
for more information!**

*"Only a life lived for others  
is a life worthwhile."*

ALBERT EINSTEIN

