

Flexichange[®] – the Shape of the Noughties

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A few months ago I was on the point of studying the catalogues and ordering some new hand instruments when I was handed a message from the receptionist. Could I ring DENTSPLY? I did this and was delighted to be offered a set of Flexichange Silicone handled instruments on the understanding I wrote about my views on them. So here are my thoughts after two months of use.

It's always difficult to choose instruments from a catalogue, you can't tell how large or angled the business end of the scaler or curette is until you have it in your hand and it's hard to assess which surfaces can be reached comfortably. This was a great opportunity to do all of the above.

The variable and vibrant colours of the handles impressed me immediately, providing quick and easy identification. I have had to place coloured bands around all my handles so I can pick the ones I need, and nurses can rarely tell the difference between a scaler and a curette (I remember my own confusion when I was a dental nurse). With these you can ask for a green one or a yellow one, and the patient doesn't become alarmed by the word 'curette. The range of nine scalers, curettes and hoes seemed to be a good choice but a good light and keen eye was needed to read the numbers on the metal shaft.

A slightly raised Braille type dot on the handle gives a good grip and the weight is sufficient to give the right balance but still remains light. I haven't noticed the finger ache I tend to experience with other instruments. The silicone material has a slight bouncy 'give' to it, rather like impression material. It felt strange to begin with but it is comfortable to hold and doesn't slide about or make a clatter on the tray. Care has been taken with bonding the silicone to the metal tip to minimize cross infection, and the tips are interchangeable so when they have been worn by use and sharpening they can be replaced without having to buy a complete instrument.

I guess everyone has their own favourites when it comes to instruments and it's a personal thing. Although trained to use push scalers I don't like the feel of these on my teeth so tend to avoid using them. I know they are popular for heavy supra calculus on the lower anteriors and the one I was sent has been paired with a straight jaquette in the MacFarlane 2/3. I think most dentists would recognize and use these. Two sickles were sent which are popular, all rounders; one has the usual sturdy blade and the other, a Refinement H6/7, has a finer, elongated point for small interstitial deposits and stain on the anteriors. Hygienists would find this graceful sweep useful in gaining access.

The two Refinement WonderHoes are strong but have been refined with narrower blades to slip into smaller crevices below the epithelial cuff, a great improvement on the bulky original hoes and I am more likely to use these. One of the WonderHoe tips is very effective for removing the ridges of sub gingival calculus on the distal of upper second or third molars, and staining on the exposed sensitive ridges of root on anteriors, which was a new idea for me.

The four Gracey's, 1/2 7/6 11/12 & 13/14 will see you around the mouth and having the sharp surface on only one side of the blade means greater comfort for the patient. I found the 13/14 especially useful with the angle and long shaft providing a better reach for the inaccessible second and third molars. The range of nine instruments I was sent would see you around the whole mouth and be ideal for setting up a surgery from scratch.

Over the years instruments and equipment have improved dramatically enabling us to achieve much better results. The areas we could access when using 'sit up and beg' dental chairs were very limited and the dental light was never good enough to achieve a good reflection. I trained in 1971 and ultrasonic scalers were rarely used. I remember scaling an anterior with grade 3 mobility by hand, having to hold it in place. A modern Cavitron™ would make light work of it today and the patient would be more comfortable.

We are able to reach more corners by treating patients in the supine position and although many were wary to begin with, most accept this position quite happily these days. It certainly makes back ache less of a problem. The standard of work we can achieve is so much higher. When I persuaded my employers to allow me 30 minutes for each patient I thought I would be less rushed and have spare time, but all that has happened is that I now work to a higher standard and achieve more. Hygienists are no longer regarded as 'scale and polish machines', hopefully, but are able to carry out a variety of procedures, administer local anaesthesia, place temporary fillings and replace crowns. It is a different world.

Admittedly we have larger numbers of hygienists and therapists to train and treat our patients, I was one of only 900 when I qualified, but our patients are so much more skilled and receptive. We can achieve better results in our work because they can be taught to do complicated things like using bottlebrushes and floss, although I am still smiling at the image of my last patient as he braced himself for the scary task of using floss threaders under a new bridge. I am confident that he will practice at home and become more confident. And we were able to laugh as he tied himself in knots in front of the mirror.

I am convinced the media have helped us in this awareness, advertisements, articles in magazines, programmes on TV and Radio all raise our profile from the person with the syringe and the drill to the friendly and hopefully approachable person who helps patients to achieve their goals. As long as there are no more films like Marathon Man to set us back!

Diana's nine instrument set included: H6/H7, Refinement H6/H7, MacFarlane 2/3, Gracey 1/2, Gracey 7/8, Gracey 11/12, Gracey 13/14, Refinement Wonderhoe, Refinement Wonderhoe CA

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