


Clinical Excellence and Patient Attention Combine for Effective Care

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Kavish Gurjar, BDS, DDS, has focused on implantology and bone reconstruction since moving to the United States from Ahmedabad in Gujarat, India, to study, work, and grow his family.

After graduating as a top 10 student from the periodontal honors program at the New York University (NYU) College of Dentistry in 2014, he joined the State of the Art Dental Group in Rockville, Maryland.

Also, Gurjar travels around the United States to speak at events such as the Lake Superior Implant Conference and in front of the International Congress of Implantologists.

We sat down with Gurjar to learn more about his passions, why he believes in evidence-based dentistry and research, why looking at patients in “4Dimensions” is important, and how his research and methods have started to gain traction.

Q: What excites you on a daily basis about being a dentist and implantologist?

A: Being a dentist with the ability to change patients’ lives by giving them results beyond their expectations and creating a “wow” experience excites me the most. There are patients across the United States who need their teeth replaced with dental implants, which they can’t do if they have missing or defective bone.

I believe and I have proven that I have the skills to restore their lives with happiness and restore the defective bone that is lost. Being able to do this for others on a daily basis fuels me to be a better surgeon and dentist every day and is the reason I am an artisan dentist, surgeon, and implantologist.

Q: What is your daily routine as an implantologist?

A: Being an implantologist, my job is to identify the functional needs of the patients I see every day to improve their livelihoods. I identify an emotional treasure in every patient that helps me plan my approach to fulfill that patient's needs. The next step in my day is to treat these patients with maximized digital technology to provide the best possible dental care.

At the end of the day, I personally call or message patients directly from my personal cell phone, making sure they are doing well and seeing if they have any concerns. I try and make myself available 24/7 for them. Also, on some days, as an implantologist, we perform big surgeries, which can be too much for patients, and they need TLC calls.

I also try to keep myself up to date with innovations in the implant world to provide top-notch service to all my patients with no compromise in care.

Q: Was it difficult coming to the United States? What early struggles did you have to overcome?

A: Though it was not easy, I felt prepared for the challenge from the start. My goal was to be the first dentist in my family and to fulfill my parents' dream that I would become a doctor. I was always passionate about dentistry and the various technologies in the field, but it was very difficult to access it fully in India.

For example, in India, we used to take impressions with rubber-based materials, whereas in the United States, we have access to digital impressions, which is quick and easy for patients who have a gag reflex, and no materials are stuck in their mouth.

So once I finished my schooling back home, I decided I wanted to upgrade my skills and knowledge and study in the United States. I am proud that I have made it here in America, where the technology is very good, which helps me each day to master my skills and become a better dentist.

Q: Why was coming to the United States, studying at NYU, and then practicing your craft here important to you?

A: I knew I would not be able to accomplish everything I wanted to in my career and provide the level of service I ultimately wanted for patients if I stayed in India. Also, I was in a diversified atmosphere at NYU with very welcoming and warm individuals. I was honored to be part of one of the few selected for the periodontal honors program, in which I was able to perform surgeries, grafting, and placement of dental implants at an early age and stage.

While studying there, I learned that so many people who are in need of specialty care and are just wearing dentures are still unhappy. To be able to learn the skills to give these people back their normal function, which will help them to be successful in their lives, is a skill I am so thankful to have received by studying at NYU.

Because NYU has the biggest federal sponsors for oral cancer treatment, as students there, we were able to gain a lot of exposure to these cases and learn how to diagnose and treat them. These procedures, along with learning about how to treat gum disease, do tooth extractions, and quickly fix emergencies, made NYU's Langone Medical Center an incredible place to be in, and I can't thank the people there enough.

Q: What are your areas of specialty? Why did you want to go into those specialties?

I am a general dentist who graduated with honors in periodontology and an implantologist. As I trained for perio surgery, I treat gum disease, and as an implantologist, I restore functional teeth to patients who have lost teeth due to bone degeneration or other causes.

Specializing in these areas has enabled me to treat patients with relatively severe conditions and restore their ability to function normally in day to day activities. From the beginning of my career, I felt motivated to learn what I needed to be able to provide patients with a level of care beyond what they routinely get at the dentist's office. Serving my patients with the highest level of care possible is more than just my job. It makes my own life purposeful and meaningful.

Q: You also have found success in bone reconstruction with guided bone regeneration. What is the most difficult part about these types of procedures?

When we do bone reconstruction with guided bone regeneration, the most difficult part is having the patient inconvenienced during the procedure due to the extensive surgery and postoperative swelling.

Bone reconstruction with guided bone regeneration is a surgical procedure to stimulate the bone growth in combination with adding bone graft (sterilized particles of human cadaver bone) on the defective site of the jawbone. It is usually performed on patients who have extreme atrophy or defective bone that is lost either due to missing teeth or some sort of infection.

This procedure is performed by very few skilled dentists and surgeons due to its being very technique-sensitive, extensive, and invasive. I am proud to be able to do this type of procedure. However, there are always difficulties with any procedure.

In this case, we deal with vital organs, nerves, and blood vessels, which makes surgery very critical. If there is damage to any nerve during surgery, it can cause permanent paresthesia, or numbness of face, loss of touch sensation, loss of vision, loss of muscle control and the ability to smile or close the eyes, loss of tongue sensation, or loss of taste buds. I also am proud to report that I've had no negative cases.

Q: What research have you been reviewing that will help move your practice forward?

A: It has been 15 years since I first started my dental journey. I believe in evidence-based dentistry and research and in looking at my patients in 4Dimensions. We all know the three dimensions, but the fourth one is patient expectations. It is very important for me to know if I have exceeded my patients' expectations. No matter how skillful a doctor is, if they do not see and meet patient expectations, no surgery can be a complete success.

A lot of people are aware that taking a bone from the hip and using it to replace the defective bone in the mouth involves extensive surgery in a hospital setting, months of recovery, expensive costs, and patient inconvenience. This procedure also only can be done by a general surgeon or an oral surgeon.

But now we have human cadaver bone, which can be used to replace defective jawbone and stimulate bone growth, and this only involves a couple hours of surgery and a few days of recovery. It's very cost effective, and it provides better and more predictable results than a hip graft. The new technology and research behind this procedure is something I continue to study and perform. I do not refer a single patient outside for a speciality dentist, as I can now provide everything under one roof, as we are ultra-equipped with technology.

Q: What current trends in your field are you most excited about?

A: Some of the trends in the digital 3-D scanning space, including bone reconstruction with guided bone regeneration, which began with only a few speciality doctors, represent such an advance over previously available techniques. I feel I entered the field at a very exciting time, where I am able to provide patients with more than I ever could have before.

I travel regularly to attend many conferences related to dental technology so I can always be upgrading my own knowledge with new developments in the field. It is also important to me to provide a free dental clinic for the community once a year as a way to give back and help make people aware of proper dental health.

Q: What do you feel makes a great dentist?

A: A great dentist not only works with a tremendous amount of skill, but also with the motivation to do what is best for the patient. The best service for patients is only achieved when the dentist understands each patient's needs and works with compassion for the patient. That achievement is the ultimate reward. The financial rewards seem to flow naturally when I work with that motivation.

A great dentist is a combination of multiple things, which involves the ability to be updated with technology and utilize it at its maximum to provide the best possible care for patients. Also, a great dentist needs to effectively communicate, understand the dental needs of the community, identify problems, and provide the best cost-effective approach for patients.

Taking on the responsibility of being the best dentist I can be has definitely made me a better person than I was when I started dental school in India. In today's global community, it is definitely important for dentists to be adaptable to patients from many different backgrounds to be able to do the most good for all kinds of people. I think it is also important to have a balanced life. Having a medium pace and spending time with my family, who also live here in Maryland, is very important to me.

Q: What are your own personal and professional goals for the future?

A: My personal goal is to achieve my professional goals, as I am completely dedicated to the dental profession, which is my passion, with the full support of my family and friends.

My ultimate professional goal for the future is to create worldwide awareness of oral health. I don't want any patients to have gum disease or have to wear removable, partial, or complete dentures. I want to give my patients back their actual teeth and help create smiles that they are proud to show off.

Beyond this, I want to help serve the community and one day open a complete reconstructive care center and nonprofit foundation for patients who are financially weak but who still want to achieve the same smiles that people in better financial situations can have.

Q: What is your advice to patients who want to keep on having a healthy and good-looking smile?

A: There is so much that patients can do on a daily basis for their own oral hygiene. Prevention is the best medicine, and I do all I can to educate patients on the self-care measures they should be taking so that invasive measures like surgery and implants are taken only as a last result.

Patients who are at risk for developing gum disease can use medicated mouth rinse and prescribed toothpaste that help prevent gum disease. They can also avoid brushing their teeth too hard. Gum disease has multiple causes including genetics, medications, malocclusion, and smoking. According to my own research, those who smoke or use some type of tobacco are more likely to get some sort of gum disease. If you smoke, try to stop right away, or seek smoking cessation therapy.

Everyone should brush their teeth twice a day and floss efficiently twice a day. And, as always, everyone should maintain a six-

month teeth cleaning schedule at their local dentist office no matter what other treatment they are getting so dentists like myself can keep an eye out for any problems in their mouth.

Mr. Miller is a health reporter based in Los Angeles who specializes in interviewing and profiling some of the world's top influential personalities in medicine. Previously a writer and contributor for the *LA Times*, *Business Insider*, *Health Today*, *Forbes*, and other publications, he loves the freedom with freelance work and enjoys spending his free time with his wife, children and family dog.

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