

Ethical concerns arising from trends toward commercialized overtreatment in dentistry

Keeping patients first in an ever-changing industry



Adel Rizkalla, DDS

A 2024 article copublished by KFF Health News and CBS News ran with the title, “Dentists Are Pulling ‘Healthy’ and Treatable Teeth to Profit from Implants, Experts Warn.”¹ The article opened with a case study of a woman who underwent an aggressive implant procedure after seeing advertising that promised it was a faster, easier route to the smile she wanted than the more conservative approach her dentist originally recommended. During and after the procedure, the patient faced severe complications that left her in a worse condition than before the procedure and ultimately led her to pursue legal action against the clinic that performed it.¹

The procedure the woman underwent, known widely as all-on-4, which replaces a full arch of teeth with 4 implants, and the all-on-X procedure, which is used when there is concern that more than 4 implants may be necessary because of the possibility an implant may fail and there are concerns due to bone availability, are increasingly marketed treatment modalities that possibly violate the American Dental Association Principles of Ethics and Code of Professional Conduct (ADA Code), specifically the principles of Patient Autonomy (“self-governance”), Nonmaleficence (“do no harm”), and Veracity (“truthfulness”).² Although many all-on-4 procedures are performed appropriately and without incident, the authors of the case study effectively highlighted the dangers of what seems to be a trend toward commercialized overtreatment and extraction of healthy teeth.¹ Dr. Giannobile, dean of the Harvard School of Dental Medicine, was quoted as saying, “There are many cases where teeth, they’re perfectly fine, and they’re being removed unnecessarily . . . I really hate to say it, but many of them are doing it because these procedures, from a monetary standpoint, they’re much more beneficial to the practitioner.”¹ The Preamble to the ADA Code admonishes dentists to follow high ethical standards to benefit patients. Outcomes such as those experienced by the patient in the case study, and practices described in the marketing and performances of some all-on-4 treatments, can be avoided when dentists adhere to the ADA Code.

The ADA Code provides guidance to ethical clinicians.² The ADA Code’s principles of ethics are not regulations, nor is the ADA Code a complete articulation of all ethical obligations bestowed on dentists; instead, the ADA Code serves as an ongoing dialogue between the dental profession and society.

In section 5 of the ADA Code, the principle of Veracity provides that dentists have a duty to communicate truthfully and to be honest and trustworthy in their dealings with patients and society at large.² The principle of Veracity also addresses the ethical use of marketing and advertisement by ADA dentists. Specifically, Advisory Opinion 5.B.6. of the ADA Code states that a “dentist who recommends or performs unnecessary dental services or procedures is engaged in unethical conduct.”² According to the principle of Veracity, dentists must disclose to patients the true condition of their teeth and their suitability for all available treatment options.

In section 1 of the ADA Code, the principle of Patient Autonomy requires dentists to inform patients of the proposed treatment and any and all reasonable options in a manner that encourages meaningful patient participation in treatment decisions.² Ethical concerns raised regarding patient autonomy in the use of procedures, such as all-on-4, include whether the patient’s autonomy has been protected when a practitioner recommends the treatment without providing sufficient education to enable the patient to be an informed participant in the treatment decision process. Advisory Opinion 5.D.2., under the principle of Veracity, prohibits dentists from inducing their patients to purchase or undergo procedures by means of misrepresenting the product’s value, the necessity of the procedure, or the dentist’s professional expertise in recommending the product or procedure.

In section 2 of the ADA Code, the principle of Nonmaleficence provides that dentists have a duty not to harm patients and a responsibility to protect patients from harm.² One of the obligations of dentists under the principle of Nonmaleficence is to keep their skills and knowledge current. With the introduction of new treatment technologies, such as all-on-4, clinicians must ensure they are properly trained to use the technology and provide treatment at the levels and standards ascribed in the industry. Furthermore, the principle of Nonmaleficence encourages dentists to seek consultation whenever the welfare of the patient will be safeguarded or advanced by those with special skills and obligates dentists to refer patients to experts when they do not have the skills necessary to perform treatment.

In section 3 of the ADA Code, the principle of Beneficence (“do good”) mandates that dentists promote the patient’s

welfare and act for the benefit of others.² Dentists' primary obligation under the principle of Beneficence is service to the patient and the public at large. Although dentists cannot control independent marketing of treatments to the public, they can advocate and address treatment concerns raised by the advertised treatment in various public forums and make sure they and their ADA colleagues use ethical marketing practices. Dentists must make sure the treatment recommended benefits the patient and not the clinician.

Finally, in section 4 of the ADA Code, the principle of Justice ("fairness") requires dentists to treat people fairly.² Given the financial commitment of the all-on-4 procedure, as ethical dentists, we must present the same treatment options to all, each with weight and endorsement proportional to its likelihood of a positive outcome, without focusing on the personal or economic status of the patient.

CONCLUSIONS

Advances in our profession promise both economic benefit and enhanced patient outcomes, which are both consistent with the preamble of the ADA Code; however, as clinicians, dentists must take care to keep the latter as our primary objective at all times.² The ADA Code has been praised by many health care professions.^{3,4} As ethical dentists, we must embrace the ADA Code and reaffirm our commitment to deliver evidence-based, patient-centered care. ■

<https://doi.org/10.1016/j.adaj.2025.10.005>

Copyright © 2025 American Dental Association. All rights are reserved, including those for text and data mining, AI training, and similar technologies.

DISCLOSURE

Dr. Rizkalla did not report any disclosures.

Dr. Rizkalla was a faculty member, College of Dentistry, Howard University, Washington, DC, the chair, ethics council, Virginia Dental Association, Richmond, VA, and the chair, ethics and jurisprudence committee, Northern Virginia Dental Society, Fairfax, VA, when the work described in this article was conducted. He now is an adjunct faculty member, College of Dentistry, Howard University, Washington, DC, the head, dental professional liability risk management, Dentists Choice Insurance, Jersey City, NJ, the chair, ethics council, Virginia Dental Association, Richmond, VA, and the chair, ethics and jurisprudence committee, Northern Virginia Dental Society, Fairfax, VA. Address correspondence to Dr. Rizkalla, 3100 S Manchester St, Suite T-4, Falls Church, VA 22044, e-mail rizkalladds@gmail.com.

Ethical Moment is prepared by individual members of the American Dental Association Council on Ethics, Bylaws and Judicial Affairs (CEBJA) or guests of CEBJA, in cooperation with The Journal of the American Dental Association. Its purpose is to promote awareness of the American Dental Association Principles of Ethics and Code of Professional Conduct. Readers are invited to submit questions to CEBJA at 401 N Michigan Ave, Suite 3300, Chicago, IL 60611-4250, email ethics@ada.org.

The views expressed are those of the author and do not necessarily reflect the opinions of the American Dental Association Council on Ethics, Bylaws and Judicial Affairs or official policy of the ADA.

1. Kelman B, Werner A. Dentist are pulling "healthy" and treatable teeth to profit from implants, experts warn. KFF Health News. Accessed October 28, 2025. <https://kffhealthnews.org/news/article/dental-implants-investigation-failures-unnecessary-healthy-teeth>

2. Principles of Ethics and Code of Professional Conduct, with Official Advisory Opinions Revised to March 2024. American Dental Association. Accessed October 19, 2025. https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/about/ada_code_of_ethics.pdf?rev=82d95a7422ac47f6bd7cb856be68e359

3. American Dental Hygiene Association: code of ethics for dental hygienists. *J Am Coll Dent*. 2015;82(4):32-34.

4. Burgoyne CC. We are who we say we are: ethical advertising. *Va Dent J*. 2024;101(4):11. Accessed October 28, 2025. <https://commons.ada.org/vadentaljournal/vol101/iss4/11>