**CED WORKING GROUP (WG)** **E-HEALTH: ORTHODONTICS, ARTIFICIAL INTELLIGENCE (AI) AND DENTISTRY**

**Reason for this document:** During its last online meeting on 14 March 2022, the WG eHealth discussed the topic of orthodontics and AI. Several members highlighted that there are issues and developments in this field in their countries (e.g., Estonia, France, the Netherlands, the UK). The WG members agreed that the issue needs to be explored in more detail - as such, an approval by the Board on whether the WG should focus on this topic is needed.

**Action from CED Board required:** recommendation on whether the WG eHealth should continue pursuing this topic in more detail

**Main points on orthodontics, AI and dentistry as per the WG discussion:**

* The Chair introduced the topic of increased demand of ‘do it yourself’ (DIY) orthodontics (e.g. for aligners), noticeable in the Netherlands. The Chair highlighted that the lack of involvement of dentists could lead to numerous problems for patients
* The WG identified 3 different approaches to DYI orthodontics
	+ The existence of a software that the dentist or the appointed person in the dental office can use for products such as brackets
	+ DYI orthodontics that include producing an appliance (e.g. clear aligners) via an established company with technicians and algorithms, with the instructions of a dentist and/or specialised orthodontist
	+ Laypersons ordering a final product (e.g. clear aligners) while the procedure does not involve a dental diagnosis as part of the production
* There is a big discussion in Estonia on this topic at the moment and it is important that this process remains within the field of dentistry, performed either by dentist or specialised orthodontist; the patient cannot be the solely responsible for this process
* In France, there was a debate regarding this, since there were also practices of orthodontic treatment (especially for aligners) without the proper involvement of a dentist
* The issue also exists in the UK and there is some progress with regulators being more involved (there are available Dental Council statements on the topic)

**Main issue identified:** The WG agreed that its overall concern on this topic focuses on the potential lack of involvement of dentists in the process; there is a need for strong arguments as to why a dentist must always be involved.