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the most competent team members. The team leader is the control center for the whole procedure and makes the final decisions after agreement with the team and the patient.

All the specialists involved in the treatment assume part of the responsibility and have to report to the team leader regarding whether the delegated work could be carried out successfully or not, and whether there were any unresolved problems. This process is comparable to sending work to a dental laboratory; in a similar way to receiving work from the laboratory, the team leader carries the responsibility of the outcome of the delegated treatment.

Before starting any treatment, there is a need to transparently disclose the probability of successful work. In the eye of the patient, the team leader is the architect and coordinator of the process. It is up to the team leader, who carries the final clinical and ethical responsibility, to choose the right team in order to achieve the best possible result.

The cases presented this year were each conducted by different leaders and their teams. In the first article in the series, the medical team leader was Dr Istvan Urban, a world-renowned surgeon from Hungary with a sound understanding of prosthodontics. The challenge for Dr Urban and this team was that they had to start by removing two failing implants. Therefore,

Why a leaf on the cover? In their manifold forms, leaves are one of the main organs of the plant and serve two vital functions: transpiration and photosynthesis. The former regulates the plant's water balance, while the latter is of paramount importance for life itself as it binds carbon dioxide, generating carbon hydrates and releasing fresh oxygen. Today, research teams try to emulate what leaves have been doing for millions of years as they endeavor to develop 'artificial leaves' – humanmade systems

EDITORIAL

What does it take to be a medical team leader?

This year we introduced a new section in the IJED entitled *Team Approach in Esthetic Dentistry*. Each case presented in this section is supervised by one practitioner who takes the responsibility of selecting and leading the team for the individual case.

What is required to be a team leader in dentistry?

Before putting together a team, it is paramount to know at least the basics of the planned treatment steps in order to select

capable of photosynthesis. Through a specific membrane, these artificial leaves extract carbon dioxide directly from the surrounding air. Therefore, in the future, optimized synthetic leaves may help to counteract the effects of climate change. This issue is highly topical and therefore we decided to feature a leaf on our cover.

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reevaluating and correcting the damage that occurred due to previous mistakes became part of the treatment plan.

In the second article, the team was led by the current President of the European Academy of Esthetic Dentistry, Prof Markus Hürzeler from Germany. The case was conducted in Munich. Prof Hürzeler, although well known as a very capable implantologist, decided to opt for a less-invasive treatment plan to fulfill the patient's expectations.

In the third article, the team leader was Dr Nino You from Japan. He and his team members understood that to meet the patient's expectations and achieve an acceptable result, it was necessary to not only focus on the six maxillary central incisors but also to improve the surrounding mandible.

In the current article in this edition, the leader was Dr Stephen Chu from the USA, who worked together with a team of world-renowned experts and lecturers in their respective fields. This case highlights the fact that each team member needs to understand the problems the other members face and know how to include the other specialists in a harmonious way to achieve the patient's expectations. This teamwork shows that ego does not come into the question of who takes the medical lead.

Statements from our experts

We asked our experts to tell us in a few words what should be expected of the medical team leader.



Dr Istvan Urban: The clinician should not only recognize if it is possible to solve the problem but also be able to identify and tell the patient where the limits are. Nothing is more frustrating than a promise that cannot be kept. Also, the treatment steps as well as the timing should be perfectly explained to and understood by the patient before treatment starts.



Prof Markus Hürzeler: The team leader has to be able to think out of the box – meaning that if you have a hammer, not every problem you face is a nail, and if you have a screwdriver, not everything is a screw.





Dr You Nino: As the team leader, you have to learn deep knowledge as well as the limits of the specializations other than your own. The best treatment plan from the clinical aspect may not be the best one for the patient. You need to present the most beneficial treatment plan, not only for the medical team but for the patient.



Dr Stephen Chu: Living in a country where there are high expectations, it is even more important to understand what is possible and what is not. Especially when receiving cases that were previously resolved in a poor manner, it is even more important not to make the same mistakes again. In addition, the sequencing and timing of treatment is critical to maximize the benefits of interdisciplinary care.

Final remarks

Treatment planning directed by the medical team leader together with the team is crucial and cannot be carried out over the telephone only. It is important to select a team whose members work hand in hand, communicate openly and transparently, and take ample time to plan and execute the treatment. Doing so has a high value for the final result, which the patient will live with and enjoy. The four patients presented in this series of articles in 2019 each understood this value and were more than willing to pay for it.

Enjoy reading!

Sincerely yours

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