Dear colleagues, dear friends,



Prof Dr Norbert Gutknecht

_Sometimes we wonder about the content of discussions about the use of lasers between universities and private offices. For decades we have had to listen to arguments such as "if you use a laser you will carbonize the ename!" or "you will overheat and necrotize the soft tissue or pulpal tissue" or "you will destroy root canal structures" or "you will produce micro cracks on root surfaces" and so on. All of these arguments have been investigated seriously and for many years we have gained a lot of evidence on the beneficial effects of lasers used on different types of tissues.

In-vitro studies, clinical studies and scientific case reports have been presented on various conferences, seminars and congresses on all of the five continents. And still there is an insufficiently reflected resistance against this technology. I can understand that a certain kind of pride is hard to overcome and admitting that, although one might be a good dentist, one has no idea of an appropriate use of lasers in dentistry must be equally difficult. Another reason could be the fear of not having enough background information on physics and biophysics to understand how lasers are operated on the tissues found in the oral cavity.

It is actually a shame that we are ready to see an ophthalmologist who uses a laser to improve our sight knowing that we have only two eyes, none of which can be replaced if this laser treatment fails—still we don't believe that there should be a possibility to treat other kinds of tissues in the same way or an equally eloquent way as we believe an ophthalmologist treats our eye.

I am proud of all colleagues around the world who have taken the challenge to submit themselves to an education and are now successfully using lasers in their various dental treatments. You all can be proud to use this technology—and you should be proud by telling other, non-laser users, about your knowledge and success.

Multiple wavelengths greetings,

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Prof Dr Norbert Gutknecht

