

An interview with Niall Neeson BDS

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Niall Neeson is a dentist at Boyne Dental in Navan, Ireland. He has a special interest in helping people who either avoid (or really dislike) going to the dentist. At Boyne Dental, he has developed a bespoke service for nervous patients called “Dental Fear Solutions”. Our DFC volunteer Nikoleta Gehrman travelled to Navan to find out more!

Nikoleta: How did you come across Dental Fear Central?

Niall: When I joined Boyne Dental, I knew there was a hot opportunity to channel my passion and my interest in that area. Initially, I came across DFC through a Google search. It’s an absolutely wonderful resource for people out there who sometimes feel like they don’t know where to reach and where to go. Having that community and being able to ask a question to dentists without having to physically walk into a dental practice or have that exchange, yeah, it’s a fantastic resource.

Nikoleta: Why did you choose to become a dentist?

Niall: For as long as I can remember as a child I actually always wanted to be a doctor. I had never considered any other option really, and then I did work experience in a hospital and by the end of the week I was thinking “I don’t like it!” (laughs). I’d probably had some romantic image in my head about what was involved.

Then I remember chatting to my Dad afterwards and considering options. We discussed dentistry and what I would like to get out of a job on a day-to-day basis; I’d still be able to help and people and care and improve people’s health. I liked the idea and went with it.

I have absolutely no regrets. I have been asked by many people “if you could go back and choose again, what would you do?”, and I still would go back and choose dentistry. It’s a fantastic job and I love it.

Nikoleta: What do you love about it?

Niall: I love the variety, no two days are the same. You meet different people and you have different interactions and different challenges. The thought of sitting at the desk from 9 to 5 working on a computer just doesn’t appeal to me in any way.

Maybe I’m naturally a bit of a people’s person. But also having that productivity, the results that come with it and being able to see the improvements in health, being able to help people who are in pain and of course being able to help people who experience dental fear or dental anxiety or dental phobia has always been a massively enjoyable facet of the job to me. It’s always been the thing I got the most kicks out of.

So that’s where I get my buzz on a day-to-day basis. It’s not looking at a beautiful crown or a beautiful restoration. I go home with the feeling that I really connected to somebody and helped them overcome what has been a massive barrier, and brought them further along that journey of rebuilding trust and confidence in dentistry.

Nikoleta: When did your interest in treating nervous patients started?

Niall: I suppose from day one. As a vocational trainee, I was very lucky to have as a mentor Bert Hay. He was my vocational trainer. He’s a fantastic dentist, a great guy, and naturally absolutely so in tune with helping nervous patients.

I was also lucky at that stage that he allowed me to take the time that I needed rather than worrying about productivity. He said, “take the time you need to do things right at the beginning, and the speed will come and the rest will follow”. I feel very lucky to have had Bert as a trainer and to this day, I’d still regard him as a mentor and really close friend.

So from the beginning, I’ve always really enjoyed helping people who were nervous.

I think some dentists are naturally more attuned to that. At the ISDAM (International Society for Dental Anxiety Management) conference in Glasgow in 2019, a dentist called Donald Sloss was speaking about it - one of the slides at the beginning of his presentation was something like “I just, you know, I’m good at it! I have a gift for it”

(laughs). I think that's how he said it and it didn't come across as egotistical or big-headed, it was a very valid self-observation.

It made me think that probably anybody who has really developed a passion for helping with dental phobia, dental fear, and dental anxiety has a degree of that natural talent. Because there's so much you can learn but there's also so much that has to come naturally. I suppose it's a personality thing.

There are probably a lot of dentists out there who have all the tools to be absolutely wonderful at it but maybe the practicalities of day-to-day dental practice don't allow that development of the passion or interest.

Time realistically is a massive factor, and particularly at the beginning, you have to invest time with people who are fearful. You have to have time to listen to them, to reassure them, and to come up with a path forward instead of looking at the clock thinking "I'm 15 minutes behind and it's a 20-minute appointment and I have to do a filling or get this person out of pain". The real-world practicalities mean that you don't have the flexibility to really invest that time with the person in front of you.

But there are so many fearful people out there and there is a desperate need there, so it would be great if there was more of a focus in dentistry on genuinely putting that effort into helping people with dental fear and dental anxiety.

Nikoleta: Tell me about Dental Fear Solutions.

Niall: Dental Fear Solutions is a patient-centred approach to support the specific needs of each individual person, right from the first point of contact. My approach to helping people is that everybody has such a unique background and factors that have contributed to getting to the point where they are at that moment. It's not a case of one size fits all. We aim to communicate with the patient to find out as much as we can about how we can work with them to help them and to improve their dental health and achieve the goals they want to achieve.

I find [control and loss of control](#) is a powerful element to a lot of people's issues with coming to the dentist. From the beginning, it's about connecting with the patient and letting them know that we work as a team here, that we both want the same thing, that we want to achieve your goals.

So if a patient calls and lets us know that they hate the dentist, we have trained the staff who will answer the phone calls and emails at that stage to send a positive message of

“We can definitely help you” and get an appointment booked. Because that first phone call could be a massive moment for that person. It might have taken them ten years to get to the point where they’re actually picking up the phone.

And I don’t think people are in a mental frame of mind to take in much more than that on that first phone call. So we have a member of the admin team, Emma Browne, following that up with a phone call a day or two later. This is to find out more about the person and to begin to plan how we can help them. And she also explains the different things we can offer to help. Then we forward questionnaires which people can fill out at home in their own safe environment where they’re more likely to be thinking straight compared to sitting in the waiting room before their first visit.

Then I would give them a call a day or two before their appointment just to introduce myself. Sometimes it’s a short sweet conversation, sometimes it’s half an hour of tears and emotion and stories from the past. Sometimes it’s just a voice mail and that’s often enough to help. They still hear the sound of my voice and they hopefully think “he sounds OK” (laughs). I think it removes one more unknown from the first visit. It was Mike Gow in Glasgow who suggested that one at one of his courses and I thought “that’s powerful”. I found it being massively beneficial - the rate of people failing to come in has gone down to zero.

Nikoleta: Some dentists might feel there’s no point in spending so much time on people who may never even visit their practice...

Niall: It can seem a little bit labour intensive to some dentists or some practices, they might think “what if they never show up after investing that time and all that effort?”, but it’s been a real game-changer. If you give people a sense of control and trust, the rest will usually fall into place. I like to think that those processes certainly begin to build that trust, and then it’s over to us to provide that sense of control to people after that.

In relation to that, I think as dentists and as dental personnel, we often can forget about the person and how big a deal it is for them to be there. That was something that I really wanted to emphasise whenever I do staff training. Because stepping back and putting yourself in their shoes and really appreciating how they’re feeling will automatically lead people to have more patience and a more caring attitude.

That’s one part of it, just opening your mind to take note of your own tunnel vision and thinking about the person.

Nikoleta: And what's the other part?

Niall: The second factor which is important is the effect of anxiety on communication from a patient perspective. We're all very familiar with the fight-or-flight symptoms of the heart racing and sweating and an upset stomach maybe, but another physiological side of the fight-or-flight response is that communication is hampered. I suppose from an evolutionary perspective it's danger - you have to get out of this position. So people can come across as being maybe sharp, maybe being a bit angry or aggressive, and that's not necessarily the person, that's the impact the anxiety is having on them at that moment.

And also, they are probably able to take in so little compared to how they ordinarily would be that dentists can get frustrated at "I've told you this three times already, why are you asking me the same question again, I've explained that". But it's just another symptom of the fight-or-flight response. I think appreciating the state that people are in, knowing that they're really quite anxious and that this is difficult for them, can make a massive difference.

Nikoleta: How does the first appointment look like in your practice?

Niall: With DFS (Dental Fear Solutions) we have an extended appointment time to allow for plenty of discussion, chatting, planning, past, present, and future, as well as a gentle examination and any x-rays if the patient is happy to do that.

We use questionnaires prior to that first visit as a starting point, I use the [Modified Dental Anxiety Scale](#) and the Hospital Anxiety and Depression Scale as well, and then I have a third page with just a few open questions. Sometimes people write a couple of words, sometimes they write three pages and it never fails to move me whenever people recall the finest of details. They remember the words spoken, the tone, the smells, the feeling, how their body was feeling at that time, and in some cases it has haunted people for years.

It's not always a bad experience that's contributed, but those open questions are very helpful. So we ask "What do you feel has contributed to how you feel about the dentist?". We ask are there any specific procedures that concern you, that you feel nervous about, so we can begin to target where we need to reassure them and find a solution for their concern. We ask what are your goals, what do you want to achieve by coming and how can we help you get there. We also ask is there any type of music that would help you feel more relaxed, more at home, any album or genre. It's great whenever people give us

some album and we have it planned for them coming in, it's a nice touch, something familiar to them.

It's that bit of effort, that personal touch. We have TVs on the ceiling as well so you also can ask is there anything you would like to watch in particular: wildlife, a comedy, that sort of thing.

We have plenty of information there and we use that as a foundation for a chat. We don't go near the dental chair at the beginning, we sit and just have a chat. Often, it can be very emotional for people. We have a box of tissues at the ready and they are often used and that's absolutely fine. We understand that it's a massive deal for people sometimes to even speak about where their fears have come from, but we get so much from that discussion and sometimes that can go on half an hour, 45 minutes, just chatting.

At the end of that chat, we have a good idea about what we need to do to make them feel safe, we've got a fair idea of what tools we can use to achieve the objectives from a dentistry perspective and we have an idea of where they want to get to.

For a lot of people, the goal is to be able to come as a normal patient and that's great, completely achievable and realistic. For others, it's to be able to smile again. For others again, it can be more of a social benefit, their self-confidence. Often people are aware of the impact that their dental health and their dental appearance can have on them socially, professionally, in personal life as well.

Often, the dental examination part of it is simple after that. It's natural if you've been avoiding a dentist for years to catastrophise about that - if you haven't had a professional opinion in so long or if the last professional opinion was maybe a dentist making a humiliating comment or a rude comment about the condition of your teeth.

As a dentist, it always gets me whenever they reveal those comments that their dentists have made in their past that have stayed with them. That humiliation is often far stronger than the actual memory of any dental procedure. It's often not the pain of the dentistry, it's the interaction with the dentist that can stay with people.

So yeah, at the end of that first appointment most people are on cloud nine. I love to see people coming out with a good buzz, they're motivated, they're on board. It can really open the door that they maybe weren't sure could ever be opened. Again, that's powerful and so enjoyable to be a part of that journey and that's what I love about it.

Nikoleta: You have spent some time teaching and supervising students. What part does dental anxiety play at dental schools? If any...

Niall: It does play a part, and I know in Dublin Dental University Hospital where I supervise undergraduates just one afternoon a week as a visiting dentist they're very lucky there to have a few special care dentists in particular who are incredible at managing dental anxiety. Vast knowledge, skills, open-mindedness about it, and that will impact so positively on all those students coming out of the Dental Hospital.

Caoimhin Mac Giolla Phadraig in particular who was my supervisor and mentor through the sedation diploma I completed at the Dental Hospital. He is an incredible guy and just has a way of connecting with people and thinking outside the box, but really gives dental anxiety and dental phobia the respect that it deserves. Alison Dougall is another one and to be honest all the team down there and the sedation team, Mary Clarke, they're all singing from the same hymn sheet in a way which is great.

The sedation course that I completed in the Dental Hospital was so much more rounded than I expected it to be, I thought it would be drugs and getting patients into a certain state and do your dentistry, but there were lectures from psychologists and a big focus on CBT and the importance of the role it plays in dental fear. So I was really impressed with Dublin Dental Hospital and I learned a lot from Caoimhin and from the course in general.

From the undergrad perspective, again they are going to be exposed to the same people. I didn't train in Dublin so I don't know how much focus there was there. Certainly in Queens in Belfast where I trained there were things we learned about it, the vicious cycle of dental fear, but I don't feel like it's given the time and the weight that it deserves when it's such a big deal to so many people out there.

One of the things I like about supervising the undergraduates at the Dental Hospital is that I can get in early and teach them certain things to give them some awareness about how they can help with dental anxiety. Actually, I was supervising a second-year group, they're a lovely bunch and they were doing their first injections on each other. So I had to do just a demo at the beginning to talk them through it. I thought "this is great, this is their first experience how they're going to learn how to do this and I'll be able to speak to them about the positive language and distraction and all these little tips and elements to make things more comfortable and less fearful for people". Because obviously, if you get in early and teach them to do it this way, then they're more likely to do it that way. It was nice to be able to pass on those elements and that's how hopefully I can have an impact on other dentists coming through and give them a bit of my knowledge and experience on the subject.

Nikoleta: What do you believe dental students need to learn about dental anxiety?

Niall: I think it needs to be delivered to students in a way that they can really learn the significance and the real impact it has on people. Having a true understanding that really opens people's minds to it. That might involve having somebody who had a dental phobia to talk to them, something to make it more personal, more human.

I think communication is absolutely central to every hour and every day as a dentist, it is everything. Certain things I've learned over the years like the use of positive language and rapport-building techniques would be so helpful for new dentists who come out fresh.

Another thing would be the different options for managing dental anxiety. There's so much strong research on CBT and in certain parts of the continent, CBT is the main way of addressing dental anxiety, in the Netherlands for example. But over here, it just hasn't broken through despite the weight of research behind it.

There's a lot of good work being done in Glasgow, Edinburgh, Birmingham, London. There are real pockets where CBT has been embraced and services are doing great work in relation to kids as well, but I think the big challenge is introducing that to the practice setting. So giving dental students at least an awareness of the scope of management of dental fear and dental anxiety, that there is more to it than dental sedation. Sedation is great, too, and it certainly has a massive role to play. It may allow progress where otherwise there may be no progress, but there's a lot more to managing dental anxiety than that.

Nikoleta: How often do you actually use sedation for your patients in your dental practice?

Niall: Intravenous sedation maybe a couple of times a week and nitrous oxide maybe a few times a week as well. A lot of people come in expecting they would need it, but once they're in and they've met us and they've seen the place and begin to feel comfortable, they maybe find out their treatment need is not as great as they expected it to be. If you provide that sense of control and you're winning that trust then often it's not needed.

To me, there are massive benefits in people achieving their goals without it because it's much more empowering for them and much more of an achievement. They have done it themselves, it's not the drug that allowed it to happen. With intravenous, obviously, the vast majority won't remember much about it. At least with the nitrous oxide, they have a memory and they know that they can do it, and then it's an easier step to be able to

attend regularly and have treatment without the need for sedation. So it has a massive role to play, but not as much as people expect it to.

Nikoleta: Are there any misconceptions about dental anxiety among the public, dentists, students?

Niall: I think the main misconception that I aim to explain and reverse in people's minds is the misconception by dentists that nervous patients are not great patients to have. They, unfortunately, can be viewed as needing more time, more attention, more effort for less money or for the same money, but needing more time and investment. It's awful that that's the case but that's just the real world of the business of dentistry, unfortunately. But you're never going to get a more loyal person attending your clinic than somebody you have converted from being highly dentally anxious to being able to attend regularly. They're never going anywhere else as long as you're there. They are so appreciative. To be able to see that journey is incredible.

Also, people can become almost like disciples for the practice. Word of mouth is more powerful than a lot of marketing tools or a lot of money spent on advertising. Having somebody out there who is really passionate and so proud or amazed by what they've achieved that they go and tell people. You know, these days online reviews, Google reviews, Facebook, etc., that's how people make their decisions on where they want to go. Once you have won somebody over, they are more than happy to write a Google review or a testimonial. And because of the powerful transition and experience that they have been through, they can write almost poetic testimonials that you could never come up with even if you tried because it's coming from the heart and the soul, and that's priceless in this age.

Reading positive reviews really starts up the process of building trust before people have even contacted the practice. Which is amazing. So I think people who have had dental anxiety, dental fear, or dental phobia and attend your practice are valuable assets and can be a really effective practice builder.

Nikoleta: Imagine a patient you haven't been able to help. What would be a reason for that?

Niall: There are a lot of people certainly in the earlier stages of my career that I look back at with a degree of regret at how I managed things. Knowing what I know now, I think there are a lot of things that I could have done differently, I could have helped those people.

One challenge that I was finding was people who were showing signs of more generalised anxiety and maybe some other mental health challenges and it's not as simple as just "you've had a bad experience, OK, I'll give you a good experience and then you're massively along that pathway". That more generalised anxiety I found challenging. And that was one of the reasons why I chose it as a topic of my dissertation - because I wanted to learn more about how to help that person more effectively.

That's where I came upon a massive body of research behind CBT and the benefit of the psychological support that goes with that. And that's in line with general psychiatric and psychological research that says if there is a certain comorbidity present, it's more likely to persist over time, it makes it more difficult to treat, both the primary or the secondary condition. It needs a different approach from the dental anxiety side of things too.

That's why we use the Hospital Anxiety and Depression Scale as well to help flag that. Because there are times where you're weighing up the options and think "we could make very slow progress here, it might be challenging for you and you might fall off the path a bit. It's probably sensible to have a chat with your GP or to see a psychotherapist and then come back to me and we'll keep the momentum going".

Nikoleta: How do your patients react when you make this suggestion?

Niall: It can vary. There are certainly some people in that position who acknowledge they do need support and additional help. It can almost be a nudge that they have been waiting for - in some ways, it can be a positive thing. Others almost look confused (laughs), like "You're a dentist, you know. Can you look at my teeth please and stop talking about counselling and therapy?". But it's important to give the option and again, it's giving people the menu of "these are our options" and giving our input of what we feel would help.

But it has to feel right for them, so I would never say "You need CBT, go and have six sessions and come back to me in a month". I discuss the options and see what's right with them because that's critical - they need to be on board to get anywhere.

Nikoleta: Is there anything your patients can do to enable you to help them better?

Niall: I always find it very useful and helpful when people are really open with you about how they're feeling and about their emotions at that time, because it gives us more clues about how we can help them and reassure them.

I always say at the start “Let us know where your head’s at. If you’re feeling that the anxiety is starting to grow, let us know because we can do something about that”. I completely appreciate there are certain topics or certain elements of things that may have contributed to people’s specific dental fears they might not want to be open about, and that’s fine. Or they might want to be open about that at a later stage. But if people come in and tell me genuinely how they feel, it’s so much easier to really make progress and build that trust and that relationship. Because it’s more targeted, more tailored to that person and their specific needs.

Nikoleta: So it’s useful for you to know where it comes from and how are they doing?

Niall: I know some people might say “What’s the point of being bogged down in the past?”, but I personally find it useful because they are telling me what they don’t want to have happen again, which is great. Then I can say "I can guarantee that will not happen here”, and even that alone can be useful for them and they can relax.

I recently had a lovely fellow, but his dental anxiety had led to avoidance which led the teeth to become broken down and he stopped going out socially, he stopped playing sports, it just shut down different elements of his life. And what’s that going to do to your general sense of well-being? You won’t be in a good place if you’re not getting those positive elements of your life. The dental health can end up having an impact on the psychological health of a person and on the social element. And that, in turn, can make the psychological condition worse, which then makes the dental health worse through neglect, and they all can have an outcome on each other. That’s all in line with what’s called the biopsychosocial model of health and it’s a really common interaction that we see day to day. Breaking the cycle of dental fear is so powerful and that’s the real challenge.

Nikoleta: What do you do to prevent burnout and to take care of yourself?

Niall: I think for me personally, I probably enjoy my work way too much to feel like I’d be suffering from burnout. I made a conscious decision some time ago that I would not ever own a practice. I don’t feel that I’d respond positively to those additional needs and roles of a practice owner. I’m perfectly happy doing the dentistry and seeing my patients and going home and enjoying my life at home and leaving it at that.

Nikoleta: Do you see a dentist regularly?

Niall: Well... I was this year (laughs). Yeah, I've had a root canal treatment done this year on a molar by the wonderful Brian at the practice here. I've had no lack of dental treatment over the years myself, so yeah, any patients out there: even dentists have issues. A root canal treatment can happen to any of us.

Nikoleta: Is there anything else you would like people to know? Some last words of wisdom...

Niall: I think as a profession, there's so much we can do that overall we're not fully embracing yet, and there is so much scope in helping. You had mentioned burnout. Burnout is so common in dentistry, and I think the pleasure and satisfaction you can get out of helping people with genuine dental fears and phobias can be therapeutic in itself to us as professionals. So I think there are lots out there who would be awesome at it, so I encourage dentists to embrace it. There are lots of rewards to be earned from it.

You can find a shorter version of this interview with videos and photos here:

[*An Interview with Niall Neeson*](#)