

This article appeared in the May 2019 print edition of The Atlantic Magazine with the headline “The Trouble With Dentistry.” Ferris Jabr, a reporter/journalist, wrote about a dentist named Dr. John Roger Lund, who allegedly defrauded many of his patients by giving them unnecessary treatments. Lund was an outlier, but even the most common dental procedures, Jabr wrote, are not always as safe, effective, or durable as we are meant to believe. Some content has been removed to shorten it for this course. You may find the entire article at the link below.

[HTTPS://WWW.THEATLANTIC.COM/MAGAZINE/ARCHIVE/2019/05/THE-TROUBLE-WITH-DENTISTRY/586039/](https://www.theatlantic.com/magazine/archive/2019/05/the-trouble-with-dentistry/586039/)

IN THE EARLY 2000S Terry Mitchell’s dentist retired. For a while, Mitchell, an electrician in his 50s, stopped seeking dental care altogether. But when one of his wisdom teeth began to ache, he started looking for someone new. An acquaintance recommended John Roger Lund, whose practice was a convenient 10-minute walk from Mitchell’s home, in San Jose, California. Lund’s practice was situated in a one-story building with clay roof tiles that housed several dental offices. The interior was a little dated, but not dingy. The waiting room was small and the decor minimal: some plants and photos, no fish. Lund was a good-looking middle-aged guy with arched eyebrows, round glasses, and graying hair that framed a youthful face. He was charming, chatty, and upbeat. At the time, Mitchell and Lund both owned Chevrolet Chevelles, and they bonded over their mutual love of classic cars.

Lund extracted the wisdom tooth with no complications, and Mitchell began seeing him regularly. He never had any pain or new complaints, but Lund encouraged many additional treatments nonetheless. A typical person might get one or two root canals in a lifetime. In the space of seven years, Lund gave Mitchell nine root canals and just as many crowns. Mitchell’s insurance covered only a small portion of each procedure, so he paid a total of about \$50,000 out of pocket. The number and cost of the treatments did not trouble him. He had no idea that it was unusual to undergo so many root canals—he thought they were just as common as fillings. The payments were spread out over a relatively long period of time. And he trusted Lund completely. He figured that if he needed the treatments, then he might as well get them before things grew worse.

Meanwhile, another of Lund’s patients was going through a similar experience. Joyce Cordi, a businesswoman in her 50s, had learned of Lund through 1-800-DENTIST. She remembers the service giving him an excellent rating. When she visited Lund for the first time, in 1999, she had never had so much as a cavity. To the best of her knowledge her teeth were perfectly healthy, although she’d had a small dental bridge installed to fix a rare congenital anomaly (she was born with one tooth trapped inside another and had had them extracted). Within a year, Lund was questioning the resilience of her bridge and telling her she needed root canals and crowns.

Cordi was somewhat perplexed. Why the sudden need for so many procedures after decades of good dental health? When she expressed uncertainty, she says, Lund always had an answer ready. The cavity on this tooth was in the wrong position to treat with a typical filling, he told her on one occasion. Her gums were receding, which had resulted in tooth decay, he explained during another visit. Clearly, she had been grinding her teeth. And, after all, she was getting older. As a doctor’s daughter, Cordi had been raised with an especially respectful view of medical professionals. Lund was insistent, so she agreed to the procedures. Over the course of a decade, Lund gave Cordi 10 root canals and 10

crowns. He also chiseled out her bridge, replacing it with two new ones that left a conspicuous gap in her front teeth. Altogether, the work cost her about \$70,000.

In early 2012, Lund retired. Brendon Zeidler, a young dentist looking to expand his business, bought Lund's practice and assumed responsibility for his patients. Within a few months, Zeidler began to suspect that something was amiss. Financial records indicated that Lund had been spectacularly successful, but Zeidler was making only 10 to 25 percent of Lund's reported earnings each month. As Zeidler met more of Lund's former patients, he noticed a disquieting trend: Many of them had undergone extensive dental work—a much larger proportion than he would have expected. When Zeidler told them, after routine exams or cleanings, that they didn't need any additional procedures at that time, they tended to react with surprise and concern: Was he sure? Nothing at all? Had he checked thoroughly?

In the summer, Zeidler decided to take a closer look at Lund's career. He gathered years' worth of dental records and bills for Lund's patients and began to scrutinize them, one by one. The process took him months to complete. What he uncovered was appalling.

WHEN ZEIDLER PURCHASED LUND'S PRACTICE, in February 2012, he inherited a massive collection of patients' dental histories and bills, a mix of electronic documents, handwritten charts, and X-rays. By August, Zeidler had decided that if anything could explain the alarmingly abundant dental work in the mouths of Lund's patients, he would find it in those records. He spent every weekend for the next nine months examining the charts of hundreds of patients treated in the preceding five years. In a giant Excel spreadsheet, he logged every single procedure Lund had performed, so he could carry out some basic statistical analyses.

The numbers spoke for themselves. Year after year, Lund had performed certain procedures at extraordinarily high rates. Whereas a typical dentist might perform root canals on previously crowned teeth in only 3 to 7 percent of cases, Lund was performing them in 90 percent of cases. As Zeidler later alleged in court documents, Lund had performed invasive, costly, and seemingly unnecessary procedures on dozens and dozens of patients, some of whom he had been seeing for decades. Terry Mitchell and Joyce Cordi were far from alone. In fact, they had not even endured the worst of it.

Dental crowns were one of Lund's most frequent treatments. Crowns typically last 10 to 15 years. Lund not only gave his patients superfluous crowns; he also tended to replace them every five years—the minimum interval of time before insurance companies will cover the procedure again.

More than 50 of Lund's patients also had ludicrously high numbers of root canals: 15, 20, 24. According to one lawsuit that has since been settled, a woman in her late 50s came to Lund with only 10 natural teeth; from 2003 to 2010, he gave her nine root canals and 12 crowns.

Zeidler noticed that nearly every time Lund gave someone a root canal, he also charged for an incision and drainage, known as an I&D. I&Ds are not routine adjuncts to root canals. They should be used only to treat severe infections, which occur in a minority of cases. Yet they were extremely common in Lund's practice. In 2009, for example, Lund billed his patients for 109 I&Ds. Zeidler asked many of those patients about the treatments, but none of them recalled what would almost certainly have been a memorable experience.

In addition to performing scores of seemingly unnecessary procedures that could result in chronic pain, medical complications, and further operations, Lund had apparently billed patients for treatments he had never administered. Zeidler was alarmed and distressed. "We go into this profession to care for patients," he told me. "That is why we become doctors. To find, I felt, someone was doing the exact opposite of that—it was very hard, very hard to accept that someone was willing to do that."

Zeidler knew what he had to do next. As a dental professional, he had certain ethical obligations. He needed to confront Lund directly and give him the chance to account for all the anomalies. Even more daunting, in the absence of a credible explanation, he would have to divulge his discoveries to the patients Lund had bequeathed to him. He would have to tell them that the man to whom they had entrusted their care—some of them for two decades—had apparently deceived them for his own profit.

IN THE SUMMER OF 2013, Zeidler asked several other dentists to review Lund's records. They all agreed with his conclusions. The likelihood that Lund's patients genuinely needed that many treatments was extremely low. And there was no medical evidence to justify many of Lund's decisions or to explain the phantom procedures. Zeidler confronted Lund about his discoveries in several face-to-face meetings. When I asked Zeidler how those meetings went, he offered a single sentence—"I decided shortly thereafter to take legal action"—and declined to comment further. (Repeated attempts were made to contact Lund and his lawyer for this story, but neither responded.)

One by one, Zeidler began to write, call, or sit down with patients who had previously been in Lund's care, explaining what he had uncovered. They were shocked and angry. Lund had been charismatic and professional. They had assumed that his diagnoses and treatments were meant to keep them healthy. Isn't that what doctors do? "It makes you feel like you have been violated," Terry Mitchell says—"somebody performing stuff on your body that doesn't need to be done." Joyce Cordi recalls a "moment of absolute fury" when she first learned of Lund's deceit. On top of all the needless operations, "there were all kinds of drains and things that I paid for and the insurance company paid for that never happened," she says. "But you can't read the dentalese."

"A lot of them felt, *How can I be so stupid? Or Why didn't I go elsewhere?*" Zeidler says. "But this is not about intellect. It's about betrayal of trust."

In October 2013, Zeidler sued Lund for misrepresenting his practice and breaching their contract. In the lawsuit, Zeidler and his lawyers argued that Lund's reported practice income of \$729,000 to \$988,000 a year was "a result of fraudulent billing activity, billing for treatment that was unnecessary and billing for treatment which was never performed." The suit was settled for a confidential amount. From 2014 to 2017, 10 of Lund's former patients, including Mitchell and Cordi, sued him for a mix of fraud, deceit, battery, financial elder abuse, and dental malpractice. They collectively reached a nearly \$3 million settlement, paid out by Lund's insurance company. (Lund did not admit to any wrongdoing.)

Lund was arrested in May 2016 and released on \$250,000 bail. The Santa Clara County district attorney's office is prosecuting a criminal case against him based on 26 counts of insurance fraud. At the time of his arraignment, he said he was innocent of all charges. The Dental Board of California is seeking to revoke or suspend Lund's license, which is currently inactive.

Many of Lund's former patients worry about their future health. A root canal is not a permanent fix. It requires maintenance and, in the long run, may need to be replaced with a dental implant. One of Mitchell's root canals has already failed: The tooth fractured, and an infection developed. He said that in order to treat the infection, the tooth was extracted and he underwent a multistage procedure involving a bone graft and months of healing before an implant and a crown were fixed in place. "I don't know how much these root canals are going to cost me down the line," Mitchell says. "Six thousand dollars a pop for an implant—it adds up pretty quick."

Joyce Cordi's new dentist says her X-rays resemble those of someone who had reconstructive facial surgery following a car crash. Because Lund installed her new dental bridges improperly, one of her teeth is continually damaged by everyday chewing. "It hurts like hell," she says. She has to wear a mouth guard every night.

What some of Lund's former patients regret most are the psychological repercussions of his alleged duplicity: the erosion of the covenant between practitioner and patient, the germ of doubt that infects the mind. "You lose your trust," Mitchell says. "You become cynical. I have become more that way, and I don't like it."

"He damaged the trust I need to have in the people who take care of me," Cordi says. "He damaged my trust in mankind. That's an unforgivable crime."