



Celebrate 100 Years Service to Dental Professionals

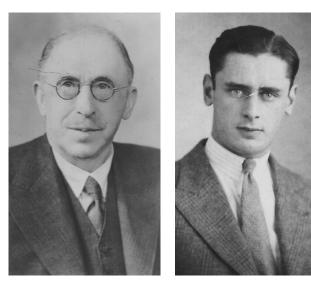
The number of companies in the dental industry which have both celebrated 100 years since their formation and are also owned and run by one of the founding families is quite small so I guess that over the years we must have been doing some things right. There are also few Family companies that are now in the fourth generation and still successful.

So how did it all start?

According to family tradition my Grandfather left school at the age of 15 and went to work for a company in the jewellery industry.

Amongst one of their agencies was an American manufacturer of jewellery gold alloys called Jelenko who, in the USA, also sold dental alloys. When they approached my grandfather's employer requesting them to sell these alloys the directors had no interest in doing so but did not want to say no. They, therefore, put their most junior and least valuable member of staff to manage this unwanted addition to their business. At the age of 17 my Grandfather entered the dental industry.

What happened next with my grandfather, Mark Schottlander's, career is buried in the mists of time and although remarkably we still have some correspondence of the time, this only gives a partial picture of events. What is known is that he was running a company called The International Tooth Company Limited that was a subsidiary of De Trey and Co Limited of London and represented The International Tooth Company of America. They were a substantial American tooth manufacturer (150 workers in the factory) and were owned by Dentist Supply of Pennsylvania, who were the tooth supplier of De Trey and Co Limited. In other words, International Tooth Company was set up to appear to be an independent competitor whilst, in fact, being a subsidiary. Many of the letters on file refer to pricing questions and of competition (or lack of it) between the two sets of nominal competitors.



Mark Schottlander

Leslie Schottlander (1920s)

It is interesting that, at the beginning of the twentieth century, maintaining prices was seen as being the moral high ground and price cutting, even to gain a new customer, as being evidence of the depths of depravity. One series of letters talks about the action taken by De Trey against Cottrell and Co for having given a discount to gain a new customer. One wonders how today's promotional offers would have been viewed.

The 1920s were a tough time for dentistry in Europe and dealers who had been buying, what at that time were the superior American teeth, just stopped doing so. If you have a factory with several hundred people in it and your important European market all but ceases purchasing, then it is a time of heightened emotions. It would appear from a letter my grandfather wrote in 1921 that International



A Tooth brochure from the 1930's

Tooth were doing rather better than the parent company so that De Trey put restrictions on him in order to move the business over to themselves. This significantly affected his potential earnings.

To quote from one of his letters to a colleague "It is terrible thing for a successful man to be restricted in developing the business because the parent concerned is getting a licking by the child". The upshot was that in 1922 my father left and started Davis Schottlander and Davis together with two partners, Joe & Solly Davis.

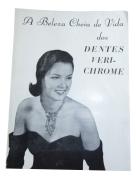
The formation of the partnership was exactly 100 years ago to this year. The inter-war period was immensely successful with Europe-wide agencies for many major US companies most, if not all of which, either now no longer exist or have been absorbed into larger corporations. 1939 saw the outbreak of war and both my father, Leslie Schottlander, and Joe Davis's son, John, signed up for the duration of the war. My father, as did many in the Company, had joined the territorials before war started and his barracks in Albany Street still stands today. He was posted to The Royal Artillery where he served till the end of the war. He was due for overseas posting several times but in the end the orders got changed. His one spot of "foreign travel" was five days in 1940 spent off Dunkirk attempting to shoot down the Luftwaffe with an anti-aircraft gun on the deck of a small boat tossing about on the waves. He told me later that he was not aware of having hit anything but the fact that somebody seemed to be doing something (even if it was ineffective) would have helped the morale of those waiting to get off the beaches.



Leslie Schottlander during the war in gun emplacement.

When peace returned and both were de-mobbed, the Company they came back to was very different from the one they had left. For a start not much business had happened in the war-time period since the transportation of dental products across the Atlantic was not at the forefront of Allied Command's priorities. I remember my father's secretary, Elsie, who had joined the Company at the age of 14 and straight from school as a junior secretary and who stayed with the Company until she retired, saying how during the war she had nothing to do other than knit socks for my grandfather – he must have had a lot of socks by 1945!

Large numbers of Americans had come to Europe for the first time during the war and suddenly Europe did not seem so far away. One by one previous agencies set up their own European distribution. In addition, although war time technical advances had changed the conduct of business, the Company had not changed with it. By the end of the 1940s, when the older generation had all passed away, the Company was in pretty poor shape. The stress of this, and perhaps their different personalities led to my Father and John Davis coming to a parting of the ways, with my father taking over the original









Leslie Schottlander.





Above range of Schottlander brochures dating from the early 1940's to late 1960's.

Company of Davis Schottlander & Davis and John re-starting J & S Davis.

The company that my father took over was not in a happy situation. At the start of the Health Service, demand for denture teeth went through the roof as the public took advantage of free dentistry. When charges eventually had to be introduced, and a set of dentures now cost just under £4, demand stopped stone dead. This would have been less of a problem had technology not advanced at the same time with a change from air fired to vacuum fired porcelain teeth providing a dramatic change in tooth vitality.

Unfortunately, on a point of principle, the older generation had refused to cancel outstanding factory orders and so my father took over a company with large stocks of products which had high value on paper but which in practice were virtually unsaleable.

Two of my uncles who came to give him advice declared that the business could not be saved. Their advice was that he should declare bankruptcy and that they would help him financially to start again. The weight of bankruptcies, then as now, tends to fall on the unsecured creditors and my father, who had a strong internal sense of right and wrong, was not prepared to do this to people with whom he had worked for many years. He, therefore, soldiered on, spending 3 months a year away from home as he slowly turned unsaleable products into cash at whatever price he could get. I was too young to understand what was happening but it was a difficult financial time both at home as well as in the business and was probably the low point in the Company's history. Principles come at a price.

Until this time the Company had been wholesalers but with the changes in the market this became less supportable and my father started a retail department selling both to dentists and laboratories and with three representatives on the road. The venture had limited success partly because competition then, even though not as fierce as today, was still strong and competing from a position of financial weakness is not the best way to enter a new market.

It was one of the Company's export customers who was the catalyst for the next stage in the Company's development. He explained to my father that he only sold his own branded products and therefore had reduced costs, so being able to offer greater value for money to customers. The model also had the additional advantage of a reduced range of products to stock at a time when the Company was still tight financially. My father therefore decided to print a catalogue of our own brand products, cease supplying to and buying from the rest of the trade, and compete head-on for quality and value. As one might expect there was uproar in the rest of the dental trade with many still thinking restrictive practices to be a perfectly proper way of conducting business. There was massive concern that if the Company was permitted to exhibit at the then equivalent to Dental Showcase that the rest of the industry would not then be able to compete. Although the Company had been a founder member of the original trade association from which BDTA evolved and my father had been a past President, the then BDTA Council decided to take harsh measures. In order to make it impossible for us to exhibit they changed the rules for Association membership in the expectation that our being barred from membership and thus from exhibiting would prevent us demonstrating our products to the Profession and so would solve the problem. Of course, this did not happen since the Profession does not take kindly to attempts to lead them by the nose.

It was some years later, after I had joined the Company, that I was sitting on a plane to the UK from a European meeting when the man sitting next to me asked me what I did for a living. When I explained that I worked in the dental industry he perked up and said that he worked in the Directorate for Competition of the European Commission and that some years earlier he had been involved in a case against the BDTA for uncompetitive actions. I told him of our own position and exclusion from exhibiting but that we were too small to be able to afford the legal costs of taking our case to the European Commission. "No", he said, "That is incorrect. If you write to the Commission they will take up the case themselves and you will not have to pay any of the costs". He then proceeded to tell me exactly whom to write to and what I needed to put in the letter. Of course, the BDTA lost the case, we were accepted back into membership and the Commission fined them heavily. I still smile when thinking back on this chance conversation on a plane and what the odds must have been against my just sitting next to the one man who could tell me what I should do. I also appreciate the added irony that not only did I serve on the BDTA Council for twenty-one years but the fine was levied on the Association after the Company had once more re-joined the Association. In other words, our subscription contributed to paying the fine that we had been instrumental in having levied in the first place. A good outcome of this experience, however, is that I was always vigilant as a Council member that the Association does not behave again in a similar manner to smaller companies. Today I believe that the BDIA is a model trade association by both representing its members' interests and looking to the wider interests of dentistry and the public.

My father, who was a very methodical man and who had worked hard all of his life, carefully planned to partially retire just before he reached the age of 70. Although he had travelled extensively for work, he and my mother had travelled little outside of the UK on holiday. As his retirement came nearer he planned a comprehensive three month round the world trip. Unfortunately, this was not to be since within a month of this date he became ill, had to completely retire and was no longer able to travel.

One of the first things which became obvious when I took over the leadership was that we could never develop the business in Central London. Our offices and warehouse were in City Road near the Angel Islington where we had moved via Old Street from Great Portland Street in the post war years. At that stage the environs of Great Portland Street were the centre of the dental industry with its proximity to Harley Street. However the industry had changed with the need for customers to be able to 'pop into' their local depot declining rapidly and the move to third party logistics meaning that where a company was based was less important than how well it was set up to rapidly and accurately despatch orders.

If the Company were to be able to service customers into the future we needed to move out of London but the question was where? We had also seen rents escalating and wanted our own building where rental did not have to be paid in perpetuity to an outside landlord. The search eventually settled on Letchworth Garden City. Firstly, as a town, it has a good feel about it, communications are good and in the surrounding towns and villages there are a lot of potential recruits who do not, as in London, have to travel long and tiring distances to and from work.

Letchworth Garden City Corporation wanted to encourage employers to come to the town and bent over backwards to be as helpful as possible. This far-sighted policy must have paid them back handsomely over the last 30 years. The inner core of people, who were initially involved in the planning of the move, discussed in great detail how we were going to handle telling those working within the Company. Numbers had risen from 12 to 26 over the previous 15 years and the conclusion was that we should tell people as soon as contracts on premises had been signed and we were thereby free to do so. We held a meeting first thing one morning and 6 months before the planned move date when I went over the rationale for the move and told everyone that we were keen for them to come with us. I had even prepared a list of the transport each person would need to take between their existing homes and Letchworth - assuming that they did not want to move home.

We also arranged to close the Company for a day and take everyone by coach to see the building site for the new building (bought off plans) and to be shown round the town by representatives from Letchworth itself. In the end one third of the people moved with us, a further 25% commuted with us for the first few months on a short-term basis just to enable us to keep going whilst we trained new people and only one person left before our final day in London. A lesson that I have taken from this is

that if you treat people fairly, openly and with trust then that is how they will behave back to you.

Brian Schottlander in 1989 standing in the entrance of the new offices at Dunhams Lane, Letchworth Garden City.

Below: Schottlander offices and Training Centre at Fifth Avenue, Letchworth Garden City.





Our new premises were smaller in square footage but gave the opportunity to stack higher, as well as having excellent bulk handling facilities. It was an exciting time watching the building take shape and despite the move and the new personnel, everyone worked tirelessly to ensure that service to customers was unaffected. In fact, over the next few years customer service markedly improved as our systems were able to evolve.

There are many disadvantages of losing skilled people at all levels of an organisation but one of the few advantages is that you can redevelop what an organisation stands for and what is important to it. In order to communicate the philosophy of the organisation for which people were about to start working we developed our philosophy based on our family values and although the way it is articulated has changed over the intervening period, the principles have not changed. Today our mission statement is:

"By working together with dental professionals around the world, we help to improve the quality of dentistry while growing our Company".

We believe that growth is necessary for us to develop the products that our customers need, that products and service must be world-leading to succeed and that the world is our market place. We also believe that all dental professionals should work in partnership to develop better dental care for patients everywhere.

To us the patient is our end customer, even though we do not sell to them and this defines the types of product in which we are interested. It also defines how we see dentistry in the round since if the patient is at the centre then all members of the team, whether they be clinicians, technicians, nurses, hygienists, therapists etc are of essential importance.

If the patient is at the centre of our thinking then the customer runs a very close second. We believe that when we supply a product we are not just supplying a box but a means to help a clinician to better look after their patients. This has meant a strong accent on service, training and quality improvements. It is our strong belief, backed by experience, that customers are just as interested in quality as they are in price. They will also pay for product improvements providing and this is the critical proviso, that they can see a real benefit to them in the improvements and that it is not just an excuse for charging more. In other words, they are looking for overall value as defined in their terms and not those of the supplier.

It was with the above in mind that in 1984 we took on a most unusual product range. We had made the decision several years earlier not to sell gloves because of their variability in guality since variable quality is completely against our philosophy. Then one day out of the blue we received an unsolicited letter from a company in Asia offering us their new range of gloves. What caught my own eye was not the product offering itself but the copies of articles they included showing the harmful effects of the then high protein content of gloves. Not only was it seriously harmful to health workers working lives but it also potentially put patients at risk especially if they were already sensitised to latex. Then, this was a product range that was being sold solely on price, with everyone either in ignorance or cheerfully turning a blind eye to the risks and most not even seriously measuring the protein levels (which were then routinely at 10-15 times the level of today's maximums).

Suddenly we were interested since it ticked the boxes of being better for patients and better for our customers but would we be able to put over the story that it was worth their paying a little more in order to safeguard their working future? Well, we threw everything we had behind the range since this was a belief issue just as much as a commercial one. The result was not just a huge commercial success but one for which we received a Queen's Award for Innovation in 2000.



Queen Elizabeth II congratulates Brian Schottlander on Schottlander winning their second Queens's Award. On this occasion it recognises the Enigma & Natura Teeth and Denture Systems.

Removable prosthetics has always been close to the Company's heart since it was with denture teeth that the Company started 100 years ago. I, myself, have always been involved in this field both for commercial reasons (important product) and because of enormous empathy for those who, for whatever reason, no longer have their own teeth. So when we were given the opportunity to develop a range of cosmetic denture teeth of the highest quality (we already had a popular range of NHS teeth) we jumped at the opportunity. We did not however realise that it would take nearly 6 years to bring the product ranges, Enigma and Natura, to market. Even, enigmalife and 4natur, the ranges we developed to replace them took five years.

In 2004 we received our second Queen's Award for Innovation for our tooth offering. The official citation said:

"The award to Davis Schottlander & Davis Ltd recognises this Company's success in continuously improving a range of teeth and dentures. The Company has created Enigma and Natura, two ranges of teeth and dentures that not only look more natural but also function better. This has been achieved by using advanced acrylic materials, a wider range of colours and better mechanical design, to give an improved "bite".

Options available now take account of the different characteristics of ethnic groups.

Continuous innovation in design and professional marketing have enabled this award winner to achieve a substantial share of the market and considerable commercial success whilst providing customers with better looking and performing dentures. We had been more than pleased to be awarded our first Queen's Award for Innovation in 2000 but to receive the honour twice was very special. No other company in the dental industry had ever been awarded one once and we had now been awarded one for a second time.



The Schottlander team spent a beautiful sunny evening on the Regents Canal, London, celebrating our second Queens Award.

Painstaking attention to detail and focus on customer needs had paid off. Rather than the Company celebrating by a meal in a restaurant we hired a narrow boat for an evening to go along the Regents Canal.

One of the advantages of trying to apply an ethical viewpoint alongside a commercial one is that over the years we have been enthusiastically helped by a large number of very talented individuals from different parts of dentistry, who have given their help, advice and counsel, partly because of a shared set of beliefs. Together with them we have produced training material and put on seminars that I believe have significantly improved the quality of dental care.

One of the first products that we introduced shortly after I joined the Company was Delphic Composite. At that stage the market for composites (chemically cured) was dominated by two international companies who sold paste/paste composites whilst the majority of the market was selling powder/liquid. It was by no means clear at the time which presentation would end up being the standard. We were very keen to get involved in this rapidly growing segment of the market but did not want a lesser quality than our international competitors.

As it happened we got into contact with a smaller newcomer to the market but who shared our philosophies on quality. Delphic was about 20% stronger than the competitors, had a finer particle size and we sold it at a 30% lesser cost. Delphic was a great success.

On the other hand, a few years later when light cured composites came in, we successfully developed a curing light that 10% of practices bought but we got it completely wrong on the composite itself. We went for strength without taking into account that the product was difficult to dispense and sticky in use. It was as great a failure as Delphic was a success but taught us an important lesson. Never again would we go on the market without first putting products out for clinical or laboratory user evaluation and we set up study groups to help evaluate them.

As the Company has grown we have further strengthened consultation with customers and now their reports are an essential component of the planning process for new products and the review of existing ones. In addition, whereas five registered dental technicians work within the Company we were purely relying on the goodwill of busy practitioners for feedback. This goodwill has now been supplemented by a Clinical Advisor working part-time for us. Study groups help us to keep our feet on the ground and stop us being carried away by our own enthusiasm. It is what users think about a product or a concept that is important rather than our own.

Shortly after I first came into the dental industry I became interested in endodontics but when the change to nickel titanium files started we were unable to find products that fitted into our stated product philosophy. One of the advantages we have as a company is that if we do not believe in a product we do not sell it. Although profitability for any company is of critical importance, we are not bound by the requirement for ever upward quarterly figures that rules the lives of so many international companies. In other words, if we have confidence in a product then we shall sell it with everything we have got, but if not, then nobody can force us to do so.

When eventually a suitable range of nickel titanium endodontic instruments was offered to us we sought clinical advice, the outcome of which was that modifications were needed to make it easier for clinicians to use the range. After substantial discussions with the factory these modifications were made and a protocol was developed that ensured RaCe has also been a huge success for us in the United Kingdom market. Since then the range has been through a number of iterations and developments. Today with the application of advanced heat treatment processes, the instruments are highly resistant to breakage, are faster to use and the number of instruments required per treatment is dramatically reduced. For users of reciprocation, RaCe R-Motion and for rotary RaCe EVO provide faster working with enhanced resistance to fracture.

Education and training has always been very important to us since you cannot care about the quality and success of your products without also caring about dentistry and how those products are being used within it. When we give our own educational courses and seminars or sponsor or facilitate those of others within dentistry it is all part of a two-way communication. The customer learns from the presenter. We learn from the customer what they need and what products we should develop in the future to fulfil these needs.

Even whilst we were still in London, we had a small training laboratory which we expanded when we moved to Letchworth. It was not, however, until we built the considerably larger new Fifth Avenue building in 1999 that we were able to allocate the space to build a proper training centre. Today we have a fully equipped 70-person lecture theatre with excellent audio-visual facilities, a 15-person training laboratory with a dental surgery.





Amazing Dentures Seminar presented by Dr Finlay Sutton at The Barbican, London in June 2022

The facility enables us to provide hands-on courses and lectures in-house. Of course, we still hold the larger seminars outside the Company as well as courses in other parts of the country but our own training centre enables us to have a central base for education and training provision.

So what of the Company in the future?

The one thing for certain is that as the Company enters its second century its shape and key products are undoubtedly changing. Ian Schottlander, as the fourth generation in the business has now been working in the Company for nearly twenty years. He brought to it a wealth of international experience as well as new and different skills. Working alongside him is a strong group of professionals with a breadth of dental and commercial knowledge and experience and who share our values.

Like myself, Ian has a strong belief in the importance of continuous improvement and we are investing more in product development at the present than at any time in the Company's history. The nature of



Schottlander Training Laboratory.

developments has changed since nowadays they are increasingly carried out in collaboration with others, both Universities and business partners. Some of these developments will be available in the next 12 months and others not for 3-5 years but the key



lan Schottlander.

must be to ensure that our products remain those of first choice for customers.

We are committed to having people within the Company who are just as committed to customer service, understand the dental market and can innovate technically. We need to help our customers provide better dental care to patients. Precisely how that care is delivered in the future will be different but the principles never change.



100 Years Time Line

schofflander improving dentistry together

1922	Davis Schottlander & Davis was founded in London by Mark Schottlander, Joe and Solly Davis.
1930 s	Company grows as an exporter. Today Schottlander is one of the largest UK exporters of dental materials, providing products to over 30 countries worldwide.
1949	Leslie Schottlander takes over as Managing Director of Davis Schottlander & Davis.
1958	Schottlander begin selling own branded products to reduce costs & offer greater quality and value to customers. Schottlander now supply over 5000 product lines to dental surgeries, laboratories and hospitals in the uk.
1969	Brian Schottlander joins the company.
1970	Delphic Composite introduced to the market.
1978	Introduction of Doric Addition Cured Silicones to the market.
1979	Introduction of first bonding ceramic (Doric MK) to laboratory customers.
1982	Brian Schottlander takes over as Managing Director.
1989	Schottlander move out of London to new office and warehouse facilities in Dunhams Lane, Letchworth Garden City.
1996	Schottlander introduce Schottlander Low Allergy Latex Examination Gloves.
1998	After six years in development Schottlander introduce Enigma Cosmetic Teeth to the market.
1999	Schottlander move to purpose built, office, warehouse and training centre in Fifth Avenue, Letchworth Garden City. Brian Schottlander becomes BDTA President.
2000	Schottlander win first Queen's Award for their Schottlander Low Allergy Powder Free Examination Gloves.
2002	Schottlander introduce RaCe NiTi - a revolutionary rotary file system enabling patient treatment times to be reduce through the need for fewer instruments. Brian Schottlander is awarded a honorary doctorate from the University of Birmingham Dental School for his life long interest in science and his commitment to the support of research and development in dentistry.
2004	Schottlander win second Queen's Award for their Enigma & Natura Cosmetic Teeth and denture systems. Ian Schottlander joins the company.
2009	Brian Schottlander is awarded the Companion of the DLA award for his outstanding contribution to the UK dental laboratories industry. Introduction of Schottlander Soft Touch Flexible Nitrile Examination Gloves acknowledged as setting new standards.
2010	Brian Schottlander is awarded the BDTA award to acknowledge his outstanding contribution to the UK dental industry.
2011	Schottlander start selling Quicktemp Cosmetic Temporary Crown & Bridge Material - cosmetic temporaries with the strength of permanent restorations.
2012	Schottlander celebrate their 90th Anniversary by investing more in product development than at any other time in the companies history.
2013	Schottlander introduce RaCe 123 single patient endodontic kits.
2015	Schottlander introduce enigmalife premium brand private denture teeth and win DLA Outstanding Product of the Year.
2017	Schottlander introduce 4natur denture teeth as a lower cost private denture tooth to complement the available product range.
2020	Schottlander stay fully open throughout the pandemic in order to service customer needs.
2022	Schottlander introduce new generation RaCe endodontic instruments for both rotary and reciprocating endodontic users.
2022	Schottlander open a digital dentistry department.