

Perceptions of Dentistry

We were recently matched with a pleasant couple for a round of golf. Conventional banal conversation quickly identified us as dentists, and we soon were made privy to their lifetime dental histories. A "kind soul" had administered their needs for the past 34 years, but he suddenly announced his retirement and sold his practice to a young man who "obviously attended special courses to enhance his salesmanship." The drab equipment was replaced by "space age" dentistry, and patients were required to have a complete-mouth radiographic survey and a consultation. This had never happened before, when only occasional "cavity x-rays" (bite wings) were made, and then only when dental pain needed to be addressed. The once-comfortable waiting room has now been "decorated," and one hour is required for prophylaxis. We listened intently to this continuing dialogue, as the course was crowded and each shot was delayed, with the only relief afforded by their poor play that freed us on the fairways.

"We don't understand why this is necessary when nothing hurts us, but we can see where there could be some improvement in our appearance." At the third tee, we were informed that "he found bone loss in the radiographs, and pockets or something when he examined our mouths." Dr Kind Soul had never found these problems; how could this develop in just the one year since his retirement?

The fourth tee was consumed with defending the new dentist and trying to avoid any statement that might incriminate the previous dentist. We thought we executed this task most professionally and would finally be able to concentrate on our game.

But then, at the fifth tee, came the question: "What would you suggest we do?" The problem is obvious, and knowing nothing about their dentists or dentitions dictated a strong plea bargain. They left us after nine holes, but the nagging questions remain. Why don't patients recognize their dental needs and instead relate them only to pain and appearance? Why are patients so oblivious to incomplete dental care and so suspicious when an effort is made to direct them toward good dental health?

The immediate answer is that many adults prefer to avoid dental treatment because of fear or financial limitations. So many are cradled in cocoons of supervised neglect, most frequently unintentional, that the new dentist faces a public relations challenge when proposing dentistry that is needed. Change itself is difficult!

But, is it possible that unnecessary work is proposed? Is the problem influenced by the need to create business to pay too steeply for the purchase of a practice, or is the young professional avaricious? The moral issues are frequently missing in formal education, but we should counsel the patient to follow a path of corrections that we would exercise in our own mouths. It can be implemented incrementally if finances or other obstacles prevent a complicated overhaul, but overtreatment is not better than undertreatment. "Two wrongs don't make a right."

Purchasing an established office is an excellent decision for a young dentist. It is prudent to be concerned with the financial aspect, but spend some time examining the quality of the business that you intend to purchase. Be ready, so that you will not be surprised. Retain a qualified consultant to examine what you are about to purchase and help you with a game plan that will allow your practice to develop without excessive overhead pressure. Don't look at each patient as a financial solution, but treat each one according to his or her needs. You will be proud of yourself and your profession.

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