



Alessandro Devigus, Dr med dent
 Editor-in-Chief

Specialization and Competition

In an editorial published back in 1997 in the *Journal of Oral and Maxillofacial Surgery*,¹ Daniel M. Laskin made the following statement, that still is valid today: "Specialization within a profession can have many advantages. Among them are the improvement of the educational and clinical base, the expansion of knowledge within the field through increased emphasis on research, and the greater access to highly skilled practitioners for patients with complex management problems. However, specialization can also have its drawbacks. These include the tendency for increasing the general cost of treatment, the establishment of a dual standard of care, and confusion on the patient's part because of the potential overlap of services, both with other specialties and with the general practitioner."

Therefore, to protect the interests of both the public and the profession, the American Dental Association has established six requirements for the recognition of new specialties in dentistry.²

A sponsoring organization seeking specialty recognition for an area must document that the discipline satisfies all of the following requirements.

- In order for an area to be recognized as a specialty, it must be represented by a sponsoring organization: (i) whose membership is reflective of the special area of dental practice, and (ii) that demonstrates the ability to establish a certifying board.
- A specialty must be a distinct and well-defined field which requires unique knowledge and skills beyond those commonly possessed by dental school graduates as defined by the predoctoral accreditation standards.
- The scope of the specialty requires advanced knowledge and skills that: (i) are separate and distinct from any recognized dental specialty or combination of recognized dental specialties, and (ii) cannot be accommodated through minimal modification of a recognized dental specialty or combination of recognized dental specialties.
- The specialty must document scientifically, by valid and reliable statistical evidence/studies, that it: (i) actively contributes to new knowledge in the field, (ii) actively contributes to professional education, (iii) actively contributes to re-



search needs of the profession, and (iv) provides oral health services for the public, all of which are currently not being met by general practitioners or dental specialists.

- A specialty must directly benefit some aspect of clinical patient care.
- Formal advanced education programs of at least 2 years beyond the predoctoral dental curriculum as defined by the Commission on Dental Accreditation's Standards for Advanced Specialty Education Programs must exist to provide the special knowledge and skills required for practice of the specialty.

During the last 10 to 20 years, there has been an increase in the number of dental specialties in most Western countries.³ The EU has authorized orthodontics and oral surgery as specialties. In addition, several countries have authorized additional specialties, such as prosthetics, periodontics, and endodontics.³

The increase in the number of new dental specialties raises issues about how specialist services should be organized and funded. A particularly important issue is the interface between dental specialties and general dental practice. Grytten and Skau described in a recent publication⁴ the effect of one way of organizing the services, which is by relying on competition. In Norway, some oral specialists (prosthodontists, periodontists, and endodontists) face real competition with general dental practitioners for the same patients, while other specialists do not (orthodontists and oral surgeons). The latter special-

ists have skills that give them exclusive possibilities to practice their profession. The authors find that competition can be effective for the specialists who experience real competition with general dental practitioners for patients. In situations where real competition does not exist, specialists can obtain market power and raise their fees. The specialties in which practitioners can exercise market power raise challenges related to the type of public policy that can reduce this market power in an appropriate way, and without involving large costs for the authorities.

Competition is one of the most important motors of development, not only in dentistry. So if you are a specialist or a general practitioner you need to work on improving your skills, analyze the needs of your patients, and face the daily challenge. Being part of a professional organization to network with colleagues helps you in doing so.

Sincerely,
Alessandro Devigus

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2. American Dental Association. Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists. 2001. Available at: <http://www.ada.org/prof/ed/specialties/requirements.pdf>. Accessed 7 October 2009.
3. Anderson R, Whitehouse NH, Treasure ET (eds). *EU Manual of Dental Practice 1997. A Practical Guide to the Oral Health Systems and Current Practice of Dentistry in Eighteen European Countries*. Cardiff: Dental Liaison Committee in the EU, 1997.
4. Grytten J, Skau I. Specialization and Competition in Dental Health Services. *Health Econ* 2009;18:457-466.