

Editorial

Dental health care—Can it be provided to all?

The health care system in the United States is a mess. In this the month of President Clinton's inauguration, we look with anticipation to the new President for major health care reform—this includes setting the course for future dental health care planning.

For true dental health care reform we must challenge our basic tenets of dental health care. Reform in dental health care must be accompanied by support for prevention and a willingness to accept alternative treatment methods that may be both appropriate and necessary in our future world. Financial rewards should be provided for keeping patients healthy rather than as a carrot for overtreatment.

We have assumed for too long that dental health care necessarily involves an operative component that has to be carried out by a dentist. Surely the challenge to the profession is to prevent the need for most operative treatment and, furthermore, to elevate the dentist to the position of oral medicine diagnostician. Meanwhile well-trained auxiliaries can treat preventive and minor restorative needs—needs that may well make up the bulk of care needed by future populations. We should study the model of the nurse-practitioner as practiced in medicine, or of the dental therapist in countries like Australia. Perhaps we should initiate the desired change of attitude by awarding degrees of Doctor of Dental Health, or Doctor of Dental Science, rather than Doctor of Dental *Surgery*.

In dentistry, as in medicine, we need more research to assess the outcomes of treatment. There is an incredible paucity of information as to the comparative outcomes of many of the treatment choices open to dentists in general dentistry as well as in specialized areas of the profession. Many present treatment options are based purely on anecdotal evidence. For example, we have at present no hard data that would prove if a patient is better served in the long term with a gold crown, a porcelain crown, a pin amalgam buildup, a composite resin restoration, or even an extraction, in certain situations. Are some of the latest high-tech options for dental treatment of help to patients or merely money-making schemes? Without outcome assessment we just don't know.

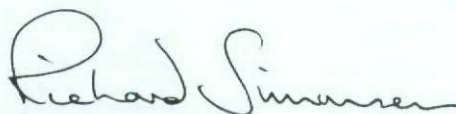
Surely both patients and dentists should be able to assess potential treatment outcomes based on scien-

tifically valid data. Judgment of the cultural, economic, and health value of a specific treatment to the patient is a necessary, but presently absent, piece of information. If any system is ever to control dental health care costs, treatment outcomes assessment is an absolutely essential component.

Among the other changes that must be considered in dental health care reform is unifying the methods of data collection and insurance claims payment into one national electronic coding system. Additionally, reform of our legal system regarding malpractice litigation is essential so dentistry does not end up being held for ransom like some of the medical specialties. While there should be no sympathy or leniency for dentists who provide genuinely substandard treatment, patients and the system alike must accept that not every treatment can be 100% successful. Again, appropriate health outcome assessment, with patient participation in treatment choices, should alleviate much of the misunderstanding of treatment goals that can lead to unnecessary malpractice claims.

The rising cost of dental health care has been of concern for many years. However, it is not preordained that dental health care costs will continue to escalate. If cost control is linked to health outcome assessment, quality can be maintained while costs may well come down. Excess resources can then be reallocated to areas of acute need.

Much needs to be done in planning for the medical and dental needs of present and future generations. We can all play a part in the changes that, it is to be hoped, will be put into high gear by the new administration in the United States. I wish our new President much success in his journey through the political minefield of health care planning. At the least, President Clinton's recognition of health care as a right, not as a privilege, gives hope to those for whom adequate medical and dental care is but a dream.



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