The 18 week rule will create severe for orthodontic services as the impact of the new system on patients could cause chaos in some areas as well as reduce the numbers treated.

Patients treated in hospital orthodontic departments are those with the most severe dental health and developmental problems and those requiring interventions from more than one hospital specialist. These include cleft lip and palate cases, patients with facial deformity or children born with developmental defects. These patients are treated at the hospital over several years.

The 18 week referral to treat pathway for orthodontic departments which comes into force next year obliges all hospital departments to treat a patient within 18 weeks of referral, otherwise known as ‘street to treat’. In most medical specialties, this rule will lead to an improvement in the service for patients.

In orthodontics, however, the imposition of the 18-week rule will cause major problems because starting patients’ treatment at the appropriate time in their development is more important than doing so at the earliest possible date.

Dentists refer patients with the most severe problems into the hospital service so they can get a specialist opinion at the earliest opportunity. Therefore, patients are kept on the waiting list until they reach the first developmental stage to start treatment. They return to the hospital for review appointments until they are ready.

James Spencer, the Secretary of the British Orthodontic Society’s Consultant Orthodontist Group, explains: ‘Once treatment starts, patients must be seen at regular intervals or their treatment will be compromised. If we follow this new rule to the letter, we would start treatment on all the patients on the waiting list, regardless of whether the timing was appropriate, and then not have time to see the patients for regular follow-up appointments. The alternative is to refer patients back to their primary care trusts but this seems unethical and not in anyone’s interests.’

He continued: ‘The British consultant orthodontic service is the envy of the world. It is also where the specialists and consultants and university lecturers of tomorrow are in training. This 18-week rule risks demolishing a system which works in the interests of our patients in order to replace it with a target.’

He said his group had carried out a survey of hospital departments in the UK and found that currently there are many in excess of two years. This was a reflection of the impact of the new contract as well as the current shortage of hospital consultants which is causing waiting lists to rise to unacceptable levels, especially in areas where there is a shortage of high street specialists or practices with inadequate contracts.

James Spencer said they would continue to work with the Department of Health to find a solution. Otherwise there would be a lot of patients who faced uncertainty next year. ‘As a Group we have are very concerned about the impact of the 18 week wait on the service and are passionate about preserving it for the future benefit of patients.’

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