Is there a need to change the structure of educating dentists in order to provide better healthcare to a greater number of people? What medical education concentrates on treating illness, will the future doctors address illness on the whole, from a “holistic” approach, or putting it another way, will they treat the hole in the patient or the patient as a whole?

In “Learning for Tomorrow,” Alvin Tobis told that schools and universities were too past- and present-bound, that technological and social changes were ousting education, and that the concept of the future of education was closely bound to the motivation of the learner. The same might be said of individuals and organizations in the healthcare system. To Toffller’s statement, “all education springs from some vision of the future...” one might add, “together with an understanding of the past.”

Is dental education becoming more specialized and less “holistic”? That is, are we more concerned about targeting our sights narrowly on our daily fields of biomechanical expertise, which provide our income, or the needs of the patient as a whole?

As a clinician, researcher and teacher of dentistry and orthodontics for more than 40 years, I have, and I am sure all of you have, seen that patients are falling through the cracks and are not being served by our profession appropriately. Sometimes there is a void in procedures; sometimes a lack of communication between the treating physicians and dentists; and sometimes, it represents a larger void in the educational experience, which failed to stress the importance of examining and treating the patient entirely. It is the responsibility of all dentists and physicians, whether specialists, or generalists, to provide proper and necessary total healthcare to their patients by insuring that the patient’s other medical needs are also addressed. In the past, many dentists seemed to be more interested in “fixing” an ailment, diagnosing a single problem as if it was the only problem, but not looking at the patient’s total oral needs, “holistically,” in relation to the patient’s overall physical and mental health. If this were not true, we would not be concerned with a rise in malpractice insurance and class action lawsuits for failure to diagnose, refer or treat.

Oral Physicians Practicing “Holistic” Dentistry

Dentists, including all generalists and specialists, pursuing qualitative methods of examination and treatment, must strive to recognize and understand their patients’ total oral needs. These oral physicians must search for totality, the unifying criteria. This “holistic approach” assumes that the whole is understood as a complex system, which is greater than the sum of its parts. It also assumes that a description and understanding of a person’s social milieu is essential for overall clinical appreciation and comprehension of patient needs.

The emphasis on “holistic” understanding in a qualitative approach to a treatment plan is characteristic in sharp contrast to the logical and necessary nature of obtaining a thorough” history in the daily trenches of our individual dental practices, with greater emphasis placed on the quantitative approach. This quantitative approach requires an operational understanding of independent and dependent variables. Outcome assessments are identified and measured as specific dependent variables. Treatment goals and dental education programs must also be factored in as discrete, independent variables in this process. Standardized and quantified dimensions provide a measure of the true character of the dental or oral physician.

To quote Donald B. Giddon, DMD, PhD, “…however, some dentists do recognize their responsibilities and opportunities by becoming involved in a variety of roles reflective of primary care functions, such as smoking for tobacco cessation, recognition and referral of hypertension, skin cancer, and domestic and substance abuse, as well as the recognition and treatment of the dental ravages of eating disorders such as bulimia.” (J Dent Educ: 70(2): 111-114 2006).

Researching the literature for “holistic” patient care can be a precarious but fascinating odyssey, otherwise delivery of healthcare can be fragmentary. “The World’s Orthodontic Newspaper · U.S. Edition

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