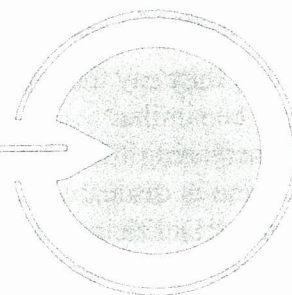


# BIO-PROBE

# NEWSLETTER



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## EVIDENCE-BASED DENTAL CARE

A fascinating guest editorial appeared recently in the Journal of Dental Research [78(7):1288-91, 1999]. The authors were Richard Niederman and Rachel Bodovinac, of the Office of Evidence-Based Dentistry, Harvard School of Dental Medicine, Boston Massachusetts.

### TABLE OF CONTENTS

Evidence-Based Dental Care.....	1
Standard of Care in Dentistry.....	2
Complaint Filed Against California Dental Board.....	3
Endodontic Study Group.....	3
Conference: Mercury in the Environment.....	3

#### Science

Microleakage of Human Saliva Through Dentinal Tubules Exposed at the Cervical Level in Teeth Treated Endodontically; Berutti, E.....	3
Periapical Cementum as Possible Reservoir for Endodontic Infection; Hollis, AW; et al.....	4
Immunohistological Studies on Apical Parts of the Roots With Infected Canals. Matsuo, T; et al.....	4
Use of the Ca(OH) <sub>2</sub> In the Treatment of Chronic Periapical Lesions. Morato, ICB.....	5
Long Term Effects of Various Iodine and Fluorine Doses on the Thyroid and Fluorosis in Mice. Zhao, W; et al.....	6
Relationship Between Herpesviruses and Adult Periodontitis and Periodontopathic Bacteria. Contreras.....	6
Color Vision Loss in Workers Exposed to Elemental Mercury Vapor. Cavalleri, A; et al.....	7
Reversible Color Vision Loss in Occupational Exposure to Metallic Mercury. Cavalleri, A & Gobba, F.....	7

#### Forum

IAOMT 1999 Annual Meeting.....	8
Rebuilding and Restoring Health.....	8
National Dental Seminar in Homeopathy.....	8

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The article discusses "Evidence-Based Dental Care" as a compliment to "Tradition-Based Dental Care." It is stated that Evidence-Based Dentistry "emphasizes the integration of good judgement with the best available evidence and the patient's values in the making of clinical decisions." The new tools involved are internet linked databases.

The authors point out that Tradition-Based Dentistry evolves from training and experience and - although being practical, prudent and personal - "tends to resemble casuistry more closely than science." [Ed Note: Casuistry: Subtle but misleading reasoning; esp. about moral principles.]

The article states that Tradition-Based care, while having many benefits, possesses "two elements that can significantly detract from the quality of care: good judgement comes from experience and experience comes from bad judgement"; and, "new research can contradict the bedrock data upon which clinicians base traditional care." Examples are given on the negative care effects of both of these factors.

It is further stated: "Both the clinical training process and the recent clinical findings suggest that it may be useful for clinicians to consider changing both training and treatment. Clinicians, however, are slow to change." References are given estimating the half-life of change to be 45 years for surgeons and 20 years for physicians. Although data for dentistry is

lacking, they say the rate of change in dentistry would be similar.

The increasing trend towards Evidence-Based Medicine is discussed, which is based on five factors: "1) Francis Bacon's precepts of the scientific method; 2) Sir William Osler's application of the scientific method to health care; 3) internet facilitated methods of finding the current best evidence; 4) clinical judgement; and 5) the patient's health belief model."

The new Evidence-Based Dentistry movement is centered at Oxford University in England and Harvard University in the United States. It now has a journal with an internet site ([www.ihs.ox.ac.uk/cebd/ebdjedit.htm](http://www.ihs.ox.ac.uk/cebd/ebdjedit.htm)).

There can be no doubt that medical care is increasingly relying on evidence, especially that of an epidemiologic nature. Dentistry, conversely, continues to base its acceptable treatment on tradition. It is unique, and questionable, that dentistry proudly proclaims the benefits of using materials that have been used for over 100 years (mercury fillings and gutta percha root canals, for example).

Dentistry will suffer, and dental patients will be denied the best of treatment so long as the dental profession relies on Tradition.

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#### **STANDARD OF CARE IN DENTISTRY**

The previous article highlights the biggest problem faced by the dental profession. To date, dental care, and judgement of dental professionals, has been based solely on tradition. In legal circles, both professional and civil, judgement is based on "Standard of Care" (aka "usual and customary treatment").

To prevail legally, the dentist must provide the same treatment being provided by other dentists in his or similar communities. If the dentist tries new procedures, with or without the benefit of support from published science, any number of dentists are more than willing to testify in opposition.

If ever a system was devised to guarantee mediocrity, this is it. The dentist must do what every other dentist does, or risk discipline or legal action. This, obviously, serves to bring every dentist down to the lowest common denominator. It also denies the dental patient ready access to the latest innovations in dental care, even if they are well documented scientifically.

The deplorable reliance of the dental profession on outmoded tradition **MUST** be stopped! It will probably take legislative action to do so, as the leadership of the dental profession is apparently too insecure and frightened to do so on its own initiative.

The argument that the public must be protected from fraud and quackery will certainly be raised. This is truly a red herring. Every state already has fraud legislation on the books. However, discipline for fraud **MUST BE PROVEN** by the State, and the perpetrator must be guilty of malice of forethought. Actions are not fraudulent simply because other dentists are not doing them.

Elimination of the prevailing medieval policies of the dental profession will benefit the dental profession by stopping its slide into the morass of outdated treatment. It will benefit better dentists by not tying them to the yoke of lesser dedicated dentists. It will benefit the patients by providing them ready access to new and modern methodologies and by generally elevating the quality of all dental care by modernizing the delivery of dental therapy throughout the profession.

Finally, the millions of dollars spent on dental research for developing advances in techniques and therapy, much of it from patient taxpayer taxes, that are now wasted in the limbo of tradition would become valuable immediate contributions to patient health.

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