Dentistry is still largely a profession focused on treatment rather than prevention of oral diseases like caries or periodontal disease. A preventive approach in dentistry is needed more than ever, according to FDI Continuing Education programme director for the Asia-Pacific region and FDI AWDC presenter Dr William Cheung.

Worldental Daily: Dr Cheung, could you please summarise the key aspects of the preventive philosophy for us and why it is important?

I think in the mind of most dental practitioners, prevention means primarily brushing, flossing and regular cleaning. There is no question that these measures are important but there is a lot more to this, like all the developments in the area of fluoride, for example. Many dentists are not aware of that.

There is also caries management by risk assessment, where we sit down with the patient and go through a certain process step by step. With the outcome of this, we can identify certain areas that need special attention. Then we formulate a protocol for this particular patient for managing his or her risk, or minimising it. This is not necessary for every single patient but if we expect the patient to be highly susceptible to caries then we would go through that exercise and perform a risk assessment.

Such a model clearly benefits the patient. What is in it for the dentist? Patients sense that you have a preventive approach at your practice and actually notice that you are going through all these exercises for them. This creates a positive image for the practice.

As dentists, we gain greater satisfaction because we can see the result of introducing this type of approach to patients that will subsequently be of benefit to them. By having patients come in regularly, you can identify something and can offer choices rather than expecting patients to come in only once they have a problem. When you start to build this kind of positive image and patients are happy, they are going to refer patients to you. Referred patients are the best patients in my opinion.

Considering all the prevention-focused initiatives that organisations like the FDI are running, where do we stand with the preventive model? Unfortunately, at a congress like the FDI AWDC here in Istanbul, most dentists want primarily to attend presentations in fields like cosmetic dentistry and implants. Those are the major topics that they are interested in, and I do not blame them because implants can generate a lot of revenue.

As dental professionals, however, I think we owe it to our patients to adopt a preventive philosophy. If we do the right thing, it can be rewarding as well financially. So, if you ask me when we are going to reverse this trend, I do not have an answer for you but as a dental association it is our responsibility to teach prevention and ensure that dentists understand what that means.

Thank you very much for the interview.
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I would like to express my sincere appreciation to all the parties involved for giving me the opportunity to make a presentation at the 2013 AWDC in Istanbul. My presentation on behalf of the Japan Dental Association at this year’s FDI Annual World Dental Congress is dedicated to the dentists in Japan who continue to practise under very difficult circumstances as the Japanese society is ageing at the fastest rate in the world.

The speed of ageing is the number of years it takes for the percentage of the population that is 65 years of age or older to go from 7 to 14 percent. For example, in France the aged population reached 7 per cent in 1864. It took 115 years to reach 14 per cent. In comparison, it only took Japan 24 years to go from 7 per cent in 1970 to 14 per cent in 1994. The unique phenomenon of Japan’s rapid ageing resulted from the extraordinary increase in average life expectancy. In 1950, the average life expectancy for men in Japan was approximately 60 years of age; it was 83 only 60 years later. The problem with this development is that healthy life expectancy has not kept pace with the rapidly increasing average life expectancy. Healthy life expectancy in Japan is 72, and statistics show that there are many elderly people who require nursing for ten years or more after they have reached that age. This places a huge burden not only on these individuals, but also on their families and society as a whole.

Prior to this increase in the elderly population, the Japan Dental Association started the 8020 movement in order to contribute to a more healthy ageing society by helping people over the age of 80 retain at least 20 functional teeth. What was decisively lacking in 1988, however, was research verifying that elderly people with many functional teeth were truly healthy. In response to that lack of knowledge, several cohort studies were initiated to seek evidence that could support 8020. In my presentation, I will give representative examples of the findings of these studies.

When I was elected President of the Japan Dental Association in 2006, I committed to helping dentists and dental associations understand the true significance of 8020. We should view the fundamental importance of oral health and dentistry as a philosophy. Of course, we must obtain nutrition by consuming food like every other animal on this planet. A philosopher friend of mine once said, “Living is continuing to eat”. For humans, however, living has many meanings. The scientific name for humans is Homo sapiens (human + wise) and the evidence of this wisdom is the use of language. I consider the definition of “human with language” (Homo loquens) as more appropriate for humans because people can use language to improve their lives and livelihoods. I think my colleagues from around the world attending the AWDC will agree that the first goal of dentistry is to sustain and enhance oral function, which is fundamental to human life, until people reach the end of their life.

Dr. Mitsuo Okubo is the president of the Japan Dental Association. Today, he will be presenting a paper titled “Dentistry in an aged society” during one of the afternoon sessions as part of the 2013 FDI AWDC scientific programme.