



"Dear Ann:"

William R. Laney, D.M.D., M.S., Editorial Chairman

Earlier this year an interesting episode was recorded in the News America syndicated column of Ann Landers. For many years, Ann has given advice to her readers on a variety of common subjects and personal situations. In March, she dipped into the dental field when one of her readers asked about implants as a solution to her problem with a complete lower denture. Since the inquirer suggested that Ann seek the consultation of an expert before replying, the advice of a prominent dental school dean was sought and received. His response, as interpreted by Ann, addressed the reader's query by noting that implant types differ and that cost is partly dependent upon the complexity of the procedure. Furthermore, a complete set of implanted teeth would not end her dental problems and that a successful implant would last for approximately five years.

It must be presumed that Ann's answer generated lively response from both the lay and professional sectors because Ann and the dean straightened the record with a prompt response to all readers. A successful implant is not one which lasts approximately 5 years, but one which "provides functional service for 5 years in 75% of the cases" (Harvard Consensus Conference 1978). More importantly, the dean noted that after consultation with a faculty expert he had originally stated that, "experienced implantologists now claim higher success rates with a variety of implant techniques." The earlier negative connotation concerning "efficacy and potential benefits" of dental implants was softened so as to not "frighten away individuals who can truly benefit from these new approaches."

Perhaps the time has come to give our patients the opportunity to base their treatment decisions on the facts. When an implant system is recommended, is it not responsible to tell the patient why and the scientific basis for selecting that particular treatment? Not only should the patient be informed of the statistical success data available for the procedure, but also what the individual doctor's success with the procedure has been compared to that published (in juried publications) in the scientific literature.

Some will say that the information would be meaningless because the average patient does not have the scientific background to interpret outcome data. The public has the right to know and has become quite sophisticated in matters of health and disease. Given the opportunity to know the facts, hear the options, and make decisions based on reliable risk-benefit information, patients can decide whether or not implant therapy is the treatment of choice in their situation. Media columnists could better serve their readers in matters of elective dental care procedures by encouraging improved patient preparation for informed decision making.