

Editorial

A teacher's responsibility

From kindergarten to the highest levels of college and postgraduate continuing education, it is a teacher's responsibility to stimulate honest, unfettered, critical thinking. It is the role of the teacher and lecturer to lead students along an educational path that is in the best interests of the student (in our case, the practitioner) and of those who depend on the student for information (in our case, patients).

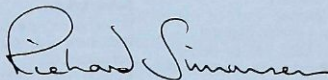
The increasing incidence of lecturers with hidden financial connections who advocate scientifically unsupported techniques and instruments or materials at major dental meetings and continuing education programs mocks this responsibility. Without disclosing personal or familial financial ties to the products they promote, some lecturers unabashedly hawk scientifically untested new materials and techniques to the practicing dentist. These self-proclaimed experts have tried the technique "thousands of times" on their patients with (surprise, surprise) "100% success." Clinicians are encouraged to continue this giant clinical research program on their patients without human subjects committee approval and without any protocol. This unofficial study benefits only the manufacturer and the lecturer. If the technique or the material is not successful, it is the patients and the clinicians who attended the lecture who suffer.

For many clinicians it appears that, "Try it and you'll see how well it works," is enough clinical proof of a new material or technique. But if the new material or technique is used before peer-reviewed, clinical studies are published, the patients and these clinicians are unknowing guinea pigs in a huge unethical experiment.

New techniques should not be recommended for clinical practice by lecturers and then used on uninformed patients before such scientific studies are available. Additionally, any financial arrangements between the lecturer or any immediate family member and the manufacturer should be fully disclosed, both in written promotional materials for the lecture and verbally at the lecture, so that the audience may fairly assess the lecturer's bias.

New materials and techniques should be confined to the research environment, where human subjects committees safeguard the interests of the patient, until necessary safety and efficacy studies are completed. The clinician who practices techniques that are not scientifically supported, and that are not practiced by colleagues in the community, may well be held liable for significant financial damages in the event of material, instrument, or technique failure.

The continuing dental education lecturer and the manufacturers of new dental materials and instruments must recognize the need for independent scientific corroboration of safety and efficacy and for unbiased presentation to practitioners. It is a teacher's responsibility.



Richard J. Simonsen
Editor-in-Chief