



Cure – don't just fix



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In the dental profession we are more than often trained, taught, and used to treating things by “fixing”. We drill out caries lesions, drill in dental implants, fill root canals, restore broken teeth, and extract untreatable teeth. Often, when we don't mechanically intervene in our patient's mouth, we (and the patients) feel that we have done nothing to improve their oral health. But is this what the dental profession is all about? Drilling, filling, removing, amputating, and restoring? Aren't we dealing with oral diseases that need to be prevented, treated, and cured?

We are very lucky to have the vast majority of our patients suffering from only two main diseases: caries and periodontal disease. To make things even easier, these two major diseases share a common main cause: bacterial plaque. This means that almost all our patients' oral illnesses and nearly all the treatments that we provide are a result of bacterial plaque-related damage. This should have driven us to invest all our efforts in making sure there will be no more plaque accumulation around the teeth of each patient we treat. So why isn't that the case? Why do we focus so much on amputating diseased tissue and restoring lost organs instead of trying to cure the disease that caused the trouble?

One of the paradigm shifts that should be encouraged in the dental profession is the recognition, by both the provider and the patient, that our primary

goal and effort must be curing the disease. We should still use all our knowledge and expertise to fix and restore what needs to be restored and fixed; however, the thinking process should begin with curing the disease and preventing further deterioration or occurrence. This rationale should lead our way of thinking, our communication with our patients, and our priorities when planning treatment. It should begin in dental schools by ensuring our students and residents perceive our profession that way, and learn how to prevent, cure, and stabilize before conceptually moving on to the mechanical and technical dental work. Modeling to our students (and patients) that all those issues are important, but not the “real part” of drilling, filling, excavating, amputating, and restoring, will leave us in the technical, mechanical, non-medical zone, and we might not want to be there in the long run.

Thinking in terms of “prevention, curing, and disease control”, and projecting this to our patients, will help them realize the importance of dental health care, will improve their compliance and participation in prevention, and will give them more confidence and trust in us, as dental care professionals who truly care for their long-term health.

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