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Prosthodontics — A Cerebral Specialty

With every year there are voluminous additions to the dental iterature, making it increasingly difficult to browse the titles, let alone absorb the content of the new material. New publications arise, presenting new avenues for authors' outreach and making it more difficult for readers to select those to which they wish to subscribe. Often the "new" material is merely the repackagging of past knowledge in a different format. Fortunately, a substantial number of the new papers present valid research, describe new technology, and present new theories and concepts — all of which should become part of the knowledge reservoir of the alert practitioner. The academician must be were more able to comprehend not only the concept to predicated and the directions into which it in impki lead.

It is difficult to read much of the literature with circumspect understanding. To do so requires a knowledge base formed from past reading as well as personal experience. It requires critical challenge and active cerebration, not passive acceptance. Hopefully the reading background was initiated in dental school, continued throughout the professional growth and development, and became a habitual necessity for the remainder of the professional life. Unfortunately, this is rarely true.

The problem often begins with the failure of a protessional person to build the initial knowledge base — to read the classic literature and be guided through it by a knowledgeable mentor. Once the basic literature is assimilated, it is easier to understand and assess subsequent publications and the revelations made through them. Once an initial premise is understood, the ensuing chain of logic, research, and development may be deliberately followed. Similarly, any deviation from this logical progression may be identified, and it is easier to detect erroneous assumptions. Naturally, the knowledge base itself must always be tested for validity in the light of new revelations.

Such continuing exposition of the scientific literature takes time. Unfortunately it is documented tact that the majority of practicing dentists (and physicians) do not dedicate this time and effort once they leave their educational environment. For whatever reason, the daily pragmatic demands displace the time that would have been given to literature review, and while the exponential expansion of the world's knowledge should force grater attention to reading, instead the acceptance of a "knowledge status gou" results. Some obviously feel that the basic education is a sufficient foundation on which to build their lifetime practice. In today's dynamic environment, there is, in fact, no status quo, but instead either progressive expansion or relative degradation of the individual understanding.

For the prosthodontist, this means that there must be a dedicated effort during the training program to learn the "classic" literature and to understand the conceptual growth of a concept or practice from initiation to current interpretation or use. The specialty of prosthodontics has its critics who maintain that a general practitioner with technical skill and studied clinical experience can do everything that a specialist does. This is where I must invoke along-held premise and an oft-recited admoniton to students: The specialty of prosthodontics is a cerebral speciality. Although we are often viewed as technical specialists, I maintain that it is the conceptual understanding of the basis of the procedures, their logical development, and the current wisdom concerning practice that validates our specially.

As a rather simplistic and mundane example, a prosthodontist may or may not use a facebow for a given procedure. In making that decision, a knowledge base of the origin, development, purpose, and conflicting opinion is invoked, and an understanding of advantages and shortcomings of the procedure will almost automatically be considered in the clinical decision. This obviates the rote, mechanical adherence to the process.

Additionally, there is the sheer joy of knowledge. Knowledge is its own reward. The educated individual finds intrinsic value in knowledge.

It is increasingly important that specialty programs provide students with the background of knowledge necessary to make future decisions. If the specialty of prosthodonics is not emphasized as being more cerebral than technical, it will fail to meet the increasing demands placed upon it. We may not always have the answers we need for new procedures and concepts, but we must know how to make the necessary assessments and guide clinical practice with studied judgment and wisdom. How can we as prosthodonitist be expected to do less?

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