

THE COST of DENTAL CARE: A MODERN DAY MEDICAL TRAVESTY

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Since the beginning of time mankind has embarked on a perilous pursuit of immortality, but have realistically settled on, for now vitality, [mainly pain free] and longevity. Leaps and bound have been made in the field of medicine and that of dentistry, which has resulted in the successful treatment of once painful and lethal diseases. It is a paradox, however, that with all the time, energy, resources, research and personal sacrifice spent in finding the proper treatment and cure people; that now in the 21st century we are *unwilling* to do so. The basis and the quality of most medical/dental treatment is now being determined by one's financial status. The case study of Ludwig's Angina, the Frontline documentary and even our own modern-day realities, have highlighted this underlying thread, ... *money*.

On the basis of the case study, about the patient with Ludwig's Angina, the cause of death snowball from an odontogenic infection, stemming from caries and periodontal disease. A conjecture and a deduction can be implied that, there are usually two reasons why a person neglects his/her dental health; one is, fear of dentist, the other is limited finances. The latter seems to be the culprit of this middle age patient. Early dental intervention could have prevented his untimely death. Instead of going to a dentist, he ended up in an emergency room, and in the operating theatre of a public hospital.

The same scenario played out in the Frontline documentary within the United States. Having a Medicaid insurance [which most doctors do not accept], and or no insurance, makes many unable to avail themselves to preventable dental treatment. This results in unnecessary pain and suffering stemming from dental infections, that forces many low income people, young or old to seek relief via charitable organization or as an emergency in the hospital. In this country and others, it is not a far stretch of one's imagination that the driving force behind most establishment is the bottom line: capital/profit, even if it is dental/medical facility. While most sincerely chose this field to help others, they sometimes forget that, when they are faced with an expensive reality or, when they come under pressure from an exacting boss, or greedy investors.

This was the scenario of those 'sweat-shop' model pediatric dental offices, who *claims* to be in the business of helping the underserved low income children.

It is depressing and disturbing, that a wealth country like the US that has the resources and ability to take care of its citizens refuses to so. Other less wealthy countries [eg Canada] provide universal healthcare for its populace. In this country however, the oligarchs and the politicians are so, insensitive and lacking empathy they adamantly opposed to universal healthcare [which is evident in their quest to abolish Obamacare]for their fellow country men. They on the other hand, have no qualms of taking money away from social services to budgeting, billions of dollars for war machines and equipment. Having tunnel vision, they even neglect medical assistance for their wounded veterans, which in my opinion is immoral and tragic. The truth and sad part about it is that, their indifference is squarely and firmly rooted in greed and selfishness.

The situations describe in the preceding paragraphs is not unique only to the US, it is also being played out in many parts of the world, only with various twists. In Jamaica where I am from, the country has in the past, been unable to reach its full potential because it struggles as a result mismanagement, due to political strifes and/or corruption. With limited resources, their comes limited, overcrowded and overwhelmed public treatment facilities. While many people may go to the medical doctor for routine preventative check-up; they would only visit a dentist for emergencies, which is usually an extraction. This is not to say that oral hygiene [that is intact beautiful teeth and smile] is not important, the fact is, a dental visit is very expensive especially to someone of little means. Therefore, going to a dentist just for a check up is not a priority, especially if the tooth is not hurting. The rational is: money is best spent elsewhere, especially on their child's education.

Growing up in a tropical climate, while overall daily physical and oral hygiene was enforced, but it was not stipulated, for example flossing; I have no recollection of being taught how to floss , just the exception of the occasional use of a toothpick. In my younger years I remembered loving candy so much that I would sleep with either a mint-ball or a paradise-plum in my cheek. Never once was there made a correlation between excessive sugary product and caries I consider myself very fortunate to have had a dental clinic at my high school, otherwise, without my amalgam fillings, I am quite certain that some teeth, apart from the third molars, would be missing. I am also of the opinion that in Jamaica there is a disquieting awareness that

medical, especially dental services are severely restricted, accessible only to mainly those who can afford it.

While the effects of greed and incompetence is palpable, and the situation may seem overwhelming and hopeless. One may feel powerless to bring about change especially when there are stronger forces opposing it. And even, despite our best intention we too as hygiene professionals, will feel those unethical pressures being exerted on us, and it may be tempting to succumbed it. The question is, *individually*, what will each of us do when we are faced with those choices? Are we in the business of helping others or helping ourselves? While we may not be the major movers and shakers on a world scene [though it is not impossible], we can within our realm exact change, by adhering to our core values; and by volunteering our time and resources as some Jamaican dentist and oral surgeon who have done, using their vacation and personal resources to purchase dental supplies that they donate. Something that I hope to be a part of when I graduate. Or becoming a part of ADHA and support their activities, which will gives us greater freedom and range to *effectively treat those most in need*. In the end it is better to do something than to feel defeated and thus do nothing...

References:

BRITISH DENTAL JOURNAL VOLUME 203 NO. 5 SEP 8 2007

Death from overwhelming odontogenic sepsis: a case report L. Carter¹ and E. Lewis²

(<http://www.pbs.org/wgbh/frontline/film/dollars-and-dentists/>) w