

# President's Column

## NO PROFESSORS, NO PROFESSION



Dr. George Sweetnam

**A**s CDA begins its year-long 100<sup>th</sup> anniversary celebrations, we see what Canadian dentistry has done right and what steps must be taken to ensure our continued success in the next century.

Dentistry is an honourable profession, with high standards upheld in ethics, technical skills and research to advance dental science and improve oral health care in Canada.

As I reflect on my practice over the last 30 years, I think of early cases of young people with traumatized anterior teeth. Before composites, the standard treatment was to apply pulp protection and temporize with an aluminum crown. Now, with the composites and their esthetic capabilities, the child is returned to the relieved parent in a matter of minutes. I recall many heart-warming moments observing parents as they saw their child's bright new smile. Not only did the disfigurement they dreaded disappear, but the child's

appearance was back to normal. We owe these moments to dental science and our training in applying it.

However, our ability to provide exemplary modern services depends on maintaining the high-quality education now available to dental students at universities. Sadly, we run the risk of losing what we have achieved unless more time and effort are spent lobbying government for improved educational facilities and research funding.

Why is dental research so important to the profession? The benefits of scientific advances are obvious, but research and publication are what make the difference between a university and a technical college education. Without these elements, dentistry could find itself relegated to the community college level. This fate is not as unlikely as one would assume.

So what can your national association do to help the cause? Lobby, lobby, lobby!

In 2000, the federal government reorganized Canadian health research funding when it created the Canadian Institutes of Health Research (CIHR).

Dentistry and oral health were grouped under the Institute of Musculoskeletal Health and Arthritis. You'll notice that oral health does not feature in the name of this institute. Nor does it seem to matter much in terms of funding.

In 1999, only 1.6% of federal health research funding was awarded to oral health researchers, despite the fact that 7% of national health expenditures were for oral care. The situation has not improved since then.

CDA is lobbying for research grants to be at least proportional to overall spending. The Association realizes that the names of the institutes within CIHR are being reexamined for possible revision. Therefore, we are requesting that 'Oral Health' be added to the institute's name.

CDA is also lobbying Statistics Canada to include questions in its health surveys that would provide national indicators on the state of oral health. These data would give us a basis in fact for our observations and fresh evidence for our funding appeals.

Another area of critical concern is the short supply of dental educators. This is due to several factors. Canadian academics are lured south of the border by salaries paid in U.S. dollars and generous endowments of research funds at some American universities. Since dental educators' salaries are typically much lower than their private-practice colleagues, academic dentists must be willing to make personal sacrifices for academia's sake — something it seems fewer of us are willing to do.

In a brief submitted in 2001 to the Commission on the Future of Health Care in Canada, CDA reports that 1 in 6 funded, full-time dental faculty positions is vacant — in all, there are 49 vacancies from a total of 305 positions at Canada's 10 dental schools.

Coupled with the overall underfunding of universities and problems dental students face in paying their tuition fees, a grim picture is painted indeed. Yet difficult times tend to unite the dental family for mutual support, and so it is that CDA, the Association of Canadian Faculties of Dentistry and the Canadian Association for Dental Research are convening to coordinate efforts on behalf of the profession.

CDA is contributing its input and expertise in government relations to this effort. It's no secret that solutions to these concerns will have a 'political' dimension.

The squeaky wheel always gets the oil. I can assure you that our wheel will be heard loud and clear as CDA enters its second century.

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