

Editorial

HELP WHEN YOU NEED IT MOST



Dr. John P. O'Keefe

When I joined this profession, one of the dictums inculcated in me was that it is our duty to help out colleagues who are in trouble — the idea being that you can never predict when you might be in a sticky corner yourself. Understanding the pressures that our colleagues are under, it is natural to lend a helping hand when it is needed.

One of my most influential mentors, who died recently at a fine old age, was an example of this professional ideal. All during his life, he was a stalwart volunteer in dental professional organizations, even long after retirement from practice. The last time I visited his home, a couple of years ago, he and his wife were still deeply involved in an organization that helped out the spouses and children of dentists who were left in difficult or unfortunate circumstances. Thankfully, such professional caring for colleagues still exists, even among

the much-maligned younger generation of dentists.

This was demonstrated to me recently when a younger professional colleague approached me, expressing a deep concern because 2 dentists in his area had recently committed suicide — the ultimate act of despair. My colleague was dumbfounded by how a dentist who was young and seemingly in good health and another who had enjoyed many years of successful practice could be driven to taking their own life. He asked me if there is anything the Association can do to help dentists who are vulnerable to suffering the nasty consequences of stress and depression.

I believe that CDA publications have a responsibility to make dentists aware of the warning signs associated with stress, burnout and suicide ideation. We also have a duty to make dentists aware of the resources available to them across the country, resources which can help them in times of personal crisis. Very often, these services are run by dentists themselves, caring professionals who have a profound understanding of the stresses experienced by colleagues. I use this edition of *JCDA* to publish the telephone numbers of the “dentist in distress” help lines operated by provincial dental associations and by CDSPI (see page 238).

Given that *JCDA* takes the issues facing the profession and individual dentists very seriously, I would like to help build a databank of information about the stresses related to dental practice and facilitate a discussion to find better ways to prevent dentists from succumbing to the rigours of professional life. I propose to do this through the “Related Information” feature, which you will find associated with the electronic version of this column (<http://www.cda-adc.ca/jcda>). I thus invite you to send me information (Internet links or other

documents) about stress and its consequences that would be of use to colleagues who are going through a rough patch.

To get the discussion going, I did a Medline search on the key words “dentists” and “suicide” and retrieved only 42 articles, many opinion pieces among them. Despite the almost unquestioned assumption that dentists have a high rate of suicide, it is interesting how little solid information about the subject exists in the Medline database.

I was particularly interested in a review article by Dr. Roger Alexander, published in the June 2001 edition of *JADA*, entitled “Stress-related Suicide by Dentists and Other Health Care Workers: Fact or Folklore?” Dr. Alexander found little evidence that dentists have a higher rate of suicide than the population as a whole. In his article, he makes a number of recommendations for future research, including enquiry into whether the pattern of dentist suicide has changed with the changing demography of the profession; whether causes are related to practice or personal stressors; and whether the personalities of those drawn to dentistry make them more vulnerable to suicide ideation than other people. There is surely a fruitful research agenda in studying the health effects of dental practice.

The whole area of suicide is still taboo in many circles, and is probably very difficult for dentists to talk about, given that the culture of the profession might be described as one of rugged self-reliance. Despite this, I believe that we need to reflect on the risk factors for suicide and seek ways to help our despairing colleagues to feel that they can call the right place for help in their moments of greatest need.

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