

Dental Ethics: Our Future Lies in Education and Ethics Committees

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© J Can Dent Assoc 2004; 70(2):85-6

Ethics is fast becoming one of the leading topics in the press. Very few weeks go by when a lead story doesn't report on a lapse in ethical principles in business or the latest crisis in government to be sorted out by an ethical ombudsman or ethics committee. The *Globe and Mail* publishes interactive ethical dilemmas weekly because of greater reader interest.

Conflict of interest cases abound in cabinet and at all levels of government. The Prime Minister attempted to defuse thorny situations by appointing an ethics counsellor, Howard Wilson, who reports to the PM directly and not to the House of Commons. Articles such as "Rubber Stamps Aren't in the Ethics Tool Kit"¹ exemplify the public's disdain for this type of arm's-length approach. Since 1994, the ethics counsellor has rubber-stamped almost everything Liberals do as "ethical," even when rules have been clearly violated. According to Democracy Watch coordinator Duff Conacher, an ethics advisor needs to be fully independent and empowered to enforce loophole-free rules.

Business ethics have been sensationalized by scandals at Enron and WorldCom. Martha Stewart, an icon of the American lifestyle, has been linked to insider stock trading. Public trust in institutions has been eroded by the shredding of incriminating documents by the formerly respected accounting giant Arthur Andersen LLP.

Dentistry has also been affected by increased public scrutiny. A *Reader's Digest* article entitled "How Honest is Your Dentist?"² raised questions and national awareness about ethics in the dental profession. Patients are being asked to question the motives of dentists in their treatment recommendations. An article in the *National Post* headlined "Dentists' Fraud Growing"³ rekindled the debate over the ethical actions of dentists. This article was sourced from information provided by a former president of the Royal College of Dental Surgeons of Ontario (RCDSO) to add credibility and raise public angst. CBC aired a show in prime time: *Dental Boot Kamp*⁴ warned patients about

marketing ploys used by dentists to sell patients apparently unnecessary treatment.

Harsh responses by leaders of dental organizations were quick to follow, but are these enough to fully restore public confidence in our profession? Medicine has faced similar situations and effectively dealt with conflicting value judgments, cost containment, conflicts of interest, restructuring and patient concerns, by developing a network of ethics committees and aligning them with bioethics centres. In this model, institutions can learn from the problems that others have experienced, developing strategies and policies to advance principles that are important to patients and caregivers alike. This approach bypasses the normally secretive channels and offers a transparent process to alleviate patient concerns.

What does dentistry have to offer in response to the ethics challenges that it faces? Dental faculties find themselves in a conundrum. Many recognize that there is a need for increased ethics education; however, they lack adequately trained personnel to expand their teaching in this area.

To deal effectively with ethical dilemmas in dentistry, we need to place the teaching of ethics to our undergraduate students on an equal footing with the other disciplines that are taught. To achieve this objective, a chair in ethics should be established at all 10 dental schools in Canada. Ethics committees exist in 5 of these schools, although 2 of them only deal with research-related matters. This leaves 3 dental schools with no committees to deal with ethical dilemmas involving treatment and patient care.⁵ To be able to educate graduate students in ethics, we need a process whereby dentists can further their education through existing centres for bioethics at most universities with dental and medical programs.

In such an academic environment, dentists who have actual clinical experience with the complexities of private practice can be trained to teach ethics to dental students. Their first-hand experience would provide a necessary link

from the theoretical to practical application of ethical principles, and have a greater and more lasting impact on students.

The formation of ethics committees is born out of the need to maintain our professional image as our first priority, always of course bearing in mind the rights and needs of our patients. According to a survey conducted by the RCDSO in May 2001,⁶ dentists identified ethics as the number one issue of importance to them. By following the example of other health disciplines that have embraced bioethics training and other solutions, we can face the challenges that lie ahead for our profession. I believe that when ethics becomes a discipline that is given the same priority as other aspects of clinical dentistry, we can give our students the direction and foundation for preserving the public's trust in dentists. ♦

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