

Editorial

DENTISTRY IN THE 21st CENTURY (1420 H)

The World Health Organization (WHO) has declared a universal goal of "health for all by the year 2000". In 1978 at Alma Ata, the WHO declared the urgency of this goal by adopting the primary health care conception. They declared that:

"Primary health care is essential health care based on practical scientifically sound and socially acceptable methods and technology made universally accessible to individuals and the community.."¹

The questions, we, as dental professionals in Saudi Arabia should be asking are, "What can we do now to reach the goal of dental health for all in Saudi Arabia by the year 2000 (1420 H.)? Should we be continuing with our same curative- and treatment-oriented traditional approaches to our profession with limited emphasis on prevention, or should we now be considering the enormous changes that will impact on our philosophy of dental care and our role in society as dental professionals?" It is prudent to look at where we are now and, on the basis of that situation analysis, establish goals as to where we want to be a decade from now. National goals should be established in order to stimulate and guide the oral health delivery system toward making quantitative progress in the improvement of dental health in the country.

The WHO oral health program has established long-range oral health goals which are very important stimuli to advancing the oral health of the world. In 1979, the goal of a DMFT of 3 by the year 2000 in 12-year-olds was established. Saudi Arabia is already below this goal (DMFT, 1.6 in males; 1.7 in females; and 41.9% free of caries among 12-year-olds)²; therefore, a lower DMFT goal should be set to prevent a recrudescence of caries and consolidate a decreasing trend.

The Oral Health Survey of Saudi Arabia - Phase I² established base line information of the oral health status of the central province of the country. Although this is not the representative of the entire

country, this can be the preliminary basis for establishing national goals to reach in the year 2000. A representative cross section of the dental profession, led by the Saudi Dental Society, College of Dentistry, King Saud University and the Ministry of Health, should carry out detailed discussions to establish these national goals. At the heart of any goals should be the concept of preventing oral diseases. This has been talked about but limited efforts have been made in actual implementation of prevention programs.

In dentistry of the 21st century, we can expect dramatic declines in dental caries in both the industrial and developing world.³ There will be a general use vaccine against caries applied along with basic immunizations against childhood diseases. The use of fluorides and fissure sealants will expand to home self-applied systems. Pulpal diseases will become almost unknown. Periodontal disease will also decline sharply, with the use of chemotherapy against plaque and calculus, and the development of vaccines against the multiple organisms of destructive periodontitis. As a result of the sharp reductions in tooth loss, tooth extractions will be rare. The science of prosthodontics will focus away from removable appliances to fixed ones using primarily more perfected methods of bone integrated implants. The practice of dentistry will subsequently be broadened to concentrate on needed specialties such as surgery, orthodontics/pediatric care, gerodontology, and aspects of medicine. Issues of healthy life style guidance will become more important to the practice.³ Examples include general dietary counseling, smoking and smokeless tobacco cessation, HIV diagnosis and control, health education, and other broader medical and health issues. The enormous technological changes of the future should be integrated, upon development, as quickly as possible into the dental delivery system.

With these incredible changes, there will concurrently be a need to transform our education of

dentists and a need for retraining and re-education of existing dental personnel. The separate health science schools of the present will probably coalesce into one health science college. The science of informatics using computer-based laser and CD-ROM disc-training systems will carry the weight of the future education system. The basic core studies would be identical in medicine and dentistry. Students would later move on to their particular specialties. A dentist in the future would be more accurately called an oral physician or stomatologist.

The goals for the year 2000 established by the Saudi dental profession should be quantitative and measurable, and should include the following topics: health status, risk reduction, public awareness, professional education and awareness, services and protection, and surveillance and evalua-

tion. If our generation is to meet the internationally established goal of "health for all", our time to act is now. A Chinese proverb states that "a journey of thousand miles begins with one step." Let's collectively take that step.

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References

1. World Health Organization. Global Strategy for Health for all of the year 2000. WHO, Geneva, 1981.
2. Shammery A, Guile E, El-Backly M. An Oral Health Survey of Saudi Arabia - Phase I, King Abdul Aziz City for Science and Technology, 1990.
3. Barmes DE. International perspectives for the first quarter of the twenty-first century. *Swed Dent J* 1989;13:1-6.

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Erratum [Editorial Section, Vol.2 No.2 / September 1990]:

The 2nd paragraph, line 2 should read as follows:

The oral surgeon with his broad knowledge on the relation of the jaws, function of the masticatory apparatus and the importance of appearance to the patient, can carry out surgical procedures on the facial skeleton and oral cavity lesions with the *minimum* damage.