

On Prosthodontic Continuing Educational Choices—Lite or Grand Cru

Thank God for that well-used delete instruction on my desktop! Hardly a week goes by without resorting to it regularly as I deal with all those numerous mailings designed to solve prosthodontic esthetic, soft tissue, and surgical implant challenges in my practice. The invitations are certainly marketed with vigor and conviction—virtual panaceas for the uncritical. Their implicit message is far more related to “building the want,” as opposed to offering predictable solutions for legitimate oral health concerns. Sadly, it appears that dentists remain vulnerable to North America’s cultural appetite for the insubstantial. “Prosth Lite” (to coin a term for this sort of continuing educational pursuit) has become increasingly prevalent in nonspecialty circles, although specialist meetings frequently offer comparable fare. Celebrity circuits and commercial institutes of so-called advanced learning keep competing for attention and attendance. They have virtually eclipsed university-based programs, which remain chronically handicapped by overworked clinical staff and less generous remuneration schemes. Understandably, CE in our discipline is a daunting responsibility and simply nonexistent in graduate teaching institutions. It is inarguably very challenging, perhaps impossible, to produce scientifically rigorous and clinically focused specialty programs in dental schools. So almost by default, it has become incumbent for a small number of national and one international specialty organization to address this CE need.

These become the “Grand Cru” CE options to Prosth Lite’s fashionable and transient pursuits. Select ones continue to be available, but they too demand considerable discrimination in their selection, together with a strong commitment to study and critical evaluation. They do not deal with entertaining and simplistic extrapolations since they are a critical departure from a mind-set that is prepared to believe that success comes with a new technique or in a package. The forthcoming biennial ICP meeting in Cape Town, South Africa, promises another such vintage educational occasion. This is not only because of the proximity of that unique wine-growing district of the Western Cape, but particularly because this year’s scientific co-chairs, Nicola Zitzmann from Switzerland and Sree Koka from the United States, have selected an eclectic and comprehensive series of topics that

are guaranteed to provoke debate and analysis. I have had the pleasure of working closely with both colleagues during the IJP workshops for young clinical teachers in the discipline, and I continue to be impressed by their ability to relate to the international scholarly community with kindness, humor, and a strong dedication to clinical science. Their program certainly reflects their clinical academic stature and performances to date.

Most of us on this journal’s editorial team have also been impressed by the vigor and commitment that the ICP’s current co-presidents have brought to our international organization in the past 2 years. The accompanying short biographies of Iven Klineberg (Australia) and Jaime Gil (Spain) reflect only a small aspect of this pair’s career accomplishments. Their past individual national leadership roles converged ever so effectively in their co-presidential ones; and they also have demonstrated that there are times where diplomacy needs to outrank scholarship as an international endeavor. They expanded the college’s stature and confirmed their respective skills as role models for our discipline’s diversity and profile. Both co-presidents regard the ICP’s goal to advance prosthodontics as a global responsibility as both stimulating and daunting. They recognize it as a crucial driving force for recognition of the importance of the discipline for general medical and psychosocial health. It is hoped that the ICP’s future leaders will continue to be drawn from the ranks of comparable clinical scholars—nationally qualified and above all respected practicing specialists who excel in all three of the discipline’s scholarly mandates of patient service, teaching, and research.

Peter Owen’s incisive commentary is another prosthodontic Grand Cru effort. It follows on the heels of his provocatively articulated spectrum of concerns that he first expressed in IJP issue 3 of 2004. The choice of a Cape Town venue for the 2009 ICP meeting is really a tribute to his leadership and profile in the ICP; and above all to his courage to speak out compellingly in favor of a value system that needs constant scrutiny and reevaluation. He brings much credibility to the ICP’s scholarly mandate.

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