

CORRESPONDENCE

Letter to the Editor: Response to “On the Pediatric Oral Health Therapist: Lessons from Canada”

Note: The referenced article was originally printed in the Journal of Public Health Dentistry, 2008, Volume 68, pp 53-56, and was authored by C.R. Quiñonez and D. Locker. Both are affiliated with the University of Toronto.

It is odd that Drs. Quiñonez and Locker suggest that Canada, in addition to the United States, “require new forms of dental care delivery...” when the old Canadian dental therapist model was highly successful until degraded by the Canadian dental profession and conservative governments. For example, “By the mid-80’s, the Saskatchewan Dental Plan employed over 150 school dental therapists. Over 90% of children were enrolled and over 90% of all enrolled children were examined and treated on a yearly basis.” (1) It would seem, then, that what Canada needs is to restore its school dental service staffed by dental therapists, not to reinvent the wheel, if it is to “responsibly act on

the health needs of their most vulnerable citizens.” And that, perhaps, is the most important lesson that public health dentistry in the United States can learn from the Canadian Experience.

Instead, Quiñonez and Locker recommend that “policy stakeholders should promote the pediatric oral health therapist in a non-partisan way, meaning that efforts should be ensured to gain support from all members of the political spectrum.” Indeed, all partisans are welcome, including the American and Canadian Dental Associations and their subsidiaries. But do they really think the ADA will voluntarily support pediatric oral health therapists? Given our limited resources for advocacy, time and money should not be spent courting the ADA, although the ADA should be encouraged to embrace care for all children by supporting dental and pediatric oral health therapists in school-based programs and community health centers.

We should also bear in mind the lesson learned in Alaska where a combination of public health dentists, government agencies, the Alaska Native Tribal Health Consortium representing the Native American population, and philanthropic organizations combined to initiate and defend the Alaska Dental Health Aide Therapist program. We need partisans in health care for all neglected populations to form coalitions and consortiums of people, organizations and governmental agencies to overcome traditional opposition and adopt remedies of proven worth.

Reference

1. Nash DA, Friedman JW, Kardos TB, Schwarz E, Satur J, Berg DG, Nasruddin J, Mumghamba EG, Davenport ES, Nagel R. Dental therapists: a global perspective. *Int Dental J.* 2008;58(2):61-70.

Respectfully submitted,
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