The Consumer Needs A Dental Preventive Guide—Us!

By Margaret J. Fehrenbach, RDH, MS

My late dad enjoyed using his computer and surfing the World Wide Web (WWW) until age 91. We just kept adjusting the font size on his desktop. He even learned how to do taxes for the elderly on it. He would tell tall tales of how a computer filled a large room at his university, and he had to sign up to use it to do research on his beloved white pine trees. The printouts generated reams of paper to play with; we used to reuse them for notepads.

He also used to say that he knew that my late mom would have come around, too, although she fought us having any computers early on. She instead went (now so quaint) to the stacks at the local library to look up the various ailments that come with having a large family, even checking out the large black reference books for the credentials of our health care providers. But she was always a savvy consumer, an early advocate of health foods and exercise, even ultrasonics and electric toothbrushes (thanks, Mom!). At our appointments, she would prod our health care providers for the answers to her questions about vaccines and medications. I always felt sorry for them! But early on, I got to see what true consumer advocacy is all about. Later in life, she became a nurse, but she never practiced except on her family.

I remember being upset a few years ago when a dental company would advertise a new oral health care product to the consumer before the dental professional. I hated sitting red-faced at my operator chair not knowing what my patient was talking about.

As a textbook author, I know that books on health care topics can quickly become dated, and research journals can be hard for the average person to understand. One should always be careful when reading health books, since no one wants to “die of a misprint.”1 However, even my dad would have been astounded by the technical change and globalization in our newly “hyperconnected” world in the last six years, where a futurist has pointed out (paraphrased) that until recently, twitter was a sound, a cloud was in the sky, 4G was a parking place, an application is what you sent to college, and Skype was a typo.2

We used to want to “unplug,” but the machines have followed us, and we are now wireless, not even needing any plugs. We complain if we are not fully connected by our Internet service provider or cell phone company, even as we try to unwind on a beach! A newly hatched bioengineer’s mission is to further blur the lines between man and machine, making the machine feel less like a machine and having a seamless interface.3 I do not know about you, but to me, that sounds a bit scary!

Statistics on this connectivity are daunting, even on the smarty-pants phone market: there are over 66 million smartphone users in the U.S., 20 million iPhones were sold last quarter, and 9 million iPads were sold last quarter. Sales are increasing at a monthly rate of 75 percent to 100 percent, approximately 500,000 apps are on the market for download, and over 15 billion apps have been downloaded so far.4

Do not get me wrong: I broke out many years ago with my first answering machine, and I really enjoy my computer and surfing the WWW like my dad. I have a desktop and tablet, and I use my cell phone and Skype to keep in touch and work from the road. In the last six years, my extended family has researched broken backs, torn Achilles’ tendons, high blood pressure, viral infections, meticillin-resistant Staphylococcus aureus (MRSA), vitamin D and E, as well as enamel remineralization and implants, and even (sadly) cancer. My niece has worked on a machine that will interface the touch on the dorsal surface of the tongue to help a blind person see. I proudly gave her information about tongue innervation.5

I remember being upset a few years ago when a dental company would advertise a new oral health care product to the consumer before the dental professional. I hated sitting red-faced at my operator chair not knowing what my patient was talking about, absorbing what I could to keep the main information in my head to look up on the Internet when I got home.

Now, drug companies loudly tell us all know the latest pill for the latest conditions between sitcoms. Even though we are all in this together as consumers, we as dental hygienists have our vast education and backgrounds to help us sort things out. Snake oil is still being sold, now in even prettier packages with louder messages that resound with eco-friendly fire: “buy me and use me and I will solve your dental decay, gum disease and bone loss” is what they are now saying on infomercials and on the sidebars of their Facebook pages. In the last 10 years, companies have begun to question if they need to use any seal of approval from a health care association for their products to lure the consumer.6 And consumers are aware of this discussion.

So this glorious tool can be hazardous to our collective dental health. The savvy consumer needs a dental preventive guide to navigate the latest storm coming at them on the WWW. The dental hygienist needs to step into this role. That means that one has to keep current on the techie part and be ever mindful about what is evidence-based for their products to lure the consumer. And consumers are aware of this discussion.

So this glorious tool can be hazardous to our collective dental health. The savvy consumer needs a dental preventive guide to navigate the latest storm coming at them on the WWW. The dental hygienist needs to step into this role. That means that one has to keep current on the techie part and be ever mindful about what is evidence-based for the well-being of our patients. Let ADHA and its website at www.adha.org be your “one-stop source for timely, reliable, and easy-to-use oral health information for consumers, reporters, legislators, and dental hygienists” as it states on search engines. And this issue of Access, on consumer education, is a good start.

However, we need to interface not only with the machines and their messages, but also with our peers at association...
Two dental hygienists received awards from the IFLOSS Coalition, which is dedicated to improving the oral health of Illinois residents, at its conference on Friday, Oct. 28, 2011. Jennifer Sherry, RDH, MSEd, and Julie Janssen, RDH, MA, were honored as Oral Health Champions. The awards acknowledge a colleague’s efforts within the profession and within oral health.

Sherry is faculty member in the dental hygiene program at Southern Illinois University Carbondale (SIUC). She is also the President of the Southern Illinois Dental Hygienists’ Society (SIDHS) and the local component (#12) of the Illinois Dental Hygienists’ Association. Sherry organized “Give Adults a Smile Day” on July 22, 2011, in partnership with SIUC and SIDHS. Seventeen local dental hygienists, a dentist, and a dental hygiene student volunteered their time and saw over 50 adult patients. The event is modeled after the “Give Kids a Smile Day” in which many dental hygienists participate during National Children’s Dental Health Month in February; it served as a pilot partnership program between an educational institution and a professional organization. Many adults go without dental care, though programs for children’s dental care are growing. Preventive oral health services are not covered by Medicaid and are expensive for those who are under or uninsured.

In return for Sherry’s and Janssen’s membership and hard work, ADHA congratulates both award recipients and thanks them for their dedicated service to their communities.

Source: ADHA Update

References

Margaret J. Fehrenbach, RDH, MS, is a dental hygienist, oral biologist, and dental science writer residing in Seattle, Wash. She has obtained her Certificate in Clinical Research from the University of Washington Dental School. A recent recipient of the Johnson & Johnson/ADHA Award of Excellence in Dental Hygiene, she can be reached at www.dhed.net/ or margaret@dshed.net or 206-244-5359 (PST).