

The Issues of Autumn

EDITOR'S NOTE: As we enter the autumn of each year, American College of Prosthodontists issues arrive as surely as the turning leaves. You, as a trained prosthodontist, should pay close attention to dentistry's ever changing issues as they are formatted by the ACP. To its credit the ACP does debate the issues and it most often attempts to arrive at reasonable solutions to the problems. However as a fully trained individual, it is your responsibility to look closely, find the issues and analyze their solutions. In your looking, the very best thing that can happen is that you will become informed, and the College and the specialty will be better for it.

Your information shouldn't come solely from College sources. There must be ways to ensure that the corporate history of the organization is accurately put forth; ways to generate and discuss alternative views; and finally, ways that the total membership can be included in the debate in order that their singular voices will be heard.

No issues are before us this year. Please try to understand them and after forming your own viewpoints, participate in the "process." Call and talk to your Section's delegates. Be sure to write and visit with the College's officers and board members (all listed in the College's Membership Directory.) Write letters, send faxes, and make the organization what you want it to be. Don't just go to the scientific session, but go to the Sections meeting also. Don't be passive--participate!

Issue I.

The American College of Prosthodontists wants to promote prosthodontics.

To review, this is what the College proposes: A Chicago firm, Public Communications Inc., will develop a marketing theme for the ACP to promote prosthodontics. The firm will do market research in order to define "the ACP's unique propositions to the public and professional audiences." Their answers will become "the most critical building block on which all of our (the ACP's) patient education and referral programs will be built." A second and third phase of their contract will be to develop materials that will put the ACP message in the public eye.

Some comments: First and foremost, the College and its board, not a commercial firm, should identify and reiterate the ACP message. As stated most clearly in the bylaws, the College is operated to foster interest in the specialty of prosthodontics (Bylaws Article III. Corporate Aim); and its members shall be only those individuals who have completed an advanced dental education program in prosthodontics, as well as those individuals who are in training in the same programs (Bylaws Article V. Membership.) Knowing that, the College should contract with Public Communications Inc. (or any firm they so choose) to use its resources to promote the College's corporate aim. For certain, the message and the PCI public awareness program should relate to the specialty of prosthodontics, insuring that the specialty of prosthodontics is promoted! Look at the May ACP Messenger. The word "specialty" isn't seen anywhere in the College's presentation of the PCI program! Is this the old here-we-go-again approach -- we must not disturb our fellow general dentists by promoting ourselves as specialists?

A letter received recently in response to ProsStars' statements has put it so well:

“With regard to generalists vs specialist prosthodontists treating edentulism I have to think back 25 years! What resounds in my skull are the comments made by the men who were my teachers and who for the most part were retired military. I remember being told how to treat the generalist. How to revere the generalist. How to be his friend. How to play down the level of education that you had received. How to help him treatment plan his edentulous patients (in hopes that he might then conclude that we ought to be the treatment provider in the first place.)

“Now years later, Prosthodontics is wondering why the generalists feel so competent with prosthodontic dental care. Haven’t we brought this upon ourselves?

“I personally quickly found out 25 years ago that the generalists were not out there to feed me the patients in need of prosthodontic dental care. In fact, outrageous as it may seem, there were occasions where patients asked generalists if there was a prosthodontist in the area and the patients were told no. I don't think that we should be wondering so much about why Prosthodontics as a specialty is on the brink of extinction. We did it to ourselves!!! We cow towed to the generalist and, whadayaknow, the generalists concluded that they could do it just as well!!!

“My motto - sit back and enjoy life, always do the best you can for your patients and they will tell others about you kindness and good work and the others will find their way to your door. It’s a slow trickle compared to what it could be but it’s all there is in this world of empowered generalists!!!”

Well, isn’t that telling it like it is? And it comes from a well respected and successful specialist in prosthodontics! It clearly says that promoting prosthodontics (the discipline) will help nothing. Instead we must make our special training and skills and our higher levels of education recognizable -- to those in the profession and its specialties, and to the lay public. It becomes clear that the way to insure a referral base is to be sure that you are able to provide a treatment to the severely disabled patient that others with lesser training cannot provide; and that the treatment is specifically suited to the patient’s very unique problems, it has been scientifically proven, and it (the special treatment) is absolutely necessary for the patient’s return to a near normal function.

We must use our hard earned dollars to promote the specialty of prosthodontics, not prosthodontics! We must tell our specialty representatives, the officers and board and the delegates to the House of the American College of Prosthodontists that we will not stand for anything less. We must give them this message in numbers they will understand and in words that clearly convey the importance we put on specialty recognition.

Issue II.

The American College of Prosthodontists wants steady growth in membership numbers.

This is a good goal, but increasing the membership base for the wrong reasons is bad. Some few of the College’s officers and board members have viewed minor fluctuations in total membership numbers as downward trends. They have found their “new problem.” This is a poor interpretation of inadequate statistics and it becomes a poor reason to propose widened membership categories. There are only so many trained prosthodontists out there (3,171 according the ADA statistics.) If the College is steadily holding over 80% of that number and it is, that’s creditable. A few misguided officers and board members shouldn’t make a problem where there isn’t one. Turbulence in membership will occur. A plateau in membership numbers may occur, but a plateau is not a statistically documented downward trend.

The membership categories of the College have remained stable, with very minor changes, since their inception. They are of course: Fellows, Members, Student Members, Life Fellows/Members and Honorary Members. These categories, with the exception of Honorary Members, are all based on educational credentials as mentioned above and as verified in Bylaws Article V, Section 5.3. Members. Now our College is considering for membership:

- dentists who are “non-prosthodontists” *
- laboratory “technicians” *
- allied health professionals *.

Three things are overwhelmingly important about this proposal. They are: 1) the proposal has been made before, it was debated and was put aside; 2) the sole aim of the founders was directed to the recognition, educational improvement, and enhancement of clinical and research activities of the specialty of prosthodontics; and 3) reasons given for wanting to expand the membership base are contrary to the organization’s aim. To amplify:

■ Broadened membership categories have previously been proposed.

In the days when the Federation of Prosthodontics Organizations was reluctant to yield control of the American Board of Prosthodontics to the College, some members of the College suggested that a way to broaden support for the College was to open its membership to the discipline. The justifications for the College to be the Board’s sponsor were so strong that this proposal was seen as an unnecessary and underhanded route to solving the problem. Through debate, wisdom prevailed and the proposal was put aside without vote.

■ The sole aim of the eleven founders of the College was the establishment of a organization dedicated and related to the specialty of prosthodontics.

Strong prosthodontic organizations existed in the 1950s and 60s and even before. The problem was that their memberships were selective and not based on educational credentials. Commonly, trained and boarded prosthodontists could not gain entry into any of these organizations. Naturally the discipline related organizations wanted to retain their power bases. As the numbers of specialty trained people grew, there was no singular organizational voice for the specialty. Hence, in 1970 there was a critical need for the American College of Prosthodontists with its membership based solely on the completion of an advanced education program in prosthodontics.

The need for the specialty to have a clear voice in dentistry hasn’t changed! A book could be written justifying the need for organizations speaking for and representing specialties in dentistry. In no way does that diminish the importance of general dentists carrying out prosthodontic procedures as they are able; and in no way does that interfere with the continuing education of the generalist, or the need for the generalist to have their own voice in any discipline of dentistry. In fact, a strong specialty strengthens a strong discipline. In addition, specialty issues and concerns, when correctly addressed, will greatly benefit the profession in general and the public at large.

*All poor terms which were quoted from the ACP Messenger.

■ Why expand the membership base?

Leaders of the College say "New membership categories may significantly increase the strength and voice of our organization." One board member of the College believes that opening membership to non-prosthodontists [a poor term] will be a positive recruiting incentive for the training programs. He believes these "new" members will want to become fully trained. A final reason given by the College administrators is that "Diverse interest groups throughout the dental community would like to have one point of contact within the prosthodontic community on issues and concerns relative to prosthodontics and the discipline." In discussion of these viewpoints let it be said that:

- Membership in prosthodontic organizations and some of the allied organizations is never an "either / or" proposition. Some memberships are driven by geographic interests (the Northeastern Gnathologic Society, the Southeastern Academy of Prosthodontics, the Pacific Coast Society of Prosthodontists, and many other fine strong organizations.) Some are driven by treatment and training related interests (the American Academy of Fixed Prosthodontics, the American Academy of Maxillofacial Prosthetics, the American Academy of Esthetic Dentistry for examples.) Lastly, some few individuals want to establish themselves by multiple memberships in as many organizations as possible. If given the opportunity for ACP membership, new members coming from other organizations, usually discipline related, probably won't drop their previous existing memberships. Multiple membership members haven't in the past made the College stronger! In fact, those clear voices we need to speak for the specialty, to address specialty issues, to support advanced training and to identify the worth of specialty treatments have been and in the future will be dampened and diluted by members with confused allegiances.

- Yes, there definitely is a problem with advanced training recruitment. A future issue of *ProsStars* will address this problem in depth. Now it is sufficient to say that "other categories of members" will probably not rush to training, for the same reasons they didn't rush to training in the first place. Solutions, yes; membership disguised as a recruitment tool, no. Maybe it's time for the College to sponsor a Symposium in Advanced Training Recruitment -- or is that an idea that may lead to solutions to the problem?

- Let the Forum work! The one-voice concept was tried. The College spent many years and much money trying to get away from it. To remake the College in the one-voice image of the past will prove to be a very damaging proposition. First comes membership, then board membership in the College becomes the goal, and most certainly the want to become an officer follows. Remember, there is no education in the second kick of a mule!

Summary

So where are we? These views have nothing to do with a stand against the general dentist, generalists with heavy interests in prosthodontics, laboratory technologists or auxiliaries allied to dentistry! They are respected! It is not an us against them situation. But as said before, all specialists (those who are not members of the College and the present membership of the College) should stand up for every aspect of strengthening the specialty. No question that membership in the College is the best way to support that goal! We should follow the dictates and origins of the College, which were well laid by its founders. For a change, let's spend our time and money on telling the public, the insurance companies, the dental schools and the dental profession what our extra training and our extra skills really can accomplish. Seize this one opportunity to speak up and out for the specialty! There is nothing wrong with being a specialist and there is nothing wrong with having an organization that is purely in support of specialty goals and objectives!