



Commitment and Passion A “Romance Novel”? Far from it!

The words commitment and passion provide pavement for the road to fulfillment and success in the specialty of prosthodontics.

Why dentistry?

Way back when we were searching for a life’s vocation we knew little of the particulars and peculiarities of dentistry. Probably few of us considered the detailed hard work that dentistry really is. Rather, we speculated on one profession among many that would be clean, people oriented, lucrative, self-controlled, medically related, artistic, scientific, with controlling streak of independence. We later surmised that a solo practice could be established with a reasonable financial outlay. At the same time we thought of the dentists we knew and appointments we remembered and had a positive image of ourselves working in the same circumstance. The major drawback was that we were going to be “working” in somebody’s mouth.

Other influences might have come into play as well. Some had a father or brother or other close relative in dentistry and their trials and tribulations did not detract from the good things that dentistry was showing and the good examples these relatives provided. A stronger influence might have been a job, part or full time, that was tedious, dirty, boring, or influenced by some inept manager along the way. There had to be a better way to “make a living” and dentistry, mainly because it seemed to be self-controlling became a clear choice when compared to vocations in the corporate world, law, medicine, teaching, or in small business. A final influence seen by some in their choice of dentistry was that it served others very personally in a positive way—it provided a cause beyond oneself. This influence may have overridden all others in the final analysis.

Why specialize in prosthodontics?

Wrong question—absolutely the wrong question! The search for answers to the real question of what drives graduated dentists away from the specialty of prosthodontics is a search that has been well discussed and well researched, but the answers have always been to a negative question—why is not prosthodontics a desirable specialty?

There is always a companion question also—why endodontics; why orthodontics; why oral surgery; and why not prosthodontics? The American College of Prosthodontics (ACP) gave it a cursory try when their president, Nancy Arbree, said, “we need to learn ways to communicate our skills as positively as we can to ensure our future.” Of course, we really cannot communicate “skills” and maybe the ultimate goal is something other than ensuring our future. Anyway, as she said, it is about time the ACP “learned!”

In the past ten years, the *ProsStars Newsletter* is replete with positions stating the benefits of becoming specialized in prosthodontics, positions which have always put the specialty in a positive light. For review, read again:

- Prosthodontics: A Specialty or Just Extra Training, Vol. 2, No. 3, July 1996
- Son of Prosthodontics: A Specialty of Just “Extra” Training, Vol. 2, No. 4, Oct 1996
- We Don’t Get No Respect, Vol. 3, No. 2, April 1997
- The Issues of Autumn. 1. The American College of Prosthodontics Wants to Promote Prosthodontics, Vol. 3, No. 4, Oct 1997
- Advanced Education in Prosthodontics, Vol. 4, No. 1, Jan 1998
- Competition 101, Vol. 4, No. 2, April 1998
- The Other End of the Spectrum and The Corporate Mission: Purpose, Aims, Goals, and Objectives, Vol. 4, No. 3, July 1998
- We Have Met the Future, and It Is Us, Vol. 4, No 4., Oct 1998
- A Letter to All Non-Boarded Trained Prosthodontists, Vol. 5, No. 1, Jan 1999
- Mentoring, Vol. 5, No. 3, July 1999
- Looking Ahead III, Vol. 6, No. 2, April 2000
- Graduate Program Recruitment, It’s Not the Problem, It’s the Process Vol. 6, No. 3 July 2000
- A Review and History of the ACP, Vol. 6, No. 4, Oct 2000
- Achievement, Meetings, and Award Ceremonies, Vol. 8, No. 2, April 2002
- Does History Take Us Where We Are Going?, Vol. 8, No. 3, July 2002
- “Our” Specialty, Vol. 9, No. 4, Oct 2003

Now, look through and review any and all *ACP Messengers* and any and all articles and editorials in the *Journal of Prosthodontics* and you will see nothing confirming why the specialty of prosthodontics is in any way different from general dentistry; why it is advantageous to train in it; why it improves a dentist’s financial standing; why the specialist can carry out treatments that the general dentist cannot; and why every minute spent additionally training in prosthodontics improves the feeling of self accomplishment immeasurably. The way to communicate the advantages of specializing in prosthodontics is to communicate them! In doing that, fill each article with specifics of what the specialist can do that the generalist cannot. Define precisely in undergraduate teaching what the generalist is expected to do, but also what the generalist is expected to refer to the specialist. Teach what the differences in skill levels and competencies are between the generalist and the specialist and teach how one achieves those

differences. If speaking to a group of generalists emphasize why the specialist must be involved in certain levels of treatment. If we are “the chosen few with special skills,” we had better say so at every opportunity in writing and in every presentation made before generalists and especially when appearing before other specialty organizations. Let’s be frank—these opportunities just are not being met.

The best example of an unmet opportunity to identify the differences between the trained prosthodontist and the generalist is clearly seen in the recently published “Prosthodontic Specialty Definition.” The official definition determined by the ACP is:

“Prosthodontics is the dental specialty pertaining to the diagnosis, treatment planning, rehabilitation and maintenance of the oral function, comfort, appearance and health of patients with clinical conditions associated with missing or deficient teeth, and/or maxillofacial tissues using biocompatible substitutes.”

This definition, the result of over two years of work, does nothing to denote a difference between a specialist and a generalist. Does a definition of the specialty that shows no higher levels of skill or competency make one decide to invest three more years of training to do things that most dentists can do now? Let’s be clear about it—specialists do different things for different reasons because of different patient needs. A better definition is:

“The specialist in prosthodontics does not do the same treatments that the general dentist does.”

For each dollar spent, the patient will receive a uniquely different diagnosis, treatment plan, and achievement of outcome. The results will be an unnoticeable, pleasing natural appearance, a function that is totally physiologic, and a measurable diminution of future breakdown, unless caused by disease or gross patient neglect. Specialists in prosthodontics have added these values for every dollar spent.

Specialists in prosthodontics can and will serve the needs of the patient with missing oral tissues with singularly special techniques. Additionally, the specialist in prosthodontics will meet the needs of patients with missing tissues that cannot be restored further by surgery with skills and materials that have been developed through research and training beyond that of a general dentist. No one else is trained or has the skills to achieve the same results.

When the specialist in prosthodontics is not consulted or given the opportunity to meet these special needs, the public at large suffers.”

Commitment

Is specialty training and specialty practice hard work? YES in capital letters! But that shouldn’t be a deterrent. The rewards are well worth it. Specialty practice is terribly challenging because of the problems presented. The challenges are all different and all hold new interests. The work

is never boring. Can the same be said for endodontics or for orthodontics? Prosthodontics is constructive, not destructive; and the work enhances the patient's body image and contributes to normal function. Can the same be said for oral surgery? Prosthodontics will provide a life stream income far above the general dentist's and comparable to that of other dental specialties. Are there means to finance three years of training? Yes. It takes making the commitment to enter the specialty; and like all things worthwhile in life, the price paid, the loans gotten, the grants received will amply return accomplishment and financial gain in the long run.

Passion

Finally, a commitment without passion is no commitment at all! The passion we want is a heartfelt, deep and authentic, excitement about life and work. It is noticeable, catching, inspiring, and is a quality wanted after it is seen. A passion for the specialty of prosthodontics sells it. It can't be faked. It can't be taught and it can't be learned. But when you see it you know it spells out a dedicated care for others that is far beyond that normally given or achieved—be they students, peers, patients, those above and those below, family and/or organizations.

In the long run, what we specialists have to know and show is a deep commitment to work in and sell our specialty, prosthodontics, and work in it and sell it with an infectious passion and enjoyment that shows all of the great things about it. Things that those dentists and dental students looking to specialize can't avoid seeing and wanting and having and getting, no matter what the cost!

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Even though copyrighted, this essay is intended for copy and use in recruitment with dental students, in advanced programs for guidance and inspiration and in communications between prosthodontic organizations and the other specialties in dentistry. Never let it be said that "we have to learn ways" to sell our specialty. Our specialty sells itself!