Editorial Dentistry in the Communication Age

We must acknowledge that the nature of health care in the communication age has changed radically and dramatically over the past few decades. With the plethora of ways to find information through multiple media sources, dentistry needs to take control of its truth and its message.

In a profession that spends countless hours educating itself, and in which it is indeed a requirement to maintain proficiency, the question can be asked: Why have we devoted so little time to educating our patients in a substantive way about oral health, treatment, and therapies we provide—and certainly to the level that allows them to feel comfortable and full partners in their health care?

In her book Oral Psychophysiology—Stress, Pain, and Behavior in Dental Care,¹ Dr Ilana Eli described communication as "the 'magic' word by which we often explain our success, or lack of it, in dealing with interpersonal problems." Dr Sam Dworkin in 1968 defined three critical stages essential for effective communication: attention, comprehension, and acceptance.² For effective communication to occur, the message has to be received—seen, heard, or felt—understood, and accepted by the listener. The dental situation has not generally favored mutual communication, yet communication is a two-way street. This is especially true today, with so many educational/informational opportunities available to our patients—the public at large.

The extensive social science literature in dentistry from the 1960s to the new millennium is replete with research not acted upon; in short, not much has changed. Minimal course time is spent in dental curricula on communication skills or behavior change, yet this is at the heart of what we transact daily. Translated into the simple vagaries of running busy practices and schedules, most would agree that there is seldom sufficient time to provide information to patients in words they can understand, and that are necessary for their comfort and trust—the essence of successful communication.

Yet it is possible to shape and change behavior through communication. As Bandura described in his *Social Learning Theory*,³ "Most human behavior is learned observationally through modeling: from observing others one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action." In short, behavior is conditioned by learning and learning through communication.

Fortunately, communication tools do exist nowadays to help practitioners provide accurate evidence-based information on dentistry and oral health, or at least based on current clinical research and practice for our patients, the public, that also show dentistry in its best light. These include print magazines and pamphlets, indepth web content, instructive videos, and more. When selecting among competing patient-education sources, one needs to evaluate communication potential and hence effectiveness in the following areas:

- Attention: The over-arching goal must be to provide an innovative way to educate the public across all current and emerging media so that it is easily accessible and available.
- Comprehension: By design, all aspects of dentistry and oral health, and related general health issues, must be included with elements of the treatment experience. Information provided should be of high quality, visually appealing, entertaining, and easy to understand. It should also describe the social and psychologic impact of dentistry and oral health on both the face and general health.
- Acceptance: Material should have high-source credibility coming from experts in their fields (recognized and acknowledged by the profession), and, most importantly, unbiased by sales. Thus, it will provide information that consumers can trust.

By taking the best of what is known from the fields of education and how the brain learns,⁴ we can push the envelope for change to increase awareness and the demand for care in a professional way that emphasizes education over promotion. Innovative communication will allow us to honor our patients as full partners in their health care endeavors. What better way to give something back to a profession that has given us so much?

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