

DENIAL
Roger Matthews

Always a good word to begin the year with – no more affirmative New Year’s resolutions from me! Actually there is a good dental point here, despite my inspiration coming from a recent article in the *British Medical Journal*.

The authors point out that the growth in myths and legends has become ever stronger in recent years, and while at first thought the concept of ‘denial’ might bring to mind the context of World War 2, it’s also highly prevalent in health care.

In the dental field, one has only to think of the widespread scaremongering around amalgam usage, or the significant campaigns (extending to august Parliamentary speeches) on the subject of anti-fluoridation, to recognise that health, and public health, is ill-served by this spreading problem.

The article goes on to highlight three recent aetiological factors in this phenomenon: the growth of ‘web 2.0’ which has turned an information–exchange medium of vast power into, effectively, a soap-box for anyone with the ability to write a blog; the growth of over-active media, which love to set controversy raging in the name of viewing or readership figures; and finally – though to a lesser extent in dentistry – the influence of major corporate interests.

I’ve long argued that the professions are uniquely ill-equipped by training and selection to deal with this problem. There is still very little in the undergraduate curriculum about communication. While human rights and patient autonomy are championed – rightly – on behalf of patients, the ability to put an informed professional viewpoint and to uphold scientific knowledge, in lay terms and with empathy is less often advocated.

Denialists will use a number of means to emphasise the righteousness of their cause. Conspiracy theory is a good start, on the basis that professionals or scientists are accused of banding together to support their established theories. As we know, the use of thorough peer and systematic review is essential to make sure that sound and logical scientific principles are followed.

Then there is the supposed expert, preferably with a good number of initials after their name, who will stand up for the public and decry the accumulated knowledge of those who have spent a lifetime developing their skills.

Within any substantial body of evidence, we all know that there will be occasional random or outlying results which do not detract from the main body of conclusions. These can be pounced on as 'proof' that scientists themselves are uncertain.

Even better if an entire paper – such as that suggesting that fluoridation causes an increase in mutagenic disease – can be quoted, however flawed the methodology or statistics.

Finally – and this is something in which the media excel – there is the concept that in science there is only a 'right' or 'wrong' answer and that no degree of probability or middle ground can exist. How often are we proudly told that '10 per cent of a population' demonstrates a particular adverse symptom, cheerfully omitting the fact that 90% are symptom free?

One highlight of this paper is that recent cognitive research demonstrates, through neurological analysis, that our brains do not, by nature, work logically. We're inclined to suppress the recognition of contradictory messages given by people we trust, while we seize upon contradictions from people we do not.

One cause of this is probably the reduced trust that has been shown in scientists in general, and professionals in particular over the past forty years. In this regard, increased regulation is seen by the public as necessary and proportionate as a means of keeping these 'vested interests' in check.

One solution is concealed in that same phenomenon. Surveys have shown that dentists, as a group are distrusted, but most regular patients will significantly accept their own dentist. This is not surprising, since dental attendance is voluntary and is evidence of profound trust.

So it's in our own hands to communicate effectively with that two-thirds of the adult population who attend their dentists on a regular basis. There are plenty of websites which will argue against the use of fluoride toothpaste, and a good number who believe endodontics is a dangerous undertaking. But while there will always be a few members of our profession who stand outside the scientific mainstream, the 'silent majority' have a significant role to play.

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Notes to Editors:

Roger Matthews MA BDS DGD (UK) FDSRCS(Edin) - Chief Dental Officer

Roger joined Denplan in 1995 having spent 20 years working in general dental practice and as a dento-legal advisor for the Medical Defence Union. He oversees dental advice to the company and its links with professional bodies, and is responsible for Denplan's professional services.

ⁱ How the growth of denialism undermines public health (2010) McKee M, Diethelm P. *Br Med J* **341**: 1309-1312.