Dear Dr. Alvares:

In his article “The Future of Allied Dental Education: Creating a Professional Team,” Nash wrote: “Our profession and its environment are rapidly changing, as is all of society. As leaders in our profession we must forge new understandings of the future, a new vision if you will, of how as a profession we can together better meet the needs of the society we serve.”

Although promoted for years by the World Health Organization, the idea of the “dental team” remains a concept rather than a precise term. It comprises the various providers of dental care (dentists, dental hygienists, dental laboratory technicians, and dental assistants) who have different roles, functions, and periods of training and work together to treat patients.

Around the globe, there are about 252,000 dental technicians. As compared to data from 1990, the total number of schools for technicians in most countries remained steady or even decreased. According to the American Dental Association’s Commission on Dental Accreditation, there are currently twenty-eight dental laboratory technology programs in the United States. From 1994-95 to 1998-99, first-year enrollment in dental technology programs declined by 31 percent, as opposed to a 9.5 percent increase in dental hygiene programs.

In an attempt to envision the future of allied dental education, the American Dental Education Association (ADEA) recently published recommendations regarding dental hygiene education as well as dental laboratory technology and dental assisting education. Its first and most important theme was “establishing higher levels of academic credentials for the practice of allied education, with strong emphasis on degree programs.”

This unequivocal ADEA declaration should be judged in light of the worldwide social trend of emphasis in academics, the advanced dental technology industry, and the academic degree program initiatives in the United States, Sweden, the United Kingdom, South Africa, New Zealand, and Australia.

At the end of 2001, after the presentation of an initial report regarding the establishment of a baccalaureate degree in dental technology in Israel, I was asked by one of the leading academic institutions in Israel to further explore the rationale of establishing a dental technology degree program since many professions, among them health professions (nursing, medical laboratory technology, and health promotion), have been upgraded to a degree level. The report was completed in 2002, and the issue is currently undergoing deliberation.

The dental profession in Israel has gone through significant changes since the late 1980s. Dentists are now facing difficult times (dentist to population ratio of 1:650), and many have abandoned the profession after long and demanding years of education. Although technological developments in various dental fields, such as dental materials, dental implants, and dental lasers, have left their mark on the Israeli dental market, the reported underemployment and income difficulties of many dentists affect the entire chain of the dental team. The future of academic dental institutions as well as dental technology training institutions is unclear. Nevertheless, change is expected in ten to fifteen years.

In light of the present situation, and although a vision might be viewed as an illusion, a profound change in the philosophy of education of the dental technician, dental hygienist, and dental assistant (following the ADEA recommendations) could have an impact on professional and academic manpower well into the twenty-first century.

Higher educational level, the opportunity to shape the profession’s future, available resources utilization, and financial benefits could all serve as potential incentives for an academic institution to upgrade its dental technology program to a degree level. Undoubtedly, this change will also affect professional licensing, the financial status of service suppliers, dental public dental services, and, most importantly, the oral health status of the population.

It seems appropriate to conclude this letter with another quotation from Nash’s article: “We must not allow the political mistakes of two decades ago to be...
repeated. . . Only through transforming our educational settings, our curricula, and the attitude of our faculty and students can we hope to create a team of the future—and for the future—a team of professionals, committed to helping society achieve the good of oral health it needs, wants, and deserves.”

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