

ENGAGING PATIENTLY

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The BDJ Upfront section includes editorials, letters, news, book reviews and interviews.

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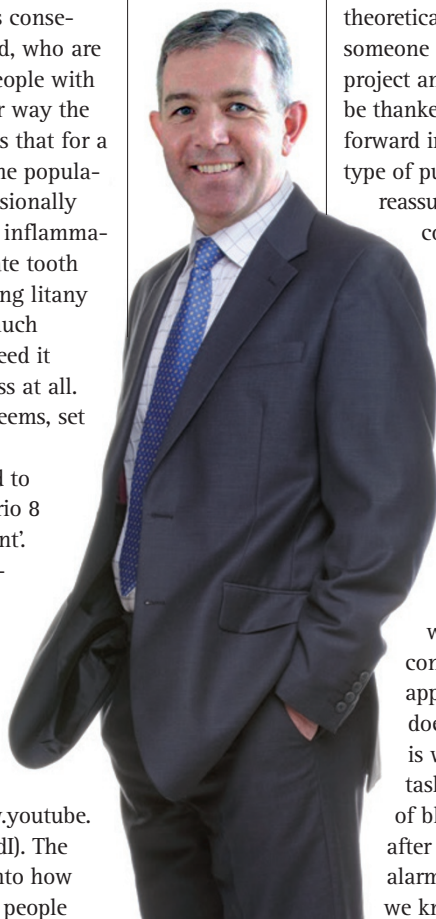
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The recent EuroPerio 8 Conference was, by a number of measures, a huge success. To be surrounded by a swirling mass of 10,000 periodontists is quite an experience. Hosted by the British Periodontal Society on behalf of the European Federation of Periodontology (EFP), London's ExCeL Centre was swamped with delegates not only from Europe but from over 100 countries. A truly great achievement for which all involved are to be commended.

Some four years ago I wrote an editorial entitled 'Periodontal disease – who cares?'.¹ Like many titles I choose it has a double-sided interpretation. On the one hand, does anybody actually care about periodontal disease and its consequences; on the other hand, who are the people who care for people with periodontal disease? Either way the thrust of my argument was that for a very large percentage of the population, the sometimes professionally expressed Armageddon of inflammation, pocketing and ultimate tooth loss was a slightly confusing litany that didn't seem to hold much day-to-day validity, if indeed it touched their consciousness at all. The notion of this did, it seems, set some balls rolling.

I was therefore delighted to attend a session at EuroPerio 8 entitled 'Patient engagement'. Whether or not as a consequence of the editorial I cannot say, and certainly I take no credit for it but the session centred around the premiere screening of a new film entitled 'The Sound of Periodontitis' (<https://www.youtube.com/watch?v=CobRJQz30dlI>). The film offers fresh insights into how periodontal disease affects people

'How many of us actually know people who have lost all their teeth to periodontal disease?'



and how these insights might be used to improve communication with patients and in lobbying to promote the prioritisation of periodontal health. It follows the progress of three patients who have each been diagnosed with a severe periodontal condition and how this affects their lives and indeed their outlooks on life. The difficulties in making such a film, laudably financed by the EFP itself, should not be underestimated and those behind its conception, research and execution are to be congratulated. It is definitely a step in the right direction and most importantly it begins to address the issue of patient identification of periodontal disease as a real entity rather than a theoretical concept that happens to someone else. The team behind the project and the three patients should be thanked for taking important steps forward in giving credence to this type of public involvement. Very reassuringly the session at the conference was full and a second overflow room was set up to allow even more delegates to participate.

However, what we also need to be thinking about is how to engage people, our patients, at a much earlier stage than those depicted in the film who were already suffering the ravages of disease. The problem, as with all such situations, is convincing the public that the apparent absence of symptoms does not mean that everything is well. And it is a difficult task. For most of us the signs of blood in the bathroom basin after brushing our teeth cause alarm bells to ring; because we know what that may mean.

To one of the patients in the film it merely meant that he was brushing too hard. We have come to accept in recent years that the progression of gingivitis to periodontitis is neither linear, nor guaranteed, nor indeed true at all in some people. Around the world on a fairly consistent basis only 10-15% of any given population exhibit severe periodontal breakdown and the possibility is that this has more to do with auto-immune response than with plaque *per se*.

While it has taken a number of years, much research and considerable head scratching for us to reach this point, the anecdotal truth has not been overlooked by the population at large. How many of 'them', come to that, how many if 'us' actually know people who have lost all their teeth through periodontal disease? Probably very few, which consequently gives a lie to the narrative. But in order to explain this to patients and to the public in general requires a long and detailed explanation, the like of which few of us are motivated to give, fewer still to listen to and almost none are prepared to pay for.

Periodontology is not alone in this. The story on diet is just as complex, arguably more so. The range of healthy foods that are now labelled unhealthy for teeth grows by the day. For example the confusion over whether the acid and (fruit) sugar in fruit is more or less harmful in terms of erosion and caries, make any recommendations seemingly meaningless, or at least contradictory and undervalued. There is a way through it but it is time consuming and therefore expensive. We need to be prepared to engage patients but also to patiently engage.

1. Hancocks S. Periodontal disease – who cares? *Br Dent J* 2011; 210: 505.

DOI: 10.1038/sj.bdj.2015.442