

1968 and all that

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EDITORIAL

There has been a slightly unusual interest recently in the media about the happenings in the year 1968. Unusual only in the sense that one expects 50th anniversaries to be marked, and round numbers above that, sixtieths and so forth but less so fortieths. Although, on reflection, attaining the age of 40 is an appropriately celebrated rite of passage and given that it roughly represents the average age of members of our profession perhaps it would be churlish not to recognise it too.

1968 was a year full of ups and downs on the international stage. Then, as now, the world was fascinated by the outcome of a US Presidential election – one Richard M. Nixon was the victor. It was an Olympic year too, Mexico being the host nation. Tragedy struck the Kennedy family once again with the assassination of Robert; we lost the comic talents of Tony Hancock; the student barricades were up in Paris; Rod Laver of Australia won the first 'open' Wimbledon tennis tournament and the mould-breaking musical *Hair* outraged society and thrilled audiences with its nudity. And there was a survey.

Doubtless at the time almost as unnoticed as it is tucked away at the end of the previous paragraph, the first Adult Dental Health Survey (ADHS) in the UK took place. But if it passed in the last sixties as being merely an interesting exercise, or an intriguing piece of epidemiological research then its power, significance and value has arrested every aspect of dentistry in the UK, and elsewhere since.

NO SURVEY IN 2008

We have to thank the farsighted people whose vision it was to start systematically recording the nation's oral health, since the succession of surveys that they set in motion has been of the very greatest value to us all. The surveys have been repeated each ten years since then in 1978, 1988, 1998 and ...2008 – sorry, no! It seems that some glitch has been upon us and the matter has been under discussion for some time.

I am reliably informed that the Department of Health has very recently confirmed that 'resources are available' for the commissioning of an ADHS from the Information Centre (IC) (a government department). The IC is currently leading some methodological design work to try and establish cost effective ways of collecting the required data but it will now be conducted in 2009 at the earliest.

The value of the data as a continuum of the forty years since

1968 is inestimable. It provides us all with numbers on how well, or badly, we are doing against targets of tooth loss, restoration, periodontal disease and a whole raft of associated social and epidemiological data that aids planning, enables the allocation of resources and facilitates the ability to predict trends and anticipate changes into the future.

It is not only professional insiders who find the wealth of information so valuable. On numerous occasions when I and many of us in dentistry have been asked to comment on oral health in the UK, be it by individuals, companies, media researchers, interviewers, patients and many others, the reaction to the detail of the information, and equally pleasingly the broadly positive upward improvement, is immense. Without exception people are impressed with the knowledge we have about the outcomes of our own work and their oral health. We simply cannot let this opportunity slip and allow the inevitable gap in our knowledge to go unrecorded.

Arguably, although tenuously, the situation might not be quite so calamitous if we had continued to collect data as comprehensively as the Dental Practice Board was mandated to do in the days before the 'new contract'. As I have noted previously in this column,¹ the loss of ongoing data is a significantly retrograde step, irrespective of the detail of the contract itself.

Who can possibly predict what the oral health of the nation might be forty years hence? Will caries still exist? Will periodontal disease have been eradicated? Will the dental profession exist? It is precisely because we can't know the answers that we need regular markers and measures to help us make intelligent estimates. What a desperate sadness it will be if in 2048 our descendants, the forty year olds of today's forty year olds, run their fingers along the shelf of bound tomes, or maybe their laser beam of enquiry along an axis of knowledge, and observe a jump from 1998 to 2018 with the consequent gap in knowledge. Even if matters are put in hand immediately the entry will read 2009, and probably 2010 – it must not be left to chance, or to apathy, or to the dereliction of government decision making, we *have* to have another UK Adult Dental Health Survey – and soon.

1. Hancocks S. Data day, (editorial). *Br Dent J* 2006; **200**: 301. doi: 10.1038/sj.bdj.4813474

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