It's a numbers game

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As I sit down to write this, *Twitter* tells me today is World Statistics Day. It also tells me that 48% of statisticians say the general public believe every statistic they read, with 54% stating those statisticians are incorrect.

This got me thinking about how much of general life is driven by statistics. You have a section of people driven by the number of social media followers they have, marketing reports that have so many statistics you don't actually know where to start. You'd be hard-pressed to give me an example of someone in a role that did not have a target to meet. In dentistry we have number of UDAs completed (bad?), GA lists (bad), patient lists (good) and the number of patients desperate to see a dentist (bad). It would clearly be remiss of me not to mention the incredible number of datasets on COVID-19 – statistics that are interpreted by various individuals however they wish to do so, for good or bad (a dissertation topic in its own right).

And, as this is November's edition, it would also be remiss of me not to highlight the documented continued rise in mouth cancer cases.

In this issue, Chief Executive of the Oral Health Foundation, Dr Nigel Carter OBE, points to the indisputable fact that once again, mouth cancer cases are trending in the wrong direction to the tune of 8,722 confirmed cases and 2,702 deaths. In a world where

numbers are king, these should give us cause for concern, for while these are the latest statistics on incidence and mortality, the way they are collected means they relate to a non-COVID-19 world. One where if a patient had an ulcer, an unusual lump or swelling, a red and white patch in their mouth they weren't happy with, at least they had the option of trundling to the pharmacist to ask for *Bonjela* before being referred. It was a world where patients did not have to weigh up the risks of acquiring an infection or not before visiting their GP or the dentist if they had a health problem. You only need to look at the statistics highlighting delays in operations for cancer patients, public attitudes to risk and visiting their GP or dentist to realise in the COVID-19 world we find ourselves in, the next datasets have the potential to be truly terrifying.

Or do they?

After all, if patients aren't having their conditions diagnosed because they're not in the clinic, could it be possible that the incidence rate drops? You can't identify a problem you aren't presented with after all. Likewise mortality rates – could they also drop, with deaths being attributed to COVID-19 rather than mouth cancer? In truth, either answer attributable would give me cause for concern. If it's a yes, incidence and mortality data show a decrease, the above caveat applies, knowing fine well there are patients right now going about their daily lives either unaware or unable to do anything about the disease. If it's a no, they haven't decreased, someone somewhere will herald a breakthrough in the reversal of the figures against a backdrop of totally incomparable data.

As such, dentistry finds itself – not for the first or last time – in a lose/lose situation.

I keep reading that we should be worried about a spike in mouth cancer cases over lockdown without any data on increased tobacco use, increased alcohol consumption, poorer dietary habits, greater exposure to sunlight and HPV to back this up, only to delve into the article to discover it's about *undiagnosed* cases. These data may come out in time to show cases also increased during the pandemic, but I don't need to be a statistician to know an increase in the number of actual cases is not the same as an increase in the number of undetected cases, the latter of which *are* a real concern. Official data on activity seen by the BDA indicates treatments delivered by NHS dental services in England are at a quarter of pre-COVID-19 levels, and have only begun to inch above typical demand for urgent care, which is currently receiving priority. Over 14.5 million fewer treatments have been delivered in 2020 compared to the same period last year, and we will simply never know how many of those were appointments that could have saved someone's life.

In this world we find ourselves operating in, it's important to remember the only constant is change. To mark Mouth Cancer Action Month, this campaign, perhaps more than ever before, serves as a timely reminder that the profession can bring about that change. Not a change in a statistic, but a change in a life. It's also a timely reminder that in our current world, data are not simply followers on *Instagram* or the bottom line or an argument not to follow government restrictions on COVID-19, data are deaths too.

Perhaps it isn't – or shouldn't be – such a numbers game after all. ♦

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