EDITORIAL

Global oral health; eggs and stones

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Global oral health (GOH) has recently received welcome, and perhaps hitherto unexpected, attention from a no lesser source than the internationally renowned and campaigning medical journal *The Lancet* which has published a series of two papers, together with editorial and opinion articles.¹

Co-ordinated by Professor Richard Watt of University College London, he and an impressive crew of co-authors from around the world should be congratulated in rising to this important initiative. The content argues that about 3.5 billion people are affected by oral diseases but that the conditions are preventable if the appropriate policy responses are adopted. Stemming from this is a call for a radical reform of dental care systems which are seen to be treatment-dominated, high-technology and regarded as profit driven and focussed on consumerism. Thus the entreaty from *The Lancet* series, and the launch event held to promote it, is to refashion oral care by public health measures and to remove the inequalities of access between rich and poor using a social determinants approach.

These are fine words and the advocates draw attention to various ways in which change could be brought about. These include linking with the forces that aim to prevent non-communicable diseases and targeting the sugar industry in the goal to reduce *per capita* consumption worldwide. How though does one jump from inspiring oral health in a small practice at an individual level to world-changing policy levels? While presenters stressed that no fault was laid at the door of individual clinicians but rather at the systems in which they operate, the over-riding message was that an individual treating another individual was no longer considered the way forward. Practitioners may be left slightly puzzled by this since arguably every individual is a product of their own unique social determinants. How

better to guide prevention than through their personal circumstances?

Be that as it may, *The Lancet* Editor-in-Chief Richard Horton, in expressing his pleasure at publishing on oral health, added that he had rarely come across such a set of delightfully polite people. 'Why' he demanded, 'are you not angry?' He has a point. The worthy and unquestionably committed authors and presenters certainly did not give the impression of fighting in a sack; rather of fervently agreeing with each within the confines of a beautifully crafted macramé portmanteau. What was needed, it was stressed, was leadership and yet surely on an international level we already have the FDI, the IADR and the WHO? Who else might overcome where they have

Aubrey Sheiham) were the closing reflections of Professor Lois Cohen. Her salutary recall of the germinating efforts towards improving GOH in the 1960s and 1970s, concurrent with that famous moon landing of half a century ago, caused one to wonder how many more gatherings of like-minded, mutually agreeing and well-intentioned folk would follow in the interval between now and 2069. One was left speculating on whether man might now make a footprint on Mars before mankind makes a leap on improving oral health.

I am sure we would all applaud the fine words and detailed analysis of 'what should be done' to improve GOH and would pledge our help to ensure its successful achievement, possibly even if it means losing our livelihoods.

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apparently failed? Seemingly, we need a medical journal to point the way forward. Is it likely though that our medical colleagues will glance up from their prescription pads for less time than it takes to brush a mouth quadrant in order to add their voices of support? Or that policy makers will take this bold initiative any more seriously than they have in the past?

You would not be wrong therefore to opine that there is a real sense of *déjà vu* in all of this. A substantial amount of the material presented at the launch, accurate, inspiring and praise-worthy as it was, seemed to be as much about updating knowledge on positions marked out over many decades as it did about new approaches. Indeed the most poignant part of the launch for me (apart from the acknowledgment of the contribution to all of this by the late

Like everyone else in the lecture theatre I was roused by the vision of a world free from preventable oral disease but was simultaneously mindful of an old Middle Eastern proverb. This helpful wisdom states that 'if the stone falls upon the egg, alas for the egg. If the egg falls upon the stone, alas for the egg.' I fear that, despite the very laudable efforts of Professor Watt and his team and the major support of *The Lancet*, without a method to harden egg shells or soften stone we will be complaining about having to eat omelettes for at least a generation to come. Or is this me just being too polite when I should be angry? ■

References

1. Oral Health. *Lancet* 2019; **394**: 10194.
DOI: 10.1038/s41415-019-0619-6