

## Public image

Shaun Sellars continues his series on ethical dilemmas in dentistry which appears in every second issue of the *BDJ*.



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Dentistry has become a hot topic in the media. During a televised debate, former Conservative leadership hopeful Kemi Badenoch claimed she'd waited five months to repair a broken tooth. The lack of dental provision was a major doorstep talking point in the summer by-elections. More recently, *Good Morning Britain* host Richard Madeley sparked outrage after recounting his conversation with a 'private dentist' who allegedly reported that 'one of the reasons so many people now have to go private is because NHS dentists are not capable of doing extractions anymore. They are simply not trained up to that level'.

Madeley's comments are particularly noteworthy, as they detail what purports to be an actual discussion with one member of the profession denigrating swathes of colleagues. Maybe I'm cynical, but I doubt very much that this conversation panned out in this exact way, if at all. It does, however, give an insight into the media, and by extension public, view of dentists and dentistry, including the perceived gulf in ability

and service provision of private and NHS sectors.

We've all read the comments section of tabloid news websites vilifying lazy and greedy dentists who are simultaneously not seeing any patients while at the same time ruining people's teeth. Those of us in general practice will have seen patients moaning about how the cost of their treatment is directly funding our new car or similar as if it should be illegal for us to spend the money we earn. It seems that the public and media perception of dentists is set. Private dentists are flashy and avaricious. NHS dentists barely exist anymore, and if you can find one, they're work-shy idlers.

Of course, none of this is true, but if our healthcare message is to cut through with the general public effectively, our professional image needs to improve. A population who respects dentists, and their oral healthcare colleagues, as highly educated, uniquely skilled professionals with a goal of achieving improved oral health for everyone is more likely to take on board that healthcare message.

How do we improve dentistry in the eyes of the public? We appeal to the emotional heart of the people. By borrowing methods used by successful charities, for example, we can tell the story of how good dentistry can positively affect people's lives. Imagine a set of short publicity films talking to patients who have had their lives improved by dentistry. The additional needs patient who can access a full range of care thanks to community dental services. The young person whose orthodontist helped them to smile and eat normally. And the person in pain who received simple and effective treatment when they needed it.

This could unite the private and NHS sides of the profession to promote dentistry to patients and those looking to become dental professionals. The costs would be minimal, and the promotion simple. And any private sector funder would likely achieve a significant boost from the associated halo effect. So what's stopping us? \*

## BDA Benevolent Fund continues to support dentists and their families



The BDA Benevolent Fund is a charity that exists to support dental students, dentists and their dependants living in the UK. As the festive season approaches, the Fund has been sharing some personal accounts of how the charity has helped individual dentists through a challenging time, such as dentist Dominic (pictured) from Yorkshire, who was in a life-changing traffic accident.

### Dominic's story

Being a keen cyclist as well as a dentist, I would commute the 21 miles each way to my practice by bicycle three times a week, clocking up over 200 miles a week with leisure riding too.

On Friday 13 July, my life changed forever as I was hit by a truck on my morning cycle. I was airlifted to hospital and spent the first four days in high dependency and two weeks in major trauma, going through four operations in the first week alone, and a total of nine months off work followed. I had suffered a traumatic brain injury and severe injuries to both my hands with complete numbness in my dominant hand. I seriously did not think I would ever be able to work as a dentist ever again. The PTSD I suffered was of course very severe.

I had vaguely heard of the BDA Benevolent Fund when I was a member of the BDA, but my membership had ▶▶