EDITORIAL

Future gazing

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It is impossible to know whether humankind has always had an obsession with the future. It does seem highly likely though that the instinct for survival, which is a crucial driver for the desire to have knowledge of the future, consumed our predecessors in much the same way that it does us, albeit under very different circumstances. The accuracy of any attempt to gaze ahead is a combination of past experience, perception of the present state of affairs, intelligence of the activities of others and a stab in the dark as to what all these factors might produce when woven into a picture and mapped onto the current landscape.

Speculation provides no guarantee of accuracy whatsoever and even 'scientific method', as perhaps applied via opinion polls, gives us recent and very pertinent examples of how badly things can be got wrong, creating feelings of betrayal and all manner of consternation and bewilderment. It is tempting therefore to ask what is the point of such exercises and whether it is better to just take life as it comes. Sadly, that is not really an option. We have to make some attempt at estimating the future in order to plan but, equally, we have to build in sufficient flexibility to take up any deviation. We apply this at all levels of life even though we do not consciously realise it. The vagaries of the British weather provide a perfect example. Do we plan for eating outside or inside? Past knowledge guides us not to schedule a picnic in December but also to check the forecast in June before buying the ingredients for the hamper. Despite this planning for a sudden shower, a summer thunderstorm has us putting up the umbrellas. 'Lucky' we thought of bringing them – but was it luck or experience and risk assessment?

Dentistry might not be a picnic but the principles of planning and the variation of risk apply to just as great an extent. It was therefore at one and the same time a bold and a wise move for the Faculty of Dentistry

of the Royal College of Surgeons of England to hold a day of presentations under the title 'Innovations and the future of dentistry' in concert with its 70th anniversary celebrations. The day proved to be something of a treat in terms of providing an opportunity to sit and ponder the wealth of ideas and knowledge that the speakers presented. As outlined above, in order to speculate on where dentistry might be in the future and what shape it might take as a profession and a service to patients the event was a combination of past experience, cogitation on the present and projection of those results into the future.

Specifically, the day included expositions on stem cell research and application, the technology associated with restorative and surgical dentistry and medicine, the psychology of

Is it realistic? If it proves possible it changes the fundamental premise of everything that we do. The temptation is to think that such a thing could never happen, but if we look at other elements of our lives developments already running have the potential to radically change our existence. As an example, reducing our reliance on fossil fuels by using electric cars has huge ramifications for us all from petrol stations, to road traffic accidents, to finances, to huge geopolitical shifts in power and influence as we reduce our reliance on oil supplies.

Superimpose onto these possibilities the way in which we organise our healthcare systems and the jigsaw becomes even more difficult to piece together and the picture even more difficult to decipher. To what

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behavioural change, the influence of social media, advances in genetics and the current caries status of children in the UK. What this torrent of expert reporting created was firstly a realisation of how complex a matter dentistry is. The interdisciplinary connections between different branches of science, research and healthcare are myriad and the strands of enquiry fascinating. One aspect that still intrigues me is that so much of the construct of dentistry is built on the devastation that is created by just two natural processes; caries and periodontal diseases, both mediated by microorganisms that the human eye cannot even see. In gazing forwards, what are the chances of being able to conquer the enigma of man over microbe? Is that imaginable?

extent will the NHS grow, modify or decline? What about private care and insurance-based options? How will our patients feel about their health and wellbeing? What do we do about deprivation, childhood caries, older people with additional oral needs? Then there is the workforce. A great proportion of females skew the equation due to maternity commitments, will Brexit affect the flow of colleagues from Europe?

When the founders of the Faculty those 70 years ago attempted to guess what dentistry would look like in 2017 how close would they have been to today's reality? Perhaps someone will unearth this editorial in 2087 and compare. ■

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