EDITORIAL

The price of everything

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How tiresome it is to have to put up with the presence of genius. It is the same in all walks of life, a handful of bright stars and shining lights that somehow manage to dazzle with their skill, ability and creativity. They leave the rest of us mere mortals gaping in wonder and frustrated by feelings that our own worthy efforts are good but lack the genius lustre.

We will each have our inspirations, heroines and heroes within dentistry and probably in an area of particular interest to us, perhaps a special care dentist with an outstanding ability to manage troubled patients, a cosmetic colleague with an artistic flair that adds beauty to function or an oral surgeon whose dexterity and deftness deceive the eye.

Wearing my writing hat, one such irritant is Oscar Wilde. The man has a quote for seemingly everything, having apparently commented on the majority of human conditions with a witty riposte or an apposite comment that is not only amusing but also insightful and defies the possibility of being bettered. One such example occurs in his play *Lady Windemere's Fan* in which he has Lord Darlington opine that a cynic is 'a man who knows the price of everything and the value of nothing'. Damnably funny and analytically on point. I raise this pithy epithet in relation to a paper published in this issue on the cost of treating tooth erosion.¹ Not, I hasten to add, out of any criticism of the authors nor to suggest for a moment that they are cynical but rather to help emphasise the essential difference between the actuality of cost and the concept of value.

The paper has its shortcomings, which the authors readily describe, in relation to the difficulty in calculating or even assessing the costs associated with diagnosing and treating this condition. One that we are encountering in clinical practice in increasing numbers and extent. The frustration when attempting to establish the real cost of care is born out of

two elements; the number of factors that are required to enable that care (personnel time, establishment costs, disposables and so forth) and the inherent complexity of the delivery itself which is a reflection of the bespoke needs of each individual patient and their circumstances.

However, the importance of the paper is also two-fold. Firstly, it is rare in its attempt to monetise a whole care process in such detail and secondly, it does help us to contemplate not only the cost, but yes, the value too. Within this weave other themes also become apparent. The wide cash disparity between care provided under the NHS and privately will not be a surprise. While one suspects that this is not a feature

who have to account for such expenditure and make ends meet. Inherent in all of this is the very word that Mr Wilde's character so pertinently identified as expressing the key issue 'value'. While the accountant in whatever system of remuneration can summate the cost, what is far more difficult to quantify is the benefit to the patient. It is this which remains central to the professional approach we take as well as the continuing conundrum of how this is calculated in a way that is fair and agreeable to all involved; patient, practitioner and where appropriate, third-party payer; be that tax payer, insurer or other. The cynic who is concerned about cost is also likely to want to bring this balance of stark numbers *versus* less definable

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exclusive to the UK state system but rather of any managed-care arrangement, the underlying message is that comprehensive care of this nature takes time precisely because it is individually crafted and that this by necessity incurs costs. Within this fabric is concealed a further hidden realisation, that in exactly the same way in which the authors had difficulty in estimating prices so too are patients also blissfully unaware of the true expense – with the arguable exception of those paying privately.

Although it is a point raised many times previously in relation to the whole spectrum of health and social care the scale of the numbers involved would, I think, be a considerable surprise to patients, if less so to practice owners and other team members

benefit to the attention of the recipient – 'see how much this is costing'. Conversely, the liberal thinker might err on keeping attention of the financial aspects minimal while accentuating the advantages.

This provides a salutary, if initially unlooked for lesson, in how attempting to answer a research question can be reflected not only in the results but also in illuminating wider truths. When all is said and done perhaps the advantage of genius is being able to understand the price of everything within the context of value. ■

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1. O'Toole S, Pennington M, Varma S, Bartlett D. The treatment need and associated cost of erosive tooth wear rehabilitation – a service evaluation within an NHS dental hospital. *Br Dent J* 2018; **224**: 957–961.