

A Slice of Philosophically Baked Bread

A Companion One-Sheet to the “Philosophy Bakes Bread” Podcast

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Episode 2: The Ethics of Dentistry

Guest: [Dr. Bill Myers](#), Birmingham Southern College

Dr. Bill Myers, on teaching ethics to dentistry students, asks: “...is dentistry a profession or is it a fancy craft – a high tech trade? In other words, I paint this picture of dentistry, [of] dental clinic as being [like] a Jiffy Lube. They want to sell you your stuff. You come in, they want to sell you products and maximize their profits. They’re trying to sell you everything they can to get you spend all of your money with them. I paint this really ugly picture of the dentist as the shoe salesman, and I say ok, is that what we want? The assumption at [dental] schools is that dentistry is a profession where patients come first with a service orientation as the primary ... motive [not simply maximizing profit first].”

Dr. Myers on a central tension in dental & other forms of specialist care: “A patient comes in and the dentist knows clearly what is the best treatment for this patient. However, the patient can afford this, but doesn’t want to go that route. They want to do something else. This is a conflict between **autonomy** and **beneficence**. The dentist, as a professional, knows what the ideal and best path for this patient is, but the patient also is the autonomous person who is authorizing this procedure. So, the conflict between autonomy and beneficence is the core conflict that dentists will see... **Autonomy** is the right to decision, the basic right to self-governance that we all have. And beneficence is grounded in utilitarian thinking – that’s the greater good. **Beneficence** is the oldest virtue in bioethics. It is ‘the doctor knows best,’ ‘the doctor has your best interest in mind, therefore you should do what the doctor wants.’ **Autonomy** is a relatively more recent concern that people will say that they have a right to choose their path through a procedure.”

I. Bread Baking Questions:

- (1) How are the ethical standards for a profession (like carpentry, teaching, law, or medical work) different from expectations for businesses or retail environments that we don’t associate with “professions”? Why are they treated differently, and should they be?
 - a. Should we think of dentistry as a profession or more like a retail business?
- (2) If autonomy means that a patient can refuse recommended treatment, the boss of his or her own care, should a dentist be obligated to perform a procedure that appears not to be in the patient’s best interest? Are there ever circumstances that might call for overriding a patient’s autonomy?
- (3) To what extent can a patient understand the medical or dental information that an expert has to offer? Can patients make fully informed decisions, genuinely understanding their implications?
- (4) What obligations do patients’ limited understanding raise for medical and dental professionals? What should medical or dental professionals do to ensure that patients are well informed?
- (5) Emergency rooms are required to render medical treatment to patients who need it. Should we have a similar right for dental care? If so why? If not, why not? (*Question Dr. Myers asks in the episode*)

II. Bread Breaking Questions:

1) Access to Dental Care

Dr. Myers: "...oral health is intricately tied to your overall physical wellbeing. There are patients who will come in, many expressing some physical symptoms. When their oral health gets better, that improves their overall health. So, our current state of dental health has some real problems. ... Part of that is because, in rural areas, there is no access to dentists. They certainly don't have dental insurance. To me, this is an area of serious neglect. We should be focusing on our oral health as much as we focus on our medical health."

Questions:

- i. Should we maintain the distinction between dental care and insurance versus health care and insurance? If so, why?
- ii. Can a lack of dental or health insurance limit a person's freedom or autonomy? If so, how?

2) Not speaking ill of another's work

Dr. Myers: "If you're an endodontist [a root canal specialist], and [a patient] comes in ... and the work that they get from their regular dentist is subpar, what do you do with that? Well, dentistry is a self-regulating profession. So, dental boards consist of dentists who make the boards and make these decisions. Do you report a colleague who is doing subpar work? ... [As a dentist,] your job is to inform the patient of their present oral health status. You're not supposed to say, 'Oh my god who did that?' That's against the rules."

In sum, Dr. Myers explains that those in the dental profession are supposed to report only on the present condition of a person's teeth, not to comment on the quality of another dentist's work, even when it appears to have been substandard.

Questions:

- i. Does the standard not to report on others' work permit a dentist to offer his or her patients all of the information that they might reasonably need?
 - a. If so, how can a patient seek restitution for harm that a dentist may have done to him or her?
 - b. If not, is the professional expectation not to speak ill of another's work a reasonable standard?
- ii. What responsibilities do you think dental professionals should have for reporting the appearance of subpar work to patients or to a professional board?
- iii. What is the role of reporting in the establishment, maintenance, or assessment of professional standards and expectations?