Choosing wisely – it is time for dentistry

During the last decade, different scientific communities all over the world have gotten involved in the initiative “Choosing wisely”. The aim of this idea is to work out scientifically based, interdisciplinary guidelines that have been adjusted in cooperation with patient representatives. This approach means implementing “wise” medicine in a high-end health system, which at first glance may seem contradictory.

This kind of needs-based thinking is not new, and medical journals have repeatedly published top-5 lists involving “don’t-do recommendations” to avoid unnecessary or even detrimental medical procedures. Of course, choosing wisely is not automatically compatible with every single health system all over the world, because over-diagnosis as well as over-treatment may also be associated with patient demands as well as concerns about legal consequences (fear of malpractice suits) if a certain treatment is not carried out. And in many countries with universal health-care coverage, any action at all is better paid than monitoring.

The main impact of “choosing wisely” is not to restrict medical or dental care but to concentrate on more individualized care. Evidence-based directives derived from randomized clinical trials may fall short when dealing with over/under/wrong treatment of any disease. Caries still is the most common disease world-wide, making the “choosing wisely” concept relevant in dentistry as well. It is clearly evident that any well-thought-out abstinence from active treatment may be the best choice in several clinical situations, but it also has to be fundamentally based on an extremely high level of experience and clinical knowledge.

In fact, the discipline of adhesive dentistry is in the middle of this discussion. On the one hand, being able to minimally invasively treat caries is a truly thrilling option compared to traditional treatment, which always entailed removing large quantities of sound hard dental tissue. On the other hand, however, incommensurate esthetic demands by patients may lead to corresponding overtreatment, even when the rules of adhesive dentistry are followed. The old bit of wisdom still holds true: less is sometimes more.

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