

# **LETTER TO THE EDITOR**

## Education in Geriatric Dentistry: A Challenge for Chile.

#### DOI: 10.17126/joralres.2016.021

In a recent Letter to the Editor in the Journal of Oral Research, Arenas stated that "Chile needs more and better Geriatric Dentistry"<sup>1</sup>. I would like to deepen the discussion about training in Geriatric Dentistry, as it is a field much needed in our country.

It is expected that by 2025, Chile will be the most aged country in Latin America. According to the latest WHO Report on Aging and Health, Chile will be one of the countries in which more than 30% of the population will be over 60 years, similar to other countries in Europe, North America, China, Russian Federation, Republic of Korea, Islamic Republic of Iran, Thailand and Vietnam<sup>2</sup>. This demographic reality represents a challenge to the Chilean Public Health Service, since oral diseases are one of the most common chronic conditions worldwide.

Besides their high epidemiological prevalence and the great impact on individuals and society, oral diseases represent a high economic burden to the entire society. According to international studies, the increasingly larger number of people over 80 years of age will expand the need for dental care in the near future. People are living longer, but not always in optimal systemic conditions. Indeed, higher dependency and prevalence of chronic diseases can be observed in older ages. In this context, retaining teeth may add to the complexity of the aging process. Old teeth can be more exposed to local and systemic risk factors for the most prevalent oral diseases, such as caries, root caries and periodontal disease.

The rapid aging of the population worldwide has prompted the progressive inclusion of Geriatric Dentistry in the curriculum of many dental schools. In the past thirty years, several studies have reported on the status of Geriatric Dentistry in the undergraduate curriculum in dental schools in the USA<sup>3</sup> and Europe<sup>4</sup>. In addition, curriculum guidelines and core competences in Geriatric Dentistry have been published. As pointed out by Arenas<sup>1</sup>, the results of the only study that assessed the current state of education in Geriatric Dentistry in Chile<sup>5</sup> showed that only 37% of the dental schools had a specific course in Geriatric Dentistry. The remaining dental schools were distributed in different types of teaching methodologies. Despite having a low levels of specific training in the area, these courses were taught following the guidelines of international curricula. The main obstacle to the teaching of these contents in most of the schools is the lack of time dedicated to this new discipline. Given the widely acknowledged importance of aging, new dental schools have an easier task accommodating the Geriatric Dentistry contents into the curriculum. This study also showed that most courses were focused on the community-dwelling older population. Undergraduate students must be competent in providing dental care for community-dwelling elders<sup>5</sup>, whereas graduate students must resolve the situation of fragile and dependent subjects.

This differentiation helps organizing the curriculum guidelines for either type of program. Health care of the dependent population requires more complex and advanced skills. Unlike countries such as the USA, New Zealand, Australia, UK, Scandinavia, Brazil, Argentina, Ireland, Japan, Mexico, the Netherlands and Spain<sup>6</sup>, Geriatric Dentistry in Chile has not been recognized as a clinical specialty. However, some national higher education institutions, such as the Universidad de Chile and Universidad Católica, offer a diploma in this field. Furthermore, the Universidad de Talca has created the first Master's Program in Geriatric Dentistry in Latin America.

Given the demographic reality Chile is facing, it is mandatory to train clinicians specialized in health particularities of the older adults. Comorbidity in older patients makes dental treatment even more complicated, requiring close collaboration with other experts from the

#### Journal of Oral <u>Research</u>

medical and social areas. Aging or age-related problems need that dental disciplines expand their scope to achieve the development of specific skills in Geriatric Dentistry. The training of dental professionals in this area, whether in undergraduate and postgraduate programs, must be made with an interdisciplinary approach. Higher education institutions should include experienced teachers from various fields, such as geriatrics, gerontology, anthropology and sociology, among others. This interdisciplinary view should enable the delivery of comprehensive care for the elderly, aiming to improve their quality of life.

Historically, dental schools have had an individualistic approach in the training of dental students. However, demographic changes force a new interdisciplinary focus in dentistry to address the challenges posed by the oral health of the elderly population. This approach allows to include oral health as a constituent part of people's quality of life.



Based on the challenges posed by the aging process for the entire society, most if not all, the undergraduate curricula in Chile should contain at least the basic aspects of these issues. In this regard and similar to most countries, the demographic change is already in place in Chile. Thus, our country should lead a new paradigm in training the younger generations of dentists. At the same time, Chile must revisit the clearly insufficient oral health policies for the elderly population. Innovative public health programs must be implemented, supported by the advancement of technologies and research. If Chile manages to carry out all the necessary efforts, the country can become a referent and model to cope with the challenge of a healthy aging.

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