

LETTERS

JADA welcomes letters from readers on articles that have appeared in The Journal. The Journal reserves the right to edit all communications and requires that all letters be signed. Letters must be no more than 550 words and must cite no more than five references. No illustrations will be accepted. A letter concerning a recent JADA article will have the best chance of acceptance if it is received within two months of the article's publication. For instance, a letter about an article that appeared in April JADA usually will be considered for acceptance only until the end of June. You may submit your letter via e-mail to jadaletters@ada.org; by fax to 1-312-440-3538; or by mail to 211 E. Chicago Ave., Chicago, Ill. 60611-2678. By sending a letter to the editor, the author acknowledges and agrees that the letter and all rights of the author in the letter sent become the property of The Journal. Letter writers are asked to disclose any personal or professional affiliations or conflicts of interest that readers may wish to take into consideration in assessing their stated opinions. The views expressed are those of the letter writer and do not necessarily reflect the opinion or official policy of the Association. Brevity is appreciated.

ETHICAL CHARACTERISTICS

I read with great interest Dr. Kevin Reid and colleagues' August article, "A Comparison of Expectations and Impressions of Ethical Characteristics of Dentists: Results of a Community Primary Care Survey" (Reid K, Humeniuk KM, Hellyer JH, Thorsteinsdottir B, Tilburt JC. *JADA*. 2014;145[8]:829-834), as it corroborates my own findings.

I recently completed a secondary analysis of an open question survey sent out to 100 of my long-term patients (mean = 11 years) who travel in excess of 1 hour each way (mean = 3.9 hours) for their dental care. I reside about 1 hour west of New York City, so there are no shortages of local dentists.

To the question, "Why do you travel so far to come here for your dental care?" I received a total of 376 declarative statements (mean = 7 per respondent, n = 55), which were stratified into 1 of 3 categories: "Ambience," defined as office décor, environment, office policies, and staff interactions; "Skills," defined as responses including or inferring something "done," for example, a procedure; and "Traits," defined as responses alluding to an aspect of character or inferring a "way of being," for example, "I trust him," "He gives you his full attention,"

and "He cares about me as a person."

Traits were further stratified into a modified version of the 7 humanistic health care professional attributes—integrity, excellence, compassion, altruism, respect, empathy, and service—as defined by the Arnold P. Gold Foundation,¹ attributes that generally correspond to the ethical domains cited by the authors. There were no significant differences in either the number of statements offered or in the stratification of answers relative to either the distance travelled or the number of years that a respondent was a patient.

The data sets were as follows: 47% fell into the "Traits" category, 34% fell into the "Skills" category, and 19% fell into the "Ambience" category, for a ratio of about 3:2:1. Or, speaking generally, 50% of what drives ardently loyal patients to continuously travel great distances for dental care, at least in this instance, relates to aspects of ethical behavior as long as the skill set and ambience are acceptable.

The larger picture of these results, outside the scope of my own practice, point, I believe, to a deficit within dental education, beginning with an admissions process that may not be as selective for signs of empathy as it is for high Dental

Admission Test scores and academic excellence; insufficient training in ways to deal with mental stress/overload; and insufficient exposure to ways of being that can color one's manner throughout one's professional life.

Fortunately, there are signs that this is changing. The Arnold P. Gold Foundation offers programs for health care educational institutions to promote humanistic health care professionals. Mindfulness Based Stress Reduction, a program developed at Massachusetts Medical Center by Dr. Jon Kabat-Zinn,² has morphed into programs offered to practicing doctors³ and to dental school students.⁴ And the Consortium of Academic Health Centers for Integrative Medicine has been fostering programs that bring out the "healer" in student doctors.⁵

Dental education hopefully will embrace this kind of data as well as the "handwriting on the wall" as pointed out by the authors, and forge a path to ensure we remain a respected profession and do not devolve into a trade.

David J. Shuch, DDS
 Founder and Director
 The Center for Integrative Dentistry
 Augusta, NJ

<http://dx.doi.org/10.1016/j.adaj.2015.01.005>

Copyright © 2015 American Dental Association. All rights reserved.

1. The Arnold P. Gold Foundation: working to keep the care in health care. Frequently asked questions. Available at: <http://humanism-in-medicine.org/about-us/faqs/>. Accessed January 8, 2015.

2. Kabat-Zinn J. *Full Catastrophe Living: Using the Wisdom of Your Body and Mind to Face Stress, Pain, and Illness*. New York, NY: Delacorte Press; 1990.

3. Krasner MS, Epstein RM, Beckman H, et al. Association of an educational program in mindful communication with burnout, empathy, and attitudes among primary care physicians. *JAMA*. 2009;302(12):1284-1293.

4. Lovas JG, Lovas DA, Lovas PM. Mindfulness and professionalism in dentistry. *J Dent Educ*. 2008;72(9):998-1009.

5. Sierpina VS, Kreitzer MJ. Innovations in integrative health care education. *Explore (NY)*. 2005;1(3):220-221.