

Ethics and business



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Nowadays, when Brazil's economic and financial situation is not the best, we see daily - in the radio, newspaper, TV and internet news - the disastrous sum of incorrect ethical attitudes of the people involved with public positions, in exchange for financial advantages. Recently, we have also seen in all news sources the indiscriminate and overpriced use, as well as over-reporting of medical treatments, especially in areas involving prostheses and orthotics (high cost material): due to the high profitability of using these materials, there was an ethically incorrect practice involving health professionals, companies representing materials, hospitals, and health care providers.

In times of national crisis, the crowded market makes it more likely, whether conscious or unconscious, to try to make the most of a treatment, often performing what is called "overtreatment" or "over-reporting" of procedures, practice that is to indicate and perform on patients more than the necessary, with the purpose of obtaining financial advantages.

When reading and observing this, we can not fail to draw a parallel with Implantology.

As we live by the indication of treatments, we deal with materials of various qualities and costs, and our activity is obviously for profit - because it is our profession and from we take our livelihood - we are daily exposed to ethical dilemmas in the "health care / financial profitability" relationship.

It is a delicate subject, but it deserves our reflection. In the area of Implantology, we deal daily with ethical dilemmas that are the subject of several publications, such as: defining the extraction of a tooth to implant an implant; define the optimal number of implants for a given treatment; perform grafting procedures in a variety of situations, or choose restorative material for rehabilitation.

We know, for example, that there is no scientific evidence to prove that rehabilitating a patient with total upper edentulism with 14 implants is better than 6 implants... Actually, I believe that 14 implants are never needed to rehabilitate an edentulous maxilla, and, however, we often see colleagues proudly displaying x-rays of 12 to 14 implants placed as if they were sporting trophies, or extracting lots of healthy teeth to place more implants without a long-term planning logic.

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How far does clinical need go and financial need begins?

Overtreatment, or over servicing (the acceptance of excessive, unnecessary, inappropriate or fraudulent treatment), is considered a lie, deception or theft, and thus characterizes ethically misconduct and a breach in the integrity of the profession.

Recent events that have most clearly involved medical practice have repeatedly reported that the private sector is "stuffed" with overtreatment practices, one of the most important factors contributing to increased health care costs, as well as increased complications. This is an ethical problem that presents itself as a situation of conflict between the interests of the patient, the professional and the one who pays the expenses - usually the health insurance companies.

In our area, since we are in a position of financial gain directly related to our professional recommendations, we are always at risk of having this conflict of interests: by indicating more and greater treatments, we gain more fees.

Treatments by agreements with lower values, delay in receiving the payments, prolonged installments, excess of dentists in the market, decrease of the volume of patients in the offices, and the rampant increase of the costs of dental materials and equipment, especially the imported ones, are the main causes of high costs and low cash flow in clinics. Thus, dentists may end up looking for alternatives such as using cheaper but lower quality materials, or worse, indicating excess procedures or unnecessary treatments for the sole purpose of generating more money and improving their cash flow and profit.

The main factors that lead to "overtreatments" are economic survival and financial gain. Some dentists may over indicate treatments unintentionally by using outdated treatment philosophies and techniques, or in which the criteria for diagnosis and treatment are unclear, leading to a variation in the decisions that govern their plan

and execution. Other cases may also be due to a patient's own request - who wants something often unreal or unnecessary - and the professionals end up giving in to their requests and over indicating treatments, protected by the will of a misguided patient, and using that will as a shield for an ethically debatable position.

Due to their professional status, health professionals, in general, are rarely regulated with regard to the convenience or need for treatment decisions. Society trusts that these professionals will put the interest of those they serve (the patients) in the first place, above their own personal interests and needs.

That is how we should always act. Financial and business considerations (such as profit, financial gain, or economic survival) should never warrant an indication of over-treatment by the health professional. Seek frequent updating, use safer and more modern techniques, control excessive costs without losing quality, optimize treatment times, seek long-term results, and especially be honest and correct with those who deliver your health - and give us the honor and the privilege of taking care of it - are pillars of dental practice that bring the best results and professional success.

If the best interest of the patient is always considered, above all, the profession of Dentistry can certainly exist ethically within a business structure, giving lucrative results to patients and professionals.



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