

# Ethics in dental practice: An overview - Part 2

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Clinical ethical reasoning and analysis are skills that are crucial to good patient care in much the same way as biomedical knowledge and procedural skills are essential to diagnosis and management of dental problems. As clinicians, we encounter a broad spectrum of ethical dilemmas during the course of practice at primary, secondary and tertiary levels of care. The commitment to patients as persons in a manner that transcends biological disease calls for a holistic bio-psycho-social approach to care that is fraught with ethical complexity.

## CASE SCENARIO 2

Angie is 13 years old. She visits your practice for treatment accompanied by her mother Mrs Smith. Today Angie has a painful tooth that has been troubling her intermittently for a few months. On examination you note a large occlusal lesion on the first lower molar and a 2mm periapical radiolucency at the apex of the mesial root. After your clinical and radiographic assessment you diagnose pulpal necrosis with chronic periapical abscess. Due to an uncomplicated root canal anatomy and excellent restorability, the prognosis for non-surgical root canal therapy is good. Angie also has a seriously compromised occlusion. She has a class II malocclusion with a moderate-to-severe anterior open bite. You recommend a thorough preventive program including dietary analysis, root canal therapy (RCT) as well as orthodontic evaluation. Her mother is unhappy with your suggestion of RCT. She has heard that it is painful and very expensive and does not want to exhaust her medical aid so early in the year. She asks Angie what she would prefer and the young lady opts for an extraction.

## AS THE TREATING DENTIST, WHAT WOULD YOU DO?

In attempting to resolve the ethical dilemma you could take the following approach ...

### Identify and articulate the ethical dilemma

It is essential to identify the conflicting values. The ethical conflict in this case involves acceding to the requests of both mother and patient (respect for autonomy) as opposed to acting in the best interests of the patient (beneficence).

### Establish all the necessary information

- What are the medical facts surrounding root canal therapy (RCT)? What will the prognosis be with RCT as compared to an extraction? As a point of departure, the decision to extract or perform root canal treatment must be based on good clinical evidence. Saving the tooth via root canal treatment will facilitate future orthodontic treatment to correct her anterior open bite and molar occlusion. This will result in functional improvement in respect of her oral health. The prognosis for maintaining the tooth with root canal and restorative treatment is good. It is possible that further counseling will allay fears related to the pain associated with

root canal treatment. Options for pain reduction must be part of the consent process.

- Are there any factors that impact on Angie's capacity to choose her treatment and to consent to such treatment? Angie is 13 years old. Legally she is not able to consent to unassisted to medical or surgical treatment in terms of the Child Care Act. While her mother will provide consent in this case, it will not be necessary for her to provide consent for her own treatment. However, is she competent to make a choice regarding her treatment options or does her fear of pain bias her choice? Clearly, a decision must be made that takes into account the best interest of the young patient. Is paternalism justified in this case? In Table 3 it is clear that the threshold element of competence must be met to proceed with the consent process. Is Angie old enough to understand the treatment options and make a choice?

Table 3: The elements of informed consent

|                      |   |
|----------------------|---|
| Threshold elements   | Competence (to understand and decide)<br>Voluntariness (in deciding without coercion)       |
| Information elements | Disclosure (of information)<br>Recommendation (of a plan)<br>Understanding (of information) |
| Consent elements     | Decision (against or in favour of a plan)<br>Authorization (of chosen plan)                 |

Source: Adapted from Beauchamp and Childress (2001:80).

- What laws will influence your decision? Chapter 2 of The National Health Act specifies consent and refusal of treatment. The Child Care Act specifies age of consent for medical and surgical treatment.
- What is the ethical standpoint? How do the four principles interact? Here we consider autonomy versus non-maleficence/beneficence.
- We know what the patient preferences are in this case? However are these medically justifiable preferences and do dentists always have to acquiesce to patient preferences?
- What does the dentist's personal value system dictate? In South Africa, how are these value systems influenced by medical education, parental influence, political beliefs, and personal experiences? Where there is an asymmetrical relationship between dentist and patient in terms of power, educational background, culture, religion and ethnicity it is more likely that moral issues will be in conflict.

### Analyse the information

Considering all the information, you will go through a balancing process in which the various components are assigned different weights. In addition, you may use different approaches to the core problem and examine different outcomes. The building of sound moral arguments to justify one's decision is essential.

Formulate solutions, make recommendations, then act

In this step you will consider possible solutions or options, make recommendations, and then act on the decision.

Following analysis of the case the dentist may exercise one of the following options:

1. Accede to the request and extract the tooth.
2. Ensure that the mother signs a consent form indicating her choice of treatment against advice. Then proceed with the extraction.
3. Refer the patient to another dentist or to a specialist orthodontist for a second opinion.
4. Refuse to extract the tooth and refer to another dentist to take over further care. In a non-emergency situation such refusal of treatment by the dentist would be acceptable.

Implement policy

In medical institutions, such as a hospital, policy may have to be implemented, created, or amended. This will be based on how the case was handled in the end. In a private dental practice, guidelines may have to be drawn up so that the management of a similar problem in the future is much clearer

Table 4: Problem Solving Approaches

|   |   |
|---|---|
| 1 | Identify the ethical dilemma & articulate the conflicting values.   |
| 2 | Establish all the necessary information – medical, legal, ethical, socio-political norms, patient preferences, doctor’s personal value system |
| 3 | Analyse the information obtained and build arguments  |
| 4 | Formulate possible solutions and make recommendations or take action  |
| 5 | In institutional settings, implement the necessary policies   |

CONCLUSION

In the provision of oral health care, we are duty bound to reach scientifically sound and ethically justifiable decisions with our patients. In order to do this it is important to recognize ethical dilemmas when they arise in practice and to manage them with the same level of expertise as we manage clinical disease. Oral health care practitioners need to develop skills to resolve ethical dilemmas. However, where necessary, they should be able to consult with a clinical ethics committee or a clinical ethicist in much the same way as consultation occurs with specialists in other medical or dental disciplines.

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