Robert w. Christensen, D.D.S., graduated Cum Laude from N.Y.U. College of Dentistry in 1948. He took his training as an oral maxillofacial surgeon at Los Angeles County General Hospital, and has enjoyed unparalleled success in this field since 1951. He has served as staff or consulting surgeon at 14 Southern California hospitals, including the position of the chairman of the oral surgery staff at St. Luke's. He is a distinguished writer and lecturer, and has produced more than 20 motion pictures on oral surgery and dental implantology. One of his films, "Endosseous Implants," won a Cine Golden Eagle Award. He has developed highly acclaimed surgical techniques, invented special instruments, and holds five U.S. patents on jaw reconstruction innovations. Prior to his retirement in 1976, he owned and operated a full-service Dental Center devoted to oral surgery, oral implantology, and general dentistry. Dr. Christensen now resides with his wife and youngest child on a hundred-acre ranch in Grants Pass, Oregon.

Denturism and Oral Cancer

A Rebuttal by

Robert W. Christensen, D.D.S., O.S.

The most ominous word on the face of the earth in the civilized world of ours appears to be cancer. The word is looked upon with universal dread. It strikes fear in the heart of every intelligent being whose body in some way may be exposed to it.

As a dentist and oral surgeon for more than 25 years, I am intimately familiar with oral cancer in all its forms, and feel that I can speak with some authority on the subject.

It is with grave concern, therefore, that <u>I stand in direct opposition to my colleagues in the dental profession who are creating an issue over oral cancer in an attempt to thwart the denturism movement.</u>

I am speaking about the denturism movement in California and in 13 other states. I am speaking about a worthwhile, completely legalized practice which has served hundreds of thousands of people in Canada without any problems for 16 years. I am speaking of a practice which is well established in at least 25 other countries in the world.

It is most unfortunate that my colleagues have chosen oral cancer as a rallying cry against the movement. I question the validity of their arguments. I question the unsubstantiated suppositions they are using to frighten the general public against denturism.

First of all, oral cancer accounts for less than 7% of all cancers. The great majority of oral cancer cases are brought to the attention of a dentist or a physician by the patient himself, who may have detected pain, soreness, sensitivity, or swelling in his mouth.

Although dentists play an occasional important role in the relatively few cases of oral cancer which are discovered in an unsuspecting patient who has no complaints, the profession takes far more credit than it deserves. My colleagues (dentists) would like you to believe that they, and they alone, are responsible for detecting all cases of oral cancer, with no help, whatsoever, from anyone--including the patient. This just is not true.

The patient himself provides the main clues with complaints of pain or sensitivity. The dentist then utilizes his medical training, knowledge, and diagnostic skills to determine exactly what is wrong.

A patient who complains of pain and sensitivity to a dentist also will complain of pain and sensitivity to a denturist. However, since the denturist is not licensed or authorized to deal with medical problems, he will immediately advise the patient to see a qualified dentist (or physician).

Does the dental profession seriously believe that a denturist will jeopardize his practice and his livelihood by subjecting himself to charges of malpractice by meddling with something as dangerous as oral cancer. I don't think so.

However, the fact that a denturist will be legally permitted to provide denture services will serve to improve the detection ratio of oral cancer.

More people will take advantage of the lower costs of dentures to seek more care. More mouths will be opened and inspected, and, if there is any sign whatsoever of oral cancer, disease, or abnormality, more opportunities for detection will present themselves.

I also do not agree with the premise that because a denturist fabricates and fits a denture that some carcinomatous change is going to occur in the patient. If there is any causal relationship between dental prosthesis and cancer, it would:

- 1. be extremely rare; and,
- 2. be more likely to be caused by a patient attempting to wear an outdated denture.

To listen to the prophets of doom in the American dental profession, a denturist is totally incapable of making a denture. My colleagues claim that once denturism is legalized, denturists will lack the experience, the education, and the training to fit dentures properly.

One of the denturists who has come to Sacramento today to give testimony has been a qualified dental technician, respectable dental lab owner, and a denture craftsman for 34 years. I would like to point out to you gentlemen that this denturist has been practicing and perfecting his craft long before some of our younger dentists were born.

There are hundreds, possibly thousands, of others like him. Let me assure you, gentlemen. They (the denturists) are sincere, dedicated professionals who know their craft, and know it well.

But, let's return to the subject of oral cancer. I am very concerned about the large number of people of all ages who are attempting to wear old, old dentures. I don't mean five-year-old dentures. I mean ten-to fifty-year old dentures.

For what reason do these people neglect their oral and physical health? No, it isn't the fear of the pain the dentist will inflict on him. It is the fear of the pain the dentist will inflict on his meager savings, or his precarious financial stability.

Most people avoid getting new dentures because of the costs involved. A thousand dollar set of dentures financed over two years will cost a senior citizen \$50 a month. How can a retired person on a fixed income of less than \$300 a month afford such a financial responsibility? The truth is...he can not.

11,400,000 Americans over the age of 65 are edentulous as a result of tooth decay and periodontal disease. The National

Center for Health Statistics has reported that among these II.4 million people, more than 600,000 elderly Americans are without any teeth whatsoever--neither natural teeth nor dentures.*

Another 350,000 senior citizens have dentures which are incomplete. In addition, one third of the edentulous elderly---or 3,400,000 people--have dentures that need to be replaced or fitted.*

This information was compiled by the House Subcommittee on Health and Long Term Care and was included in a Medical Appliances Report prepared last year. The report stated without equivocation that the main reason for this disgraceful situation was the high cost of dentures. These statistics were compiled only for people over 65. Needless to say, there are millions and millions of others of all ages who need dentures or denture services, but just can't afford it.

The legalization of denturists is the only answer to this problem.

Dr. Christensen's testimony before the State Health Committee, 1977.

*The 1990's statistics are even more staggering)