We believe that Canadian dental schools may not be graduating enough dentists to meet future needs based on current enrolment levels (Table 1). There are 3 significant developments that may help to explain this situation.

First, the aging population of baby-boomer dentists will lead to an unprecedented number of professionals who will retire from full-time practice in the years 2005 to 2010. This trend has been studied extensively of late, and many economists are predicting a very high early retirement rate amongst high-income earners such as dentists. Statistics reveal that about 30% of dentists are now over 50 years of age. It is highly probable that a number of factors, such as inheritances, stock market windfalls and a changing attitude towards full-time work, will encourage this segment of professionals to sell or close their practices and to enter into full or semi-retirement at an earlier age than the previous generation. These retirements will create hundreds of full-time positions across Canada for dentists who have graduated recently or who will graduate in the next 5 years.

Second, female dentists account for 50% or more of dental students in most Canadian universities. This shift will lead to a dramatic increase in part-time dentists, as women have traditionally been inclined towards family and other non-dental interests. Statistics show that the average career length of female dentists is 20 years, compared with 35 years for male dentists. This trend will cause vacancies on a full- and part-time basis.

Third, changes to the certification requirements of the National Dental Examining Board (NDEB) will likely result in a reduction of foreign-trained dentists receiving certification by about 30 to 40 dentists each year. As of January 1, 2000, the NDEB stopped its routine testing of graduates of non-accredited programs. These graduates will now be required to complete a 2-year "qualifying" program prior to taking the same test as graduates of accredited Canadian dental schools.

These factors have already led to a drastic reduction in the number of dentists in Northern Canada. This trend will be felt in major urban centres within 3 to 5 years and will have an impact on the number of dentists seeking either to associate or to purchase a practice.

If we project these trends even further over the next 5 to 10 years, it becomes clear that there will likely be a shortage of full-time dentists across Canada. This shortage may lead to lower selling prices for established practices when combined with normal death, disability and retirement rates. Assuming the typical career of a dentist lasts 35 years, 3% of Canadian dentists will retire from dental practice each year. This equates to about 480 dentists per year based upon roughly 16,000 dentists in Canada. If we add the other above-mentioned reasons for leaving the profession, we can see that the departures will begin to outnumber the entries.

There are 2 other minor trends to consider. Professionals hold large amounts of funds in RRSPs, which enables them to retire at a younger age. Also, the ability to move from province to province, as proposed by the Agreement on Internal Trade, will allow dentists to leave some communities for more attractive retirement areas. An exodus from some regions, especially from remote and rural areas, would influence the availability of practice opportunities and increase demand for dentists. These regions are already having difficulty finding replacement dentists.

As these trends mature between 2005 and 2010, major urban centres will also witness a shortage of dentists. This decrease will translate into a shortage of purchasers for the many dental practices on the market and a reduction in practice values. Furthermore, dentists seeking associate positions will be able to demand higher earnings (45%-50%) as they will be faced with numerous opportunities.
Another significant factor to consider is the changing mix of services that will be required by patients. What about a possible surge in patient needs? Some dental experts are predicting a huge increase in demand for restorative dentistry by our aging population. In today’s market, cosmetic and esthetic procedures are the highest growth areas in practice. In 10 to 15 years, geriatric dentistry will be the largest growth area. We have just enough dentists to fill present needs in many areas of Canada. What will happen if patient needs increase and dental manpower levels decrease? Who will treat the overflow of patients? Will hygienists operate their own practices to fill the void? Will denturists be permitted to exercise even more autonomy and be given an increased scope of practice? Will the NDEB be forced to relax its new regulations to admit practitioners who don’t meet today’s high standards?

Who is projecting the dental manpower ratios into the next decade? Who has the authority or the funding to increase enrolment? The free market will determine whether graduates will practise in areas where they will be most needed or in more lucrative areas.

Is there an adequate supply of new dental graduates in Canada? Given that increases in dental school enrolment are very resource-dependent, and that it takes several years to produce results, there may very well be a shortage of dentists in the near future. It is the opinion of the authors that Canadian dental schools should consider increasing first-year enrolment immediately to ensure there will be an adequate supply of dentists.

Mr. Brown is the president and CEO of ROI Corporation.
Dr. Raborn is the associate dean and chair in the department of dentistry, faculty of medicine and dentistry, University of Alberta.
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