

Editorial

LET'S NOT BE CAUGHT UNAWARES



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They say that death and taxes are inevitable, but for increasing numbers of Canadians, there is a third inevitability — old age. Most of the articles in this edition of *JCDA* relate to the oral health care of elderly Canadians, a topic of increasing importance to our readers. Yet, I wonder if our profession is taking the necessary steps to prepare for the aging of the population and its health care implications.

This subject is cause for concern among health care policy-makers in Canada. Much debate centres on the question of whether our publicly funded health care system can be sustained in the face of rising costs likely to come with the graying of the population. In a political climate where there is a constant clamour to reduce taxes, such a trend may stretch the capacity to pay for Medicare, as we know it.

Concerns about future sustainability have led governments to set up

commissions to examine the future of Canada's public health care system. Interestingly, except for a number of submissions to the Romanow Commission by groups directly interested in oral health, no mention has been made of oral health matters in depositions by external organizations. Even if oral health is currently not 'top-of-mind' for policy-makers, I believe it has the potential to become much more important in the future.

I recently had an opportunity to speak one-on-one with some parliamentarians, as part of a CDA delegation. I found the reaction of one in particular to different oral health issues to be very interesting. During our conversation, I raised CDA's concerns about the Non-Insured Health Benefits (NIHB) dental plan for First Nations claimants. The parliamentarian questioned why the NIHB plan should exist as a taxpayer-funded program.

Getting nowhere with the NIHB issue, I drew his attention to the main findings of the U.S. Surgeon General's *Report on Oral Health*: that oral health has general health implications and that the most vulnerable groups in society suffer the greatest oral health problems. Our public representative was unimpressed by this argument, replying with a smile that he hadn't "heard of any riots in the streets about access to dental care."

Realizing that this was a really tough nut to crack, I tried yet another approach. Knowing that this gentleman represented a riding with a sizeable middle-aged and economically comfortable population, I highlighted some oral health care problems linked to an aging population.

Many baby-boomer Canadians who have enjoyed excellent dental care, buoyed by employer-provided dental plans, will soon reach retirement age. These aging boomers have

high expectations for dental care, and because they have had the benefit of indemnity dental plans for virtually all their working lives, are not used to paying the full cost of care out of pocket. Once they retire, they will no longer enjoy the benefits of a dental plan.

The parliamentarian suddenly seemed interested in our conversation. As I painted the picture for him of these retirees who would live for 20 more years, who would still have most of their natural teeth and require the replacement of many restorations during their retirement years, he could identify with the plight of the constituents who had voted for him in the last election.

He could identify with Canadian dentists who will increasingly have to deal with elderly patients. Some of these patients will be in tears because they can no longer afford restorative treatment plans, yet have high expectations of oral health care. I believe we will see older Canadians becoming more politically active and using the Internet to extend their influence. Because of their collective voting strength and the increasingly effective organizations representing them, they will get the ear of politicians more easily.

If the reaction of my parliamentarian is anything to go by, access to dental care for retirees may become an issue that will win the sympathy of politicians in the coming years. I contend that organized dentistry needs to have very clear policy options to present to political decision-makers if and when this issue appears on the political radar screen. The nature of our profession's relationship with government will be central to those policy options.

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