Editorial

Count the cost

Without doubt, 2020 has been a year like no other and will be recorded by history as a time of great change. The COVID-19 outbreak and consequent restrictions have devastated populations and economies around the world. While Australia has remained relatively unscathed in comparison with other countries, the effects of the pandemic will be felt for decades to come.

The cost to business, livelihoods and freedom is already profound and will remain so until a global recovery occurs. The cost to practices is also significant, particularly with stage 3 and 4 restrictions only recently lifted in some states. The restrictions have meant that only the management of the most urgent cases could take place, to the exclusion of the routine or less urgent. Certainly the loss of new referrals and new treatment starts will have had a limiting effect and threatened business viability. The pressure on practices has already been heightened by the need for enhanced infection control, increased sanitisation of surfaces outside of the operatory, personal distancing and appointment rescheduling to separate people. These, and a raft of other preventive measures, have been recommended by health authorities and the onus is on clinicians to accept and follow the advice. These health guidelines apply to all businesses and not just clinical practices.

While clinical practice laments the change of circumstances, consider the effects and implications for the patients. Active orthodontic treatment has likely been suspended, which extends overall treatment time. The discontinuation of active mechanics, particularly in public institutions, has been well-intentioned but, in a number of cases, has had a detrimental consequence on treatment progress. Rather than simply cause a delay, in some circumstances treatment has gone backward, producing severe anchorage concerns and obscuring the pathway forward. A frequent example is the discontinuation of intermaxillary elastics after their application to provide balancing support to upper incisor palatal root torque. The resulting increase in overjet becomes almost unmanageable without considerable re-treatment planning.

The personal cost to the patient should not be overlooked. Despite the delay in treatment completion, there is the overall dental health issue related to prolonged appliance placement. Dental monitoring notwithstanding, oral hygiene requires constant surveillance and reinforcement. Neglect has dire consequences as white spot lesions arise to adversely affect aesthetics and necessitate additional treatment that has been limited at this time.

Patient boredom and psychological depression through personal isolation decreases the enthusiasm for treatment. The lack of personal connectivity has an effect on the human psyche that is not fully replaced by the digital world. Studies have shown that humans, being social animals, crave personal interaction. A denial of contact deepens the feelings of isolation and depression.1

The pandemic lockdown and restrictions will likely have a financial effect on clinical practices, as on other businesses. The treatment hiatus has caused patients and their parents aggravation and a flow-on effect regarding payment plans if they continue without consideration. Many parents have lost their jobs or at least received minimal income during the time of restriction. This creates an additional burden when the overall consequences of the pandemic have had such far-reaching effects.

The wearing of masks as a personal protective measure has the obvious benefit of limiting the aerosol spread of coronavirus. The other benefit is that eye contact is required and fostered to determine human response since other signs of facial expression are covered. Can clinicians look patients in the eye and say that everything will be all right and that satisfactory outcomes will be achieved? Time will tell.

From a public health standpoint, the greatest unknown may be whether the world or clinical practice will be any better prepared when, not if, the next pandemic arrives.

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