

Slow dentistry: the time has come.

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There is no denying that, in today's world, everything moves at an exhausting pace. Technology, consumerism, entertainment options and professional opening hours keep us on the go 24/7, while greater and greater numbers of people scramble to beat the clock, rarely enjoying the moment and clueless as to how they can exert some control over time. It is imperative that we find a way to strike a balance.

The problem is all too evident, but is anyone doing anything about it? The answer is a vigorous "yes": in many different areas, such as food, fashion, tourism and education, the slow movement has already begun to respond to these challenges. In fact, some variants such as slow food have already been inspiring changes in society for the last two decades.

The slow movement is an initiative that seeks to improve our health, our sense of well-being and our happiness by downshifting the pace of human endeavors and reminding us that we do have a say in how time passes, even if the frenetic consumer market and the need to keep up with the latest technology make us believe that we do not. It is time we stop being victims to the tyranny of Time.

The slow movement encourages us to comprehend technology as a way to keep moving forward, but it also urges us to strike a balance between progress and a more people-oriented focus that fosters greater emotional expression and peaceful human interaction. The slow movement is not coordinated or overseen by any official organization, but many reputed professionals throughout the world have addressed, adopted or promoted it in some way. As a result, a global community has formed and is quickly growing in followers.

Needless to say, the movement has made its way into healthcare and found many an advocate among care providers, with increasing numbers of doctors and other professionals are rightfully calling for changes to be made in how we intervene and in the way medicine itself is understood. Dr. Alberto Dolara, a Florentine cardiologist, can take credit for publishing the first open invitation to colleagues to get involved in the slow medicine movement, in 2002.¹ Alleging that the upswing of these trends mars the quality of treatment,²⁻⁵ slow medicine starts off by calling for limits to be placed on the number of clinical interventions and "quick" procedures. Then, after interesting comparisons of fast medicine (focused on illness) with slow medicine (focused on health) appear,⁶ these two paradigms become increasingly rational and objective. In the years following, interest in slow medicine and initiatives promoting it throughout the world would increase.

Dentists in different parts of the globe are spontaneously easing up on their pace and placing a greater emphasis on quality over quantity.

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It's true that slow dentistry is not an entirely new philosophy, but it is a novel one in many regards. It is a new vision for the future that, fueled by past successes, wants to step in and step up to the current and upcoming challenges in dentistry.

The slow method aims to standardize quality and make it profitable and accessible within a time frame that has little to do with how we've been doing things up until now. Technology and innovation move like blurs nowadays, and the stringent competition we face makes it difficult for us to apply the same principles that meant success for many dentists years ago. But working slowly does not just mean working at a more relaxed pace; it means working deliberately and efficiently, being productive without being wasteful, and doing more with less. By making quality a priority, carrying out our work in thorough fashion, and relishing the emotional bonds we create with patients and staff, we are making an investment in excellence that will bring greater returns to ourselves, to our patients and staff, and to dentistry in general.

Right now is an ideal moment to take a look at what really makes us happy or, more exactly, what really makes us happy when we practice dentistry. We should ask ourselves: "which kind of dentistry is best for our patients and for the future of our profession?" Slow dentistry is the most efficient "cure" for professionals who feel that they have lost control over the treatments they perform and are left with little time to enjoy their own expertise. Working with minimal stress in a safe environment while still turning a substantial profit is an approach that will guarantee the enjoyment of the dentistry we do for a long time to come.⁷ By combining standards of excellence in management and praxis, we are helping dentists integrate patients more fully into the experience so that diagnostics are made with greater accuracy, patients are motivated

to accept the treatment plan that is best for them, and treatment planning and implementation is streamlined. Through the attention and service they provide, dentists will experience a greater sense of satisfaction, as will their patients.⁸ Slow dentistry understands oral healthcare from the perspective of prevention, and it approaches healing and treatment with the utmost respect for biology through minimally invasive procedures and an emphasis on communication and human relationships.

Without a doubt, patient safety is at the heart of praxis, but it is also one of the growing challenges that busy dentists must face. Slow also means enhancing patient safety, with risk and error reduction and fewer complications, so that their safety is ours as well.⁹ The resulting reduction in risk and errors makes for fewer complications while enhancing the safety of our patients and, at the same time, our own. A slow approach allows us to dedicate ourselves to our beloved profession by practicing a type of dentistry that has the greatest respect for biology and oral tissues and is sustainable and fair to everyone involved: a decidedly win-win situation on all sides.

It is amazing to see how quickly the slow movement is growing all over the world. Perhaps it is an indication of how badly we need to ease up on the throttle in many aspects of our lives; dentistry included, but, fortunately, we are still in a position to make significant changes in the way we go about our professional activity. If we can strike a balance between innovation and tradition, we can offer the best possible version of our profession and save future generations from dentists whose work is compromised by the need for speed. This is an open invitation to see things in a different way, and it just might be the greatest legacy that the proponents of slow dentistry can leave for future generations.

REFERENCES.

1. Dolara A. [Invitation to "slow medicine"]. *Ital Heart J Suppl.* 2002;3(1):100-1.
2. Ladd Bauer J. Slow Medicine. *J Altern Complement Med.* 2008;14(8):891-2.
3. Sweet V. *God's Hotel: A Doctor, a Hospital, and a Pilgrimage to the Heart of Medicine.* 1st Ed. New York, USA: Riverhead Books; 2012.
4. Finkelstein M. *Slow Medicine. Hope and Healing for Chronic Illness.* 1st Ed. USA: William Morrow Paperbacks; 2015.
5. Butler K. *Knocking on Heaven's Door. The Path to a Better Way of Death.* 1st Ed. New York, USA: Scribner; 2014.
6. Bonaldi A, Vernerio S. [Italy's Slow Medicine: a new paradigm in medicine]. *Recenti Prog Med.* 2015;106(2):85-91.
7. Roig P. Slow dentistry. *Quintessence Int.* 2016;4(2):87.
8. Roig P, Kalenderian E, Pinilla J. The importance of leadership and management skills in dental practices to attract and retain patients in periods of economic recession. *J Oral Res.* 2015;4(5):321-8.
9. Marks A, Mertz E. *Leadership Development: A Critical Need in the Dental Safety Net.* San Francisco: University of California, Center for the Health Professions at UCSF; 2012.