

Editorial

Patients, clients or customers?

The age of political correctness is changing the way traditionally held values and concepts are viewed. This can be a welcome improvement as contemporary ideology tests entrenched concepts and attempts to initiate change. This is apparent, and also relevant to dentistry, as the medical profession wrestles with the concept of a 'patient' now being termed a 'client', particularly in the business and administrative circles of an institutional environment. Considerable opinion and discussion has appeared in the medical literature, most of which challenges and argues over any alteration in terminology which originally came about in psychiatry to avoid the stigma associated with mental illness.

Is a change in terminology valid in the orthodontic world? Is the recipient of orthodontic care a patient, a client or a customer? The noun 'patient' is derived from the latin word 'patiens', the present participle of the verb, *patior*, which translates to 'I am suffering'. A patient is literally 'one who is suffering' and is therefore someone who seeks health services because of a need. It could be considered that a patient has no choice and seeks care for the purposes of returning to health and wellbeing. Is it conceivable that a patient in a cardiac unit would enjoy being called a 'heart client'?

This is in contradistinction of a customer who visits a store in order to purchase a new television because their previous set does not meet contemporary technical standards. While it could be argued that the obsolete television has caused social and deprivation anxiety, the customer has the choice to shop around and purchase a modern television or an alternative electrical appliance to provide bargain entertainment. A legal client seeks the services of a lawyer because of a need which could be causing stress and a degree of depression. A legal client is not called a patient, then why should a patient be called a client? In this case, the definition of a client describes a person who engages the professional advice or services of another.

The title of 'patient' carries a degree of responsibility and an obligation to participate in the planned management of the health condition. The careful adherence to treatment instructions and associated

compliance would be expected to lead to a successful outcome. The relationship between a health care provider and patient is special, unique and should be built on knowledge, trust and respect. These elements are detailed in health care codes of conduct. The term 'client' empowers the patient to a level of equality with the provider and, in some circles, is considered to diminish the doctor-patient relationship. However, the heart patient, on being told of their condition, is not likely to enter into negotiation and be asked what they would like to do about it; they would be told.

A client has a choice as to whether advice or a service is received. Being a client infers a business transaction from which a service receiver may choose to decline. There is often an expectation that the provider accepts all responsibility for the service or advice. There is little obligation on the part of the client who denies accountability. In orthodontics, there is an expectation on the part of the patient to assist in, and comply with, treatment instructions. The wearing of elastics, the care of the teeth and appropriate and regular attendance are requisites for success. Do orthodontists accept total responsibility and determine that patients bear none for their care? After all, the upsurge in non-compliant appliances, temporary anchorage devices and the placement of long-term bonded retention are perhaps examples of patient denial of responsibility or, at the very least, inadequate compliance and subsequent acceptance by the profession that the onus for success resides with the provider. In these circumstances, patients are receivers of care or a service for which a fee is paid and invites the appellation of client.

In a current society based on blame and the premise that personal misfortune can be attributed to others, a purely orthodontic business client/provider relationship would appear appropriate. The reason for an unsatisfactory and unaccepted orthodontic treatment result is the provider's fault. After all, the client has paid to have their teeth fixed!

However, the orthodontic profession expects that patients become actively involved in their dental care and take a high participatory role in treatment.

Almost certainly, a medical patient would willingly participate in their cancer treatment, take the prescribed course of antibiotics to completion and presumably follow the advice of their trained health care provider. A patient can ultimately be 'cured' but a client can continue to be treated. A rational patient would hardly discontinue treatment when not 'cured' and while their health problem persists.

In the end, the terminology applied to people receiving health care does matter and the type of service received delineates and defines the recipient.

However, no profession, apart from health, uses the term patient as it embodies an entitlement of care. In an overarching sense, 'patient' describes 'clients' and 'customers'.

Rather than commodities, the receivers of orthodontic treatment are patients, are they not?

What do you think?

Quod scripsi scripsi

Craig Dreyer