Talking Ethics

“I Think It Was Missed Because I Was Not A Smoker”

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During our dental hygiene studies we were meticulous about assessing the submandibular, submental, and occipital lymph nodes. We palpated on either side of the sternocleidomastoid muscle and felt the differences to the temporalis and masseter muscles, and we assessed the temporomandibular joints while asking the client to open and close. We adjusted our overhead light and used our mirror to press on the tongue to view the oropharynx and the tonsillar pillars. We used gauze to hold onto the tongue and view the posterior lateral surfaces looking for changes and discrepancies. We documented the findings of the extra and intraoral examination and discussed the most common risk factors for oral cancer: tobacco, alcohol, lack of fruits and vegetable, and sun exposure. After graduation, perhaps due to the constraints of time, this important aspect of the dental hygiene appointment is often left out and then forgotten as the habit of assessing is replaced by other billable procedures.

The practice standards to be adhered to by registered dental hygienists and dental hygiene students in Canada is to follow the ADPIE process: Assessment, Diagnosis, Planning, Implementation, and Evaluation. The Entry to Practice Competencies and Standards for Canadian Dental Hygienists indicates that “the dental hygienist as a clinical therapist collects accurate and complete data on the general, oral, and psychosocial health status of clients.”

The demographics of clients presenting with oral cancer is changing, resulting in more people presenting with an etiology of Human papillomavirus (HPV), a common sexually transmitted infection. HPV-16, in particular, is increasing the risk of oral cancer. HPV can be spread through unprotected sex, touching, and oral sex. Women who are sexually active are advised to have a pap test on a regular basis. Vaccines are available to reduce the incidence of certain strains of HPV in children, youth, and young continue...
adults. The vaccine does not provide protection if one is already infected with HPV. People may be infected without symptoms which results in unintentional transmission to sexual partners.

A few weeks ago I was listening to CBC Radio One and was in tears listening to a man’s experience of life after his spouse had chosen medical assistance in dying (MAID). I wanted to know what was the medical diagnosis that caused so much suffering. After a brief search, I found the original article in which the client had a toothache that did not resolve and eventually SHE requested the biopsy with a diagnosis of extensive oral cancer.1

I believe the head and neck examination, the oral cancer screening, and the assessment of the extra and intraoral tissues are the most important aspects of our dental hygiene appointment. An assessment which takes less than 5 minutes—probably 3 minutes—to complete could possibly make a difference in a client’s future. Using this opportunity to discuss the reasons why an extra and intraoral examination is important will further educate the client on risk factors and possible lifestyle changes.4

The Dental Hygienists’ Code of Ethics sets out mandatory requirements for dental hygienists to ensure that they meet a high standard of ethical practice, regardless of their practice area.6,7 Although most provincial associations have their own specific codes of ethics, the principles of beneficence, accountability, and integrity listed in CDHA’s Code of Ethics6 are common themes. Dental hygienists are to use their “knowledge and skills to assist clients to obtain optimal oral health and overall wellbeing.”6, p.5 Dental hygienists are to “uphold the principles and standards of the profession” as defined by the principle of integrity.6, p.7 Finally, “dental hygienists accept responsibility for knowing and acting consistently with the principles, practice standards, laws and regulations under which they are accountable.”6, p.8 In essence, a dental hygienist who does not include the extra and intraoral examination as part the assessments is violating the code of ethics under which we are all governed.

For me, if a friend, family member or acquaintance has been diagnosed with oral cancer, I would ask if an oral cancer screening had been completed during their dental hygiene appointments. Are you willing to take that risk of not assessing and not documenting the findings of your extra and intraoral examination and consequently violating the principles and standards of our profession? I’m not and thus will continue to assess, discuss my findings with my client, and document. Will you too?

References