

# Impressions Gained from the First Annual Meeting of Teachers of Orthodontics

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## Undergraduate Problems

1. Didactic Courses for the Undergraduate Student  
Earl G. Jones, Ohio University, Columbus
2. Preclinical and Clinical Courses  
Dean B. E. Lischer, Washington University, St. Louis
3. Discussion

## Informal Dinner

## Graduate Problems

4. Problems and Methods of Graduate Clinical Instruction  
Dr. Leuman M. Waugh, Columbia University, New York
5. General and Special Requirements of the Graduate School  
Dr. A. G. Brodie, University of Illinois, Chicago
6. Discussion

To paraphrase a statement made in a popular broadcast over a well known network, the opinions expressed in this review of the first annual meeting of orthodontic teachers are those of the author, and not necessarily held by either the participants in the program or the publication in which they appear. It was my pleasure and privilege to attend the session through the courtesy of the organization, and my feeling is that the problems under discussion are of primary interest to the practitioners of the specialty as well as teachers of Orthodontics.

With respect to undergraduate orthodontic education, it was of interest to observe that the orthodontic clinic for undergraduate students appears to be on the wane. This trend is far more marked than at the time at which the courses in Orthodontics of the curriculum were being discussed, and it is probable that the ideas expressed at that time, as well as the courses finally incorporated in the curriculum survey report, have had an important influence upon this progressive development. Certainly in the group represented at this meeting there were few champions for the undergraduate clinic in which patients are handled by dental students.

The laboratory courses in orthodontic technic are still considered of value and find their way into many curricula of dental schools. It would appear, however, that emphasis is swinging toward the development of courses dealing with the fundamental principles of Orthodontics rather than the clinical aspects of Therapy. The reasons for this are obvious and include, primarily, the difficulty in obtaining any satisfactory proportion of hours in the crowded dental curriculum to offer sufficient time to properly instruct the student in the handling of orthodontic problems. It is unfortunate that an orthopedic prob-

lem of this nature requires an extended period of Therapy and an even longer interval in which patients may be observed in order to develop judgment. This factor, combined with the inability to establish routine or didactic procedure and rules of treatment, makes it impossible to convey sufficient experience to develop adequate skill or judgment on the part of the student in the time allotted the ordinary dental course.

When we realize that the period of orthodontic therapy extends over the developmental years—from childhood to complete development—for the completion of the operations undertaken, it is no wonder that serious mistakes are made in good faith by recent graduates from both undergraduate and post-graduate schools of instruction. The unhappy result of these errors has influenced the impression held by the public and the profession and has been responsible for discrediting orthodontic procedures. There is sufficient divergence and reaction in the individual patient to complicate the problem of the experienced orthodontist considerably, and when we add to this the foregoing factors the future of the specialty is placed in jeopardy by curtailing the period of clinical experience under the guidance of seasoned practitioners.

A tone struck most forcibly at the time of the curriculum survey discussion suggested the development of courses in Orthodontics which are designed to train dental students in the development and function of the human dentition, including in its scope Embryology, Anatomy, Comparative Anatomy and Physiology. This was heard again with increased emphasis. In this field lies a great opportunity to coordinate the department of Orthodontics with the other clinical departments in Dentistry. The difficulty in the development of courses of this nature lies in obtaining teachers with adequate clinical training who are sufficiently grounded in the fundamental subjects to make application and correlation of practical significance. It must be remembered that no matter how well conceived such a course may be, its effect is determined by the ability of the instructor. It is not enough to construct a beautiful outline on paper. And, in this connection, it may be necessary to await the development of trained teachers, some of whom may not yet have undertaken their education.

From the standpoint of the dental school, it is important that the institution realize the necessity of including on its staff men who possess these qualifications. To maintain an orthodontic staff of clinicians who have arisen through the archaic channels of orthodontic education is to expect their department to raise itself by its bootstraps. There has been serious handicap to orthodontic education through inbreeding in departments, and lack of constructive thought in the executive divisions of both orthodontic departments and the universities in which they are located.

One might summarize the attitude with respect to undergraduate teaching by saying that the idea of training undergraduate students in the routine dental course for the practice of Orthodontia is being abandoned. At the present time courses are designed to give the student basic knowledge of dental and facial development, a concept of orthodontic problems that he may be conscious of the possibilities of orthodontic treatment and to permit him to perform certain of the simpler operations which include, particularly, the construction of space maintainers and tooth-moving appliances required in simple forms of tooth movement. There are those who believe that it should be possible to form the groundwork in undergraduate teaching for graduate in-

struction in Orthodontics. The difficulties presented in the latter objective are largely those of time and quality of instruction. The improvement in most all transportation has rapidly removed the time-honored argument that the general practitioner must be trained to cope with the treatment of all orthodontic problems. The disadvantages in results obtained would appear to outweigh the other factors.

With respect to graduate teaching, some confusion still exists in the minds of the profession relative to the differentiation between graduate and post-graduate instruction. Post-graduate instruction includes courses of varying length which do not lead to a high degree. In some of these certificates are given for successful completion of these shorter courses. The period of this instruction varies from a few days to several months, and its caliber enjoys a latitude from a quiz course through technics and chair instruction up to and including those which have a semblance, at least, of recognizing basic fundamental didactic courses and long terms of clinical Therapy in which the post-graduate student is treating cases. Graduate instruction refers to formal education through registration in a graduate school in which the teaching is directed through the graduate faculty and the units obtained are applicable to high degrees, those most commonly conferred being Master of Science and Doctor of Philosophy. Between these courses is a more extended type of post-graduate instruction which, while not recognized in the graduate school, is given a semblance of graduate nature by the conferring of special degrees, such as Master of Dental Science.

The reason for the development of the intermediate course in some institutions has been the policy of the graduate school to refuse credit for clinical instruction. There are some institutions in which the graduate school will not confer the formal graduate degree upon a student in clinical sciences. This is true in Medicine, as well as in Dentistry.

Post-graduate instruction can be dismissed from the discussion after recognizing its value as a brush-up course to obtain new technics for men already well trained. The intermediate group is the type of course necessarily pursued by institutions in which the policy of the university prohibits the granting of graduate degrees in clinical departments. There is a question whether or not the dental departments have on occasion too readily accepted the academic attitude of the graduate faculty, substituting in the place of an adequate graduate course a plan of instruction which is too heavily weighted on the clinical and too lightly weighted on the didactic aspects of teaching.

From the standpoint of truly graduate courses it is necessary that the requirements of the graduate school be fulfilled, and in addition there must be adequate clinical instruction to meet the demands of clinical practice. This, without exception, lengthens the time necessary to obtain a graduate degree, yet it satisfies both the academic concept of the graduate school and the requirement for clinical sciences. The conventional attitude of graduate departments in requiring that instructors of graduate schools have themselves attained graduate degrees equal or in excess of the rank to which students aspire has added another complication to graduate instruction in Orthodontia. While, superficially considered, this requirement appears to work individual hardship, it is probable in the long run that the policy is sound. It means only that the development of genuine graduate instruction in a department of Ortho-

dontia must be preceded by the education of instructors in that department to qualify for this type of teaching. And here again the long-run policy of developing the department upon a firm foundation would appear to be more important, in the light of the services to be rendered, than is the policy arising through anxiety for immediate results, and resorting to compromises in the graduate program or its substitution, utilizing special post-graduate courses.

There is, even at the present time, sufficient experience in teaching to justify genuine graduate instruction as a method of choice in the departmental specialties, and especially in Orthodontics. The advantage to the practitioner of a sound fundamental background, upon which is superimposed at least a year of clinical experience, is one of the surest safeguards for the advancement of Orthodontics.

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