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## Ethics of Dental Marketing

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Ethics of Dental Marketing  
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## **Introduction**

Amber is a college student, who has an extreme dental anxiety. She does not like anything that has to do with needles and drills, and wants to avoid someone putting their hands into her mouth. So it has been almost seven years since she last saw her dentist. One day, while surfing through the Internet, Amber comes across a dental aesthetic advertisement: “Brighten up your smile with dental whitening. Come into our office today for a student discount!” Amber, being conscious of her stained teeth, decides to visit that dentist. During the initial assessment of her mouth, the dentist finds out that Amber needs to get an emergency root canal before she loses her healthy tooth.

Rich is a middle-aged man, who understands the importance of his oral health. He brushes and flosses his teeth every single day, and visits his dentist every six months in order to maintain healthy teeth. At his normal six months cleaning, Dr. Kim notifies Rich that he may need to crown his bottom left molar. Because he would want the crown that would last long and match the rigidity of his other teeth, Dr. Kim suggests that Rich get a porcelain-fused-to-metal crown, which can be more expensive than the zirconia crowns. Rich trusts Dr. Kim, and agrees to get a porcelain-fused-to-metal crown, believing that it’s for the good of his tooth in the future. As Rich is about to finish making his next appointment and leave the dental office, he sees a big poster with dental whitening advertisement. Rich becomes a bit skeptical—does Dr. Kim truly care for his oral health, or is he trying to get more money off of him, assuming he is financially well-off?

Dentists are both healthcare providers and businessmen—while they work to preserve and improve the oral health of their patients, they also cannot ignore the amount of profit they gain from each treatment they provide. This professional identity is different from that of many medical doctors, as dentists are the owners of their own practice: financial stability of their dental hygienists, receptionists, and dental assistants is dependent on how well the dentists run their business. Therefore, it is inevitable for dentists to think about the profit they bring for their office. Meanwhile, medical practice is structured that the medical doctors think less often about how treatment decisions would impact their source of income, allowing them to focus more on the delivery of healthcare rather than maintaining the health business. The separation of hospital management and healthcare in medicine seems to suggest that there is something inherently wrong about “selling” healthcare, and therefore someone’s opportunity to live.

While dentistry does not deal with life and death situations like the mainstream medicine, preserving oral health is crucial to protect the people’s overall health. Poor oral hygiene may lead to cardiovascular disease, respiratory disease, and even diabetes. Then, is dental marketing morally impermissible because it is also selling people’s opportunity for good health? It is important to note that skills and knowledge of dentists are not the only “products” sold from dental offices, and not all products are related to basic healthcare needs. For example, consider teeth whitening services. While whitening teeth may be necessary to better one’s self-esteem and improve one’s social life, it is not a basic healthcare need—whiter teeth does not equal better health; therefore, marketing teeth whitening is business. This paper will discuss two main ideas to understand the business ethics of a healthcare profession: marketing in the dental profession, and dental profession as a hybrid of aesthetic and healthcare services. Is there something inherently wrong with “selling” professional skills and quality of health? Should marketing be

allowed in dentistry? Also, should dentists be able to sell aesthetic products in their dental offices that care for general health of the patients as well? Should there be any separations between general basic healthcare and aesthetic care in the dental offices? I will argue that while dental marketing ought to be allowed with a specific intent to bring patients into the dental practices, there also has to be an obvious prioritization of basic healthcare over aesthetic services within the practice in order to maintain healthy patient-doctor relationship.

### **Dental Marketing Ethics:**

Marketing is not all business. Sometimes it is a public health movement. Marketing in healthcare has been a topic of ethical concern since 1970, when the patients, who were primarily physician referred, could now choose the healthcare services based on their own preferences (Krohn). The dynamics in medicine changed when the free marketing was permitted, and if the dentists did not put their names out to the public, then there was no way that patients could find them. Thus, even if a dentist is culturally competent and professionally adept, if no patients could find them online, on newspapers, or even billboards, their skills and well-intended deeds would be put to waste.

Marketing can be effective in bringing patients to the dental offices, and ultimately give the care that they need. Dental anxiety and phobia is mostly related to the patient's own traumatic experiences or vicarious learnings through their friends and family or the media. This fear and anxiety lead patients to believe that something awful is going to happen during their dental appointment, and therefore refrain from visiting a dentist. Such behavior is harmful for their oral health, often leading to "more missing teeth, decayed teeth, and poor periodontal (gum) status." These patients visit their dentists only during an emergency, and these emergency treatments can be more complicated and traumatic, reinforcing their fear of dental practices.

Hence, it is important for the dental community to bring in these patients before they reach a harmful stage of their oral health, and dentists may do so with effective marketing that fights against the distorted image of dental practices and that increases the public understanding of dentistry (Appukuttan).

Dental marketing, therefore, is morally permissible and even required when such advertisements increase the awareness of patients and ultimately protect the oral health of their patients. In fact, it would be unethical for the dentists to not market themselves, when their practices purely serve the people and the wellbeing of their health, as the professional obligations of dentists not only lie within the patients that come into their office, but also within the general health of the community. Hence, the ethical marketing is derived from the intent of the dentists—the one that hopes to preserve and improve the oral health of the patients.

Nonetheless, not all dental marketing is ethical, especially those that prioritizes profit over the basic health of the patients and those that bargains with the people's health. Who is at fault when the seller is deceptive and the buyer is naive? Thomas Carson in *Lying and Deception: Theory and Practice* offers a perspective that perhaps it is the buyer, not the seller, who has the responsibility on the decisions they make to either buy or not buy the product, also known as the *caveat emptor* ("buyer beware"): "If the buyer is so stupid as to believe what s/he is told, then s/he deserves what happens to her" (Carson 179). But such claim suggests that it is morally permissible to take advantage of the unknowledgeable customers, and that our community should be built on skepticism instead of trust. By extension, responsible patients in dental practices are those who do not trust their dentists because dentists are morally allowed to trick their patients for profit. There are two reasons why such argument is flawed: 1) according to Carson, no one can fully embrace this view, as everyone is vulnerable against being naïve and

unknowledgeable in the fields outside of their specialties, and would not want others to deceive them in return; therefore, deception and withholding information itself is immoral. 2) The weight of deception in healthcare is much higher than any other business. Patients are vulnerable—medicine is a difficult subject to learn and not everyone is expected to know about medicine. But people do have rights to their own health and body, and tricking patients to undergo procedures that are unnecessary or even dangerous is overusing one's power and privilege as a healthcare provider. Before any dentists are businessmen, they are still healthcare providers, and ought to allow patients to make informed consent, giving them control over their body.

According to the American Dental Association's Code of Professional Ethics, dentists may participate in marketing, as long as they do not "exploit the trust inherent in the dentist-patient relationship for their own financial gain" (American Dental Association). The ethical code furthers to assure that dentists may not misrepresent the value of certain procedures, and induce their patients to buy products or choose procedures just to gain profit. In regards to the dental-related products, dentists must not just rely on the manufacturer's presentation of the product. Instead, the dentists have to understand the safety and efficacy of what they are selling, and explain fully about the dental product to the patients without any bias towards the higher price tag. Hence, it is generally agreed in dental profession to prioritize patient health over financial gain, and any sort of deception and withholding information in practice and in sales are morally impermissible, as people have the right to know what is being done to their body. Hence, I argue that dental marketing is ethical as long as it is for the best of the patient's health, and that dentists have no intentions of prioritizing profit over someone's wellbeing. Perhaps, the selling product in dentistry is not one's health—it is the dentists' skills, education, and labor that advocates for the patient's wellbeing in the end. Therefore, dentists are not bargaining health for

profit if they market honestly, as they are just advertising their skills and experience that would bring good for the society in the end.

Nevertheless, dentistry is not always about basic healthcare. It is also about the aesthetics—how pretty the patient's teeth look. When the dental service is not crucial to one's healthcare, dentists may seem more like businessmen. Is it ethical for dentists to sell dental products not related to basic healthcare when it seems like the dentists are using patients for only profit? I argue that it is ethical as long as there is an explicit prioritization of healthcare over the aesthetic services, and the intent of using aesthetic dentistry is to bring more patients into the dental office to provide general oral health checkup.

### **Dental Ethics of Teeth Whitening**

For a bright, attractive smile, people are told that they need straighter and whiter teeth. While they can get teeth whitening supplies at home, many dental offices also offer teeth whitening services, which require the dentists to earn a separate license. Many people do not know that teeth bleaching includes hydrogen peroxide that oxidizes the organic pigment tissues. Hydrogen peroxide of low molecular weight can penetrate the enamel and dentin, and release several byproducts that could be harmful for people's health (Gheorghiu *et al*). Nonetheless, because these side-effects are almost always negligent with good care, it has become a common beauty practice in the United States.

It is ethically permissible for anyone to whiten their teeth as long as it does not harm their body. If the people believe that yellow stains on their teeth is negatively affecting their social lives, then they should be able to have the option to bleach their teeth. The same logic is used for anyone trimming their hair because their hair looks too messy for an interview. Adjusting to

social standards is morally allowed. However, what implication are dentists sending out when they offer teeth whitening services and encourage their patients to buy teeth whitening supplies from their office?

Consider the plastic surgeons. They are medical doctors working with beauty enhancements for patients who can afford plastic surgery. They manipulate the body to make a person “beautiful,” even at the risk of one’s life. On the other hand, plastic surgeons also work on restorative health, allowing burn victims, car accident patients, and other trauma patients to recover from the damage done to their body. When healing professions also work in the arena of aesthetics, they re-define who needs to be healed: those who do not have beautiful body—big eyes, sharp nose, Angelina Jolie lips, etc. These instabilities create a domino effect that brings in a lot of people to the hospital and ultimately brings big profit for the hospitals. While it may not be moral forbidden for doctors to provide aesthetic services, I find it ironic that the healers are inducing mental instability by doing their job.

Dentistry is similar—dentists work in between basic healthcare and aesthetic services, and the problem is that aesthetic services are purely business. While the patient may feel good about their appearance after the treatment, the procedure of teeth whitening offers no good for the patient’s health. In fact, it may deteriorate their health in the future due to the side effects of hydrogen peroxide. Just like the situation with Rich and Dr. Kim in the introduction, marketing aesthetic care may induce skepticism even though the dentist has good intent—is my dentist really caring for my health or is he trying to get money off from my vulnerability? A dentist selling teeth whitening services exhibits an image of a businessmen over a healthcare provider, and therefore, any work that the dentists do seem as though they are for profit instead for one’s health, breaking the patient’s trust in their dentist.



Nonetheless, marketing teeth whitening effectively grabs attention and brings people into dental offices. Just like Amber from the introduction, people with dental anxiety may visit dental office for an aesthetic procedure and ultimately receive the basic healthcare they need. What should dentists prioritize: Patient-dentist relationship or bringing as many patients into a dental office? I argue both, and it all depends on the virtue of the dentists and their effort to convey to the patients that health is the utmost importance in their practice. There are two ways for dentists to emphasize both bodily and mental health over profit at their office (while still earning good profit): 1) Dentists should not actively encourage teeth whitening, and only provide aesthetic service at the patient's request. Therefore, no oral offering is unfavorable, while visual advertisements, such as posters, may be acceptable. 2) While they may advertise teeth whitening services, side effects must be included in these advertisements, so that the patients know of the health consequences. These side effects should be easily noticeable and clearly readable by the patients (if they recognize a poster advertises for teeth whitening, then they should also be able to read the side effects at the same spot). Pamphlets should be distributed to assure that the patients know of these side effects in detail, and the dentists ought to verbally give another reminder of these side effects before the treatment proceeds. With these measures to protect patients' health, teeth whitening is not used as a source of profit, but as a source to bring more patients into dental offices for a basic checkup.

Marketing in dentistry can be ethical when the dentists' utmost priority lies on the good of the patients and their health. While the business cannot be ignored, if the dentists are genuine to the people they work with, more patients would trust their dentists and return back to their office, allowing them to make enough profit for living. In the end, what is most ethical is what advocates for the patients' wellbeing. In order for dentistry to promote this good, it ought to

reach out to the public through effective and educative advertisements, while explicitly prioritizing health over aesthetics and money.

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