

Does a Clinician's Gender Influence Treatment Decisions?

By Adela Laverick

Within medicine, it is now recognised that clinical gender may influence the approach to treatment. We have evaluated one of the few dental papers that explores this issue: 'Does a Clinician's Gender Influence Treatment Decisions? Zitzmann et al. Int J Prosth. 2011;24:507-514 'and found some interesting facts.....

Study Aim

The aim of this study was to evaluate gender differences in clinicians' attitudes to treatment planning decisions for periodontally involved maxillary molars.

Materials and Methods:

A questionnaire was sent to 969 Swiss and German dentists, with a response rate of 35.1% (340 questionnaires). The questions were divided into 4 sections:

- 1. Clinicians' demographic data and type of speciality, and scope of practice.
- 2. Experience in dental implant, sinus graft and periodontal surgery.
- 3. Treatment planning of 4 different clinical situations.
- 4. Attitudes to tooth prognosis.





Discussion:

There is a lack of research on this topic within dentistry. However, within the limited research that we do have there is a recurrent theme: women are less likely to carry out implant surgery, and in particular, the more complex surgical procedures.

"With an increasing number of women practising dentistry and a potential feminisation" of our healthcare, we need to be aware of the impact of these changes on healthcare provision and the impact on patient care."

Results:

The paper demonstrated similar decision making regardless of gender for the specific clinical dilemmas tested and concluded that this indicates a similar knowledge within both groups. Therefore, within the limitations of this paper, there was no difference between the genders for treatment planning decisions. However, the results of the survey also revealed some very interesting facts regarding other differences between the genders.

"It found that far fewer women reported placing implants than men, and the women who placed implants, placed far fewer per year than the men."

In addition, the women were less likely to perform sinus grafts or periodontal surgery. Not surprisingly, the female clinicians were more likely to refer for implant treatment.



Within the medical field

There is more published research on the on this topic and this paper cites some of these. Within medicine, there has also been an increase in the number of women practicing medicine, but women are underrepresented in both medical and surgical specialities. Women within medicine are also more likely to work as general practitioners or choose specialities that are more care-giving and less technical. Presuming that similar factors will be influencing the career decisions of women within medicine as would apply to dentistry, it is not surprising that we are seeing a very similar trend within dentistry. Women within dentistry appear to be favouring certain career paths and skill sets over others, with the result that women are underrepresented in some areas-including implant dentistry.

What should be done?

We need to ensure that the needs of both female dentists and our patients are being met. It is a critical that the profession supports women to ensure they are not limiting their practice for the wrong reasons, and that women feel it is possible for them to practice implant dentistry and to gain the more complex surgical skills if they wish to do so. The profession also needs to ensure that women are actively involved in implant based postgraduate dental education so that they are able to provide their patients with appropriate advice when considering referral for implant treatment and to be confident with the long-term maintenance and supervision of completed implant treatment.