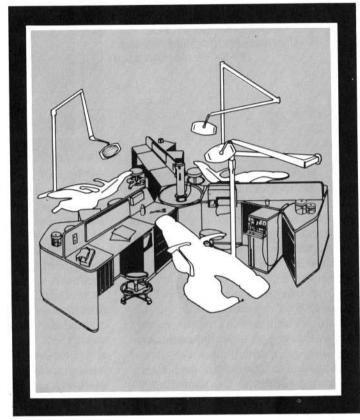
With this fall issue, the Sooner Magazine begins a series of articles concerning the various schools and colleges at the University of Oklahoma. Our first college to be covered is the new OU School of Dentistry. If you are interested in a particular school or college, please write the editor of this magazine.





Filling the Dental Gap

Pearly, healthy, even teeth are rarely one of Mother Nature's blessings but rather the result of constant dental care by the individual and professionals. In many rural areas of Oklahoma professional care is often difficult to obtain.

Oklahoma rates well below the national dentist-to-population ratio of one dentist to every 2,000 people. In Oklahoma the ratio is one dentist to 3,000, and in several rural counties the ratio is as low as 1 to 7,000.

For over 20 years the need for a school of dentistry in Oklahoma has been discussed. Development of such a school was delayed due to a relatively small population, the decline of the state's economy during the 1930s and the ability of Oklahoma students to find places in dental schools throughout the United States.

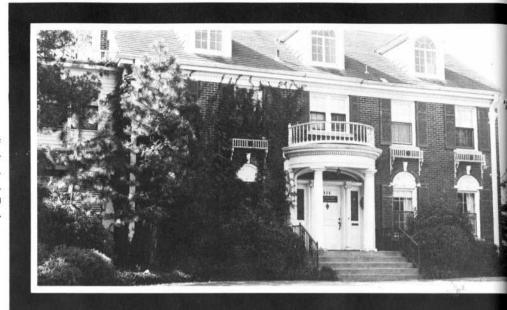
But the needs and resources for a school have changed markedly in recent years. An increasing population, an improved economy, a worsening dentist-to-population ratio and the increasing difficulty for Oklahoma residents to secure places in schools of dentistry are among the reasons the Legislature and the Oklahoma State Regents for Higher Education

authorized the establishment of a school of dentistry.

In 1966 a Dental School Planning Committee was appointed by the Oklahoma State Dental Association. The committee has worked since that time with the State Regents, the Legislature and administrative officers of the University and of the OU Medical Center in Oklahoma City to develop the plans for the school.

The appointment of a dean of the School of Dentistry and a small corps of faculty is due largely to the impetus of Dr. James L. Dennis, former executive vice president for Medical

The present School of Dentistry is located in a cozy brick house at 636 NE 14 Street in Oklahoma City. Permanent facilities are soon to be constructed.



Center Affairs. He believed that the Medical Center should become a health center for Oklahoma, encompassing the full range of health care services and participating in personnel education.

The first class of 24 students will be admitted to the School of Dentistry for the fall semester of 1972. Twenty-four students will be admitted for each of the first three years or until the permanent quarters are completed, at which time the school will expand to admit 72 in each class.

"It was felt that by admitting 72 students each year for 10 to 15 years, Oklahoma's dental manpower level would be raised to a reasonable figure," explained Dr. William E. Brown, dean of the school.

The School of Dentistry is now located in an old house at 636 NE 14th Street in Oklahoma City. The cozy brick house images the warm and open personality of Dr. Brown — a man who is proud of Oklahoma's innovative school and who devotes his time and energy to developing and promoting it.

Permanent facilities will consist of a third-floor addition to the new Basic Science Education Building and a clinic which will be built east of the School of Medicine. The addition to the Basic Science Education Building will be used for basic science instruction, while the clinic will be used for patient or clinical sciences.

Brown expressed his belief, and that of others, that the School of Dentistry will offer many advantages to the people of Oklahoma.

"In addition to increasing the number of dentists in Oklahoma, having a school of dentistry in the state will tend to increase the general quality of dental care. A dental school offers the advantage to practicing dentists and dental students of immediate feedback from research into the dental educational process as well as actual dental practice. As newly trained dentists move into communities, they should have a positive effect on established community practitioners, familiarizing them with new methods and techniques," stated Brown.

Great pressure exists for all members of the medical profession to continue their professional education. Having no dental school in Oklahoma has made it necessary for professionals to travel great distances at great expense of time and money to attain this continuing education. On September 17 the School of Dentistry began offering for the 1971-72 academic year eight short courses for Oklahoma dentists.

"Admittance to dental schools is now a serious problem for Oklahoma students, and it is becoming worse. Without a dental school our state simply can't provide good, total health care," Brown emphasized, "and Oklahoma will be sitting on the outside."

Schools which have traditionally admitted Oklahoma students, such as the University of Missouri at Kansas City and the University of Tennessee, now have more responsibility as state schools to take resident students. This

year both Kansas City and Tennessee admitted only four Oklahoma residents.

"In 1969, 62 Oklahomans were admitted to first-year dental classes around the country," Brown said. "In 1970, only 36 Oklahoma residents were admitted — a drop of roughly 40 per cent in one year."

Brown explained that the difficulty is definitely not a matter of quality students but rather of compeition. "The national ratio for dental school applications is 2.4 applicants per position. In 1969 and 1970 between 160 and 180 Oklahoma students applied for admission to dental schools. This is proof of the well-qualified students available in Oklahoma. However, I see nothing but a decreasing opportunity for Oklahoma students' acceptance into dental schools in other states."

Resident students at the OU School of Dentistry also will save money. At \$374 a semester, the tuition is low compared to other dental schools. And rather than buying all their instruments, students will be able to rent many of them, which will cut their instrument cost almost in half.

Members of the admissions committee of the School of Dentistry began in September interviewing applicants for the first class of future dentists. The top 24 applicants will be chosen on the basis of four qualifications: (1) pre-dental performance, (2) scores on the American Dental Association Admissions Test, (3) recommendations from pre-professional counselors or science teachers and



Dr. William E. Brown, dean of the School of Dentistry is a man who is proud of Oklahoma's innovative school and who devotes his time and energy to developing and promoting it.

(4) personal interviews.

Oklahoma students, almost exclusively, will be admitted the first three years. At a later date approximately 10 to 15 per cent out-of-state students will be admitted. This figure for out-of-state admittance is based on the theory that while some resident students will leave the state, other out-of-state students will remain in Oklahoma.

Brown stressed that the School of Dentistry would make a point of seeking women to enter the School of Dentistry. "We have been wrong in dissuading women from entering the dental profession. Our culture hasn't lent itself to women in dentistry; consequently, less than two per cent of all dentists are women. Females can be fine professionals," he said.

"We also will be seeking minority students for the school. This is a difficult area, because we are uncertain about admission standards for the minority groups since they test differently on aptitude tests. However, this is more a fault of the tests than the students. As a possible solution, we will offer a pre-admission program during the summer," continued Dr. Brown.

The school will offer several programs which will differ from those offered by the traditional and many of the newer schools of dentistry.

In the older schools, students are required to have two years of basic sciences before they have any patient contact; however, early patient contact will be an important aspect of the OU dental curriculum. In this newer method of learning, students learn to see early a correlation between the basic sciences and clinical sciences.

"We will also be teaching our students the new concept of group practice, so each student will learn in a simulated group practice system. Medicine is practicing more and more in groups, but dentistry has moved very slowly into this area. Students can't be motivated to move from solo practice to group practice without instruction; therefore, we will show them how," stated Brown.

A major component of the curriculum will be devoted to the behavorial sciences, an area which has been included in dentistry programs only in the last few years.

"Through this program we hope students will learn to understand themselves, their colleagues and patients," said Brown. "Students will learn to read the signs and symptoms of the patient who is uneasy and explain the procedures to them."

Through acquired field experience within the ecology division of the curriculum, students will have an opportunity to learn about various population and social groups, their health needs and desires. Brown hopes that by familiarizing the students with various groups, they will be more willing as professionals to help these groups and to participate in public clinics.

"Our major goal in the behavorial sciences program," Brown explained, "is to help future dentists develop attitudes of flexibility, so they will be willing to listen objectively and adapt to changes."

Perhaps the most innovative aspects of the school are the modular units used as clinical operatories. These efficient facilities, different from those used by any other school, are designed so that a student who needs help will have a faculty member at his side in seconds. The modular units are conducive to patient comfort and happiness and are designed in order that students can learn to work in multiple operatories.

There are now plans for a national health insurance which will cover dental care. Already in operation are employee benefit programs which provide part of the cost for dental care.

"Once part of the cost for dental care is wiped out, a major barrier to dental care will be eliminated, and we will move into an era where more and more people will demand dental care. Oklahoma wants and needs a dental school, for if we don't produce our own dentists, Oklahoma will fall further behind in the area of health care services," concluded Brown.

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