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### Commentary

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# What is Dental Hygiene?

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 $\mathbf{M}$  any dental hygienists have become involved in oral-myofunctional therapy. The purpose of this article is to introduce the non-dental oral-myologist to the profession of dental hygiene.

In order to abate possible controversy regarding the qualifications of the dental hygienist becoming a certified oral myofunctional therapist, this review of the profession of dental hygiene is offered.

In 1845, and editorial appeared in, "The American Journal of Dental Science." Directed to the dentist, it deplored the fact that the "hygiene of the teeth" was, "almost wholly neglected."

The first evidence of the desire on the part of the dental profession to render a more complete service to the patient both from a technical as well as an educational and preventive point of view, was in 1944. Dr. David D. Smith, of Philadelphia, was so convinced of the necessity of preventive treatment in the "reduction of decay and the general betterment of mouth health" that a prophylactic program was instituted for patients in his own practice.

One of Dr. Smith's early followers, Dr. Alfred C. Fones, undertook the training of his own dental assistant, Mrs. Irene Newman in this preventive service. Thus, Mrs. Newman was to become the first dental hygienist.

In order to staff a preventive clinic in Bridgeport, Connecticut, Dr. Fones founded and sponsored the first formal course of professional study in 1913. This first course for training dental hygienists emphasized the important role of patient education.

The first dental hygiene school was established at Hunter College in 1916. Today, all dental hygiene schools and its program curriculum, must meet the requirements and standards dicated by the American Dental Association's. Council of Dental Education for accrediation.

The dental hygiene curriculum is science oriented and difficult. To predict the probable academic success of the dental hygiene applicant, a battery of pre-tests, the "Dental Hygiene Aptitude Testing Program," was established by the American Dental Hygienists' Association in 1957.

The American Dental Association's, Council on Dental Education, believes that the dental hygiene curriculum should not only prepare the graduate for competence in the profession of dental hygiene, but also should be balanced between the liberal arts and dental sciences.

The liberal arts curriculum includes, English and elective courses in the Humanities. Subjects such as English, speech, psychology and sociology, prepare the dental hygiene student to communicate effectively with patients and other health professionals. Volume 1 Number 3

The biomedical science curriculum includes the following: human anatomy, human physiology, histology, embryology, chemistry, biochemistry, microbiology, dental anatomy and oral pathology.

The dental hygiene clinical curriculum includes: dental radiology, periodontology, nutrition, oral therapeutics, dental materials, community dentistry, and clinical dental hygiene.

The American Dental Hygienists' Association, together with the American Dental Association, continually add new concepts and modify curriculum.

Dental hygiene educational programs are institutions such as dental schools, fouryear colleges and universities, and comprehensive two-year colleges.

At the two-year college level of instruction, the dental hygiene graduate earns an Associate of Science Degree or Certificate. Associate degree curriculum content is designed to provide maximum opportunity for the dental hygiene student to continue formal education towards a baccalaureate degree.

Baccalaureate degree programs incorporate courses which faciliate admission to and advancement in health science disciplines relevant to dental hygiene. Additional dental hygiene courses pertain to dental hygiene public health, dental hygiene education, and dental hygiene research.

The dental hygienist is a licensed dental professional. In order for a dental hygienist to obtain licensure to practice, National Board Exams as well as individual State Board Exams must successfully be passed. The National Board Dental Hygiene Examination was inaugrated in 1962, and is conducted by the Council of National Board of Dental Examiners of the American Dental Association. The practice of dental hygiene in any state is a privilege granted by the state, and is subject to the laws of the individual state. Each state licensing board has the responsibility and authority for evaluating the competence and qualification of those candidates seeking licensure.

State laws are being reviewed and updated to legally allow the dental hygienist to perform auxillary services for which formal education has been received. These functions are collectively referred to as, "expanded functions." Many states now authorize dentists to delegate to the dental hygienists, new and additional tasks which were previously performed only by the dentist.

Today's dental hygienist is a leader—a person willing to accept responsibility and extend care to people that the dentist, because of their limited numbers, cannot possibly provide. The basic role of the dental hygienist has always been to aid the dental patient in attaining and maintaining optimum oral health. Oral-myfunctional therapy training should therefore, be made available to the dental hygienist.

#### Summary

Dental hygienists are specially educated persons whose primary concern is the prevention of oral disease. The profession of dental hygiene was not initially limited to the cleaning of teeth and the dental hygienist was not—and is not now, just a tooth cleaner.

The role of the dental hygienist in oral-myofunctional therapy may be viewed by some as precarious. It is the responsibility of the dental hygienist to obtain specialized training in oral-myofunctional therapy before attempting to obtain therapy into the dental health care program. Total understanding of the concepts and methodology of oral-myofunctional therapy can only be achieved by extensive specialized training. 120 Yurtis

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