Oral medicine (stomatology) across the globe: birth, growth, OrasMark and future

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Oral medicine (stomatology) is a recognized and increasingly important dental specialty in many parts of the world that recognizes and fosters the interplay between medical health and oral health. Its dental activities rely greatly on the underlying biology of disease and evidence-based outcomes.

However, full recognition of the importance of oral medicine to patient care, research, and education is not yet totally universally acknowledged. To address these shortcomings, we outline the birth, growth, and future of oral medicine

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Statement of Clinical Relevance

To outline the importance of Oral Medicine to patient care, research and education globally and the increasing relevance to aging and immunocompromised populations. globally, and record identifiable past contributions to the development of the specialty, providing an accurate, unique, and valuable resource on oral medicine. Although it was challenging to gather the data, we present this information as a review that endeavors to summarize the salient points about oral medicine, based on MEDLINE, other internet searches, communication with oral medicine and stomatological societies across the world, the web page http://en.wikipedia.org/wiki/List_of_dental_organizations, and discussions with a wide range of key senior persons in the specialty. (Oral Surg Oral Med Oral Pathol Oral Radiol 2016;121:149-157)

Oral medicine, originally called *dental medicine* and sometimes now termed *oral and maxillofacial medicine* is, in the Ibero-American world and in Southern Europe, often termed *stomatology*. Oral medicine often involves chronic, serious, painful, life-changing, or even life-threatening outcomes. It is a relatively young dental specialty in many countries, whose scope of practice is typically to provide diagnosis and nonsurgical care to patients with a variety of conditions affecting the orofacial region, whether local disorders or conditions related to systemic diseases.

Oral medicine also works closely with other dental specialties such as geriatric dentistry, oral surgery, periodontology, pediatric dentistry, and special care dentistry, and with medical specialties, especially dermatology, gastroenterology, hematology, hepatology, imaging, immunology and infectious diseases, maxillofacial surgery, neurology, oncology, otorhinolaryngology, pediatrics, pathology, psychiatry, psychology, rheumatology, and transplantology. Some of these medical specialties also have dental representation such as oral pathology (oral and maxillofacial pathology) and oral radiology (oral and maxillofacial radiology).

Oral medicine generally has active research components, often interacting with other dental specialties and special care patients, and also often interlinking with pathology, medicine, and pharmacology. A strong educational component is designed to highlight the interactions of oral and general health and to emphasize that dentistry is not simply a technological vocation.

It is challenging to provide a fully-balanced picture of the development of oral medicine because memories of past developments fade and there can be negationism, but this review endeavors to summarize the salient points in the local and global development of clinical and research areas that fall within the remit of oral medicine. It amounts to a complex and varied picture, and it particularly may be regretted that expressed respect for the work of some past giants and academic leaders in the field, including but not limited to Robert Bradshaw, Lester Burket, Rod Cawson, Sam Dreizen, David Grinspan, Robert Gorlin, Samuel Miller, Jens Pindborg, Martin Rushton, Irwin Ship, Sol Silverman, and Kurt Thoma, who stimulated the interest of many younger (early-career) colleagues, nowadays appears somewhat lacking (e.g., $Guralnick^{1}$) or overlooked. Many advances in oral medicine have been made through the clinical work, educational activities,

and publications (papers, chapters, books, electronic media) of the many interested colleagues across the globe, but it is impossible to completely document. A great deal of other useful information in this regard, however, can be found at http://www.oralpath.com/OralPathOLD2.htm² and http://www.maxillofacialcenter.com/JBCV/bouquotcv.htm.³

BIRTH AND GROWTH

Leaders in oral medicine have been instrumental in dental education since the 1920s. One of the early pioneers in the field was in the United States, where Francis P. McCarthy was one of the first to meld the knowledge of dermatology and pathology to provide care to patients with complex oral mucosal manifestations. Dr. McCarthy was also the first to introduce oral medicine lectures at a dental school (Tufts), in 1925.⁴

Subsequently, the field of oral medicine grew with the teachings of Dr. Samuel Charles Miller at New York University in the 1940s and 1950s and flourished under Dr. Lester Burket at the University of Pennsylvania, Dr. David Mitchell at Indiana University in the 1960s and 1970s, and Dr. Sol (Bud) Silverman, Jr. (University of California San Francisco), whose presence spanned 50 years in the field. Their teachings, publications, and graduates helped kindle and intensify interest in the field of oral medicine. Thus, although oral medicine is a relatively young specialty, a recent international survey found that 33 of 37 countries surveyed (89%) reported oral medicine as a recognized specialty, a distinct field of study, or an actively developing specialty/distinct field of study.⁵ In addition, at least 22 countries now identify as having postgraduate programs in oral medicine.⁶

Dr. Samuel Charles Miller was chairman of periodontology and oral medicine at New York University College of Dentistry, New York, from 1934 to the 1950s. In 1945, Dr. Miller and his university colleague Dr. Sidney Sorrin formed the first large oral medicine society in the world, termed the Academy of Dental Medicine. Dr. Miller was the first president of the academy, now called the American Academy of Oral Medicine (AAOM). The academy was incorporated in 1946, and the first edition of the academy's journal (*Journal of Dental Medicine*) was published under Dr. Allan N. Arvins that same year. The following year (1947) the inaugural meeting of the academy was held. As the academy grew, Dr. Miller encouraged Download English Version:

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