DENTISTRY IN HUMANITARIAN AID MISSIONS: ETHICAL AND MEDICAL-LEGAL ASPECTS

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Humanitarian aid is a sort of solidarity generally intended for third world countries and victims of war or natural disasters, and whose main objectives are to save lives and to alleviate suffering, along with respecting human dignity and improving the quality of life of people with no health care services. The phenomenon has undergone significant growth in recent decades and now finds itself in a situation, where humanitarian aid professionals, including dentists, need to take steps ahead to understand the challenges to face. The authors have examined the issue of dentistry in humanitarian aid missions, firstly indicating their objectives, which are:1. Reduction of oral pathology.2. Promotion of training of local staff.3. Construction of new health centers, or reorganization of the existing ones, for prevention purposes and professional therapy.4. Promotion of oral hygiene educational programs in schools.5. Documentation and promotion of the culture of cooperation and/or volunteering. Implementation problems are highlighted, related not only to the scarcity of economic resources available and the absence of a "tradition" of disease prevention in many developing world countries, but also to the obstacles of a cultural, linguistic, access to care, religious practices and rituals. Dentists must in fact try to do their best in the reality in which they find themselves, taking into account the peculiarities of the different cultures, whilst pursuing the real interests of the patient. The issue of consent, for example, often presents in quite a different way than we are used to in the West: sometimes there is no experience of "paper" contracts, sometimes it is the village chief or the family head who takes the decisions for the members of his community / family. It is often the father or a male member of the family who makes decisions relating to females’ health. Decisions relating to the choice of treatment can also be complex; it is not uncommon, in fact, that a dentist is called to treat patients who have undergone long, tiring, difficult and sometimes dangerous journeys, often on foot, to reach the first place where it is possible to undergo treatment; choosing therapies which must be completed quickly (to allow the subjects to return to their villages as soon as possible), rather than other kind of better and/or more suitable treatments. The reduced availability of materials and techniques limits greatly the range of options which can be offered by the professional, who often must perform treatments other than the ideal ones. The need for triage and choice, due to the reduced availability of resources, and the consequent need for the assessment of each individual situation, can lead to therapeutic decisions which would be considered unacceptable in different situations. The authors analyze ethical and medical-legal issues, based on the activity of dentists in humanitarian aid missions, particularly with regard to informed consent, the choice of treatment and clinical trials. In
relation to these issues, there are, at an international level, a number of documents which state the fundamental ethical principles which should guide the practitioner’s practice, keeping firmly in mind the needs of the developing countries, the vulnerable indigenous communities and populations. However in daily practice it is not always possible to operate in accordance with these indications.

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