

A DENTAL MISSION IN TAIWAN*

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The story of this mission to Taiwan by a public health dentist makes stimulating reading.

In August 1963, I left the United States for Taiwan to serve a short term as a dental missionary with the Presbyterian Church. I was surprised, on arrival to find that I was the first American dentist to go to the Republic of China and work with the people of that country. Taiwan is a beautiful subtropical island situated 100 miles from the coast of Red China. The island is 240 miles long, 90 miles wide and it sustains a population of about 12 million. It now is the seat of the Government of the Republic of China whose national capital is Taipei.

Some History

The dental history of Taiwan indicates how severe limitations have developed in the status of dentistry throughout the island. Dentists always have been respected members of society and capable of earning both respect of their communities and good incomes. During the Japanese occupation of Taiwan, prior to World War II, students who wished to study dentistry were sent to Japan to attend its dental colleges. Upon completion of their studies, these dentists returned to their homeland to practice—a procedure that appeared to work well until Japan entered World War II. A so-called dental vacuum followed from about 1940 to 1960. The Chinese in Taiwan had no dental schools and were unable to go abroad to study in Japan. After the defeat of Japan and the turmoil created by the Nationalist withdrawal to Taiwan, it became impossible for students to leave the island for study. There was no opportunity for new advances and progress in dentistry. Not until 1955 was a school of dentistry founded at the National Taiwan University. In 1957 another School of Dentistry was begun at the Kaohsiung Medical College. Since their founding these schools have been faced with formidable problems, which resulted in the graduation of but 10 to 15 students each year. Most of the graduates leave the island for post-graduate or graduate study abroad. Another problem, obviously, has been the number of students who preferred to attend medical school because of the higher status and income of a physician. Another problem is that the dental schools, in view of educational and financial limitations, have been unable to modernize staff and facilities. Most of the professors who teach in the schools, for example, have been trained in Japan prior to 1940, and hence are unaware of current methods and technics. Today there are very few professors in dental schools who have received recent postgraduate or graduate education abroad.

Current Situation

There now are five dental schools in Taiwan and one of them, only, has graduated a large number of dentists. It is the Chung Shan Dental College

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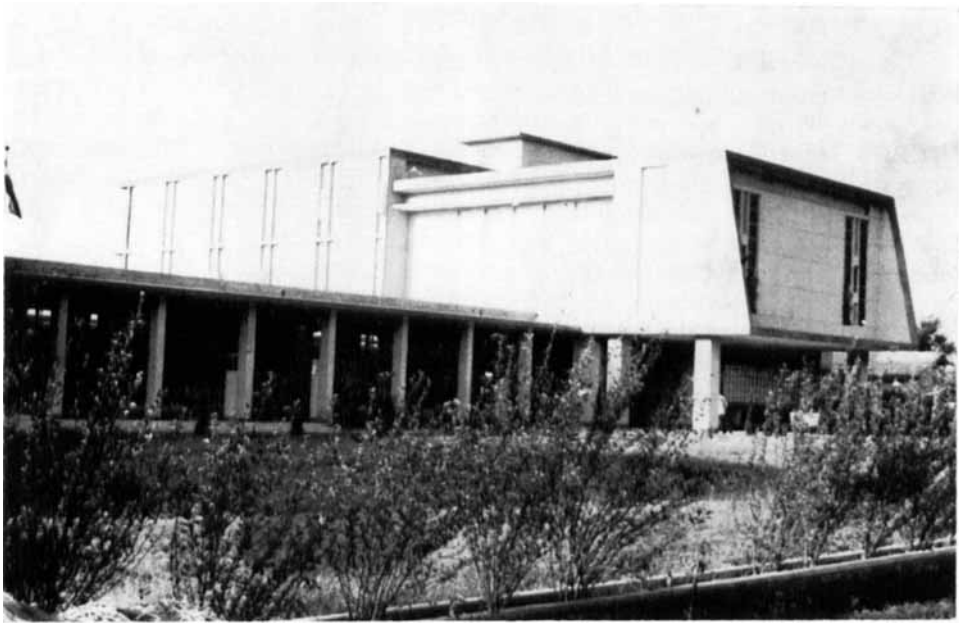


Fig. 1. Chung Shan Dental College in Taichung, Taiwan

located in Taichung which graduates about 100 dentists each year. This school, however, has been confronted by governmental regulations in gaining recognition or approval of its curriculum. No easy solution to dental education seems to exist in Taiwan. Only after many more years pass and young dentists return from abroad, with a postgraduate or graduate education, to teach in the schools, can improvement and modernization of dental education be expected.

Currently, there are approximately 600 licensed dentists and about the same number of unlicensed dental technicians who practice in Taiwan—a country of over 12 million people. The dentists practice largely in the cities while technicians provide dental treatment in the outlying areas. Many technicians perform extractions, insert restorations and make dentures. Itinerant “dentists” travel from village to village and sell and fit so-called gold crowns on the teeth of the ignorant and uneducated people. It would be accurate to say that much of the treatment provided by these unlicensed persons causes more harm than good to the patient.

The National Government has been attempting to correct many of the problems but still is limited by funds and personnel. Experience shows that the government would welcome cooperation in dentistry as evidenced by an open invitation to American dentists to teach at the National University. A governmental sponsored health insurance is available which includes dental care free of cost. The government provides a small program of dental public health by placing a dentist on the staff of most of the provincial hospitals scattered throughout the island. Finances again limit the scope of treatment, and dental personnel usually are poorly trained since they are educated along traditional lines.

My Activities

Upon my arrival in Taiwan, I spent three months in the intensive study of the local Chinese dialect and used some of this time to evaluate the dental situation and decide where I would operate and exactly what I would do. I concluded that I had come to Taiwan to help improve the oral conditions of the people and to do so by teaching and training the indigenous dentists. A great satisfaction came from the response of students who were eager to know about, and learn how to perform current methods. Initially I decided to devote at least half of my time to the largest dental school of the Island. It is located in Taichung and I proposed to participate with formal lectures, demonstrations and clinical instruction. The response of the faculty and students was overwhelming. As the only Westerner in the entire School, I soon found myself a true part of the faculty, even though little or no English was spoken. Three days of my working week were spent as a teacher of courses in exodontics, endodontics, oral diagnosis, and dental public health.

The opportunity to share my knowledge of dentistry with the Chinese students seemed like opening a window for them to see new aspects and activities unknown to Chinese dentistry. Clinical demonstrations in the Dental School were limited by its poor facilities. Lack of adequate instruments, materials and sterilizers led me to the other phase of my activity, which was clinical practice at the 250-bed Christian hospital, located in Changhua about 15 miles south of Taichung. Here, I organized a teaching dental department which included a complete two-chair office with x-ray and high-speed equipment. At this hospital I established a residency for training young graduates from the established dental schools of the Island.



Fig. 2. Demonstration to a group of students in the Dental School's clinic.



Fig. 3. Entrance to the Changhua Christian Hospital where a modernized dental clinic was organized.



Fig. 4. The Dental Department (left to right), Miss Wu, dental assistant, Dr. Chwang, Dr. Bagramian, Dr. Lin, Dental Resident

During my stay in Taiwan, two young dentists were trained in the latest dental skills in this manner. The department also was used for the training of dental assistants. Another fortunate circumstance for the department at the hospital was the constant availability of consultation with other departments such as obstetrics, surgery and internal medicine. The dental residents found this phase of experience extremely beneficial. My role in the department was to teach and assist the residents to carry out their practice. The well-equipped clinic also furnished an ideal resource for clinical demonstrations to small groups of dental students from the dental school in Taichung. Procedures such as the surgical treatment of root canals or removal of impacted third molars usually were performed in the presence of dental students.

Still another aspect of my activity was participation in the mobile clinics which traveled to remote areas of the Island where medical and dental facilities were absent. The clinics visited poor fishing villages along the coast, as well as the aboriginal tribes up in the mountainous areas. The team, consisting of both Chinese and American dentists and physicians, would travel into these remote areas, live for two to three days with these isolated people and provide emergency dental and medical treatment. Patients with serious and difficult problems were referred to the well equipped hospital. During these trips, I routinely would extract about 200 teeth while using just a wooden chair, sunlight and plenty of local anesthetic.

A Prognosis

What about the future? During my 2½ years of activity in Taiwan I developed a love for the Chinese people and seriously attempted to examine their dental problems. No doubt exists that there is a great need for more dentists in Taiwan. Even a more important factor for future oral health is to produce dentists who have been thoroughly educated or at least exposed to



Fig. 5. Aboriginal mountain boy carrying a baby on his back.



Fig. 6 Typical dress of a mountain woman.

current methods and technics of practice. The established dental colleges need modernization and proper equipment. A great effort needs to be put into public health to stimulate the prevention of oral diseases. A real hope lies in the preparation of young dentists as teachers. Only after many younger dentists return from graduate education abroad and begin teaching in their dental schools can there be any great step forward. Dental education in Taiwan could be improved by any form of additional training abroad either undergraduate or graduate.

The key to the solution of Taiwan's dental problems could be the creation of a partnership with fellowmen across the world. The Chinese are willing and anxious for help from the United States which would provide a truly rewarding experience for any dentist who volunteered. My personal feelings on leaving the United States was that I was giving away much by going to Taiwan. As I returned home I realized that the Chinese had given me much more than I ever could give them, because I experienced a feeling of sharing dental knowledge and skill with a people so eager to accept what I had to offer.