

# E D I T O R I A L

**O**n the influence the weather on our beaches has on the behaviour of our patients.

Over the last few months several natural catastrophes, notably the earthquake in Haiti and floods in the Vendee, and the consequences that have followed them have monopolised our attention.

In the light of published reports about these events, we can observe different reactions to them. While the inhabitants of Haiti accepted the unhappy state of affairs with an uncomplaining fatalism, our own Gallic compatriots turned bitterly against an all powerful State that seemed to have no idea about how to prevent the tempest, proclaiming, "They should have evacuated citizens at risk, they should have thrown up dikes, they should have forbidden construction of buildings in dangerous areas."

"All right," the state replied, "Let's demolish the threatened buildings. Let's indemnify the victims!"

"Ah, no," the administration responded, "We haven't been sufficiently inundated. Here I am and here I make my stand!"

And while these disputes were going on in France, the displaced persons in Haiti were thanking their lucky stars that they were still alive and didn't have the slightest idea what "indemnisation" meant.

What does all this have to do with orthodontics? Nothing.

But if we look at these situations more closely, we see that a people insisting that government insure them against all the risks of life is a lot like the demands our patients make of us.

We already have to justify the relatively small payment we receive for the extensive health services we provide, but in addition we have to work within these constraints:

- because it's a fact of life that patients forget their appointments, we have to remind them with a telephone call or an SMS text message;
- because parents never come along for their childrens' appointment, we have to telephone them, too, to keep them abreast of treatment progress;
- because wearing removable appliances "interferes with family communications," we have to find therapeutic substitutes for them;

– because the patient has to resume practice on his trumpet, we have to bring treatment to a temporary halt even the patient and his parents had agreed at the outset they would make no such request;

– because the meat served in the school cafeteria is too tough, we have to find stronger bonding agents;

– because patients have to miss school for the long appointments needed for placement of appliances, they take advantage of that to seek greener pastures;

– but because it's orthodontics that begins to be a nuisance...

And if that weren't enough, there are always the bureaucratic complaint departments. That's what insurance companies were made for!

But it goes without saying, the lord be praised, that we also have patients who have confidence in us and to whom we are totally devoted.

And it also goes without saying that this brief diatribe results from a passing fit of bad temper and that the issues listed above passed through a partial information filter and are indisputably biased.

Which doesn't refute the great truth that we are all spoiled children and, by nature, untrustworthy.

Next time we shall talk about the eruption of a volcano with an unpronounceable name and how it affects the price of tooth brushes.

And we shall see that we have to take precautions, as a matter of principle.

F. Aloe-TAVERNIER