Clinical Dental Consultation Case Scenarios with the Theme

“Breaking Bad News”

Scenario 1:

This patient, Mr John Cowan is 55 years, married, have a daughter. He works as a tube driver in London. He has attended for treatment after being referred from the local GDP (General Dental Practitioner). You have carried out a full mouth inspection and discovered advanced periodontal disease.

Three teeth (the Upper Right 5 and 6, as well as the Lower Left 6) have 10mm pocketing and are Grade 3 mobile. All the remaining teeth have between 4mm and 8mm pocketing and three are Grade 1 mobile.

The patient has no current medical conditions and is not taking any medications. The patient smokes approximately 10 cigarettes a day, and drinks socially.

In your opinion the three most severely affected teeth should be extracted and replaced with prostheses. The long-term prognosis for the remaining teeth, without extensive periodontal therapy, is questionable.

**Conversation Starts:**

Dentist: Good morning, Patient.

Patient: Good morning

Dentist: How are you feeling today?

Patient: Not bad

Dentist: I understand you've been experiencing some issues with your teeth, particularly on the right side.

Patient: Yea! I've been having trouble with my teeth feeling loose, especially on the right side. It's been quite worrying, to be honest. Can't you just use some special glue or something to fix them in place?

Dentist: I wish it were that simple, Patient. Unfortunately, the looseness of your teeth is due to advanced periodontal disease. Do you know what it is?

Patient: No

Dentist: Basically, it happens when the gums and bones attached around your teeth start regressing or in other words decrease in size. This results in your teeth losing support and getting loose or mobile.

(Note: The students shall avoid using jargon and explain them for the patient to understand)

Patient: Oh! So what are you going to do to fix them?

Dentist: It requires more comprehensive treatment. Three of your back teeth, specifically the Upper Right 5 and 6, as well as the Lower Left 6, are severely affected and may need to be extracted.

Patient: Extracted? But I wasn't expecting that at all! Are you sure they can't be fixed in some other way? I really don't want to have any gaps in my teeth,

Dentist: I understand your concerns, Patient. Losing teeth can indeed be distressing, but in this case, the severity of the disease means that extraction may be the best course of action to prevent further complications. We can discuss options for replacing these teeth with prostheses to fill the gaps, maintain your appearance and oral function.

Patient: Umm! the idea of dentures is quite unsettling to me.

I see... But I'm worried about how it'll affect my appearance. Won't I end up looking much older without these teeth?

Dentist: It's understandable to be concerned about your appearance, but we'll work together to find a solution that preserves both your oral health and your confidence. With modern prosthetic options, we can minimize any changes to your appearance and ensure you have a natural-looking smile without you looking older.

Patient: But…Why it happened? I mean… I brush my teeth twice daily so what has just happened?

Dentist: One of the main reasons for people getting this disease is smoking. And you mentioned smoking approximately 10 cigarettes a day.

Have you considered cutting down on smoking? I mean it’s better to think about it for future prognosis of your teeth.

Patient: Well! I did not know that smoking could be that bad for your teeth. I mean, umm! I shall cut down on smoking ideally.

Dentist: That’s great. I can refer you to smoking cessation services to help you with this.

Also make sure that you continue brushing your teeth regularly twice daily.

Is there anything you not clear and want to ask me today?

Patient: No! I mean... It's just a lot to take in. I didn't expect all of this when I came in today.

Dentist: I completely understand, Patient. It's important to address these issues now to prevent further complications down the line. We'll work closely with you to develop a treatment plan that meets your needs and concerns every step of the way.

Patient: Thank you for explaining everything, even though it's not what I wanted to hear. I appreciate your honesty.

Dentist: You're welcome, Patient. We're here to support you throughout your treatment journey. Let's work together to improve your oral health and overall well-being.

**Conversation Ends**

# Scenario 2:

You are observing clinics in Oral Medicine.

This patient, Patient is 55 years old male working at a construction site. He recently remarried and have 3 (grown up) children, with his previous wife. He attended the oral medicine department a week-ago after referral from their GDP. The GDP had noticed an area of erythroplakia (red patch) on the right buccal mucosa.

A biopsy has been performed and this confirms grade 3 squamous cell carcinoma (tumour/cancer). The lesion is bigger than 4cm (T3) but there is no lymph node involvement apparent on physical examination. The patient will require further tests to explore whether there are any secondary sites.

The patient smokes approximately 20 cigarettes a day (rolls own) and reports drinking ‘most days but not to the point of getting drunk’.

The patient has re-attended today to be informed of the results of the biopsy.

**Background about patient symptoms and treatment:**

About three weeks ago he went to his Dentist because he had lost a filling on his left side. He had been chewing on his left side a lot because he had an ulcer on his right cheek – the ulcer was very sore and had been going on for a few weeks. The dentist he saw had done a quick check up and told the patient that he wanted him to go to Guy’s Hospital to get someone to look at the sore on his cheek. He also fixed his tooth which has been great ever since.

The patient came to Guy’s about two weeks ago and there was a lot of waiting around, he saw a doctor very briefly. They sent him for a biopsy ‘to find out what the ulcer is’ – that really hurt, and his mouth was extra sore for ages afterwards. In fact, he thinks it has felt worse since the biopsy.

The patient has tried saltwater rinses for the ulcer, chewing on the other side and sometimes put an ice cube there to make it less sore but nothing really helps. He thinks it is ‘just a really bad ulcer’ and is expecting to get some special antibiotics or mouthwash as its probably really infected.

When the dentist mentions about cancer he perceives it as a death sentence – he is convinced that it means he will die. He has several relatives who died of cancer. He was not expecting the diagnosis at all.

The patient is shocked and withdraw from the conversation (look away / head down/ silence) and don’t really hear what the dentist says after that. He asks the dentist “are you sure?” and “is it going to kill me?”

He is in a bit of a daze asking the same question twice even if it was answered, and he will need a very clear plan for what happens next.

**Conversation Starts:**

Dentist: Good morning, Can you please confirm your full name and date of birth.

Patient: Patient, 01.02.1969

Dentist: Thank you for coming. Do you understand why are you here today, Mr Blake?

Patient: Yeah! I understand I am going to get the results of my biopsy.

Dentist: And how have you been feeling?

Patient: Umm! I’ve been quite anxious since the last visit. I mean… “Biopsy” sounds scary though…. I hope it's nothing serious (nervously).

Dentist: Has someone come with you? I mean you can call the attendant in.

Patient: No, I am alone today.

Dentist: The results have come back. Well, I am afraid the news today is not very good for you.

The biopsy confirmed that the lesion on your right buccal mucosa is grade 3 squamous cell carcinoma which is a type of oral cancer.

Patient: (Stunned) What? A Cancer? Are you sure?

Patient: (After a moment of silence) I didn't expect any of this...I thought it was just a bad ulcer.

Dentist: Yes, I'm afraid so. The biopsy has confirmed it.

The lesion is larger than 4cm, which is quite big size. However, there's no apparent lymph node involvement showing the cancer is localised and has not spread yet which is good news.

Patient: (Head down, silent) Is it going to kill me?

Dentist: I understand this news is overwhelming, Patient. There are various treatment options available. With the right treatment plan, we can effectively manage this. It's important to stay focused.

(Note: Be realistic and do not share any false information).

Patient: (In a daze) What...what happens next?

Dentist: We'll need to conduct further tests to determine if there are any secondary sites.

We'll refer you to an oncologist who specializes in treating oral cancers. They'll discuss treatment options with you, which may include surgery, chemotherapy, or radiation therapy. We'll be with you every step of the way.

Patient: (Nods slowly) Okay...I guess I need to do whatever it takes to beat this.

Dentist: Absolutely. You're not alone in this journey. We'll ensure you have a clear plan moving forward and provide all the support you need.

I can call my colleague if you want to talk to someone else as well.

Patient: Stays silent.

No, I will talk to my wife when I get home.

And how long will it take?

Dentist: We will try to perform the tests asap, but it may take up to two weeks.

Patient: What? Two weeks? That’s very long.

Dentist: I understand Patient. But we must make sure that all the required tests are done in the best of your interest. We're here for you. Let's work together to tackle this head-on.

Here is an information leaflet about support groups and counselling services available.

It also has information about the importance of quitting smoking and reducing alcohol consumption to improve treatment outcomes.

(Patient listens attentively, although still visibly shaken by the news.)

Dentist: I understand, Patient. It's natural to feel overwhelmed. But now that we have a diagnosis, we can focus on getting you the best possible care.

Patient: (Nods) Yeah...I need to be strong for my family.

Dentist: Absolutely. And remember, we're here to support you every step of the way.

Dentist: Mr Blake, take your time, share it with your family and discuss with us about any concerns and questions in your mind in your next appointments. And it’s extremely important that you attend all your future appointments.

Patient: Thank you, I appreciate your honesty and support.

(He leaves the office feeling sad but hopeful and determined to fight his diagnosis.)

**Conversation Ends**