

# Want to date a patient? Refer first

SADJ June 2015, Vol 70 no 5 p222

S Naidoo

In dentistry, the dentist-patient interaction often represents a long-term, close personal relationship that involves friendship as well as professional responsibility. A professional (the dentist) has two interests to consider in any professional interpersonal dentist-patient relationship: the patient's and his or her own. The dentist has a duty to place the patient's best interest (welfare) before his or her own interests. The profession and society expect dentists to exercise superior knowledge and expertise and their professional judgment to promote the best interests of their patients. Dentists should not use their position of influence to solicit or develop romantic relationships with patients. The Health Professions Council of South Africa views sexual contact between health professionals and patients as unethical, legally perilous and as a cause for professional discipline. It is often viewed by the public as an outrageous transgression. The ethical considerations of personal relationships with patients are addressed in the HPCSA guidelines to good practice, Section 5.2 'Respect for Patients', which states that health care practitioners should "Avoid improper relations with their patients, their patients' friends and their patients' family members (for example, sexual relationships or exploitative financial agreements)".<sup>1</sup>

Romantic interests with current patients may exploit patients' vulnerability and detrimentally affect the objective judgment of the dentist. Professional judgment could be impaired if objectivity is lacking in the dentist-patient relationship. Respecting confidentiality and privacy is not only a legal mandate but also imperative to the trust that underpins the dentist-patient relationship. They are essential to all trusting relationships, especially in professional settings. This dynamic creates a power imbalance between dentists and patients that should not be exploited. A personal relationship with a patient could be seen as exploitation of the confidence that the patient has placed in the dentist and such confidence is related to trust. Patients expect that their dentist will place their interests above his or her own interests, will protect confidential information, will do no harm and will not abuse or misuse any information obtained during the course of the dentist-patient relationship. If the dentist wants to engage and explore a possible romantic relationship

with a patient, the dentist should consider terminating the dentist-patient relationship in an arrangement mutually agreeable to the patient and refer the patient to another dentist. Dentists should avoid creating perceptions of inappropriate behaviour. Dentists who receive romantic inquiries from patients should establish clear boundaries. If they are available and interested in the patient, dating should occur only after the patient has been referred to another dentist and a suitable time period has elapsed.<sup>2</sup>

## CONCLUDING REMARKS

Honesty, integrity and fairness are the cornerstones of accepted professional and personal behaviour. Combining professional and personal relationships is never without complications and the separation between the two is never mutually exclusive. There is often a degree of overlap. Dentists may also put themselves at risk in a dating relationship with a patient as there have been instances of their being sued for malpractice by jilted patients. Dentists and their team need to protect their roles as health care professionals. It is recommended that every practice has a written policy against dating patients. The policy should be applied universally and the dentist usually sets the example for the entire practice. If a dentist dates a patient, it sends a message to the rest of the staff that it is acceptable behaviour. A dentist who is serious about dating a patient should refer the patient to another dentist. If a staff member wishes to date a patient, the best practice is the same: the patient must seek dental care from another dentist. This can prevent a number of potential problems.

## References

1. Health Professions Council of South Africa (HPCSA). Booklet 1: Guidelines for good practice in the health care professions. Pretoria May 2008
2. Chiodo GT, Tolle SW. Sexual boundaries in dental practice: Part 1. *Gen Dent*. 1999 Sep-Oct; 47(5):456-9.

**S Naidoo:** BDS (Lon), LDS.RCS (Eng), MDPH (Lon), DDPH.RCS (Eng), MChD (Comm Dent), PhD (US), PG Dipl Int Research Ethics (UCT), DSc (UWC). Senior Professor and Principal Specialist, Faculty of Dentistry, University of the Western Cape, Department of Community Dentistry, Private Bag X1, Tygerberg 7505. E-mail: suenaidoo@uwc.ac.za.