

More control and better access in 2025?

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March 2025, we have a female president and her administration is full of commissions, including a Dental Commission whose members are mostly physicians and engineers, and a couple of dentists. The Dental Surgeon Association, the Scientific and Specialty Societies, the Chilean Association of Dental Education (ACHEO, for its acronym in Spanish), the Chilean Association of Dental Students (ADEO, for its acronym in Spanish) and other interest groups have managed to work coordinately (however unlikely it may seem). As a result of the work of these organizations we now have a National Proposal summarized in: controlling the number and quality of dental schools and improving access to dental care for the whole population.

Although in 2019 accreditation of dental programs was made compulsory, the number of dental schools continued to increase. The new dental schools belong to 'traditional' universities in the north, but most of them are the result of the national expansion project of Universidad San Jonas (USJ). In 2018 the USJ offered around 40 entry vacancies in its dentistry programs in each of its 52 campuses. In 2020 rumor had it that INCEPAC would do the same in all its campuses... in the end it was just a rumor. Nor was it surprising when in 2018 the first Special Degree Program in Dentistry (PETO, for its acronym in Spanish) was offered in a number of private universities and two traditional ones. PETO are 5-8 semester (2700 to 3600 hours) blended programs (evening + weekend + online) in which health professionals or dentistry technicians can be qualified as Doctor of Dental Surgery (DDS). Although PETO programs faced a lot of resistance initially by large groups of academics and students alike, since 2022 quite a few of these programs and their students are members of ADEO and ACHEO.

The demands of dentists to improve the access to healthcare for the whole population were partially resolved in 2013 by the FONASA Free Election Program for 12-18 year-old people and later with the extension of the coverage to all those under 20 years of age in 2018. Although these programs managed to reduce the rate of unemployment and underemployment of Chilean dentists, they eventually only stimulated the emergence of more dental schools and PETO programs, which took advantage of this public policy to make an advertising campaign never seen before. The advertising strategy was so successful that apart from doubling the number of places to study dentistry, the cost of tuition and fees increased by 30% over the inflation rate in just 3 years.

In the last 10 years, the annual entry vacancies for dental specialties

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(postgraduate certificates) increased from 600 to 5100, not including continuing dental education programs. On the other hand, fragmentation of dental specialties reached unprecedented levels. From the questionable “surgery for implants” and “orofacial aesthetics” they went on to the ridiculous “integral dental care for 12-18 year-old adolescents”, and the absurd “aesthetics and teeth whitening.”

In 2020, there were 30,000 dentists at national level. In 2025, statistics showed that there were approximately 42,000 dentists in Chile.¹ The unemployment rate is estimated at only 15%; underemployment still has no clear figures, but it is believed to be around 50%. As a result, all those involved in dentistry united and strongly demanded: “*more control and better access now*”.

It should be remembered that the Dental Commission was not created as a counterpart to the dental sector and its demands, but because of a number of irregularities in the payments related to the “free-choice modality” for people under 20 years old. These irregularities consisted mainly of fraudulent billing the state for treatments not performed, a fraud estimated at USD \$35 million in 2024 alone. However, the Commission has also considered in its work the demands and critical situation of dental professionals. The Commission has drawn up a series of proposals including: suspension of

credits and scholarships to students in dental schools accredited for less than 5 years, budget reallocation from FONASA free-choice modality to infrastructure, equipment and human resources (dentists hired in the category B of salaries) in the primary care centers and the hiring of 2,000 dental assistants for promotion and prevention activities in the community (outside the health centers).

The dental sector held a seminar to analyze these proposals. Although the measures meant more control and better access, it was not the “*more and better*” dentists wanted and expected. Several universities criticized the suspension of credits and scholarships because they affected their students and would cause the forced dismissal of hundreds of dentists working as teachers in dental schools. The Association also criticized the positioning of dentists in the category B of salaries, arguing that although this measure would allow to hire more dentists, lowering their salaries was considered irregular and offensive. Others complained about the hiring of dental assistants for promotion and prevention activities because “only DDS were qualified for this kind of activities”.

After the seminar concluded, the Association asked administration officials to prepare a new “*more and better*” proposal.

REFERENCES.

1. Cartes-Velásquez RA. Exponential growth of dental schools in Chile: effects on academic, economic and workforce issues. Braz Oral Res. 2013;27(6):471-7.