

TEAMSTERS UNION 25 HEALTH SERVICES & INSURANCE PLAN
DENTAL HEALTH CENTER

16 SEVER STREET, SULLIVAN SQUARE
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EDWARD C. MALDOF, D.M.D., M.P.H.
DENTAL DIRECTOR

Mr. Chairman, Members of this distinguished organization, and gentlemen:
It is an honor and a pleasure to be invited to testify before this Sub-Committee, and there is no doubt that the problem with which we are dealing is of such complexity and difficulty, but then no one said that it would be easy.

For the past seventeen years I have been actively involved in oral cancer detection programs at Harvard, Tufts, and BU Dental Schools, as a member of the teaching staff, clinical services, and at research levels.

In 1960 the Brookline Health Dept. and Tufts Dental School, initiated the first oral cancer detection center in conjunction with the American Cancer Society's educational program for practicing dentists. Sixty-four practicing dentists were certified in oral cancer detection. As a requirement for such certification, these dentists took part in 16 clinics where over 2000 senior citizens were screened for oral cancer. At that time, 16 of the lesions detected, proved by biopsy to be malignant.

Since that time we have held over 100 clinics in industrial complexes such as the Teamsters, Middlesex County Employees, Blue Cross, Blue Shield employees, Federal Building employees, Jewish Home for the Aged, Nursing Homes, Bunker Hill Community College Students. In over 9200 exams, 84 cancerous lesions have been detected. The patients included a varied group - they were truck drivers, college students, nursing home residents, and white collar workers.

But there was one common denominator in 82 of the 84 people examined - 99% all smoked cigarettes!!!

What I'm about to show you is not a very pretty picture. Cancer is not a decorative cancer is no exception.

SITING

Let me share with you the most disturbing fact that is also a sad one. First of all one doesn't have to be an Oral Surgeon or an Oral Pathologist to have having one of these lesions is a very serious matter and should not be taken as an ordinary cold sore, as some of these patients have done. After informing each patient of the seriousness of his condition, and suggesting that he cease immediately the habit of smoking, the response has been in a variety of ways. The patient will agree to do everything recommended to cease to stop smoking. Despite of all our exhortations, (from their own peers) they will not stop smoking. Their advice and suggestion is to stop late for my non-smoking to help my condition, and (2) by gradually living to the age of 95 while smoking 2 packs a day from age 15. One of the most common excuses for smokers is, "if smoking is so bad, why hasn't the government handled it like alcohol, and banned smoking, instead of subsidizing tobacco farmers with considerable financial aid."

In my opinion, the campaign which has stressed mortality figures for smokers has not been too effective - we must have not impressed the people by this campaign of fear. The basic fact still remains, with cigarette advertising banned on radio and TV and much publicity given to the ill effects of smoking, we still have a 30% increase in the lighting up. Concentrate on cancer scare attacks and the almost prohibitive increase in the price of cigarettes, should have drastically reduced cigarette consumption. Why are we losing this war? Where are we losing this war?

I have discussed this question with many Social Scientists and with health officials. Should we concentrate on the young adult, or the teen-ager or the pre-teen? Should we emphasize health effects? My own experience with the Teamsters is that the

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While I find that I have slightly altered their smoking habits in a downward direction, I have not made sufficient impact to please me. I feel as though I'm swimming upstream or at best treading water!!!
But, as I already said, it isn't easy. We need more assistance to help people cease their self destructive smoking habits.

Thank you and good luck.



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