



不正常 牙科教室



BEYOND THE DENTAL CHAIR

文／顏廷恩 · 圖／林嘉澍教授提供、秘書處

By / Ting En Yen · Image courtesy of / Professor Chia-Shu Lin and Secretariat

還記得上次看牙，醫師說什麼嗎？

你還記得上次坐上牙科診療椅時，牙醫師是怎麼開口的嗎？是親切問候，還是直接開始治療？許多人關心技術，卻忽略了診療體驗往往取決於醫病之間的互動。看牙不只是醫療技術，更是一場人與人的交流。今天，我們不談艱深的牙科專業，而是探討牙科與人的連結。本篇文章訪問牙醫學系林嘉澍教授，帶我們思考牙醫師如何在人文關懷與技術之間找到平衡？

How was your last visit to the dentist?

Think back to your last visit to the dentist. As you settled into the chair, what were the first words your dentist said? Was it a warm greeting, or did the treatment begin right away? While technical skills are important, a patient's experience often depends on their interaction with the dentist. Dentistry is not just about procedures and equipment; human connection plays a central role.

This article explores that very connection, with insights from Professor Chia-Shu Lin of the Department of Dentistry. He offers

College of Dentistry
牙醫學院

一般來說，我們到牙科診所見到牙醫師後，接下來就是向醫師詢問與討論自身的狀況，醫師聽完後針對提出的問題提供對應的處理方案。此環節可說是去看牙時必會經歷的經驗，聽起來似乎沒有特別的地方。那麼牙醫師面對我們時，又有什麼樣的視角呢？目前任教於牙醫學院，同時也曾經是執業牙醫師的林嘉澍老師，分享了他在行醫時觀察到的日常點滴。

學生在醫學中心見實習時，較少與病人直接發生衝突，但在社區診所，牙醫師與病人的摩擦卻時有耳聞，而關鍵往往在於溝通不足。林老師分享，診所病患眾多，每位病人的需求不同，牙醫師需要應對各種突發狀況。他常看到家長急忙帶孩子來檢查，一邊焦慮地詢問：「檢查沒問題齁？我要帶孩子回安親班了！」或「我們要趕快回家，我弄完晚餐後還要回公司加班！」

這種情況下，家長本身就處於高壓狀態，說話急促，如果醫師無法有效溝通，雙方很可能產生摩擦。林老師表示：「醫療工作本質上是一場人與人的交流，懂得如何溝通，是牙醫師不可或缺的技能。」從最基本的「打招呼」開始，一句親切的問候，不僅讓患者感受到尊重，也能緩解緊張情緒，讓治療更順利。

perspectives on how dentists can approach the relationship between technical expertise and genuine patient care.

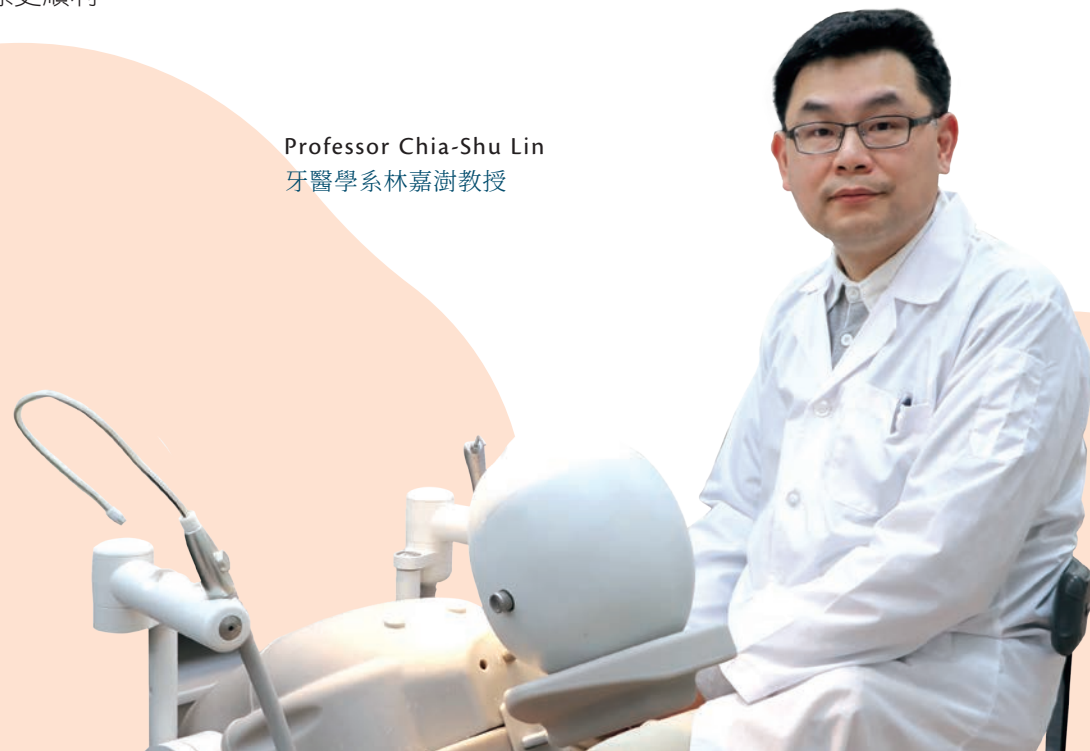
A visit to the dentist typically follows a familiar routine: patients share their concerns, and the dentist listens before recommending a treatment plan. While this process may seem straightforward, how does the dentist perceive these interactions? Now teaching at the College of Dentistry, Professor Chia-Shu Lin draws from his experience as a former practicing dentist to share insights from daily clinical practice.

During clinical training in medical centers, students rarely experience direct conflicts with patients. Yet in dental clinics, misunderstandings between dentists and patients are more common, largely due to ineffective communication.

Professor Lin observes that dental clinics handle a high volume of patients, each with unique needs. Dentists must adapt quickly to different situations. He often sees parents rushing in with their children, anxiously asking, "Is everything okay? I need to take them to after-school care!" or "We need to get home quickly! I still have to make dinner and go back to work!"

In moments like these, parents are already under stress, speaking hurriedly. When a dentist fails to communicate clearly, tension can arise on both sides. Professor Lin emphasizes that dentistry is not limited to treatment; the profession is also a form of human interaction. Strong communication skills are essential for every dentist. A simple greeting at the start of an appointment does more than establish rapport. It helps patients feel acknowledged and eases their anxiety, ensuring a smoother treatment experience.

Professor Chia-Shu Lin
牙醫學系林嘉澍教授



很多人最怕的往往不是疼痛，而是不知道會發生什麼事。舉例來說，有病人曾因蛀牙拖了好長時間不敢就診，並不是因為怕痛，而是因為之前看診時，醫師沒說幾句話就開始操作，病人全身僵硬，手不自覺地攥成拳，心裡充滿未知與不安。

這次換了一位醫師，醫師打完招呼後，溫和地說：「這顆牙有點狀況，但不用擔心，我們會循序進行，剛開始的處理不會痛，不舒服隨時舉手。」這句話讓病人鬆了一口氣，終於不那麼緊張了。這才發現，真正讓他害怕的不是疼痛，而是對過程的未知感。當醫師多花幾分鐘解釋，治療體驗就完全不同。

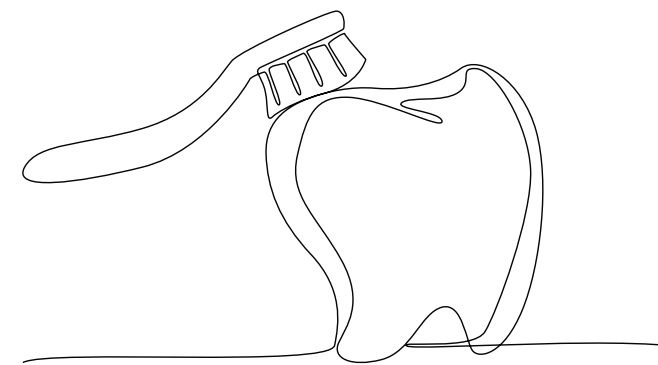
「這背後是一個人與人之間相處的基本人情義理。」林老師在他的「行為牙醫學」課堂上向學生分享，「如果牙醫師連這一點（打招呼）都不能掌握，就只會叫病人張開嘴巴，那麼這樣的牙醫師，很快就會被半導體取代，被機器人取代。所以，先成為一個懂得與人交流、關注患者整體狀況的牙醫師，把這個人當成一個完整的人來看，然後再去關注他的牙齒，這是我認為最重要的一點。」林老師補充道。

For many patients, the greatest fear isn't the pain itself. It is the uncertainty of what will happen next. One patient, for instance, avoided treatment for a cavity for weeks. What unsettled him wasn't the pain but the lingering unease from past dental visits. The dentist had remained silent throughout the procedure, offering no explanation before beginning. Sitting in the chair, he felt tense, gripping his hands tightly, overwhelmed by the unknown.

This time, he went to a different dentist. After a warm greeting, the dentist spoke in a calm tone: "Your tooth needs a little care, but don't worry, we will take it one step at a time. The first part won't hurt, and if anything feels uncomfortable, just raise your hand." Those few reassuring words immediately put him at ease, allowing him to relax his shoulders. Looking back, he realized his biggest fear had never been the discomfort, it was the uncertainty. A brief explanation from the dentist made all the difference.

In his Behavioral Dentistry course, Professor Lin shares a key perspective with his students: "Patient care is ultimately about human connection and fundamental courtesy." He explains that if a dentist cannot manage something as basic as a proper greeting, their role could be reduced to simply instructing patients to open their mouths. In that case, technology might easily take over, with machines replacing dentists.

Professor Lin encourages future dentists to develop strong communication skills and a deeper understanding of their patients' overall well-being. True quality care comes from seeing patients as individuals, rather than just focusing on their teeth.

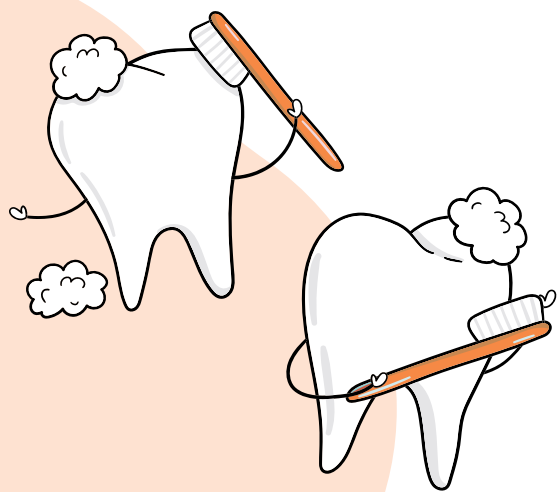


不正常牙科教室

談到這裡，你可能會想說是啊，醫師要跟病人打招呼，建立和諧關係與醫病溝通，這當然不可或缺，但這些事應該不需要上課吧？平時講一講大家就知道了呀？

當牙醫與患者寒暄幾句，比如「伯伯，今天雨下得這麼大，您怎麼來的？」或「坐捷運來嗎？在公館站轉車嗎？」看似只是拉近距離的閒聊，其實背後蘊含著心理學與神經科學的核心。由林老師開設的「不正常牙科教室」裡面的一系列課程，包含「行為牙醫學」與「情緒神經科學」，這些課程讓從事臨床醫療與照顧的學生學會如何透過簡單的對話，快速評估患者的健康狀況，並在人與人之間的互動中，找到臨床診斷的線索。

舉例來說，一位能自行騎車到診所的長輩，透露了他良好的記憶力、方向感以及體能狀況。而另一位進來後需要家屬陪同，對醫師的提問只是一味點頭或簡單重複「好、好、好」的長輩，可能暗示了認知功能或專注力的問題。這些互動的細節，往往比病歷上的文字來得真實且即時，為牙醫師提供了第一手的判斷依據。



Eccentric Dentistry

At this point, some might wonder whether greeting patients and maintaining good communication really need to be taught in a class. Isn't that something dentists naturally develop through experience?

Quick chats like "It's tipping down! How did you get here?" or "Did you take the MRT? Did you transfer at Gongguan Station?" may seem like small talk, yet these conversations are grounded in deeper principles of psychology and neuroscience. Professor Lin's Eccentric Dentistry program introduces courses such as Behavioral Dentistry and Affective Neuroscience, equipping future dental professionals with the ability to assess a patient's well-being through simple dialogue. These skills help them identify key diagnostic clues in everyday interactions.

For example, when an elderly patient arrives alone by bicycle, this seemingly ordinary detail suggests strong memory, a good sense of direction, and good physical condition. On the other hand, if a patient enters with a caregiver and responds to questions with automatic nods or repeated phrases, it may indicate cognitive difficulties or attention-related issues. These subtle observations often offer more immediate insights than what is recorded in a patient's medical file.

These observations are more than just guesswork; they are grounded in scientific principles. When dentists engage elderly patients in casual conversation about their visit, the way patients respond can reveal important cognitive cues. At the same time, these interactions naturally foster trust and help ease any anxiety during treatment.

Interactive digital simulation game
developed by Professor Lin.

林老師設計的模擬臨床醫病互動電子遊戲



By integrating technical expertise with empathy, dentists can address both the medical and emotional needs of an aging society.

在技術與人情味之間，讓求醫者感受到專業之外的溫暖，這才是高齡化社會真正需要的牙醫師。



更重要的是，這樣的觀察不停留在「猜測」層面，而是建立在科學基礎之上。當牙醫以輕鬆的聊天方式詢問長輩的來診過程，患者的回答透露他的認知狀況，也讓牙醫能更自然地建立信任感，減少治療中的緊張感。

過去，這樣的能力往往靠實習時觀察前輩如何與患者互動，林老師提到。如今，透過「不正常牙科教室」專業課程，這些技巧能被系統化地教授，幫助牙醫學生掌握與患者溝通的深層意義。為了讓同學再進入醫院學習前能更具體地感受在診間裡，牙醫師如何與形形色色病患互動，林老師也搭配課程，設計了電子遊戲—讓同學從遊戲對話更深刻地體會與「人」互動的重要性。

In the past, students developed these skills by observing experienced dentists during clinical training. While this method has its value, Professor Lin emphasizes that structured learning can make a significant difference. Through Eccentric Dentistry, students receive systematic training in communication strategies, helping them grasp the deeper meaning behind patient interactions.

To further enhance the learning experience, Professor Lin has incorporated an interactive digital simulation game into the curriculum. This tool allows students to practice handling various patient interactions in a controlled setting before stepping into a real clinic. By engaging with a diverse range of simulated patients, students develop a stronger understanding of effective communication and patient care.



當技術遇上人心

在高齡化社會，我們已經知道牙醫師需擁有技術，但懂得用語言拉近與患者的距離已成為另一件重要的事。對許多長輩而言，熟悉的台語、客家語或其他母語，能讓他們在診療時感到安心。然而，許多年輕同學對這些語言並不熟悉，導致診間溝通不容易「接地氣」。

如果牙醫學院能開設醫用台語或其他地方語言的課程，年輕牙醫師就可以用長輩習慣的方式對話。試想，當醫師用流暢的台語輕鬆地問：「阿伯，哩呷飽未？」（伯伯，你吃飯了嗎？）這麼問可更拉近與長輩的距離，診療變得更自然。醫療應該是一次充滿理解與信任的互動，而語言正是其中一個關鍵。

對於一些特需患者，比如失智症長輩或有特殊需求的孩童，牙醫師要懂專業，還得會觀察、會傾聽，知道怎麼用最合適的方式跟他們互動。而像居家治

The hands and hearts behind the smiles

In an aging society, technical expertise remains essential for dentists, though the ability to connect with patients through language has become just as important. For many elderly individuals, speaking in their native dialect, whether it be Taiwanese, Hakka or another regional language, creates a sense of familiarity and reassurance during treatment. However, students are often less fluent in these languages, making communication in the clinic more challenging.

If the College of Dentistry incorporated courses on medical Taiwanese or other local languages, students could connect with elderly patients in a way that feels more familiar and comforting. Imagine a dentist greeting a patient in fluent Taiwanese with, "li tsiah pa bue" (Have you eaten yet?)—a common phrase in Taiwan used to express care and initiate conversation, much like saying "How are you today?" in English. A simple greeting like this can put patients at ease, fostering a more natural and reassuring interaction. At its core, healthcare is built on trust and understanding, and language plays a vital role in strengthening the doctor-patient relationship.

For patients with special needs, such as those with dementia or

療服務，也是現在牙醫師需要面對的新挑戰，不單是「去家裡看看」，攜帶完整設備，駕駛醫療巡迴車深入偏鄉，才可以幫助需要的人。

若要讓醫病關係和諧地運轉，牙醫師的訓練中，不僅強調單方向地對病患說明解釋，更需要懂得「聽」患者說話。比如，一位長輩可能因為要接孫子上下學，根本無法配合密集的治療計畫。這時候，牙醫師的角色除了是治療者，也要能跟患者一起找到最適合的選擇，不是只有按「標準流程」走。

未來的牙醫教育，林老師覺得可以再多點選擇性，像是培養能研發醫療新科技的「牙醫師工程師」，或是更專注臨床、深耕人際關係的「人文牙醫師」，無論走哪條路，最重要的是讓每位牙醫師都能找到自己的定位。在技術與人情味之間，讓求醫者感受到專業之外的溫暖，這才是高齡化社會真正需要的牙醫師。■

children requiring specialized care, dentists must consider not just technical skills but also how they interact with each patient. Observing, listening, and adapting their approach are equally essential. Another challenge is delivering home-based dental care, which entails more than simply visiting a patient's home. Transporting full equipment, operating mobile dental units in remote areas, and providing high-quality treatment outside traditional clinics are all part of the expanding role of modern dentists.

For a strong doctor-patient relationship, communication needs to go both ways. Training for dentists often emphasizes explaining procedures and treatments, though understanding how to truly listen to patients is just as important. Consider an elderly patient who has a busy schedule picking up grandchildren and simply cannot commit to an intensive treatment plan. In these situations, a dentist plays a role beyond providing medical care; they help patients explore options that align with their lifestyle, rather than strictly following a set protocol.

Looking ahead, Professor Lin envisions a more diverse approach to dental education. Some may specialize in advanced dental technology and become dental engineers, while others may focus on human-centered care, becoming humanistic dentists who emphasize relationships and communication. Regardless of their chosen path, the goal is for each dentist to find their role in the field. By integrating technical expertise with empathy, dentists can address both the medical and emotional needs of an aging society.

