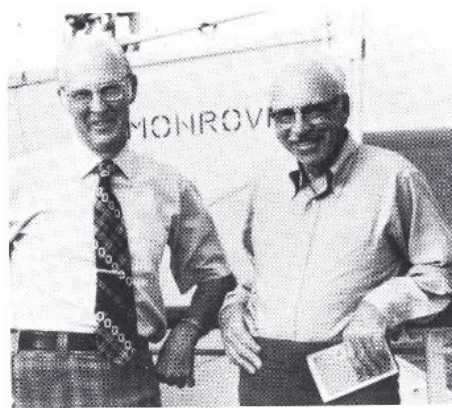
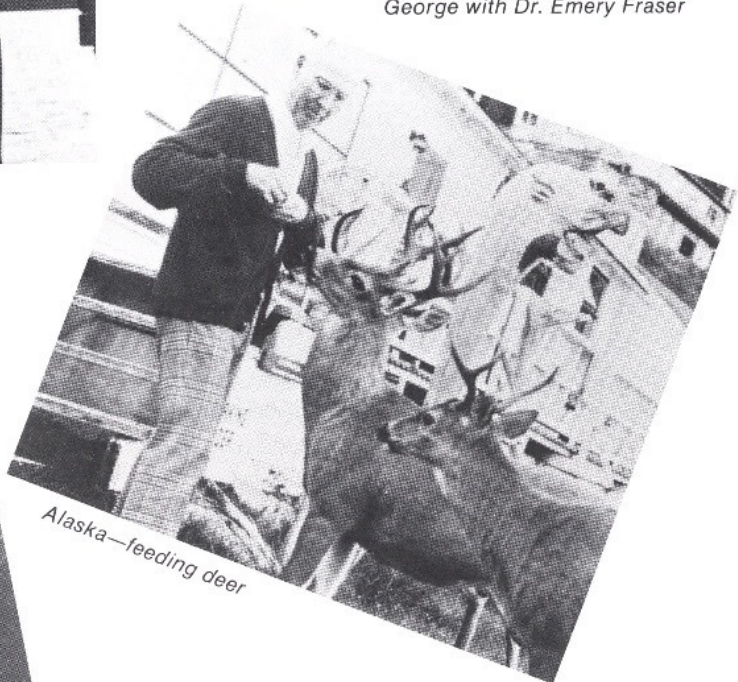




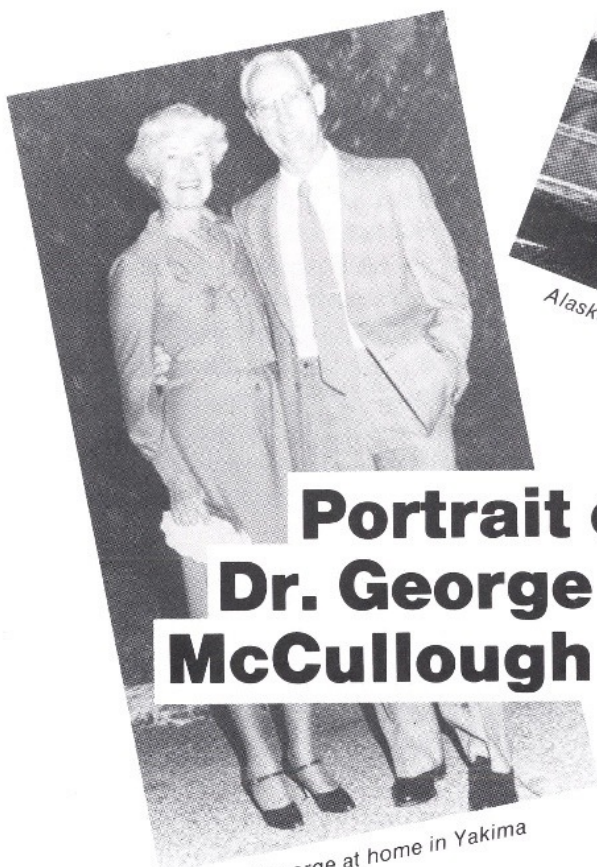
Fishing in Alaska



George with Dr. Emery Fraser



Alaska—feeding deer



Jean and George at home in Yakima

Portrait of a professional: Dr. George McCullough



Right: George helping graduate student Oscar Muguerza during Tweed Course at University of Washington

Continuing a new feature of the PCSO Bulletin, Dr. George McCullough has been chosen as a distinguished member of the Northern Region, and special recognition is given to him in this issue. Drs. Paul Lewis, David Turpin, and I spent a splendid evening interviewing and reminiscing with George and his wife, Jean, about their experiences in orthodontics over the past 40 years. I would like to share excerpts of our discussion with our readers. On behalf of the Pacific Coast Society of Orthodontists, I congratulate George for being honored and thank him for past and continuing contributions to the specialty of orthodontics.

Vincent Kokich, editor
Northern Region

George McCullough was born and raised in Pasco, Washington. He received his undergraduate education at the College of Puget Sound and graduated from North Pacific Dental School (presently University of Oregon) in 1933. George told us about the first dental practice he purchased in 1934. The price was \$300.00. It consisted of one dental chair; the rent was \$25.00 per month.

George met his wife, Jean, shortly thereafter, but didn't get married immediately. According to George, he wouldn't get married until he was free of debt and had \$5,000.00 in the bank (that would certainly be difficult to accomplish by today's standards). George and Jean were eventually wed in 1939. At that time, George was in general dental practice and was very interested in gold restorations. In fact, he was a member of Dr. W.I. Ferrier's Gold Foil Study Group.

George served in the army during World War II and was stationed in many interesting places including Australia, New Guinea, and the Admiralty Islands.

At the end of the war, following his return to the Northwest, George became interested in orthodontics and visited the offices of Drs. Paul Lewis and Milton Fisher in the Seattle area. As his interest in orthodontics grew, he was invited to join the prestigious Northwest study group which founded the University of Washington's department of orthodontics (Drs. Lewis, Fisher, William McGovern, Sr., Emery Fraser, and Pete Bishop). Through the efforts of his study club colleagues and numerous continuing education courses in cephalometrics, growth and development, and orthodontic mechanics, George received his training in clinical orthodontics.

George established his orthodontic practice in Yakima, Washington, and

since that time has been extremely active in orthodontic education on the West Coast. He has been an important member, contributor, and instructor for the Tweed Foundation. He has served politically and has been recognized nationally for his dedication and achievements in the Angle Society. He has been a member of several orthodontic study groups in the Northwest, and has continued to teach the basic principles of the Tweed philosophy to the senior orthodontic graduate students at the University of Washington.

During our discussion with George, we asked him several questions concerning the evolution of orthodontics in the Northwest. Included below are his responses.

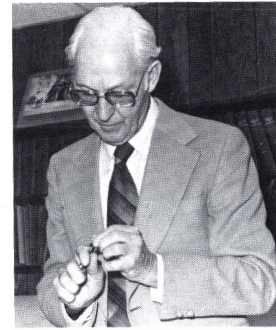
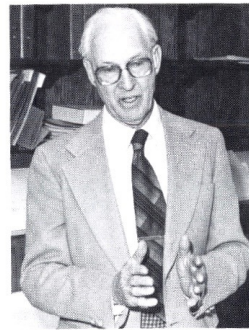
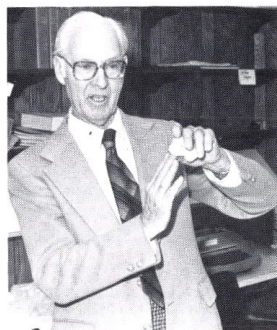
Question: Who has had the greatest influence on orthodontics during your professional career?

Dr. McCullough: I think that Charlie Tweed has been the singlemost influential individual in orthodontics during the past 35 years. Charlie was an amazingly organized, brilliant, and unselfish person. His philosophy of orthodontic treatment was logical and systematic. If an individual would follow Charlie's instruction and pay attention to specific details, he or she could become an excellent clinician. Tweed provided a simple, organized approach to orthodontic diagnosis at

a time when the profession was in definite need of direction.

Question: What is the greatest change that you have seen in the way orthodontics is practiced over the years?

Dr. McCullough: I think that two major changes in recent years have dramatically affected the delivery of orthodontic care. First was the evolution and development of preformed bands and then direct bonded orthodontic appliances. In the earlier days, due to a lack of advanced technology, we had to first make each individual band and then solder the bracket to the custom-made band. This took a great deal of time and therefore naturally limited the number of patients we could treat. Secondly, the expanded use of dental auxiliaries has greatly altered the practice of orthodontics. In previous years, the orthodontist did everything in the office. He may have had one auxiliary to help with the menial tasks. Today, orthodontic auxiliaries are legally permitted to perform more and more treatment related duties, allowing the orthodontist to render therapy to a greater number of patients. Although these two changes in treatment delivery may be beneficial in principle; in fact, if not monitored carefully, they can adversely affect the quality of orthodontic care.



Question: Has orthodontic education changed significantly since you were trained?

Dr. McCullough: Yes, definitely so. In earlier years, many good clinicians were trained through associateships with established orthodontists. The one major drawback to this approach was that the trainee only received one point of view. Today, formal orthodontic graduate programs consist of a number of established instructors who can draw upon a wealth of previous research to teach a variety of principles to their students.

Question: Have the concepts of occlusion changed over the years?

Dr. McCullough: Although the concepts have probably not changed, the emphasis has been redirected in recent years. In the past, a functionally balanced occlusion was not emphasized. Temporomandibular joint dysfunction was not directly related to occlusal malrelationships. Our goal at that time was to establish a solid class I occlusion in a static relationship. The emphasis toward functional occlusal goals has evolved more recently.

Question: What is your opinion of the straight-wire appliance concept?

Dr. McCullough: Although the straight-wire concept may in fact be a beneficial adjunct to orthodontic therapy, I have some concerns. Orthodontists may overreact to this philosophy, thinking that the appliance can do

everything. However, the appliance is no better than the clinician who places it. We must still pay attention to various principles during orthodontic treatment and to fine details during the finishing phase of therapy.

Question: What is your reaction to all the concern about a shortage of patients and an over-abundance of orthodontists?

Dr. McCullough: If an individual renders good orthodontic treatment, he will always make a good living. Remember, if a person can't make a living in their profession, then they shouldn't be in it.

Question: What advice can you give to a young orthodontist starting out in practice?

Dr. McCullough: Two things come to mind immediately. First of all, a good clinician pays attention to details. In orthodontics, we are dealing in millimeters. In the average situation, we may only move teeth 3-4 millimeters during treatment. Therefore we must operate in a slow, methodical, and controlled manner and strive to achieve an ideal result in every case. Secondly, I think that study clubs are extremely beneficial, not only to the novice, but to the experienced clinician as well. We can learn a great deal, keep abreast of current developments, continue to improve, and achieve enjoyment through a close working relationship with a group of colleagues in the form of an active study group. ■

Central Region Meetings

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