## UPFRONT

experience in National Service.

In the *BDJ* in 2007, life in a mobile dental laboratory during World War II was described.<sup>7</sup>

Mobile units have problems in dealing with weight and vibration during travel (and in naval ships during the firing of the guns), and a sign on the back shows that the unit was limited to 20 miles an hour when moving on the road. There are also potential problems with radiation protection, clinical waste disposal, and toxic waste management, and it is noticeable that these concerns are not addressed in the *Eagle* piece – especially radiation protection, where the nurse/ DSA is shown positioning the cumbersome X-ray set of the time. The illustration is nevertheless a valuable record of the state of the dental services just nine years after the end of the War, and six years after the inception of the dental NHS. It reveals a forward-looking and positive attitude, and also at the time, brought modern dentistry to the nearly one million subscribers to *Eagle*, and its young readers. A copy of the issue is now in the BDA Library and Museum.

Acknowledgements: Thanks especially to the Dan Dare Corporation Limited, and to Helen Nield and Rachel Bairsto.

## References

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## **BOOK REVIEW**

Tas Retent Eder Optimal Pain Management for the Dental Team

## OPTIMAL PAIN MANAGEMENT FOR THE DENTAL TEAM

Editor: Tara Renton; 2022; Springer Cham; £47.99 (eBook); pp. 163; ISBN: 978-3-030-86634-1

This textbook draws on the expert input of many well-known names in their respective fields, to curate what surely is an essential read for dental undergraduates, and a useful refresher for practising clinicians. Pain management is the most fundamental component of holistic patient care, and unfortunately is all too often overlooked.

The textbook comprises 12 chapters, each focusing on a subspecialist area pertinent to pain. A crash course on pain physiology opens the text, followed by a revision of the unique properties of dental pulp and dentine. Readers are reminded of the inextricable interplay between the two entities both embryologically and functionally, and about the unique nociceptive and proprioceptive properties of the dentition.

Two chapters are devoted to the topic of orofacial pain and headaches, drawing on current recommendations from the International Classification of Orofacial Pain (ICOP). Updated pain terminologies, including 'nociceptive' (inflammatory) and 'nociplastic' (neuropathic), feature throughout the text. The role of psychological interventions in the management of orofacial pain syndromes and dental anxiety and phobia are covered in depth. Established and emerging techniques such as cognitive behavioural therapy (CBT), acceptance and commitment therapy (ACT) and mindfulness-based interventions (MBI) are recommended as part of a multidisciplinary approach to pain and anxiety management in a dental context.

All clinicians will encounter patients from time to time for whom behavioural management strategies alone or in combination with psychological interventions are simply not sufficient to permit delivery of successful dental treatment. Conscious sedation is as relevant as ever, and in an age where half of the UK population reports some degree of dental anxiety, it seems only right that these techniques are considered an essential component of the treatment armamentarium. Questionnaires such as the Indicator of Sedation Need (IOSN) and the Modified Dental Anxiety Scale (MDAS) serve as useful selection tools that may aid treatment planning.

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Recent advances in local anaesthesia techniques are discussed, with specific attention given to the use of 4% articaine for mandibular infiltration anaesthesia as an alternative to the traditional inferior alveolar nerve block. The recommendation to shift away from block anaesthesia altogether is sure to divide opinion.

Interestingly, the analgesic combination of 1 g paracetamol and 400 mg ibuprofen remains the mainstay of optimum periand post-operative pain management, topping the Oxford league table of analgesic efficacy. It's good news for coffee lovers, as an average cup of coffee, estimated to contain 90 mg caffeine, can act as an effective analgesic adjuvant.

Last but not least, readers are treated to an informative chapter on rhinosinusitis and its relevance to dentistry. Appropriate use of 3D imaging is discussed, and the text is complemented by CT slices and endoscopy imaging. Clinicians involved in dental implant surgery will be comforted to know that incidental antral mucoceles and mucosal thickening have no bearing on outcomes in implant therapy.

In summary, this textbook is a comprehensive compilation of highquality reading material supported by current best evidence, and should be on the shelves of all dentists involved in delivery of clinical care.

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