

Dental news

The BDJ News section accepts items that include general news, latest research and diary events that interest our readers. Press releases or articles may be edited, and should include a colour photograph if possible.

Please direct your correspondence to the News Editor, Arveen Bajaj at the BDJ, The Macmillan Building, 4 Crinan Street, London N1 9XW or by email to a.bajaj@nature.com

SCOTTISH CASH INJECTION TO BOOST NHS DENTISTRY

A massive cash boost for NHS dentistry in Scotland has been announced by its Health Secretary, Nicola Sturgeon. She revealed that the Scottish Government plans to spend £82 million on all health boards in Scotland to improve dental provision in their areas, with 13 new standalone dental centres nationwide, two others as part of multi-purpose health centres, as well as new surgeries and facilities upgrades.

Other projects may include multi-function health centres and GP premises, as well as grants to community pharmacists. She outlined plans for a £9 million replacement of Possilpark Health Centre, accommodating GPs, dentists and other community health partners, as part of NHS Greater Glasgow and Clyde's £21.5 million allocation, while NHS Highland plans a dental centre in Oban and surgeries in Inverness, Thurso, Dingwall and Campbeltown from its £5.64 million allocation.

Figures from ISD Scotland, published at the end of last year, showed that the number of dentists in NHS Scotland has increased by 6.2% from 2007. Nicola Sturgeon said that in the current climate, capital projects were a crucial way for the Government to stimulate the economy by providing local employment opportunities and provide work for some of the hardest-hit sectors of the economy like construction.

However, while the British Dental Association (BDA) agreed that new premises would provide high quality environments for the practice of dentistry, it warned that the investment was 'not the sole solution for Scotland's lost dental patients' and that the issue of finding dentists to work in remote and rural sites would need to be addressed.

According to Andrew Lamb, BDA Director for Scotland, the Scottish Government should not ignore the needs of



the dentists who would not be working in the new dental centres. He said, 'It was promised that some of this funding would be deployed to help high street dentists adapt to changing decontamination regulations and it is important that they are properly supported and continue to provide high quality care to the large numbers of patients they see.'

HIV POSITIVE DENTISTS PERMITTED TO PRACTICE IN EUROPE

David Croser, author of an opinion article in the *BDJ* about the plight of UK dentists in the event that they are diagnosed as HIV positive (*BDJ* 2006; 201: 497-499) has been conducting research in conjunction with the Council of European Dentists to discover the situation for HIV positive dentists in 32 other European countries.

Although there are still a few countries who have yet to respond, Dr Croser reports that the information to date indicates that the countries of Europe are almost evenly split between those where the dentist is able to work, and

the situation that exists in the UK where the dentist must immediately stop working. The lack of an evidence base in this field makes it difficult for a universal science-based decision to be made.

However, some consensus does seem to be emerging. A recent study (*MMWR Morbid Mortal Wkly Rep* 2009; 57: 1413-1415) supports patient safety and the non-transmissibility of the disease in situations where the clinician has been treated with antiretrovirals and is monitored to demonstrate an undetectable viral load, and adopts standard infection control

protocols. Another study in Switzerland concluded that HIV positive individuals on effective antiretroviral therapy and without sexually transmitted infections are sexually non-infectious (*Bull Med Suisses* 2008; 89(5): 165-169, available online at http://www.saez.ch/pdf_f/2008/2008-05/2008-05-089.PDF).

The appropriate committees in the UK are currently reviewing the situation over UK health workers. A decision was expected last autumn but is now anticipated in early March. Dr Croser's results to date are available online at www.dentalprotection.org.uk/tippingpoint.

GDC DIRECTOR FOR SCOTLAND APPOINTED

The General Dental Council (GDC) has appointed Ian Jackson as its new Director for Scotland. He will manage the GDC's activities in Scotland, working particularly with the Scottish Parliament, members of the public and the dental profession.

Ian has previously held various roles at BT, where he has worked since 1990, and was most recently Partnership Director. He is also a member of the

General Teaching Council, Scotland and graduated from the University of Edinburgh with an MA in Geography. He was appointed MBE in January 2005 for services to education in Scotland.

The GDC has also opened a consultation to gather views on how the registrant fees (Annual Retention Fees) are set. The Annual Retention Fee (ARF) is determined by the Council, based on recommendations from the Finance

and Human Resources Committee. Their recommendation is based on the funding that the GDC will need to meet its operational requirements.

In order to increase the understanding of the process, the Finance and Human Resources Committee have drafted a policy describing how their recommendations are made, and the GDC would like to gather views on this before adopting it. For further information visit www.gdc.org.uk.

DENTAL FLEET LAUNCHED FOR SCHOOL CHILDREN

Young children in Wales are to benefit from a newly launched mobile fleet of dental units, in a move announced by First Minister Rhodri Morgan. Nursery, reception and year one classes in schools across areas of greatest oral health need will be visited by the dental fleet. Over 300 schools are expected to benefit from

the scheme during its rollout over the next three years.

The scheme will see a team of dental health support workers providing toothbrushes and toothpaste to school children along with oral health advice. Part of this service will be delivered via mobile dental health units that will play a key role in providing special-

ist preventive care and treatment to schools. It will also introduce the new child friendly logo of Dewi the Dragon that will be used as a brand for the entire programme.

Welsh children have the worst rates of tooth decay in the UK. On average, a five year old in Wales has between two and three decayed, missing or filled teeth, compared to less than two in Great Britain as a whole.

DENTAL INNOVATORS LEAD THE WAY

A medical device consisting of a miniature camera and a set of tiny mirrors is a winner in the dentistry and oral health category at the Medical Futures Innovations Awards.

The device, which will enable dentists to produce images of teeth, bones and gums similar to X-rays using infrared light, was developed by a team of dentists and physicists from the Universities of Dundee and Strathclyde, who scooped a hat-trick of awards after developing the new technology which has the potential to replace X-rays in dentistry.

The infrared imaging system developed by Professor Nigel Pitts and Dr Chris Longbottom at Dundee and Professor John Girkin and Dr Simon Poland at Strathclyde, won the overall Dental and Health Innovations Award, the Best Diagnostic in Dental and Oral Health Award, and the NHS Technology Innovation Award.

They say it may have wider applications including, for example, measuring

bone density. The competition judges said they were 'highly impressed' by the potential of the technology and hoped it would progress to proof of concept.

The Medical Futures Innovation Awards aim to discover the next breakthroughs in healthcare and overcome the challenge historically faced in the UK of being great at innovating but poor at subsequently taking ideas to market.

A unique feature of the Medical Futures process is the input from the judging panels, composed of over 80 leading medical, scientific and business experts. Each of the judges is keen to offer help and guidance to the up and coming innovators of tomorrow.

As well as the recognition and endorsement of an award, winners receive a bespoke package of support to turn ideas into viable propositions that have credibility with investors. To date, past winners have secured over £80m of funding, and many have

gone on to create successful services or products.

Speaking about the infrared imaging system, Andy Goldberg, founder of Medical Futures, said, 'The potential of this technology is enormous and demonstrates the importance of collaboration between clinicians who know about unmet healthcare needs and scientists who have the skills to develop the technology to meet these needs.'

Other innovations given commendations in the dentistry and oral health category included electro-elution, a novel technique for cleaning surgical instruments that also removes prion protein, the agent believed to cause Creutzfeldt-Jakob disease, a plaque-revealing device the size of a pen containing an LED light which when shone on teeth illuminates any plaque in red, enabling dentists or patients to see its location, and Ivident, an interactive website for dental students where students can download lectures, images and listen to presentations online.

DIARY

FEBRUARY

BioHorizons Surgical & Restorative Implant Training Course

Date: January to October, once a month
Venue: Various
infouk@biohorizons.com
www.biohorizons.com

BDA Seminar series: Achieving high standards in infection control

Date: 27 February 2009
Venue: London
www.bda.org
events@bda.org

MARCH

Australian Dental Congress and Exhibition

Date: 12-15 March 2009
Venue: Perth Convention Exhibition Centre, Perth, Australia
www.ada2009.com

The Dentistry Show

Date: 13-14 March 2009
Venue: NEC Birmingham
www.thedentistryshow.co.uk

APRIL

8th Congress of the International Society of Breath Odor Research

Date: 26-28 April 2009
Venue: Dortmund, Germany
<http://www.isbor.net/>

INSPIRING TEACHERS SCOOP PRIZES

The winners and runners up of the Dental Defence Union's Educational Awards recently celebrated their achievements in London. The finalists in the three categories of Dentist, DCP and Vocational Teacher of the Year demonstrated why their students and trainees considered them to be the most inspiring and innovative teachers.

The DCP Teacher of the Year was awarded to Alison Grant, of Bristol Dental School, and runner up was Judy Fraser, University of Portsmouth School of Professionals Complementary to Dentistry.

Dentist Teacher of the Year was Professor Dayananda Samarawickrama, Barts and the London School of Medicine and Dentistry and runner-up was Sheila Oliver, of Cardiff University Dental School.

Vocational Teacher of the Year was

awarded to Stephen Brookes from the Oxford Deanery with runner-up going to Dai Jones, South West Dental Post-graduate Deanery.

Dental Teacher of the Year Professor Samarawickrama said, 'I would like to dedicate this award to my students, my colleagues and my school. I have been humbled by this experience and I'm obviously very pleased to have won. My late father used to say that education is the best gift one can give so it is particularly important to me that I have won this award for my work as a teacher.'

The winner in each category of the awards received £1,000 towards the cost of educational materials for their schools or vocational training schemes, while all six finalists received a trophy, certificate, a cheque for £250 and a goody bag from Dentsply.



Left to right: Rupert Hoppenbrouwers (head of the DDU), Alison Grant (DCP Teacher of the Year), Stephen Brookes (VT Teacher of the Year), Prof Samarawickrama (Dentist Teacher of the Year), Dean Hallows (Dentsply)

SERVICES TO DENTISTRY HONOURED

Two members of the dental community have been honoured in the Queen's New Year's Honours list. Dr Shiv Parbary, a General Practice Dentist for Newcastle and Gateshead, has received an MBE for services to the NHS and Dr Susan Elizabeth Gregory, Deputy Chief Dental Officer at the Department of Health and Consultant in Dental Public Health, Bedfordshire and Hertfordshire, has received an OBE for services to Healthcare.

Shiv Pabary, 48 is a general dental practitioner and a dental advisor for Gateshead and South Tyneside Primary Care Trusts and qualified in 1985 from Newcastle Dental School. He is also a part-time dental adviser to two primary care trusts and is chairman of the GDC's professional conduct committee.

Dr Sue Gregory, who has worked in Bedfordshire since 1977, qualified in

1976 at the Royal Dental Hospital, University of London and undertook post-graduate studies, gaining an MSc in dental public health at the London Hospital in 1983 and a diploma in Health Economics at Aberdeen University in 1993.

Sue chairs the UK Consultants in Dental Public Health Group and has been president of the British Association for the Study of Community Dentistry and the British Society of Disability and Oral Health.

INTERNATIONAL CONFERENCE FOR THE WHOLE TEAM

The Dentistry Show is to take place at the NEC Birmingham, 13-14 March 2009. The international conference will feature five separate CPD-accredited conference programmes qualifying for up to 12-hours of CPD and is designed to involve all members of the dental team.

As a reader of the *BDJ*, the organisers are offering you the opportunity to register for the two-day conference for a limited reader offer of £99 + VAT (normal price £495).

The five conference streams include Aesthetic Dentist for private thinking dentists, Simply Dental for NHS dentists, Dental Insight for practice managers, Aesthetic Technician for dental technicians and laboratory owners and Hygienist Symposium for hygienists and therapists.

You can register for the full two-day conference for £99 quoting the

reference code: BDJREAD09. For full information and to register please call 01926 485151 or visit www.thedentistryshow.co.uk.



XYLITOL CLEARED FOR ANTI-CARIES HEALTH CLAIMS

The Panel on Dietetic Products, Nutrition and Allergies of the European Food Safety Authority (EFSA) has agreed that the wording 'xylitol chewing gum reduces the risk of caries in children' reflects the scientific evidence for caries reduction.

Following an application from the LEAF company of Finland, who manufacture chewing gum, the Panel was asked to deliver an opinion on the scientific substantiation of a health claim related to xylitol chewing gum/pastilles and reduction of the risk of tooth decay. The scope of the application was proposed to fall under a health claim referring to disease risk reduction.

After considering the high number of studies, subjects and observation

years presented, as well as the consistency of the results and the magnitude of the effect, the Panel considered that a cause and effect relationship has been established between the consumption of chewing gum sweetened with 100% xylitol and the reduction of the risk of tooth decay in children.

The scientific justification of the claim is related to the consumption of 2-3 g of chewing gum sweetened with 100% xylitol at least three times per day after meals. This quantity of chewing gum sweetened with 100% xylitol can easily be consumed as part of a balanced diet.

Full details are published in the *EFSA Journal* (2008) 852, 1-2, publication date 14 November 2008.

DENTAL TEAM GUIDANCE

The General Dental Council has published new guidance to do with individuals' scope of practice. A copy of *Scope of practice – who can do what in the dental team* has been sent to all registrants and is also available on the GDC's website.

The guidance sets out the skills and abilities for dental nurses, orthodontic therapists, dental hygienists, dental therapists, dental technicians, dentists and clinical dental technicians, describing what each member of the team is trained in and competent to do. It also describes supplementary skills that registrants may develop as well as 'reserved duties' which are areas of practice limited to certain registrants.

CORRECTION

Please note that one of the email addresses provided for response to the item 'Pilot seeks participants' on page 63 of the last issue of the *Journal* (*BDJ* 24 Jan 2009) should read Janine.Brooks@ncas.npsa.nhs.uk and not as published. We trust that this has not caused inconvenience to those wishing to volunteer.

