

Letters to the Editor

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Priority will be given to letters less than 500 words long. Authors must sign the letter, which may be edited for reasons of space.

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LETTERS

OPEN LETTER

Rt Hon Andrew Lansley CBE
Secretary of State for Health
Department of Health
Richmond House
79 Whitehall
London SW1A 2NS

Dear Mr Lansley,

RE: NHS Health Reform Bill

Members of the British Society for the Study of Community Dentistry (BASCD) are most concerned about the proposals within the Health and Social Care Act, which have pronounced implications not only for our ability to fulfil our role in improving the oral health of the nation, but also the very nature of the National Health Service. We wish you to know that BASCD is formally opposed to the Bill. In particular we wish to see the following three points addressed at minimum:

First, the Secretary of State must have the duty to secure provision of comprehensive and equitable health care for the whole of the population of England.

Second, Clinical Commissioning Groups (CCGs) must make sure that comprehensive and equitable healthcare is available for everyone.

Third, nothing must be done that undermines the ability of the Secretary of State to fulfil the duty to secure provision of comprehensive and equitable healthcare.

We urge you to revise the bill at the earliest opportunity and ensure that it is not further progressed without these revisions.

Yours sincerely,

Peter G. Robinson
President, BASCD

PS: BASCD is the specialist association for dental public health in the UK. Dental public health is the science and the art of preventing oral disease, promoting oral health, and improving the quality of life through the organised efforts of society. Our practice therefore involves dental care for and in the community. The Association's objectives are:

- The promotion of oral health in the community
- The maintenance of a body with expert knowledge of, and experience in, all aspects of dental public health
- The study of the provision of oral health care for the community
- The development of the teaching of dental public health
- The study of relevant aspects of community dental practice.

We are a multi-faceted organisation with a wide membership including consultants and trainees in DPH, clinical directors of Salaried Dental Services and academics.

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THE WRONG DIRECTION?

Sir, I believe that now is a good time to debate the direction that dentists feel the profession should travel.

I qualified nearly 40 years ago, at a time when it was felt that the battle had been won via good treatment and publicity, so that teeth were being restored rather than extracted and that in areas such as Birmingham, the modification of the fluoride levels in the water was likely to lead to a vast reduction in caries throughout the population.

Advances in restorative materials had been made, composites were being

refined and bond techniques were about to 'come on apace'. Sepsis had reduced greatly with the possibility of antibiotics being used as an adjunct to the obtaining of drainage and the removal of the cause of the infection.

My generation was likely to oversee advances in the periodontal standard of patients and in orthodontics, whilst continuing to be advocates in restoration. In Britain this would be provided by dentists working mainly in the NHS, usually in small practices, aided by hygienists and with a two way loyalty between patients and dentists. Treatment of acute swelling, pain and sepsis was given priority without exception. There was an emphasis on treatment and prevention rather than access.

Where are we today? Wholesale fluoridation of water has not occurred; healthy drinking of fruit juice has increased, as too has the intake of fizzy pop and sweets. There appear to be more practitioners on the register (but possibly working fewer hours) and contracts are such that it appears many practitioners do not feel as responsible for patients as previously, mainly due to there being emergency clinics provided for access outside working hours. At these clinics it appears that patients are prescribed antibiotics without the drainage and removal of the cause of sepsis or treatment.

There also seems to be change with practitioners being employed by companies at fixed hours and on a business basis. The journals are full of details about tooth whitening, cosmetic dentistry and implants and the BDA is concerned with reports to the Office of Fair Trading. Some dentists refer to patients as clients!