

## EVIDENCE BOOST FOR BENEFITS OF FLUORIDATED WATER

A new Australian study<sup>1</sup> has provided further evidence that drinking fluoridated water can help prevent tooth decay in adults of all ages, regardless of whether or not they began drinking it in childhood.

Using a nationally representative sample of 3,779 adults from the 2004-2006 Australian National Survey of Adult Oral Health, researchers compared the

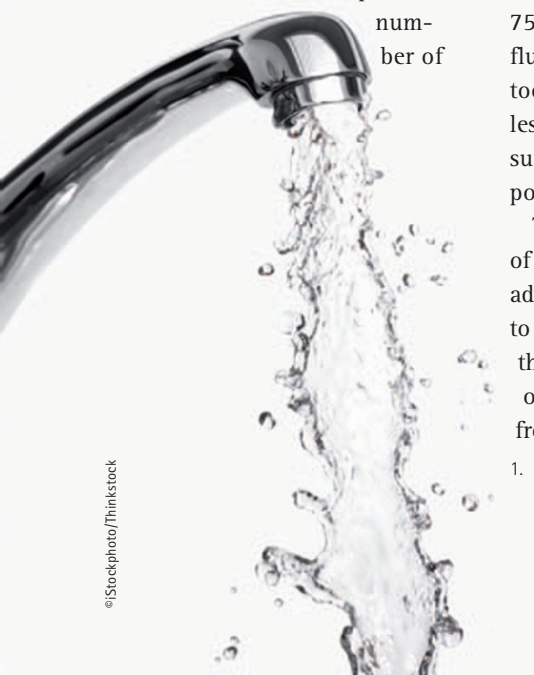
number of

decayed, missing and filled teeth in those born before 1960 (pre-fluoridation) and those born between 1960-1990, when the implementation of fluoride in drinking water became widespread, covering 67% of the population. The percentage of each participant's lifetime in which the public water supply had been fluoridated was then calculated. Adults who had spent more than 75% of their lifetime exposed to fluoridation had significantly less tooth decay than those who had less than 25% lifetime exposure, even if exposure started post-childhood.

This study adds to the corpus of evidence pointing towards the advantages of long-term exposure to water fluoridation and dispels the myth that fluoride in water only benefits those consuming it from birth.

1. Slade G D, Sanders A E, Do L, Roberts-Thomson K, Spencer A J. Effects of fluoridated drinking water on dental caries in Australian adults. *J Dent Res* 2013; 92: 376-382.

By Laura Pacey



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## CAUSE FOR APPLAUSE

A new charity has been founded called **Burmament** by practice owners Sharon Bierer and her husband Henrik Overgaard-Nielsen. **Burmament** aims to encourage people to take their much-needed skills to Burma.

Last year's popular **Mouth Cancer Awareness Walk** in Hyde Park raised £40,000. **Barbican Dental Care** was the **top fundraiser**, raising £1,820.

Fundraising events for **Bridge2Aid** this year include the **Yorkshire Three Peaks Challenge** this month; the **Nightrider Challenge** in June that involves cycling 100 km through London under the stars; and a **Golf Tournament** in August at Hankley Common Golf Club in Surrey. Email fundraising@bridge2aid.org.

**Denplan** has donated £26,888.55 to **Macmillan Cancer Support**, raised by staff and member dentists throughout 2012.

**Rebecca Beard** of Software of Excellence is running the **London Marathon** this month for **Breast Cancer Care**. Rebecca applied to run in aid of numerous charities but the offer from Breast Cancer Care came at an opportune moment as it was just days after Becky heard that one of her close relatives is suffering from the disease.

**Henry Schein Dental** has made a charitable donation to the **Alpha Omega International Dental Fraternity**, one of the largest providers of postgraduate dental education.

**Straumann UK** are raising money for charity by taking part in a **bike ride** from their headquarters in Basel, Switzerland, to their UK offices in Crawley, West Sussex: **600 miles in six days**. A 30-strong team of staff and very loyal customers will set off in September and each person aims to raise a minimum £1,000 for **Bridge2Aid** and the **Cleft Lip and Palate Association (CLAPA)**.

## PRACTICE PROFITS DROP TO 2004 LEVELS

Dental practices have been contending with a significant increase in costs, according to the tax returns of dentists in the year ending March 2012.

The annual benchmarking statistics just issued by NASDAL (the National Association of Specialist Dental Accountants and Lawyers) show that the total average costs of running a dental practice equated to 67.6% of practice income. As a result, profits are almost back to the levels in the 2004-2005 NASDAL survey.

While fee income has risen on average by £21,000 in NHS practices included in the survey, profit is down. In the private sector, fee income is down and profits are static. Larger practices, with associates, have seen the greatest reduction in profit.

NASDAL's statistics also show that the average net profit for a typical dental practice in 2010/2011 was £125,000 and by the end of March 2012 it was down to £122,000, and an NHS principal's net profit is down by nearly 3% to £130,000 while a private practice principal's net profit is static at £117,000.

Overall, NHS practices continue to earn greater profit than private practices, although the gap has narrowed in recent years.

NASDAL's statistics reflect the fee income of practices with up to 80% NHS commitment while a private practice is deemed to have up to 80% of its income derived from private fees.

### Pensions guidance

The pensionable earnings of at least 3,000 performers have been substantially understated since the introduction of the new contract in 2006.

According to David Paul, a specialist chartered accountant, when the new dental contract

was introduced, it became the responsibility of principals to fill in an annual reconciliation report (ARR), a statutory form which details the pensionable earnings of every dentist at the practice, and the majority of these forms were not filled in accurately.

In December 2012 new guidance was published by the Pensions Agency on its website after collaboration between NASDAL, the British Dental Association, the Pensions Agency and NHS Business Services. The guidance can be viewed at the following link, chapter 8: [http://www.nhsbsa.nhs.uk/Documents/Pensions/GDP\\_Pensions\\_Guide\\_\(V2\)\\_12.2012.pdf](http://www.nhsbsa.nhs.uk/Documents/Pensions/GDP_Pensions_Guide_(V2)_12.2012.pdf).