

Dentist morale falling alongside dwindling income



Morale of general dental practitioners has fallen steadily over the past decade at the same time as declining income levels, according to official data released by NHS Digital.

The official figures paint a worrying picture of a profession losing confidence, earning less and struggling to meet the needs of patients with less time spent on clinical work – a situation described by the BDA as a system ‘running on fumes’.

The data¹ from NHS Digital published on 30 August 2018 showed that NHS dentists in England and Wales had experienced a 35% pay squeeze over the last decade.

Real incomes for practice-owning dentists fell by as much as £47,000, and their associates by more than £23,000 over the last decade.

In 2016-17, there was a 0.7% drop in taxable income of self-employed dentists (Providing-Performer and Performer Only dentists) in England and Wales from £69,200 in 2015-16 to £68,700 in 2016-17.

In 2016-17, there was a 4.3% decrease in taxable income of self-employed dentists (Principal and Associate dentists) in Northern Ireland, from £69,400 in 2015-16 to £66,400 in 2016-17.

However, in Scotland, 2016-17 saw a 0.1% increase in taxable income of self-employed dentists from £67,700 in 2015-16 to £67,800 in 2016-17.

Other data² on dental working hours, working patterns, motivation and morale published at the same time showed that morale has fallen to lowest levels since 2000.

Morale described as ‘high’ or ‘very high’ in 2016-17 was only found in a fifth (20.1%) of principals and a quarter (24.9%) of associates.

In contrast, morale recorded as ‘low’ or ‘very low’ was 56% for principals and 48.1% for associates.

Growing disillusionment with the job was evident as the figures showed that almost two thirds (62.7%) of principal dentists in England and Wales said they often thought about leaving general dental practice in 2017-18 compared to 57.2% in 2015-16.

More than half (56.1%) of associate dentists said they often thought of leaving in 2017-18 compared to 47.6% in 2015-16.

A similar pattern was evident in Scotland where 69.3% of principal dentists said they often thought of leaving in 2017-18 compared to 57.1% in 2015-16 while 57.1% of associate dentists considered leaving in 2017-18 compared to 45.9% in 2015-16. Northern Ireland’s dentists had similar opinions.

The time spent on clinical work rather than administration or management has also been reducing as the data showed that in 2017-18, dentists in England and Wales spent, on average, 77.2% of their time on clinical work – a decrease from 85.4% in 2008-09. Similar trends were apparent in Scotland and Northern Ireland.

BDA Chair of General Dental Practice Henrik Overgaard-Nielsen said: ‘Austerity is meant to be over, but across the UK NHS dentistry is running on fumes. We’ve seen a drop in real incomes without precedent in the public sector. The results are predictable, morale at an all-time low, recruitment and retention problems mounting, as patients wait longer or travel further for care.’

1. NHS Digital. *Dental Working Hours 2016/17 and 2017/18: Working Patterns, Motivation and Morale [PAS]*. 30 August 2018. <https://digital.nhs.uk/data-and-information/publications/statistical/dental-working-hours/2016-17-and-2017-18-working-patterns-motivation-and-morale> (accessed on 3 September 2018).
2. NHS Digital. *Dental Earnings and Expenses Estimates 2016/17*. 30 August 2018. <https://digital.nhs.uk/data-and-information/publications/statistical/dental-earnings-and-expenses-estimates/2016-17> (accessed 3 September 2018).

Dental care may benefit patients set for cancer surgery

Patients due to undergo cancer surgery who receive good preoperative oral care from a dentist appear to be significantly less likely to develop postoperative complications, suggests a recent study¹ published in the *British Journal of Surgery* on 8 August 2018.

Japanese researchers found that the involvement of dentists in the preoperative management of patients who are undergoing cancer surgery may be essential for decreasing postoperative complications such as pneumonia or even death.

Improving patients’ oral hygiene is an option for preventing postoperative pneumonia that may be caused by aspiration of oral and pharyngeal secretions.

Several previous studies have suggested that preoperative oral care might be associated with a decrease in postoperative pneumonia and mortality after cardiac or cancer surgery, but it remains unclear because these studies were limited by small sample sizes and a small number of participating institutions.

Therefore a team of researchers from the University of Tokyo carried out a retrospective cohort study to assess the association between preoperative oral care and postoperative complications among patients due to have major cancer surgery.

Using data from the National Database of Health Insurance Claims in Japan – an all-patient administrative claims database developed by Japan’s Ministry of Health, Labour and Welfare that covers more than 126 million people – they studied 509,179 patients who underwent surgery for head and neck, oesophageal, gastric, colorectal, lung or liver cancer between May 2012 and December 2015.

Patients were monitored 12 months before surgery until the day of

