

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, Liane Voisey at the BDJ, 64 Wimpole Street WIG 8YS or by e-mail to bdj@bda-dentistry.org.uk

Milk Teeth Predict Future

Children with caries in their primary dentition are nearly three times more likely to have decay in their permanent teeth and should be considered as being at high risk for future decay, according to a new Chinese study. The recommendation is in line with a recent recommendation from the U.S. Centers for Disease Control and Prevention, which called for a reduction in tooth decay through water fluoridation and dental sealants.

In the study, reported in *Journal of Dental Research*, 362 Chinese children aged 3 to 5 years old were assessed in 1992 and again in 2000. Of those who had caries on their primary molars, 85 per cent showed at least one decayed permanent tooth in a follow-up examination in 2000. In contrast, 83 per cent of the children who exhibited no caries in their primary teeth remained decay-free until at least 12 years.

Students welcome 'on the job' training

Dental students are enthusiastic about 'on the job' training after graduation despite mounting debt, according to a survey by the BDA.

A new scheme in particular got the thumbs-up, with over two-thirds of final year students saying that they wanted to take part. The two-year General Professional Training (GPT) scheme offers graduates the chance to work in a community or hospital practice, as well as spending a year in general practice. Historically, community and hospital practice have been low on the list of students' choices, but the BDA hopes that GPT may spark an interest that could help bolster these vital but under-resourced areas.

Jim Lafferty, Chair of the BDA's Young Dentists Committee, says that greater investment is required before the scheme is expanded, as dentists choosing this option currently incur a financial penalty not faced by their counterparts on Vocational Training.

Malaysia's daily tooth brushing drills



When Jenny Asquith, a dental student from Newcastle Dental Hospital visited the Malaysian state of Sarawak, she was interested to observe how dental nurses travelling around the state provided preventative and simple restorative care to school children. If the daily tooth brushing drills were anything to go by, children actually enjoyed brushing their teeth and eagerly queued up for dental examinations!

Scottish and Northern Ireland patients risk EU action

Members of the Scottish Parliament and Northern Ireland Assembly are being faced with growing concern over the safety of Scottish patients.

This week, a new Alliance of ten UK health and social care regulators (AURE) has written to all Members of the Scottish Parliament about its concerns for Scottish patients. This threat to patient safety is posed by a new EU draft Directive which proposes that healthcare professionals from any EU country would be allowed to work for up to four months per year, every year, in the UK, without being registered with a UK regulator. In practice this means that if there was a problem with the care a person received, the UK regulators would have no powers to take action against the individual. Nor would there be any means of preventing the same problem from happening again with other patients.

Alliance members welcome the contribution made by health professionals from

other European Union countries and support the freedom of movement of professionals. However, they have serious concerns about the Directive and the impact it could have on patient safety.

The Directive also proposes to water down existing public protection safeguards. Each regulator at present can assure the public that everyone coming onto its register is properly qualified to practise. The Alliance wants to see an effective mechanism put in place, which ensures high standards of practice in education, training and communication across the EU.

The current proposals do not meet this need. Professor Nairn Wilson, president of the General Dental Council said, "We, the regulators, all exist to protect the public and uphold the highest standards of care. We believe that the Directive should be an opportunity to secure the standards we would all like to see. This draft fails to do this".

Call for urgent action on fluoridation

A report, carried out by a working group set up by the Medical Research Council (MRC), which follows on the systemic review of research on fluoridation published by the University of York in September 2000, has been published.

The working group also considered some concerns that have been expressed about the safety of fluoridation and sought to identify which of these have a plausible scientific basis and what further research might be required.

One of the MRC working group's main recommendations is that a comparison be made between the amount of fluoride the body absorbs from water supplies in which it occurs naturally and those to which it has been added artificially. In the past it has been assumed that absorption is similar from either source and that the health experience of residents of areas in which fluoride occurs naturally can be applied to those of areas in which drinking water is artificially fluoridated. Whilst the working group considered this assumption to be quite reasonable they recommended that it be confirmed.

Playing politics with child dental health?

The BDA has condemned an alarmist report by the Green Party alleging that water fluoridation is an 'unnecessary health risk'. The Association has stressed its own commitment to targeted fluoridation of public water supplies which it argues should always be based on sound scientific evidence and with the support of local communities.

The BDA does not back mass fluoridation but believes that fluoridation targeted at areas most in need would

Health minister Hazel Blears says that the report demonstrates that water fluoridation is an important and effective method of protecting the population from caries and reduces inequalities in dental health.

John Renshaw, chairman of the BDA's Executive Board, said that the report is good news for all who care about children's dental health, especially children from socially deprived backgrounds who suffer most from dental caries.

The report, he says, underlines once again that fluoridation reduces tooth decay and gives reassurance on any wider health issues related to fluoridation. He said that more research is needed and the BDA would expect this to include trials (population studies) in areas where local communities want fluoridation. The more time that is wasted, he said, the more children will miss out. The BDA has lobbied hard for targeted fluoridation of public water supplies which, says the BDA, should be based on sound scientific evidence and have the support of local communities.

significantly improve children's dental health. Professor Liz Kay, the BDA's scientific advisor says that the Green Party is playing politics with children's dental health. She says that apart from ignoring the real benefits fluoride brings to oral health, especially in areas of social deprivation, there is no scientific basis whatsoever to claims that fluoride in water is unsafe and that research has shown fluoridation to still be considered safe and effective.

Call for tougher controls on tongue piercing

The surge in the popularity of body piercings has made the Chartered Institute for Environmental Health call for tougher hygiene and licensing controls to reduce the risk of blood-related diseases such as hepatitis and HIV, and simpler infections.

In particular, there has been a growth in oral piercings recently – a fad taken up by Princess Anne's daughter Zara Phillips, who was spotted wearing a tongue stud – as well as multiple piercings through ear cartilage. As a result, dentists have reported chipped teeth, excessive bleeding, nerve damage and speech impediments in people with pierced tongues.

A growing number of GPs are reporting cases of young people contracting infections from piercings.

The cost to the NHS has been estimated at £1.5 million a year. Launching its campaign at its annual conference in Harrogate, the institute said that it was time to follow the lead of countries such as America, where body piercing is subject to federal legislation and a national licensing scheme.



GDC guidance on degree programme

The GDC has published the second edition of *The First Five Years*, the Council's guidance on the scope and content of the undergraduate dental degree programme. *The First Five Years: A Framework for Undergraduate Dental Education* aims to ensure that universities provide modern systems of education and clinical training. With its role to protect the public, the Council is concerned that dental students graduate with the required clinical skills and knowledge, together with the attitudes and qualities they need to give their patients a high standard of care.

Major features of the second edition of the edition, which has been subject to extensive consultation, include:

- Key principles underpinning the undergraduate dental programme.
- A section on specific learning outcomes, setting out the knowledge and competencies required of a dental graduate
- Guidance on pain and anxiety control, replacing previous paragraphs on sedation and general anaesthesia
- A major section on student health and conduct.
- The new document has been sent to all the UK dental schools for the start of the new academic year. Armed with this guidance, the schools can further refine their degree programmes taking account of contem-

porary clinical practice. Between October 2003 and June 2006, the GDC will visit all the schools to confirm that their undergraduate dental programmes and examinations meet the new requirements.

GDC President, Professor Nairn Wilson welcomes the publication of the second edition because the practice of dentistry and the expectations of patients are constantly evolving. He says that it is important that requirements for educational programmes keep up with the changing times. He says that he hopes that this publication will help the dental schools to ensure that the dentists of tomorrow emerge with the qualities, skills and knowledge they need to serve the public well.



RESEARCH

Cleft lip and palate gene identified

Scientists have identified a crucial faulty gene that causes an inherited form of cleft lip and palate. The form of the condition, known as Van der Woude syndrome, can cause severe facial disfigurements in babies.

The researchers discovered the gene – known as Interferon Regulatory Factor 6 (IRF6) – by examining information generated from the Human Genome Project.

Much of the work was based on an analysis of samples from a set of twins in Brazil, where, highly unusually, one boy was born with Van der Woude syndrome, and the other without. In the long-term, it could lead to better understanding of why and how cleft lip and palate occurs, and could lead to treatments during pregnancy that might prevent the development of the condition.

Researcher Professor Michael Dixon, of the University of Manchester, says that this research is of significant global interest –

every 11 minutes, a child is born somewhere in the world with a cleft lip and palate. He says that it will be at least 10 years before any treatments are available, but in the short-term, families affected by Van der Woude will have a genetic test available that will help them prepare in advance for having a child with this syndrome. Professor Dixon said the next stage would be to examine how the gene interacts with others involved in face and mouth development.

There is currently no way to prevent babies developing cleft palate. Van der Woude syndrome (VDW) accounts for about 2% of all cleft lip and palate cases, which means it affects some 2,000 individuals in the UK.

The Birth Defects Foundation reported in March 2002 that there has been a rise of 50% over the last five years in birth defects including cleft lip and palate. The research has been part funded by the charity Action Research.

DIARY

October 2002

Manchester Medical Society Section of Odontology's Joint Symposium with the BDA & FGDP

Date: 30.10.02

Venue: Manchester

Contact: Fiona Lamb, Administrator, Manchester Medical Society, John Ryland's University Library, Oxford Road, Manchester M13 9PP

Tel: +44 (0)161 273 6048

Fax: +44 (0)161 272 8046

November 2002

University of Sheffield Department of Restorative Dentistry: 20th Annual Postgraduate Day

Date: 16.11.02

Venue: Sheffield Hallam University Convention Centre

Contact: Peter Johnson, Event Organiser, School of Clinical Dentistry, Claremont Crescent, Sheffield, S10 2TA.

Tel: +44 (0)114 266 0987

Fax: +44 (0)114 266 5326

January 2003

Commonwealth Medico-Legal Conference

Date: 17.01.03–18.01.03

Venue: Kuala Lumpur

Contact: Alice Joseph, c/o Malaysian Medical Association, 4th Floor, MMA House, 124 Jalan Pahang, 53000 Kuala Lumpur.

Tel: +03 40411375

Fax: +03 40434444

Website: www.mma.org.my/event/cmlc

March 2003

American Association for Dental Research (AADR) Exhibition

Date: 13.03.03–15.03.03

Venue: San Antonio, Texas, USA

Contact: Michael Dominguez, CMP Exhibits Manager, IADR/AADR Central Office, 1619 Duke Street, Alexandria, VA 22314–3406, USA.

Tel: (001) 202 887 0788

Fax: (001) 202 861 9799

E-mail: michael@iadr.org

June 2003

10th International Dental Congress on Modern Pain Control

Date: 05.06.03–07.06.03

Venue: Edinburgh, Scotland

Contact: Congress Secretariat, SAAD2003, Concorde Services, 4B 50 Speirs Wharf, Glasgow. G4 9TB.

Tel: +44 (0)141 331 0123

Fax: +44 (0)141 331 0234

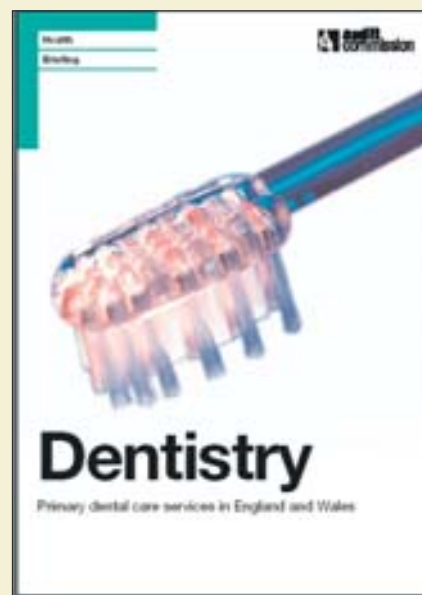
Website: www.saaduk.org

Problems with primary dental care services

The Audit Commission's latest report 'Dentistry – Primary Dental Care Services in England and Wales' outlines some of the main problems with the current dental healthcare system and makes suggestions on how things could be improved. Some of the main findings of the report include:

- Access to urgent and drop-in care has improved since 1999, but 40 per cent of dental practices are not accepting children or adults for registration for NHS continuing, preventative care. In some places, no dentists will accept adult NHS patients.
- The number of adults registered with an NHS dentist has declined.
- Registration rates for children are higher and have stayed at about the same rate since registration was introduced.
- In deprived areas dental health is worse, and fewer people are registered with a dentist. In some localities children's decay levels are as bad as they were 15 years ago.
- NHS funds are spent on over-frequent examinations for many people whose dental health is generally good – and on treatment that is not of proven benefit to health, or that is cosmetic. At least £150 million in England, and £8 million in Wales is wasted in these ways.
- Dentists who offer NHS care report that they have to work increasingly hard and quickly, perhaps compromising quality, in order to keep their businesses alive.
- Changes to the system have been proposed for nearly 40 years but it has remained essentially the same. Since 1997, some useful initiatives have been started, but they cover only one per cent of the population.

- Patients are confused about whether they are paying for NHS or private care. The Governments in England and Wales, local commissioning bodies and the profession should support patients to become informed consumers.
- The NHS should emphasise prevention. Much health promotion activity is best done by local health commissioning bodies but the Governments should act to secure rapid fluoridation of water supplies.
- The piecemeal system should be replaced. A new national framework should enable patients who are at high risk of caries and periodontal disease to receive more frequent check-ups than those with generally good oral health.
- Local health commissioning bodies should shape services with these national standards, but also to suit their area, through local contracts with dentists.



Starting young on oral health

There were smiles all round at the Progress House day nursery in Market Harborough recently as youngsters learnt all about the importance of good dental health. Staff from the Union Wharf Dental Practice taught the children how to look after their teeth.

Afterwards all the children were presented with stickers, toothbrushes, and leaflets on looking after your teeth for life. Principal Dr Meetal Patel said that everyone enjoyed the afternoon, and that it has certainly helped to assert the importance of dental health at a young age.

Pictured right: Dr Meetal Patel and Jane Turner with staff and children at the Progress House Day Nursery.

