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

NEW YEAR HONOURS

BDJ Advisory Board member Professor Jonathan Shepherd and Professor Saman Warnakulasuriya, Professor of Oral Medicine and Experimental Pathology at King's College London, have been recognised in the Queen's New Year Honours list for 2008.

Professor Shepherd is Professor of Oral and Maxillofacial Surgery at Cardiff University School of Dentistry and also Director of the Violence and Society Research Group (VSRG) at Cardiff University. He was awarded a CBE for services to healthcare and the criminal justice system, recognising his ground-breaking work with the VSRG.

Professor Warnakulasuriya was awarded an OBE for services to medicine, in recognition of his national and international reputation in the field of oral medicine and his distinguished career in cancer research.

Three awards were also made for services to dentistry. Professor William Shaw, Professor of Orthodontics and Dentofacial Development at the University of Manchester School of Dentistry, was awarded a CBE, while MBEs were awarded to Ms Ursula Bennett, Head of Dentistry in Tower Hamlets, London, and to Rajendra Rattan, GDP and regional VT advisor for the London Deanery.

DENTAL FACULTY ANNOUNCES NEW DEAN

The Royal College of Surgeons of Edinburgh has announced the Dr D. H. Felix has been elected Convener of Dental Council and Dean of the Faculty of Dental Surgery. Dr Felix will take up his Deanship at the Annual Dental Meeting on Thursday 25 September 2008 for a period of three years.

Dr Felix is Consultant in Oral Medicine at Glasgow Dental Hospital and School and Associate Dean for Postgraduate Dental Education, NHS Scotland.



NEW APPOINTMENTS AT DENTAL PROTECTION

An unprecedented demand for advice and assistance from members of Dental Protection (DPL) over the last year has led to the recent appointment of 13 new dentolegal advisors by the organisation.

DPL now has 50,000 members and issues arising from the new NHS dental contract, together with the GDC's new Fitness to Practise procedures, have had a major impact on the work of the organisation and the scale of the legal and advisory resources required to address the increased demand. The

announcement of the new positions will ensure the structure of DPL reflects its continuing commitment to service.

Kevin Lewis, Dental Director, said 'Our members rightly expect this organisation to look for ways to help where others might not do so, and to go the "extra mile" rather than cutting corners.' He continued, 'We are acknowledged as the international leaders in dental risk management, and far from being complacent, we are determined to deliver even more to members in 2008.'

AUSTRALIAN STAMP COMMEMORATES SUPER-STRONG TEETH

Few people have careers that specifically require them to have strong, healthy teeth, but a notable exception was recently featured on an Australian stamp.

During 2007, Australia Post issued a set of postage stamps to commemorate

circus acts. One of them, pictured here, featured Ashton's Circus strongman Jonas Zilinskas, whose act involved holding an aerial trapeze with his teeth on which the younger (and presumably lighter!) artists performed. He

performed this for over 50 years until he finally give up in 2001, when he was well into his 80s.



NEW DWSI FRAMEWORK FOR LOCAL SEDATION SERVICES



The Faculty of General Dental Practice (UK) (FGDP(UK)) and the Department of Health have announced the publication of the latest in a series of competency frameworks for dentists with special interests (DwSIs).

The Guidelines for the appointment of DwSIs in conscious sedation are intended to provide primary care trusts with guidance to support the development of dental sedation services where there is local need. They will also help dentists with an interest in this area to identify their learning needs and undertake further training.

David Craig, Head of Sedation and Special Care Dentistry at King's College London Dental Institute and Chair of the working group that developed the guidelines, said 'There is a shortage of suitably trained and experienced dentists who are able to offer alternative sedation techniques for the small number of patients who cannot be safely and effectively

managed using standard techniques. It is hoped that the publication of these guidelines will support dentists who wish to develop an interest in this important area of dental practice and that this will benefit anxious patients faced with the prospect of an unpleasant and possibly distressing dental procedure.'

Conscious sedation is integral to the control of dental pain and anxiety. The guidelines have been developed in conjunction with representatives from the Society for the Advancement of Anaesthesia in Dentistry, the Association of Dental Anaesthetists and the British Dental Association, amongst others. They are intended to be read alongside two key reports, the Standing Dental Advisory Committee's Conscious sedation in the provision of dental care (2003) and the Standing Committee on Sedation for Dentistry's Standards for conscious sedation in dentistry: alternative techniques (2007).

CITIZENS ADVICE SURVEY PAINTS BLEAK NHS DENTISTRY ACCESS PICTURE

A survey on access to NHS dentistry by the Citizens Advice Bureau (CAB) has found that 31% of people questioned, equivalent to 7.4 million people in England and Wales, have not visited an NHS dentist since the introduction of the new contract in April 2006. Around 2.7 million of these patients have gone without treatment altogether as a result of this access problem.

Responding to the survey, the British Dental Association (BDA) warned that primary care trusts and dentists must be properly supported if the Government is serious about improving access for patients. 'This data highlights once again the significant number of people who would like to access NHS dentistry but are unable to do so,' said Susie Sanderson, Chair of the BDA Executive Board. 'It is clear that the new dental contract has, so far, not achieved the stated aim of improving access to NHS care.'

Speaking on BBC Radio Four's Today programme on January 16, Chief Executive Officer of the Dental Practitioners Association Derek Watson also highlighted the shortcomings of the new contract. 'The CAB figures reflect the feedback we are getting back from our members and mirrors a larger survey by the Patient and Public Information Forums,' he said. 'There is a massive gap in the terms and conditions between working on the NHS and privately and most dentists are choosing not to work on the NHS because it represents a significant business risk.'

The Government recently announced an 11% increase in funding for NHS dental services together with a target to increase the number of patients able to access NHS dentistry.

BDA WELCOMES CHANGE OF HEART ON CAPITAL GAINS TAX

The Government has abandoned pre-Budget report plans to impose a single 18% tax rate on all capital gains. Instead there will be a 10% rate on gains of up to £1 million, as announced by Chancellor of the Exchequer Alistair Darling on January 25.

Speaking after the change of heart was announced, Susie Sanderson, Chair of the British Dental Association's Executive Board, said: 'We told the Chancellor that the pre-Budget report proposals would have both disadvantaged general dental practitioners who have invested in their

practices over many years and threatened to act as a disincentive to a new generation of potential practice owners. Today's announcement represents a welcome change of heart and recognises the significant levels of investment in facilities made by dentists in providing dental services.'

SALIVARY ANALYSIS SUGGESTS FUTURE ROLE FOR DENTISTS IN BREAST CANCER SCREENING

US researchers at the University of Texas Health Science Center, Houston, have opened up the possibility of a simple test for breast cancer with the discovery of cancer marker proteins in saliva.

The study, published online on 10 January 2008 ahead of print in the journal Cancer Investigation (DOI 10. 1080/07357900701783883), analysed pooled saliva samples from 30 patients - ten with benign breast tumours, ten with malignant breast tumours and ten healthy patients. The researchers found 49 proteins that differentiated healthy patients from those with benign breast tumours and those with malignant breast tumours, suggesting that patients could be tested for breast cancer with a simple salivary test during a visit to their doctor or dentist.

Dr William Dubinsky, Professor of Integrative Biology and Pharmacology at the University of Texas Medical School, Houston and a co-author of the paper, explained 'Saliva is a complex mixture of proteins. We go through a process that compares different samples by chemically labelling them in such a way that we can not only identify the protein, but determine how much of it is in each sample.'

As well as identifying markers for malignant tumours, the researchers also found unique proteins for fibroadenoma, the most common type of benign breast tumour. 'This is a unique finding,' said Professor Charles Streckfus, lead author and Professor of Diagnostic Sciences at the University of Texas Health Sciences Center Dental Branch, 'as it targets both the benign and malignant tumour, which could potentially reduce the number of false positives and false negatives associated with current cancer diagnostics.'

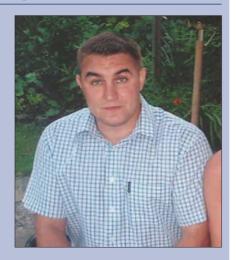
Professor Streckfus suggested that a test developed from the technique would be ideal for use by dentists. However BDJ and BDA Scientific Advisor Damien Walmsley, commenting on the study, was more cautious. 'Maybe one day it will be feasible to go to the dentist to be screened for a variety of disorders in the body, including breast cancer, though it's more likely that the test will be done in specialist centres or by your GP.' He also stressed dentists' existing role in oral cancer screening, saying, 'The mouth itself is a good indicator of an individual's overall health and dentists already play an important role in diagnosing and detecting oral cancers.'

HELP NEEDED WITH POLICE ENQUIRY

Cheshire Police are seeking information about the whereabouts of John Thomas Iveson, aka John Butler, who was last seen in the Nantwich area of Cheshire on Tuesday 30 January 2007. Mr Iveson was reported missing on February 2 2007 and Cheshire Constabulary has now begun a major incident inquiry into his disappearance.

Mr Iveson's date of birth is 13 August 1971, although he also uses 13 August 1970. His last known address was Mile House Farm, Worleston, Nantwich, Cheshire, CW5 6DH and his previous address 11 Riverbank Close, Nantwich, Cheshire.

If you recognise Mr Iveson, or if he has registered with you or you have



treated him over the past 12 months, please contact the Operation Pisces incident room on 01244 612770.

DIARY

FEBRUARY

FGDP(UK) Career Pathway Away Day 2008

Date: 15 February 2008 Venue: Birmingham City Hospital Email: aschuele@rcseng.ac.uk www.fgdp.org.uk/news/index_html? event_id=85

143rd Chicago Dental Society Midwinter Meeting

Date: 21-24 February 2008

Venue: McCormick Place Lakeside Center,

Chicago, USA www.cds.org/mwm

Ethical sales and communication seminars

Date: 11-12 February 2008 Venue: Hilton Hotel, Gateshead Date: 25-26 February 2008

Venue: Parkfield Inn, Whitefield, Manchester

Date: 28-29 February

Venue: British Orthodontic Society, London

Tel: 0161 280 5837 www.thesellingcoach.co.uk

BDA Seminar series: Achieving high standards in infection control

Date: 29 February 2008 Venue: Midland Hotel, Manchester

Tel: 020 7563 4590 Email: events@bda.org www.bda.org/events

MARCH

BDA Seminar series: Developing your practice: marketing and sales strategies

Date: 7 March 2008 Venue: BDA, London Tel: 020 7563 4590 Email: events@bda.org www.bda.org/events

BDA Seminar series: Setting up in practice

Date: 14 March 2008

Venue: Holiday Inn, Liverpool City Centre

Tel: 020 7563 4590 Email: events@bda.org www.bda.org/events

GDC SEEKS VIEWS ON PROVISIONAL REGISTRATION

The General Dental Council (GDC) is seeking views on proposals to introduce a period of provisional registration for dentists and dental care professionals joining the registers for the first time.

Under the proposals, which aim to enhance patient protection, dental professionals will need to pass an initial assessment (validation) against GDC standards before moving from provisional to full registration. Dental professionals would then re-validate their full registration on a regular basis.

The Council is asking for the views of the public, dental professionals and others on the following areas:

• Do you support the principle of provisional registration?

- Should provisional registration apply to all groups of dental professionals?
- How long should provisional registration be?
- Should the activities dental professionals undertake be restricted during provisional registration?
- What should happen if a dental professional does not meet the requirements of validation?
- In what ways do you think provisional registration could be delivered?

The consultation document is available on the GDC website at www.gdc-uk.org. The closing date for responses is 20 March 2008.

AMALGAM FILLINGS DO NOT AFFECT CHILDREN'S BRAINS

Amalgam fillings do not adversely affect the development of children's brains, according to research published in the February 2008 issue of the *Journal of the American Dental Association*.

The report comes from a joint team of researchers from the University of Lisbon, Portugal and the University of Washington, Seattle, USA and looked at the possible neurological effects of amalgam restorations. The team studied 507 Portuguese children aged 8-12 over a seven-year period beginning in 1997. The children received either amalgam or composite resin restorations.

Two types of neurological signs, 'hard' and 'soft', were assessed in the children using routine clinical neurological examinations. Hard signs indicate damage to specific neural structures, while soft signs are very subtle signs of central nervous system dysfunction that are likely to point to immature sensory motor skills rather than any specific damage to the brain. The children were also evaluated for the presence of tremor.

After seven years, there was no difference between the group with amalgam restorations and the group with composite fillings in terms of the presence or absence of hard neurological signs or tremor. Additionally, no differences in the presence, absence or severity of soft signs were found between the two groups and any soft signs found diminished as the children aged, as would be expected in healthy children.

The authors conclude that even at average amalgam exposure levels of 7.7-10.7 amalgam surfaces per subject over seven years, mercury exposure from dental amalgam does not adversely affect neurological status.

