This pay disparity poses a significant deterrent to those wishing to pursue further training and gain experience providing treatment for patients in a secondary care environment in Northern Ireland. This issue needs to be raised and addressed urgently by the relevant healthcare authorities in NI to ensure equal opportunities for all trainees.

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Paediatric dentistry

Let it go – Lego!

Sir, we would like to bring an interesting case to the reader's attention of a six-year-old boy that we recently saw in our paediatric dental department.

He presented with his anxious and worried mother, having bitten down onto a piece of Lego which was now firmly lodged onto his lower front tooth. The mother explained to us that her son has a tendency to bite on hard objects due to sensory issues associated with his autism spectrum disorder. Previous similar cases have been noted.^{1,2} However, the added complexity of this patient's behavioural needs proved challenging in our management of this young boy.

Examination revealed a grey, hollow, cylindrical piece of plastic Lego firmly encasing the lower left permanent central incisor (Fig. 1). The tooth exhibited grade 1 mobility. A limited radiographic

examination confirmed this was his permanent tooth with no obvious abnormal radiographic signs.

Attempts to remove the piece by hand and fast handpiece proved futile as the underlying tooth was tender to pressure and his compliance and anxiety were increasing the longer he was in the dental surgery. Therefore, following discussion with his mother, arrangements were made for the boy to return the following day for removal of the Lego under general anaesthetic.

On contacting the parent later that day to confirm details of his admission, we were surprised and relieved to hear that her son had managed to detach the Lego piece from his tooth whilst eating a 'crunchy chocolate bar' snack, which he had received as a treat for being so brave at the dentist! Plans were made for clinical review of the tooth but unfortunately the family were unable to attend. A telephone review has been undertaken and his mother has confirmed that his boy's tooth (and Lego piece) have made a full recovery.

On discussion with our team, one of our dental nurses highlighted that this particular Lego piece (a wheel hub) has a lever to tighten/release its mechanism. Although we have not tested this theory, it may be possible to use this lever to remove the Lego without resorting to a planned general anaesthetic.

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Oral health

Frederick Hiles

Sir, we believe that in these uncertain times inspiration can be drawn from the life of John Frederick Bartram Hiles (1872–1927). Aged eight, after a tram accident, Hiles suffered the traumatic loss of both arms – amputated at the shoulders.^{1,2} Defiantly refusing to be defined by disability and determined to re-make then re-fashion himself with the opportunities available at the turn of that century, by age 16 Hiles taught himself to draw and paint with pencils and brushes held between his teeth. Eighteen years old and with no indication of the manner of his work, Hiles' paintings had won prizes and his rightful place in the National Arts Academy.¹ At twenty-one, a scholarship from the Royal Society of Arts enabled study in Paris with the impressionists: Renoir, Monet and Pissarro.²

With patronage from Queen Victoria, Hiles returned from Europe to paint by mouth the Princess of Wales. By his early thirties, married with a daughter and elected to the Bristol Savages art society, a regular income was assured. Rather than being marginalised, Bartram emerged from catastrophic childhood injuries to fully participate in a society that was ambivalent towards difference, otherness and perceptions of normality.³

However, this period of Bartram's life was tragically brief: periodontal disease robbed him of an ability to make a living; multiple extractions led to him being unable to work. Deprived of his calling and weakened, by July 1927 aged just 55, Bartram Hiles passed on. Neither the restrictions of disability nor Victorian-Edwardian society prevented the expression of Hiles' artistic talent; his end came from the effects of untreated dental disease. While his legacy was overshadowed in the advent, then aftermath of the Second World War, Bartram Hiles is relevant for dentistry today for the following reasons:

1. Adapting to function with restrictions places critical pressure on a patient, a practitioner or a profession's remaining capacity to continue working
2. Catastrophic failures follow from the simplest of unchecked oversights on any system that is stressed beyond its limits
3. Innocuous pathological, psychological or political symptoms may be indicative of deeper underlying ailments and these cannot be overlooked.

Fig. 1 Lego piece lodged on tooth