

PERSONAL ACCOUNT

From pharmacist to dentist in ten determined years

Aleksandra Krawczyk began her career as a pharmacist but after ten years of juggling education and parenthood, is now on the DFT/DCT training pathway in the Greater Manchester area, and hopes to explore the specialty route in future.



Last year, I experienced my first ups and downs of working as a longitudinal Dental Foundation and Core Trainee. It has been a time of significant adjustment and reflection on my professional and personal development. Despite the fact that, on many occasions, I doubted myself or my abilities, I feel extremely lucky to be in a position to practise dentistry and help people on a daily basis.

Young adults are faced with many difficult decisions. One of the most significant choices is the preferred career route. I was always interested in pursuing dentistry; however, my plans grew a little more complicated when I became a mum in my last year of A-levels. Personally, I did not feel that this would alter my ambition to attend university. What shocked me was the attitude of many midwives who repeatedly dismissed my aspirations and told me that there was no

productive and positive rapport with my patients.

Becoming a mother forced me to make realistic decisions about further education. Applying to a dental school requires a big commitment, which at the time I could not fulfil. Knowing that I wanted to be involved in a healthcare-based occupation with scope for professional development, I chose to enrol for a pharmacy degree at the University of Bradford. Pharmacy is a fantastic profession, which taught me an abundance of skills, including resilience, critical thinking and attention to detail (not to mention how to pronounce various complicated medication names!). I advanced these skills during the pre-registration year, which I completed in a split role of a trainee in a community, as well as a hospital pharmacy. As I progressed through the degree, I continually thought about my original aspiration of studying

achieve greater work satisfaction and be able to help local communities in need.

After a lengthy application process, I was finally a dental student! I started my degree at the University of Liverpool and quickly realised that I had made a great career choice. The dental school provided me with ample support, which also included help managing work-life balance. This was very important for my progression, as I felt that I could learn steadily whilst being a care provider. Prior to attending the dental school, I was worried about making new friends due to my personal circumstances. As an older student with a child, I would not be able to participate in all the undergraduate social activities. It was very reassuring to find out that dental students are people from all walks of life – younger, mature, parents, carers. It is great to see a wide range of individuals entering into the dental workforce, as this allows for diversity and provision of optimal healthcare for patients.

Funding a second degree was difficult and required a lot of commitment working in my spare time. I was lucky that I could locum as a community pharmacist, which alleviated some of the financial pressures. However, this meant that I was sacrificing the time I could spend with my son or catching up on revision. It was strange to feel that I had a double identity – dental student on weekdays and pharmacist on a weekend. I had to have a flexible mindset, adjusting from being in a leadership position of a healthcare provider to a student needing a lot of guidance ►►

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chance of me being able to multitask the degree workload with caring for a young child. I was always aware of the stigma attached to young mothers, which can have a profound impact on one's psychological wellbeing. Experiencing it first-hand felt derogatory and impacted my self-confidence. This event made me appreciate how patients can feel if the attitudes of the care providers are negative. At that stage, I promised myself that if I obtained a healthcare position in the future, I would strive to encourage a

dentistry. I had time to analyse my situation and reflect. Was I good enough to apply? How would I finance a second degree? Is it selfish of me to focus on my career rather than concentrate on being a parent? Would I be happy dedicating 9–10 years of my life to pursuing a career? I was worried about having to re-adjust to being a student, whilst the majority of my friends would enter post-graduation jobs and move on with their lives. Change is a scary concept. However, I felt that through pursuing dentistry, I would

« and supervision. I quickly began to appreciate the importance of lifelong learning and being able to accept help when required. Working as a pharmacist also helped me to develop many soft skills, including communication with service users, as well as working as a part of a team. This in turn improved my ability to treat patients on the student clinics and working efficiently with the dental staff.

Remaining motivated can be a challenge when completing two degrees. The copious amount of revision, unexpected pandemics, parental guilt, as well as requirement to develop procedural skills can be overwhelming. Sometimes I felt burnt out, which would affect my ability to enjoy the university journey. I very quickly realised that having a trusted circle of friends and family that I could speak to on a regular basis was a crucial part of maintaining my wellbeing. As a part of keeping my motivation high, I wanted to try something new during my second degree. I decided to become involved in research. Dental

schools house many brilliant minds and allow you to speak to a variety of specialty leaders. Through collaboration with fantastic academic staff, I was in a position to pursue various projects, for example submitting a poster for a BSPD conference or presenting research at the British & Irish Society for Oral Medicine (BISOM) annual meeting.

Finishing undergraduate training felt like a very sudden conclusion of all the years chasing a specific goal. The question now was – ‘How do I make the most out of the degree?’ As a first step, I chose to complete a two-year longitudinal DFT/DCT placement in the Northwest after graduation. This scheme provided me with a perfect combination of working in the primary and secondary care settings. I liked how I could get a flavour of practising dentistry in slightly different roles, without losing practical or procedural skills. Despite the steep learning curve at the beginning, I am now more confident entering into my second year of training. I hope to explore the specialty route in the future. Therefore, I am keen on

building my portfolio through completing MFDS examination and getting involved in academic endeavours. The fun part of this process is finding out where my interests lie and meeting many likeminded people.

My son started secondary school in September. I realise that he is on track to making his own career choices in the very near future. He has been a part of my tertiary education from the start and this journey would not be the same without him. There were highs and lows; however, I want to reassure you that if you have doubts about changes to personal or professional circumstances then it is natural to feel scared. There are always variables to consider – ultimately the important objective is to achieve happiness. I am very grateful that I can be a part of the dental profession. It did take time and effort to fulfil this goal, but the outcome is worth it. I’m excited about the future and to see where it will take me. ■

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Vaping should not be advised as a transition strategy for tobacco cessation

For years, it has been known that smoking can contribute to serious damage to gum and oral health, with smokers having more gum diseases, more tooth loss, and increased levels of oral cancer. It has also been known that gum disease can play a negative role in systemic health; eg it is implicated in diabetes, cardiovascular diseases, chronic respiratory diseases, inflammatory bowel disease, and others.

In parallel, regular warnings against vaping usually only highlight its damage to the heart and lungs, but do not refer to oral health.

The European Federation of Periodontology (EFP) warns that vaping electronic cigarettes can be as harmful to gum and oral health as smoking traditional tobacco cigarettes. Despite the fact that the vaping phenomenon is relatively new compared to smoking, meaning research details are still incomplete, evidence does show a clear link between e-cigarettes and poor gum and oral health.

Unlike tobacco smokers, who are more aware of smoking as a risk factor for general health problems and for gum diseases, vaping users are often misled to think of e-cigs as somehow less harmful or even safe. Vaping may not be less detrimental to gum and oral health than smoking.

One of the reasons behind vaping’s unhealthy impact is nicotine, whether smoked or vaped, which restricts the blood flow to the gums. Other chemicals contained in the e-cig vapour (including formaldehyde, propylene glycol, and benzene) may aggressively increase the damage to the mouth, starting with a progressive destruction of the periodontium.

Unfortunately, the number of vapers is growing globally at a fast rate. This uptake appears to be higher amongst teenagers, young adults, and people who have never smoked.

Andreas Stavropoulos, chair of the EFP’s scientific affairs committee and EFP immediate past president said: ‘Damage to the gums and the tissues supporting the

teeth, often to an irreversible state, is a likely adverse effect of vaping. This damage includes permanent resorption of the gums and the bone that keep the teeth in function and in the mouth. Treatment of these problems, depending on the extent, is often cumbersome, and expensive.

‘For these reasons, at the EFP we urge oral healthcare professionals to not suggest vaping as a transition strategy of tobacco cessation, but rather to prioritise smoking cessation advice for both cigarettes and e-cigarettes alike, and to provide patients with information about the likely detrimental impact of vaping on gum and oral health.’

Vaping can harm oral health in a variety of additional ways, including bad breath, mouth and throat irritation, para-tracheal oedema, laryngitis, black tongue, nicotine stomatitis, hairy tongue, toothache, tooth discolouration, caries, tooth sensitivity and loss, increased cariogenic risk, reduced enamel hardness, and increased risk for cancer.