COMMENT

Letters to the editor

Submit your Letters to the Editor via the online submission system: https://mts-bdj.nature.com/cgi-bin/main.plex.

Priority will be given to letters less than 500 words long. Authors must sign the letter, which may be edited for reasons of space.

In memory of

Ken Ray

Sir, further to the detailed obituary of Ken Ray's achievements in supporting the profession, as clinicians who worked with him for many years at the Royal Berkshire Hospital (RBH), we would like to add our own comments.

One of us (KI) whilst working as a Senior Registrar in Orthodontics at the Royal Dental Hospital, saw him in action in the staff coffee room, where he espoused his strongly held views with great vigour.

When Ken was appointed a consultant oral surgeon at the RBH, he joined an older oral surgeon who was a dour Scotsman, well set in his ways who, even when retired, visited the department for several years until he died, by popping in for coffee on a regular basis. This must have been very difficult for Ken.

Like other people born to lead, Ken was very direct in his approach, steadfast in his aims and nothing stood in his way. Whilst it was important to understand his point of view, Ken was always very supportive to both of us.

One of us (CT) joined the staff at the RBH in 1976 when at that time the department consisted of three small surgeries off a narrow corridor which also served as a waiting room. Ken used his undoubted abilities to negotiate a brand new department, complete with an appropriate waiting room, three good-sized surgeries, a recovery room, a large well-equipped dental laboratory and offices for staff.

We had regular combined clinics with Ken, principally for the orthognathic cases for which we were joined by a consultant psychiatrist who assessed whether the selected patients could cope with undergoing orthognathic procedures.

As a clinician, Ken was an outstanding operator and he was always ready to offer

very sound and practical advice to the patients who we saw together. Even when he was on his way to EEC meetings in Brussels, he would invariably find time to come and see a patient for an opinion before leaving to catch a train.

Despite the clinical needs of the department, Ken acquiesced to the significant time we spent running courses for general dental practitioners and hosting leading overseas speakers to lecture to orthodontic specialists. As a result, Reading became known for its orthodontic courses.

Within the hospital, Ken's administrative abilities were soon recognised, gaining him the respect of other consultants in all specialties. He was elected Chairman of the Consultants Committee which at that time had a significant input to the Hospital Management Team and to the District Health Authority.

We were fortunate to have had Ken as a remarkable and widely respected colleague.

K. Isaacson, C. Tomlins, Newbury, UK

References

 Obituary. Kenneth Richard Ray. Br Dent J 2023; 235: 777.

https://doi.org/10.1038/s41415-024-7403-y

Smoking cessation

Oral nicotine pouches: a flavourful debate

Sir, I read with great interest the article by Cameron *et al.* discussing the effects of e-cigarettes on oral cancer risk.¹ Among other Alternative Nicotine Delivery Systems, I would like to draw your attention towards the oral nicotine pouches (ONPs) which have recently been garnering attention on social media platforms due to their rising popularity among adolescents.

Tobacco harm reduction tools are strategies or products designed to minimise the health risks associated with tobacco use, particularly smoking. These tools aim to provide smokers with safer alternatives to traditional combustible tobacco products like cigarettes. This entails guiding adult smokers to switch to alternative nicotine-containing products that are expected to pose significantly lower risks compared to tobacco smoking.2 Among the latest developments are ONPs, containing pharmaceutical-grade nicotine extracted from tobacco leaves. Functioning similar to Swedish snus, they are placed between the user's lips and gums, delivering nicotine through the oral mucosa, where it is absorbed via mucous membranes and enters the bloodstream.3

Recently, Zyn nicotine pouches have gained traction on social media platforms like TikTok and Instagram. Their growing popularity among teenagers, aka 'Zynfluencers', who might otherwise have abstained from nicotine, has sparked debate among healthcare professionals and policymakers. A range of appealing flavours like citrus, coffee and mint coupled with powerful marketing tactics make it appear cool and attractive to young people. The emergence of this trend has raised concerns that Zyn may become the latest nicotine product to entice underage teens, similar to the vaping surge triggered by an e-cigarette brand Juul over several years.4 Ongoing research continues to investigate the safety of these ONPs. Research indicates a correlation between nicotine use and the development of periodontal diseases. As these pouches are held in close proximity to the gingival tissues for prolonged periods, nicotine has been demonstrated to interact with host cells, potentially harming the periodontal innate immune system.5 An additional