

assistant (sometimes two) to do the impressions etc while I see other patients – only returning to deal with problems or to check the impressions and temporaries. The lab technician will also be involved to assess the patient, check any aesthetic wishes, check occlusal relationships and register tooth shades. Further scheduling is done via the computer in the surgery which frees up the reception staff. A team effort. When things go as planned the system works very well but when it's 'one of those days' then the waiting room resembles Paddington station!

UK dentistry

I am a BDA member and read the *BDJ* and *BDA News*. I won't comment on the furore surrounding the GDC that is gaining momentum. Here in Germany there are no such problems! You get what you pay for! For example there is no concept of a private scale and polish. The standard calculus removal for a normal insurance claim is just that and only applicable once a year. But there is a 'professional cleaning' which some of the insurance schemes pay towards that takes at least an hour and is much more extensive. We actively promote these treatments and the patients willingly pay: not a problem ethically or otherwise!

Lifestyle

Wherever one lives it pays to be streetwise and without wishing to sound dramatic, crime is a fact of life in Cape Town. I had activated burglar alarms both at home and in my practice there complete with panic buttons etc. Firearms are readily available. That said, the social life was very laid back and life was good.

Germany is more formal in its culture and more reserved. But, we are very fortunate. We live in the old pedestrianised, historic part of town where there is no traffic and all the shops, amenities and our favourite Italian restaurant are within a short walking distance. There is a castle on the hill and the soothing sound of the river outside our bedroom. Wonderful!

Family commitments motivated our move back to Europe. I do miss family and friends in SA, the ritual of the weekend *braai* (barbecue) and the Cape Town sunshine. I also miss the cricket – don't ever try to explain cricket to a German!

After almost 30 years abroad I can't say that I miss British life. I've been exposed to many cultures and I am very grateful for that experience. I do try to visit my stepmother in Haslingden at least once a year. She is well into her eighties but amazing for her years. I still get sentimental when I visit my hometown and I love to go for long walks on the moors.

Back home in Bad Kreuznach after the morning shift at my practice, I jog before it's time for dinner. I usually spend the evenings relaxing at home. Sometimes, after a hectic day, I spend the evening in the sauna: that's one of the advantages of living in a spa town.

After the evening session at work I don't usually get home until 10 pm or just after. I catch up on the day with Heidi and eat a light supper before retiring to bed.

INTERVIEW BY KATE QUINLAN

VIEW FROM MY WINDOW



Professor Crispian Scully sent this view from the Edinburgh Dental Institute where he had been working.

Send the view from your window or a photograph with the theme SHARP to k.quinlan@nature.com.

BDA'S ANATOMICAL MODEL TAKES A TRIP TO CAMBRIDGE

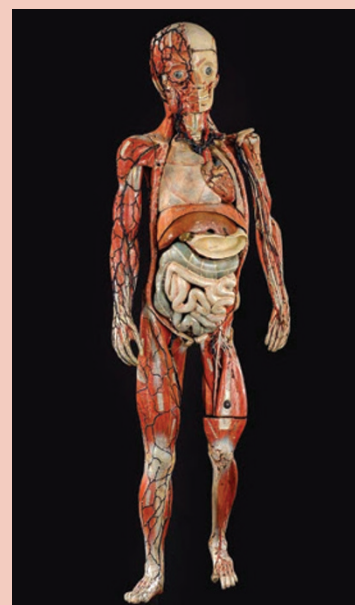
The anatomical model made by Louis Auzoux (pictured) which has graced the foyer at the BDA's Wimpole Street headquarters is now on loan to the exhibition 'Silent Partners, Artist & Mannequin from Function to Fetish' at the Fitzwilliam Museum, Cambridge University. Silent Partners is a ground-breaking exhibition devoted to the artist's mannequin, that uncovers its history from the Renaissance to the present day.

According to Rachel Bairsto, BDA Head of Museum Services, it was difficult for early students to study anatomy. The only practical way to see inside the human body was to watch an operation or a dissection. Cadavers were difficult to get and quickly decayed through lack of refrigeration.

French medical student Louis Auzoux began experimenting with techniques used by Parisian doll and puppet makers to make flexible models. He experimented with *papier-mâché*, which was easily moulded and sturdy. Auzoux developed an improved secret *papier-mâché* mixture containing cork, clay, paper and glue, which allowed the models to harden into a solid, supple, light and durable object.

Auzoux founded a factory to produce models in his hometown, St Aubin d'Ecrosville, in Normandy. Sales of his models increased rapidly and his range of products increased to over 600 including zoological and botanical specimens.

Louis Auzoux's model is of a



male figure, just under 5 ft tall, and consists of over 25 dissectible parts. The detailed model includes over 2,000 original anatomical name labels in French and the numbers refer to a full description in an accompanying catalogue that, unfortunately, has not survived. The view of the vertical section through the oral cavity shows the intricate details of the nerves, blood vessels and muscular anatomy. This model helped students to understand muscle structure, blood vessels and nerves and to recognise their contribution towards healthy teeth.

The Silent Partners exhibition will be at the Fitzwilliam Museum until 25 January 2015: www.fitzmuseum.cam.ac.uk/whatson/exhibitions/silentpartners/.