

Letters to the editor

Send your letters to the Editor, *British Dental Journal*, 64 Wimpole Street, London, W1G 8YS. Email bdj@bda.org. Priority will be given to letters less than 500 words long. Authors must sign the letter, which may be edited for reasons of space.

Green dentistry

It's easy being green

Sir, we read your recent articles on the topic of 'green dentistry' with great interest.^{1,2} They clearly demonstrated the need for the entire dental profession to do their bit to make the world a greener, and thereby, a safer place to be. Indeed, these papers inspired me to implement changes in my own practice with the goal of making it the 'Greenest in the UK'.

Changes to our practice can be seen as soon as patients enter the door, pass through the waiting area, and go right through to the dental chair in the surgery. Our first step was to find the right products - green chairs, desks and carpets were easily installed in the waiting area but the surgery and infection control room proved trickier. In some cases, we had to create the products from scratch. This involved a lot of paint. We are pleased with the final result - see Figure 1.

It really is a testament to our UK dental industry that such an array of colours is available for dental equipment. However, some items (including green syringes, glasses and autoclaves) had to be flown in from China.

Once we replaced all the surgery furniture, we held a big fire in the back garden to dispose of the old 'non-green' furniture, scrubs etc.

There has been push back from some members of team as one would expect when implementing such a major change. There appeared to be a lack of understanding of why the 'greening' of the practice was required with some members of staff claiming that we had misunderstood the problem of climate change etc. However, after a short time most came on board with the new practice colour, in particular those with red hair who found the hue particularly flattering.

We encourage further practices in the UK to follow suit and 'go green' with us and I am more than happy to provide advice from our own experience.

B. Greene, Greenwich, London, by email

1. Mulimani P. Green dentistry: the art and science of sustainable practice. *Br Dent J* 2017; **222**: 954-961.
2. Duane B, Berners Lee M, White S, Stancliffe R and Steinbach I. An estimated carbon footprint of NHS primary dental care within England. How can dentistry be more environmentally sustainable? *Br Dent J* 2017; **223**: 589-593.

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Finance

Santa Claws back

Sir, this year has been fraught with challenges, and with the festive period upon us, I fear the biggest is yet to come.

For some time now we have been aware clawback may prematurely bring an end to the festive spirit. It hampers our ability to deliver Christmas to the fullest and puts a significant strain on proceedings for the day.

The current legislation as set out by the Council of Christmas Clawback states: 'Area teams will carry out year-end reconciliations on all of its Yuletide gifts and food offerings. This is to ensure that activity is being delivered against pre-stipulated contracts and also enable the area team to ensure Yuletide activity is being commissioned accurately and in line with local festive needs assessments.'

'If a contract has achieved less than 25.12% of its contracted units of activity at 31 October, the area team needs to carry out a mid-year review meeting with the contract holder. The review may be followed by an action plan to identify how contracted activity will be delivered by Yuletide or face a possible enforced withholding of festivities.'

'Compliance with these policies will be monitored via the Christmas Oversight Procedural Outlet Unity Team (COPOUT).'

For a family of six - the situation I find myself in - this is an enormous challenge. The house will no doubt resemble a scene from *Home Alone* where Kevin McCallister booby-traps his house to keep out the persistent sticky bandits. The key difference is that we will not be home alone.

Home indemnity insurance, as a result, is through the roof, given the significant risk of sliding down the hallway on a set of roller skates left out by my youngest. Opening presents in a prompt and orderly manner is just about achievable, but with such heady



Fig. 1 Our surgery - officially the greenest in the UK

targets to play with them too, I fear the Christmas cheer will soon evaporate.

I urge local communities to forgo de-icing of their driveways to make the COPOUT's job as difficult as possible.

Penny Less, by email

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Restorative

Unique crown

Sir, I would like to bring an extremely unusual case to the notice of your esteemed readers. A 36-year-old male airline cabin crew member attended for an emergency consultation following an incident at breakfast in the hotel in which he had been staying in Dundee. Having had a selection of cooked items from the buffet, he then indulged in toast with marmalade of the famous local variety from a small jar, the type of which is typical in such venues.

Very unusually he did not notice that the top of the pot had fallen on to the toast with the layer of preserve (thick cut, orange) and, on biting down hard, the lid was totally jammed (no pun intended) onto his lower right first permanent molar.

On examination the metal top had sealed itself perfectly around the tooth with an excellent cervical seal and the force had ensured that the biting surface was perfectly sculpted and in balanced occlusion.

Initially I assumed that the patient wanted the offending lid removed but, far from it, he was delighted with the restoration as it resembled a gold crown which would otherwise have cost him a considerable sum. Reassured that the resulting seal would ensure that any residual marmalade would be neutralised and unlikely to initiate caries he thanked me and flew off for destinations unknown.

Thinking that fellow readers anywhere in the world may in future come across this young man, I felt it best to alert the international community to the existence of this, the first ever Long Haul Crown technique.

Evan Lee-Spread, by email

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Patient satisfaction

Sitting comfortably – not an option

Sir, as we head into 2019, I wish to mark the sixtieth anniversary of the UK's longest-serving dental chair – the Dentbus 2000.

First introduced in 1959, this chair has served many a dental practice loyally for decades. Made

of genuine, non-ethically sourced materials and absolutely no padding whatsoever, it has gained the reputation of ultimate longevity, albeit at the expense of comfort.

Patient complaints over the discomfort experienced while in the chair are not uncommon for many dental practices, but we all know that ensuring the patient is not comfortable when sitting, distracts them from less than ideal oral treatment, therefore saving on future tedious correspondence from the General Dental Council over spurious fitness to practise complaints.

The Dentbus 2000 was introduced at a time of change in the UK when dentists were, with the rest of the population, about to enter the swinging 60s.

In contrast to the happy times ahead, the chair stood for straight-forward, no nonsense, utilitarian practicality during a period of healthcare when patients were happy with a less supportive and take-it-or-leave-it approach to oral care.

I, for one, miss those times. Having been a practising dentist for almost six decades now, I treasure the Dentbus 2000 we use in our practice, along with the foot operated drill, underbite headgear, articulator and phantom head.

It is true that our patient list has been shrinking for some time now and that the majority of our remaining patients are in their advancing years, but I believe the old ways are the best and patients appreciate honest, no-frills, no comfort, care. The Dentbus 2000 is the embodiment of this and should be celebrated.

M. R. Grinch, by email

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Fairy services

Fairies braced for adult teeth deluge

Sir, seasons' greetings and I trust you are feeling the festive spirit.

Sadly, I have to bring to your attention an issue which has been raised by my hard-working colleagues, who have their work cut out for them 365 days a year, and not just on December 24.

We at the British Tooth Fairy Association (BTFA) have been receiving growing numbers of complaints from members that patients are often leaving adult teeth underneath their pillows, hoping to receive the statutory payment – currently set at the annual 'retainer' fee of £1.

We must remind your readers – in the hope that they will pass on this information to their patients – that only baby teeth are eligible for these payments.

People must not claim for adult teeth as these are not covered by our Tooth Fairy Fair Policy regulations as created on the Twelfth of Never, Time Immemorial.

We do, however, recommend that patients continue to embrace the 'long-in-the-tooth' policy of encouraging their children to place their baby teeth under their pillow at night to help them cope with the discomfort of this inevitable process.

This decidedly long tradition is, after all, what keeps us in business for the 364 remaining days of the year when Mr Claus is taking his time preparing for the next annual gift jamboree of December 24.

We trust your readers will hear our plea with a sympathetic ear and remember when they themselves benefitted from the deep-rooted practice enjoyed under the 'baby tooth cash reimbursement scheme'.

T. Ink. Bell, by email

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Dental equipment

Spitting our way into Christmas

Sir, at this time of year, it is not unusual for dentists to indulge in the festive spirit, whether that be in the form of eating heartily, excessive gift buying, or, more frequently, drinking spirits to raise one's spirits.

Naturally, we are not condoning excessive alcohol consumption, but wanted to highlight the potential advantages of using a tried and tested device that is right in front of every dentist who wishes to indulge this season by having a tippie or two – the dental spittoon.

Spittoons are a mainstay of every practice across the UK and beyond and offer the perfect receptacle for when a clinician may have over-indulged on the festive 'spirit'.

Now some people may condemn this controversial use of the spittoon, referring to it as nothing more than a makeshift 'sick bucket', but we at the Association of Perpetual Dental Indulgence (APDI) want to dispel these views.

The spittoon is designed to take whatever one throws at it and can be thoroughly sanitised afterwards. Appropriate use of the spittoon is a subjective matter and as long as full sanitisation regulations are followed, we see no problem with use of these devices for those times when a healthcare professional