Dental students in Glasgow have adapted the Wii, a gaming device, to simulate operating techniques on a virtual dental patient.

Their proposal has won first prize in the Dental Innovation Technology Ideas Award.

The competition challenged final year students to develop an idea for a new piece of technology or innovation in the dental field.

The students, due to graduate from Glasgow University dental school this summer, suggested adapting the Wii console so it could be used to simulate operating techniques.

The wireless controllers are used to replicate the use of instruments on a 'virtual patient' on the screen. The controller could also be used to provide sensory feedback to the user.

Dr David Watson, a lecturer at the dental school, said: 'Simulation of clinical procedures is normally carried out in the operative techniques lab. However, dental students sometimes have limited opportunity to practise their techniques outside of the lab.

The use of Wii technology could be a really innovative and cost-effective solution which students could use to improve their manual dexterity. There is considerable research to back up the concept of using video games to improve dentist's coordination and the Wii-based application would complement the simulation technology already used in dental schools worldwide.'

Mr Leaver said: 'We received over 40 entries for the competition all of which were of an extremely high standard. The judging panel were impressed by the depth of research and hard work which had gone into the submissions which made it very difficult to choose an outright winner. However we were struck by the inventiveness of adapting an existing piece of technology in a very novel way.'

He added: ‘We are absolutely delighted that Glasgow Dental School has given us the opportunity to host this annual award. As more dental practices become reliant on digital systems, it is vital that students are up to speed with the latest technologies. We hope the award will inspire them to think about how technology can be applied in practice for greater efficiency and better patient care.’

In Lincolnshire, emergency dental problems generated more calls to the NHS helpline, NHS Direct, than any other medical problem.

More than 7,000 patients called NHS Direct complaining of dental-related issues last year.

It was the second consecutive year that the issue came top in the calls made to the free advice and information service.


The figures, released to the Lincolnshire Echo under the Freedom of Information Act, show that 55,443 calls to NHS Direct were from Lincolnshire in 2007 and 2008. Last year they increased slightly from 81,316 to 83,786.

Rashes, abdominal pain, vomiting and fever made it into the list of top 10 complaints for both years.

Dental problems generate more calls
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News & Opinions

‘Limit private dentistry’ says report

A thinktank wants a quota imposed, forcing NHS dentists to spend at least half of their time on NHS dental work.

Dentists should be limited to the amount of private work they can do, said the New Local Government Network (NLGN), which specialises in public service reform.

Its report People Power—How Can We Personalise Public Services? claims imposing such a quota would help improve access to NHS dentistry.

The thinktank claims taxpayers are getting a poor deal as it costs £175,000 to put dentistry students through five years of training, after which they only have to spend the first year of their career as a qualified practitioner within the NHS.

The move would bring dentists into line with hospital consultants, who are not allowed to earn more than 10 per cent of their NHS salary in private practice.

In an open letter to Sir Jimmy Steele, chairing the Independent Review into NHS dentistry, Chris Leslie, director of the NLGN, said: ‘There is clearly a problem with a lack of basic NHS capacity on dentistry, despite valiant attempts by the government at a national level injecting an additional 8.5 per cent of resources this year following the extra 11 per cent increase granted in 2008/9.

When the typical dentist has received the benefit of around £175,000 of taxpayer investment in their training and development, we feel that there should be a greater obligation on those individuals to give more back to the community and dedicate a greater proportion of their time to NHS work. This should go beyond the current obligations for twelve months within the NHS context.’

However, the British Dental Association (BDA) is against the idea and pointed out that it is the funding available to primary care trusts (PCTs) to commission primary care dentistry that determines the amount of NHS dental care available.

Sue Sanderson, chair of the BDA’s executive board said: ‘Since reforms to NHS dentistry were imposed in England and Wales in April 2006, care has been commissioned directly from dentists or dental practices by primary care trusts. Contracts are based on the completion of, and funding for, a fixed amount of care. This amount is expressed in a currency called units of dental activity (UDAs). It is these UDA-based contracts that are the real factor determining the amount of NHS care that can be provided.’

She claims that many dentists would like to do more NHS work but are unable to and added: ‘The size of these contracts varies greatly, with some practices commissioned to provide significant amounts of NHS care and others holding much smaller contracts. Those with smaller contracts will normally also provide private care. This often opens up treatment options to their patients that are not available on the NHS.

In some instances dentists have neither been awarded NHS contracts at all, or been awarded NHS contracts that are for smaller NHS commitments than they would have liked.’

The BDA also pointed out that newly qualified dentists emerge from a five year degree having incurred a significant amount of debt.

According to the BDA’s most recent survey of final year dental students, the average debt a new graduate owes is just under £25,000.

It is not the first time the idea of a quota has been floated.

Kevin Barron, chairman of the House of Commons Health Committee, has also backed the move in the past, saying dentists had a ‘moral obligation’ to treat NHS patients.

The government is also against a quota.

Dr Barry Cockcroft, England’s chief dental officer, said: ‘The NHS is now under a legal obligation to provide dental services for their local population.

‘We have also appointed an independent review team to help us understand what more needs to be done to ensure that every person who wants to visit an NHS dentist can do so and all NHS dental services meet the highest standards of care.

‘We feel that the measures we have taken are a better approach than a quota system for NHS dentists.

Mr Leslie, director of NLGN, also cited in his open letter to Sir Jimmy Steele, that PCTs should be encouraged to be far more innovative in the nature of their service commissioning.

He said: ‘For example, we would like to see a broader array of dental services so that particular hotspots can be targeted more intensively, perhaps with mobile dentist working or peripatetic dentistry. Opening hours should be considered so that, in time, the service can revolve more around the convenience of the patient than the profession.

And we would also like to see an extension of the ‘walk-in dentistry’ service which has proved popular in some areas. Furthermore, we believe the time has come for PCTs to pool resources and commission training facilities or even direct dental practices under the auspices of the NHS itself, hiring their own series of dentists rather than always outsourcing these contracts. A diverse market of provision should be the ultimate goal.’
Dental students are being told to use child-friendly language, and call the dentist’s chair a ‘rocket man’s chair’, in a drive to stop children being scared of the dentist.

The move comes after eight-year-old Sophie Waller died of starvation and dehydration after suffering from a phobia of dentists. Professor Liz Kay, dean of the Peninsula Dental School in Plymouth focuses on teaching dental students a broad range of skills which encompass technical skills and communication plus psychology and sociological skills. Dental students are encouraged to understand the root causes of a patient’s anxieties. Professor Kay claims that learning the basics means 99.9 per cent of children would feel at ease.

She advises dental students to use the words ‘rocket man’s chair’ instead of dental chair and make it fun so instead of saying ‘open your mouth’ say ‘let’s count your teeth’.

She would like to see dentists making surgeries friendlier places by putting out games for them to play while they are waiting and added that parents could help by simply making sure their children cleaned their teeth and avoided sugary food.

The deadline for all dental care professionals to pay the General Dental Council’s Annual Retention Fee is fast approaching.

The date for the fee has changed from December every year to 31 July.

The General Dental Council (GDC) has taken the decision not to increase the fee this year.

GDC director of operations, Edward Bannatyne said: ‘This means a change for thousands of dental hygienists, dental therapists, clinical dental technicians and orthodontic therapists.

GDC director of operations, Edward Bannatyne said: ‘This means a change for thousands of dental hygienists, dental therapists, clinical dental technicians and orthodontic therapists, who are used to paying in December each year.

We are doing all we can to make sure people know about the deadline. Letters are being sent out and we’re also hoping you will spread the word among your colleagues. Please don’t ignore the deadline as you need to pay your fee in order to remain on the register.’

The deadline for dentists to pay their Annual Retention Fee (ARF) is still 31 December each year.

The GDC is hoping that dental care professionals will sign up to an annual Direct Debit.

They can do this by downloading a form from the GDC website via the ARF pages.

For those registered online, the GDC self-service website at www.gdc-arf.com can be used to set up a Direct Debit in April.

Dental care professionals who are not yet registered online need to wait for their ARF letter which will give them an ID verification code for the process.

Any questions, please contact the GDC Customer Advice and Information Team on 0845 222 4141. Or email CAIT@gdc-uk.org.
A 27-year-old has gone out to provide dental care in a rural area of Rajasthan in Bank Street, with ID Peacock treatment.

People in the region free dental treatment.

Can you offer any sponsorship for Teeth for Life India?

Laura Kerr, a general dental practitioner, with ID Peacock treatment. There is no permanent clinic. There is no permanent dental practice in a rural area of Rajasthan in North West India.

It will be the second time, the 27-year-old has gone out to provide humanitarian aid, as part of the project Teeth for Life India in this impoverished part of Rajasthan.

Ms Kerr went out at the end of 2007 and was given a ‘thank you’ trophy for her work. The trophy is now on show in Ms Kerr’s Dumfries surgery room.

She will be spending two weeks based at the Eye Hospital in Bishalpur, which also has a dental clinic. There is no permanent dentist based in the clinic and it is only in use when dental volunteers come from all over the world to work at the clinic for up to two months.

The lack of a permanent dentist can leave people in the area without dental cover for up to six months at a time.

Lack of oral hygiene led to Ms Kerr extracting 270 teeth and treating more than 500 patients, during her three week visit in 2007.

Many had walked over 10 miles to see her.

Fellow dentist, Beth Young, who works at Glasgow Dental Hospital is accompanying Ms Kerr on her trip.

The pair will have to raise money to pay for their flights as the dental volunteers pay their own expenses for the trip. They will also be working in temperatures of over 40 degrees centigrade.

Once dates are fixed regarding the arrival of a visiting volunteer dentist, people in the area are informed by leaflet drops, newspaper adverts and loudspeaker vans. It then is then a matter of arranging for the patients to turn up.

The visiting dentists are given a place to stay while working at the dental clinic but are expected to pay for their own flights.