As Alison Lockyer, (pictured), marks her first year as Chair of the General Dental Council in January 2011, she’s urging more registrants to get involved in the regulator’s work.

“New Year is traditionally a time to make resolutions but the GDC is already ahead of the game with its corporate strategy now firmly in place. Instead it’s time for us to really get down to business with delivering the results we’ve promised registrants.”

One of the biggest commitments in the strategy is to review GDC Standards for Dental Professionals. Alison said: “Our strategy pledged to ensure policy is developed on the basis of consultation and evidence. The Standards review is an example of this. Work is picking up pace in 2011 with a series of events helping us listen to the people who will be most affected by the changes we make – dental professionals. We know from the calls and emails we get that there are plenty of people with views on the standards we expect registrants to meet. Now is the chance to help shape this work. We’re holding free registrant events across the UK from January onwards with workshops about this important issue.”

Participation can count as two hours verifiable CPD. Details are on our website www.gdc-uk.org. The Standards review is one of a number of key projects moving forward in 2011.

Alison added: “We’re looking at a number of other important issues. At the heart of this work is our aim of delivering regulation which is proportionate, targeted, consistent, transparent and accountable. Revalidation remains a focus for regulators and we will continue to seek the views of registrants as well as members of the public and other interested parties as we refine our draft plans. We’re also gathering views on the GDC’s Scope of Practice guidance – is it helpful or restrictive? Are there skills registrants think should be included but are missing?”

Alison had one clear message for dental professionals for 2011: “We believe one of the biggest strengths of the GDC is its 96,000 registrants. They are the ones who make the most visible difference to patients’ lives and we want to learn from them. Taking part in consultations, coming to events or even emailing us some feedback can help us learn from their insights. I hope 2011 will be a year of communication for us all.”
Editorial comment

All eyes are on the government this week as the long-awaited updated Health Bill is published. David Cameron has already begun his defence of the Bill before its publication in a speech delivered at Parliament. Medical associations have been expressing their concerns, calling the reforms ‘an upheaval’ or ‘unnecessary’.

Does any of this sound familiar? I can hear the low mutterings of dentists saying ‘welcome to our world’. Of course, the Health Bill will have an effect on dentistry, and Dental Tribune will have comment and analysis on those parts of the Bill which will shake our world even more.

In other news, a shameless plug for Smile-on’s upcoming Clinical Innovations Conference, to be held May 6-7 in London. With an excellent line up of speakers, including Julian Webber, Nasser Barghi, James Russell and Eddie Scher, this really is the place to be for the latest developments in restorative and aesthetic dentistry (and you may even get to speak to me!). Go to page four for more details.

The British Association of Dental Nurses has launched its on-line 2010/11 Dental Nurse Salary Survey. The survey will cover the tax year which ended April 2010, and is open to all dental nurses in the UK. The salary information gathered by the survey will be used to lobby the GDC, MPs and other relevant authorities for a more realistic ARF for dental nurses.

The survey, which will close on 51 March 2011, will be conducted through the EVENT facility and several thousand dental nurses will be sent an e-mail invitation to participate. Others can access the survey via a link on the BADN website: www.badn.org.uk. Participants will also be able to forward a personalised message to dental nurse colleagues inviting them to participate.

ARF survey results
• 97 per cent considered the increased fee of £120 to be too high for dental nurses
• 97 per cent felt that there should be a separate, lower, ARF for dental nurses
• 89 per cent felt that there should be a lower ARF for part-time workers
• 79 per cent paid their own ARF with no financial assistance from their employers. Employers of 16 per cent paid respondents’ ARF in full and five per cent in part
• Of that five per cent, just over half paid between £50 and £40 towards the ARF; a quarter paid between £40 and £50
• 94 per cent stated that they would re-register in July 2011 — although most pointed out that they had no choice if they wished to continue working as a dental nurse!
• Of those respondents who stated that they would not re-register in July 2011, 68 per cent stated that it was because they could not afford the ARF/ were leaving the profession
• 85 per cent expressed their willingness to lobby MPs regarding the ARF
• 20 per cent considered that an ARF of between £50 and £60 would be appropriate for dental nurses; with 19 per cent each considering ARFs of £40-£50 and £60-£70 appropriate for dental nurses
• 11 per cent considered an ARF of £70-£80 acceptable, whilst 14 per cent considered £40 to be the acceptable limit for dental nurses
BDA calls for a rethink

Proposals to introduce revalidation for dentists would be likely to increase paperwork, reduce the number of patients seen and add another layer of regulation. That’s the verdict the British Dental Association (BDA) expressed in its response to the General Dental Council’s (GDC) consultation on revalidation for dentists. The BDA said: “The proposals are onerous, bureaucratic and inappropriate, and out of step with the GDC’s repeatedly-expressed intention to develop a system which is proportionate.”

Furthermore, it says that the evidence base for the proposals is unsound and that pilots for the proposals carried out in 2009 failed to cover a representative number of practitioners. It also calls for the proposals to be subjected to a full cost-benefit analysis.

Dr Susie Sanderson, Chair of the BDA’s Executive Board, said: “It is important that standards for professional revalidation in dentistry are transparent, consistent, and proportionate, and offer reassurance to patients. The BDA supports measures that meet those criteria. We also agree with the view expressed by the Working Group on Non-Medical Revalidation that the intensity and frequency of revalidation must be proportionate, and that the risks inherent in the work a practitioner is involved in.

“The BDA supports the work of the GDC as the regulator of dentistry in the UK, but we have some serious concerns about the proposals put forward in this consultation and the wider context in which they have been presented. The circumstances confronting dentistry have changed since these proposals were initially mooted and it would be sensible to look at them again to assess the cost of changes and the benefits they might deliver. We would welcome the opportunity to input into that process.”

The BDA’s full response to the consultation can be accessed at: www.bda.org/dentists/education/revalidation.aspx.

Clinical Innovations Conference 2011

E ducation and training provider, Smile-on, is hosting this year’s Clinical Innovations Conference, along with the AOG, the Dental Directory, FGDP and the ESCD. Now in its eighth year, the Clinical Innovations Conference (CIC) will be held on 6th and 7th May at the Royal College of Physicians in Regent’s Park, London.

Promising to be the biggest conference yet, the CIC programme has been put together with the aim to update participants on new technologies, materials and techniques in dentistry.

The 2011 conference will host a line-up of highly prestigious international speakers alongside exhibitors offering the latest dental technologies from around the world. Confirmed speakers are: Nasser Barghi, Wyman Chan, Eddie Lynch, Tif Oureshi, Raj Rajabayan, Raj Rattan, Wolfgang Richer, James Russell, Julian Satterthwaite, Eddie Scher, Liviu Steier, Mahesh Verma and Julian Webber.

The conference holds opportunities where you can:

• Learn truly innovative solutions to achieve superior results
• Gain hands-on experience in the latest techniques
• Take away tips you can start putting into practice immediately
• Question and debate all ideas
• Receive your core subject ‘Medical Emergency’ certificate

A recent thesis presented at the Sahlgrenska Academy has concluded that children and adolescents with asthma have more caries and suffer more often from gingivitis (gingival inflammation) than people of similar age without asthma.

The work presented in the thesis examined children, adolescents and young adults in the age groups three, six, 12-16 and 18-24, with and without asthma. The first study revealed that three-year-olds who suffer from asthma have more caries than three-year-olds without asthma.

The scientists have also compared the oral health of adolescents aged 12-16 years who had long-term moderate or severe asthma with that of adolescents of the same age without asthma. Martin Stensson, dental hygienist and researcher at the Department of Cariology, Institute of Odontology at the Sahlgrenska Academy said: “Only 1 out of 20 in the asthma group was caries free, while 15 out of 20 were caries free in the control group.

“One factor that may have influenced the development of caries is somewhat lower level of saliva secretion, which was probably caused by the medication taken by those with asthma. Adolescents with asthma also suffered more often from gingivitis than those without asthma.”

The work presented in the thesis also examined the oral health of young adults aged 18-24 years, with and without asthma. The results from this age group were nearly identical with those in the group of 12-16 year-olds, although the differences between those with asthma and those without were not as large. Stensson points out that the numbers of participants in the studies were relatively small, and it may be difficult to generalise the results. What is interesting, however, is that young people with asthma have more caries than those without asthma.

Such research emphasises how important it is that young people with asthma receive extra dental care early, and that a preventive oral health programme be established between the health care system and the dental care system.

Is asthma linked to caries?

Is Extra Ice Xylitol good for asthma?

A t the start of the year Dental Tribune attended the launch of Wrigley’s new range of Extra ICE chewing gum, which was appropriately held at London’s Ice Bar (minus the snow but still with freezing temperatures!)

Chilling out with a delicious lunch and ice drinks, the Wrigley’s presented their new range of sugar free chewing gum, Extra ICE® Peppermint, Extra ICE® Spearmint and Extra ICE® White.

The highlight of the launch (putting aside the Eskimo coats and gloves we had to wear to brave the -7 temperatures in the bar) was that all three of the products contained 50 per cent Xylitol, an ingredient that has been proven to prevent plaque formation.

As well as the widely recognised benefits of sugar free gum on the production of saliva, Xylitol is an ingredient with proven dental benefits including preventing plaque formation, and gives it a unique role in preventive strategies for dental health.

Adrian Toomey, Oral Care Brand Manager at The Wrigley Company said: “Chewing Extra Ice sugar free gum with Xylitol between morning and evening brushings is a great way for patients to help keep their teeth when they are on the go. It is proven that chewing sugar free gum like Extra Ice helps to neutralise plaque acids and maintain tooth mineralisation and we are very proud of our oral health care products and their benefits related to maintaining good oral health.”

Cloudy with a chance of fluoride

W hat if your toothpaste could tell you whether you needed to leave the house carrying an umbrella? Or how hot the day was going to be?

Odd as this may sound, a new product that does just this is currently being created by David Carr of MIT’s Media Lab. The prototype product, “Tastes Like Rain” is a one of a kind invention that uses a computer and weather information from the internet to dispense different flavours of toothpaste depending on the weather.

One blog on the new toothpaste dispenser said: “The prototype is currently hooked up to a small Linux computer that pulls forecasts, uses custom software to compare previous and current temperatures and dixy up the flavours.

“In this case, toothpaste is modified to dispense one of three flavours depending on the weather. If it’s mint, you know it’s colder out than yesterday. Cinnamon means it’s hotter. Blue stripes indicate precipitation!”
One recommendation. A lifetime of oral health.

Recommending an Oral-B® electric toothbrush is one of the best ways to help your patients achieve better oral health for life. That’s because Oral-B® electric toothbrushes can help patients:

- Remove 2x more plaque*
- Reduce gingivitis to improve their gum health
- Develop better brushing behaviour
- Gently clean their enamel, gums and dental work

* vs a standard manual brush.
Reference: 1. Data on file, P&G.

Please visit oralb.com for more information.
$0.5m donation for dental initiative

King’s College London Dental Institute’s Flexible Graduate Programme has received recognition with a $548,000 donation from Henry Schein, Inc. The money will fund training, scholarships and awards.

Professor Nairn Wilson, Dean and Head of the Dental Institute, commented: “King’s College London Dental Institute is grateful to Henry Schein for its most generous support of the Institute’s innovative Flexible Graduate Programme which is anticipated to include 220 students in more than 50 countries in 2011.”

The donation included: The supply of a package of dental products and materials to each first-year graduate student commencing the Flexible Graduate Programme; Five Henry Schein Scholarships per annum to support graduate students on one of the Flexible Graduate programmes; A Henry Schein Events Programme to support professional networking activities. The donation also included the Henry Schein Excellence Award which will honour a Flexible Graduate Programme graduate each year for exemplary application of their new knowledge and understanding.

Cancer strategy could save 5,000 lives a year

Detailed plans to transform cancer care in England and save thousands of extra lives each year have been announced by Health Secretary Andrew Lansley.

Overall, these plans will drive up England’s cancer survival rates so that by 2014/15 an extra 5,000 lives will be saved every year.

‘Improving Outcomes – A Strategy for Cancer’, sets out how the Government, NHS and public can prevent cancer; improve the quality and efficiency of cancer services and move towards achieving outcomes which rival the best in Europe.

The strategy — backed with $548,000 million extra tests, in addition to funding increased testing and treatment in secondary care. It will also go towards Public Health England – the new body — to promote screening and raise awareness of the signs and symptoms of cancer.

Over the Spending Review period, this will allow for primary care access to more than two million extra tests, in addition to funding increased testing and treatment in secondary care. Tests include:

- Chest X-ray – to aid in diagnosing lung cancer
- Non-obstetric ultrasound – to support the diagnosis of ovarian and other cancers
- Flexible sigmoidoscopy/colonoscopy – to support the diagnosis of bowel cancer
- MRI brain scans – to support the diagnosis of brain cancer

In addition, the Government will provide extra investment to increase access to radiotherapy and ensure all patients are able to get this critical treatment.

‘Improving Outcomes – A Strategy for Cancer’, is the first of a number of outcomes strategies to be published following on from the White Paper, Equity and excellence: Liberating the NHS.

Outcomes strategies will play a crucial role in translating the underpinning principles of the Coalition Government’s reforms of the health and care services into the steps it needs to take to drive improvements health outcomes; putting patients and the public first; empowering professionals and strengthening local accountability.


Get ‘Up To Date’ with P&G

Oral-B has released the dates for their 2011 ‘Up To Date’ scientific exchange seminars with guest speakers Prof Trevor Burke, Prof Iain Chapple & Prof Nicola West. The lectures are aimed at dentists, dental hygienists and therapists.

Clinical dental professionals are invited to attend a complimentary CPD accredited evening event at one of ten locations: Torquay (Imperial Hotel, 16 Feb), Sheffield (Kenwood Hall, 8 Mar), Birmingham (National Motorcycle Museum, 10 Mar), Reading (Hilton Hotel, 31 Mar), Cardiff (St David’s Hotel, 7 Apr), Warrington, (The Park Royal, 14 Apr), Newcastle (The Life Centre, 5 May), London (Royal College of Physicians, 12 May), Glasgow (Hilton Strathclyde, 25 Jun), Milton Keynes (Horwood House, 50 Jun).

Prof Iain Chapple will be speaking at all venues; Prof Trevor Burke will join Iain at Birmingham, Reading, Warrington and Newcastle. Prof Nicola West will lecture at the remaining venues. The evening will be hosted by Dr Stephen Hancock.

Every delegate is invited to enjoy a complimentary meal at the beginning of the evening and a free gift which retails at £150. Contact Julia Fish on 07585-508550 or e-mail julia@abcommunications.com.
Staff support for B2A

Practice Plan, the leading provider of practice branded dental membership plans and Bridge2Aid, a charity providing primary dental care and education to communities in Tanzania, have always had a very close relationship. From sponsored walks and bike rides, to event sponsorship, design support, Christmas cards or physically travelling over to Tanzania to carry out restoration work, Practice Plan has endeavoured to support the worthwhile charity year-upon-year.

However, the company has now decided to go one step further and actually delve into the heart of the charity and financially support the people on the ground in Tanzania, and so, Practice Plan now covers the salary for one of the charity’s employees, a Community Support Worker called Kibibi Kengia. Chief Executive of Bridge2Aid, Mark Topley explained: “Practice Plan’s sponsorship of Kibibi on our Community Development team has been a huge benefit to our programme at Bukumbi. It allows us to commit confidently to regular work with a vulnerable and marginalised group of people, and bring hope, dignity and encouragement on a weekly basis. We’re very grateful to Practice Plan for their continuing support which is helping to change lives in Tanzania.”

To find out more about the fundraising Practice Plan does, or to see how they can support you, please call 01691 684155 or visit www.practiceplan.co.uk for more details.

An innovative device which cancels out the noise of the dental drill could spell the end of people’s anxiety about trips to the dentist. Experts at King’s College London, Brunel University and London South Bank University, who pioneered the invention, have developed the device to help phobic’s attend the dentist more easily.

It is believed that many people’s fear of the dentist is rooted in the ubiquitous noise of the dreaded drill and is the prime cause of anxiety about dental treatment; however with this new device, the patient will be able to listen to their favourite tunes on an MP3 player. The headphones used with the device use noise cancelling technology, with inbuilt resistors that dull low frequency wavelengths.

The device works by using an ‘adaptive filtering’ technology, where the headphones block out certain wavelengths, allowing the dentist’s voice to seep through unaltered. Containing a microphone and a chip that analyses the incoming sound wave, the device produces an inverted wave to cancel out unwanted noise.

Although the product is not yet available to dental practitioners, King’s is calling for an investor to help bring it to market.

Pearl Dental Software
for PRIVATE Practices

See a demonstration at
www.bhasoftware.com/pearl

www.bhasoftware.com
      tel. 0800 027 2406