Unique worldwide Dental Hygiene Conference on Social Responsibility a Huge Success

By IFDH

ROCKVILLE, MD, USA: The International Federation of Dental Hygienists (IFDH) held a Global Oral Health Strategy Session and a Social Responsibility Conference-Workshop in Florence, Italy from July 7-8, 2017. The meeting was attended by leaders in the area of social responsibility from all over the world and representatives from 20 IFDH country associations, all with the goal of improving health worldwide.

The meeting was opened by IFDH President Robyn Watson, who welcomed the group and said: “It is a great pleasure to see the realization of our efforts in bringing together experts from around the world to help us create projects, develop leaders, and change the emphasis of oral health care to prevention. This is the beginning of our journey.”

Professor Raman Bedi, Chair, Global Child Dental Fund and WFPHA Oral Health Committee said: “Developing leadership and advocacy within the dental profession will ultimately lead to improved oral health understanding among the global population.”

The message is that “we need to be the change we wish to see in the world” (Gandhi). The importance of care for the unserved and underserved in all phases of life was emphasized during the conference.

If you would like more information about this topic, please contact Peter Anas, Executive Director at International Federation of Dental Hygienists, or email at director@ifdh.org.
Hands-On training available for dental hygienists in Dubai
Part of 9th Dental Facial Cosmetic International Conference

ITOP: Individually Trained Oral Prophylaxis
Tutor: Dr. Carla Mora, Chile
Date: 04 November 2017 | 09:00 - 18:00
Accreditation: 7 CE Credits | Est. HAAD 7 CME | Est. DHA 7 CME

Enhanced Biofilm Management Using Modern Air Polishing Techniques
Tutor: Mary Bowdray, New Zealand
Date: 03 November 2017 | 17:00 - 19:00
Accreditation: 2 CE Credits | Est. HAAD 2 CME | Est. DHA 2 CME

WorkingPosture
Tutor: Dr. Penelope Jones, Australia
Date: 04 November 2017 | 09:00 - 12:00
Accreditation: 3 CE Credits | Est. HAAD 3 CME | Est. DHA 3 CME

Periodontal Instrumentation & Sharpening
Tutor: Robyn Watson, Australia & Mary Rose Pincelli Bogliome, Italy
Date: 04 November 2017 | 13:30 – 18:30
Accreditation: 5 CE Credits | Est. HAAD 5 CME | Est. DHA 5 CME

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FIDI World Dental Federation to adopt new and revised policy statements

By DTF

MADRID, Spain: The FDI general assembly, the federation’s supreme legislative and governing body, is set to adopt a series of new and revised policy statements during its meeting in Madrid on 31 August. These statements are declarations laying out current FDI thinking on various issues related to oral health, oral health policies and the dental profession. They are put together through consultation, discussion and consensus of leading international experts within various FDI committees, national dental associations and other organizations.

This year’s crop includes six new policy statements, which address advertisement in dentistry, CAD/CAM dentistry, lifelong oral health, odontogenic pain management, quality in dentistry and sustainability in dentistry. Three statements on continuing dental education, dental practice and third parties, and protecting oral health through fluoride have undergone extensive revision.

Many FDI policy statements are the result of projects carried out by the FDI Science Committee, Dental Practice Committee and Public Health Committee, sometimes in collaboration with entities such as the World Health Organization.

“The science of dentistry is continually evolving and FIDI policy statements should always reflect the latest thinking based on the latest research and development,” said Science Committee Chair Dr Harry-Sam Selikowitz, from Norway. “Developing new texts to address new issues and keeping current texts up to date is one of the pillars of our committee work.”

Policy statements are one of the FIDE’s greatest contributions to world dentistry and have a practical role to play in supporting national regulations in many parts of the world,” added Dental Practice Committee Chair Dr Michael Sereny, from Germany. “Dentists are practical people and need practical advice—and this is what we are providing in our policy statements.”

“FID’s role has always been to share knowledge and experience among members of the dental community to support and advocate the development of effective national public oral health policies,” said Public Health Committee Chair Jo Frencken, from the Netherlands. “Policy statements evolve from debate among dentists from around the world and thus constitute an international consensus.”

More information on the FDI policy statements is available at fidworld-dental.org/policystatements.

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Medi-Cal project to expand preventive dental care for children

By DTF

LOS ANGELES, USA: The University of California, Los Angeles (UCLA) is to lead a pilot program to expand preventive dental care for 500,000 children enrolled in the California Medical Assistance Program (Medi-Cal). Medi-Cal offers free or low-cost health coverage for children and adults with limited income and resources.

According to the Centers for Medicaid and Medicare Services, only about one-third of California’s 6.1 million children and adolescents enrolled in Medi-Cal receive preventive dental care each year. These services help maintain good oral health, reduce the need for costly treatment in hospitals and emergency departments, and therefore enhance the quality of care for young people.

The UCLA-led project—the largest of its kind programs recently approved by the state’s Department of Health Care Services—is part of the Medi-Cal 2020 Dental Transformation Initiative and will run through December 2020. It will focus on three primary goals: using information technology to ensure continuity of care; developing new ways to expand preventive services, and integrating oral health care services across dental, medical and community care providers.

“The Dental Transformative Initiative provides an incredible opportunity to expand UCLA’s recent work with local community partners to improve the oral health of children at greatest risk for dental disease throughout Los Angeles County,” said project director Prof James Crall, Chair of the Division of Public Health and Community Dentistry at the UCLA School of Dentistry.

Dean Prof Paul Krebsbach added: “This is an excellent opportunity for UCLA Dentistry to further engage the Los Angeles community and improve oral health care for generations to come.”

Crall said that the dental school will also seek partnerships with Los Angeles County agencies, organizations and community programs focused on improving the health and well-being of children and families.
PATIENTS CAN RELIEVE HYPERSENSITIVITY FOLLOWING PERIODONTAL THERAPY WITH COLGATE® SENSITIVE PRO-RELIEF™ TOOTHPASTE

Approximately half of patients experience hypersensitivity following periodontal therapy.1 The process of periodontal therapy, including scaling and root planning, can expose the sensitive dentine layer, which may trigger pain and discomfort in your patients.1

Clearly, addressing dentine hypersensitivity is crucial for providing relief to your patients.

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EVIDENCE OF HOW COLGATE® SENSITIVE PRO-RELIEF™ WORKS IS AVAILABLE USING SCANNING ELECTRON MICROSCOPY³

Scanning electron microscopy (SEM) allows for highly magnified viewing of the dentine surface. The images demonstrate how the open dentine tubules are plugged and sealed after application of Colgate® Sensitive Pro-Relief™ toothpaste.

Address the pain and discomfort of hypersensitivity resulting from periodontal therapy by recommending Colgate® Sensitive Pro-Relief™ to your patients – clinically proven to treat hypersensitivity and relieve pain fast.*²

* When toothpaste is directly applied to each sensitive tooth for 60 seconds.

References:
Teeth whitening devices set to increase oral hygiene market

By Beverly Hills Formula

With a surge in new teeth whitening devices the oral hygiene market and teeth whitening industry shows no signs of slowing down and is expected to reach USD 53.97 Billion by 2022 from an estimated USD 43.31 Billion in 2017.

The growth of the market is mainly driven by growing awareness regarding oral hygiene, a rise in dental caries and other periodontal diseases, and technological advancements in oral care products.

But whilst teeth whitening toothpastes are globally popular, oral hygiene brands are constantly developing new products to keep up with the growing consumer demands for more effective, quicker and safer teeth whitening results, which can easily be used in the comfort of their own homes.

The use of teeth whitening strips, kits and pens is on the increase and oral hygiene experts Beverly Hills Formula recently launched their own new Professional White whitening kits at the Dubai Beauty Show in May which was hosted by Enterprise Ireland. Beverly Hills Formula oral care brand is based in Dublin, Ireland, and currently sells in the UAE, UK, Europe, North Africa and Asia Pacific. The company aim has always been to make the “Hollywood” smile attainable for everyone with their safe, affordable and effective toothpastes and award-winning mouthwash.

The new Professional White range kits and products will soon be available to buy in the Middle East and follows on from the success of Beverly Hills Formula’s current range, Perfect White. The kits consist of whitening strips and a whitening pen and the new products have been in development for over two years, ensuring only the highest quality ingredients are included to actively achieve a whiter, brighter, healthy smile.

Chris Dodd, CEO of Beverly Hills Formula explains that the main active ingredient is PAP - Phthalimido Peroxy-Caproic Acid, a non-peroxide teeth whitening ingredient which breaks down discolorations on the teeth without affecting the tooth structure. Additionally, PAP supports dental hygiene and health by eradicating bacteria which can harm teeth. Since PAP is only active on the tooth surface, no irritation is caused to the gums and mucous membranes in the mouth.

Chris Dodd, said they put safety, testing and results at the forefront of all new product development.

“Beverly Hills Formula are innovators, not imitators. We believe in our products because we know they work. We may not be the largest oral hygiene brand globally, but we are one of the most established. Our team is constantly evaluating our products and looking at ways to improve the formulas, working alongside the best people in the oral hygiene sector.

“Our teeth whitening kits are something we are really excited about because it’s an expansion to our whitening toothpastes and mouthwash in to new devices. Our teeth whitening kits are designed to be used alongside our entire new range of Professional White products which offer a solution for every oral hygiene concern, be that teeth sensitivity, gingivitis, discolouration and enamel protection. We can’t wait to make these products available in the Middle East and were delighted to reveal them first at the Dubai Dental Show and then at the Dubai Beauty Show. ”

Roisín White Barrett, Market Advisor Enterprise Ireland, added: “Beverly Hills Formula are a great example of the many Irish brands who have found a welcoming home in the Dubai marketplace. In a market renowned for high customer expectations, both retailers and consumers from across the GCC are increasingly turning to Irish products. The high volume of visitors to the Ireland stand at the recent Beautyworld Middle East show emphasises the reputation held by Irish health and beauty brands amongst Middle East consumers.”

References

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Fresh Pearl helps neutralise the pH balance in the mouth and protects against acid attacks, keeping your teeth enamel safe and strong while preventing cavities. Tetracosyl Pyrophosphatase and Tetracosyl Fluoroprotein in the product enable you to restore the colour of your teeth enamel to a natural white colour.

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Interview: “Clip Mirror improves dental hygiene treatment”

By Julia Maciejek, DTI

PEMBROKE, Canada: Dental hygienist Patricia Blundon is the developer of a mirror that clips on to a saliva ejector to aid dental hygienists, therapists and assistants in treating patients. In response to growing demand for the Dental Hygiene Clip Mirror, she has introduced the device to the U.S. market and plans to expand her business globally. Dental Tribune Online spoke with Blundon, who has 30 years’ experience and graduated from the Algonquin College of Applied Arts and Technology in Ottawa, Ontario, to learn more about the mirror.

Helping to improve treatment has always been important in dentistry. Why did you decide on developing the Clip Mirror and setting up your business, D.H. Essentials?

The Clip Mirror idea came to me about ten years into my career. I was working on a patient with a super strong lower lip and a protruding tongue. With a scaler in one hand and mirror in the other and the patient’s tongue pushing out the saliva ejector, I thought to myself, “Why does this need to be so hard?” I thought about having a mirror clip directly on to the saliva ejector to free up a hand and wondered why no one had invented this. Then I thought to myself, “Who better to invent a dental tool than a dental hygienist?”.

When designing the Clip Mirror, what did you pay attention to?

I knew the design I wanted and I visited a multitude of hardware stores to see what clips were available. The steel for the clip had to be medical grade and 400 series so that it would not rust or corrode with sterilization, and the clip itself was designed to snap securely to the saliva ejector while still allowing rotation if needed. I designed the rolled clip ends so one can feed a line of floss through and attach the Clip Mirror to the saliva ejector using sterile tape as an added precaution in hospital settings or compromised patients. I chose the brighter size 5 titanium mirror, as the standard rhodium pales in brightness and quality in comparison, and then decided to have the clip electron beam welded by hand for the best results.

What is the importance of good ergonomics for dental hygienists and clinicians?

The key reason I designed the Clip Mirror was to make the job of dental hygienists and clinicians easier on their body and more efficient. As the population ages, dental clinicians may find themselves using a less than ideal posture while craning their necks and contorting their bodies to complete the necessary treatment. I would encourage dental care providers to try various products to find what works best for them to help maintain proper posture, as we all know dentistry can take a huge toll on one’s body.

What has user feedback been so far?

Feedback on the Clip Mirror has been great, and for those who have struggled in the past, like I have, with no help from a dental nurse or assistant, it has been a great body and time saver. Many report finding it very helpful when they have a patient who cannot recline and need to scale the maxillary lingual surface. I have received some feedback requesting a smaller mirror size for use with patients with a narrower or smaller arch and will be introducing the Clip Mirror MINI in the near future.

Dental hygienists have been asking about the Clip Mirror, stating they wish their employers would purchase them for their hygiene tray setups. Many have seen the value of the Clip Mirror in increasing their productivity and easing the daily physical stressors of providing dental hygiene treatment. The majority of purchases are by dental hygienists who are already suffering from a career of dental hygiene.

How has the success of the Clip Mirror been globally?

I decided to introduce the Clip Mirror to the U.S. after years of market research and positive feedback from my Canadian customers. I have had customer interest from Australia, Ireland and the UK and would love to team up with a partner to serve these markets and many others. Dentistry is worldwide, so the sky is the limit.

Thank you very much for the interview.

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A new device for easy oral health monitoring

By DTI

KYOTO, Japan: With the launch of its novel saliva-testing device, Japanese company ARKRAY has introduced a system that measures multiple parameters associated with oral health within 5 minutes. The measuring instrument is complemented by a testing kit, ST Check, and is to be distributed internationally, Aiko Hitomi from the ARKRAY marketing team told Dental Tribune Online.

Using a small sample of saliva, the SPOTCHEM ST ST-4910 device screens parameters such as caries-gene bacteria, salivary acidity buffer capacity, leukocyte count, traces of blood, protein status and ammonia values applying the dual-wave-length reflectance method, Hitomi explained. The patient’s individual results are visualised in an easy-to-analyse chart that is printed about 5 minutes after the saliva has been applied to the test strip.

Through analysis of the individual parameters, dental professionals may be able to recognize early warning signs of conditions such as caries or periodontal disease, according to the company. For example, studies have shown that gingival inflammation increases leukocytes in the saliva. Therefore, a high leukocyte count may be an indicator of gingivitis even though the patient is not experiencing obvious symptoms of the condition yet.

Since its launch, the palm-sized device has already attracted a great deal of interest in the market. Having promoted it at several dental exhibitions, the company has received positive feedback from regional and foreign dentists, hopefully indicative of the device’s successful distribution worldwide, according to Hitomi.

Although there are some competitors in the field, he emphasised that the company’s system is unique in that it can assess seven items at once—more than any other saliva test on the market. Aimed at professional use, the technology is targeted at dentists and dental hygienists, and it is to be used for reference, but not for stand-alone diagnostic purposes, Hitomi explained.

Since saliva screening with devices such as the SPOTCHEM ST ST-4910 system has not been standardised yet, there is no compatibility between the ARKRAY kit and saliva test systems from other companies, Hitomi said. Currently, the device is available in Europe and selected Asian countries. More information can be found at www.arkraydental.com.

Periodontal pathogen may interfere with conception in young women

By DTI

HELSINKI, Finland: In a new study recently carried out by researchers at the University of Helsinki, it was found that the common periodontal pathogen Porphyromonas gingivalis may inhibit conception in young women. According to the Global Burden of Disease Study, severe chronic periodontitis is the sixth most common medical condition in the world. Up until now, no data on the influence of periodontal bacteria on conception has been available.

The study investigated whether microbiological and serological markers of periodontitis are associated with conception and involved 236 women aged between 19 and 42 who had stopped contraception in order to fall pregnant. The participants were initially interviewed on their medical history, smoking habits, oral hygiene habits, previous dental visits, and socio-economic status. Oral examinations established the presence of carious lesions and periodontal disease (based on pocket depth, visible plaque, bleeding on probing and clinical periodontal attachment loss) in order to detect periodontal pathogens and the associated antibodies; the researchers analysed collected serum and stimulated saliva. For the diagnosis of bacterial vaginosis, gynaecological speculum examinations were performed and vaginal swabs were taken. The participants were followed for 12 months to establish whether they had become pregnant.

According to the results, P. gingivalis in the saliva was significantly more common among those who did not conceive than among those who did (83 per cent compared with 21 per cent). Levels of salivary and serum antibodies against the pathogen were also significantly higher in the women who did not become pregnant. Furthermore, statistical analysis showed that the finding was independent of other risk factors contributing to conception, such as age, socio-economic status, bacterial vaginosis, previous deliveries or clinical periodontal disease.

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