**Tough Brexit could affect UK dentistry**

Mydentist Clinical Services Director warns of shortages and rising costs

By DTI

LONDON, UK: Earlier this month, Parliament cleared the way for government to invoke Article 50 in March that will open negotiations for the country to leave the European Union. Prime Minister Theresa May announced earlier this year that the UK will not remain in the single market regardless of the deal negotiated with Brussels. In an article, mydentist Clinical Services Director and member of the Association of Dental Groups Dr Steve Williams has now warned that this version of Brexit could have serious implications for dentistry in the UK.

"Dentistry is one of the areas of NHS care that is most heavily dependent on EU trained professionals," he said. "It will be vital to ensure that Brexit does not undermine our ability to provide NHS dental care by inadvertently disrupting the supply of dentists in the UK."

Currently, almost one-fifth of dentists currently registered with the General Dental Council are from Europe. To withdraw these professionals from the workforce would be devastating, especially in underserved areas, where there is already a shortage, according to Williams.

"The UK dental market relies strongly on the European workforce. Without them, the profession’s ability to recruit would be greatly affected. Unless training places can be increased, there will be a continued need for additional European dentists throughout the UK," he explained.

The government has announced no specifics about the status of EU nationals in the UK after the country has left the EU, however, the protection of their rights was included in the 12-point plan announced by PM May to guide the Brexit process.

"Any announcement made on whether European professionals will be allowed to stay in the UK will be hugely beneficial for dentistry, as at least some stability will be guaranteed," Williams said.

Things are not all bad, however, as a split from Europe could also mean restructuring legislation.

"There are a number of EU laws that affect dental practices—including regulations on tooth whitening and the concentration of hydrogen peroxide that can be used. What’s more, current EU legislation prevents the transfer of NHS contracts by any way except through the partnership route, which could change if the UK decides to create its own commissioning rules. The problem is that so much legislation will require changing, that it will be several years after leaving the EU before anything will actually take affect," Williams said.

**King’s proves method to help teeth repair themselves**

By DTI

LONDON, UK: Scientists from the Dental Institute at King’s College London have reported on a new method to help teeth repair themselves. By delivering a specific type of small molecules to cells inside teeth, they were able to almost completely repair carious lesions within only six weeks.

According to the researchers, who published their results earlier this week in the Scientific Reports journal, as the sponges degraded over time, new dentine almost entirely formed in their place. Using this tooth’s natural ability to repair itself, the new approach could potentially reduce the need for fillings or dental cements, particularly for the repair of larger cavities, they said.

Currently, there are a number of trials underway worldwide that seek to use dental stem cells to repair tooth defects. Alternative ways to induce dentine regeneration include the use of keratin proteins and synthetic materials. At King’s, the scientists used small-molecule glycogen synthase kinase (GSK3) antagonists to mobilise cell growth, including Tidegloglaub, which could also help to fast-track the new approach to use in the practice, according to the researchers, as it has already been used in clinical trials to treat Alzheimer’s and other neurological diseases.

"The simplicity of our approach makes it ideal as a clinical dental product for the natural treatment of large cavities, by providing both pulp protection and restoring dentine," lead author of the study and head of King’s Craniofacial Development and Stem Cell Biology Division Prof. Paul Sharpe said. "In addition, using a drug that has already been tested in clinical trials for Alzheimer’s disease provides a real opportunity to get this dental treatment quickly into clinics."

The report, titled “Promotion of natural tooth repair by small molecule GSK3 antagonists”, was published in Scientific Reports.
Newcastle figures question reporting of dental emergencies

By DTI

LONDON, UK: With NHS trusts in crisis all over Britain, new estimates by Newcastle University’s Centre for Oral Health Research have indicated that a much higher number of people in the UK may present to medical emergency departments with dental problems than commonly believed. According to the three-year study, which looked at coded A & E attendance data from the Newcastle upon Tyne Hospitals NHS Foundation Trust, almost 1 per cent of all emergencies were people with some form of dental problem. But the Centre for Oral Health Research indicated in official government figures that the number of dental emergencies to be 16,000 in 2014/2015, it could actually be almost 150,000, adding to the already huge pressure that A & E departments face in the UK.

Calculations by the British Dental Association have suggested that the additional burden amounts to £5 to £16 million per year for trusts, which are also not equipped to deal with more of these problems.

Putting these figures in a national context, the results suggest that ten times more people with dental complaints are visiting emergency departments than indicated in official government figures. While the latter estimated the number of dental emergencies to be 16,000 in 2014/2015, it could actually be almost 150,000, adding to the already huge pressure that A & E departments face in the UK. Calculations by the British Dental Association have suggested that the additional burden amounts to £5 to £16 million per year for trusts, which are also not equipped to deal with many of these problems.

If you experience toothache without significant other symptoms, then heading to a hospital’s A&E department isn’t always necessarily the best option. Ensuring that patients are treated in the right place, at the right time, by the right team is essential for both the patient and the wider public, not just to ensure appropriate diagnosis and treatment but also to reduce unnecessary care and personal costs,” said lead author of the study Dr Justin Durham, who also works as an honorary consultant at Newcastle upon Tyne Hospitals NHS Foundation Trust.

This paper, and other recently published data from Newcastle University’s Orofacial pain research team, suggest there are significant issues that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain, and also the group of conditions that cause persistent mouth pain.

Publication by DTI

DENTAL TRIBUNE INTERNATIONAL
Halberstadt 79, 40295, Cologne, Germany
Tel: +49 154 4041 577
Fax: +49 2241 63737

info@dental-tribune.com
www.dental-tribune.com

UK NEWS

IMPRINT

GROUP EDITOR/MANAGING EDITOR DT UK:
Daniel Zimmermann
newsroom@dental-tribune.com
Tel: +44 161 223 1830

EDITORS:
Kersten Nielsen
Vivienne Keighley

ONLINE EDITOR/SOCIAL MEDIA MANAGER:
Claudia Scholz

MANAGING EDITOR B:
HEAD OF DT COMMUNICATION SERVICES:
Sandra Kalli

JUNIOR EDITOR:
Nirbhleen Gill

COPY EDITORS:
Hans Motorscham

CLINICAL EDITORS:
Magda Netzsch
Nathalie Scheufler

PUBLISHER/President (US):
Thomas Caro

JUNIOR PROJECT MANAGER ONLINE:
Hannah Kuchkuck

E-LEARNING MANAGER:
Lucas Eisenmann

MARKETING SERVICES:
Nature 101, UK
SALES SERVICES:
Nature 101, USA

www.dental-tribune.com
info@dental-tribune.com

© 2017, Dental Tribune International GmbH
All rights reserved. Dental Tribune makes every effort to report clinical information and manufacturer’s products accurately, but cannot assume responsibility for the validity of product claims, or the hypothesis or conclusions drawn by advertisers. Opinions expressed by authors are their own and may not reflect those of Dental Tribune. Dental Tribune reserves the right to print these codes in our weekly Dental Tribune UK newsletter.

AD
Cutting-edge design based on 45 years of experience

Hahn Tapered Implant is a trademark of Prismatik Dentalcraft, Inc.

Industry standard conical prosthetic connection for excellent seal, stability, and strength

Coronal micro-threads for crestal bone preservation

Proven resorbable blast media (RBM) surface with proprietary processing to promote osseointegration

Dual-lead thread pattern with self-tapping grooves for swift insertion

Tapered body for use in anatomically constricted areas

Color-coded platform for matching restorative components

Machined collar to facilitate soft tissue maintenance

Sharp buttress thread for good primary stability in all bone types

Hahn Tapered Implant is a trademark of Prismatik Dentalcraft, Inc.

For more information
+49 (0) 69-2475 144 30
glidewelldirect.com | orders@glidewell dental.de

Glidewell Direct is actively seeking distribution channels
Oral health improving, but not equally

By DTI

LONDON, UK: Compared with other countries in Europe, UK children score relatively low on the DMF index. Despite significant improvements in the state of oral health since the early 1990s, however, a large gap exists between children of different economic backgrounds, a new national health report has indicated.

The 144-page paper published by the Royal College of Paediatrics and Child Health (RCPCH) in London on the state of health in children in all four countries found that 5-year-olds living in the most deprived areas of England, Northern Ireland and Wales are three times more likely to suffer severe tooth decay than those residing in the most affluent areas.

Regarding the number of 5-year-olds with no obvious signs of tooth decay, England and Scotland had the largest proportion (70 in 100 children), while Northern Ireland and Wales lagged behind, with 60 and 59 in 100 children, respectively.

Nevertheless, children in Northern Ireland showed the most noticeable oral health improvement since 2003, together with Scotland, the report stated.

Caries remains the single most common reason that children aged 5 to 9 require admission to hospital, in many cases needing general anaesthetic for tooth extraction, it also said.

The figures for the report were derived from the Children’s Dental Health Survey for England, Northern Ireland and Wales and the National Dental Inspection Programme for Scotland. Despite the noticeable improvement in the oral health of children, it recommended the implementation and evaluation of national oral health programmes for children and young people across the country, building on existing initiatives, including Childsmile and Designed to Smile. It also called for improving access to dental check-ups as soon as the first tooth erupts and for water fluoridation in areas where there is high tooth decay.

Another key factor for the eradication of decay, according to the report, is the prevention of children consuming high-sugar food and drinks, through education and national initiatives to reduce sugar in children’s food.

“We support all the recommendations contained in the report, the most important from the point of view of our patients is for universal early years public health services to be prioritised with targeted help for children and families experiencing poverty,” commented media spokesperson of the British Society of Paediatric Dentistry and paediatric dentistry consultant Dr Claire Stevens, in Westminster yesterday. “I trust that, as intended, the report will be a springboard for more campaigning and more change, especially in relation to early intervention and prevention in children’s oral health.”

Looking at a comprehensive list of 25 indicators, the RCPCH report identified some of the major issues concerning the health of UK children and recommended key actions for each government to improve the situation.

Educators recognised in New Year Honours

By DTI

LONDON, UK: Two dental professionals have made it to the Queen’s New Year Honours list this year. Acknowledged for their contributions to dental education and services to oral health were Associate Dean for Equality and Inclusion Prof. Elizabeth Kay at Plymouth University’s Peninsula School of Dentistry and Sarah Marianne Murray, Head of Centre and Programme Lead at Queen Mary University of London’s Institute of Dentistry.

Both women were appointed Members of the Order of the British Empire (MBE) in the list, which was published by the Home Office last week. They are among almost 1,200 awarders, including Olympic gold medallist Andrew Murray and fashion designer and former Spice Girl member Victoria Beckham, who were recognised for their achievements and services in various fields, such as sport, economics, health and literature.

As Foundation Dean of the Peninsula School of Dentistry, Kay has been pivotal in establishing the first new dental school in the UK for 40 years. Among her other positions, she works as a public health academic consultant with Public Health England and serves on the editorial boards of three dental publications, including the British Dental Journal. One of her recent publications is an introductory textbook for dental undergraduates, published by Wiley-Blackwell, for which she was the sole editor. A leading dental hygienist in the UK, Murray currently manages and teaches the Foundation Certificate in Oral Health Education at Queen Mary aimed at qualified dental nurses. Among other recognitions, she was awarded the title of “Hygienist of the Year” in 2007. She is also a regular contributor to dental journals and magazines in the UK.

Both Kay and Murray will receive their awards, along with all the other recipients, in a ceremony later this year.

Patient charge revenue deductions

By DTI

LONDON, UK: According to the British Dental Association (BDA), deductions on patient charge revenue have become a major issue for GDP when dealing with the NHS. The organisation has now reached out to members to explain their case in order to prepare their patients with the necessary care.

The BDA argues that NHS England’s heavy-handed approach to patient charge revenue subsequently means that a high number of dentists suffer ongoing financial losses simply for providing their patients with the necessary care.

“We’ve already been able to secure concessions from NHS England for the manifold failures by Capita on performer lists our members highlighted. Over 100 foundation dentists who faced having to stop working at the start of December can now continue,” commented BDA Vice Chair Eddie Crouch.

“Claims that would have fallen foul of the two-month rule due to slow performer attachments are now being permitted. We’re making progress, but there is so much more we can do,” he continued. “I urge all BDA members to raise this issue with colleagues and encourage them to share their experiences.”