Dear Readers of Dental Tribune India

Bad breath worries women

Women are more worried about having bad breath than about their partners disliking their appearance. Toothpaste manufacturer Macleans found that 78 percent of women worry about having smelly breath, while only 4 percent said they were concerned about what underwear to wear.

Simulation helps students learn dental implant procedures

A realistic computer game will soon be used to help dental students, worldwide, learn and reinforce dental implants. The virtual dental implant training simulation program is designed by the faculty and students of Medical College of Georgia School of Dentistry, US, to aid diagnostics, decision-making and treatment protocols.

Easier plaque detection with Inspektor TC

In collaboration with Inspektor Research Systems BV in the Netherlands, scientists at the University of Liverpool have developed a new product for identifying plaque build-up in the mouth before it becomes visible to the human eye. The toothbrush-sized device has a blue light at its tip that allows plaque to be easily seen as a red glow when shone around the mouth and viewed through yellow glasses with a red filter. Dentists currently use disclosing agents in tablet form to indicate tooth decay and plaque, but these often stain the mouth and taste unpleasant. The new product, known as Inspektor TC, has been designed for everyday use in the home and will be particularly useful for those who are vulnerable to dental diseases, especially children and the elderly.

“Early stage plaque is invisi-
India approves new dental schools

Daniel Zimmermann

HONG KONG/LEIPZIG, Germany/ NEW DELHI, India: The Minister of Health and Family Welfare in India, Shri Ghulam Nabi Azad, has approved 150 educational institutions, including a significant number of medical and dental colleges. He also directed the country’s Medical and Dental Councils to take up pending recommendations of colleges as soon as possible so that semesters could begin by 1 August, the newspaper Times of India reports.

In India, each institute offering medical or dental education needs annual clearance from the Ministry of Health and Family Welfare based on recommendation by the two councils.

Officials have justified the large number of approvals by the many applications that had been pending approval for several years and numerous public complaints of undue delay in the processing of cases. However, the approvals come at a time when there is growing concern for the future employment of dental graduates. According to a Times of India report, many dental graduates in India are forced to quit dentistry and work in other, more lucrative jobs.

Education regulators have also been said to turn a blind eye to quality in their haste to recognise private professional institutions. Azad made clear that no intermediaries would be tolerated in his ministry for clearing any medical institute application. He asked for complaint boxes to be placed at his office and residents to receive complaints against any person seeking illegal endorsement, either in medical councils or in the Ministry.

“What is needed in India is a national workforce strategy that is carefully devised and implemented,” Prof. Raman Bedi, former Chief Dental Officer in the UK and founder of the new Indian dental community Dentalghar, told Dental Tribune Asia Pacific. “With higher demands for quality dentistry by local people, dental tourism, postgraduate training opportunities etc., many dentists will stay in India instead of going abroad.”

Dental education in India has grown in recent years and India now ranks first in the world in having the highest number of dental schools. The country has 280 dental institutions, which produce between 15,000 and 20,000 Bachelor of Dental Surgery graduates every year.

Americans support dental coverage in health care reforms

Over 60 per cent of Americans consider dental coverage part of an overall health care reform by the Obama legislation, a new public opinion survey has shown. The poll released at the launch of National Smile Month in June and commissioned by Oral Health America revealed that four in five adults agree that dental benefits are as important as general medical benefits in an overall health care benefit package.

Many poor and lower-middle class families in the US currently do not receive enough dental care, in part because dentists prefer patients who have private insurance or can pay in cash. The lack of dental care is also not restricted to the poor; recent data shows. Experts on oral health say that about 100 million Americans have no access to adequate care.

In a recent letter to US president Barack Obama, the American Dental Association (ADA), which represents over 157,000 dentists in the US, recently urged the government to pay more attention to dental health care in the on-going health-policy debate. “Acknowledging that the majority of Americans have access to excellent and relatively affordable dental care […] we are compelled to point out that too many low-income Americans still suffer needlessly from dental disease,” the letter states. “More must be done to ensure that all Americans have access to quality oral-health services.”

The ADA recommends increasing funding to the nation-wide Medicaid health programme, rebuilding the public dental-health infrastructure & supporting community-based prevention measures, such as fluoridation or school-based education programmes.

Obama’s health care reform initiative aims to extend health coverage to 45 million uninsured people in the US, as well as to preserve consumer choice and lower rising health care costs, by cutting more than US$200 billion in reimbursements to hospitals over the next decade. He has also announced his support of the introduction of a public health insurance plan, a concept similar to the failed health care plan developed by his current Secretary of State and former First Lady Hillary Clinton back in 1994.

The government’s health-care reform proposals are opposed by the US Congress and other organisations like the American Medical Association, who say that the realisation would cost a total of US$1 trillion over the next decade and still leave millions of people in the US uninsured.
activities also include the organization of continuing education programs as well as congresses and exhibitions. The World Dental Federation (FDI) & regional dental associations, such as the Asia Pacific Dental Federation (APDF) and the Latin American Dental Federation (FOLA) have chosen Dental Tribune International as their official media partners.

DTI's presence within the realm of Indian dentistry has been long overdue & eagerly anticipated. However, establishing DTI's broad media & educational portfolio in India required an outstanding publishing house that is experienced, professional, innovative, committed to quality, and highly regarded within the Indian academic community. There is no question that among medical publishers, Jaypee Brothers not only meets these requirements, but also has a global reach and is well on its way to becoming an essential partner for the dental profession in India. In addition to the Indian Edition of Dental Tribune, "The World's Dental Newspaper," & its related specialty newspapers, Jaypee will bring you clinical journals such as Root, Implants, Cosmetic Dentistry, Ortho & Laser. Given India’s global prominence in information technology, I am certain DTI's state-of-the-art ePublishing & eLearning platforms will generate a lot of interest among dental professionals as well. Please visit www.dental-tribune.com for daily news feeds, clinical updates, product and company directories, print archives and ePapers. In addition, excellent online education awaits you as a registered member of the Dental Tribune Study Club at www.dtstudyclub.com. This ADA/CERP accredited eLearning platform offers live interactive courses that are also archived for viewing at a later time, discussion groups, video product reviews and peer-reviewed case studies, and all of it is available 24/7. Finally, I would like to invite the Indian dental community to contribute to the Dental Tribune platform as reporters, bloggers, presenters, reviewers, opinion makers, moderators or lecturers no matter whether you are a researcher, clinician or politician. The global dental industry wants to hear more from India, and Dental Tribune will serve as your gateway. Dental Tribune already has many friends in India, and looks forward to making many new ones in the years to come. I am very thankful for the overwhelming interest and trust we have experienced from the Indian dental community thus far.

Sincerely,

Torsten R. Oemus
Chairman & Publisher
Dental Tribune Group

Washington cracks down on tobacco, and ADA approves

The American Dental Association (ADA) is applauding new legislation to regulate tobacco. The Family Smoking Prevention and Tobacco Control Act gives the U.S. Food and Drug Administration (FDA) the express authority to regulate the manufacture, marketing and distribution of tobacco products.

The ADA has a long-standing policy that nicotine is a drug and that cigarettes and other tobacco products are nicotine delivery devices and, therefore, should be regulated. "Dentists are the first line of defense in the war against oral cancer and many other tobacco-related diseases," said ADA President Dr. John S. Findley. "About nine out of 10 people who will die from oral and throat cancers use tobacco." "Tobacco products are also associated with higher rates of gum disease, one of the leading causes of tooth loss in adults," Findley said.

The ADA has a long-standing policy that nicotine is a drug and that cigarettes and other tobacco products are nicotine delivery devices and, therefore, should be regulated. "Dentists are the first line of defense in the war against oral cancer and many other tobacco-related diseases," said ADA President Dr. John S. Findley. "About nine out of 10 people who will die from oral and throat cancers use tobacco." "Tobacco products are also associated with higher rates of gum disease, one of the leading causes of tooth loss in adults," Findley said.