We value your feedback, so email us at penny@dentaltribuneuk.com, or write to Dental Tribune UK, 4th Floor, Treasure House, 19-21 Hatton Garden, London, EC1N 8BA

Petty egos

Your article about the BMA trying to ban the use of the title ‘Dr’ raises eyebrows. I trained in South Africa where BDS and MBCh students follow the same core training (full anatomy, histology, physiology, biochemistry, genetics, pathology, haematology, immunology, microbiology including parasitology, general medicine, general surgery, general anaesthetics, general pharmacology), until the groups split-up to specialise in Dentistry and Maxillofacial Surgery (BDS) or General Medicine and General Surgery (MBChB) respectively.

Post graduate Maxillofacial and General Surgery is a dental speciality in South Africa and other countries, unlike in the UK where it is essentially a medical or so-called ‘double qualification’ speciality.

Perhaps the argument says something about the level of UK Dental School training, I do not know. I think I speak for most colleagues from overseas who earned and deserve the entitlement to the title of Dr. We are not about to be stripped of our academic achievements lying down.

In my opinion, the public are more likely to be misled by a PhD in Chemistry calling themselves ‘Dr’ than by a Dentist with a BDS or BChD qualification who is indeed a health professional of equal status to our medical colleagues.

This is nothing more than an age-old argument driven by egocentric motives rather than the often purported ‘need to protect the public’. In my experience, the public are not as foolish as they are portrayed, and will not walk into my practice seeking e.g. anti-natal care treatment just because I use the title Dr. It is also NOT in my best interest to mislead potential clients in adverts or on my door sign because I just would not attract the business that I would be looking for, i.e. dental patients!

In summary, there really is no competition between the professions because we offer different specialist services from each other therefore there is no need for petty rivalry.

Dr Mairosi

Mouthwash link with cancer

The review reported evidence from an international study of 5,210 people, which found daily mouthwash use was a ‘significant risk factor’ for head and neck cancer – irrespective of whether users also drank alcohol or smoked.

But the effects of mouthwash were worst in smokers, who had a fivefold increased risk of cancers of the oral cavity, pharynx and larynx. Those who also drank alcohol had more than five times the risk.

However, Professor Damien Wainmedge, scientific adviser to the British Dental Association, said further research was needed to substantiate the claims.

‘Excessive consumption of alcohol and tobacco are well recognised as risk factors for developing oral cancers,’ he said.

‘This paper raises interesting issues, but the evidence showing any link between the prolonged use of mouthwash containing alcohol and oral cancer is not conclusi ve, and requires further trials to establish if there is a genuine connection.

‘If patients are in any doubt about using mouthwash, they should consult their dentists.’

Dr Nigel Carter, the chief executive of the British Dental Health Foundation, rejected the findings and said: ‘A recent, and more thorough review of all available evidence carried out by leading experts on behalf of the foundation concluded there were no proven links between alcohol-containing mouthwash and increased incidence of mouth cancer. The public should not worry.’

Last night, a spokesman for Johnson & Johnson Ltd UK, the manufacturer of Listerine, said: ‘There is no scientific evidence to support an association between the use of alcohol-containing mouthwash, such as Listerine, and an increased risk of oral cancer.’

More Honours for the profession

Dr Gregory, a former dental public health consultant for NHS Bedfordshire, is a fellow of the Faculty of Public Health, Royal College of Physicians and a member of the Faculty of Dental Surgery of the Royal College of Surgeons of England.

Dr Gregory said: ‘I am tremendously excited by this award, it is always a great privilege to be recognised for the work that you do and this is a really fitting ending to a wonderful few months.’

BSHDT new president and develops in response to the changing political climate within the profession itself, and most importantly, in response to the needs of its members.’

The new president-elect is Sally Simpson.

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