In an exclusive interview England’s Chief Dental Officer tells Dental Tribune how he fell into dentistry, his plans for fluoridation and why dentists have nothing to worry about post 2009. Penny Palmer reports

People have a right to express a view but if you’re going to do something to stop others from benefiting, you have to have the evidence to support it. ‘On why he passionately supports fluoridation Barry is unstoppable. ‘60-70 per cent of our children are decay-free in England; this is down to a good diet, fluoride toothpaste and education, while evidence supports that deprivation and poverty is linked to decay.’

Citing research evidence from the US Barry continues; ‘In the States fluoridation reduces decay in older people by 27 per cent, and as the most litigious country in the world, people would be suing if there was a fluoridation link to any of these health issues.’

He continues: ‘The York Review looked at 700 papers and there was not one link between fluoridation and general health issues – there really is no evidence to that any damage is done and that is a fact.’

When asked why 70 per cent of children with healthy teeth should drink fluoridated water to benefit the 50 per cent with decay he is honest. ‘Would you stop treating people for lung cancer if they smoke? Would you stop treating people because they are obese?’

‘Everyone benefits from fluoridation. Those with higher levels of decay benefit the most, but even decay-free people can develop it without fluoridate.’

‘This is a process that has no discernible effect on any health condition and dental disease.'
does not heal – if you lose your teeth at ten-years-old you are stuck with that for the rest of your life.’

He continues: ‘I don’t have the right to impose fluoridation and neither does anyone have the right to stop it happening; It’s not the only thing that is added to improve people’s health - we add folic acid to bread, and iodine to salt, so what’s the difference?’

On fluorosis Barry says: ‘I spent 20 years working as a dentist in a fluoridated area and I never had to do a cosmetic procedure related to it - you would have to drink loads and loads of water to get it anyway.’

At this point Barry points out the evidence in the form of UK NHS dental surveys statistics from the World Health Organisation (WHO). According to one study, the results clearly highlight that five-year-old children do have more filled, missing or decayed teeth in unfluoridated areas such as the North West, Scotland and Wales.

Similarly, the WHO global database shows that England’s 12-year-old children have the best oral health – with an average number of just 0.6 filled, missing or decayed teeth (it used to be five in 1975). And adults with no teeth have fallen by a whopping 50 per cent from 1968 to 1998.

When asked whether dental access could be the reason for those suffering from oral health diseases Barry is resolute. ‘Access is completely unrelated to dental disease; it is education, smoking cessation, sugar, obesity and diet that affect it.’

Moving on to how he deals with criticism Barry has an innate ability to divert away from the subject, but when pushed further he says: ‘Some criticism is ill-founded, but there is always another side to it but it is rarely personal.

‘I’ve always listened because you learn from it, but when it is so vitriolic about what you are doing from people with a vested interest in dentistry outside the NHS, it means you are doing something right - you’ve got to meet the real people to hear what’s really going on.’

As for barriers blocking the way for a smoother ride Barry says: ‘Perception has always bothered me with media coverage sending out the wrong message.

He continues: ‘Dentists are advertising for NHS patients and we now get mostly good coverage in local media.’

While the fluoridation scheme is close to the finishing line, the profession just needs to get past 2009. ‘The contracts do not simply end in 2009, they are open-ended and do not need to be re-negotiated,’ explains Barry. Dentists, he says, must keep in touch with their PCTs, but the DH will be issuing guidance for post 2009 shortly.

For now though, Barry sees no reason to move on from his post as England’s CDO for dentistry. So how long does he see himself doing the job? ‘When I’m not enjoying it anymore I know that it’s time to move on’ he concludes.