Oral health study wins SGH funding

A grant of more than £139,000 has been awarded to a study that will investigate the effect of social deprivation on oral health in outer north-east London. The project, which beat off competition from eleven other proposals to secure funding from the Shirley Glascott Hughes Trust Fund, will investigate whether people living in deprived communities define oral health differently from their peers living in less deprived areas. It will also assess whether individuals’ concepts of oral health affect the way that they care for themselves and what barriers exist to individuals accessing care and adopting healthy behaviours.

The study will consider the populations of Redbridge, Waltham Forest and Barking and Dagenham, and use patient concepts of oral health to ask whether deprivation can explain why some individuals engage in behaviours such as smoking, excessive alcohol consumption and irregular visits to a dentist, which increase their risk of oral diseases.

It will assess the strengths and shortcomings of the way oral health services are provided, providing evidence on how to adapt existing structures and develop new services and interventions that overcome barriers to care. It will also provide evidence to underpin models of commissioning care.

Professor Liz Kay, Chair of the Trustees of the Fund, said: “Despite an overall improvement in the oral health of the UK over the past four decades, a persistent and unacceptable chasm between those with the best and worst oral health persists. Understanding why we have this gap is crucial to addressing this situation. The trustees hope that this piece of work can make a significant contribution to expanding that understanding and helping to develop practical tools to address it.”

The project will be led by Dr Russ Ladwa (pictured), Dean of the Faculty of General Dental Practice at the Royal College of Surgeons of England in London. It will be hosted by the Institute of Dentistry at Barts and The London School of Medicine and Dentistry.

Thanking the trustees, Dr Ladwa said: “The award of this grant represents a great boost to research in primary care. The FGDP(UK) will work in collaboration with the host institution, Barts and The London SMD, Queen Mary University of London, which has a tradition of research in health inequalities. Both the Institutions are delighted to be given the opportunity to carry out research that will provide evidence to develop cost effective models of delivering prevention and treatment in primary dental care.”

GDC to review its Standards and Scope of Practice

The General Dental Council (GDC) has begun a review of its ‘Standards Guidance’ and ‘Scope of Practice’. It has been five years since the GDC published its ‘Standards Guidance’ and replaced its previous guidance document, ‘Maintaining Standards’. The move to ethical principles was a significant change in direction at the time, however, in the last five years the landscape of the regulatory world, and the GDC itself, has changed.

The GDC now registers the entire dental team – dentists, dental nurses, orthodontic therapists, dental hygienists, dental therapists, dental technicians and clinical dental technicians – and has more than 92,000 dental professionals on its registers.

The aim of the Standards Guidance is to go back to square one. The GDC will be asking registrants, patients and other stakeholders what level of detail they would find helpful, what they think of the current standards, what works, what doesn’t and what’s missing. The review will take place throughout 2011 and will include consultations, focus groups, a working group and GDC staff attending events across the UK to hear directly from those affected.

Anyone who wishes to make any comments directly to the GDC on the current guidance can do so here (standards@gdc-uk.org).

A call for feedback on ‘Scope of Practice’ will be launched at the end of January 2011 and will be available on the GDC website www.gdc-uk.org. The forum will ask registrants to give their views on the document, stating whether they agree or disagree, what the dental team work together more effectively; they can also lead feedback on what skills may need to be added or amended for each of the seven registrant groups.

EOA announces the winners of its 2010 Research Competitions

The winners of two coveted research prizes, awarded annually by the European Association for Osseointegration (EOA), have been announced.

The EAO Clinical Research Prize for 2010 has been awarded to Maurizio Tonetti from Italy and the EAO Basic Research Prize to two winners, Pascale Habre-Hallage from Lebanon and Ulricke Kuchler from Austria.

All three winners were awarded their prizes at the 19th Congress of the EAO, which took place in Glasgow from 6-9 October 2010.

Each winner received a Diploma from the EAO and a prize of 2,000. The 18 finalists had earlier been selected from nearly 500 abstracts submitted to the EAO Congress.

Maurizio Tonetti and his team won the EAO Clinical Research Prize for their study: “Immediate vs delayed implant placement in anterior: The TIMING randomised controlled clinical trial”. The multi-centre study, which compared the benefits and disadvantages of immediate and delayed implant placement, was chosen from eight finalists.

Pascale Habre-Hallage won her prize for a study entitled “IMRI shows cortical activation following mechanical stimulation of oral implants”; and Ulricke Kuchler for a study entitled “Intermittent PTH fails to stimulate osseointegration in diabetic rats.”

Smile 4 Life in Lancashire

Health minister Lord Howe has visited Lancashire to launch a new scheme aimed at improving the oral health of young children.

Teaming up with local primary care trusts, Lancashire County Council aims to tackle the county’s poor record on tooth decay.

Dental experts will visit pre-schools providing advice to youngsters and their carers on brushing teeth, making regular trips to the dentist and eating more healthily.

Lord Howe said that the Smile4Life scheme should help the NHS to achieve its goal of improving children’s oral health.

“ Tooth decay in children is a serious problem,” he revealed. “It can cause a great deal of pain and distress and treating it is very costly for the NHS.

“Focusing on prevention is not only better for the children, but is also a better use of NHS resources. I’m delighted to see the local authorities and the NHS taking innovative action to address this very important local health issue, and I hope others will follow suit.”

A number of new dental practices have recently opened in Lancashire to reduce the number of people on waiting lists for an NHS dentist.

Janice Nicholson, head of dental commissioning at NHS Central Lancashire, recently announced that dentists in Leyland and west Lancashire are now opening their doors to patients who are prepared to travel from central Lancashire in a further attempt to improve access.

Dental expert David Smith, Chair of the Standards Committee, said: “The reviews of both of these documents could result in a radical redesign of the GDC’s guidance for registrants and it’s therefore extremely important that we hear from everyone who’ll be affected and make the right changes. The standards are the main ethical guide that we expect dental professionals to apply to their everyday work. This is a significant piece of work for the GDC and one that we anticipate will have a positive impact on dental professionals and therefore on patients.”

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The EAO Basic Research Prize to two winners, Pascale Habre-Hallage from Lebanon and Ulricke Kuchler from Austria.
Editorial comment

So it’s finally here... after what seems the longest time, dental professionals can finally have their official say on the Care Quality Commission (CQC) registration fees now that the consultation documentation has been released.

The most cynical of you will be no doubt thinking it’s no bl**dy use anyway.

Now, the most cynical of you will be no doubt thinking ‘no bl**dy use anyway, they’ll do what they want no matter what we say’ but a public consultation does have the advantage of being just that, public.

I am well aware of the strength of feeling against the CQC and the confusion and resentment that has been created, and I am also aware of how some quarters are using their right to protest by canvassing their MPs to investigate the necessity of extra regulation.

All stakeholders should have their say and at least make their sentiments known, if only to be able to say to yourself that you have. Who knows, someone may even be listening?

Snap-On Smile

In recent years, the number of people opting for cosmetic surgery has increased and continues to be popular with people who desire to improve the aesthetic appearance of their smile. Now, for those who fear needles and worry about drilling, a new treatment is available in the UK: The Snap-On Smile.

The Snap-On Smile does exactly what its name suggests; it fits onto the original teeth, much like false nails are placed over the top of nails.

Fitting over the teeth, the Snap-On Smile gives the illusion of a perfect smile, without the need for surgery. Patients who opt for this treatment can select a colour shade and choose the shape of the teeth.

For those who are worried about drilling and needles, and don’t want to pay hundreds or even thousands of pounds for treatments, such as veneers or dental implants, the Snap-On Smile would seem like a perfect option.

To make the Snap-On Smile photos and impressions are made of the patients’ teeth and in about four weeks the Snap-On Smile lab creates the smile.

Images courtesy of Pearl Dental Clinic

The AOG and Smile-on in association with The Dental Directory bring you

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Dental experts warn against home whitening treatments

**News**

**Dental Tribune United Kingdom Edition - November 15-21 2010**

**Mouth Cancer News Update**

W

With Mouth Cancer Ac-

Mounth in full

swing, the national

press is full of news related to

head and neck cancer, highlight-

ing the condition to the general

public. Here is just a taster of the latest news…

MCF benefits from new

restaurant

The Mouth Cancer Foundation, will

this week, clinical senior lectur-

er in dental public health at the

University of Glasgow, Dr David

Conway, highlighted that those

with a “low social economic sta-
tus” were faced with significant-

tly increased risks of developing

Dental experts say the trend has

caused people to re-

denote the need for

their teeth with

aesthetic results; however, Eder

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which can break down the

tooth enamel off the teeth, leaving

the teeth vulnerable to decay.

Some sites also recommend methods including brushing the teeth with salt, soap and bleach.

Teeth whitening has become extremely popular in recent years, as people look to recre-

ate the famous Hollywood smile adopted by so many models, ac-
tors and pop stars, however, the trend has caused people to re-

sort to extreme measures to try and whiten their teeth and many people, especially young girls, are turning to the internet to find ways to whiten their teeth without paying hundreds of pounds.

There has been a ten-fold in-

crease in the number of people undergoing whitening treatment in the last five years but for many, the price of professional treat-

ment is thought not affordable.

Dental experts say the trend is alarming and have warned people to avoid using internet sites to find out about teeth whitening treatments. Experts say the methods often recommended by other members of the public are dangerous and potentially very damaging for the teeth. Some of the methods can break down the enamel covering on the tooth, which leaves the rest of the tooth susceptible to decay and erosion, they can also cause long-term damage to the gums.

Prof Anthony Eder, clini-
cal director at the London tooth whitening Centre, said there was a growing demand for white, healthy looking teeth, especially amongst young peo-

Dental experts have warned against home

whitening treatments, which have be-

come increasingly popular in recent years.

Experts have urged mem-

bers of the public to avoid home

whitening treatments, which are often recommended by people with no dental training on in-

ternet sites. Many sites suggest using home treatments contain-

ing ingredients such as hydrogen peroxide, ash and baking soda.

A call to action

**S**eema Sharma calls on **Dental Tribune read-
ers to support her as she walks 60 miles for char-

ity...from Baroda to Bharchal!

“At the end of this month I will be packing my walking shoes to walk 60 miles of the 241 mile fight Indian Friend-

ship Walk for charity, led by Jill Beckingham (wife of the British deputy high commis-
sioner to the Far East, Sir Peter Beckingham). Jill is tracing the steps of Mahatma Gandhi’s Salt March of 1930 to raise funds and awareness for Apnalaya, a particular charity amongst the three that you wish to sup-
port, please say so in your spon-

orship note...all remaining funds will be divided equal-

ly between Apnalaya, Door Step School and Toybank.”

“I hope you, your teams and your patients will get involved and ‘Light up a Smile’ on the faces of those who hope for a better future”

Some sites also recommend methods including brushing the teeth with salt, soap and bleach.

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tors and pop stars, however, the trend has caused people to re-

sort to extreme measures to try and whiten their teeth and many people, especially young girls, are turning to the internet to find ways to whiten their teeth.

Key breakthrough in HPV-

related mouth cancer

New research has shown that cancer patients with the Human Papilloma Virus (HPV) have a greater chance of survival from mouth cancer than those whose cancer is HPV negative.

The new study found that monitoring cancer tu-

mors for the HPV can help health experts predict a pa-

ient’s survival chances.

Conducted by Dr Angela Hong from the University of Syd-

ney, the research monitored 198 patients suffering from mouth cancer after they had surgery or radiotherapy.

Dr Angela Hong said: “Our study found that a group of patients with advanced oropharyngeal cancer, found that those with cancer caused by HPV had a significantly better chance of survival than cancer which was not caused by HPV. And this beneficial HPV effect was seen regardless of the type of treatment they had.

Following the patients for a period of up to 10 years, it was found that those with HPV positive can-

cer were four times less likely to die than those who were HPV negative.

Another discovery was that cancer was three times less likely to develop at the primary site in patients with HPV positive cancer.

Social inequalities pose mouth cancer risk

New research has revealed that an individual’s social back-

ground could heighten their risk of mouth cancer.

Speaking at the launch of Mouth Cancer Action Month 2010, at the House of Commons this week, clinical senior lectur-

er in dental public health at the University of Glasgow, Dr David Conway, highlighted that those with a “low social economic sta-
tus” were faced with significant-
tly increased risks of developing the disease.

Drawing on his recent, award winning research, ‘Socioecon-

omic Risk Factors Associated with Upper Aerodigestive Tract Can-
cer’, Dr Conway explained that socio-economic inequalities had proven to be an independent risk factor.

The study measured socio-

omic groups by education, occupation and income, and found that those with lower lev-

els of formal education, lower incomes and unemployment his-
tory were more at risk.

Dr Conway emphasised that when these figures were adjusted to consider smoking, alcohol and poor diet, all in-

creases were diminished except for education. This increase can be explained as low education can influence positions within society and social networks, which in turn can impact on ac-

cess to health care and determine decision making behaviours.

Addressing a room full of oral health professionals, MPs, members of the House of Lords and past mouth cancer patients, Dr Conway called for a change to be made and urged govern-

Dental experts warn against home whitening treatments, which have be-

come increasingly popular in recent years.

Experts have urged mem-

bers of the public to avoid home whitening treatments, which are often recommended by people with no dental training on in-

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“CMA system is very simple and straightforward to use, producing consistently good results. The files are strong and stable and I have not had one fracture yet.

In these days of single-use files, the CMA system provides good value for money without compromising the need for well-instrumented root canals.”

Dr Graeme Fisher BDS, Preston
Regarding Revalidation

Dentist Denis Toppin is on the Council of the GDC and is also Chairman of its Revalidation Working Group. Most of you will probably be familiar with the term revalidation by now, although it’s likely you hear most about it in relation to doctors and the General Medical Council. The General Medical Council has recently confirmed medical revalidation in the UK is expected to start from late 2012, after numerous delays. Although the GDC doesn’t plan to introduce revalidation for dentists until 2014, and at a later date still for DCPs, the GDC has just launched a 12 week consultation on the issue and is encouraging as many of its registrants as possible to have their say. The consultation can be found on the GDC website at www.gdc-uk.org.

For those of you who are less familiar with revalidation and what it will mean for dentists, I’d like to take this opportunity to explain a little bit more about it. Revalidation will provide, for the very first time, a way of checking that dentists carry on meeting the GDC’s standards after they have first joined its registers. The GDC’s Fitness to Practise proceedings are reactive rather than proactive; they assume that dental professionals meet its standards unless the regulator receives information which suggests otherwise. With patient protection in mind, this is no longer good enough. Our research has shown that patients believe and expect that dental professionals’ compliance with standards is already checked by the GDC regularly. Nevertheless, the GDC needs the ability to bring reality into line with patient expectations.

The structure
A standards and evidence framework will set out the standards dentists must meet under the framework, and will include assessment, management and leadership, communication and professionalism. The framework will also set out the evidence which will be acceptable to demonstrate compliance with each standard. Dentists will gather this evidence over five years, and revalidate at the end of each cycle. We are proposing a three-stage process at the end of each cycle:

Stage 1 - compliance check, which will apply to all dentists
Stage 2 - remediation phase, which will provide an opportunity to dentists who do not pass Stage 1 to remedy deficiencies
Stage 3 - in-depth assessment, which will apply to dentists who fail to demonstrate that they have complied at the end of the remediation phase.

The proposals aim to avoid over-regulation by making as much use of existing and developing quality systems within dentistry as possible. Dentists will, in many cases, already be required to show that they are meeting quality standards. For example through NHS practice inspections or performance appraisals. Our approach is designed so that dentists can meet all our requirements and those of other dental service regulators under one umbrella.

About the author
Dentist Denis Toppin, a returning Registrant member to the Council of the GDC, was born in Glasgow where he returned to study and work. He qualified as a dentist in 1977 from the University of Glasgow and has been working in general dental practice ever since. He developed an interest in dental education through his involvement in Dental Vocational Training as a Vocational Training Tutor, Adviser and Regional Adviser and through teaching undergraduate dental students clinical practice in restorative dentistry. He also teaches on numerous postgraduate courses in a Macmillan College for the Scottish Dental Practice Board for the maximum six year period. He currently holds a part-time post of Assistant Director of Postgraduate General Dental Practice Education with NHI Education for Scotland.

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