End of the line for tobacco displays

New legislation came into effect on 6 April to protect children from being the target of tobacco promotion and to help people quit smoking

From April all large shops and supermarkets in England had to cover up cigarette and tobacco displays. Most adult smokers started smoking as teenagers and we need to stop this trend.

Evidence shows that cigarette displays in shops can lure young people into starting to smoke. More than eight million people in England still smoke – it is one of the largest and most successful oral health campaigns. With the help of more organisations raising the importance of oral health, Chief Executive of the Foundation, Dr Nigel Carter, believes further advances can be made. Dr Carter said: “Statistics show not enough children give consideration to their oral health, and that’s where National Smile Month comes in.” Visit www.smilemonth.org for information.

Survey finds mid-life crisis

Middle-aged women are most likely to suffer from fear of the dentist, a new study found. Clinical observation of patients taking part in a multi-year clinical trial conducted at the Dental Phobia Clinic in Westmead, Sydney, has indicated that the level of dental anxiety is highest among women in their forties. According to the researchers, taking a demographic from 20 May to 20 June 2012, it is the UK’s largest and most successful oral health campaign. With the help of more organisations raising the importance of oral health, Chief Executive of the Foundation, Dr Nigel Carter, believes further advances can be made. Dr Carter said: “Statistics show not enough children give consideration to their oral health, and that’s where National Smile Month comes in.” Visit www.smilemonth.org for information.

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Children call for smoke-free homes

A new hard-hitting campaign, highlighting the shocking truth behind second-hand smoke recently hit our TV screens.

The New TV and radio adver- tises will show that smoking by a window or the back-door is not enough to protect children from second-hand smoke. Millions of children, 78 per cent of the children, are exposed to second-hand smoke. Most par- ents would be horrified to know that even a short car journey where an adult has been smoking would result in breakdown products of nicotine in their child’s urine.

This shows exactly why we should all make our homes and cars smoke free and that children need protection from exposure to second-hand smoke.

Smokers can order a new NHS Smokefree Kit by texting POISONS to 65818 or by visiting nhs.uk/smokefree for facts, tips and tools to help them on the way to a smoke free future.

Nominations open for Principal Executive Committee

The nominations process for the new BDA Principal Executive Committee (PEC) has opened. The new committee, which will replace the current Repre- sentative Body and Executive Board, will assume overall re- sponsibility for BDA policy and governance. PEC members will also be the legally respon- sible directors of the Associa- tion.

The Committee will consist of 15 members, 12 of whom will represent geographical constituencies and three who will be elected on a UK-wide basis. All members will be elected in spring 2012. Seats will then be subject to a revolving cycle of elections starting in December 2014, when a third will be subject to fresh elections.

Those interested in standing for election are invited to submit a completed nomination form and personal supporting statement by Friday 25 April 2012. Members will have the opportunity to hear from prospective candidates at a series of speed-dating events at the British Dental Conference and Ex- hibition which takes place in Manchester between 26-28 April, and will receive ballot papers, where required, at the end of April.

Encouraging applications, BDA Chief Executive Peter Ward said: “The BDA occu- dies a unique position in the dental profession. Members of the new Principal Executive Commit- tee will be working in the in- terests of their professional colleagues, taking on the gov- ernance and stewardship of the Association and overseer- ing the next stage of its de- velopment. They will inherit resources, reputation and re- search and will help shape the future of the BDA and the den- tal profession.

“I encourage all members who are passionate about the future of the organisation and UK dentistry to think seri- ously about standing for elec- tion to the PEC.”

Further information on the Principal Executive Com- mittee and the election time- table, is available at: http:// www.bda.org/pec Nomina- tion forms are also available via the above link.

Microsoft Office Word Document

Delegates at the forthcoming British Dental Con- ference and Exhibition can plan their visit to the exhibi- tion element of the event using an innovative new online bookings system that allows attendees to re- serve time with exhibitors.

For the first time ever, visi- tors can book time with exhibitors that they want to spend time with in advance of the event, using a simple online bookings system hosted on a BDA-managed British Dental Conference and Exhibition microsite. The system also allows delegates to plan the conference sessions that they intend to attend, thereby creating a personalised schedule for the event that can be downloaded to Outlook diaries.

The exhibition is expected to feature more than 140 exhibitors, including equipment suppliers, product manufacturers, service providers and trade associations. The meeting reservation facility has been introduced in response to feedback from exhibitors and visi- tors and aims to help busy delegates maximise the value of their visit by allowing them to schedule all of the key appointments they need.

Linda Stranks, Director of Marketing and Membership at the BDA, said: “Some delegates are happy to peruse the exhibition and find inspiration as they explore, but others visit the exhibition with a very specific aim – researching the purchase of a particular piece of equipment, for instance.

“This new tool will help de-legates to tailor their British Den- tal Conference and Exhibition experience to create a bespoke schedule that ensures they get the time they want with exhibitors when they want it, to fit around the conference sessions they are planning to attend.”

The 2012 British Dental Conference and Exhibition takes place at the Manchester Central Convention Complex from 26-28 April. For full details visit: www.bda.org/confer- ence.

Action group seeks DHA evidence

A group of dental hygienists have formed a campaign group in order to influence the future of dental access to patients.

Key DCPs are hoping to en- courage fellow DHTs to help influence the future of their profession.

The Direct Access Action Group is campaigning for di- rect access to patients for den- tal hygienists and plans to keep colleagues in the loop as to what this will mean for them, the profession as well as for patients.

The Office of Fair Trading (OFT) is currently re-ex- amining regulations and aims to make things easier for patients and those currently ac- cess dental care including ac- cess to dental hygienists.

Elaine Tilling, Sarah Murray, Christina Chatfield, Mar- garet Ross, Bal Chana, Amanda Gallie, Dave Bridges and Ann Gilbert have together formed the Direct Access Action Group in time for the release of the OFT’s report, due in May.

The group would like the help of all DHTs in collating evidence of their current per- ceptions of the Direct Access issue.

To take part, visit www.fa- cer.service.gov.uk to sign up or follow @DAActionGroup on Twitter and take a few minutes to fill out a brief survey that even a short car journey. Go to www.surveymonkey. com/s/HK8C56P or email the group at directactiongroup1@google.com.

Make an exhibition for yourself in Manchester
Metformin may lower risk for oral cancer

According to a new study, Metformin Prevents the Development of Oral Squamous Cell Carcinomas from Carcinogen-Induced Premalignant Lesions, published in Cancer Prevention Research, Metformin may protect against oral cancer.

Metformin is the most widely used treatment for patients with type 2 diabetes, and according to the study authors, scientists have noticed that "metformin reduces the growth of HNSSC (Head and neck squamous cell carcinoma) cells and diminishes their mTORC1 activity by both AMPK-dependent and -independent mechanisms."

According to a report, J Silvio Gutkind, PhD, chief of the Oral and Pharyngeal Cancer Branch of the National Institute of Dental and Craniofacial Research at the National Institutes of Health, and colleagues induced premalignant lesions in laboratory mice; they then studied the effect of metformin on progression of these lesions to oral cancers.

The scientists found that metformin reduced the size and number of carcinogen-induced oral tumoral lesions in mice and significantly reduced the number of carcinogen-induced premalignant lesions in laboratory mice; they then studied the effect of metformin on progression of these lesions to oral cancers.

Thoughts are now also turning to the upcoming events prominent in the dental calendar: the Dental Awards (April 20), BDA Conference and Exhibition in Manchester (April 26-28) and the Clinical Innovations Conference in London (May 18-19). I will be attending all these events... if you see me come over, say hi and let me know your thoughts on Dental Tribune!
Bacteria in the bloodstream can cause blood clots

Dental plaque may trigger blood clots

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New information to help improve patient outcomes

Dental Tribune United Kingdom Edition • April 16-22, 2012

News

New information to help improve patient outcomes

ew information that will help put the NHS on the right side of patients and improve results for patients has recently been published.

As part of the Government’s drive to improve results for patients, new detailed information on 20 condition indicators, which measure the care patients receive, has been published by the NHS Information Centre.

The figures provide a regional and local snapshot of how the NHS is performing against the Outcomes Framework, as well as general points about the current state of the health service. In total, there are 20 indicators, which include the following:

- Injuries caused during hospital stays
- Patients surviving heart surgery
- Patients surviving hip surgery
- Patients given antibiotics within appropriate time
- Patients surviving hip fractures
- Patients surviving strokes
- General practice patient experience
- General practitioner consultation times
- Number of patients and the time taken to see a general practitioner
- Patients surviving cancer
- Patients surviving stoke
- Patients surviving hip fractures
- Patients surviving cancer
- Patients surviving falls
- Patients surviving strokes
- Patients surviving heart surgery
- Patients surviving hip surgery
- Patients surviving coughing
- Patients surviving heart surgery
- Patients surviving hip surgery
- Patients surviving coughing
- Patients surviving heart surgery
- Patients surviving hip surgery

The information provides a baseline from which the NHS can measure and report on the performance of individual areas and across the country.

The government committed to focus on outcomes not targets in 2010 and announced that the NHS would be held increasingly to account for measurable results, including whether a patient’s treatment was successful, whether they included guidelines written by NHS staff, and whether they received quickly after treatment.

Health Secretary Andrew Lansley said: “The information published today is another step towards shifting the health service from one that treats people who matter – patients.

“Crucially, we aren’t telling doctors and nurses how to do their job – the approach adopted by previous Governments. We are now clear about what the NHS needs to achieve, and not telling the NHS how to do it. These results will shine a light on results achieved and where performance needs to be improved.”

The publication of the figures today marks the NHS can be held to account for all aspects of care that patients receive, and is part of a drive to make the health service more transparent. They provide a basis for driving improvements in the future through the Secretary of State’s Mandate to the NHS Commissioning Board, expected in the next few months and will allow the NHS to take action when patient outcomes are not as good as they should be.

NHS Medical Director Bruce Keogh said: “Patients rightly expect the NHS to provide care that is effective and safe. And one of the things that makes doctors and nurses love their profession experience is when everything joins up seamlessly as they move from GP surgery to hospital to their local care provider. So through the Outcomes Framework, and the information released today, the foundations are being laid to achieve just that.”

MDDUS dental road show coming to town

Dentists can learn how to stay out of trouble by signing up for one of nine dento-legal lectures being held throughout the UK in May and June this year.

UK-wide dental defence organisaion MDDUS is co-hosting a series of educational sessions that will provide top tips on how to avoid dento-legal pitfalls that could lead to patient complaints, claims of clinical negligence or referral to the GDC.

MDDUS has teamed up with dental equipment providers Wright Cottrell to host the lectures which kick off on Wednesday, May 25 in Newcastle with further dates in Manchester, Leeds, Liverpool, Inverness, Aberdeen, Glasgow and Edinburgh, before concluding in Dundee on Thursday, June 21.

The lecture will feature MDDUS Head of Dental Division and adviser Aubrey Craig, who has long experience helping MDDUS members deal with professional difficulties.

He says: “Being on the receiving end of a claim, complaint or referral to the GDC is an expensive, time-consuming and stressful experience.

“Every year at MDDUS, we assist members who find themselves in such situations and these lectures will draw upon our considerable experience in this area to provide delegates with practical advice on how to avoid professional difficulties.”

Wright and W&H Northern Territory Manager Carolyn Baxter will be hosting the Scottish ones.

In addition, the Scottish dates will also feature George McDonagh, Clinical Adviser for the NHS in Scotland, who will share his unrivalled knowledge of decon- tamination procedures that he has accrued from his 20 years’ experience in the industry.

Robert Donald, non-executive director of MDDUS and well-known Scottish dentist and magazine columnist, will welcome the CPD-accredited evening road show initiative.

He says: “Staying out of trouble with the GDC and decontamination compliance are hot topics for all UK dentists. The collaboration of MDDUS and W&H in providing practical advice and support in addressing these important issues is a very positive step indeed and I would encourage my colleagues to attend.”

To book your place at one of the lectures or for further information, contact Karen Walsh at kwalsh@mddus.com. Tickets cost £30 with a light buffet available from 6pm and the programming commencing at 6.30pm.

Dates and venues for lectures (all dates 2012):
• Wednesday, May 25: St James’ Park, Newcastle
• Wednesday, May 30: Mandec, Manchester Dental Hospital
• Thursday, June 7: Liverpool Crowne Plaza, Liverpool
• Thursday, June 12: Drumossie Hotel, Inverness
• Wednesday, June 15: The Marcliffe Hotel, Aberdeen
• Tuesday, June 19: MDDUS offices, Glasgow
• Wednesday, June 20: RCP of Edinburgh, Edinburgh
• Thursday, June 21: Wright Cottrell offices, Dundee

Wheelchair controlled by remote control in mouth

The Tongue Drive system, which is a wireless de-
dvice that enables people with high-level spinal cord inju-
ries to operate a computer and maneuver an electrically pow-
ereed wheelchair simply by moving their tongues, is getting less conspicuous and more capable.

The newest prototype of the system allows users to wear an inconspicuous dental retainer embedded with sensors to control the system. The device tracks the movement of a tiny magnet mounted on its four corners that detect movement of a tiny magnet attached to the tongue. It also includes a rechargeable lithium-ion battery and an induction coil to charge the battery. The circuitry fits in the dental retainer, which sits against the roof of the mouth and is covered with an insulating, water-resistant material and vacuum-molded into side standard dental acrylic.

In use, the output sig-
nals from the GDC are wireless-
ly transmitted to an iPod or iPhon- e. Software installed on the iPod interprets the user's tongue movements by determining the relative position of the magnet with respect to the array of sensors in real-time. This information is used to control the movements of a cursor on the computer screen or to substitute for the joystick function in a powered wheelchair.

Ghovanloo and his team have also created a universal interface for the intraoral Tongue Drive System that attaches directly to a standard electric wheelchair. The interface boasts multiple functions; it not only holds the intraoral system, but gives a simple switch controlled by sucking or blowing through a straw.

The researchers plan to be-
gin testing the usability of the in-
traoral Tongue Drive System by able-bodied individuals soon and then move onto clinical trials to test its usability by people with high-level spinal cord injuries.

In recent months, Ghovanloo and his team have recruited 11 individuals with high-level spinal cord injuries to test the headset version of the system at the Atlanta-based Shepherd Center and the Rehabilitation Institute of Chi-
icago. Trial participants received a clinical tongue piercing and tongue stud that contained a tiny magnet embedded in the upper half. They repeated two test ses-
sions per week during a six-week period that assessed their ability to use the Tongue Drive System to operate a computer and navigate an electric wheelchair through an obstacle course.

“During the trials, users have been able to learn to use the sys-
tem, move the computer cursor quicker and with more accuracy, and maneuver through the obsta-
cles more quickly and faster and with fewer collisions,” said Ghovanloo. “We expect even better results in the future when trial participants be-
gin to use the intraoral Tongue Drive System on a daily basis.”