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 displays to help young people to resist the temptation to start smoking. More than eight million people in England still smoke – it is one of the biggest preventable killers causing more than 80,000 deaths each year. Nearly two-thirds of current and ex-smokers say they started smoking before they were 18.

“Banning displays of cigarettes and tobacco will help young people resist the pressure to start smoking and help the thousands of adults in England who are currently trying to quit.” Jo Butcher, programme director of health and well-being at the National Children’s Bureau, said: “National Children’s Bureau welcomes the end of tobacco displays.

“Children and young people tell us that outside influences make it even more difficult for them to choose healthier lifestyles. A yet to be released National Children’s Bureau health survey has found that more than one in four young people felt they needed more information about the health effects of drugs, alcohol or tobacco.”

Cigarettes and all tobacco products will have to be out of sight except when staff are serving customers or carrying out other day-to-day tasks such as restocking. Those responsible in shops not complying with the law could be fined up to £5,000 or could face imprisonment. It’s essential that we create a culture that promotes and protects public health and tobacco legislation is a significant factor in making this happen.”

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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 adverts will show that smoking by a window or the backdoor is not enough to protect children from second-hand smoke. Millions of children in the UK are exposed to second-hand smoke that puts them at increased risk of lung disease, meningitis and cot death. It results in more than 300,000 GP visits, 9,500 hospital visits in the UK each year and costs the NHS more than a staggering £25.6 million every year.

The only way to completely protect people from second-hand smoke is to make homes and cars entirely smoke free. As the campaign launches, a new survey reveals that children don’t want smoke free lives. The survey found:

- 88 per cent of children wish their parents wouldn’t smoke in front of them at home
- 82 per cent of children wish their parents wouldn’t smoke in front of them in the car
- 78 per cent of the children wished their parents wouldn’t smoke in front of them at home
- 44 per cent of children said cigarette smoke made them feel ill
- 42 per cent of children said cigarette smoke made them cough

“Health Secretary Andrew Lansley said: ‘We all know smoking kills but not enough people realise the serious effect that second-hand smoke has on the health of others, particularly children.

“This campaign will raise awareness of this danger and encourage people to take action to protect others from 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 Representative Body and Executive Board, will assume overall responsibility for BDA policy and governance. PEC members will also be the legally responsible directors of the Association.

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 23 April 2012. Members will have the opportunity to hear from prospective candidates at a series of speed-dating style events at the British Dental Conference and Exhibition 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 occupies a unique position in UK dentistry. Members of the new Principal Executive Committee will be working in the interests of their professional colleagues, taking on the governance and stewardship of the Association and overseeing the next stage of its development. They will inherit resources, reputation and research and will help shape the future of the BDA and the dental profession.”

“I encourage all members who wish passionately about the future of the organisation and UK dentistry to think seriously about standing for election to the PEC.”

Further information on the Principal Executive Committee and the election timetable, is available at: http://www.bda.org/pec Nomination forms are also available via the above link.

**Make an exhibition for yourself in Manchester**

Delegates at the forthcoming British Dental Conference and Exhibition can plan their visit to the exhibition element of the event using an innovative new online bookings system that allows attendees to reserve time with exhibitors.

For the first time ever, visitors can book time with exhibitors that they wish 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 visitors 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 delegates to tailor their British Dental 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 British Dental Conference and Exhibition takes place at the Manchester Central Convention Complex from 26-28 April. For full details visit: www.bda.org/conference.

**Action group seeks DA 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 encourage fellow DH&Ts to help influence the future of their profession.

The Direct Access Action Group is campaigning for direct access to patients for dental 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-examining Direct Access to Dental Hygienists and NHS dentistry markets are working well for patients and this includes an investigation into how patients currently access dental care including access to dental hygienists.

Consultant Paediatrician at the Royal Surrey Hospital Dr Charles Godden said: “I see children every week with conditions which are made worse by second-hand smoke. Most parents would be horrified to know that 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.

To take part, visit www.fairtrading.gov.uk or follow @DAActionGroup on Twitter and take a few minutes to fill out a brief survey that even a very busy practitioner can do. Go to www.surveymonkey.com/s/HLBSC36P or email the group at directactiongroup1@gmail.com.
**Editorial comment**

Big congratulations to those who found themselves with a place in the top 50 most influential people in dentistry, as voted for by members of the profession.

James Goolnik made the top spot for the second year running, a big achievement and in recognition for the Heart Your Smile campaign which he founded last year; aiming to bring positivity back to the dental profession.

Congratulations also go to Dean of the Peninsula Dental School and Dental Tribune editorial board member Liz Kay, number four in the list. Other notable names familiar to DT readers include Mhari Coxon (5), Elaine Halliday (11), Nik Sisodia (25), Wyman Chan (55), Julian Webber (58) and Susie Sanderson (49).

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 three events — if you see me come over, say hi and let me know your thoughts on Dental Tribune.

**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 HNSCC (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 development of squamous cell carcinomas by about 70 per cent to 90 per cent.

**In surgery treatment for caries prevention**

- Clinically proven caries efficacy
  - 33% reduction in dmfs
  - 46% reduction in DMFT
- Quick and easy application
- Temporary light tint for visual control

**Applying fluoride varnish containing 22,600ppm F is a recommended intervention in 'Delivering Better Oral Health – An evidence-based toolkit for prevention'**

**Clinical Innovations Conference in London (May 18-19)** I will be attending all three events — if you see me come over, say hi and let me know your thoughts on Dental Tribune.

**Dental Tribune** United Kingdom Edition · April 16-22, 2012

**New lighter tint**

**Duraphat® Dental Suspension Fluoride Varnish**

**Colgate® Duraphat® 50 mg/ml Dental Suspension.** Active ingredients: 1ml of suspension contains 50mg Sodium Fluoride equivalent to 22.6mg of Fluoride (22,600ppm F).

**Dosage and administration:**
- **Recommended dosage for single application:** for milk teeth: up to 0.25ml (=5.65mg Fluoride), for mixed dentition: up to 0.40ml (=9.04 Fluoride), for permanent dentition: up to 0.75ml (=16.95 Fluoride).
- For caries prophylaxis the application is usually repeated every 6 months but more frequent applications (every 3 months) may be made for hypersensitivity, 2 or 3 applications should be made within a few days.

**Contraindications:**
- Hypersensitivity to colophony and/or any other constituents.
- Ulcerative gingivitis.
- Stomatitis.
- Bronchial asthma.

**Undesirable effects:**
- Oedematous swelling has been observed in subjects with tendency to allergic reactions.

**Contra-indications:**
- Hypersensitivity to colophony and/or any other constituents.
- Ulcerative gingivitis.
- Stomatitis.
- Bronchial asthma.

**Special warnings and special precautions for use:**
- If the whole dentition is being treated the application should not be carried out on an empty stomach. On the day of application other high fluoride preparations such as a fluoride gel should be avoided. Fluoride supplements should be suspended for several days after applying Duraphat.

**Interactions with other medicines:**
- The presence of alcohol in the Duraphat formula should be considered. Undesirable effects: Oedematous swelling has been observed in subjects with tendency to allergic reactions.

**Legal classification:** PDO1

**Product licence number:** PL 00049/0042

**Product licence holder:** Colgate-Palmolive (UK) Ltd, Guilford Business Park, Middleton Road, Guilford, Surrey GU2 8JZ

**Price:** £22.70 excl VAT (10ml tube)

**Date of revision of text:** July 2008

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1 Marinho et al. (2002), Cochrane Database Syst. Rev. no3.

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**Contact:**
**Lisa@dentaltribuneuk.com**
**Dental Tribune UK Ltd,**
19-21 Hatton Garden, London, EC1 8BA

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**Editorial comment**

*...*
Dental plaque may trigger blood clots

Bacteria in the bloodstream can cause blood clots

Research states that oral bacteria that enter the bloodstream can cause life threatening endocarditis and blood clots. According to research at St. Jude Children’s Research Hospital, bacteria in the bloodstream can cause blood clots when they travel through the heart valve with a metal or animal valve, or when they cause clots in the blood that can block the blood supply to the heart or brain.

The bacterium then use the clotting factor to form a clot. This can be treated with surgery or by strong antibiotics, however, because of growing antibiotic resistance this is becoming far more difficult to achieve.

"About 50 percent of people with infective endocarditis die and most will require surgery for replacement of the infected heart valve with a metal or animal valve," Dr. Petersen explained.

Dental Protection in the Dock – it’s a sell-out

50 dentists and lawyers assembled at the Mermaid Theatre Conference Centre in Puddle Dock, to attend the first ever Dento-legal Study Day organised by Dental Protection. The delegates either had an interest in working in this area of dentistry or were already doing so and wanted to hear from the UK's leading provider of indemnity, 70 per cent of UK dentists are already Dental Protection members.

In addition to cases of clinical negligence, the revelation that the GDC has allocated 1200 hearing days in multiple venues for 2012 confirmed that their interest was well founded. Members of the fifty-strong team of dento-legal advisors already supporting Dental Protection were on hand to share their experiences with delegates on a one-to-one basis.

The Dento-legal Study Day included presentations from experienced dentists and lawyers including Raj Rattan, who discussed the ethical dimension of dento-legal cases and how professional conduct can complicate the management of complaints and claims.

Kevin Lewis, Director of Dental Protection said: "With the unprecedented case load currently being experienced in all three DPI offices, it is reassuring see such a high level interest from dental colleagues and other who are interested in working in this challenging area of dentistry. Since its inception over a century ago Dental Protection has always taken pride in the quality of its service to members. The same is true today and events like help to ensure that the same service will be available in the future."

Speakers Hilary Finton and Melanie Rees take questions from the audience.

Aesthetic Awards
- Best Injectable Anti-Ageing Treatment
- Best Cosmetic Product
- Best Body Reshaping procedure including semi-invasive as well as take home devices
- Best Skin Tightening Treatment (take home or professional)
- Clinic Awards
- Best tooth whitening Product
- Best Dental Hygiene Product - Floss, Electric, Mouthwash
- Most Innovative Treatment or Service
- Best Customer Experience
- Best Clinic
- Best Clinic Team
- Best Non-Surgical Makeover (Facial Aesthetics, body reshaping or smile transformations - vitamin, meso and fillers)

Television Awards
- Best Documentary or Televi

Dental Protection members. The MyFaceMyBody Awards has been organised to celebrate and award those who have made a difference in the cosmetic sphere. Celebrating in style, The MyFaceMyBody Awards will be delivered in the form of a masquerade ball and held at The Landmark Hotel, London on the 3rd November 2012.

What’s more, the awards will also be rewarded for professional colleagues and other who are interested in working in this challenging area of dentistry. Since its inception over a century ago Dental Protection has always taken pride in the quality of its service to members. The same is true today and events like help to ensure that the same service will be available in the future.

"Our team has now identified the critical components of the S. gordonii molecule that mimics fibrinogen, so we are getting closer to being able to design new compounds to inhibit it. This would prevent the stimulation of_unwanted blood clots," said Dr Steve Kerrigan from the RCS in an online report.

The team are also looking more widely at other dental plaque bacteria that may have similar effects to S. gordonii. "We are also trying to determine how widespread this phenomenon is by studying other bacteria related to S. gordonii. What our work clearly shows is how important it is to keep your mouth healthy through regular brushing and flossing, to keep these bacteria in check," stressed Dr Petersen.

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New information to help improve patient outcomes

New information to help improve patient outcomes

New information that will help put the NHS on the 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 different health issues – measured against the Outcomes Framework 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, and the information released today, the foundations are being laid to achieve just that.™

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 organisation 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 is a difficult and 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 will also lead a session unravelling the mysteries of the national decon­ tamination guidelines. This will enlight­ en dentists to the realities of what is expected and arm them with the know-how to achieve a fully compliant practice.

W&H Northern Territory Manager Clair­ ine Wilson will present the sessions in England, with Scottish Territory Manager Raymond Baxter hosting the Scottish ones.

In addition, the Scottish dates will also feature George McDon­ agh, 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’ experi­ ence in the industry.

Robert Donald, non-executive director of MDDUS and well-known Scottish dentist and magazine columnist, welcomed 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 in­ formation, contact Karen Walsh at kwalsh@mddus.com. Tickets costs £30 with a light buffet avail­ able from 6pm and the program­ ming commencing at 6.30pm.

Dates and venues for lectures (all dates 2012):

• Wednesday, May 25: St James’ Park, Newcastle
• Wednesday, May 50: Mander, Manchester Dental Hospital
• Thursday, May 51: Witneywood Hall, Leeds
• Thursday, June 7: Liverpool Crowne Plaza, Liverpool
• Tuesday, June 12: Drumossie Hotel, Inverness
• Wednesday, June 15: The Mar­ ccliffe Hotel, Aberdeen
• Tuesday, June 19: MDDUS of­ fices, Glasgow
• Wednesday, June 20: RCP of Edin­ burgh, Edinburgh
• Thursday, June 21: Wright Cot­ trell offices, Dundee

Wheelchair controlled by remote control in mouth

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

The newest prototype of the intraoral Tongue Drive System by Ghovanloo and his team have recruited 11 researchers plan to be­ gin to use the intraoral Tongue Drive System on a daily basis.

Individuals with high-level spinal cord injuries to test the headset system version of the system at the Atl­ anta-based Shepherd Center and the Rehabilitation Institute of Chi­ cago. Trial participants received a clinical tongue piercing and tongue stud that contained a tiny magnet embedded in the upper half. They repeated two test ses­sions 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 obsta­cles 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.”