Public ‘need more education’ on dental products

The British Dental Health Foundation survey reveals some worrying statistics about the public’s dental product education

A study undertaken by the British Dental Health Foundation (BDHF) has revealed that although dental products may be commodities that find their way into everybody’s shopping trolley, only a quarter (26 per cent) of people understand what ingredients they are made from and their purpose.

The findings, which have been published by the British Dental Health Foundation as part of this month’s National Smile Month campaign, worryingly revealed that 35 per cent of people failed to understand the ingredients that were contained in their dental products and a further 44 per cent only partly understood what was contained in them.

Participants were also asked if they felt it was important that the manufacturers’ product claims had been independently tested to check they are clinically proven and not exaggerated; the results indicated that half the people question felt that independent testing was important and less than a quarter of the people felt that such testing was ‘extremely important’.

Out of the remaining participants, 20 per cent were indifferent to independent testing, whilst the remaining felt such means were unimportant.

The survey also revealed that approaching three quarters (72 per cent) of people did not always believe the product claims made on dental products.

The Foundation believes the issues are connected and has announced plans to publish a glossary of common ingredients and their purpose to help educate and inform consumers.

Dr Nigel Carter, Chief Executive of the British Dental Health Foundation, said: “The Foundation has a long track record of helping to educate the public on all aspects of oral health issues. For nearly 20 years, we have been using our charitable work in this area.

To address this knowledge gap we are publishing a glossary of common ingredients and their purpose to help educate and inform consumers.”

“Providing consumers with more information about ingredients is a natural extension of our charitable work in this area. When you glance down the ingredients list of a typical toothpaste or mouthwash it is easy to see why people may have some difficulties.

Even common ingredients like water may sometimes be described in terms that not everyone will understand such as ‘aqua’.

“We hope our new glossary of common ingredients will help more people to make an informed choice about which products to buy and how it can help their oral health. Consumers can also find a list of approved products on our website at www.dentalhealth.org,” said Dr Carter.

www.dental-tribune.co.uk
Editorial comment

My stars – June already! If anyone knows where this year has gone can somebody please tell me!

The issue with tooth whitening seems to be rumbling on, with the BDA reportedly now having written to the Department for Business, Innovation and Skills, the body responsible for trading standards. The letter calls for talks to address the inconsistencies in the current situation and the way in which differing trading standards offices are enforcing the rules governing tooth bleaching products. Dental Tribune’s Laura Hatton has written an interesting article on the latest situation in this issue – go to pages nine and ten for more!

Also the Dispatches programme has roused much interest in dental circles, even if it does seem to only be in dental circles! DT has taken a retrospective look at the programme – pages 11-12 is the place to look.

Finally, let me know what you think on any issues relating to dentistry (or rugby for that matter – I love a good sports convo!) get in touch and we may contact you for an opinion piece! Email me lisa@dentaltribuneuk.com, I’d love to hear from you.

GDC announce Deputy Chair

The General Dental Council (GDC) has announced that Derek Prentice has been elected as Deputy Chair of the GDC.

Derek, who has been an appointed lay member of Council since 1999, is currently the managing director of a consultancy company and previously held a number of executive appointments, including assistant director with the Consumers’ Association and president of the Bureau of European Consumer Unions.

Derek has also held a number of non-executive positions within NHS bodies and is currently a trustee of The British Home – which is an independent charity that provides specialised nursing and social care for people with long term medical conditions and severe disabilities. He will hold the post of Deputy Chair of the GDC until a permanent Chair is elected by the GDC in September this year.

Derek said: “I am pleased to take up this position and I look forward to working with my fellow Council members and the Executive as we tackle the challenges facing the General Dental Council in the months ahead.”

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New Chief Dental Officer for Wales

The Chief Medical Officer for Wales, Dr Tony Jewell, has announced that David Thomas has been appointed as Wales' new Chief Dental Officer.

Mr Thomas qualified as a dentist in Cardiff in 1976 and was appointed as Deputy Chief Dental Officer to the Welsh Government in 2010. Later in 2010 he was named Acting Chief Dental Officer (CDO) following the retirement of the previous CDO, Dr Paul Langmaid.

Thomas has taken up the role with immediate effect and is responsible for providing high quality and professional advice to Welsh Government Ministers.

Ancient teeth raise questions

D T USA: Eight small teeth found in an Israeli cave raise big questions about the earliest existence of humans and where we may have originated.

Excavated at Qesem cave, a prehistoric site near Rosh Haain in central Israel, that was uncovered in 2000, the teeth are similar in size and shape to those of modern man, Homo sapiens, which have been found at other sites is Israel, such as Oafzeh and Skhul – but they're a lot older than any previously discovered remains.

“The Qesem teeth come from a time period between 200,000 and 400,000 years ago when human remains from the Middle East are very scarce,” Quam says. “We have numerous remains of Neanderthals and Homo sapiens from more recent times, that is around 60,000 to 150,000 years ago, but fossils from earlier time periods are rare. So these teeth are providing us with some new information about who the earlier occupants of this region were as well as their potential evolutionary relationships with the later fossils from this same region.”

The teeth also present new evidence as to where modern man might have originated. If the remains from Qesem can be linked directly to the Homo sapiens species, it could mean that modern man either originated in what is now Israel or may have migrated from Africa far earlier than is now thought.

In a press release issued by the Welsh Assembly Government, Dr Jewell said: “I am pleased to announce the appointment of David Thomas as our new Chief Dental Officer for Wales.

“David brings to the role a background in community dentistry, dental public health as well as a record in academia, in both a management and research role. He has published widely in academic dental journals and has been involved in the management of Dental Postgraduate Education.

“I would like to thank David for his work as acting Chief Dental Officer since the retirement of Paul Langmaid, and look forward to working with him in his new role.”

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*Instant relief is achieved with direct application of toothpaste massaged on sensitive tooth for 1 minute.


Visit www.colgateprofessional.co.uk to learn more about how instant relief from dentine hypersensitivity can benefit your patients.
Alcohol-related hospital admissions top one million

The number of admissions to hospital in England related to alcohol has topped one million, according to The NHS Information Centre’s annual report, Statistics on Alcohol: England 2011.

Statistics show there were 1,057,000 such admissions in 2009/10, which is up 12 per cent on the 2008/09 figure (945,500) and more than twice as many as in 2002/03 (510,800).

Of these admissions, nearly two thirds (65 per cent) were for men. Among all adults there were more admissions in the older age groups than in the younger age groups.

New prescriptions data shows that alcohol dependence cost the NHS £2.41 million in prescription items in 2010. This is up 1.4 per cent on the 2009 figure (£2.58 million) and up 40 per cent since 2005 (£1.72 million).

There were 160,181 prescriptions issued for alcohol dependency per 100,000 of the population — regionally, the figures for prescription items per 100,000 of the population were highest in the North West (515 items) and North East (410 items) and lowest in London (150 items).

The data on alcohol related hospital admissions and new data on prescriptions is published in the report, along with previously published information from a range of sources about drinking behaviours and health outcomes in England.

The NHS Information Centre’s annual report shows the number of people admitted to hospital each year for alcohol related problems has topped one million for the first time.

The report also highlights the increasing cost of alcohol dependency to the NHS as the number of prescription items dispensed continues to rise.

“This report provides health professionals and policy makers with a useful picture of the health issues relating to alcohol use and misuse. It also highlights the importance of policy makers and health professionals in recognising and tackling alcohol misuse which in turn could lead to savings for the NHS.”

Help make dental history

A project to build a comprehensive living history of dentistry, the John McLean Archive, is seeking participants from across the UK to help make dental history.

Participants are required to participate in the project’s next witness seminar in October; and to take part in an ongoing series of oral history interviews across the UK.

The second witness seminar for the project, which will take place at the British Dental Association’s (BDA’s) London headquarters on 26 October 2011, will focus on changes in dentistry since 1948. Discussion is expected to concentrate on topics including the introduction of the NHS, payment and contracts, developments in equipment and evolution of private practice.

Participants in the project’s first witness seminar, which took place in March and looked at the development of the regulation of dentistry, included past Presidents of the BDA and General Dental Council, three former deans of dental schools and a former dean of the Dental Faculty of the Royal College of Surgeons of Edinburgh.

Issues to be discussed at the second seminar include the relationship between the shape of teeth and self-esteem and bullying; bullying at school; and referral for orthodontic treatment.

Volunteers are also being sought to carry out oral history interviews with dentists and dental care professionals across the UK. The transcripts of these interviews, which will focus on different aspects of the development of dentistry, will also be published as part of the project.

Volunteers must have a connection to dentistry, good listening skills and an interest in dental history. Volunteers selected to take part will receive training in oral history and the use of the recording equipment that will be used in the interviews.

Individuals interested in participating in either strand of activity contact Sophie Riches, the John McLean Archive project co-ordinator at the BDA Museum. Telephone 020 7585 4549, email sophie.riches@bda.org or visit the BDA Museum stand at the 2011 British Dental Conference and Exhibition.

Could bullying be linked to dental appearance?

According to a report published in the latest issue of the British Journal of Orthodontic Practice, in eight adolescents with prominent or irregular shaped teeth have experienced bullying, with a negative impact on their self-esteem and quality of their oral health.

The authors, hospital-based orthodontic specialists, found that the children, aged between 10 and 14 years, were at an increased risk of being teased or bullied by their peers if they had certain dental features: these included maxillary overcrowding; a cleft lip, with or without a cleft palate; an overjet and a deep overbite (ie prominent teeth).

The specialists also expressed concern that psycho-sociological factors are not considered when assessing a child’s need for orthodontic treatment; although they acknowledged that the relationship between the shape of teeth, self-esteem and bullying is a complex one.

“Currently the severity and need for orthodontic treatment within the UK is judged on occlusal [bite] and aesthetic impairment without consideration of psychosocial factors,” warn the authors of the British Dental Journal report.

Commenting on the report’s findings, the British Dental Association’s Scientific Adviser, Prof Damien Walmsley, said: “As studies show that having well-aligned teeth can influence our ability to make friends and progress in our careers, it’s not surprising that young children pick up on society’s ideal of what is perceived to be attractive early on.

“Because prominent or irregular shaped teeth can affect a child’s self-esteem, or make them the subject of teasing or bullying at school, it’s important that these factors are taken into account when referrals for orthodontic treatment are considered.”

Bullying in schoolchildren - its relationship to dental appearance and psychosocial implications: an update for general dental practitioners, by J Seehra, JT Newton, and AT Diffiae, was published in the British Dental Journal, volume 210, No 9, May 14, 2011.
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Wesleyan Medical Sickness’ Junior Advisory Board meets in Birmingham

S ome of the brightest young medical students and dentistry have gathered in Birmingham to discuss the impacts of changes to the National Health Service and how Wesleyan Medical Sickness can aid young doctors and dentists.

Wesleyan Medical Sickness’ Junior Advisory Board is made up of a select group of doctors, medical and dental students from across the UK. The group, the first of its kind in the financial services sector, provides insight into issues affecting young medical and dental professionals, ensuring Wesleyan continues to serve their needs throughout their career.

Sally Lovell, Student Liaison Manager at Wesleyan, said: “Understanding our customers is an important part of what Wesleyan Medical Sickness does. The Junior Advisory Board provides a vital insight into the needs of young medical and dental professionals, meaning we can continuously improve our products and services.”

The Junior Advisory Board complements Wesleyan’s main Medical Sickness Advisory Board, which is made up of eminent members of the medical and dental profession, including Professor Parveen Kumar, past president of the British Medical Association and current president of the Royal Society of Medicine.

Dr Ben Attwood, president of the Junior Advisory Board and a registrar junior doctor working at Oxford Deeney, added: “I’ve been a policy holder with Wesleyan Medical Sickness since I was a medical student. I think there are a variety of pressures facing junior doctors and medical students these days and the members of the Junior Advisory Board can offer a unique insight into their wants and needs.

“There has been a huge increase in medical student debt by the time people qualify, as well as pressure in the early years trying to find a job. Those jobs are no longer for life and there’s absolutely no guarantee you will be able to follow the specialty you’d like to do or pursue it in the place you’d like to work. This can be really challenging for young graduates, which is why they need support from organisations that have an understanding of what they are going through.

This is where we on Wesleyan’s advisory boards can help.”

The meeting was held at Wesleyan’s head office in central Birmingham. The Junior Advisory Board meets in Birmingham to discuss the impact the NHS and how Wesleyan can aid the future.

With B2A Founder Dr Ian Wilson returning to the UK, the dental charity will be taking leaps and bounds forward over the coming months and years and calls on the profession for their ongoing support to help in their quest to free the world from dental pain.

“B2A is the answer to that quest. More and more young doctors and dentists are being overwhelmed by the support shown by the profession and look forward to the next phase of B2A.”

Mark Topley said: “The work to change our logo and adjust our messaging represents us entering a phase when we will honour and continue all that has been achieved at Bukumbi, whilst actively pursuing expansion of the DVP and emergency dental training, which has become the larger part of what we do. While our targets are ambitious, we have all been overwhelmed by the support shown by the profession and look forward to the next phase of B2A.”

Showcasing a new logo and a stronger message that stretches throughout the world, B2A demonstrates their commitment to the future. With B2A Founder Dr Ian Wilson returning to the UK, the dental charity will be taking leaps and bounds forward over the coming months and years and calls on the profession for their ongoing support to help in their quest to free the world from dental pain.

To find out how you can support B2A further or for more details on their Dental Volunteer Programme contact Ruth Bowyer, Visits Administrator, on 07748 645006 or email her at Ruth@bridge2aid.org. Alternatively visit www.bridge2aid.org to download an application form.