Pay down, hours up

New figures make for bad reading for dental professionals...

New figures show that the average pay for self-employed dentists who hold a primary care contract fell by £10,000 to £117,200 in 2010/11.

The decrease is detailed in one of two new reports published by the Health and Social Care Information Centre (HSCIC). The other report, on dentists’ working hours to 2011/12, suggests their average weekly hours have gradually increased.

Dental Earnings and Expenses, England and Wales, 2010/11 reported that in 2010/11 taxable income (gross earnings minus average expenses) from NHS and private dentistry was:

- £117,200 for self-employed primary care dentists who held a contract with their primary care trust (England) or local health board (Wales) – known as providing-performer dentists (who make up about 28 per cent of the primary care dental workforce). This is an 8.5 per cent decrease from £128,000 in 2009/10
- £62,900 for self-employed primary care dentists who work in a practice but do not hold a contract – known as performer only dentists and who make up the majority (about 72 per cent) of the primary care dental workforce. This is a 4.2 per cent decrease from £65,600 in 2009/10

The report also showed that when both groups were considered together:
- 59.8 per cent earned a taxable income of less than £75,000 in 2010/11 compared to 55.8 per cent in 2009/10
- 1.1 per cent (240 dentists) earned a taxable income of at least £50,000 in 2010/11, compared to 510 (1.5 per cent) in 2009/10

Dental Working Hours, England and Wales, 2011/12 reported that on average their weekly working hours increased from 39.6 to 41.9 in 2011-12

The British Dental Health Foundation has welcomed the world-wide support for the Australian tobacco industry against the Oz tobacco decision by the Australian High Court to reject the decision by the Australian Health Department to increase taxes on tobacco products. This will restrict tobacco sales in Australia by 1 December 2012, means that all tobacco products have to be sold in olive green packets.

The DoH has released statistics showing the volume of people who took part in surveys of the 34,000 people who took part in the surveys. 47 per cent of people rated dentist highly, followed by doctors, who received 50 per cent of the votes and nurses, who took 27 per cent of the vote. According to the report, gym staff are among the worst to deliver customer service, while 40 per cent of people think council staff have a bad attitude. Police, hospital workers and shop assistants were also rated badly, as were post office staff. The poll concluded that people are more than twice as likely to receive good customer service from dentists as they are from bar staff; so it’s good news for dentists!

Dental Earnings and Expenses, England and Wales, 2010/11 presents earnings and expenses results by Strategic Health Authority in England, age and gender. It is at www.ic.nhs.uk/pubs/dentalearn-exp1011

Dental Working Hours, England and Wales, 2011/12 can be found at www.ic.nhs.uk/pubs/dentalworking-hours1012

www.dental-tribune.co.uk
Dentist Paul Kelly

The number of female dentists working for the NHS has increased, according to a report from the Health and Social Care Information Centre (HSCIC). The report shows that the percentage of female dentists in the population has been rising each year since the 24 months to June 2012, with a 2.0 million increase on the 24 months to March 2006/07. The report, NHSDental Statistics for England: 2011/12 brings together information on different aspects of NHS dentistry in England, from the number of dentists working for the NHS and the amount of activity they perform, to the number of patients seen by an NHS dentist.

Key facts include:
- 7.8 million child patients, or 70.7 per cent of children, were seen by an NHS dentist in the 24 months to June 2012. 2011, when 70.4 per cent of children saw a dentist but the same number and percentage of children as in the 24 months to March 2006.
- The number of courses of treatment performed on the NHS increased by 126,080 (0.5 per cent) in a year to reach 30.6 million in 2011/12. This number has been increasing each year since the courses of treatment measure was first introduced in 2006/07.
- ISHIC chief executive Tim Straughan said: “Today’s figures show that more females are working for the NHS as high street dentists, with the under 55’s age group in particular made up of more women than men.

“Today’s figures come hot on the heels of two more HSCIC reports that show dentists’ working hours have gradually increased. Primary care dentists have also seen a drop in their taxable income. Together, these dentistry reports offer a broad picture of what is happening within the dental profession and its patients.”

For anyone who wishes to download from 1st September at www.colgateprofessional.co.uk.

September is Colgate Oral Health Month

This September, The British Dental Association and Colgate are partnering to raise awareness of oral health as part of overall health. Colgate Oral Health Month, now in its 10th year, aims to inform and educate the general public on the importance of good oral health, and to encourage communication between dental professionals and patients. The theme for the 2012 campaign is “Oral Health as Part of Overall Health” with the following messages:
- Brush your teeth twice a day with fluoride toothpaste.
- Avoid sugary snacks and drinks between meals.
- Visit the dentist regularly.

To help raise awareness and engage with the entire population, Colgate is running a national radio advertising campaign, focusing on the three key messages above. Additionally Colgate is hosting a Q&A event on their Facebook page during the month of September inviting the general public to have their oral care questions answered by a dentist.

Dental professional participation is key to the success of this campaign, Colgate will provide all registered practices with Colgate Oral Health Month practice packs containing educational materials to help your team create a practice display. Colgate Oral Health Month is an opportunity to reinforce the benefits of improving oral health as part of a national campaign, and your entire dental team can play a key role, as part of your on-going delivery of care.

A national Colgate Oral Health Month road show will provide oral health information to the general public throughout the month of September. Venues include Croydon, Cardiff, Kingston, Reading, Bath, Islington, Birmingham, Liverpool, Manchester, Sheffield, Leeds, Newcastle and Glasgow. Dental hygienists and therapists will provide oral care advice and raise awareness of oral health as part of overall health. If you’re interested in attending one of the road shows, full details of the venues can be found at www.colgateprofessional.co.uk.

Colgate will provide a verifiable CPD Programme for all dental professionals: Delivering Better Oral Health – Promoting Prevention in Adults. This will be available to
Editorial comment

This week sees the start of Colgate Oral Health Month (COHM) - a dental public health campaign now in its tenth year.

Aiming to inform and educate the general public on the importance of good oral health, and to encourage communication between dental professionals and patients, COHM is a partnership between the BDA and Colgate with activities such as roadshows and a social media campaign to get the message across to the public that oral health is a fundamental part of overall health. Get involved with the campaign - contact the Colgate Oral Health Month registration line on 0161 665 5881 for a registration pack and more information about the campaign’s events.

As I write, the Paralympics are now in full swing so please join me in wishing all competitors (but especially Team GB) the best of luck!

BDA welcomes Monitor licensing exemption proposal

The British Dental Association (BDA) has welcomed a proposal that providers of primary dental services in England will not be subject to licensing by Monitor. The proposal, which is outlined in a Department of Health consultation published today (15 August 2012), follows extensive lobbying by the BDA.

The BDA has made the case against the need for Monitor to license dentistry since the possibility was raised by the publication of the Health and Social Care Bill in 2010. BDA campaigning has stressed to politicians and the Department of Health the extensive regulatory regime to which primary care dentistry is already subject, and has seen BDA officers regularly pressing for confirmation that Monitor’s regime would not be applied to the sector.

Dr John Milne, Chair of the BDA’s General Dental Practice Committee, said: “Dentistry is already subject to extensive regulation. Adding another, unnecessary layer to the many that already sit across our practices would serve only to tie dentistry up in even more red tape. That’s why the BDA has lobbied hard against the possibility of Monitor licensing dental practice.

“We are pleased to see that our campaigning appears to have borne fruit and welcome today’s proposal that primary care dentistry will not be subject to Monitor’s regime. This is a sensible recommendation and good news for dental practice.”

The consultation document, Protecting and promoting patients’ interests – licensing providers of NHS services, considers who will be licensed by Monitor, how licensing will operate and the financial penalties that Monitor will be able to impose for breaches of its licensing conditions. The BDA will be reinforcing its view that what has been recommended is appropriate in a formal response to the consultation.

Oral Health as Part of Overall Health

This year, Colgate and the British Dental Association are partnering to raise awareness of oral health as part of overall health. As part of your on-going delivery of care, the entire dental team can get involved to reinforce the benefits of improving oral health.

Visit www.colgateprofessional.co.uk to download the 2012 verifiable CPD programme ‘Delivering Prevention in Adults’.

If your practice has not previously been involved in Colgate Oral Health Month, please call 0161 665 5881 to register.
Researchers identify markers of oral cancer

A group of molecular markers that can help clinicians determine which patients with low-grade oral premalignant lesions are at high risk for progression to oral cancer, according to data from the Oral Cancer Prediction Longitudinal Study published in Cancer Prevention Research, a journal of the American Association for Cancer Research.

“The results of our study should reassure clinicians that not everyone with a low-grade oral premalignant lesion will progress to cancer,” said Marian Rosin, Ph.D., director of the Oral Cancer Prevention Program at the BC Cancer Agency in Vancouver, British Columbia, Canada. “However, they should also begin to give clinicians a better idea of which patients need closer follow-up.”

Oral cancers are a global public health problem with close to 300,000 new cases identified worldwide each year. Many of these cancers are preceded by premalignant lesions. Severe lesions are associated with a high progression risk, whereas mild lesions should be treated definitively. However, the challenge within the field has been to distinguish which low-grade lesions are the most likely to progress to cancer.

In 2000, Rosin and colleagues used samples of oral premalignant lesions where progression to cancer was known to have subsequently occurred in order to develop a method for grouping patients into low-risk or high-risk categories based on differences in their DNA. In their current population-based study, they confirmed that this approach was able to correctly categorize patients as less or more likely to progress to cancer.

They analysed samples from 296 patients with mild or moderate oral dysplasia identified and followed over years by the BC Oral Biopsy Service, which receives biopsies from dentists and ENT surgeons across the province. Patients classified as high-risk had an almost 25-fold increased risk for progression.

Next, two additional DNA molecular risk markers called loss of heterozygosity were added to the analysis in an attempt to better differentiate patients’ risks. They used the disease samples from the prospective study, and categorised patients into low-, intermediate- and high-risk groups.

“Compared with the low-risk group, intermediate-risk patients had an 11-fold increased risk for progression and the high-risk group had a 52-fold increase in risk for progression,” Rosin said.

Of patients categorised as low-risk, only 5.1 percent had disease that progressed to cancer within five years. In contrast, intermediate-risk patients had a 16.5 percent five-year progression rate and high-risk patients had a 65.1 percent five-year progression rate.

“That means that out of every three high-risk cases are progressing,” Rosin said. “Identifying lesions that are more likely to progress may give clinicians a chance to intervene in high-risk cases, and may help to prevent unnecessary treatment in low-risk cases.”
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BDA celebrates individual contributions to dentistry

Fourteen individuals who have made outstanding contributions to dentistry have been honoured by the British Dental Association (BDA) in the organisation’s 2012 Honours and Awards it has been announced this week.

BDA Fellowship, which is awarded in recognition of outstanding and distinguished service to the dental profession, has been conferred on three individuals: Dr Mike Arthur, a general dental practitioner in Lanarkshire and former Chair of the BDA’s Scottish Council; Dr Lester Ellman, a general dental practitioner and former Chair of the BDA’s General Dental Practice Committee (GDPC); and Dr Raj Joshi, a consultant in restorative dentistry who has represented hospital dentists at a national level for many years and served as both Chairman and President of the South Yorkshire Branch.

BDA Life Membership was conferred on three individuals: Dr John Mooney, the current Chair and former President of the BDA’s East Lancashire Cheshire Branch who has served as a Vice Chair of GDPC and member of the BDA’s Executive Board; Mr Jackie Morrison who has served both the BDA’s Community Dental Services Group and its West of Scotland Branch in roles including President; and former Consultant in Dental Public Health Dr Richard Ward, a former Chair of the BDA’s Central Committee (now Salaried Dentists Committee).

Three individuals’ names will be entered on the BDA’s Roll of Distinction: British Dental Trade Association Executive Director Tony Reed, Emeritus Professor Philip Sutcliffe and BDA Director Linda Wallace.

Mr David Croser, Communications Manager for Merck Serono, has been awarded the BDA’s Certificate of Merit for Services to the Profession.

BDA President Dr Frank Holloway said: “The BDA is extremely proud to be honouring these fourteen individuals, whose outstanding commitment and professionalism have illuminated dentistry. Each has served the dental family and the patients it treats with dedication and professionalism. We can be proud that it counts amongst its ranks so many individuals of such calibre.”

A ceremony to present the winners with their awards will be held in London in November.

MyFaceMyBody Awards - the shortlist is announced

On Saturday 3rd November 2012 dental, aesthetic and beauty professionals will be attending the party of the year at the MyFaceMyBody awards. The theme is a masquerade ball, and with entertainment from the West End, a drinks reception and a three-course-meal, the evening promises to be a great night out.

The aesthetic and dental business is one of the most forward-looking industries in the world. It is constantly pushing the boundaries of what is possible to achieve and matches technological advances with human endeavour to create stunning solutions which change people’s lives for the better.

To recognise this, The MyFaceMyBody Awards, which is the first aesthetic and dental consumer awards, has been organised to celebrate and award those who have made a difference in the cosmetic sphere.

The prestigious awards, which are sponsored by handi…MEDIA and will be televised and consumers will be involved in the voting process.

The awards are promising to be a fantastic chance to promote company products and services and with special sponsorship packages and the knowledge that MyFaceMyBody will reach millions of consumers during the run up to the awards through various media channels.

What’s more, the awards will be supporting Bridge2Aid, a charity set up to help bring dental pain relief to Africa, an area where people have no access to pain relief, leaving millions in pain. The charity helps to train local doctors in basic extraction techniques. Focusing on sustainability, and with the help of dentists and nurses from the UK, they train more than 48 health workers each year with plans for expansion. Because of this work, an estimated 1.7 million people now live within reach of someone who can help them when they have dental pain.

Along with a whole host of entries, from body reshaping treatments to non-surgical procedures, best clinics and community teams, those shortlisted from the dental world are:

Best Dental Hygiene
Sonicare Airflow - Philips
Procter & Gamble - Oral-B
Ivoclar

Best Clinic Dental
Beacon Dental Care
Savenake Forest dental

Best Retail Innovation
Colgate

Most Innovative Dental Practice
Prestige Dental - bruising
TePe Strip
Clearstep

In the aesthetic and beauty world the shortlisted entries are:

Most Innovative Aesthetic Clinic
Pelican Plastic Surgery

Best Hair & Beauty
Pearl Drops tea and coffee & hair
Enlighten

Best Dental Charity
Arm & Hammer Advanced Whitening

Best Best Tooth Whitening
Arm & Hammer Advanced Whitening

Win a trip for two to GNYDM

To mark Colgate Oral Health Month, Colgate is offering the chance to win a fantastic week-long trip for two to New York to take in the Greater New York Dental Meeting, which runs from 24th to 27th November 2012.

The Greater New York Dental Meeting is one of the largest dental congresses in the world, attracting more than 50,000 delegates from 152 countries. Featuring some of the most highly regarded authorities on dentistry, the event at the Jacob K. Javits Convention Center in Manhattan, will be an unrivalled opportunity to expand your knowledge by exploring the latest industry innovations and practices. And after the congress, there will be plenty of time to hit the shops, take in a show on Broadway, or just sample the very best that the Big Apple has to offer.

To enter visit http://www. colgateprofessional.co.uk before midnight on 30th September. Terms and conditions apply. See website for details.
Be on your guard against oral health problems!

A fter Team GB Hockey star Kate Walsh suffered a serious facial injury during the Olympics, an oral health charity believes it serves as a timely reminder for those requiring mouthguards to get fitted up.

Mouthguards are an essential piece of kit when it comes to playing sports that involve physical contact. The British Dental Health Foundation is advising parents whose children play contact sports to get their child fitted with a mouthguard to help protect against unwanted accidents.

It is estimated 40 per cent of all mouth injuries can be relat-ed to sports. Minor dental injuries can include a chip or crack in the tooth. Athletes can also lose teeth and suffer damage as the result of biting the tongue or the cheek. Biting the inside of the mouth can also lead to cuts that may require stitches. Fractures of the upper and lower jaw, cheekbones, eye sockets or any combination can have more serious consequences.

Karen Coates, Dental Helpline Advisor at the Foundation, said: “While mouthguards may not protect against concussion or have any impact on its severity, they can reduce further oral health complications.

“If your child plays football, rugby, cricket, hockey or rounders, or any contact sport then they will need a mouthguard.

“Although you cannot get mouthguards on the NHS, the Foundation recommends you talk to your child’s dentist. A mouthguard needs to fit the mouth exactly and protects teeth and gums properly.

“Each mouthguard is fitted individually so you should constantly review them to make sure it is still fit for purpose as your child develops.”

If your child is involved in an accident and loses a tooth, Karen advises:

- Don’t put the tooth in ice
- Don’t clean the tooth with disinfectant or water or let it dry out
- Don’t put aspirin or clove oil on the wound
- Don’t panic!

If you need any further advice please visit the Foundation’s ‘Tell Me About’ section to find out more about cracked teeth and mouthguards.

Dental Protection launches new workshop

T he third workshop in Dental Protection’s communication and risk management skills series will be launched on 28 August in Hong Kong during the FDI Annual World Dental Congress.

Key stakeholders from a variety of countries have been invited to attend the inaugural workshop that will be introduced by Kevin Lewis (Dental Director) and facilitated by John Tiernan (Director of Educational Services DFL/MPS). Like other workshops in the series, Mastering Difficult Interactions is a three-hour interactive workshop that is available to members free of charge and to non-members at a charge.

Mastering Difficult Interactions provides a solution-focused approach to enhancing effectiveness and ease when dealing with difficult interactions.

By attending this workshop delegates will:

- Understand the choices available when faced with a difficult interaction
- Learn techniques to minimise conflict and deal with challenging scenarios
- Build the skills to effectively “diagnose” the problem
- Identify personal and team “survival” skills to reduce stress
- Improve the clinical outcomes of these complex situations

The new workshop will run in the UK and Ireland later this year when early booking is advised. Full details are available online http://bit.ly/G2KvE6.

Dental Focus® Web Design supports the Mouth Cancer Foundation 10km Awareness Walk

T he 7th annual FREE Mouth Cancer Foundation 10km Awareness Walk will take place on Saturday 22nd September at Hyde Park in London. The event will raise much-needed funds for the Mouth Cancer Foundation, while also working to raise awareness of all head and neck cancers.

Among the many sponsors of the event is Dental Focus® Web Design – an award-winning team of online marketing experts, with more than 500 dental websites to their name. As part of Dental Focus’s commitment to industry and issues affecting dentistry, Dental Focus won’t just be sponsoring the Mouth Cancer Foundation Awareness Walk – members of the team will also be taking part in the walk as well! With last year’s event a fantastic success, this year’s event aims to be even bigger and better than ever before.

To join the Dental Focus team on the walk, you can register for free at www.mouthcancerwalk.org.

On the day of the event, from 1pm, you will be able to collect your participant bib, t-shirt and refreshments for the walk that will start at 2pm. Once the walk is complete you can look forward to receiving your very own goodies bag packed with freebies, with prizes awarded to the highest individual and team fundraisers.

For more information visit www.mouthcancerwalk.org.

Lennon tooth sculpture

A ccording to a recent report, a piece of John Lennon’s tooth has been used in a sculpture.

The sculpture has been created by artist Kirsten Zuk, whose brother, dentist Dr Michael Zuk, won the tooth at an auction in Stockport for £19,500 last year.

According to reports, Kirsten Zuk has incorporated the small piece of the molar in her clay model of the singer as a tribute to the Beatles icon.

Speaking about the sculpture, which will be on display during Edmonton’s Fringe Festival, Kirsten said: “I love John Lennon – I’ve been a huge fan all my life. This is a time-capsule. It will contain his DNA.”

Donations made at the viewing will go towards the children’s charity Smile Train, as Dr Michael Zuk explained: “Lennon gave his tooth to a fan in good spirit so I wanted to do a few things that would raise awareness of the charity Smile Train, so we are asking people that come to view the sculpture at Kirsten’s Art Show this weekend in Edmonton to consider making a donation which helps children with cleft lip and palate.”

The tooth was originally given to Lennon’s housekeeper Dorothy Jarlet, who worked for the singer at his home in Weybridge between 1964 and 1968.

Planmeca signs record-breaking Saudi contracts

F innish dental equipment manufacturer Planmeca delivers three fully digital teaching environments to King Saud University College of Dentistry and the National Guard of Saudi Arabia Health Affairs as part of an extensive local health care development and investment to education.

This substantial delivery agreement includes a turn-key solution with more than 1,000 dental units, simulation units, 2D and 3D X-ray systems combined with a Female dental college and builds a new dental hospital on the male college campus. At the same time, the National Guard of Saudi Arabia invests in top level teaching environment for the educational and research purposes of the King Saud bin Abdulaziz University for Health Sciences College of Dentistry.

In co-operation with its local distributor Care Ltd., Planmeca delivers the complete digital university installations including 990 Planmeca Compact i and Planmeca Sovereign dental units and 100 simulation units as well as a complete imaging system consisting of 19 Planmeca ProMax 3D dental X-ray units, 545 Planmeca ProX digital intraoral imaging systems all interconnected with Planmeca Romexis software. The installations will be completed in fall 2012.