CQC chair announces resignation

“I now believe it is time to step aside and for a new Chair to lead CQC into the next stage” – Dame Jo Williams

Just weeks after the new chief executive David Behan had settled into his office chair, another senior figure at the Care Quality Commission (CQC) has announced their resignation.

After four years at the organisation, Dame Jo Williams is leaving her position as CQC chair.

Commenting on her decision, Dame Jo said: “Having served on the Board of the CQC for almost four years, and as Chair for nearly three, I am proud of the progress we have made.

It has been a demanding and complex role, and there have undoubtedly been challenges as we registered 40,000 providers and brought the entire health and social care system under one set of standards.

“But there is now clear evidence that our regulation is beginning to have an impact on the care that people receive” – Dame Jo.  

Executive - I am confident that he will continue to build on the progress that we have made in promoting and protecting the health and safety of people who use services.

“It has been a privilege to hold this important role but I now believe it is time to step aside and for a new Chair to lead CQC into the next stage.”

Andrew Dilnot, Chair of the Commission of Funding of Care and Support, said: “I have enormous admiration and respect for Dame Jo; her insight, experience and commitment were invaluable to the work of the Commission of Funding of Care and Support, which reported last summer.

“While she will be much missed in her position as CQC Chair, I hope that Adult Social Care will continue to benefit from her contribution via other forums.”

Dame Jo will remain in post until a successor is appointed.
I t was all change in the re- cent cabinet reshuffle, and the health sector did not escape. Secretary Andrew Lansley was denoted to Leader of the Commons, to be replaced by former Culture Secretary Jeremy Hunt. Speaking at the time, Hunt stated he was “in- credibly honoured” to take over. “It is a huge task and the big- gest privilege of my life,” he told the BBC. Lansley was report- edly sacked by the Prime Minister over his failure to com- municate his controversial NHS reforms.

The government were quick to point out that the re- shuffle does not affect policy and that the coalition commit- ments to dentistry remain.

Following on from the re- shuffle, it was announced that Earl Howe will remain as the member of the Department of Health Ministerial Team re- sponsible for dentistry. He is the only member of the team to retain their post. Former Ministers Simon Burns, Anne Milton and Paul Burstow have been replaced by Nor- man Lamb, Anna Soubry and Daniel Poulter. Ms Soubry, a former television news jour- nalist and presenter who has been MP for Broxtowe since the 2010 General Election, as- sumes responsibility for water fluoridation.

Confirmation that Earl Howe will remain the member of the Department of Health Ministerial Team responsible for dentistry has been wel- come by the British Dental Association, Dr Martin Fallow- field, Chair of the BDA’s Prin- cipal Executive Committee, commented: “This is a pivotal period in the reform of dental contracts and commissioning in England. A great deal of work has already been done, and significant challenges re- main. The continuity that the decision to retain dentistry in Lord Howe’s portfolio brings is good news.”

“The BDA looks forward to continuing its engagement with Government to meet the challenges ahead.”

New Health Secretary in cabinet reshuffle

Jaw reconstruction techniques compared

T he Journal of Oral Im- plantology has present- ed a pilot study compar- ing transcervical techniques for maxillary sinus floor elevation. This is a surgical procedure that increases bone volume and prepares the upper jaw for dental implants. The study sought to determine if any of the techniques carried a great- er risk of surgical complica- tions.

Perforation of the sinus membrane is the most com- mon surgical complication as- sociated with maxillary sinus floor elevation. Perforations have been linked to acute or chronic sinus infection, oedia- ma, bleeding, loss of bone graft material, and failure of the im- plant.

The conventional method for this procedure is the lateral approach, which gains surgical access through the zygomatic bone bordering the maxillary sinus cavity. While this is an in- vasive technique, there is a low incidence of complications. A less invasive procedure uses a crestal approach through the osteotomy prepared for dental implant placement. However, this is a sensitive technique that restricts the surgeon’s di- rect visual examination.

The current study used 20 human cadaver specimens with 40 intact sinuses, as test sub- jects for three transcervical surgi- cal techniques. One experi- mental group used the DASK kit, which features specially designed surgical drills to ap- ply mechanical and hydraulic pressure. Another experimen- tal group received a surgical protocol that permitted entry into the sinus through crestal bone that had been eliminated during site preparation. A con- trol group was treated with the osteotomy/crestal sinus mem- brane elevation, or OCSME, technique.

Postoperative assessment of the specimens determined whether membrane perfora- tion had occurred. Direct visu- al endoscopy, cone-beam com- puterized tomography, and periapical radiographs were used. While the study found endoscopy to be the preferred form of detecting membrane perforations, no significant differences were found in the rate of perforations among the surgical techniques used.


A new Suicide Preven- tion Strategy has been launched, aiming to focus on supporting bereaved families and preventing sui- cide amongst at risk groups.

The strategy, launched by the Government and supported by organisations such as the Samaritans is sup- ported by a £1.5m grant for re- search.

The strategy is the first in more than 10 years and aims to reduce the suicide rate in England and better support those who have been bereaved or affected by suicide. There are six key areas for action, including:

• A better understanding of why people commit suicide and how it can be prevented – supported by new suicide preven- tion research funding
• Working with the media, and the internet industry through members of the UK Coun- cil for Child Internet Safety (UKCCIS) to help parents en- sure their children are not ac- cessing harmful suicide-relat- ed websites, and to increase the availability and take-up of effective parental controls to reduce access to harmful websites
• Reducing opportunities for suicide, by making sure pris ons and mental health facili- ties keep people safer – for example by redesigning build- ings to take away ligature – and by safer prescribing of po- tentially lethal drugs.
• Better support for high-risk groups - such as those with mental health problems and people who self-harm - by making sure the health ser- vice effectively manages the mental health aspects as well as any physical injuries when people who have self-harmed present themselves
• Improving services for groups like children and young people or ensuring the mental health needs of those with long-term conditions are being met through the Government’s mental health strategy
• Providing better informa- tion and support to those be- reaved or affected by suicide – making sure families are in- cluded in the recovery and treatment of a patient and giv- ing support to families affect- ed by suicide.

Care Services Minister, Norman Lamb said: “One death to suicide is one too many – we want to make suicide prevention every- one’s business. Over the last 10 years there has been real progress in reducing the sui- cide rate, but it is still the case that someone takes their own life every two hours in Eng- land.”

To enable the delivery of better and safer services for people using health and care ser- vices, the Government Policy Research Programme is fund- ing up to £1.5m for research to help develop the evidence base and improve understand- ing of:

• how to reduce the risk of sui- cide for people with a history of self-harm
• how self-harm can be better managed and suicide reduced in children and young people
• how interventions can be tailored to improve the mental health in some specific groups
• how and why suicidal people use the internet
• how support can be provided effectively to those bereaved or affected by suicide.

Supported by a grant from the Department of Health, the Call to Action consists of national organisations from across England commit- ted to taking action so fewer lives are lost to suicide and people bereaved or affected by suicide receive the right support. This is the first time that organisations have committed to working togeth- er to share best practice and deliver real action to tackle suicide.

E-petition

A dentist from Yorkshire has launched an e-peti- tion to call for the Gov- ernment to take a closer look at the funding for NHS dentistry.

Anthony Kilcayne, owner of The SmileSpecialist® Centre in Haworth, has taken the step to gather support for what he sees as ‘The Big Lie’; in that the Government needs to recognise that NHS dentistry in its current form cannot meet the local dental needs of the public with- out doubting funding.

On the e-petition page, Dr Kilcayne states: “It is time that Government acted by FIRST di- namically to publish transparently that without doubting funding, NHS dentistry cannot meet everyones clinical needs realistically.

Only then can it devise its first ever National Dental Strate- gy, that takes the long-term view, true and of significant medical and social care barriers and syn- ergies (rather than demonises) with Private dental options too, in the Public Interest overall.”

To view the e-petition, go to: http://epetitions.direct.gov.uk/ petitions/37296
Editorial comment

This week I’ve been amused by the lengths some companies will go to when trying to align their brand with current affairs. In the US, the upcoming Presidential elections are looming large and all the razzmatazz that goes with the political canvassing of the candidates is seeing a frenzy of comment and debate about who’s going to win.

In a desperate attempt to jump on the bandwagon, a US whitening product manufacturer has joined the fray by releasing the results of a study which point to presidential candidates’ teeth whiteness as a leading indicator of election success.

New way to patch up teeth

Scientists in Japan have created a ‘tooth patch’ that could mean the end of decay. The patch is a microscopically thin film that coats individual teeth, and can also make teeth appear whiter. The researchers have been experimenting on disused human teeth, and will soon move to test on animal teeth.

“This is the world’s first flexible apatite sheet, which we hope to use to protect teeth or repair damaged enamel”, said chief researcher Shigeki Hontsu, professor at Kinki University in western Japan.

The ‘tooth patch’ is a hear-wearing and ultra-flexible material made from hydroxyapatite, the main mineral in tooth enamel. By creating an all-apatite sheet, the researchers are essentially creating artificial enamel which could mean the end to sensitive teeth as well as decay.

The film is 0.004mm thick, and is created by firing lasers at compressed blocks of hydroxyapatite in a vacuum to make individual particles pop out. The particles fall onto a block of salt which is heated to crystallise them, before the salt stand is dissolved in water. The film is scooped up onto filter paper and dried, and is then robust enough to be picked up using tweezers.

“The moment you put it on a tooth surface, it becomes invisible”, Hontsu told AFP. One problem, however, is that it takes almost one day to adhere firmly to the tooth’s surface.

It will be five years or more before the film can be used in practical dental treatment, but it should be available to use cosmetically within three years.

According to the company’s press release: An analysis of photos taken of presidential candidates on the campaign trail showed the correlation between teeth whiteness and electability.

Photo evidence going back to 1992 shows the candidate with the whiter teeth winning the election. When he was just Governor of Arkansas, Bill Clinton had a considerably whiter smile than incumbent President George H.W. Bush. Clinton handedly won the election, a feat he repeated in 1996 against the dimmer-smile-bearing Bob Dole.

In 2000, George W. Bush had marginally whiter teeth than Vice President Al Gore, a portent of the narrow election win he’d see in November. But, just four years later his teeth outshone those of Senator John Kerry, and Bush once again won the election.

So, I hear you cry, what is in store for this year’s candidates? Well it seems to be a good year for current incumbent President Obama, as he shades it over main rival Mitt Romney. Will it be a white-wash? We’ll find out in November!
Enzyme link to bone loss found

A research scientists based at the University of Louisville (Kentucky, USA) has discovered a way to prevent inflammation and bone loss surrounding the teeth by blocking a natural signalling pathway of the enzyme GSK3β, which plays an important role in directing the immune response.

Publishing his findings in the journal Molecular Medicine, researcher David Scott, PhD and his team found that not only do the results have implications in preventing periodontal disease, but also may have relevance to other chronic inflammatory diseases. Since GSK3β is involved in multiple inflammatory signaling pathways, it is associated with a number of diseases and also is being tested for its impact in Alzheimer’s disease, Type II diabetes and some forms of cancer, to name a few.

“The traditional approach to dealing with periodontal disease is to prevent plaque from forming at the gum-line or prevent the consequences of periodontal disease progression,” Scott said. “Our approach manipulates a natural mechanism within our bodies to prevent inflammation and subsequent degradation when exposed to the bacterium Porphyromonas gingivalis.”

Bruxism Awareness Week

Bruxism is one of the most common conditions to be induced or exacerbated by tension and yet surprisingly few people are familiar with the term or know about the damage it can do. Or indeed, who can help.

For these reasons, in 2010 the team at S4S, providers of the NTI-tss mini anterior Bruxism splint, decided to establish Bruxism Awareness Week. They realised just how little awareness there was amongst both the public and dental professionals on this subject and decided that something had to be done. The annual event aims to enlighten sufferers as to the nature of their condition and encourage them to contact their local dentist for simple, swift and straightforward treatment.

A huge success, the event was repeated in 2011 and now the third Bruxism Awareness Week takes place October 22-28, 2012.

During Bruxism Awareness Week, dental practices throughout the UK will be holding open days, encouraging patients to make the first step towards getting professional help. A ‘Practice Information and Promotion’ pack from S4S is available to any UK dental practice on request to help publicise activity and treatment.

The event will also include a series of seminars and promotional events to draw attention to the scale of distress brought about by Bruxism.

To learn more about Bruxism Awareness Week or request a free information and promotion pack, please contact S4S on 0144 250 0176, or email: info@s4sdental.com

Will you stop for ‘Stoptober’?

Stoptober, the first ever mass quit attempt for smokers, has been launched by Chief Medical Officer Professor Dame Sally Davies.

The innovative campaign comes as smoking remains the biggest killer in England with half of long-term smokers dying prematurely from smoking related diseases.

Stoptober takes place from 1 October and is backed by Cancer Research UK and British Heart Foundation. It is the first 28-day quit attempt of its kind to encourage the nation’s 8m smokers to make the step towards a smokefree future.

Smokers will receive support and encouragement through TV and radio advertising plus a daily messaging service and roadshows around the country.

Research shows those who stop smoking for 28 days are five times more likely to stay smoke-free. Stoptober will lend a hand to help smokers achieve this goal.

The new campaign is also supported by the Stoptober app (available free via Smartphone) as well as the Smokfree Facebook page with additional tips and advice.

Jean King, Cancer Research UK’s director of tobacco control, said: “Smoking accounts for one in four cancer deaths and nearly a fifth of all cancer cases so it’s vital that work continues to support smokers to quit.

“Breaking the addiction is difficult so new and innovative campaigns such as this are hugely important.

“After the success of the Olympics and Paralympics where we’ve seen such fantastic feats of physical achievement, it would be great to think this might help also motivate smokers to quit and take advantage of Stoptober. It’s key that smokers don’t give up trying to give up.”

To find out more about the campaign go to smokefree.nhs.uk/Stoptober.

Dental students support outreach programme

The trip was also supported by Henry Schein UK, who through its Henry Schein Cares initiative donated oral health care travel packs. The packs consist of a pre-packed assortment of essential dental supplies that oral health care professionals can use to treat those in need.

Simon Gambold, managing director at Henry Schein UK, commented: “We are very pleased to see that our donation is helping dental professionals provide crucial treatment for oral diseases as well as essential preventive care to those in desperate need. The oral health travel packs donation is exactly meeting with the mission of our global social responsibility programme, Henry Schein Cares, and we are very grateful that we were able to realise this programme through the generous support of some of our supplier partners.”

Twelve-one dental students from the Cardiff Dental School participated in an outreach programme to help improve the quality of life in underserved communities in Ghana

Organised by Global Brigades, the students suppported one of the Cardiff Dental School’s International Organisations, the Cardiff Dental Brigade. “We not only were able to help so many local Ghanaians. This outreach programme also made a huge difference to our personal lives and our educational experience”. The students have been accompanied by five dentists and one specialist oral surgeon.
X-Mind 3D

The X-Mind 3D’s flat-panel sensor offers superior image quality due to its large dynamic range, better contrast and lack of image distortion. Combining low dose, fast imaging and high diagnostic accuracy, the X-Mind 3D is a robust system designed for intensive use and the ClearTouch control panel makes operation simple.

X-Mind 3D shown with Cephalometric option

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Cone Beam 3D and digital panoramic imaging combined in one system.

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Foundation Shows Support For Key European Oral Health Policies

The British Dental Health Foundation has welcomed The State of Oral Health in Europe report and a number of key recommendations. The report states that despite a reduction in global caries, those from poorer backgrounds will still be plagued by dental disease. Access to oral healthcare services remains 'a major health problem', while the economic impact of oral health related problems is forecast to rise by 2020.

The report has also identified that half of the European population may suffer from severe gum disease, a leading cause of tooth loss among adults. Chief Executive of the BDHF, Dr Nigel Carter OBE, welcomed the recommendations put forward in the report. He said: “The Foundation unequivocally supports the policy recommendations detailed in the report. Addressing existing oral health inequalities is a vital step towards improving oral health across the globe.

“By educating the public on prevention and better oral hygiene practices, a key aim of the Foundation, we hope to see a further reduction in the level of gum disease and tooth decay seen globally. These are two highly prevalent yet highly preventable diseases, and although we have seen vast improvements over a number of years, there’s a collective responsibility to review our oral hygiene routine and seek ways in which to improve it.”

The policy recommendations include:

- Develop a coherent European strategy to improve oral health with commitments to quantifiable targets by 2020
- Improve the data and knowledge base by developing common methodologies and bridging the research gap in oral health promotion
- Support the development of cross-sectoral approaches with health and social care professionals and support the development of the dental workforce
- Address increasing oral health inequalities and knowledge of prevention/oral hygiene practices of the public and guarantee availability and access to high quality and affordable oral health care
- Encourage best practice sharing across countries

BKH joins forces with Same Day Smiles

The BKH Group has gone into partnership with Same Day Smiles, the nationwide dedicated dental implant team. At the same time, Dr Alex Jones, principal of PDC Dental, has joined SDS with us.

"The BKH team will impact in all areas of the business - finance, marketing, customer service, compliance, operations and team-building," commented Dr Richard Brookshaw, Clinical Director at SDS. "I am very excited about the future potential this releases for the business and all those who work for and with us.”

Dr Alex Jones said: “I am very excited not only to work with existing sites on improving the services we offer, but also to bring new sites into the SDS family and create a national brand of which we can all be very proud.”

“We are absolutely delighted to be working with Richard and Alex,” stated Chris Fotts, Managing Director of BKH. “This is a really exciting development for existing and future partners of BKH and potentially everyone that we work with.”

The 75-page catalogue has been updated with an exciting new range of products to help assist dental practices communicate, and motivate their patients.

Included in the new series of products is a collection of ‘Infoties’. Taking bite-sized information from the hugely popular Tell Me About range, these A6 postcards are ideal for patients to take home and refer to.

The Foundation will now also stock Multilingual Health History Forms. These are specially designed for frontline staff at dental practices to undertake a rapid patient health appraisal quickly, cheaply and without the need for an interpreter. The form includes more than 250 open format and dichotomous questions covering key personal, medical and dental information, and helps dentists keep accurate, up-to-date and detailed records of their patients’ medical history.

Other new items in the catalogue include children’s and adults’ books, activity packs, oral health kits and Tell Me About leaflets. More than 40,000 copies of the catalogue have been printed and are available on request.

Free CPD at Showcase 2012

With less than a year to go until the end of the first five-year cycle of CPD for more than 40,000 GDCs, this year’s BDTA Dental Showcase offers a range of ways in which you can obtain CPD for FREE.

The whole dental team can gain both general and verifiable CPD through:

• Attendance at the complimentary Mini Lectures
• Attendance at the Business Clinic
• Interacting with on-stand experts
• Attendance at tech talks in the Tech Zone
• Answering questions on CPD articles in the Show Guide

So whether you prefer to learn hands-on or by listening, discussing, reading or a combination of all three, there is something to suit you.

This year’s BDTA Dental Showcase will take place at ExCel London on 4-6th October. To take advantage of this fantastic opportunity to gain CPD, register for your free tickets before the closing date at: www.dentalshowcase.com, call the registration hotline on 01494 729959 or text your name, address, occupation and GDC number to 07786 206 276. Advance registration closes 5 October 2012. On-the-day registration: £10 per person.

For more information on resources or to order a catalogue, call the Foundation’s Resource Team on 01788 559 795 or email them at order@dentalhealth.org.
Sellers market prevails in dental world

The ratio of goodwill to fee income for the average dental practice sold in the quarter ending 31 July 2012 has increased in the latest NASDAL goodwill survey. It has picked up by 10 per cent from 91 per cent of turnover in the previous quarter ending April 2012 to 101 per cent in the most recent collection of figures from NASDAL members.

An organisation of accountants and lawyers who advise about 20 per cent of GDPs, the NASDAL goodwill survey reflects a significant number of dental practice sales in any quarter. Percentage of turnover is the simplest method of measuring fluctuations of goodwill in the marketplace, but it is important to be aware that actual valuations are calculated using a combination of different methodologies.

Alan Suggett, a partner in UNW LLP in Newcastle upon Tyne who carries out the NASDAL goodwill survey, commented: “There is still upward pressure on goodwill values for most types of practice. Small and medium-sized practices, both NHS and private, are in demand from associates who are, in some cases, desperate to own practices, and larger NHS practices are sought after by venture capital backed dental corporates.”

Ray Goodman, of Goodman Legal commented: “The market may be buoyant but we are still seeing the effects of the recession. The length of time it is taking to sell a dental practice continues to grow because of the difficulty in securing loans from highly cautious lenders and also because of non-specialist advisors operating in the marketplace.”

BDA PEC fills vacant seat

Dr Stephen Shimberg has been elected to serve as a member of the British Dental Association’s (BDA’s) Principal Executive Committee (PEC). He won a closely-contested by-election in the north west of England.

Dr Shimberg is a general dental practitioner in Worsley Village, Manchester. He has been a GDP since qualifying from Liverpool Dental School in 1971.

A lengthy career in dental politics has seen him chair West Pennine Local Dental Committee and serve as the West Pennine and Manchester representative on the BDA’s General Dental Practice Committee (GDPC). As part of his role on GDPC, Dr Shimberg has acted as the cross-rep to the BDA’s Salaried Dentists Committee and Central Committee for Hospital Dental Services.

He joins the 14 already-elected members of the PEC: Dr Mick Armstrong, Dr Paul Blaylock, Dr Victor Chan, Dr Eddie Crouch, Dr Martin Fallowfield (Chair), Dr Philip Henderson, Dr Judith Husband (Chair, Education, Ethics and the Dental Team), Dr Stuart Johnston, Dr Nigel Jones, Dr Robert Kinloch (Deputy Chair), Dr Russ Ladwa, Dr Alison Lockyer, Dr Sue Sanderson and Dr Graham Stokes.