A new toothbrush has been designed to use your phone to tell you if you are brushing enough. The brush, designed by Beam Technologies, connects to a smartphone app to make sure you spend enough time brushing your teeth. With the average person spending just 46 seconds brushing their teeth, the Beam brush is designed to change that — it is connected to your phone via Bluetooth, and times how long you brush for. The app also monitors the number of strokes and can alert the user if they have forgotten to clean their teeth. The toothbrush is manual, and works by reacting to the body's bioelectricity. This starts the timer, and the information is then automatically updated to measure progress through the user’s phone. www.beamtoothbrush.com/index.php

NICE tool counts cost

A new interactive tool developed by NICE and Brunel University will help local authorities count the cost of tobacco-related harm in their communities. The tool also models the longer-term cash savings that authorities can expect by putting tobacco control strategies in place. The Tobacco Reviewer Interactive Excel Tool is a Microsoft Excel-based program that evaluates a portfolio of tobacco control interventions and in different payback timescales. Packages of interventions can be mixed and matched to see which intervention portfolio provides the best ‘value for money’, compared to ‘no-services’ or any other specified package. The tool is accompanied by a package of support materials, including a user guide and technical report, which can also be downloaded from the NICE website.

www.dental-tribune.co.uk

Don’t be scared of Oct 31, celebrate!

In our exclusive interview with teeth whitening expert Dr Wyman Chan, we hear that it’s all white now that the law surrounding hydrogen peroxide use is changing...

This week marks the date that sees the long-lobbied for clarity in the protracted debate over the legality of tooth whitening.

According to the amendment carried last year by the European Commission, tooth whitening products containing up to six per cent hydrogen peroxide can now be supplied to patients for use as a take home product, providing certain conditions are met. Dr Wyman Chan, a dedicated teeth whitening dentist, has been following the developments, and believes that dental professionals should be embracing the freedom that the law amendments have given, not be wary of them. He said: “It’s exciting, it’s excellent news, and I think we all should celebrate. Dental professionals are practising teeth whitening should celebrate, should go and have a party. It’s the first time in so many years that we can do teeth whitening legally from October 31. Before then, even now, we’re doing it technically illegally. So that’s why I’m so happy because I am a dedicated teeth whitening dentist. It’s the only thing I do and now I can do it without fear.”

One thing that Dr Chan has noticed is that although the amendment is supposed to bring an end to the confusion over what can and cannot be done with regards to the supply of teeth whitening products to patients, it seems that for many it isn’t clear what the law is changing. “I’m bemused by the debate going on in forums and also the position taken by many reputable bodies – I won’t name any of them. I think they didn’t read the documents properly – I think they have got it wrong. That’s my opinion. Maybe I’m wrong, but I’m confident I’m correct. Let me explain why I think that. Because this is not new law, this is an amendment. They’re amending an
existing law. Actually it is a Directive - 76/768/EEC Annex III.

This Directive covers the use of hydrogen peroxide in consumer products across four sectors including hair and nail products; however for dental professionals it makes the most striking impact. The amendment states: The SCCS (Scientific Committee on Consumer Safety) considers that the use of tooth whitening or bleaching products containing more than 0.1 per cent and up to 6 per cent of hydrogen peroxide present or released from other compounds or mixtures in these products may be safe if the following conditions are satisfied: an appropriate clinical examination is carried out prior to the first use and duration of application. These conditions should be fulfilled in order to avoid reasonably foreseeable misuse.

Those products should therefore be regulated in a way that ensures that they are not directly available to the consumer. For each cycle of use of those products, the first use should be limited to dental practitioners — or under their direct supervision if an equivalent level of safety is ensured. Dental practitioners should then provide access to those products for the rest of the cycle of use. (European Union Council Directive 2011/84/EU)

Dr Chan believes that the confusion is many think the directive is looking at in-surgery (power) whitening as a whole, including whitening products that are supplied to patients (consumers) for take home use. He said: “It’s great news for dental practitioners because now the level is raised from 0.1 per cent (which was ineffective as a treatment) to six per cent, which is very effective. With six per cent take home use, we can get excellent results. It doesn’t matter what product you use, with six per cent you will get results. So the clarity we now have is nothing to do with the debate people are having at the moment – which is about chairside (whitening). This has nothing to do with chairside — they are amending the law about oral hygiene products.

“The original Directive came into force in 1976, regulating products directly available to the consumer as over the counter products. That’s why it was limited to 0.1 per cent hydrogen peroxide because of daily use and long term exposure. I agree with the cosmetic commission of the EU that it should be regulated, that the level should not be more than 0.1 per cent because you can swallow a lot of toothpaste and mouth rinse into the stomach every day. So it was correct at that time, 1976. In the early 1990s teeth whitening became popular, it became the norm. In 1976 there was no such thing as home whitening, it was brand new technology. Things seemed to be moving too fast for the EU – they needed to catch up with the new technology. "They’ve (SCCS) been debating for years the safe amount for consumer self-dosing application, and there’s a lot of evidence from scientists, and they all agree that up to six per cent is safe for the consumer to take home. Of course this is after they’ve had a clinical examination - there are conditions attached which I think is fair, for example they need to be examined by a dentist so now take home whitening is officially a dental procedure. In addition the first use should be by a dental practitioner, or supervised by a dental practitioner, so now home whitening is very much the practice of dentistry."

Another big issue regarding whitening is the rise of non-dentists being able to supply dental professionals with tooth whitening services to the public. With the law amendment, Dr Chan says this can help put a stop to this, protecting patients further. “I think this amendment has plus and minuses. A plus is that there are a lot of non-dental professionals – I’ll not call them beauticians, as many are mechanics and bricklayers trying to make some fast money - giving customers hydrogen peroxide to take home with them so that will be stopped now. Trading Standards can stop anything that non-dental professionals are doing in terms of frequency administering the products, the first use should be by a dentist so now take home whitening is very much the practice of dentistry.”

Dr Chan said: “It’s great news for dentists, so now a lot of dentists are still confused because a lot of companies are withdrawing chair side products and we need to review the literature. A lot of clarity has to be made in this field. We’ll be able to supply dental profession- als with the supporting docu- ments about whitening so you can cover the legality but it will also aim to teach them about the modern ways of doing teeth whitening effectively. There is a lot of talk that chair side whitening is all about dehydrating the teeth but that is just not true. I do a lot of chairside whitening - you need a lot of knowledge to make it work. We talk about chairside whitening, home whitening, how to deal with patients with sensitivity."

To review the amendment to the whitening Directive go to http://ec.europa.eu/consumers/sectors/cosmetics/documents/directive/#h2-consolidated-version-of-cosmetics-directive-76/768/eeec

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Coming Soon

Dr Wyman Chan at work in his practice
Editorial comment

This week is a landmark time for dental professionals who supply tooth whitening to their patients. Finally it will be possible to provide patients with take home whitening kits that will provide results that won’t make you look over your shoulder for the nice guys and gals from Trading Standards.

Til Qureshi, president of the BACD, has released this statement: After many years of uncertainty regarding the legality of tooth whitening in the UK, the BACD welcomes the amendment to the UK cosmetic regulations as a result of European Council Directive 2011/84/EU that finally legalises tooth whitening by dental professionals.

Dental professionals

ARF freeze ‘inadequate’

The GDC’s decision to freeze the Annual Retention Fee (ARF) at £120 for dental nurses in 2013 is “inadequate” says Nicola Docherty, President of the British Association of Dental Nurses.

The decision shows that the GDC is “out of touch with registrants” says Nicola. “We have supplied the GDC with detailed information on dental nurse salaries, showing that the £120 ARF causes considerable financial hardship to dental nurses. We have also requested that the GDC lower the ARF for dental nurses to a fee more in line with salaries - instead of charging dental nurses the same ARF as hygienists and therapists - and that they implement a special fee for those working part time.”

A recent salary survey conducted by BADN shows that the majority of Registered Dental Nurses are paid between £10,000 and £20,000 per year - in contrast with hygienists and therapists, whose recommended starting salary is £26,000. However, the GDC has decided to continue charging one ARF to all Dental Care Professionals, completely disregarding the fact that dental nurses earn less than half that of hygienists and therapists.

“BADN has always supported, and continues to support, registration in principle, as being in the best interests of the patient. However, the GDC’s heavy handed and insensitive implementation, including the imposing of an unreasonable ARF, has alienated many dental nurses and must be rectified as soon as possible” said Nicola.
Rise in confidence amongst dentists

Confidence amongst dentists has increased dramatically since the start of the year, according to the latest Lloyd's TSB Commercial Healthcare Confidence Index, with short term optimism rising from minus eight per cent in January, to nine per cent, a positive shift of 17 per cent.

This boost to sentiment follows a fall in confidence at the start of the year, possibly on the back of concerns about how NHS contracts would be delivered in the longer term and the stresses around the CQC.

The Healthcare Confidence Index was first published in August 2011 and is now in its third wave. It aims to provide an insight into the attitudes and opinions of primary healthcare providers; GPs, dentists and pharmacists, over the next one to five years.

To view the full Lloyd's TSB Commercial Healthcare Healthcare Confidence Index visit www.lloyds白沙.com/healthcare and to take part in the next Healthcare Confidence Index visit www.healthcare-confidenceindex.co.uk.

Confidence in children improves dental health

A new study, published in the Journal of Dental Research, has found that an intervention designed to bolster their “sense of coherence” had “the ability to see life as a challenge in which coping skills can be used to deal with stressors”, and showed significantly better oral health-related quality of life compared with children from schools randomly assigned to a control group. The children in the intervention group also exhibited improved beliefs about the importance of healthy dental behaviours and had better gingival health than those in the control group.

“This is a hugely important study in the dental literature. While there is some evidence in dentistry of the benefits of a sense of coherence, much of this work is cross-sectional so we don’t really know if sense of coherence really brought about any possible change,” said study co-author Sarah R. Baker, PhD, a health psychologist at the University of Sheffield in an interview with Medscape Medical News. “Our study is the first intervention study to show that intervention can have influence oral health,” she said.

In the study, 12 different primary schools were randomly assigned to the intervention group or the control group. Fifth graders, aged 10 to 12 years, participated. Students assigned to the intervention group received seven sessions over two months focused on child participation and empowerment. Each session lasted 50 to 40 minutes. The first four sessions were classroom-based activities, involving didactic learning, games, and discussions. The last three were health-related school projects that included all students and staff, and involved brainstorming, planning, evaluation, and implementation. The intervention was delivered by six teachers who went through specialised, intensive one-day training.

Results indicated that compared with the control group, the children who received lessons in sense of coherence had mean scores on the oral health-related quality-of-life questionnaire that indicated fewer functional limitations and other problems due to dental health three months after the intervention. Children in the intervention group also showed a greater sense of coherence than did those in the control group and were more likely to rate healthy dental behaviours as important. It also found that more children in the intervention group than in the control group had normal gingival health three months after the intervention.

Dissolvable strip offers pain relief for burns

A dissolvable oral strip has been developed to immediately relieve pain from burns caused by ingestion of hot foods and liquids, such as coffee, pizza, and soup.

Lead researcher Jason McConville, PhD and colleagues from University of Texas at Austin, designed the strip for controlled delivery of a local anesthetic that promotes healing. It is a therapeutic polymer. Benzoic acid, commonly used as a topical pain reliever in dental products and throat lozenges, was chosen for its non-irritating properties.

The strip is applied directly to the burned part of the tongue, cheek or roof of the mouth. It sticks to the affected area and won’t interfere with normal day-to-day activities, as it quickly dissolves for instant pain relief and promotes healing.

“We found these strips to be non-toxic, which has huge potential for anyone who burns their mouth while eating or drinking hot foods and that’s just about every-one,” said McConville. “The strips look and behave similar to breath freshening strips that you might find on your local drugstore.”

Now based at the University of New Mexico, McConville and his team, will explore creating a stronger oral strip to treat more severe burns lasting longer than two-three days. The next step in furthering their research will be to test the strips in humans and experiment with taste masking.

Old magazines pose health risk in dentist waiting rooms

Monica Symes, a dentist in Lyne Regis, Dorset, says that an infection control worker warned her that keeping back issues of Country Life and Private Eye could make her fail health and safety inspections.

According to reports, NHS officials have issued a warning to dentists to stop keeping old magazines in their waiting room as they pose a health and safety risk. They believe that the magazines could be responsible for helping to spread bacteria and should be thrown out after a week.

Since last April, all dentists have been required to register with the Care Quality Commission about factors such as their facilities and check they are maintaining treatment standards. However, surgeries and dental organisations have complained that the bureaucracy has bogged them down in red tape, and done little to improve care of patients.

Under the regime, dental practices are required to explain how they are “meeting the nutritional needs” of their patients – the same question routinely put to hospitals, which provide meals for patients – as well as respecting their human rights and protecting them from abuse. Each surgery is also required to set out a “statement of purpose” about what they want to achieve.

Dr John Milne, Chairman of the British Dental Association’s general dental practice committee, said dentists took cleanliness and hygiene very seriously, but suggested it was heavily biased to wage war on magazines.

He said: “Providing magazines in waiting rooms for patients to read is a good way of helping them to relax and can ease the concerns of anxious individuals.

“Too often, in recent years, it has felt like regulation has been designed to hinder, rather than support, dentists’ efforts to care for their patients.”

A spokesman for Dorset PCT said the current advice to practice owners is that patient waiting areas should be kept clear of unhygienic items that promote a hazardous environment.
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East Sussex practice offers free dental implants

A
dental practice has performed complete dental implants for free after winners were nominated on Facebook.

Brighton Implant Clinic’s charity, The Smile Foundation, provides dental implant treatment to those in need of urgent surgery, but without the means to cover its costs.

The Smile Foundation launched a Facebook page earlier this year to change the lives of people who need dental implants after oral neglect caused by dedicating their lives to helping others.

“I’ve always wanted to give something back for the support I’ve had in my life. The Smile Foundation is a way for me to use my dental skills to help those less fortunate than myself,” said Dr Bruno Silva. Head surgeon at Brighton Implant Clinic.

In 2006, Donald Rodriguez, a carer, suffered a severe stroke, causing the paralysis of his left side. His dental health suffered enormously as he lost the ability to brush his teeth, resulting in serious gum disease and infection. For both mental and physical wellbeing, the dental implant procedure was essential to his continued health.

Bruno Silva saw Donald as an ideal candidate for The Smile Foundation, so carried out the dental work, removing the infected teeth of the upper and lower jaw, and replacing them with new, strong dental implants. The procedure would have cost £12,500.

The Smile Foundation is using Facebook as a voting platform, where social networkers can vote for those who deserve treatment. Using Facebook has allowed patients to interact with one another and write why their nominations deserve free treatment under the charity.

This year with the help of Facebook Dr Silva has begun offering regular opportunities to win a ‘smile makeover’ tending to the winner’s every need. So far we have seen hundreds of cases where people’s teeth simply need to be restored.

The prize is open to UK residents who are between 21 and 99 years of age. The contest closes on November 29th at 5.58pm.

Young dentists call for DFT guarantees

Y
oung dentists are calling for support for their demand for Government to guarantee all graduates from UK dental schools a Dental Foundation Training (DFT) place. The demand comes in the British Dental Association’s (BDA’s) newly-published YDC Asks, a mini-manifesto for young dentists developed by the organisation’s Young Dentists Committee (YDC).

The Committee is asking those who support it to sign a Government e-petition founded by YDC Chair Dr Martin Nimmo. The petition argues that the failure to allocate DFT places to UK graduates both wastes taxpayers’ money, and a tragedy for the graduates who have taken on large amounts of debt in pursuing their vocation.

Given that there are some areas of the UK where patients who wish to access NHS care cannot do so, it is also nonsensical.

“I urge all current and potential members of the profession, and taxpayers, to join young dentists in calling for a guarantee that this farcical situation will never be allowed to happen again.”

YDC Asks also expresses concerns that robust data should be used in workforce planning, that barriers to young dentists becoming practice owners are mounting and that careers in dental academia and specialist training must remain viable options for young dentists.

Link between rheumatoid arthritis and tooth loss

R
esearchers in Australia have found that those with rheumatoid arthritis are likely to develop periodontal disease.

According to doctoral candidate Melissa Cantley from the University of Adelaide, gum disease affects joint tissue health, and arthritis influences and alters healthy tissue within the mouth.

The research found that mice who suffered from periodontal disease would suffer major bone loss within the joints, and that mice who had rheumatoid arthritis showed signs of major bone loss in the jaws.

Researcher hope that it will be possible to help relieve rheumatoid arthritis by treating mouth conditions such as periodontal gum disease.
IDH show they’re good sports

IDH support Dentist’s Sports Day to show human side of corporate dentistry

Integrated Dental Holdings (IDH) competed among 1000 dental students from University’s across the country in the annual BDSA (British Dental Student Association) Sports Day in Manchester.

As the largest dental employer in the UK, IDH sponsored the event, whilst providing water and fruit for the players from one of their mobile dental units. In a first for this typically student-only tournament, IDH teams* competed in both the football and netball leagues.

Health staff encouraged to get flu jab

Health staff are being reminded to get vaccinated against flu to cut the risk of it spreading to patients and colleagues this winter.

Frontline healthcare workers are more likely to be exposed to the influenza virus, particularly during winter months when some of the people in care will be infected. It has been estimated that up to one in four healthcare workers may become infected with influenza during a mild influenza season, a much higher incidence than expected in the general population.

Director of Nursing Viv Bennett says: “Flu can kill, so we in leading by example, and recognising the importance of having the flu vaccine yourself, you will help reinforce the benefits of immunisation in leading by example, and recognising the importance of having the flu vaccine yourself, you will help reinforce the benefits of immunisation in protecting patients from the pain of sensitivity.

The newly formed hydroxyapatite-like layer integrates with the patient’s dentine by firmly binding to the collagen fibrils and remains resistant to the chemical and physical oral challenges that your patients may encounter in their everyday lives.8,13,17

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IDH show they’re good sports

Alex Handley, Graduate Recruitment Partner at IDH comments on the day, “Despite getting unceremoniously thrashed by the competition we had a great day! We got to spend time with the students on a social level and had the chance to tell them, in an informal setting, about the career opportunities at IDH. We have a year round presence in all UK Dental Schools where we are able to educate the students on the dental employment market, and we welcome every opportunity to support the next generation of clinicians.”

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