

# DENTAL TRIBUNE

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## News in brief

### NHS events

Professor Jimmy Steele, chair of the independent review team for NHS dentistry, is calling for dental professionals to give their views on NHS dentistry at five 'engagement events' being held around the UK. The five sessions are being held around the country over the next two months. Professionals are invited to join NHS commissioners and patient representatives at any of the five engagement events being held in Newcastle, Birmingham, Bristol, Manchester and London during April and May. Since its appointment in December 2008, the review team has been investigating why there are variations in access to dentistry in England and how the NHS can deliver continuous improvements in the quality of care. At the events, Professor Steele will discuss the emerging findings of the review with people involved in delivering and improving NHS dental services, inviting them to contribute to the development of recommendations.

Professor Jimmy Steele, chair of the Independent Dentistry Review Team said: 'I want to continue to listen to the views of dentists and their teams, patients and NHS staff and to take their advice on improving access, promoting prevention and ensuring NHS dentistry of the highest quality. I'd like to encourage dentists and their teams to share their opinions at these events and help us start to develop our recommendations.' The results of the study, *A Review of NHS Dentistry in England* will be published this summer.

### Dentist directory

A new UK dentist directory, eDentics.co.uk, has been launched as a tool for both dentists and patients. With over 8,000 dentists, orthodontists, cosmetic dentists, many with UK dentist reviews and ratings by genuine patients, eDentics aims to be the largest and most comprehensive UK dentist directory to provide patients free services and UK dentists with free listings and many other additional features. eDentics enables patients to freely search for local dentists and read UK dentist reviews. eDentics' UK Dentist Directory contains all kinds of dentists including dentists; orthodontists; cosmetic dentists; NHS dentists; Harley Street dentists and emergency dentists, who offer a range of treatments such as general hygienist, bridges, dentures, dental implants, mini-implants, orthodontics (both braces and Invisalign), pedodontics, porcelain crowns and veneers, restoration implants, root canal therapy and tooth whitening.

www.dental-tribune.co.uk

## News and opinions



### More extractions?

Extractions have gone up by 50 per cent in the last four years say new figures, but it's important to 'put these figures into context' says Dr Cockcroft.

▶ page 6

## Practice management



### Shaping up

If your practice needs a makeover then it's time to do something about it, so don't be afraid of investing money as the rewards can be considerable.

▶ page 9

## Money matters



### Tax implications

If a self-employed associate turns out to be employed, the situation can have tax and NI implications for the principal. Tim Lee explains.

▶ page 14

## Clinical



### Alignment innovation

Never forget that orthodontics is a 'prized speciality', where specialist orthodontists have to train hard to understand the complexities says Dr Tif Qureshi.

▶ page 17

## 'Derisory' pay rise to hit the profession

Dentists look set to get a 0.21 per cent increase in earnings following a recommendation of the Review Body on Doctors' and Dentists' Pay.

The Dental Practitioners Association, claims that as the Retail Prices Index is currently 3.2 per cent – anything less than this is effectively a pay cut.

Jim Donaldson, chairman of the Dental Practitioners Association (DPA) said: 'The DDRB seems to assume no responsibility for difficulties in NHS access.

Year after year we have tried to explain to them that dentists are motivated to either join or leave the NHS based on comparison with similarly skilled groups and also the disparity in terms and conditions between the public and private sectors.

Pay is a vital element of the NHS package, yet year after year it is cut in real terms.

The new contract is sufficiently unattractive and uncertain without this further clear signal that financial penalties are to be imposed year after year by below-inflation awards.'

While Brian Levy, president of the DPA said 'With the RPI at 3.2 per cent, this recommendation can only be viewed by NHS dentists as another pay cut. This will further reduce our members' ability to accept and treat NHS patients.'

Derek Watson, chief executive officer of the DPA, claimed that the Review Body is 'hopelessly confused about how to set wages to retain dentists in the NHS'.

He added: 'Four years ago they used the doctors' increase. Three years ago they used the Av-

**'The government has broken its promise to provide a comprehensive dental service to the nation'**

*Derek Watson*

erage Earnings Index. Then they used the Hospital and Community Health Services sector where dentists are salaried and have their expenses fully reimbursed. This year they have undercut even that award. No wonder high street dentists are choosing to do less NHS work! The government has broken its promise to provide a comprehensive dental service to the nation in return for the high levels of tax and national insurance paid.'

The British Dental Association (BDA) echoed the DPA's concerns.

The 0.21 per cent rise is based on a formula that, taking estimated decreased expenses into account, suggests GDPs will actually see a 1.5 per cent increase in net incomes.

However John Milne, chair of the BDA's General Dental Practice Committee (GDPC), said: 'Sadly, the basis of the formula which suggests that the increase might amount to 1.5 per cent in real terms does not take account of the effect of the devaluation of sterling and its effect on the prices of equipment and materials that are largely manufactured overseas.

'These expenses, and dentists' ability to access the finance necessary to meet them, are both adversely affected by the recession.'

He added: 'We appreciate that a measure of financial restraint is necessary in the current economic climate. Clearly, eco-

invest in their premises and equipment to deliver the highest quality care to their patients.'

The problems many patients have faced accessing NHS dentistry in recent years have been well documented.

Mr Milne claimed that the 'solution to those problems is to build confidence in the future of NHS dentistry by properly supporting our current NHS practitioners, and sending a positive signal to newly qualifying dentists about the future of NHS dentistry.'

He said: 'This settlement will do neither of those things.' ■

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## ‘Extraction film’ on the short-list

A film, which helps prepare dental hygiene and dental therapy students, for the procedure of teeth extraction in young children, has been short-listed for an award.

The film, which was produced by the University of Portsmouth eLearning team in partnership with Hampshire Primary Care Trust, has been short-listed for an award at the Learning on Screen Awards.

It was made because students are often anxious before their placements in paediatric day surgery. The film shows in detail, the whole procedure of children being anaesthetised, and having teeth extracted and features interviews with a dentist, an anaesthetist and nurses who talk about minimising the impact of surgery.

Richard Hackett, head of media production at the University of Portsmouth and the film’s director, called it ‘fantastic news’ and said: ‘I am pleased that my team has been part of a project which aims ultimately to improve dental health in Portsmouth. Many students have no prior knowledge or experience of the dental care environment, and this video provides a way of visually introducing the work of a dental care unit, the paediatric patient, the

range of skills they will gain there and the staff who will support their learning.’

At Queen Alexandra Hospital’s Poswillo Dental Care Unit, which features in the film, out of 992 patients having teeth extracted in 2008, a total of 846 of these were children. The aim of the film, ‘Dental Anaesthetics in Portsmouth: A Preventable Experience’, is to prepare students for their placements, but the underlying message explains how surgery can be prevented if children and parents are better educated about dental care. The University of Portsmouth has already taken big steps to improve dental health in the city.

It is home to The School of Professionals Complementary to Dentistry (SPCD) – the first of its kind in the country, which has developed courses to address skills shortage in the professions complementary to dentistry.

The Learning on Screen Awards, organised by the British Universities Film and Video Council (BUFVC), celebrate and reward excellence in the use of moving image, sound and related media in learning, teaching and research.

The award winners will be announced at a ceremony in London this month. [DI](#)

## Step by step treatment planning

The entire process of treatment planning for aesthetic dentistry is to be showcased at this year’s Clinical Innovations Conference. The conference, which is in its sixth year, takes place on 15–16 May at the Royal College of Physicians, in Regent’s Park, London.

The much sought after speaker, Dr Ian Buckle, will be lecturing on ‘Aesthetic Dentistry From Start To Finish’. The lecture will cover the entire process of treatment planning to ensure that patients have a great experience, with excellent results. Dr Buckle will lead delegates through a step-by-step guide to treatment planning, through a comprehensive and straightforward ‘treatment planning matrix’.

Dr Buckle will demonstrate in his lecture how accurate and complete diagnosis, treatment planning and case presentation requires a high level of clinical expertise and customer care. The lecture will show how this ‘treatment planning matrix’ effectively incorporates the whole field of modern aesthetic dentistry, including a study of occlusion to promote optimum patient well-being. Treatment options will integrate restorative and orthodontic treatments, so that dentist and patient can find the most suitable and effective solution.

Dr Buckle runs a private practice with Dr Liam McGrath at Buckle & McGrath Dental Practice in Thornton Hough, Wirral, which provides patients with comprehensive aesthetic and implant treatment. The team provides a concierge service to patients, and uses the latest technology to give patients a ‘smile trial’ to ensure that they are always delighted with the results of their treatment. Dr Buckle is a member of several prestigious industry bodies, including the British Academy of Cosmetic Dentistry, the British Dental Association and the Association of Dental Implantology.

Internationally renowned, Dr Buckle is also a member of the American Academy of Cosmetic Dentistry and was the first international faculty member of the Dawson Academy – founded to promote high quality and predictable dentistry with a special focus on occlusion and the condition of the temporo-mandibular joint.

As senior clinical instructor for the New York University Rosenthal Institute (where he completed his MSc in Aesthetic

Dentistry), Dr Buckle instructs dental professionals in London, New York and Palm Beach.

A spokeswoman for the CIC said: ‘This is an unmissable chance to discover the key to excellence in aesthetic dental treatment. Bringing together

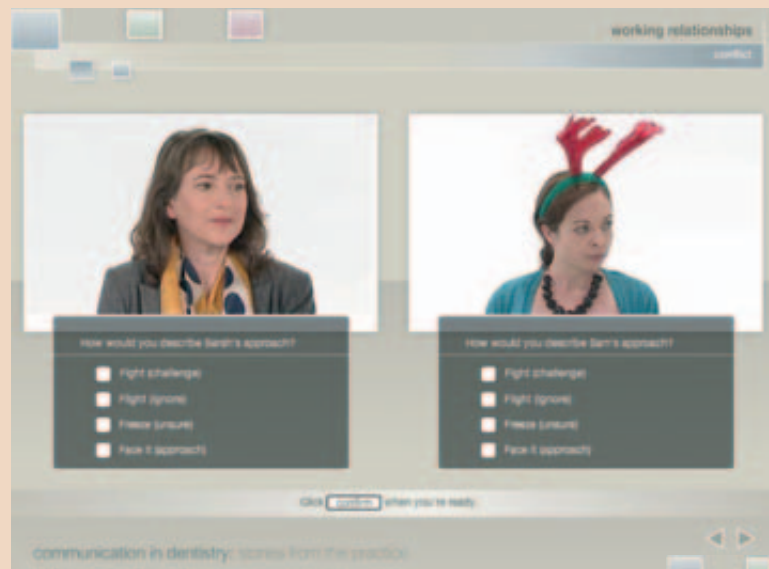


This is an unmissable chance to discover the key to excellence in aesthetic dental treatment.

the world’s finest dental professionals in the aesthetic and restorative dental field at a delightful venue in the heart of London, the Clinical Innovations Conference 2009 represents the leading light on the forward-thinking dentist’s calendar. Delegates are advised to book their place today, to avoid disappointment.’

For more information please call Smile-on on 020 7400 8989, email [info@smile-on.com](mailto:info@smile-on.com) or visit [www.clinicalinnovations.co.uk](http://www.clinicalinnovations.co.uk) [DI](#)

## Three new modules join the pack



together, to suit individual requirements. Focusing on the key areas in which effective and reliable lines of communication are absolutely vital, these three modules will help the practice continue to develop working systems, that will ensure patients receive the best possible standard of service, and that all relevant information is recorded to protect the practice medico-legally.

A spokeswoman for Smile-on said: ‘Communications in Dentistry is an example of how cutting edge technology and informative content come together to

Learning resources provider, Smile-on, has joined forces with Dental Protection Lim-

ited and is launching three new modules for its Communication in Dentistry programme.

Modules 4 to 6 of Communication in Dentistry will be launched later in the year.

Module 4 will look at complaint handling and dealing with difficult patients

Module 5 will explore consent and communicating choices and module 6 will look at recording communications.

These modules, which support a flexible approach to learning, can be taken separately or to-

meet the educational needs of dental professionals. Modules 4, 5 and 6 continue to promote effective and reliable working systems to help practices enjoy greater success and safeguard themselves from legal action.’

For more information please call 020 7400 8989 or email [info@smile-on.com](mailto:info@smile-on.com) [DI](#)

### International Imprint

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# GDP UK round-up

## February was the busiest month ever on GDP UK with more than 1.1 million pages generated by thousands of visitors

Even after so many years of running the site, there are always differing topics that people find to raise, discuss and have diametrically opposite views. One example was when one colleague, well past retirement age, posted some clinical photos showing how he had helped an elderly patient, and how satisfying it was to do so. He was pleased he hadn't ceased work. Another thread was started by a dentist of a similar age, who had been to a CPD lecture about the oncoming changes in cross-infection control guidelines, and was pleased he did not have to deal with all the issues thrown up by the presentation just heard. We probably all know colleagues who have retired early, and similarly there are some dentists who keep on working through their seventies and even into their eighties.

Other topics which might interest the *Tribune* reader: How much do you pay your therapist? How do you get your dental chair vinyl repaired, as well as personal development plans.

Two particularly entertaining topics attracted many re-

peated visits, and hundreds of replies. The first post concerned a frustrated dentist who was ready to 'punch a patient'. He mentioned the two phrases

that patients use that drive us all mad: 'I hate needles' and 'with those prices, I must be paying for your next holiday'. This led to replies on how to deal with

them with some hated, clichéd phrases.

The second topic started with a post about great names.

A recent BBC article talked about a dentist in the USA called Les Plack. In response, dentists recalled Mr Payne, and one wag told us about his friend Andrew Peacock whose name was often shortened to other versions!

Another favourite dentist name was 'Phil Hollows', and in addition, one poster named his friend Christopher Peter Bacon, known for short as Chris P Bacon. ☐

### About the author



#### Dr Anthony V Jacobs

started the GDP UK emailing list in 1997, and the group membership is now just under 2,000. The list is read in all corners of the UK dental profession as well as by laboratories, and the trade and dental industry. Qualifying in London in 1979, Dr Jacobs is now in partnership with Dr Stephen Lazarus, practicing at 406 Dental in Manchester. He enjoys his profession, and takes pride in providing both simple and complex gentle dentistry, as well as caring for families in a relaxed atmosphere. Dr Jacobs has a long-term commitment to continuing professional development, both for himself, and for the profession in general through his mailing list. He has been a member of the British Dental Association (BDA) since 1975, and is presently chairman of the Bury and Rochdale Oral Health Advisory Group, as well as vice chair of the Bury and Rochdale Local Dental Committee (LDC). Dr Jacobs also sits on the committee and helps to organise the annual conference of Local Dental Committees.



## Fresh Ideas

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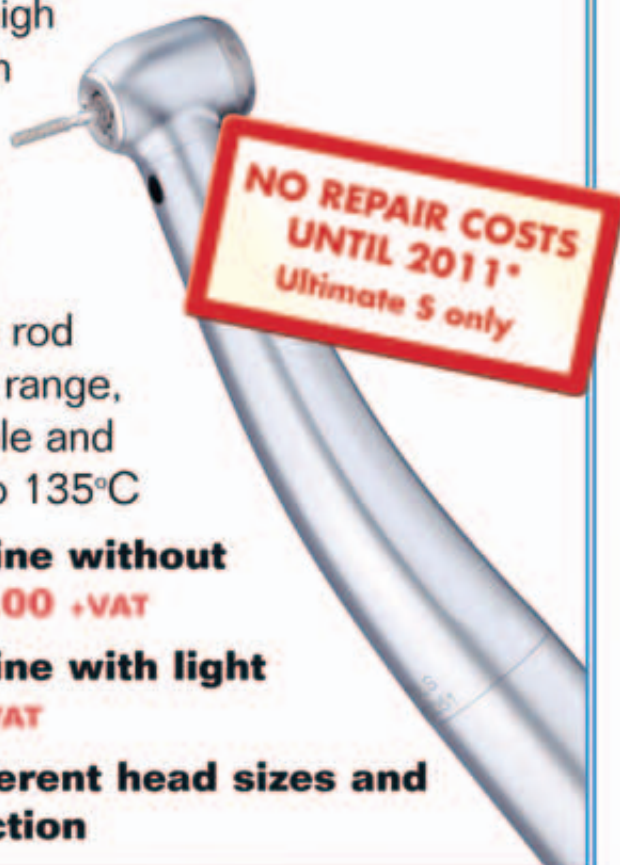
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## Pregnant woman denied free treatment

A dentist in Northern Ireland is refusing to give a pregnant woman the free dental treatment that she is entitled to during her pregnancy.

The woman from Derry is expecting her first baby. She claims that her dentist has refused to treat her for free because she is already registered at the surgery as a private patient.

All pregnant women are entitled to free NHS dental care with their maternity exemption cer-

tificate. So after informing her dentist, she was pregnant, she expected to receive her treatment for free.

However the woman was informed she was not entitled to free dental care as she was not registered with the surgery as an NHS patient.

'Pregnant women are always being told they should look after their teeth, that's why they get free care in the first place. But what's the point in offering free

dental care if no dentists will take you on?' she said.

The surgery told her to look for an NHS dentist who would give her free treatment. The woman, who said she has always been a good, paying customer claimed she has been 'left really upset'.

However the surgery claims that as the woman is registered as a private patient, they do not have to offer her NHS treatment, even if she is pregnant. [D1](#)

## Competition alert!

ThermaCare has launched a competition offering *Dental Tribune* readers the chance to win an ergonomic chair, as well as four weeks supply of ThermaCare heat wraps worth £150.

The latest single-use self-heating wraps can be applied directly to the lower back and neck and shoulders, and provide eight hours of continuous, consistent deep penetrating heat.

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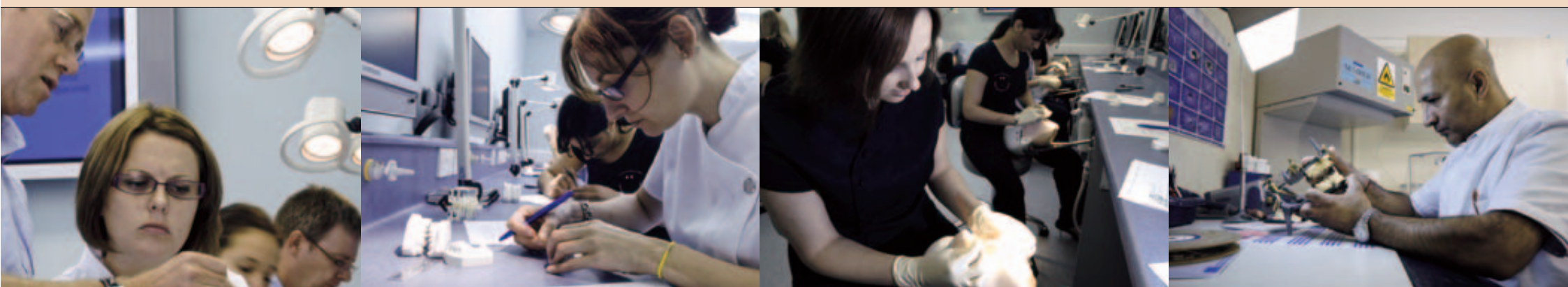
shoulders, simply answer this question:

Who starred in the 1995 film *Heat* with Al Pacino?

- A) Robert Downey Jr
- B) Robert De Niro
- C) Robert Redford



Please email your answers to [Joe@dentaltribuneuk.com](mailto:Joe@dentaltribuneuk.com) with competition in the subject box or send them to the following address: Joe Aspis, ThermaCare competition, 4th floor, Treasure House, 19-21 Hatton Garden, London, EC1 8BA [D1](#)



# Postgraduate Dental Education

The Postgraduate Dental Education Unit (PGDEU) is one of the UK's leading dental education centres offering an established portfolio of courses for qualified dentists who wish to develop their knowledge of the latest methods, equipment and techniques in implant dentistry and orthodontics. The wide range of programmes on offer are delivered by leading professionals, academics and researchers using a wide variety of educational tools.

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# Extractions on the rise

The number of people in the UK who have had their teeth pulled out under general anaesthetic, has gone up by 30 per cent in the last four years, according to new figures.

Figures obtained by the Liberal Democrats have revealed that over 175,000 people had teeth extracted under general anaesthetic last year, up by 40,000 in four years. The figures, revealed in answer to a Parliamentary Question, show that 175,447 people had teeth extracted under general anaesthetic between 2007-8, 44,287 of these were children aged 6-18 and 14,246 were children under 5 years old. The Liberal Democrats blame this rise on the NHS dental contract which was introduced in 2006.

Shadow Health Secretary, Norman Lamb said: 'This extraordinary number of people needing their teeth extracted un-

der general anaesthetic could well be the result of the appalling access to NHS dentistry. The dental contract was supposedly designed to improve the situation, but the staggering rise in tooth extractions proves the massive failures of this botched initiative.' He called the crisis in NHS dentistry 'one of this government's most shameful legacies.'

Although the rate of extractions increased throughout the four-year period following April 2005, it quickened after the new contract for NHS dentists was introduced. In 2005/06, the year before the new contract, the number of extractions stood at a little more than 149,100. Two years later it had risen to just over 175,400 – an increase of 18 per cent. Last year, a report by the Health Select Committee found that patients were having teeth pulled out needlessly as a result of the dental contract.

MPs warned that the new system of payment for Units of Dental Activity (UDA) was leading dentists to carry out more extractions or refer people to hospital rather than carry out complex, time-consuming treatment such as caps. They claim it made it more profitable for dentists to take a tooth out than to try to save it with complex treatments such as crowns or bridges.

The Commons Health Select Committee found that the number of complex treatments such as crowns, bridges and dentures had fallen by 57 per cent since 2006, at the same time as the number of extractions were rising, according to the new figures.

However an NHS spokesperson warned that 'it is very important to put these figures in context'. He said: 'In England there are about four million extractions carried out by dentists in



high street practices every year, which is similar to the number before the introduction of the new contractual arrangements.

General anaesthetics were removed from the high street setting from January 2002, following the publication of 'A Conscious Decision: a review of the use of general anaesthesia and conscious sedation in primary care' in 2000. Prior to that, many

more general anaesthetics were provided in primary care. So overall there has been a massive reduction in the use of general anaesthesia in relation to tooth extractions, which is welcome news, because it has improved the safety of dentistry for patients.' He added: 'There has been a rise of about 40,000 in hospital based extractions over a five year period (equivalent to around two per dentist given that there are around 20,000 dentists). In the context of the total of four million extractions in primary care, this represents a one per cent increase over five years.

Virtually none of these cases attended through A&E departments so it would be wrong to say that the rise was due to people not getting access to dental services, as they had been referred by a dentist. It is possible that some of these referrals came from private practices - we do not have figures on that, but it would be wrong to assume automatically that all referrals were from NHS dentists.' □

## Free conference for dentists

A free conference is being held to help primary care trusts and dental practitioners implement schemes for Dentists with Special Interests.

The Faculty of General Dental Practice (UK) is running the conference with the Department of Health and Oxford Dental Deanery. The conference will run at BMA House, London, from 10am to 4pm on Friday 3 July. There is no charge thanks to funding from the Oxford Dental Deanery.

The aim of the conference is to help primary care trusts (PCTs) and dental practitioners understand the Dentists with Special Interests (DwSI) scheme and the commissioning process in order to implement a DwSI service. It will familiarise visitors

to the conference with the contracting process between PCTs and dentists and share examples of good practice when developing a DwSI scheme.



The conference will also give dental professionals an insight into the unique nature of prison dentistry

It will also give dental professionals an insight into the unique nature of prison dentistry.

The programme will include presentations from the Deputy Chief Dental Officer, Sue Gregory, a PCT commissioning manager and a DwSI. The afternoon will include two concurrent workshops; Dr Liana Zoitopoulos, president of the Association of Prison Dentistry UK, will lead a session on prison dentistry and related special interests, the second will share experiences of setting up schemes in various specialties.

For further information, please email [fgdp-education@rc-seng.ac.uk](mailto:fgdp-education@rc-seng.ac.uk) or telephone Anna Schüle, assistant development officer, on 020 7869 6772. □

## More questions for the accused

A dentist in Northern Ireland, accused of murdering his wife and his ex-lover's husband is to face new police questioning, a magistrates court heard.

Dr Colin Howell, 50, from Castlerock, who is also charged with drugging and indecently assaulting a number of women, is to be interviewed about 'other matters', according to North Antrim Magistrates Court in Coleraine.

Howell, who has 10 children, is in custody charged with the murders of his wife Lesley, 30, and Trevor Buchanan. Their bodies were found in a car filled with carbon monoxide fumes in Castlerock in May 1991.

Howell appeared in court by video link from Maghaberry Prison, where he is being held

on remand. His next hearing is due on April 26 but district judge Brian Archer said he would have to appear in person after saying that before that, police wanted to interview him about 'other matters'.

Howell's ex-lover Hazel Stewart, 45, from Coleraine, who is also charged with the double murders – Trevor Buchanan was her first husband – appeared in court. She had been granted bail when she and her co-accused were first charged with the two murders two months ago.

Howell, has had his registration suspended by the General Dental Council for 18 months. Howell, who had surgeries in Ballymoney and Bangor, is seen as one of the foremost dental practitioners in Northern Ireland. □

## GDC looks for applicants

The General Dental Council is looking for people to sit on its new Investigating Committee.

The Investigating Committee is part of the General Dental Council's (GDC's) procedures for dealing with allegations over a

dental professional's fitness to practise. The Committee considers papers prepared by Fitness to Practise caseworkers, and makes a decision on whether further action is needed.

The GDC have decided the Investigating Committee should in future be independently appointed, following the government's White Paper: Trust, Assurance and Safety – the regulation of health professionals in the 21st Century. It is now advertising in the national and trade press in an effort to reach as many potential applicants as possible.

GDC chief executive Duncan Rudkin said: 'This is hard and largely

thankless work. It's not glamorous. It's not high profile. It can be demanding and repetitive. But it is important and it is worthwhile.

It's important to the patient who's summoned up the courage to make a complaint about something they feel has gone badly wrong with their dental care. It's important to the professional who feels unfairly under attack. And it's worthwhile to the public, whose safety and confidence in dental professionals may be at stake, whether or not they've heard of the GDC and its Investigating Committee.'

To apply, please go to: [www.protecting-patients.com](http://www.protecting-patients.com). You can also call 020 7227 0890. The closing date for applications is noon on Thursday 30 April 2009. □

## Seaside town gets a new NHS dentist

A seaside town in Lincolnshire is finally getting an NHS dentist after waiting for one for two years. The new dental surgery will be opening at the Marisco Medical Centre on Stanley Avenue in Mablethorpe at the end of the month.

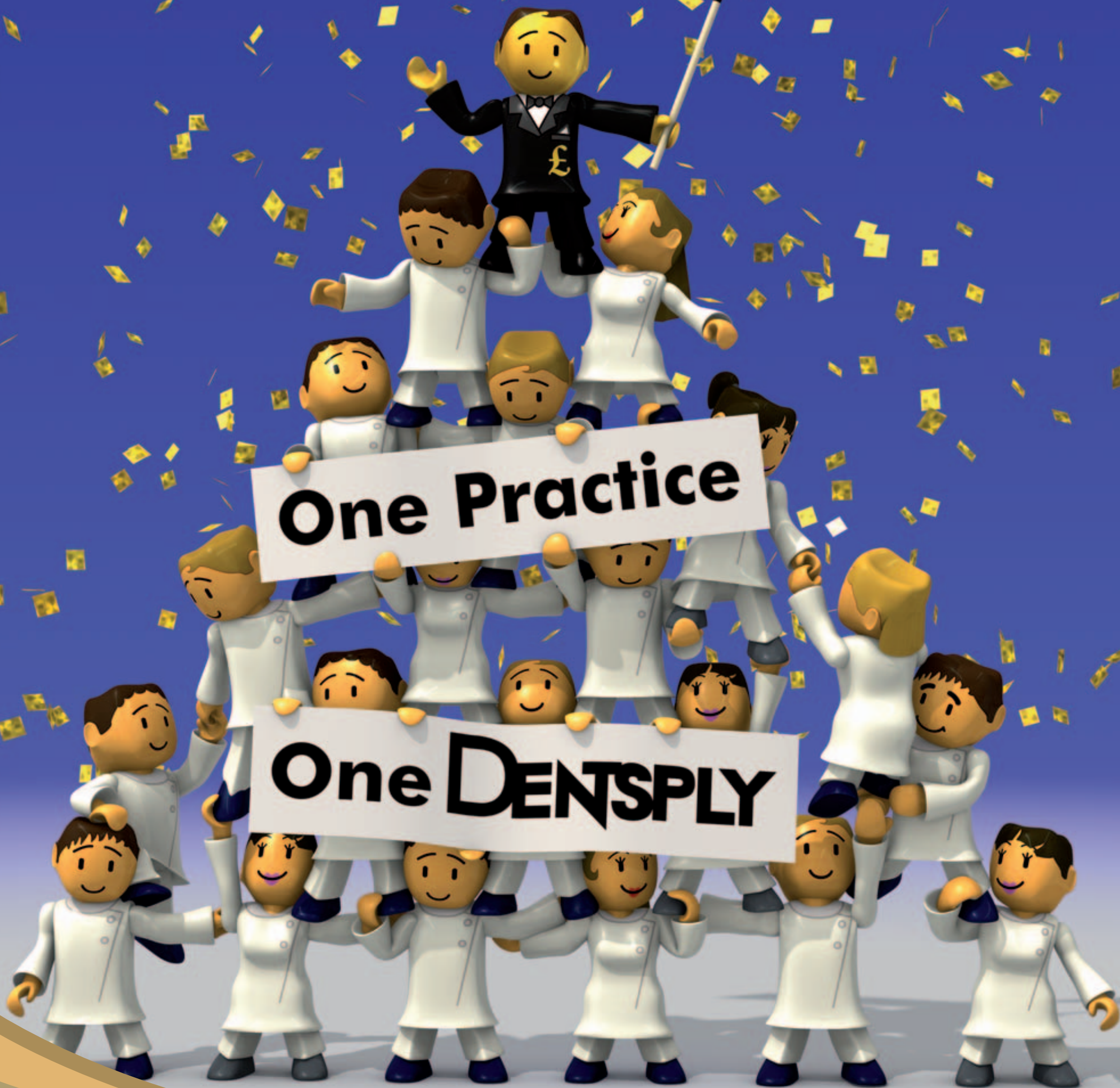
Di Pegg, head of contracting for NHS Lincolnshire, said: 'We are delighted to have contracted with Oasis Dental Care to provide NHS dentistry for the people of Mablethorpe.'

The local mayor, Margaret Rolls called it a 'great relief' and said: 'This is the best news for Mablethorpe for a long time.'

More than 4,000 people on the NHS Lincolnshire waiting list will be offered treatment at the practice, under a contract agreed between NHS Lincolnshire and Oasis Dental Care. All patients on the NHS Lincolnshire dental contact list will be guaranteed a place at the practice. □



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## Swiss-made Finishing Burs And Polishers



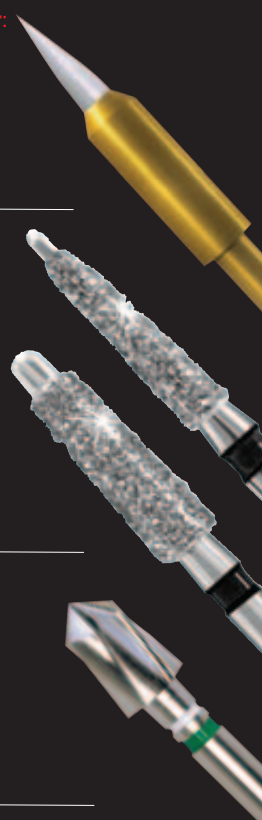
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## News & Opinions

# Chameleon teeth stains

Stains on teeth are often mistaken for signs of decay, according to new research.

A study of 200 private dental patients found that in over 60 per cent of cases, stains that were hard to remove were mistaken for decay.

The 'false decay' was only found using an advanced technique that cleans teeth with a blast of fine abrasive particles.

Dental researchers looked at a particular 'premolar' situated between the front and back teeth and found signs of decay in 78 per cent of cases.

But 65 per cent of them turned out to be false alarms when they were looked at again, using the CrystalAir abrasion technique, instead of mirrors and scrapers.

The research suggests that stained teeth may be causing dentists to carry out unnecessary drilling.

Dr Robin Horton, from the Wayside Dental Practice in Harp-

enden, Hertfordshire, who co-led the study, claimed that 'traditional dental check-ups have led to unnecessary dental treatment for millions of patients.'

It is used in conjunction with a laser probe that can detect hidden deep decay by shining a light beam through the tooth.



The CrystalAir abrasion technique blasts away dirt, debris and stains using a narrow stream of aluminium oxide particles propelled by helium.

The research found that using the two systems together, was found to be 70 per cent more accurate, in picking up decay than traditional techniques. [DT](#)

# GDC rolls out the workshops

The General Dental Council will be running revalidation workshops at this year's British Dental Association conference.

The workshops will be held at the conference in Glasgow which runs from 4-6 June.

A spokeswoman for the General Dental Council (GDC) said: 'We want to give dental practitioners another chance to say what they think about our plans on this important topic and inform our decisions on how we move forward.'

Patients need to have confidence that the professionals

providing their dental care have not only shown that they are up to standard when they first join our registers, but can show that they remain up to standard over the course of their working lives. Dental professionals will do this by revalidating their registration on a regular basis.'

The workshops will be held on Friday 5 June at 9.30am and repeated at 11.30am in Boisdale 2 at the Scottish Exhibition and Conference Centre.

Dental professionals will be able to find out how revalidation will affect them and give their

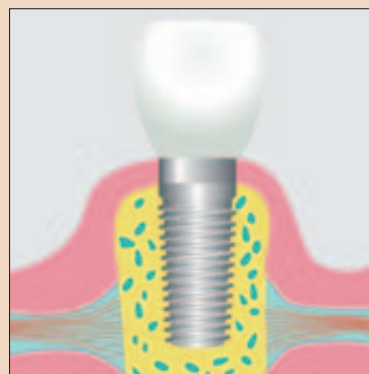
feedback on the GDC's revalidation proposals.

Dental professionals will need a conference pass to attend the sessions, and they can book their workshop place in advance.

The GDC's Revalidation Working Group is currently running feasibility pilots of a framework for revalidation for all dental professionals.

For those unable to attend the workshops, the GDC is also running an open consultation on revalidation: <http://www.gdc-uk.org/News+publications+and+events/Consultations/> [DT](#)

# Part-time implant dentistry course



This didactic study programme of 48 days will be broken into two levels and held one day per month over a period of four years.

Level 1 during years one and two will concentrate on building evidence-based knowledge and involve patient treatment under direct supervision.

Level 2 during years three and four will be spent consolidating all the previously learnt information.

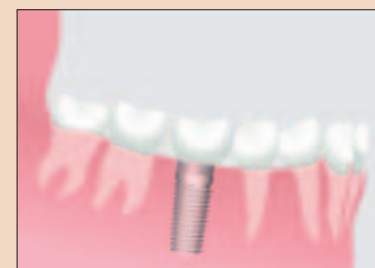
Knowledge and skills will be extended in order to carry out advanced procedures such as bone grafting and sinus lift procedures.

Lectures and seminars will be interactive with live surgery and hands-on procedures. A portfolio

and written assignments will need to be completed.

The programme will be led by Dr Dev Patel with specialist mentors including, Dr Wail Girgis, Dr Carl Manhem and Dr Pranay Sharma.

For further information, please contact Dawn Mifsud, implant course administrator on 020 7905 1261, email [d.mifsud@eastman.ucl.ac.uk](mailto:d.mifsud@eastman.ucl.ac.uk) or visit [www.eastman.ucl.ac.uk/cpd](http://www.eastman.ucl.ac.uk/cpd) [DT](#)



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# Raising our standards

In the second of this two-part feature, Mr Almir Bajramovic explains how Clark Dental shaped his new practice

The space we selected for the practice was part of a newly built shopping centre that was built on the spot where, prior to their demolition, Victorian houses had stood, so we had no planning issues. I was amazed at how easy it all was. When I approached the powers that be at the shopping centre and told them that I wanted to have four surgeries, they said 'yes, that's fine.' I repeated my request, just in case they had misheard me. They said yes again! Because the car parking was adequate for such an ambitious plan, permission was granted, and we could get to work without any red tape.

Our plan with Estetica Dental Clinic is to create a full service dental clinic in an environment that is functional, tailor made to be a dental clinic and to serve a patient to its full potential. We have created an environment in which our patients feel comfortable and relaxed as well as our dental team. Therefore making it a great place to be a part of.

room for sterilisation and storage, accessible from the back of the surgery, the treatment space not only looks great, its layout also promotes gold-standard Infection Control – a must for any modern practice.

We wanted patients to come here for in-house treatments, veneers, implants and oral surgery,

→ **DT** page 10



Practice makes perfect!  
With Clark Dental

## Effective communication

Matt Rowleson from Clark Dental was extremely supportive and superb to deal with, our communication was great from the word go. It took us less than an hour to make a decision in respect of design and layout of our surgery as well as choosing the right equipment.

What made a whole thing a lot easier was that Clark Dental has helped us set up our first practice seven years ago, which is an extremely successful mixed practice and has come in the top five per cent in our area. I can only praise Clark Dental (the whole team), everyone was extremely supportive and helpful throughout each stage of this project.

## Attention to detail

For instance, not only did Clark Dental support us in our one of a kind concept, the company's experts also took sterilisation and storage into account when designing the surgery. With a separate



Surgery design and implementation that inspires dreams

Key to the creation of your perfect surgery is the precision planning provided during the design phase, teamed with state-of-the-art equipment from leading manufacturers such as Adec, Anthos, Schick and Apex Cabinetry and a commitment to after-sales support. Proud of its accomplishments as a market-leading supplier, Clark Dental is delighted to see that the philosophy upheld for more than 30 years, that exceptional personal service, offering the very best advice and treating customers 'like family', remains the ideal that drives efficiency, innovation and business success for those who have chosen Clark Dental to help make them their perfect practice.

To learn more about how our outstanding range of equipment and services can make your perfect practice, call: **01268 733 146**

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