Dental Tribune

The World's Dental Newspaper · United Kingdom Edition

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News in Brief

Mammoth joke?
A Red Cross charity shop in Umeå in northern Sweden has received an unlikely donation. Quite unlike the usual donations of clothes or decorations the team of volunteers were given two sets of teeth from a prehistoric mammoth. They received the gift on April 1st and thought at first that it was an April fool's joke. The teeth, which were in possession of a resident at an elderly resident's home who had passed away, are to be checked out by the Swedish Board of Agriculture; if they are not of any monetary value then the charity shop will be allowed to display them.

Art and science unite
Art and science have united for a project needing 12,000 baby teeth to decorate a "coral castle". The idea, which came from a meeting between Professor Sara Rankin, a biologist at Imperial College London, and the artist Gina Czarnecki, is aimed to inspire debate about adult stem cells. They say arguments about stem cells are focused mostly on the ethics of using embryos and that some scientists are trying to grow new teeth using dental pulp in milk teeth. Children are being asked to donate their teeth to the project, called Palaces, which will then create a magical sculpture out of them. The children won't miss out however on the tooth fairy as they will be given an IOU toothfairy token in return for their baby teeth. The artwork will go on display at the Bluecoat in Liverpool in December and then move to the Science Museum in London next year.

Teen hits high notes
A talented teenage singer who was diagnosed with oral cancer when he was just ten years old, has realised his dream of singing again. Eddie Masih was left with severe paralysis on one side of his face after undergoing operations to remove the tumour, which made it very difficult to sing. But he was determined to sing again and Eddie recently came third in a World Music Radio competition. Having been encouraged by people's positive feedback and comments on social networking sites Eddie is now more determined than ever to try and forge a career in music and is looking forward to doing more gigs and attending the X Factor auditions in the near future.

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Time for a re-call

See low risk patients every two years, dentists are reminded

Dentists are being reminded of their duty to adhere to the National Institute for Health Clinical Excellence guidelines for dental appointment recalls. One point that has caused debate is that dentists in England are reportedly seeing patients more than they need to. According to the briefing, this is in breach of their government contracts.

NICE guidelines state that adult patients should be recalled between three months and two years, *"based on a risk assessment, taking into account a checklist of risk factors, such as alcohol and tobacco use"* whilst the recommended interval for children is between three and 12 months.

The guidelines also state that *"the new dental contract, which will be based on registration, capitation and quality, and remove the need to meet a UDA allocation, is likely to make the implementation of the NICE guidelines easier."*

According to reports, England's CDO, Barry Cockcroft, has sent copies of the new briefing to all dentists, stating that the figures from April to September last year show that 13 per cent of patients are being recalled for checks less than three months apart, and that 58 per cent of patients are seen at three-to-nine month intervals – "which means that 71 per cent of people are re-attending within a nine-month period".

It added that: "Ensuring patients are given an appropriate recall interval is a professional and ethical requirement and helps patients to maintain good oral health."

A spokesperson for the BDA said: "The NICE guidance on recall intervals represented a significant change for dentists and patients alike. Six-monthly check-ups have been the backbone of NHS dentistry since its formation.

"The opportunity to see healthy patients to detect disease before it was serious enough to produce symptoms and to institute a regular programme of preventive advice was the norm; therefore it has taken time for patients and the profession to adjust to this change.

"Some patients still have an expectation to be seen six-monthly.

"As you know, the guidance states that the appropriate interval will depend on an individual's clinical and risk factors- and according to CDO's letter, the dentist will take a patient's views on board before making a final decision, so there is an element of 'agreeing this between patient and dentist.

"Many patients want to see a dentist more frequently (either to pick up problems early, such as gum disease, or for reassurance about their oral health) and dentists have to change patient habits as well.

"The BDA agrees that recall intervals need to be tailored to the individual and based on the risk status of the patient. There are a wide range of risk factors to decide upon the recall interval, including the following major ones:

Smoking or tobacco use, excessive alcohol use, cardiovascular disease, bleeding disorders, anti-coagulants, immuno-suppression, diabetes, glucose medications, phenytoin, acid reflux, lack of fluoride, high caries in mothers and siblings, recent and previous periodontal disease, high sugar intake, high acid intake, new decay, anterior fillings, root caries, heavily restored dentition, mucosal lesions, poor oral health, plaque retention factors, low saliva flow, tooth wear, no fluoride, poor attendance pattern, and people with special needs.

"The guidance doesn't necessarily clarify, 'how many?' of the risk factors or 'how bad,' these need to be to achieve an 'at risk' status, so interpreting what is an appropriate recall period for a given patient may not always be clear cut." DT

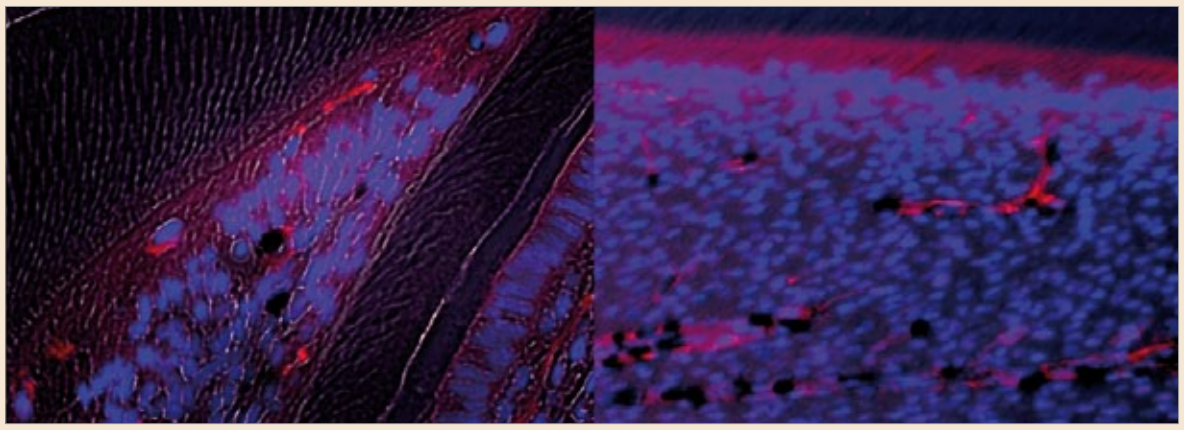
New stem cell research

Scientists from King's College London have uncovered the first genetic evidence that shows cells found on the surface of blood vessels can act as stem cells to assist in both organ growth and tis sue repair.

The study, funded by the Medical Research Council, is published today in the journal, *Proceedings of the National Academy of Sciences* (PNAS).

Up until now it has not been possible to show that a blood vessel (perivascular) cell can transform into a different cell in vivo (in animals), but this study shows for the first time that they can in fact act as stem cells in this way.

Perivascular cells are scattered throughout the blood vessel walls and are involved in the first response to tissue damage, as an increase in blood supply travels to the site of the damage. Therefore the number of these cells is naturally increased at the site. As these cells are present in most human tissue, they could be utilised to provide an effective natural mechanism for organ and tissue repair.



The researchers carried out experiments in rodent incisor teeth, which continuously sharpen themselves by the shearing action of their tips. As tissue is lost during sharpening, this must be continuously replaced. The experiment showed that perivascular cells act as stem cells and differentiate into specialised cells when needed. The team found that when a tooth is damaged, specific new tooth cells (odontoblasts) are made by these perivascular cells to regenerate the tooth. DT

Secretary of State for Health to address British Dental Conference and Exhibition

Secretary of State for Health, Rt Hon Andrew Lansley CBE, *(pictured)*, will address the 2011 British Dental Conference and Exhibition on Thursday 19 May, it has been confirmed this week. Mr Lansley will speak at 11am on the first day of the event, which takes place at Manchester's Central Convention Complex.

Delegates at the event will have the opportunity to hear first-hand from Mr Lansley about major reforms to dentistry in England. His appearance will come at a pivotal time for dentistry as pilots intended to develop a new dental contract begin. Commissioning arrangements, too, will be in the spotlight, as discussions about the establishment of a new national commissioning board that would be responsible for dental care continue. Mr Lansley is expected to participate in a question and answer session following his address, which replaces the previously-advertised appearance by Parliamentary Under-Secretary of State Lord Howe.

Dr Susie Sanderson, Chair of the British Dental Association's Executive Board, said: "We are delighted to be welcoming the Secretary of State to Manchester for the 2011 British Dental Conference and Exhibition. Dentistry in England is in a period of transition that we hope will witness the replacement of the flawed 2006 dental contract with a system that works better for patients and dentists alike. Significant changes to commissioning arrangements that will see dentistry commissioned by a national board, rather than primary care trusts, proposed in the Health and Social Care Bill, are also being debated.

Dentists from across England attending the event will be keen to learn more about the Government's proposals." DT

Special service award to civil servant

Jerry Read, Head of Oral Health and Dental Education at the Department of Health (DH), was honoured by the Faculty of Dental Surgery and the Faculty of General Dental Practice at their joint Diplomates Ceremony held on 1 April 2011, receiving a Special Service Award to recognise his outstanding contribution to the faculties and to dentistry as a whole.

In the citation given by Professor Derrick Willmot, the Dean of FDS, it was noted that Jerry has risen rapidly through the ranks at the DH, taking responsibility for many aspects of dental and oral health including the development of mandatory continuing professional development for dentists and dental care professionals. He was appointed Senior Principal Civil Servant in 1999 and is currently leading on oral health promotion and dental education.

Professor Willmot added that: "one of Jerry's most notable achievements was his tireless and successful work over many years to promote water fluoridation in the UK."

Russ Ladwa, Dean of the FGDP(UK), said: "Jerry Read has played a key role in improving the oral health of the nation during his career at the DH. His help and advice to dental professionals and DH officials over the years has been invaluable and highly regarded."

The Special Service Award, an inscribed medal bearing the arms of The Royal College of Surgeons of England, is presented only to individuals inrecognition of their outstanding service to dentistry and the dental faculties. DT

Dentist jailed in UK

Vinisha Sharma, 37, who worked as a dentist for the NHS in Britain, has been jailed for three years after falsely claiming to possess dentistry degree from an institute in Amritsar.

Following a complex investigation by the NHS Counter Fraud Service Sharma was sentenced at the Wolver hampton Crown Court after pleading guilty to seven counts of forgery.

Over a nine year period Sharma earned almost 230,000 pounds while working on the basis of the false Bachelor of Dental Surgery degree, which she claimed to have completed at the Sri Guru Ram Das Institute for Dental Sciences and Research in Amritsar.

Her deception was eventually uncovered following claims that she had removed the wrong teeth from a patient.

Judge Amjad Nawaz described Sharma's offences as 'pre-determined and deliberate' breaches of the public's trust.

Reports quoted him saying: "It does seem to me that the level at which this offending took place and the organisation which must have gone behind it in order to obtain the documents, was very pre- determined and, in those circumstances, highly criminal. Much of what, sadly, she was telling people was a lie - that is the sad truth behind the offending in this particular case." DT

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Editorial comment

There is a new scheme concocted by the Government to help them cut red tape and bureaucracy for us poor little folk in the real world. The Red Tape Challenge, launched at the beginning of this month and due to run for two years, aims to look at the 21,000 bits of red tape and regulation across all walks of British life with a view to letting the public have their say on what should stay, what should be amended and what should be consigned to the tape shredder. According to the *Telegraph*, dentists have already availed themselves of this opportunity to voice their displeasure about the CQC. Dentist Ross Hobson is reported as writing: *CQC do not understand that dentistry is a small business and does not have large numbers of staff to spend hundreds of hours completing forms, undertaking useless audits to 'show on paper' that compliance is met. There is far too much reliance on box ticking exercises, and total lack of understanding that professional staff are professionally regulated and work to the highest standards as their commitment to the profession.*

Dental professionals across the country have been calling for an opportunity to our their criticism about the CQC and whether it is relevant to the regulation of dental practice for a long time; here now is a chance to do it. If you feel strongly about the level of regulation and red tape surrounding the dental profession, now is the time to voice it: go to www.redtapechallenge.cabinetoffice.gov.uk/home/index/ DT

Do you have an opinion or something to say on any Dental Tribune UK article? Or would you like to write your own opinion for our guest comment page?

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Proposals should go further – BDA

Government plans for dental public health are targeted in the right direction, but do not go far enough, the British Dental Association (BDA) has warned. While supporting both the broad approach of the plans and some of the specific proposals in the Government's *Healthy Lives, Healthy People* white papers, the BDA would like to see a more ambitious approach to dental public health.

The creation of a target for improving the oral health of five-year-olds, which reflects the Government's stated intention to reduce the level of dental decay in children, is a very positive step, the BDA believes. With a generation of British adults with heavily restored dentitions and complex needs now entering later life, the BDA believes that a target for improving the oral health of older patients should also be set.

The targeting of a reduction in the consumption of specific food products is also supported by the BDA but they believe that a stronger approach to reducing sugar intake would be appropriate.

An issue with the size of the dental public health workforce is also raised by the responses, which warn that more Consultants in Dental Public Health are needed. The BDA believes the expertise of these individuals must be fully integrated into wider public health structures and utilised in the formulation of the proposed Joint Strategic Needs Assessments and Health and Wellbeing Strategies.

A major concern for the BDA is the Government's proposal for a health premium, a proposal it believes would see money pour into areas that are able to demonstrate improvements, rather than those that really need funding to meet the challenge of changing behaviour. Furthermore, the BDA's response challenges Government to ring fence a dental element of the public health budget in order to protect spending on this vital area. DT

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1 Furgang et al, J Dent Res. 2011; 90 (Spec Issue): Abstract 3073.

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Celebrating the future of dentistry

On Saturday 2nd April at the 2011 3M ESPE Dental Student Awards the achievements of the country's brightest young dental rising stars were celebrated.

Guest were welcomed at a drinks reception where the finalists had a chance to network with leading dental professionals as well as the esteemed judging panel. The awards were preceded by a morning on Innovative Solutions for the General Dentist – 2011 and Beyond with speakers including Dr Hein de Kloet, Professor Trevor Burke and Dr Avijit Banarjee and followed by an insightful debate on the future of dentistry from some of the industry's most influential figures. This inspiring and eye-opening debate embodied the theme of the event.

The three categories in the 3M ESPE Student Dentistry Awards 2010-11 were the Award for Innovation, the National Award for Innovation, which went to Laura Cove, from Bristol Dental School, and the Award for Intercalated Studies, which went to Charlotte Currie from Newcastle Dental School.

Both the National Award for Innovation and the Award for Intercalated Studies were judged by an independent panel of leading dentistry experts, including Dr Amarjit Gill, President of the British Dental Association, Professor Nairn Wilson, Dean and Head of King's College London Dental Institute, Professor Trevor Burke and Edward Attenborough, President of the British Dental Trade Association. The judges were highly impressed by the number of entries submitted and the calibre of the students entering across the three categories, which made the judging process both challenging and rewarding.

The winners all received financial support for research projects, electives and intercalated studies.

The awards were open to all third-year students as well as those looking to undertake an intercalated degree in UK and Irish dental schools, through a new dedicated and interactive website, www.3mespe.co.uk/dentalstudents. DT

Winners of the Award for Innovation, Laura Cove, the winner of the National Award for Innovation and Charlotte Currie, winner of the Award for Intercalated Studies together with the 3M ESPE Dental Schools judges; Professor Trevor Burke, Professor Nairn Wilson, President of the BDA Amarjit Gill, John Rafelt from 3M ESPE and Edward Attenborough, President of the BDTA.

Gum disease 'more harmful than diabetes'

New research suggests that gum disease carries a higher risk of causing a stroke than diabetes, and its impact is nearly the equivalent of high blood pressure as a major cause of strokes.

High blood pressure (hypertension) and diabetes (diabetes mellitus) are widely recognised as major risks which contribute to non-fatal strokes (ischemic strokes). In recent years there has been growing evidence of the link between gum disease (periodontitis) and strokes. The latest research indicates that people are twice as likely to suffer a non-fatal stroke as a result of gum disease, compared to diabetes. The data also suggests its impact is equivalent to people with high blood pressure.

The research (see below), was presented at the 89th International Association for Dental Research (IADR) General Session and Exhibition in San Diego last month, is another reminder of the serious impact that poor oral health poses to general health and wellbeing.

Although hypertension and diabetes mellitus (DM) have been two major causes of ischemic stroke, the association between periodontitis and ischemic strokes is still equivocal. Hence, the authors evaluated the association between periodontitis and nonfatal ischemic stroke and compared its impacts with those of hypertension and DM.

A case-control study was performed with 143 hospitalised nonfatal ischemic stroke cases and 214 non-stroke population controls.

After controlling for potential confounders, periodontitis was strongly associated with ischemic stroke. In conclusion it was stated that periodontitis is an evident independent risk factor for nonfatal ischemic stroke and its impact is almost same as that of hypertensionand higher than that of DM. DT

Devon dentist cycles for children's charity

Devon Dentist Andrew Pickering, *(pictured)*, is cycling from Lands End to John O'Groats to raise money for the Butterfly Hospice.

The 100 mile journey, which will begin 14th May 2011, is being organised by Team 900, a team from Devon who hope to raise money and awareness for the Butterfly Hospice in China.

The Butterfly Hospice opens their doors to abandoned children who have less than six months to live, giving loving end of life care when the children need it most.

The Butterfly Hospice was started by Devon couple Alan and Lyn Gould. Since they opened the hospice in April last year they have given end of life care to 18 abandoned babies. With the aid of surgery they have good news for four children who are now well and six who are awaiting adoption.

Andrew has had kind donations and support and wishes to thank all those that have supported him so far. Andrew would like to extend special thanks to Ivoclar Vivadent, Chris Fleet from Fleet Hypnosis and Derek Brunt for Juice Plus, Torquay for their support for this worthy cause.

"We need a lot of support, we need sponsorship for the charity and also we are looking for corporate support for our team while on their journey so that all the money we raise can be sent to Butterfly Hospice."

Andrew can be contacted at Riverview Dental or on his email andrewgdp@hotmail.co.uk Butterfly Hospice www.butterflych.org Registered charity 1116192 DT

Expert witness dento-legal risks

The longstanding principle that an expert witness is immune from being sued was overturned in the Supreme Court decision of Jones v Kaney. Having lost their immunity, experts are now exposed to the risk of being sued in respect of evidence given in court, says Dental Protection.

Kevin Lewis, Dental Director said: "Time will tell if the removal of expert witness immunity will lead to a significant increase in claims against expert witnesses. Members of Dental Protection are protected by an indemnity that extends to expert witness work and we will be closely monitoring the impact of this recent decision."

"As a matter of good practice, expert witnesses should follow the relevant guidelines and rules, including the Civil Procedure Rules and the General Dental Council's guidance. Provided they follow these guidelines and standards, allegations of negligence can be rebutted."

Mr Lewis added: "We would advise members who are involved in expert witness work to keep us fully informed about the type and extent of professional work they are doing, so that they have access to the appropriate indemnity at all times." DT

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Widening access to dentistry

How many 16-year-old students have set their sights on becoming a dentist? Some youngsters with that ambition face particular difficulties. These include students from low socioeconomic groups and those studying at institutions with below average results in national exams. Yet many such students have the talent and dedication to make excellent dentists.

On Tuesday March 15th the Dental Institute at the University of Leeds delivered a new 'Becoming a Dentist' information session to provide some help to 92 West Yorkshire students from groups under-represented in the profession. For example 59 per cent of them had home postcodes within the most deprived areas of the UK according to the index of multiple deprivations. A similar proportion came from families where neither parent had attended university.

The programme the students received included talks designed to increase their insight into dentistry, as well as information about the admissions process, and advice about meeting selection criteria. Four staff members and six dental students delivered the talks.

The feedback from those who attended was outstandingly enthusiastic. Everyone rated the event good, very good or excellent. Comments included "it made me more confident and motivated"; "It was all useful"; "brilliant and insightful".

Following the success of this new venture the Dental Institute at Leeds hopes to develop and extend this form of targeted support. The goal is to ensure that the dental student body is representative of the communities it serves whilst at the same time maintaining or improving academic and professional standards. DT

92 students hear about dentistry from Leeds Dental Institute

Robot ate my molars

Student Daniel Raabe, a former PhD student in the Queens School of Engineering at the University of Bristol, has been awarded a prestigious science prize after he designed a 'chewing robot' to help understand the wear and tear of human teeth.

Daniel has also been awarded the Paul Roell Medal in the prestigious 2010 Zwick Science Awards for his PhD work in the area of dental materials testing.

There were 53 entries from 16 countries competing for the prize.

Working in collaboration with the Department of Oral and Dental Science, researchers at the University of Bristol's Department of Mechanical Engineering created the robot, which mimics the action of a human jaw. Currently, clinical tests of new types of crowns and other dental fittings, are usually tested in human mouths and they are often time consuming and by the time a new material has been evaluated the market has often moved on.

The UK currently spends approximately £2.5b each year on dental materials, which either replace or strengthen teeth; however a lack of an adequate method of field testing is hindering dental development.

Reports have stated that Dr Kazem Alemzadehv, senior lecturer in the Department of Mechanical Engineering at the university, came up with the concept after seeing aircraft simulators using similar movements.

The design and development of the chewing robot was carried out by Daniel alongside Dr Andrew Harrison, senior lecturer in the Department of Mechanical Engineering.

Dr Tony Ireland, a tutor at the Dental School, has also been involved in the development and testing of the robot.

Mr Raabe said to reporters: "By reproducing natural bite forces and movements, the chewing robot can help improve and accelerate the process of developing new dental restorative materials that may someday be found in a person's mouth." DT

'Looks like a Candle'

TECH-Naissance Introduces denturevault™, have produced what has been described as a "revolutionary dental storage and cleaning container that 'Looks like a Candle'".

After recognising an increasing demand for new hygienic storage solutions for retainers, TMD night guards, snore guards, dentures, and even partial dentures the device, which was revealed at the 2011 International Dental Show in Cologne, Germany, has been designed so people can discreetly clean and store their removable dental appliances.

Until now, there has been little choice for storing and cleaning dental appliances and traditional methods of storage and cleaning have included the typical horseshoe shaped plastic case, conspicuous sonic cleaners, and the unsightly "teeth in a glass" method.

However, denturevault™, *(pictured)* uses an elegant design to create a faux-candle and this discreet method of concealment gives the user complete autonomy in having their appliance always within reach, overcoming the embarrassment and inconvenience of traditional methods. DT

Patient software launched

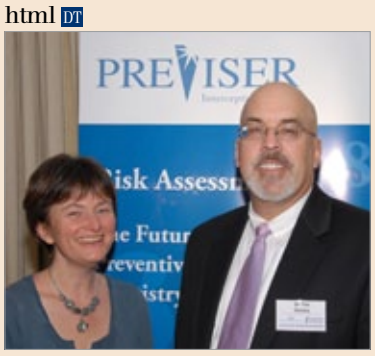
During a seminar at the Royal College of Physicians in London, Dr Tim Donley helped launch myDentalScore, the new interactive software tool.

Dr Donley told Liz Chapple, Director of Oral Health Innovations Ltd, that he believed myDentalscore would help motivate and inform patients and make them more likely to consult a dentist.

He said: "I have been waiting for something like myDentalScore for some time now. How great it is that the general public has an opportunity to gauge their risk for oral disease. This can only help motivate the throngs of people with unmet dental needs to seek care."

MyDentalScore consists of an online questionnaire which asks about dental hygiene and history as well as lifestyle and delivers a score along with encouragement to discuss the findings with a dentist. It is now available for dentists to brand to their practice and add as a link to their website.

For more information, or to invest in myDentalScore for your website, go to www.previser.co.uk/products/mydentalscore.html DT



Liz Chapple and Dr Tim Donley

Dentist celebrates milestone on top of the world

After visiting a charity's table at a conference, Dr Joseph Pawlik, a Mantua (USA) dentist, decided that for his 60th birthday he would travel to the other side of the world and provide care to children in Katmandu, Nepal.

"I picked the farthest place I could go, the most extraordinary place," *Aurora Advocate* quoted the dentist as saying. "I would go again at the drop of a hat. It was really rewarding and interesting."

Heading out with Global Dental Relief, Pawlik ventured for the first time outside of North America to the bustling city of Katmandu.

Staying in a Buddhist monastery, the team of dentists treated children from the monastery's school and orphanage, and also children from the community.

"Most of these kids have never seen a dentist," he was quoted as saying. "A lot of them are in good dental health. It's surprising because they don't have toothbrushes, but then, that's probably because they don't eat all that junk food."

In cases where there were cavities present, Pawlik described how the treatment was to fill them or extract the tooth if it was bad.

"It just breaks your heart when you have to take out their front teeth," he was quoted as saying. "Over here, you can fix them. There's crowns. There's implants."

The team of dentists spent a week in the city, where Colgate provided free toothbrushes for the children. They then trekked to the mountains for two weeks, intending to treat children in the villages there.

Having been invited to return to Nepal again, Pawlik said he is determined to go back as soon as he has the funds.

"The kids are unlike any other kids in the world," he was quoted. "This is the first time anyone has poked around in their mouth, and they don't make a move. They're very disciplined... they're the sweetest kids in the world." DT

Around the world in 80 webinars

Elaine Halley on research, reading and falling by the wayside

Well – lo and behold I managed to pass the Unit 6 module! This was the module all about research which the University of Manchester decided we needed to learn sooner rather than later so that we have some insight into research before commencing our dissertations. (I am not entirely sure I know the difference between a thesis and a dissertation…probably shouldn't admit that at this point.)

Great intentions

So – after the trauma of getting all the cases for Unit 3 in plus the end of Unit 6 assignment in, the pressure has eased off and we are back to webinars and electronic feedback forms. I did start off with great intentions of getting my posterior cases chosen and written up as I went along – but that has fallen by the wayside already. In fact, it was the very presence of a deadline for this blog which spurred me on to catch up with the webinars. In my defence, this illustrates the flexibility of this course which does adapt to your life – as long as you remember there are deadlines which creep up silently but surely!

The first webinar in Unit 4 was Trevor Burke on Posterior composites and I fooled myself into the belief that I had watched this live – until my children asked me 'what was that man saying?' and I realised I had been distracted into family life and had to re-watch most of it when I was alone. And worse than that – apologies Wolfgang – as I was listening to your webinar, my husband has banned me from listening to any more webinars without headphones as he complained that he could hear the 'voices' throughout the whole house! And I thought current concepts in bonding would be fascinating to a farmer!

'I must confess to never having heard of the University of Dental Medicine in Jena – and as it has recently been voted the number one of 31 Universities in Germany, I stand shame-faced as to my ignorance'

Latest controversies

So – Dr Wolfgang Richter's presentation on advanced composite techniques, introduced some of the latest controversies in the science which can influence us in clinical practice – including whether we should be disinfecting our cavities with chlorhexidine to prevent the reactivation of matix metalloproteinases. These MMP's are thought to be the reason why composite bond strengths degrade over time.

After presenting three or four papers telling us that we should do this, he then presented a paper which found that there was no benefit and that with a self-etch system, the bond strengths could be drastically weakened – the overriding message being that we must remember to be cautious and critical of research before jumping to change our clinical practice. An excellent illustration of how important it is for us to research claims independently before changing our clinical routines.

University of Jena

This was followed by an inlay/onlay lecture from a very cheerful Dr Harald Kuepper from the University of Jena in Germany. My postgraduate education to date has been mostly US based and so I must confess to never having heard of the University of Dental Medicine in Jena – and as it has recently been voted the number one of 31 Universities in Germany, I stand shame-faced as to my ignorance. Perhaps Dr Kuepper has never heard of Perth, Scotland either..?

Time flies

This unit, there has been very little notice as to when the lectures have been taking place. This is very frustrating as although it is entirely possible to watch the webinars live, you do miss the opportunity to ask questions. Although all the lecturers provide an email contact – there is something about the contemporaneous nature of the chat box which is missing after the event. Of course, the second intake of students will have started their first term. I hope it is all going smoothly for them – I remember it well and how time flies when you're enjoying yourself! I cannot believe we are now over a year into our studies...DT

Prof Trevor Burke

Dr Wolfgang Richter

Master of Science in
Restorative & Aesthetic Dentistry
'The Best of Everything'

About the author

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Regulations, regulations

Tony Jacobs discusses the hot topics of the dental profession

Feelings have been riding high regarding the methods and conduct of the regulators of the dental profession, something that was just not the case a few years ago. To me it is not the fact the levels of respect to institutions have changed, it is that so many methods and operations of our regulators have become illogical these days, against the morals and values of so many of the profession.

I feel the GDC have done some things to address dentists' feelings, the ARF has risen, but there seem to be steps being taken to prevent the New Year's administrative removal from the register if bank account or cheque payment goes astray. On a much more important level, an august and respected body such as Dental Protection has gone on record to criticise the methods of the Professional Conduct Committee of the GDC. This article, in a DPL publication, was read widely, discussed and dissected and colleagues on GDPUK definitely made their feelings known about the GDC's conduct Committees and the way cases are taken forward and tried.

Talking of regulators, this part of my GDPUK column does not even start to capture the professions feelings of dismay and fear of the lack of both credibility and trust in the CQC. In the week the CQC sent out 4,000 emails to the wrong people, it became more and more clear that no-one can believe a single word communicated by the CQC, either by email, on paper or on the telephone. Their goalposts and not just moving, they are on a perpetual roundabout! The words "not fit for purpose" must be the most common phrase when CQC is mentioned.

At least GDPUK has a role in allowing colleagues to share news as it develops, to reassure one another the nightmare may soon be over, and to share the responses framed by the various representative organisations. Those organisations themselves may base some of their response on the outcry on GDPUK, but they will never tell us that. It must be reassuring for the leaders of those organisations to review the vox pop as shown on the site, and to develop policy which echoes this.

There has been so much else to follow this month; here is a small sample.

A variety of surgery keyboards have been discussed, some are more clinical appearance, and there is a wide variety of prices, for a few pounds [almost disposable] to the higher quality shiny white ones. One was recommended which is not just washable, it's dishwasher proof.

A puzzling topic, which did not get a full answer, but it seems a worldwide regulation that pilots cannot fly for 24 hours after having an LA. Have you heard of this? No-one seems to know why.

We have discussed the change in the pattern of the genders of students admitted to dental schools. We wonder how this will affect the profession in the coming years, and this lead a number of colleagues to reminisce about their days as students. One GDPUK colleague was awarded a chair as Associate Professor, and a friend of his from student days remembered an answer given by the now professor as to treatment of a snail track ulcer in the palate – "cut it out with an air rotor" said the star pupil! DT

About the author

Tony Jacobs, 54, is a GDP in Manchester, in practice with partner Steve Lazarus at 406 Dental. Tony founded GDPUK in 1997, and the website now has over 11,500 unique visitors each month, who make 50,000 visits and create over 2 million pages on the site every month. Tony is certain GDPUK.com is the liveliest and most topical UK dental website.

Once upon a time...a title story

Roger King Cambridge GDP and Ex-Wellcome Research Associate in the History of Medicine at Cambridge University, sheds some light on the Dr title debate

There seems to be some confusion in the profession regarding the story of how the use of the title 'doctor' by the medical profession came about, and around the historical reasons for and against its use by dentists. I'd like to try to make the historical context of this now-contentious title a little clearer.

Throughout the seventeenth, eighteenth and into the nineteenth centuries, three distinct types of practitioner offered 'orthodox' (whatever that may mean - the subject of a different debate) cures: the physician, the apothecary and the surgeon. For the purposes of this title debate, it is the physician and the surgeon that concern us.

The physician's services were generally offered to those with the means to pay well. He had attended a school of medicine, which in England meant Oxford or Cambridge until relatively recently. In order to gain entry to this medical school, he (and, for this period, it was only 'he') first needed to hold a higher degree, the granting of which would require him to defend an original thesis. This degree had been in existence for many centuries as the doctorate, a word taken from the latin docere, to teach. Thus, the physician was a doctor before he even entered medical school. As a theoretical man, working on an intellectual level, actual physical contact with the patient was rarely required.

The surgeon's services were employed by a wider population. The surgeon was a practical man - he had served a long apprenticeship, usually seven years, to a master and performed a masterpiece (with no written examination) to gain his right to join the Barber-Surgeons Company. This was a guild, which took its place alongside other liveried companies, such as those of the Goldsmiths, Coopers and Drapers. On 2 May 1745, royal assent was granted to the formation of the new, independent Company of Surgeons.

Physicians, then, took the title of doctor because they already held a doctorate. Surgeons, on the other hand, held no degree and retained the title of 'Mr'. It can still be noted that medical surgeons revert to the 'company' title with some degree of pride, setting them apart from their physician colleagues.

Dentistry's origins lie within surgery. Around the start of the eighteenth century, a small number of French surgeons, centered around Paris and epitomised by Pierre Fauchard, began to specialise: teeth, eyes and childbirth were prominent areas of surgical practice to which they turned their attentions.

Physicians, or 'doctors', have retained their original title out of courtesy. Dentists never held this title historically - the university-conferred dental degree post-dates that time when 'doctors' ceased to hold bona-fide doctorates by some margin.

So the debate will continue. Me? I hold a doctorate - in history - but my patients still call me 'Mr'. DT