

DENTAL TRIBUNE

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Smile design

A practical approach
by Dr Sushil Koirala

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Geiselhöringer speaks

Global head of NobelProcera
about the digital revolution

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Extra

The latest news
from FDI head office

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FDI closes Annual World Dental Congress in Singapore World Dental Federation appoints new president and invites to Brazil

Daniel Zimmermann
DTI

SINGAPORE/LEIPZIG, Germany: Singapore has a long and successful relationship with the dental profession. The city-state hosts the oldest running dental school in Asia; the first implants were placed here by Dr Henry Lee almost 20 years ago. Nowadays, the island boasts a workforce of over 1,000 dentists that are educated internationally and make use of state-of-the-art equipment.

Large international manufacturers, such as 3M ESPE and Straumann, have taken advantage of Singapore's position as a trading hub and serve most of their customers in the Asia Pacific region from here. With IDEM Singapore, the city also hosts a dental trade show every two years that attracts dental professionals not only from Singapore, but also from other countries in Southeast Asia.

It was no surprise that the FDI World Dental Federation, which represents the interests



Past president Dr Burton Conrod and officials from the FDI, SDA and Colgate-Palmolive watching the oral health screenings of schoolchildren in Singapore. (DTI/Photo courtesy of the FDI World Dental Federation)

of dentists globally, decided to organise yet another one of their Annual World Dental Congresses (AWDC) in Singapore. An AWDC was held here in 1990 and the FDI has been cooperating with the Singapore Dental Association (SDA) in organising IDEM Singapore's scientific programme for almost four years.

This year's congress was held in conjunction with Singapore's Oral Health Month, an annual campaign that aims to improve oral health by offering free dental screenings to every Singaporean. According to the latest Adult Oral Health Survey conducted island-wide in 2003, almost half (46 per cent) of the respondents indicated that they

visit the dentist at least once a year; the average mean DMFT was 8.1 and about 10 per cent of the respondents were caries free. An SDA spokesperson said that more than 200 private dentists would be participating in the screenings that would take place on weekends over the course of September.

→ DTI page 3

DT Asia Pacific does well in readers' poll

Dentists in Asia find *Dental Tribune Asia Pacific* to be up-to-date and applicable to their practice, a readers' poll conducted at the FDI World Dental Congress in Singapore has revealed. More than 85 per cent of those interviewed said that they would recommend the newspaper to a colleague. Topics readers were most interested in were science & research (24 per cent), followed by world news (21 per cent) and news from Asia (20 per cent).

According to the poll, readers would like to read more about restorative dentistry and practice management, as well as paediatrics and special needs dentistry.

Dental Tribune Asia Pacific was one of the first local editions published by the Dental Tribune International (DTI) media group. The first edition appeared in April 2002. Currently, the newspaper reaches over 30,000 dental professionals in 25 countries, including Singapore, Malaysia, Hong Kong, the Philippines and Australia, to name a few. DTI



Formerly blind Sharron Thorton, USA (middle), joins a press conference in Miami after doctors implanted a tooth in her eye to make her see again. (DTI/Photo courtesy of the Bascom Palmer Eye Institute) ► INTERNATIONAL NEWS, page 5

Chinese say no to swine flu pandemic

China has recently begun a national swine flu vaccination campaign, as Beijing authorities gave shots to thousands of students planning to take part in National Day celebrations on 1 October. The Health Ministry hopes to vaccinate 65 million people by year's end. DTI

DYI dentistry in Australia on rise

More poor Australians are resorting to do-it-yourself dentistry because of lengthy queues for public dental services. According to a survey by the National Health and Hospital Reform Commission, half a million people in the country are currently on public dental waiting lists. DTI

Laser dentistry gets boost in India

The local government of Gujarat, a federal state in Western India, has announced a new initiative to incorporate laser dentistry into the dental curriculum of all governmental dental colleges. The move comes after a clinical guide for oral laser applications was released at the 3rd National Conference on Oral Laser Applications held in Ahmedabad earlier this month.

According to Gujarat Health Minister Jaynarayan Vyas, the project will be supported by the Society for Oral Laser Applications, an affiliate organisation of the International Society for Oral Laser Applications in Vienna (Austria). If the initiative succeeds, government authorities expect to appoint dental laser specialists in each of the state's districts soon. DTI



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Asia News

“The value of salivary bio-markers for systemic disease is one of the final frontiers”

Interview with Dr David Wong, USA

In the past six years, saliva has risen to centre stage for disease detection, monitoring and even health surveillance. *Dental Tribune Asia Pacific* in co-operation with *FDI Worldental Daily* spoke with UCLA's Dr David Wong at this year's World Dental Congress in Singapore about salivary diagnostic toolboxes and how they could be utilised for detecting systematic diseases.

WDD: In recent years, the role of saliva for the detection and monitoring of diseases has risen to centre stage. Can you summarise the latest findings for us?

Dr David Wong: Seven years ago, the National Institute of Dental and Craniofacial Research (NIDCR), one of the 27 institutes at the US National Institute of Health (NIH), made a visionary investment to turn salivary diagnostics into a clinical reality. The outcomes of this scientific investment are what constitute the recent excitement and clinical potential for salivary diagnostics. We now know there are multiple diagnostic alphabets in saliva to define the diagnostic coordinates of oral and systemic diseases. Point-of-care diagnostic technologies are soon to be in place to permit a drop of saliva to detect and monitor diseases at the dental practice.

How exactly does saliva work as a biomarker?

Biomarkers are defined as cellular, biochemical, and molecular characteristics by which normal and/or abnormal processes can be recognised and/or monitored. The salivary glands (major and minor) secrete approximately 1.5 litres of saliva into the oral cavity daily, carrying with it health/disease information (biomarker information). The sources of these biomarkers can be disease sites or the salivary glands themselves can produce disease-informative surrogate biomarkers. The salivary gland system can be viewed as a local anatomical organ that is poised to monitor local and systemic diseases. The good news is that the biofluid secreted (saliva) can be obtained non-invasively, painlessly and without embarrassment to the patient—no needles and no cringing.

Which salivary diagnostic toolboxes are at hand or currently in development and how could these be incorporated it into the clinical practice?

Current salivary diagnostic toolboxes include the diagnostic alphabets (proteome, transcriptome, micro-RNA and microbial) and point-of-care diagnostic technologies. Integration into clinical practice requires identification of effective clinical application and approval by the Federal Drug Administration in the US.

With the exception of the

Dr David Wong

salivary HIV antibody test, no other salivary biomarker test has reached the FDA-level evaluation. We anticipate that our point-of-care device and biomarkers for oral cancer detection will be evaluated by the FDA in the next two years.

Do oral diseases have any impact on the diagnostic value of saliva?

A number of oral diseases have been evaluated for salivary diagnostic applications, including caries assessment, oral cancer and periodontal disease. Proper control of oral diseases in the study population to control the effect of periodontal disease and inflammation in particular is important.

Thank you very much for the interview. ☐

(This interview is published with permission of the FDI World Dental Federation, Switzerland.)

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← DT Page 1

Visitors were spoilt by this year's scientific programme, which not only featured popular topics like implants, aesthetics and periodontics, but also gave insight into new challenges and developments in dentistry. Among others, the prevalence of oral cancer, salivary biomarkers, and the therapeutic potential of dental stem cells and tissue engineering were discussed. Limited attendee courses were expended to give participants the chance to learn in a more intensive and intimate environment. Auxiliaries and office personnel had the chance to get their hands on the New Patient Experience in a special full-day programme. As one participant put it: "What strikes me about this congress is how it brings together so many different specialist areas in dentistry, all under the same roof."

Although official numbers have not yet been released, exhibitors speaking to *Dental Tribune Asia Pacific* said that visitors' numbers did not meet their expectations. In spite of this, most exhibitors reported increased numbers in sales and business deals. Plenty of new products and processes were introduced, for example surgical instruments and handpieces that now come with built-in and long-lasting LED lights. Nobel Biocare introduced their newest product NobelProcera to Singaporean dentists at an official launch dinner held at the Charlton Hotel. The system aims to combine industrialised production processes with versatile and individualised aesthetics for dental restorations.

In addition, continuing education was offered to trade show visitors through *Dental Tribune* in collaboration with the *DT Study Club*, who held their first online symposium outside the US.

Members of the 2010 Local Organising Committee invited participants to next year's congress in Salvador da Bahia in Brazil, home country of the newly appointed FDI President Dr Roberto Vianna. Dr Vianna, who took over the presidency from Dr Burton Conrod from Canada, received his DDS from the Federal University of Rio de Janeiro in 1965. Since then, he has served in many national and international health organisations, including the World Health Organization and the Latin America Association of Dental Schools.

"I am very happy to lead the FDI as president over the next two years. The organisation is, of course, the voice of dentistry, but more so, it is a means of empowering dentists to think about oral health on another level, for the benefit of the greater population," Dr Vianna said. "I would like to contribute and help spread the FDI message; to accomplish the objectives expressed in our mission. The FDI is a strong organisation that continues to improve."

"I'd like to see us focus on developing our relationships and networks, both across the organisation and outside. I am very happy with the direction we are moving in. Since I became part of the Executive Committee there have been a lot of positive changes—new staff members, the relocation of head office, our Executive Director—and important projects, like the Global Caries Initiative [GCI]," he headed.

The GCI is a collaborative project led by the FDI with the

long-term goal of eradicating dental caries. In July 2009, the Rio Caries Conference was held in Brazil to launch the initiative, and a series of follow-up events are expected over the next ten years. Dr Vianna announced that he would support the GCI throughout his term as president.

Another important advocacy tool during his term will be the new *Oral Health Atlas*, which was launched at the FDI Pavilion in Singapore and

will be available on Amazon UK after the FDI congress. According to Dr Vianna, this will be a landmark publication that will strengthen the FDI's position as a world leader for the promotion of oral-health information by demonstrating the state of world oral health in straightforward language for everybody—from dentists to government delegates to the general public.

Speaking about the 2010 FDI Annual World Dental Congress

in his home country Brazil, Dr Vianna borrowed a phrase from France's national anthem "Le jour de gloire est arrivé" (The day of glory has arrived): "I am very excited to see the AWDC come back to South America, for only the third time in the FDI's history. There has been a lot of breakthrough research and development in Brazil in recent years. Hosting the annual congress will further strengthen oral-health promotion across the region." DT

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Dear reader,



Daniel Zimmermann
DTI

How is your practice doing? If the answer to this question is 'fine', chances are high that you are living in a part of the world where people still visit their dentist on a regular basis. Unfortunately, the same cannot be said for all members of the profession. Latest reports suggest that more and more patients around the world are postponing their dental visits due to recession-related financial problems. In the UK, for example, almost one million less people have had their teeth checked since 2006. More than 60 per cent of 1,000 adults in the US have also cut back on dental visits and similar reports are now coming from Australia.

These numbers are of significant proportions. They not only indicate a considerable loss of income for dentists and perhaps even the closing of some dental offices, they are also a setback for those who are constantly fighting to bring the oral health message into the minds and attitudes of people. Whether these reports are drawing a realistic picture or not, they certainly demonstrate that many people do not consider their oral health as something to watch over at the moment.

Organisations like the World Dental Federation or the WHO have tried to raise awareness for the need of dental care to be an essential part of primary health care services in the last few years. Unfortunately, their achievements could be in vain since governments are changing their priorities and leaving health behind in order to balance national budgets. Therefore, joint efforts of politicians, health care professionals and, up and foremost, dentists are necessary to convince people to invest in their oral health again.

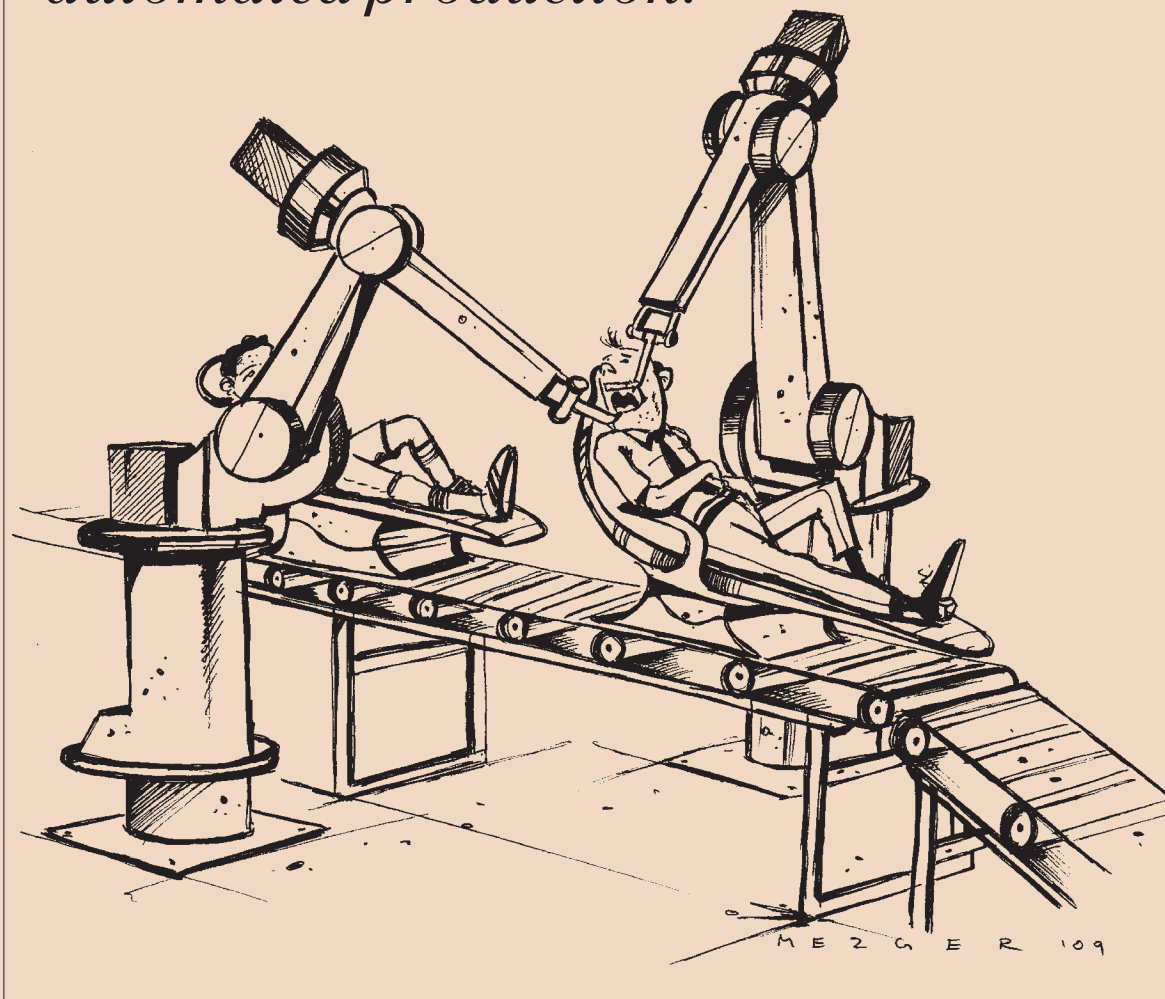
Free dental missions may be a good tool to help a few people but they are like giving lessons to a child that doesn't want to learn. Out of sight is out of mind. [DTI](#)

Yours sincerely,

Daniel Zimmermann
Group Editor
Dental Tribune International

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Dentistry making great strides in automated production.



Stem-cell based dental implants for tooth replacement



Andrea Mantesso
Brazil

Understanding the properties of mesenchymal stem cells is a fundamental goal in stem cell biology and a growing number of studies demonstrate the presence of stem cells in various tooth areas. Dental stem cells have been isolated from the dental pulp of deciduous and permanent teeth, the periodontal ligament, the dental follicle, and

sue engineering and dentistry. For this, two main goals could be achieved: the repair of partially lost dental structure and the creation of a new, complete biological tooth.

Tooth loss is a common consequence of many dental diseases, especially amongst the ageing population. The current replacement methods for tooth loss include artificial dentures and metal implants. This replacement of a naturally occurring physiological tissue with an artificial material has been used in dentistry since antiquity without significant changes to

forming bio-teeth can be complex, as various materials can be used as scaffolds, cell numbers can be varied and alternative methodologies can be used to aggregate these cells.

The use of dental stem cells indicates a new paradigm in dentistry and will revolutionise the way we practise dentistry. In the future, dentists may be able to isolate and manipulate live cells and the entire environment of a dental surgery will be adapted to fit these procedures. Patients will be accorded the opportunity to have fully functional and longer-lasting teeth that perfectly match their existing teeth. Bio-teeth will provide a less invasive and thus better alternative to artificial implants, as the procedure for implanting a small aggregate of cells is simple and will generate an organ with all the necessary tissues, such as the periodontal ligament and the dental pulp. [DTI](#)

(This article is published with permission of the FDI World Dental Federation.)

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On dentine hypersensitivity in Malaysia



Dr Lee Soon Boon
Malaysia

The Malaysian Dental Association (MDA) views the high prevalence of dentine hypersensitivity, reaching 35 per cent of the adult population, in Malaysia with great concern. A two-pronged approach was planned in collaboration with GlaxoSmithKline (GSK) Malaysia earlier this month to address the concern: firstly, by educating the Malaysian electronic and print media on the relevant facts regarding dentine hypersensitivity, in order to ensure dissemination of accurate information of the problem to the Malaysian public for improved preventive and treatment care; and secondly, by inviting international experts on dentine hypersensitivity to speak to Malaysian dental professionals, in order to inform them of the latest preventive measures and effective clinical management of dentine hypersensitivity.

The MDA and GSK Malaysia & Singapore lectured intensively on aetiological factors, such as endogenous and dietary acids, traumatic tooth-brushing, habit and other predisposing factors. Effective combinations of at home use of desensitising dentifrices and an array of in-clinic treatment modalities were highlighted to help patients suffering from dentine hypersensitivity. Measures for the early detection of dentine hypersensitivity and preventive measures to avoid exposure of the dentine layer of the teeth were also advocated to the general public.

It was generally acknowledged that dentine hypersensitivity is not fully appreciated by many dental practitioners in Malaysia, resulting in cases of early or minimal sensitivity not receiving appropriate treatment until they worsen. Thus, it was determined that the MDA, in working towards providing optimal oral health care to the nation, must equip dental professionals with the most up-to-date knowledge and skills regarding the clinical management of dentine hypersensitivity. This will be done in the form of a two-day scientific meeting from 16 to 17 January 2010, at which eminent international experts on dentine hypersensitivity will share their expertise with Malaysian dental professionals. [DTI](#)

Implanted eye tooth helps blind patient see again

First osteo-odonto-keratoprosthesis procedure performed in the US

MIAMI, FL, USA: A 60-year-old patient from the US has recovered her sight after surgeons in Miami implanted one of her teeth in her eye. This surgical procedure was a first in the US and undertaken at the Bascom Palmer Eye Institute at the University of Miami's Miller School of Medicine, where the patient's eye tooth was implanted as a base to hold a prosthetic lens. The patient was blinded in 2000 by the effects of Stevens-Johnson syndrome, a severe adverse reaction to common drugs, causing burning, blistering and sloughing of skin and involved tissue. It also frequently causes blindness, and results in 100,000 deaths per year worldwide.

Dr Victor L. Perez, Associate Professor of Ophthalmology at the Bascom Palmer Eye Institute, and his interdisciplinary team performed a modified osteo-odonto-keratoprosthesis (MOOKP) procedure, a complex surgery that had until now been available only in a limited number of eye centres in Europe and Asia. Developed by the Italian ophthalmologist Prof. Benedetto Strampelli in the 1960s, MOOKP has proven effective as a solution to end-stage corneal disease, in which severe corneal scarring blocks vision and corneal transplants are no longer an option but the eye's internal structures and optic nerve remain healthy.

"For certain patients whose bodies reject a transplanted or artificial cornea, this procedure 'of last resort' implants the patient's tooth in the eye to anchor a prosthetic lens and restore vision," explained Dr Perez.

In MOOKP, an extracted tooth and surrounding bone are shaved

and sculpted, and a hole is drilled to insert an optical cylinder lens. In order to bond the tooth and lens as a bio-integrated unit, they are implanted under the patient's skin in the cheek or shoulder. The eye specialist then prepares the surface of the eye for implantation of the prosthesis, by re-

moving scar tissue surrounding the damaged cornea.

About one month later, mucous material is collected from the inside of the patient's cheek and used to cover and rehabilitate the surface of the damaged eye. In the final phase, the pros-

thesis is removed from the cheek or shoulder and implanted in the eye. The prosthesis is aligned with the centre of the eye, and a hole is made in the mucosa for the prosthetic lens, which protrudes slightly from the eye and enables light to enter the eye, allowing the patient to see again.

"The procedure will help countless of people in the US to regain sight," said Dr Eduardo C. Alfonso, chairperson of the Bascom Palmer Eye Institute. "Thanks to the work of Dr Perez's team, patients in the US now have access to this complex surgical technique." [DT](#)

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To the Editor

Re: 'FDA says mercury dental fillings not harmful'
(Dental Tribune Asia Pacific No. 7+8, Vol. 7, page 5)

Pennsylvania is the second most polluted state in the US, especially in the eastern part of the state. This is due to the large amount of coal burned by power plants, factories, private homes, and the Centralia coal-mine fires. The residents are exposed to more mercury from breathing the air and drinking the water than from the silver fillings. And if all that mercury is leaching out of the fillings, why are they not falling apart? I have some 40-year-old fillings still intact. I've been around mercury for at least 42 years, counting dental school, the Naval Dental Corps and private practice, and do not have any of the symptoms 'the chicken littles of the mercury sky is falling' talk about. I would guess that dentists and dental assistants would have the greatest exposure, why aren't we dropping like flies? ■

Dale C. Resue, USA, 13 Sep., 2009

Head and neck cancer may aggravate periodontitis

Claudia Salwiczek
DTI

HONG KONG/LEIPZIG, Germany: New findings from the US have shown that chronic periodontitis might represent a clinical high-risk profile for head and neck squamous cell carcinoma. The strength of the association was greatest in the oral cavity, followed by the oropharynx and larynx, suggesting the need for

increased efforts to prevent and treat periodontitis as a possible means of reducing the risk of this form of cancer.

Head and neck cancer figures have increased, especially in regions like Southern Asia. Each year there are approximately 400,000 cases of cancer of the oral cavity and pharynx, with another 160,000 cases of cancer of the larynx worldwide, resulting

in approximately 300,000 deaths. The main risk factors for these cancers are tobacco and alcohol use.

The researchers from the University of Buffalo assessed the role of chronic periodontitis on head and neck squamous cell carcinoma, as well as the individual roles on the oral cavity and oropharyngeal and laryngeal sub-sites. They used radi-

ographic measurement of bone loss to measure periodontitis among 463 patients, of whom 207 were controls. When they stratified the relationship by tobacco use, they found that the association persisted in those patients who had never used tobacco.

“Confirmatory studies with more comprehensive assessment of smoking, such as duration, quantity and patterns of use,

as well as smokeless tobacco history are needed,” said Dr Mine Tezal, Assistant Professor in the Department of Oral Diagnostic Sciences in the School of Dental Medicine at the University at Buffalo. “Our study also suggests that chronic periodontitis may be associated with poorly differentiated tumour status in the oral cavity. Continuous stimulation of cellular proliferation by chronic inflammation may be responsible for this histological type.” [DTI](#)

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UK releases guideline on child neglect

Claudia Salwiczek
DTI

COVENTRY, UK/HONG KONG/LEIPZIG, Germany: A new policy urging dentists to check for tell-tale signs of neglect when treating children with severe oral disease has recently been published for the British Society of Paediatric Dentistry. The document, thought to be the first of its kind in Europe, is the result of a collaboration between the University of Warwick, University of Sheffield, and Leeds Dental Institute. It details the numerous factors that need to be taken into account when assessing a child with suspected dental neglect and given guidance on how the dental team should respond.

According to Dr Peter Sidebotham, co-author of the document, there is evidence which indicates that abused children have higher levels of untreated dental disease than their non-abused peers. Many dentists have taken part in child protection training, but still find it difficult to put into practice what they have learned when they suspect abuse, he said.

“I am impressed by how much dentists already do to educate and support parents. But when concerned that a child is suffering, perhaps as a result of missed appointments, I would always encourage them to seek advice from other health professionals experience in child protection and, if necessary, to make a child protection referral,” Dr Sidebotham added.

Dental neglect, which is defined as the persistent failure to meet a child's basic oral health needs, can have a significant impact on the health of a child with consequences including severe pain, loss of sleep, and even reductions in body weight and growth. Additionally, dental neglect can be indicative of a wider welfare picture of child neglect and abuse and the policy states that dentists should refer cases to child protection services if they have concerns. [DTI](#)

European endodontists reorganise in Scotland

Daniel Zimmermann
DTI

EDINBURGH, UK: Delegates at the General Assembly of the 14th Biennial Congress of the European Society of Endodontology (ESE) in Edinburgh have elected former ESE secretary Prof. Claus Löst from Germany as their new president. He will succeed incumbent president Prof. Gunnar Bergenholtz from Sweden at the beginning of 2010. Prof. Löst is currently Clinical Director of the Center of Dentistry, Oral Medicine and Maxillofacial Surgery at the Tübingen University Hospital in Germany.

Delegates were also asked to select a site for the 2013 ESE congress, which has received bids from member societies in France, Portugal and Spain. Furthermore, the Executive Board has proposed the co-funding of a symposium in July 2010 with the Pulp Biology and Regeneration Group of the International Association for Dental Research, which will address the topics of inflammation and regeneration.



ESE, founded in April 1982, is a federal organisation representing national endodontic and dental societies in 27 European countries. This year's congress, which was the second held in the UK (the first was the London congress in 1995), saw a record attendance of over 1,400 endodontic specialists from Europe. [DTI](#)

ESE President Gunnar Bergenholtz addressing delegates. (DTI/Photo Daniel Zimmermann)

AD

New organisation makes dentists 'cone-beam-ready'

The International Cone Beam Institute (ICBI) is a new independent organisation of cone-beam computed tomography (CBCT) experts that aims to provide the highest level of education, training and product information for 3-D technology to dental professionals worldwide.



As a vendor-neutral organisation, it is an industry first for a company to provide information to dental professionals, future imaging centres and vendors at an international level. General information, such as the various cone-beam scanners available in the US and international markets, as well as general information on available third-party software, will be available to everyone without charge. ICBI also provides in-depth and customised vendor analysis to help practitioners understand this comprehensive technology.

Members of ICBI's website (www.exploreconebeam.com) are able to review case studies and gain advice from CBCT experts. They also have access to special consulting services, on-line training and training seminars. In addition, ICBI offers a connection to oral maxillofacial radiologists who can provide reading services to aid in the interpretation of CBCT scans. The organisation also has a blog where users can exchange case studies, ideas and techniques regarding capturing the highest quality images.

The International Congress of Oral Implantologists, the world's largest implant education organisation, fully endorses the ICBI. Partners of ICBI include Dental Tribune International and the Dental Tribune Study Club. [DTI](#)

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Message from the president

The 2009 FDI Annual World Dental Congress (AWDC) in Singapore has come to a close for another year. This year's event ran seamlessly thanks to the tireless efforts of the Local Organising Committee (LOC) and volunteers. I would like to make a special mention of the FDI staff, which has been working in collaboration with the Singapore LOC in addition to re-locating the FDI head office from Ferney-Voltaire, France, to Geneva, Switzerland.

The AWDC brought together 107 speakers from many disciplines of the dental profession to share knowledge and best practices on treatment advances with colleagues from around the world. Congress participants were dazzled with the latest developments in products and equipment at the Exhibition, which featured more than 150 international vendors. During the week, important business meetings designed to set the agenda for global health advocacy took place, as well as the 2009 FDI Elections. Congratulations to Council and Committee members who were appointed during the General Assembly B and Council C meetings (see 2009 FDI Elections). And thank you to outgoing representatives who have dedicated their time and expertise to the organisation: Dr William O'Reilly, Dr Neil Campbell, Dr Mark Goodhew, Dr Claus Munck, Dr Howard Jones, Prof. Martin Tyas, Prof. Reiner Biffar, Mr George Weber and Prof. Martin Hobdell.

The congress provided an ideal forum to further strengthen FDI's relationships with member associations, corporate partners and contributing specialists. During the National Liaison Officer (NLO) Lunch on 2 September, three of our contributing authors to "The Oral Health Atlas" made a brief presentation about the research involved



Dr Burton Conrod passes the presidential chain to incoming FDI President Dr Roberto Vianna. (DTI/FDI)

in compiling this new FDI advocacy tool, which was officially released later that day. I was delighted to learn as well about the Unilever announcement: Unilever has renewed its partnership with FDI on the Live.Learn.Laugh. programme for another three years, to continue developing oral health projects for communities in need.

The Welcome Ceremony this year was a special evening for me. Singapore's Health Minister, Mr Khaw Boon Wan, delivered an inspiring account of the positive improvements to oral health in his country, emphasising as well the need to continue working in collaboration across the region. I will

forever cherish the moment I received the presidential chain from my distinguished colleague, Past-President, Dr Burton Conrod, in a symbolic change of FDI presidency. During his term as president, Dr Conrod has supported important FDI initiatives to increase global awareness about oral health issues, including Live.Learn.Laugh., the publication of 'The Oral Health Atlas' and the Global Caries Initiative. In my Welcome Ceremony speech, I affirmed my commitment to the continuation of these and other FDI activities. Later we enjoyed a colourful performance that took the audience through Singapore's history, represented through dance and music.

Looking at the year ahead we have many exciting projects on the horizon, including

upcoming events for the Global Caries Initiative and the FDI Regional Continuing Education Programme. I feel proud to have been given this opportunity to serve as FDI President, particularly at a time when next year's AWDC will be in my home country. The 2010 AWDC Local Organising Committee has been working steadily towards welcoming us all in Salvador da Bahia next year and I look forward to seeing you there!

Dr Roberto Vianna
FDI President

2009 FDI elections

There were two seats open for election on the FDI Council, including President-Elect, and ten seats open for election on the Committees at the 2009 FDI Annual World Dental Congress. In total, 26 nominations were received for the available positions, with

four nominations for Council positions and 22 nominations for Committee positions.

Congratulations and welcome to the following FDI Council and Committee members who were elected in Singapore.

FDI President-Elect	Dr Orlando Monteiro da Silva (Portugal)
FDI Council	
Councillors	Dr Norberto Lubiana (Brazil)
FDI Committees	
Communications & Member Support Committee	Dr Jun-Sik Moon (Korea) Asst Prof. Dr Nikolai Sharkov (Bulgaria) Prof. Dr S.M. Balaji (India) Prof. Dr Vladimer Margvelashvili (Georgia)
Dental Practice Committee	Dr Ward van Dijk (The Netherlands) Dr Armando Hernandez Ramirez (Mexico)
Science Committee	Prof. Dr Georg B. Meyer (Germany) Dr Claudio Pinheiro Fernandes (Brazil)
World Dental Development & Health Promotion Committee	Dr Jo E. Frencken (The Netherlands) Dr Kevin S. Hardwick (United States)

FDI Policy Statements

The FDI General Assembly adopted three new and nine revised FDI Policy Statements at the 2009 Annual World Dental Congress.

New Policy Statements

- Dentin Hypersensitivity
- Edentulism and General Health Problems of the Elderly
- The Use of Academic, Professional and Honorary Titles

Revised Policy Statements

- The Association between Oral Health and General Health
- Dental Bleaching Materials

- Effect of Masticatory Efficiency on General Health
- Fluoride in Restorative Materials
- Infection Control in Dental Practice
- Post-Exposure Prophylaxis for HBV, HCV and HIV
- Research

The FDI Policy Statements on Dental Unit Water Lines and Tuberculosis and the Practice of Dentistry were withdrawn at General Assembly B and Open Forum 1, respectively.

FDI launches new Oral Health sourcebook

Participants and delegates of the 2009 congress joined incoming FDI President, Dr Roberto Vianna, FDI Executive Director, Dr David Alexander, and authors Roby Beaglehole, Habib Benzian and Jon Crail, at the FDI Pavillion for the official release of FDI's new 'Oral Health Atlas', in commemoration of World Oral Health Day (WOHD) on 12 September, 2009.

The annual WOHD is an opportunity for diverse segments of the population to reflect upon

their own situations when it comes to managing oral health and 'The Oral Health Atlas' is designed to illustrate oral health globally. Using short texts, colourful maps, graphics and images, along with statistics and facts, the atlas presents a global picture of oral health in a visually intuitive and easy-to-understand format.

Following the official release at congress, the Singapore Dental Association announced it would purchase copies of 'The Oral Health Atlas' for dis-



Dr David Alexander and Dr Roberto Vianna with authors of 'The Oral Health Atlas' at the FDI Pavillion in Singapore. (DTI/FDI)

tribution to public libraries across the city-state. Other member associations have demonstrated interest in translating the atlas for readers within their regions.

'The Oral Health Atlas' is published by Myriad Editions (www.myriadeditions.com), which is known for its award-winning State of the World Atlas series. More information about the atlas, including how to purchase a copy, is available at the official website: www.oralhealthatlas.org.