

DENTAL TRIBUNE

The World's Dental Newspaper · United Kingdom Edition

PUBLISHED IN LONDON

March 18-24, 2013

VOL. 7 No 6

News in Brief

Minimum alcohol pricing plan may be scrapped

Conservative ministers are split over proposals for minimum pricing on alcohol, meaning the plans may be dropped. David Cameron supports minimum alcohol pricing and the government has been consulting on a price of 45p per unit. It has been put forward that having a minimum unit price will reduce illnesses and crime related to alcohol. However, according to the *BBC*, pressure has been put on the government to drop plans following disagreement at cabinet level.

GDC re-drafts temporary registration guidelines

The GDC has completed a review of temporary registration and as a result has now re-drafted the guidelines that govern this type of registration. The re-drafted guidelines (which only apply to dentists) are separated into seven sections which cover:

- The definition of temporary registration;
- Posts suitable for temporary registration;
- The responsibilities of applicant when first applying for temporary registration;
- Documents required for temporary registration when applying for the first time;
- How the GDC operates temporary registration;
- Fitness to practise procedures in regard to temporary registration;
- Responsibilities for those involved in temporary registration. The guidelines will come into effect 1 August 2015.

Xfactor finalist sings praises of speedy brace treatment

Former G4 frontman Jonathan Ansell has undergone speedy orthodontics to achieve a smile he's been seeking for seven years. After considering veneers and other adult braces, Jonathan stumbled across Six Month Smiles when he commented on the smile of a colleague, who informed him that he had just completed the treatment. "When I discovered Six Months Smiles I was eager to find out more, and on visiting Aqua Dental Spa I was told that it would work for me and would take the full six months, but I was keen to speed up the process even more so opted to have adjustments every three weeks rather than four. It meant a little discomfort but it was a small price to pay to get the teeth I wanted with minimum downtime. My teeth were straight within around four months and I had a little bonding - so the whole treatment took five months from start to finish. I couldn't be happier with the results."

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Antimicrobial resistance poses 'catastrophic threat'

CMO gives stark warning of a 'discovery void'

Global action is needed to tackle the catastrophic threat of antimicrobial resistance, which in 20 years could see any one of us dying following minor surgery, England's Chief Medical Officer Professor Dame Sally Davies has said.

The stark warning comes as the second volume of the CMO's annual report is published, providing a comprehensive overview of the threat of antimicrobial resistance and infectious diseases.

Calling for politicians to treat the threat as seriously as MRSA, the report highlights a "discovery void" with few new antibiotics developed in the past two decades. It highlights that, while a new infectious disease has been discovered nearly every year over the past 30 years, there have been very few new antibiotics developed leaving our armoury nearly empty as diseases evolve and become resistant to existing drugs.

In addition to encouraging development of new drugs, the report highlights that looking after the current arsenal of antibiotics is equally important. This means using better hygiene measures, prescribing fewer antibiotics and making sure they are only prescribed when needed.

The CMO also states that more action is needed to tackle the next generation of healthcare associated infections, including new strains of pneumonia-causing klebsiella, that will be harder to treat.

Seventeen recommendations have been made, including:

- A call for antimicrobial resistance to be put on the national risk register and taken seriously by politicians at an international level, including the G8 and WHO
- Better surveillance data across the NHS and world-wide to monitor the developing situation

• More work carried out between the healthcare and pharmaceutical industries to preserve existing drugs and encourage the development of new antibiotics

• Building on the success of the NHS in cutting MRSA rates, which have fallen by 80 per cent since a peak in cases in 2005 through better hygiene measures, which should be used when treating the next generation of healthcare associated infections such as new strains of harder-to-treat klebsiella.

Prof Dame Sally Davies said: "Antimicrobial resistance poses a catastrophic threat. If we don't act now, any one of us could go into hospital in 20 years for minor surgery and die because of an ordinary infection that can't be treated by antibiotics. And routine operations like hip replacements or organ transplants could be deadly because of the risk of infection.

The UK Antimicrobial Resistance Strategy and Action Plan will:

• Champion the responsible use of antibiotics – by ensuring NHS staff have the skills, knowledge and training to prescribe and administer antibiotics appropriately.

• Strengthen surveillance – by improving the recording of data on the numbers of antibiotics prescribed and trends in antibiotic resistance, this information can be used by clinicians to change patterns of prescribing. This will help reduce the level of resistance and help ensure patients respond to treatments

• Encourage the development of new diagnostics, therapeutics and antibiotics, for example by continuing to support the Innovative Medicines Initiative (IMI) and other initiatives that encourage scientific research. [Df](#)

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Campaign launched for BDTA Dental Showcase



The 2013 BDTA Dental Showcase marketing campaign has officially launched!

The BDTA is well-known for its exciting and dynamic themes each year and 2013 is set to be another huge success for BDTA Dental Showcase. This year's theme, for the UK's largest dental exhibition, reflects the exciting opportunity the show provides for every member of the dental team to see all that's new in the world of dentistry.

The advertising campaign's creative visually communicates 'Seeing What's New in Dentistry' – one of the key reasons over 13,000 visitors from the profession and trade flocked to BDTA Dental Showcase in 2012. More visitors than ever told the BDTA they came to see what's new in 2012 and BDTA

Dental Showcase 2013 promises to build on this by providing new opportunities to meet one-to-one with over 350 exhibitors, experience hands on demonstrations and product displays by leading dental companies.

A visit to BDTA Dental Showcase 2013 promises to offer visitors the chance to:

- See the latest innovations from the largest selection of exhibitors, with face to face discussion and trial
- Track down the best offers from leading manufacturers and suppliers all under one roof
- Keep up to date with the latest in the world of dentistry
- Find out more about product and technique developments
- Gain CPD through the series

of mini lectures and live theatre demonstrations

Tony Reed, BDTA Executive Director comments, "We're extremely proud that BDTA Dental Showcase continues to be the UK's most popular dental exhibition. It offers visitors the opportunity to see, feel and try new products first hand, as well as helping to drive innovation through the face to face interaction between exhibitors and visitors."

Dental Showcase takes place from 17 – 19th October at the NEC Birmingham. For further information and to register for this year's BDTA Dental Showcase visit: www.dentalshowcase.com now! [DT](#)

Brighton woman named UK Dental Hygienist of the Year 2012

Christina Chatfield scoops two awards at the DH&T Awards

Christina Chatfield opened the Dental Health Spa in Brighton in 2007 following changes to the law that allowed registered members of the dental team, other than dentists, to manage the business of dentistry.

With over 20 years' experience in practice, she has worked amongst major blue chip health companies, including Gillette, Braun/Oral B

Braun Oral-B and Pfizer.

She has long campaigned for hygienists to provide direct access to patients, believing that they should have an option as to where they should be able to seek dental treatment and advice – without a prescription.

Now her work and her surgery have been recognised with two prestigious awards - Best Dental Marketing 2012 and the UK Dental Hygienist of the Year at the Dental Hygiene and Therapy Awards.

Commenting on her awards success, Christina said: "For many years I have had a vision of changing the industry and empowering the patient by making dental hygiene more accessible for all.

"I am passionate about direct access for patients and bringing dental hygiene to the high street of the UK so it is a major honour to have my work recognised in this way." [DT](#)



Christina Chatfield receives her award (B)

Dental nurse wins trip to Africa

On Saturday 2nd March during this year's Dentistry Show, Bridge2Aid announced their competition winner Lyndsay McGrath from Alder Hey Hospital, Liverpool, who has won a sponsored place on their Dental Volunteer Programme (DVP).

Requesting 250 words explaining why individuals think that they should be awarded a sponsored DVP place, Bridge2Aid received many competition entries from many dental professionals.

Standing out from the crowd was dental nurse Lyndsay, whose application outlined: "I have always dreamed of doing something to make a difference to another person's life. I really hope I get the chance to do that. For a person who is passionate about their career, Bridge2Aid is really 'living the dream'."

Competition judges included Chris Barrow (Coach-Barrow) IDH's Alex Handley, ProDental CPD's Rob Dyas, Practice Plan's Nigel Jones and last year's competition winner

Maddie Braithwaite, as well as Bridge2Aid's CEO Mark Topley.

Lyndsay and the B2A Visits Team will now confirm a date for Lyndsay's trip to East Africa. Talking about giving the opportunity to experience DVP, B2A Founder Ian Wilson commented: "I am delighted that Lyndsay's passion for helping others will contribute to the passion of the B2A team, both in Africa and in the UK. I'm sure she'll be an amazing asset. Enjoy it, Lyndsay". [DT](#)



Dental Nurse Lyndsay McGrath

Editorial comment

WEEK ON FROM the announcement of the demise of Clearstep, I am still saddened by the whole situation. I feel for the employees of the company, now made redundant (having been there I know how it feels). I feel for the patients who are mid treatment and

are unsure of what is going to happen. And I feel for the practitioners who are now left to deal with their worried and angry patients, needing to find suitable solutions and counting the cost.

One of the saddest things about the situation came home

to me today, when a copy of the asset catalogue for Clearstep was sent to me. Ten years of build-up and development boiled down to just 148 auction lots. As you read this, the auction will be over and items from 3D printers and scanners, computers, monitors, desk chairs and even down to

a Twin section aluminium extending Ladder, (24ft approx.) will have been bid on, paid for and collected.

I wonder how many auction lots we would all boil down to? [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?

If so don't hesitate to write to: The Editor, Dental Tribune UK Ltd, 4th Floor, Treasure House, 19-21 Hatton Garden, London, EC1 8BA

Or email: lisa@healthcare-learning.com

Monitor decision gets positive BDA response

CONFIRMATION that primary care dentists will initially be exempted from licensing by Monitor, the NHS economic regulator, has been greeted as a victory for common sense by the British Dental Association (BDA).

The intention of the Department of Health to exempt providers of primary medical and dental care holding contracts with the NHS National Commissioning Board from the requirement to hold a Monitor licence has been confirmed in the newly-published *Protecting and promoting patients' interests* – licensing providers of NHS services. The Commissioning Board formally assumes responsibility for commissioning dental care in England on 1 April 2013.

The exemption follows extensive campaigning by the BDA during the passage of the Health and Social Care Act, and was proposed in the Department of Health consultation published in August 2012.

It will, however, be reviewed in 2016/17; a proposal opposed by the BDA in its consultation submission.

Dr John Milne, Chair of the BDA's General Dental Practice Committee, said: "High street dentists in England are already subject to an extensive system of personal and practice-based regulation. The BDA has worked hard to make the case for a proportionate approach, arguing that it was unnecessary to extend Monitor's jurisdiction to the licensing of dental practices. We are pleased to see that we have been listened to and look forward to the exemption being confirmed by the laying of regulations before Parliament.

"The BDA will now continue to make the case for the plan to review dentistry's exemption in a few years to be reconsidered. Conducting a review because a certain point in time has been reached is arbitrary and unnecessary." [DT](#)



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¹ Adult Dental Health Survey 2009, NHS Information Centre for Health and Social Care.

Your chance to win tickets to the Shard

Members of the dental team who register for BDTA Dental Showcase 2013, the largest show in the dental calendar, before the end of March will automatically be entered into a prize draw to win a visit to the tallest skyscraper in the UK! Registration is free of charge.


BDTA Dental Showcase 2013 will be held from 17-19th October at the NEC, Birmingham. Last year the exhibition attracted over 13,000 visitors from the profession and trade, making it the most popular

and best-attended event on the calendar.

This year, BDTA Dental Showcase is focused on helping the whole team see, learn and find all that's new in dentistry. The show is dedicated to offering visitors hands on demonstrations and face to face discussion with the biggest names in dentistry who attend to showcase their largest display of products. The combination of the latest new launches from dentistry brands and special show offers, make it a fantastic time to both research options and

make a purchase. In addition, last year visitors benefitted from almost 5,000 free, verifiable CPD sessions offering a further reason to attend.

Register now for your chance to win 4 tickets to visit the viewing deck of the Shard. The lucky winners will experience the most sought-after attraction in the UK, with views spanning across 40 miles of London.

To register for the UK's largest dental exhibition visit www.dentalshowcase.com now! 



Education, education, education



Education is the key to raising awareness about the risks of mouth cancer

“Research shows that three in four people who have mouth cancer have smoked at some point in their lives.

Most people are now aware that smoking carries serious health risks – but they assume it means lung cancer. They do not always associate it with the lesser known head and neck cancers so we have to keep banging the drum until our message gets through,”


says Dr Vinod Joshi, Founder of the Mouth Cancer Foundation.

One way the Mouth Cancer Foundation is doing that this year is to use National No Smoking Day to shout about a brand new initiative

the Mouth Cancer Screening Accreditation Scheme which aims to educate both dental practices and patients that a thorough head and neck cancer screening can be carried out at routine dental appointments by Dentists in just two minutes.

The Mouth Cancer Screening Accreditation Scheme will recognise dental practices that demonstrate a visible commitment to increasing public awareness of mouth cancer screening to all patients and to establish a documented referral pathway with a local specialist department. The scheme officially launches at

the BDA Conference on Saturday 27th April 2013.

The Mouth Cancer Foundation will accredit dental practices that routinely participate in oral cancer screening. Full membership includes access to a dedicated section of the charity website and FREE one hour CPD element as well as professional development and training modules suitable for all members of the practice team to ensure regular screening benefits practice patients. 

Fluoride in drinking water cuts tooth decay in adults



An international study conducted by researchers at the University of Adelaide has resulted in the strongest evidence yet that fluoride in drinking water provides dental health benefits to adults.

In the first population-level study of its kind in the world, researchers have found that fluoridated drinking water is preventing tooth decay for all adults regardless of age - and significantly for people who have had exposure to fluoride for most of their lives.

Conducted by the Australian Research Centre for Population Oral Health (ARCPOH) at the University of Adelaide's School of Dentistry, the study adds to the established evi-

dence that fluoride in drinking water has dental health benefits for children.


The study looked at data from a random sample of 3800 Australians aged 15 and over. The results are now published online in the international Journal of Dental Research.

“By looking right across the Australian population, we now have good evidence that fluoride in drinking water is effective in preventing tooth decay in adults,” says co-author Professor Kaye Roberts-Thomson, Director of ARCPOH at the University of Adelaide.

“We've known for some time that fluoridated drinking water can prevent tooth decay in children, but this is the first

time that research has conclusively shown this in an adult population.”

The results show that adults with more than a 75 per cent lifetime exposure to water fluoridation have significantly reduced tooth decay (up to 30 per cent less) when compared with those with less than 25 per cent lifetime exposure.


“Those people who have had longer exposure to fluoride in water obviously will have the greater benefit. However, and this is an important aspect of the study, even those people who were born before water fluoridation existed have since received some benefit in their lifetimes,” Professor Roberts-Thomson says. 

‘Dental technician’ prosecuted

The General Dental Council (GDC) has taken legal action against Liam Sherry for practising as a dental technician illegally.

According to This is Kent, Sherry appeared at Maidstone Magistrates' Court on Thursday and pleaded guilty to the offence of the illegal use of a title.

Between September 2011 and August 2012 he was using the title ‘dental technician’ when he was not registered with the GDC. He was operating a company by the name of LPS Prosthetics, 265 Tonbridge Road, Maidstone, Kent ME16 8ND.

Sherry has been fined £650, ordered to pay a £15 victim surcharge and ordered to pay costs to the GDC of £550. 

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Biological tooth replacement: a step closer



New research published in the *Journal of Dental Research* describes an advance in efforts to develop a method to replace missing teeth with new bioengineered

teeth generated from a person's own gum cells. The research is led by Professor Paul Sharpe, an expert in craniofacial development and stem cell biology at King's College London's Dental Institute.

Current implant-based methods of whole tooth replacement fail to reproduce a natural root structure and as a consequence of the friction from eating and other jaw movement, loss of jaw bone can occur around the implant.

Research towards achieving the aim of producing bioengineered teeth (bioteeth) has

largely focused on the generation of immature teeth (teeth primordia) that mimic those in the embryo that can be transplanted as small cell 'pellets' into the adult jaw to develop into functional teeth. Remarkably, despite the very different environments, embryonic teeth primordia can develop normally in the adult mouth and thus if suitable, cells can be identified that can be combined in such a way to produce an immature tooth, there is a realistic prospect bioteeth can become a clinical reality.

Professor Sharpe said: "What is required is the identi-

fication of adult sources of human epithelial and mesenchymal cells that can be obtained in sufficient numbers to make biotooth formation a viable alternative to dental implants."

In this new work, the researchers isolated adult human gum (gingival) tissue from patients at the Dental Institute at King's College London, grew more of it in the lab, and then combined it with the cells of mice that form teeth (mesenchyme cells). By transplanting this combination of cells into mice the researchers were able to grow hybrid human/mouse teeth containing

dentine and enamel, as well as viable roots.

Professor Sharpe concluded: 'Epithelial cells derived from adult human gum tissue are capable of responding to tooth inducing signals from embryonic tooth mesenchyme in an appropriate way to contribute to tooth crown and root formation and give rise to relevant differentiated cell types, following in vitro culture. These easily accessible epithelial cells are thus a realistic source for consideration in human biotooth formation.' **DT**

Women smokers more likely to lose teeth

Postmenopausal women who have smoked are at much higher risk of losing their teeth than women who have never smoked, according to a new study published in the *Journal of the American Dental Association* by researchers at the University at Buffalo.

The study involved 1,106 women who participated in the Buffalo OsteoPerio Study, an offshoot of the Women's Health Initiative, (WHI), the largest clinical trial and observational study ever undertaken in the U.S., involving more than 162,000 women across the nation, including nearly 4,000 in Buffalo.

Smoking has long been associated with tooth loss, but postmenopausal women, in particular, experience more tooth loss than their male counterparts.

In the study, heavy smokers - defined as those who had at least 26 pack-years of smoking, or the equivalent of having smoked a pack a day for 26 years - were nearly twice as likely to report having experienced tooth loss overall and more than six times as likely to have experienced tooth loss due to periodontal disease, compared to those who had never smoked.

Participants provided information to researchers using a detailed questionnaire covering smoking history. Each participant also underwent a comprehensive oral examination and reported to the dental examiner's reasons for each tooth lost. In some cases, the patient's dental records also were reviewed.

"We found that heavy smokers had significantly higher odds of experiencing tooth loss due to periodontal disease than those who never smoked," explains Mai. "We also found that the more women smoked, the more likely they experienced tooth loss as a result of periodontal disease." **DT**



Research shows female smokers risk for tooth loss

Raising money, raising smiles and enjoying every second!



Henry's Angels creating a "dream" bedroom for a chYps patient: Photo: Elise Bull, Debra Causton-Holt and Ellie Nightingale (founder of Henry's Angels) (from left to right)

A team of employees from Henry Schein UK had the deep wish to give something back to the world and found an extraordinary solution driven by dedication, team spirit and empathy. Henry's Angels was formed in January 2011 by Team Schein Member Ellie Nightingale with the goal of providing other Henry Schein team members an oppor-

tunity to help local causes in practical ways. The Angels believe that time is the most valuable commodity they can give and together they can make a big difference.

In May 2011, Henry's Angels were introduced to the good work of EllenorLions Hospice, Gravesend, an organisation that cares for adults with life-limiting illnesses

in the area of Dartford, Gravesham and Swanley and its children's hospice chYps that cares for more than 120 young people in their homes across West Kent and the London Borough of Bexley. Equipped with plants, tools and bags of enthusiasm, and led by founding committee member Lyn Yorke, Henry's Angels overhauled a large patch of garden. After this successful pilot project, Henry's Angels became an ongoing initiative of Henry Schein, with a standing committee of five Team Schein Members who supervise all projects.

Since the first project of Henry's Angels, nine projects have been completed with more than 2,150 hours of work spent either painting children's bedrooms or charity shops, gardening, moving hundreds of bricks, wrapping gifts or washing cars to fundraise for materials needed. **DT**

Keeping up with the industry

Designed specifically to help dental practitioners keep up-to-date with their dental skills, Healthcare Learning: Smile-on is proud to host the 10th Clinical Innovations Conference 2013, in collaboration with the AOG and The Dental Directory.

Amongst the confirmed lineup of highly respected speakers will be endodontic specialist, Dr Richard Kahan.

"After speaking at the CIC last year, I found the event to be very well organised while providing a wide range of education to suit all delegates," he says. "I found audience participation to be great, and really felt that delegates were responding to what I was saying."

"In order to keep up with such a fast-paced profession, I think it

is important that clinicians employ a variety of learning methods, and one of these should definitely be attending events such as the CIC. I believe this to be a very useful way for practitioners to update their knowledge and skills.

"As well as offering a relaxed and friendly atmosphere for networking, the trade exhibition also enables delegates to meet the experts behind new products, giving them a better understanding of techniques."

Richard will be joining a fantastic programme of speakers which include Nasser Barghi, Irfan Ahmad, Ian Buckle, Manish Bose, Ash Parmar, Wyman Chan, Adi Moran and many more.

For special early bird rates, call 020 7400 8989. **DT**

Liverpool dental spa host glitzy fundraising ball for Dental Mavericks



Atomic Kitten sing at the ball

Owners of the award-winning Liverpool Dental Spa, Marius and Debbie McGovern organised a star studded charity ball last week at Liverpool's Hilton

Hotel to raise funds to carry out an expedition with the 'Dental Mavericks' to the Rif Mountains in North Africa to treat over 500 children with chronic dental problems.

The glitzy charity event was organised by the owners of the Liverpool Dental Spa in Brunswick Street, along with Julie Perry Events.

Liverpool's favourite girl band, Atomic Kitten, finally played in front of a home crowd. The girls, who last performed in the city 15 years

ago, wowed 200 guests with three of their biggest hits, The Tide is High, Whole Again and Right Now.

The event was hosted by Radio City's Simon Ross, and entertainment also included sets from last year's X Factor finalist Chris Maloney and boy band Reconnected, who sang their current single 'One in a Million'.

Kerry Katona said "It was absolutely fantastic playing in front of a home crowd again as a 'Kitten' and doing it for such

a worthwhile cause made it all the more special."

Marius McGovern, Clinical Director of the Liverpool Dental Spa, said: "The event has raised over £20,000 tonight to enable us to help many children who are suffering needlessly. We are very grateful to everyone who has supported us, especially Atomic Kitten, Chris Maloney and our many friends and colleagues who have come along tonight" **DT**

Rising costs a factor for dentists

The annual benchmarking statistics just issued by NASDAL show that dental practices have been contending with a significant increase in costs. In the tax returns of dentists in the year ending March 2012, the total average costs of running a dental practice equated to 67.6 per cent of practice income. As a result, profits are almost back to the levels in the 2004-2005 NASDAL survey.

While fee income has risen on average by £21k in NHS practices included in the survey, profit is down. In the private

sector, fee income is down and profits static. Larger practices, with associates, have seen the greatest reduction in profit. In the year ending 2010 the average net profit per principal in a practice with associates was £148,408, in the year ending March 2011 it was £129,000 and the year ended March 2012 it was £125,000.

Other indicative findings on income are:

- The average net profit for a typical dental practice in 10/11 was £125,000 and by the end of March 2012 it was down to

£122,000

- An NHS principal's net profit is down by nearly 5 per cent to £130,000 while a Private practice principal's net profit is static at £117,000

Overall, NHS practices continue to earn greater profit than private practices, although the gap has narrowed in recent years.

Other key findings include:

- Most dentists are still sole traders



- Associates continue to experience a fall in income and profit, with average net profit reducing from £68,000 in 2011 to £67,000 in 2012
- Lab and material costs are

static

- The average practice UDA rate is £26.02
- Dentists appear to be working harder for less **DT**

UCLA Dentistry gets \$5M to establish clinical research centre

Dr. Mick Dragoo and his wife, Mary, have pledged a landmark gift of \$5 million to the UCLA School of Dentistry to establish the UCLA Mick and Mary Dragoo Periodontal and Implant Clinical Research and Patient Care Center.

The Dragoo's gift, the largest single donation from an individual or couple the dental school has ever received, will create a leading site for clinical research, patient care and education in periodontology and implantology — specialised areas of dentistry related to tooth-supporting structures and tooth replacement.

The new Dragoo Periodontal and Implant Center will be a place for world-renowned faculty to conduct independently

funded clinical research to advance scientific knowledge in periodontal and implant dentistry. Researchers from the school will translate their findings into meaningful treatment protocols and will disseminate their research through publications, educational programs and the Internet to advance the state of patient care worldwide.

"With Dr and Mrs Dragoo's extremely generous gift, our hope is to advance the standard of patient care, as well as influence decisions made by dentists and patients alike," said Dr. No-Hee Park, dean of the UCLA School of Dentistry. "The Dragoo Center helps us further achieve our mission, which is to improve the oral health of the people of the world. I cannot thank the

Dragoos enough for their support."

Directing the Dragoo Periodontal and Implant Center will be Dr. Perry Klokkevold, an associate professor, acting chair and director of the residency program in the section of periodontics at the UCLA School of Dentistry. Klokkevold has more than 20 years of experience in education, administration and clinical practice in periodontics and implantology.

"I am fully committed, honoured and inspired to have the opportunity to direct the Dragoo Periodontal and Implant Center," Klokkevold said. "I share the Dragoo's vision and goals of improving patient care worldwide through independently funded clinical research." **DT**

London Centre of Innovation Excellence launched

The UK's worldwide reputation for innovation in healthcare will be sealed as Jeremy Hunt launches London's new centre of innovation excellence established by US healthcare firm Johnson & Johnson that will bring high-tech jobs and investment to the capital.

Along with new centres in Boston, Shanghai and San Francisco, London's centre will scout, develop and promote new technologies so that the latest cutting-edge inventions and techniques can be used in the NHS and beyond.

This new centre will help promote new jobs and business for Universities, Research Councils and Research Charities — which will be directly hired in order to deliver on the centre's science projects.

The centre will focus on technologies in key areas:

- dementia
- cancer
- infectious diseases
- immunology
- biomarkers for disease; and
- surgical devices to make surgery quicker, faster and safer

Innovation Expo will showcase other examples of fresh thinking and creative solutions to prevent ill health and improve care. This includes the new Health Apps Library to help the public easily find safe and trusted apps to help manage their health.

The library will be continually added to and currently includes around 70 apps to provide advice and support for a range of conditions, access to online services and general health and fitness information. **DT**

The futility of heroism

Alexander Holden discusses consent and autonomy

Autonomy is vitally important as a principle; many feeling it rises above the other bioethical principles of Justice, Beneficence, Non-maleficence and Veracity with respect to importance. Autonomy is respecting people as a means to themselves, respecting their choices and life-plans. It has been championed by philosophers such as Immanuel Kant and John Rawls who saw it as an integral part of creating and maintaining human dignity. However, we seem to have become lost along the way in our clinical practise of what this means and how this should be achieved.

Herodontics

A term coined 'herodontics' appeared not too long ago. It describes the practise of heroically performing treatment at the request of a patient; the prognosis usually being poor which the practitioner knows in his heart of hearts will eventually fail due to never having a real chance of success. Many practitioners in general practice (and I'm sure in other spheres) will have come across clinical situations where a tooth can't be saved or a prosthesis is not appropriate, but due to the insistence and pleading of a patient, has felt obliged to at least consider if not actually carry out such treatment. This type of treatment is sometimes justified by the practitioner as having legitimacy and being in the spirit of giving patients what they want, respecting their autonomous right to decide what happens to their bodies. The purpose of this article is to

highlight why this is so wrong, both ethically as dentists and legally as potential defendants in a negligence case.

The idea of informed consent is the legal principle tasked with the preservation of autonomy. This means that patients need to be made aware of the nature and purpose of a treatment, as well as given information of potential risks and benefits of that intervention. This is however only part of the story; the problem of herodontics lies in the assumption that if these criteria are met, then that patient's autonomy is respected and the treatment is both legal and ethical.

Kant believed that being autonomous meant that as individuals we have the capacity to engage in rational self-governance. Basically this means that we are (or should be) capable of accepting that we can't just have what we want. He links this with the idea of dignity, that in practising autonomous decision making around the concept of rational self-governance, we gain dignity as mature adults. So how does this relate to the clinical autonomy of our patients? Well, if we follow Kant's thinking; to simply give patients what they ask for under the impression we are respecting their autonomy we actually don't respect their autonomy at all, we treat them like petulant children with no dignity whatsoever. In doing this, we also give up our own autonomy as skilled professionals, simply becoming the agents of patients' desires.

Universal Principle

This is a universal principle (as with all of Kant's philosophies) that we respect regardless of rank or status, paying or non-paying because we are all capable of being moral and dignified. In interpreting autonomy in this way, we effectively deny patients dignity whilst at the same time promoting them above ourselves as morally superior beings, with the capability of overruling our own professional autonomy and ability to make clinical choices. There are some in healthcare who agree with this interpretation, feeling that it is right to act as patients want (or demand) without regard to their best-interests or for justice in the allocation of resources.

Autonomy has for a long time enjoyed its status as the principle to trump all others. This is evident in such legal cases where professionals' beneficence has meant they have not gained consent for medical procedures (i.e. removing tumours found incidentally during surgery performed for other reasons) and have subsequently been sued for doing so. Whether this is right or wrong is not the purpose of this article, but needless to say it does raise questions as to the absolute sovereignty of our favourite principle. The waste of resources in providing futile treatment is the same whether the treatment is privately or publically funded. Even the argument that if a patient is willing to pay privately for a professional's time, then the futile treatment is less ethically perplexing is

flawed as we are all health resources; unjustly spending our time on futile treatments rather than treating actual disease or complaints is not ethical.

Duty

Not only is this poor misinterpretation of autonomy unethical, it can lead to legal complaint too. Some dentists are under the false impression that if a patient says yes, if they know a treatment is futile and have signed piec-

is inappropriate or not fit for purpose is likely to be shown as negligent. It will be shown in any negligence case that dentists have a duty of care to provide treatment that will be fit for purpose; futile treatment by definition is not fit for purpose.

Respect

Autonomy is important, whether it should trump other bioethical principles is a difficult argument, but either way one cannot detract away from the fact that respecting our patients and their individual preferences and needs is vital to our practise as legitimate promoters of oral health. This being said, we all need to be careful in how we put this respect into the way we provide our dentistry, making sure that patients are given treatment that is fit for purpose, ethical and dignified. We also need to care about our own role in this; are we highly skilled professionals or do we instead just want to give patients whatever treatment they demand? Our predecessors worked hard to professionalise dentistry; if we are to justify our continuation as such, we need to take our duty of care seriously in only providing treatments that ultimately respect patient's rights, not make a mockery of them. **DT**

'The purpose of this article is to highlight why this is so wrong, both ethically as dentists and legally as potential defendants in a negligence case'

es of paper acknowledging so, then they are divorced of the responsibility for that treatment's outcome. Unlike ethical debate which does at the end of it all boil down to shades of grey, this is legally wrong as no argument can be made that we are able to sidestep our professional duty of care. In providing treatment that is not in patient's interests, not fit for purpose or damaging to that patient's oral health, regardless of patient's consent, that treatment is negligent. Anyone who argues that it is not forgets that our primary purpose is first do no harm. Legally, treatment that

About the author



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Afrika Tikkun visit to the Delft Township and Nelson Mandela Peace Park

Saul Konvisser details a trip of a lifetime



Dr Greenwall presents good oral health

In December 2012, I had the honour of accompanying Dr Linda Greenwall of the Dental Wellness Trust and friends to the Afrika Tikkun community centre in the Delft township of Cape Town to provide some basic oral health advice.

In an area that is plagued by alarmingly high levels of unemployment, poor access to health care, basic sanitation and good nutrition not to

‘Our goal was to teach some of those children just how easy it is to brush their teeth as well as a few basic facts about the dangers of too many sweets, chocolates and fizzy drinks’

mention the growing number of orphaned children, centres such as Afrika Tikkun are essential in providing basic support and services to the local community.

Afrika Tikkun focuses primarily on children and offers wonderful opportunities for the kids to play, learn, eat and have fun in a safe and friendly environment. The centre goes much further than that though, providing food, healthcare and other basic services to the families of these children, reaching out to over 8,000 members of the community.

With so many barriers to good oral hygiene such as education and finances, our goal was to teach some of those children just how easy it is to brush their teeth as well as a

few basic facts about the dangers of too many sweets, chocolates and fizzy drinks. By

empowering the children with this basic information, something we all take for granted,

it will hopefully allow them to look after their own oral health and ultimately their

general well being.

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