DENTAL TRIBUNE

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Disagreement arises on dentist numbers in Australia

Uncapped higher education system contributes to oversupply, dental associations say

DT Asia Pacific

SYDNEY, Australia: Experts in Australia have questioned claims by the Australian Dental Association (ADA) and the Australian Dental Students Association in Sydney that the higher education system in the country is placing too many dental graduates on the market, thereby contributing significantly to an oversupply of dentists. Conor King, Executive Director of Innovative Research Universities, a network of seven universities with dental schools in the Gold Coast, Melbourne and Townsville, recently told the The Australian that the criticism is deficient and the current uncapped system has not lead to a "wild breakout" in dental places.

In a letter directed to Minister for Education Christopher Pyne, ADA President Dr Karin Alexander said that there are currently too



Australia has a dentist-patient ratio of 1:1,500. (DTI/Photo Andres Rodriguez)

many students graduating from dental programmes in Australia, which, according to her, would

leave the entire industry oversupplied with dentists for at least another 12 years. She called for

reducing the number of new graduates by removing → DT page 5 dentistry from the

MegaGen receives largescale investment

Straumann has recently purchased convertible bonds for a total of US\$30 million from MegaGen, a South Korean manufacturer of dental implant solutions. The investment can be converted into shares in 2016 to obtain a majority stake in the company, according to reports.

MegaGen will have an important role as a strong partner based in Asia, Straumann's CEO Marco Gadola said. The Korean company stated that it will be investing the majority of the transaction proceeds in the expansion of its domestic and international implant business and the worldwide promotion of its digital platform.

MegaGen is a privately held company owned by about 150 shareholders, with the three founding shareholders holding 38 per cent of the shares. Based in Daegu and Seoul, the company offers a broad range of low-cost implant systems, digital dentistry solutions, regenerative tools and products to support implant procedures. In 2013, the company generated global revenue of more than US\$30 million.



A small boy receives a demonstration on how to brush his teeth correctly during a special event held by the University of Hong Kong on the occasion of World Oral Health Day in March. (DTI/Photo courtesy of University of Hong Kong)

Higher imports

The value of imports of dental equipment from the United States to the Republic of Singapore has increased again. According to figures from the local US Commercial Service, over 50 per cent more goods for dentistry were exported from North American manufacturers to the city state last year compared to 2012. DT

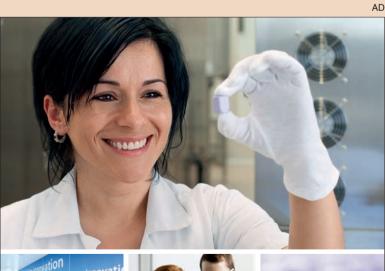
Eroded teeth

In a study involving 600 students across seven primary schools, researchers from the University of Hong Kong's Faculty of Dentistry found that 75 per cent of 12-year-olds suffer from early signs of dental erosion. Consumption of fruit juice and soft drinks were identified as main causes for the decay.

Dentist among **MH370** victims

A list released by Malaysian authorities has revealed that a dentist was among the passengers of Malaysia Airlines Flight 370. Before he went missing, 27-year-old dental graduate Bian Liang Jing was working in construction in Singapore to earn money to open his own dental practice in his home country China. He leaves behind his wife and infant daughter, according to media reports.

International search and rescue efforts were still being conducted in parts of the Indian Ocean to find the remains of the airplane, which went off the radar in late March, when this newspaper went to print.









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SINUS LIFT PROCEDURES IN THE DAILY PRACTICE **Daniel Rothamel** 06:00 PM (CEST)

Sinus grafting procedures are an established therapy to gain bone height in the posterior maxilla. Depending on the remaining bone height, they can be performed with simultaneous or two-stage implant placement using osteotomes, a trans-alveolar or lateral-window approach.

Numerous studies have shown predictable results using autogenous bone but also bone substitute materials. However, within the last decade, the role of autogenous bone as the "golden standard" for sinus grafting procedures has been increasingly discussed, since same results can be obtained using bone substitute materials without additional donor-site morbidity and additional stress for the patient.

In the webinar, different approaches of sinus grafting procedures, the selection of different bone substitute materials, clinical and histological results and a sufficient complication management will be discussed.







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ORAL HEALTH CARE FOR HIV+ PATIENTS David Reznik, DDS 08:00 PM (EST)

It has been 32 years since the first reports of Acquired Immunodeficiency Syndrome (AIDS) were reported to the United States Centers for Disease Control and Prevention. The dental team has been and continues to be an important part of HIV primary care since the early days of the epidemic when up to 80% of all HIV+ patients would present with an oral manifestation related to disease progression. Recognition of the oral manifestations of HIV infection are important tools in accessing a patient's overall well-being as they are important indicators of disease progression for those known to be HIV positive. For those with unknown HIV status, the presence of these lesions may signify HIV infection or other systemic conditions.

This presentation will enable the participants to accurately diagnose and manage the most common oral opportunistic infections seen in association with HIV disease. Topics to be covered will also include proper dental management for people living with HIV disease including a discussion of important lab values and when, if ever, premedication prior to invasive dental procedures is required.





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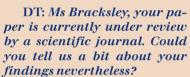




"Oral health promotion training is a tick-box exercise"

An interview with Stacey Bracksley, Australia

Despite being taught at university level, there is little information on the effectiveness of oral health promotion programmes in dental education, according La Trobe University teaching fellow Stacey Bracksley. At ADX14 in Sydney, she was presenting the findings of a recent review on this matter, which she authored as part of her PhD. Dental Tribune had the opportunity to talk to her about the reasons for this lack of data and the importance of increased efforts to train dental students adequately in this area.



Stacey Bracksley: The aim of the review was to establish what has been published concerning health promotion training in dental schools internationally. There is a dearth of research and this was demonstrated by the inclusion of only four published studies, which were from Australia, Brazil, Canada and Belgium. It was interesting that the health promotion content was delivered in very different ways. One dental programme used a hospital setting, where the students were interns providing or al health education to patients, whereas another dental and oral health course had a rural outreach programme.



Stacey Bracksley

It has been demonstrated that little evaluation of the health promotion training within these courses is taking place or may be taking place but not published, with only one of the papers using students' personal accounts for evaluation. In some cases, health promotion was tacked on to other components in the course. Not one of the studies included evaluated the outcomes of the health promotion training concerning the students' knowledge, both short and long term. There are many health promotion frameworks that are used internationally as best practice but they were not widely applied in studies. Health promotion needs to include a spectrum of activities, from individual-based to community-based activities.

What was found was that they are too focused on individuals, which has been shown to be ineffective. Using smoking as an example, we know that just tel ling people that smoking is bad for them is largely ineffective, but when we introduce a range of programmes, including legislation, community attitudes, regulations and settings, there is improvement in smoking rates. While it is good that students are gaining some exposure to health promotion within their degrees, working at the individual level alone will never be as effective as using a range of strategies.

Soweknow little about whateffect these programmes can have on future dental professionals. Do you consider oral health promotion to be a relatively new concept, and if so could this be one of the reasons for the lack of information?

I would disagree that oral health promotion is a relatively new concept. The Ottawa Charter for Health Promotion (an international framework used to prevent non-communicable diseases) developed by the World Health Organization has been around since 1986. Campaigners like Prof. Aubrey Sheiham from the University College London School of Life and Medical Sciences have also been talking about the importance of oral health promotion for decades.

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I think there are a number of reasons for this lack of data. For example, oral health promotion has taken some time to be accepted and implemented into higher education. One of the main obstacles however is that the ethos of dentistry itself is still very much centred on individual-treatment care, rather than a holistic approach. This is deeply ingrained in the culture of the profession, making it difficult to implement oral health promotion.

Dentistry is also firmly rooted in the medical model of health, which does not fit well with the underpinning ideas of oral health promotion.

Why is training in oral health promotion generally needed in dental education?

In Australia and similarly in other countries, there has been a push to focus on prevention of diseases rather than a reactive approach to treating them. Dental diseases have been highlighted as preventable and costing a substantial amount of money to treat. With this push towards prevention, we will need trained dental professionals to undertake these prevention efforts.

I think that by not providing oral health promotion training to dental professionals a key aspect of the overall picture is missing. It is like training students in one aspect of health care and leaving out the rest. Dental professionals need to be trained in dental procedures, but they also need to see the bigger picture of a whole person and how the environment affects their patient. Oral health promotion training can provide students with this holistic view.

Despite international efforts like World Oral Health Day in March, oral health promotion still appears to play a minor role in daily practice in general. Is there any evidence that increased oral health promotion has an impact on disease rates for example?

There is evidence to support oral health promotion. One of the major oral health promotion efforts was and still is water fluoridation; this has been attributed to a decline in caries rates. Using history to demonstrate the effectiveness of oral health promotion, we know dental caries rates peaked in the 1960s and then a decline in rates was seen from the late 1960s until the early 1990s in industrialised countries. Although the decline cannot be credited to any single cause, it is thought that factors such as dietary changes, daily use of fluoridated toothpaste and the use of systematic (water) and topical fluoride may have all played a part in decreasing caries rates. All of these factors that contributed to the decline are oral health promotion efforts.

If we look to other success stories in population health, like the decreasing smoking rates, it was health promotion that made the difference. A whole of community approach using solid health promotion theory was taken towards smoking, with strategies such as legislation, smoking bans and taxation on cigarettes making the difference.

Should dental schools generally be required to offer more oral health promotion in their degrees?

In Australia and other countries, health promotion is a competency for dentists and oral health therapists (hygienists and therapists). Therefore, health promotion training does occur to some extent in these courses. In theory, graduating dental pro-

fessionals should be able to understand oral health promotion and be able to apply this knowledge in the field.

However, there needs to be evaluation of this training in my opinion. At this stage, this oral health promotion training is often a tick-box exercise: it just has to be somewhere in the course to meet this competency. There appears to be little regard as to whether the students' understanding of health promotion is adequate and whether this will lead to long-term application

once they have graduated. What I would like to see are dental professionals who have a solid understanding of things like the social determinants of health and have the ability to take these into account when treating patients.

Are dental schools adequately prepared to teach oral health promotion?

To some extent, dental schools are prepared. In Australia, this training is actually happening and it differs between schools as to who delivers this training,

either dental professionals or public health professionals.

However, I think for oral health promotion training to be successful it needs to be integrated into the whole course and not separated from the clinical content. It must also be monitored and evaluated. At this stage, I do not think that this is being done adequately, so there is definitely room for improvement.

Thank you very much for the interview.

AD

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passion vision innovation

Dear reader,



Daniel Zimmermann

With the mystery of Flight MH370 still to be resolved, it seems highly unlikely that relatives and friends of those lost in the accident will ever be able to bury the remains of their loved ones. If the plane did crash into the ocean, organic material for means of identification will soon be out of reach for even the most sophisticated search and rescue equipment.

In similar accidents, as well as natural disasters, forensics dentists are often the only experts able to identify the victims' remains, mainly teeth. Unfortunately, this dental specialty is still under-developed in many parts of Asia with a few exceptions, like Japan, where, in the wake of the Great East Japan Earthquake in 2011, a new national standard for dental records is about to be introduced by the government. Since eight of the most damaging natural disasters occurred in Asia last year, more countries should follow its example.

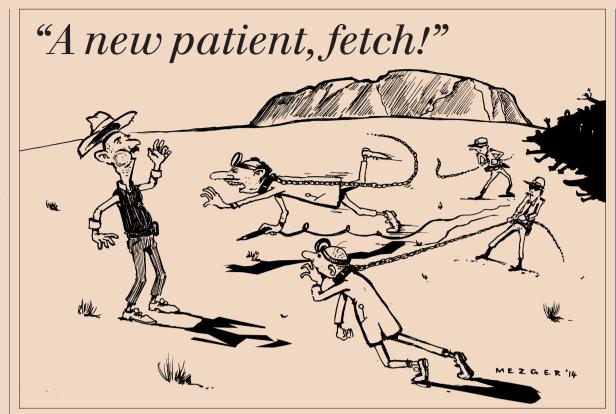
Yours sincerely,

Daniel Zimmermann Group Editor Dental Tribune International

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For quick access to our contact form, you may also scan the following QR code.



Expecting an oversupply



Prof Leonard Crocombe Australia

The previous Labor Government established a demand-driven system of university places, not just for dentistry, but all university degrees. In dentistry, after a century of having five dental schools, four extra schools have opened and many pre-existing programmes have increased the number of places.

The Australian Institute of Healthand Welfare (AIHW) recently released its report Dental Workforce 2012 as partits National healthworkforce series and reported a 35.5 per cent increase in registered dental practitioner numbers from 14,200 to 19,462 overthenine year time period from 2003 to 2012. Over the same

time period, Australia's population increased by 15.1 per cent from 19.6 million to 22.6 million resulting $in the number of dental \, practitioners \,$ per 100,000 Australian residents increasing by 19.1 per cent from 72.3 to 86. Hence, the number of dental practitioners increased at over twice the rate of population growth. Health Workforce Australia is currently preparing a report into the dental workforce. Although the results have not yet been released, the Australian Dental Association expects to predict a worsening dental workforce oversupply.

On the other side of the coin, there are sections of the Australian community who have poor oral health and poor access to dental care. These include:frail and older people, rural residents, Indigenous Australians, Australians with physical and intellectual disabilities, and people of low socio-economic

status. If funding was available, improved access to dental care would be invaluable to such people. However, at the time of writing the current Liberal Government was close to releasing a Commission of Audit, in which it is expected to recommend that significant cuts will be necessary in its May 2014 Budget. Without extra Government funding for dental care or a cap on dental workforce numbers, it is not unreasonable to expect a growing oversupply of the dental workforce in Australia. DI

Contact Info

Prof Leonard Crocombe is Chief Investigator for the Centre for Research Excellence in Primary Oral Health Care in Adelaide in Australia. He can be contacted at leonard.crocombe@adelaide.edu.au.

Five steps



Prof David Williams

Oral diseases are amongst the most common of all diseases, yet they receive little attention in many countries, especially those with poor health care systems. The recently launched Oral Health Worldwide Report by the FDI World Dental Federation highlights the fact that the majority of these are related to socioeconomic factors. People along a decreasing social gradient visit the dentist less often, have fewer fillings or higher rates of gum disease than those with higher socio-economic status.

It also draws attention to the fact that oral health and general health are closely linked. Oral diseases can seriously affect overall health and there are associations between oral and some systemic diseases, such as heart disease and diabetes. According to the report, improving exposure to fluoride, enjoying healthy food and drinks, chewing sugar-free gum as a supplement to a normal oral health care routine, protecting teeth by wearing a mouth guard when playing contact sports as well as have regular checkups are the five important steps every person should follow in order to achieve a minimum of oral health care.

Contact Info

David Williams is Professor of Global Oral Heath at Bart's and The London School of Medicine and Dentistry in London in the UK. He can be contacted at d.m.williams@qmul.ac.uk.



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Rise in surgical exports

DT Pakistan

KARACHI, Pakistan: Exports of surgical and dental instruments from Pakistan have almost quadrupled in the last three years. Latest figures released by the Karachi Chamber of Commerce and Industry indicate that manufacturers sold US\$867.6 million worth of instruments worldwide in

2012–2013, a significant increase compared with the US\$250 million generated in 2008–2009, a representative of the Surgical Instruments Manufacturers Association of Pakistan (SIMAP) recently told Dental Tribune Pakistan.

He said that numbers would be even higher if certain restrictions in the banking sector did not hinder the anticipated rate of export growth. Another member of SIMAP told the newspaper that the devaluation of the rupee has negatively affected the profitability of the industry, with the cost of goods sold (COGS) at an all-time high. He said that his organisation has made continued efforts to lower the prices of its products so that the increase in

COGS is not transferred to consumers

SIMAP has also requested of the government to ease taxes for the industry.

Despite these problems, the organisation expects growth in the export of surgical goods to accelerate further in 2014–2015 with key markets located in the Middle East, the US and Europe. Numerous incentives have been provided to traders of surgical instruments and

products, including marketing study missions organised by SIMAP in co-operation with the Japan International Cooperation Agency and the Trade Development Authority of Pakistan (TDAP).

In order to boost future exports from Pakistan in the Asia Pacific region, the TDAP also sponsored the participation of a trade delegation of surgical manufacturers in the recent International Healthcare Conference and Exhibition in Malaysia.

←DT page 1

demand-driven model of higher education, as well as restricting graduates from abroad from practising in Australia by removing the profession from the Skilled Occupation List and Consolidated Sponsored Occupation List maintained by the Department of Immigration and Border Protection.

"The decision of the previous government to allow international students to obtain a visa, remain and work in Australia for between two and four years fol $lowing \, completion \, of their \, degree \,$ has made it even more competitive for domestic graduates to obtain full-time work," the letter states. "The ADA believes there are more than sufficient numbers of Australian graduates currently entering the workforce and urges the Australian government to put in place a number of initiatives to bring this workforce back into balance."

According to Alexander, of the approximately 930 dentists entering the work-force in Australia annually, less than 60 per cent are required in order to meet the demand for dental services. She also said that her organisation had found that the number of graduates in full-time employment four months after graduation dropped from 95 per cent in 2011 to less than 84 per cent last year, increasingly forcing young dentists to work part time or take up another occupation to avoid unemployment.

A total of 14,687 dental professionals were registered with the Australian Dental Council in 2012, according to recent figures from the Australian Institute of Health and Welfare in Canberra, which ranks the country high above the ideal dentist-patient ratio of 1:3,500 recommended by the World Health Organization. Starting salaries for dentists regularly exceed those of other high-skilled occupations, such as engineering and medicine, which makes the profession attractive not only to young people in Australia but also to dental professionals from abroad.

Last year, over 250 dentists with dental qualifications obtained outside the country received permission to work in Australia, a significant increase from only 57 who applied for assessment by the Australian Dental Council a decade ago.



New world oral health report released

Almost 100 per cent of adults suffer from dental caries

DTI

LONDON, UK: In celebration of World Oral Health Day, representatives of the FDI World Dental Federation presented the latest findings on oral health on 20 March at a press conference held in collaboration with the British Dental Association in London. The report identifies the main obstacles to achieving universal oral health and includes recommendations to improve oral health worldwide.

Among other aspects, the report, titled "Oral health worldwide: A report by FDI World Dental Federation", highlights that nearly 100 per cent of adults and between 60 and 90 per cent of children worldwide have dental caries, which results in millions of lost school and work hours. For instance, in the US, an estimated 2.4 million days of work and 1.6 million days of school are missed owing to oral disease. In the Philippines, toothache is the primary reason for school absenteeism. The FDI stated that about 97 per cent of Philippine 6-year-olds have dental caries.

In addition, the report states that only 60 per cent of the world's population have access to oral care, creating enormous disparities between different populations. According to the FDI, people of a lower socio-econo-





Besides a high prevelance of caries, the report found that only 60 per cent of the world's population have access to oral health care. (DTI/Photo courtesy of FDI, Switzerland)

mic status visit the dentist less often and have fewer fillings, more missing teeth, higher to-bacco consumption, higher rates of caries and untreated decay, and higher rates of periodontitis compared with those of a high socio-economic status.

In order to increase access to oral care, the training of the oral health work-force needs to be strengthened and expanded to improve the quality of and increase the number of oral health professionals. Moreover, emphasis needs to be put on the equal geographical distribution of oral health personnel, especially within developing countries, where the dentist-to-population ratio is approximately 1:150,000 compared with about 1:2,000 in most industrialised countries.

The FDI further highlighted that a solely curative approach to tackling the burden of oral health is neither realistic nor sustainable. The organisation asserts that the prevention of oral diseases and promotion of oral health must be at the core of national policies and programmes. In this respect, global and national surveillance should be strengthened to identify risk factors and oral health needs as a basis for developing appropriate approaches and measures, the FDI stated.

The event also saw the launch of *The Tooth Thief*, an illustrated book for children that includes oral health tips. The book emphasises the importance of good oral health to children to instil good

oral care habits from a young age. The foreword was written by Yaya Touré, Manchester City Football Club player and three times African Footballer of the Year, who was this year's World Oral Health Day ambassador.

The book is available from the Apple iBooks Store and Amazon, and can be downloaded from the World Oral Health Day website, www.worldoralhealthday.com. The complete white paper can be accessed free on the website as well.

DT group announces Digital Dentistry Show

DTI

LEIPZIG, Germany: Today, digital technology is one of the fastest-growing market segments in dentistry and digital processes are increasingly determining everyday practice in dental offices and laboratories. In order to offer dental professionals a unique opportunity to keep up with these developments, Dental Tribune International (DTI) will be hosting the Digital Dentistry Show (DDS), the first event entirely dedicated to the field, in October this year.

In recent years, an increasing number of dental companies have released innovations in digital hardware, software and consumables, such as 3-D imaging, CAD/CAM and intraoral devices. DDS will provide comprehensive information on the latest digital technology and is targeted at dentists, den-

tal technicians and representatives of the dental industry.

In contrast to the conventional booth-based presentation of products, DDS will be showcasing digital innovations through a combination of sponsored live product presentations, hands-on workshops, discussion sessions, an exhibition and a printed guide, offering participants a dynamic and interactive education experience.

The show will be launched at the International Expodental in Milan, one of the most important events in the Italian dental industry, which will be held from 16 to 18 October. Online registration for dental professionals will soon open on the DDS website.

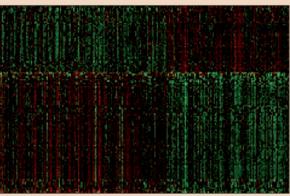
More information about the DDS are available online at www.digitaldentistryshow.com.

Alternative system for periodontitis classification presented

DTI

NEW YORK, USA: Conventionally, periodontal disease is classified as either chronic or aggressive based on clinical signs and symptoms. However, this method lacks an unequivocal, pathobiology-based foundation. Researchers at Columbia University Medical Center have thus developed a new system for classifying periodontal disease based on the genetic signature of affected tissue.

In a study involving 120 male and female nonsmokers aged 11 to 76 with periodontitis, the researchers found that molecular profiling of gingival tissue could form a basis for the development of an alternative classification for periodontitis, explained Dr Panos N. Papapanou, study author and professor of dental medicine at Columbia University in the City of New York.



Genetic map of test subjects revealing two clusters. Patients with more severe peridontitis are concentrated on the left. (DTI/Photo courtesy of Dr Panos N. Papapanou/Columbia University College of Dental Medicine, USA)

Analysing genome expressions in the gingival tissue taken from the study participants, the researchers observed that patients fell into two distinct clusters. "However, the clusters did not align with the current classification of chronic and aggressive periodontitis," Papapanou said. According to the study, patients in the second cluster showed a more extensive form of the disease. They were mostly male, matching with the well-

established observation that severe periodontitis is more common in men than in women.

The researchers believe that a new system based on genetic analysis could offer significant advantages for classifying patients.

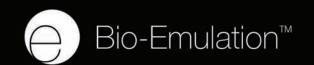
"If a patient is found to be highly susceptible to severe periodontitis, we would be justified in using aggressive

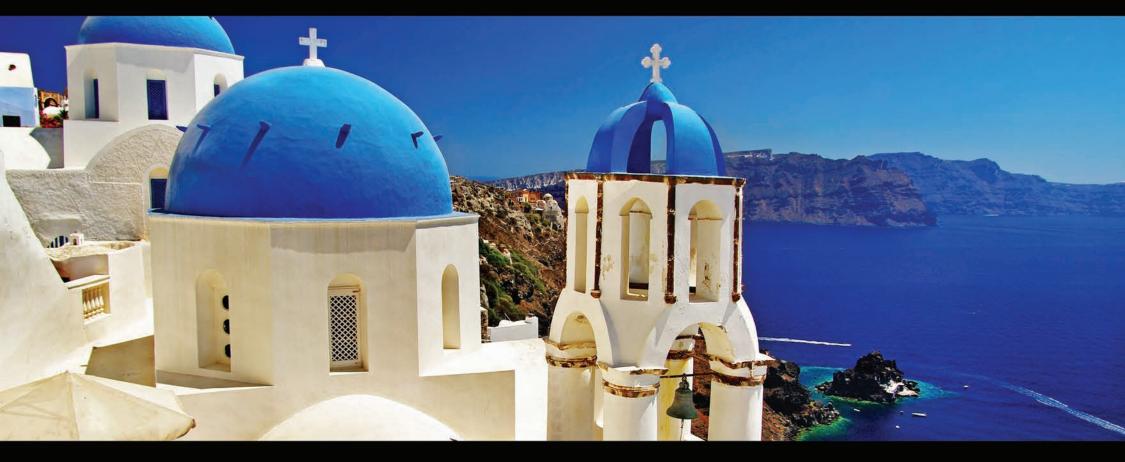
therapies, although this person may have subclinical disease," Papapanou said. "Today, we basically don't know whether a periodontal infection is truly aggressive until severe, irreversible damage has occurred," he added.

In the near future, the researchers plan to conduct a prospective study to validate the new classification system's ability to predict disease outcomes.









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Local organizer:



Moderate outcome for IDEM Singapore

2014 dental show receives record attendance but fewer new visitors

SINGAPORE: Despite high expectations for the 2014 edition, fewer new visitors have registered for IDEM Singapore compared with the previous show. According to official figures released by organiser Koelnmesse a week after the event, slightly more than 7,800 dental professionals attended the International Dental Exhibition and Meeting this year, which equals an increase of roughly 8 per cent. In 2012, the number of new participants exceeded 20 per cent.

Despite the moderate growth, the organisers reacted positively to the outcome, saying that the show has strengthened its position as a key platform for dental companies to launch new products and solutions in Asia. Michael Dreyer, Asia Pacific Vice-President of Koelnmesse, told Dental Tribune Asia Pacific that the proven concept of a combined trade show and conference for APAC has demonstrated itself to be successful once again, substantiating the meeting's role as a 'must-attend' meeting for professionals in the region. He said that further growth will be made possible through leftover space of 2,000 square metres at Level 6, currently used as a lunch area for congress delegates, that can be used to accommodate more exhibitors in future.

"As dental markets in the regions continue to develop and reach out to embrace the globalisation of dentistry and the opportunity it presents, IDEM Singapore will continue to play a strategic role for exhibitors in facilitating that development and outreach," Dreyer commented.

Exhibitor numbers were at an all-time high this year with more than 500 dental manufacturers and distributors from around the globe showcasing their current and future product portfolio to customers in the region. Held for the first time in two exhibition halls at the recently renovated Suntec Singapore Convention and Exhibition Centre, the show received particular interest from



market competitors in Asia in the form of two new joint country pavilions for the Japanese and Chinese dental industries. New exhibitors, however, also came from established markets in Europe and North America.

Several new products saw exclusive launch at the show, of which many were on display for dental professionals to try out. Among them were new implant lines, such as the Roxolid SLActive from Swiss dental manufacturer Straumann, which will be rolled out to dentists throughout the continent until the end of this year, as well as digital equipment, including CAD/CAM systems and dental cameras, such as the EyeSpecial C-II from Japanese dental specialist SHOFU Dental.

"Generally speaking, we conducted good business. Our sales grew by 20 per cent compared with 2012, but these results may not be representative because of the launch of Opalescence Go," said Nicolas Sondaz, General Manager for Asia Pacific at Ultradent, in summarising the



visitors learnt about the latest concepts and developments in dental medicine. Among the highlights of the official scientific programme, organised by the Singapore Dental Association in collaboration with the FDI World Dental Federation, were sessions on infection control practices, oral cancer and concepts in dental implantology, an area of dentistry that received special attention in the form of a roundtable discussion on the second

day of the show. Special events aimed at dental technicians and oral hygienists were also well attended. Outside the official programme, the Dental Tribune Study Club held

outcome for his company, which introduced its latest toothwhitening solution at IDEM.

In addition to the trade show,

its clinical symposium for the third consecutive time.

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