# DENTAL TRIBUNE

- The World's Dental Newspaper • United Kingdom Edition –

#### PUBLISHED IN LONDON

#### **News in Brief**

#### Speed flossing

A 36-year-old woman was fined after she was caught by police flossing her teeth while driving 70mph on the motorway. A police spokeswoman said: "We've caught women applying make-up in the mirror. But this is the first time we've seen someone flossing their teeth. It is very dangerous as you need both hands, which should be on the wheel." The unnamed woman, who was caught on the M4 at Newport, Gwent, had to pay a £60 fine.

#### **GDC facts**

At present the total number of registered dentists stands at 36,215 and the total number of dental care professionals is 57,656. In January, the General Dental Council's customer advice and information team dealt with nearly 7,300 phone calls and 617 emails. A large number of the phone calls were from registrants requesting an Annual Practicing Certificate for 2010 and the team issued 409 duplicates. There were more than 530 enquiries asking for guidance on how to apply for dental care professional registration.

#### **Infant oral mutilation**

A dental hygienist is travelling to Uganda to help educate people about the dangers of 'Ebiino' or infant oral mutilation. Lindsay Webb, from Warrington, is going out with the charity Christian Relief Uganda, and will also be giving much needed dental treatment. She is raising funds for her trip by running in the Stanley Park 10km race.

#### **East End doctor**

A doctor claims he has witnessed widespread malnutrition in children at his surgery in Bromley by Bow. Dr Sam Everington has found that dental care is also worsening in the under-fives. Dr Everington, who has worked in the area for 20 years, said: "It's utterly shocking - we



**Magic Number** Practice Plan begins the year with three stars and a top fifty placing for 2010

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**MARCH 15-21, 2010** 

**Putting something back** DT profiles Seema Sharma; dentist, entrepreneur and speaker at **Clinical Innovations** 

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#### **Being equal** A detailed look at how the soon to be introduced Equality Act will affect employers

pages 11-20

#### **VOL. 4 NO. 7**

#### Education



Gift of the gag Justin Stewart gives hints and tips for dealing with a patient's gag reflex

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## **Dentists join campaign against** fluoridation in Southampton

#### Open letter of opposition published, marking one year anniversary of South Central Strategic Health Authority landmark decision

host of signatories, including dental professionals, have signed an open letter of opposition against the deci-sion to fluoridate drinking water in Southampton.

It is a year since the South Central Strategic Health Authority (SCSHA) took the decision to add fluoride to water in Southampton and parts of Hampshire.

Much of the antipathy to the scheme is because the people in the area feel their views have been ignored as the SCSHA is going ahead despite 72 per cent of public consultation respondents rejecting the proposal.

#### Local opposition

The letter states that *during* firmed that the earthe past year, local opposition to the scheme has grown, a 15,300-signature petition has been handed in to Downing Street July or August and every local MP has since written to the Strategic Health Authority to express concern at your continuing determination to impose fluoridation on an unwilling community.

formula milk in areas where the water is fluoridated at 1.0ppm may receive excess fluoride, putting them at risk of fluorosis.

#### **Exceed the limit**

The authors conclude that when powdered or liquid concentrate infant formulas are the primary source of nutrition, some babies are likely to exceed the recommended fluoride upper limit if the formula is reconstituted with water containing 1.0ppm fluoride.

The plan for fluoridation is currently on hold as the SHA is facing a legal challenge to its decision.

The High Court has con-

liest the judicial review can be heard by a senior judge is uncertainties with regard to the long term health risks associated with fluoridation, as well as concerns with regard to the possible adverse environmental effects. She also considers that more targeted and less intrusive measures should be used to deal with problems of tooth decay in the Southampton area."

#### **Majority favour**

The legal challenge argues that the SCSHA failed to have regard to the British Government's policy that mass fluoridation of drinking water should only go ahead in any particular area if a majority of the local people are in favour of it.

The open letter, which was submitted by the campaign group Hampshire Against Fluoridation said: Given the financial constraints currently faced by the NHS, we are concerned that precious NHS funds are being used to force through a scheme that the local community does not want. These funds could be better used to develop alternative, more effective oral health schemes.

#### 'Waste of money'

The SHA's decision to continue with water fluoridation and to fight a legal challenge is seen as a waste of Health Service money and we are concerned that this will damage the reputation of the local NHS. DT



see children with their teeth pulled out by the time they are seven. Fluoridation is the only way forward."

#### Hampshire tooth fairies

Patients at the Trafalgar dental clinics in Hampshire this month have been greeted by the Tooth Fairy. Dental nurses, receptionists and dentists dressed up and held a 'name the teddy bear' competition to raise money for new equipment for people with dementia. They raised £431, which will go towards activity and sports equipment for dementia patients visiting the Fenwick2 Health and Well-being Centre in Lyndhurst.

#### www.dental-tribune.co.uk

The letter adds: We urge you to ensure that the local NHS places greater emphasis on the implementation of targeted community-based oral health strategies as an alternative to water fluoridation.

It points to a peer-reviewed study published in the Journal of the American Dental Association that confirms previous research showing that babies fed

The SHA has set aside £400,000 for the legal fight. The legal challenge has been lodged by Leigh Day & Co on behalf of Geraldine Milner, a life long

resident of Southampton.

In a statement, Leigh Day & Co said: "Ms Milner is opposed to the proposals to fluoridate the water supply on account

of the continuing

- Established property fund specialising in the dental sector wish to acquire practice freeholds across the UK.
- Medicaprop will purchase your property freehold in return for a lease to the dentist or partners
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- Set up Practices considered
- · The Fund already has a large portfolio and has an extensive track record in the sector
- · If you have a suitable property and would like to discuss in strictest confidence

Please contact Philip Oag 0203 0868785 or philip@medicaprop.com

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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@dentaltribuneuk.com

### Editorial comment Water water everywhere...

Fluoridation... a topic which is always destined to polarise public opinion. The ongoing saga which has developed over the decision to fluoridate the water in the Southampton area shows no signs of slowing as an open letter of opposition is released. The surprising thing is that more than a dozen dentists have signed the letter. As Neel Kothari said in the last is-

sue (I hope you were all paying attention, there will be a test!), his main concern was not about the issue of fluoride in the water, but rather the way in which despite the overwhelming opposition of the local population to the plans, the

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SHA decided in favour of fluoridation. It may be interesting to find out the reasons these dental professionals chose to sign the letter.

If you have a particular opinion on the issue of fluoridation, please get in touch: Lisa@dentaltribuneuk.com.

This week sees the first of the big conference and events for the year: the Dentistry Show. *Dental Tribune* will be at the event, finding out what's hot and what's not for 2010 for all the gadget lovers out there. Please take a look at back of this issue to find out who is going to be there.

If you see me, come and say hello and let me know what you think of *DT*; I would genuinely love to hear from you.



# The daily grind - ing

ore people are grinding their teeth due to job insecurities caused by the recession, according to dentists.

Edinburgh dentist, Dr Yann Maidment, said he had seen the number of patients showing symptoms of tooth grinding rise by 10 to 20 per cent over the last 18 months.

He believes that people who work in banks or travel a lot for their jobs are among the worst affected due to having more stress in their lives.

Dentists are finding that more patients are needing treatment because a piece has fallen off their tooth due to bruxism, or a molar or incisor has cracked completely and is beyond repair. Others are suffering from headaches or pain in their mouth.

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Dr Sharif Khan, a cosmetic and implant dentist, claims that ambitious people who work in competitive industries are more likely to suffer from bruxism.

"People who are worst affected by grinding are Type A personalities: ambitious people and perfectionists, who usually work in business," said Dr Khan.

The British Dental Health Foundation revealed that its helpline has also seen a rise in calls about the problem.

## Brace yourself for gene research

hildren whose teeth develop later are more likely to need orthodontic treatment, according to new research.

Several genes affect tooth development in the first year of a child's life.

The study, carried out by researchers from Imperial College London, the University of Bristol and the University of Oulu in Finland, found that the teeth of babies with particular genetic variants appear later and that these children have a lower number of teeth by the age of one.

The study scanned the entire genetic code of 6,000 indiv-iduals and the participants were tracked from the mother's early pregnancy right up until adulthood.

Scientists have discovered gene variants that can detect the timing of the appearance of the first tooth in infants and also foretell the number of teeth the baby will have by age one.

Dr Marjo-Riita Jarvelin and her contemporaries hope the research will help to carry out timely treatment and prevent innate dental problems.

One of the genes identified in the research is reportedly linked with a 1.35 greater risk of getting an expensive orthodontic treatment done during 30 years of age.

Dr Jarvelin said: "Our findings should provide a strong foundation for the study of the genetic architecture of tooth development, which as well as its relevance to medicine and dentistry may have implications in evolutionary biology since teeth represent important markers of evolution.

"We hope also that these discoveries will increase knowledge about why fetal growth seems to be such an important factor in the development of many chronic diseases." The study results also established an association between the time the first tooth takes to appear and the dental problems that will be caused to the infant in later life due to it.

The study found that babies with lesser milk teeth by age one are at a greater risk of undergoing dental treatments later on in life than those who develop more teeth by the same age, and this depends entirely on their genes.

The researchers found that some of the genes associated with development of teeth in toddlers were also linked with development of the skull, jaws, ears, fingers, toes, and heart by previous studies.

News

3

This led the study authors to conclude that teeth and many other organs have familiar development passageway during infancy.

"The discoveries of genetic and environmental determinants of human development will help us to understand the development of many disorders which appear later in life," said Dr Jarvelin.

The study and its findings have been published in the Feb. 26 issue of *Public Library of Sci*ence or *PLoS*.

### Green Party: free basic dental care for all

Health policy.

In the policy, the party claims that only half the UK population is provided with free dental healthcare and calls NHS dentistry charges a 'regressive tax'.

A spokesman for the party said: "Greens think it's unfair that many poorer people including children are going without proper dental healthcare, while NHS money is wasted on botched privatisation schemes. Green MPs will fight for a dental health service for the UK that's fair, free and effective."

As for fluoridating the water to improve dental health, the Greens said this is not a viable solution and called it more like a 'sticking plaster with side effects'.

"It's unfair that less affluent populations are having mass medication foisted upon them as a cheap 'sticking plaster solution' instead of being provided with a proper dental health strategy, while health services are treated like profit-driven businesses rather than public services," said a spokesman.

They claim that "mass medication of doubtful efficacy and potential side-effects is no substitute for a proper dental healthcare strategy. We need to be teaching new parents how to look after their toddlers' teeth, and teaching young children from nursery onwards all about how to look after their own teeth properly. And in addition, we need everyone to have access to the right professional support, which means guaranteeing free access to an NHS dentist for everyone who wants it."

The Green Party also states that getting access to an NHS dentist is difficult and there is wide variation across the country with between 55 per cent and 60 per cent of NHS practices not taking any new NHS patients. It is also concerned that less than half of the UK adult population and only around two thirds of children are visiting NHS dentists.



### **NHS Newham launches dental campaign**

HS Newham in East London has launched a dental campaign to raise awareness of the number of NHS dentists in Newham.

The campaign is being supported by Dr Grish Malhotra, who has an NHS surgery in Newham.

He said: "Nationally, there's a perception that people can't find an NHS dentist. Locally, with significant investment there's now more than you may think. Last year, Newham's 30 NHS dentists saw 98,194 patients." The campaign tells people about the availability of local NHS dentists, the range of treatments available and explains the NHS charging system.

Dr Malhotra has been working as a dentist for 27 years and claims to have seen 'great improvements in dentistry'.

He said: "My surgery at The Lift in Manor Park has the latest equipment and dedicated staff. In fact, the surgery looks so good I've added a window sign to tell people we're not a private practice." He added: "Working in Newham is great. When I came to the UK, I lived across the road from where my surgery is now, so I love the area. It's ethnically diverse, the people are fantastic and there's always something going on. Being a dentist is really rewarding; building relationships with patients, relieving pain and helping improve peofirst teeth, so they get used us' so they can see 'we're not scary'.

Robert Moore, director of Primary and Community Services Commissioning, NHS Newham and said: "There are a number of misconceptions people have about NHS dental services in Newham. These include that it is hard to get an appointment, we don't offer quality treatments, and that treatment is expensive. In fact there are many NHS dentists that you can go to in Newham. Costs for their services are set by the NHS and for many NHS dental services are free." He added: "We are investing in NHS dentistry. So it's never been easier to see an NHS dentist locally."

The campaign details NHS charges and explain how visiting the dentist should be part of everyone's health routine pushing the message that it is prevention, not just cure.

ple's oral health."

Dr Malhotra's surgery is surrounded by schools so he sees a lot of children and parents and says that children 'should visit the dentist as soon as they get their There are new dental adverts and posters as well as information leaflets in dentist and GP surgeries, libraries and children's centres in Newham as part of the campaign.



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### 34 is the magic number!

**T**'s been a fantastic start to 2010 for leading custombranded dental plan provider Practice Plan. Not only have they recently achieved a 3 -star status from Best Companies, making them an "extraordinary company to work for", but they have now been ranked position 34 in the

prestigious Sunday Times Top 100 Best Companies to Work For!

This year, The Sunday Times Best Companies lists were derived from entries of 964 companies and in total they surveyed more than 230,000 employee opinions, as well as evaluating

each organisation's key statistics, processes and policies. Practice Plan made a significant impression by gaining an enviable top 50 position, particularly being a brand new entry, and sailing straight into position 34 to beat off stiff competition.

Managing director Nick Dilworth explained: "Ranking 34th place in our first entry into The Sunday Times Top 100 is fantastic. It gives recognition for the way in which we have all pulled together as a team in what has otherwise been a challenging year. I am privileged to be part of such a formidable team who are not only fun to be around, but whose continued enthusiasm and commitment is beyond question."

The company gained amazing results from the employee questionnaires, which evaluated the staff's opinions on factors such as leadership, their manager, pay and benefits, wellbeing, the firm's willingness to give something back, people's personal development and overall sense of affiliation with their employers.

This year's annual awards ceremony, held at the Battersea Evolution, was a particularly special event as Best Companies themselves were celebrating their tenth anniversary, and so the glamorous black tie evening was bigger and better than ever. In usual Practice Plan style though, it wasn't the list of directors who attended the celebrations, Managing Director Nick Dilworth invited nine guests, picked at random from all areas of the business to attend the ceremony with him.

Dan Griffiths senior graphic designer who was at the awards said; "I love working at Practice Plan. My colleagues are all fun to work with and know



what they're doing. Also, we benefit from flexitime, a weekly fresh fruit basket, loads of tea and coffee, as well as bosses that respect us and make us feel worthwhile." **D** 

### One in five say they would benefit from braces



ne in five people believe their teeth would benefit from having a brace, according to a new report.

The survey, commissioned by British Lingual Orthodontic Society (BLOS), found six per cent – equating to 3.1m of the population would consider giving orthodontic treatment to a friend as a present, while 15-17 year olds were shown as the most favourable to treatment, with one in four saying they would definitely benefit from teeth straightening.

The survey revealed that people living in the South East are more likely to believe they need braces.

Of those living in the South East of England, 30 per cent felt

their teeth would benefit from orthodontics compared to seven per cent of those living in the South West.

Gender does not make much of a difference, with 18 per cent of men responding positively compared to 19 per cent of women.

The age group least interested in orthodontic treatment appeared to be the 45-54s, with only five per-cent believing they would benefit from treatment, while the over-70s were next with six per cent.

The survey also flagged up poor awareness of less visible lingual braces, with 72 per cent of people unaware of the treatment.

Rob Slater, chairman of BLOS, welcomed the positive

attitude to orthodontic braces among the British and said: "The fact that so many young people today have conventional braces, thanks to the National Health Service, might explain the lack of awareness of invisible lingual braces.

"Another factor is that in the past, the UK has been influenced by American trends. Lingual braces are not so widely adopted in the USA where people tend to be happy to talk about the work they are having done. In countries like Italy and France, lingual braces are more popular, since Europeans appreciate the discretion of invisible braces."

He added: "Already we are finding that a fair proportion of teenagers would rather, where possible, pay privately to have lingual braces because it makes them feel less self-conscious, joining forces with those in their 30s and 40s who, for professional reasons, prefer not to have visible braces." DT

### Dentist immortalised in song

Pop singer, Owl City, has immortalised his dentist by writing about him in one of his songs. His song 'Dental Care' details his terror of visiting his dentist. Adam Young revealed in a BBC interview that he has had the same guy for years now and said: "We're friends and I don't know if he's heard that track. But if he did, I'm sure he would be very amused and not be offended." **T** 



### Digital impression-taking technology market set to grow

he digital impressiontaking technology market will see rapid growth as dentists adopt this quick and accurate solution to manufacturing and fitting dental restorations, according to a recent report.

The US market for digital impression-taking systems is estimated to reach \$83.5 million by 2015, and the UK is set to follow suit, according to an online report by DentalProductsReport.com. Dr James Hooper from The Dental Practice, Hove, who uses the Lava chairside oral scanner COS from 3M ESPE said: "I'm not surprised by this news as I recognised this was a big move forward as soon as it came out.

"I'm amazed by the accuracy and storage of the information and being able to store it for so long – something a plaster model just can't do." He believes that 'every dental practice and laboratory will be looking to use digital impressioning' in the near future.'

The primary advantages of using a digital impression system over traditional processes is the elimination of many manual steps involved in creating a restoration.

The technology produces a very accurate restoration because the three-dimensional image is produced instantly, allowing the dentist to make any

'I'm amazed by the accuracy and storage of the information and being able to store it for so long – something a plaster model just can't do.' adjustments necessary to the prep site in real time.

Taking impressions can also be an unpleasant experience for the patients as it can induce a 'gag' reflex, making the procedure distressing for both patient and dentist.

A spokeswoman for 3M ESPE which produces Lava COS said: "Digital technology has truly found its place in the dental industry."

# Live dental implant surgery at NEC Birmingham 19-20 March

DIO UK demonstrates how its new implant technology is changing the face of implant surgery in the UK



any UK dentists choose not to provide dental implant surgery either because they are not familiar with the technique or because they perceive the costs to be too high for their patients. However DIO UK is quickly demonstrating that the cost is rapidly becoming less of a problem and, by using the company's range of high-quality, lowcost implants, even dentists that are relatively inexperienced in implant surgery can quickly learn to perform the procedure successfully.

The new Department of Health guidelines require NHS dentists to install the latest decontamination equipment, leading to the potential for more practices to provide surgical and implant services. DIO UK is helping these practices through marketing assistance and by increasing their profitability as the lowest-cost option to enter the dental implant market.

To prove how easy the new DIO implants are to use, DIO will be presenting its immediate loading implants at The Dentistry Show 19-20 March at the NEC, explaining the pros and cons of immediate loading and the advantages of DIO's impl-ants in these cases. Dr. Arrif Lalani, dental advisor for the Kingston vocational training scheme at Kingston Hospital and principal at Smile Dental Implants of Surbiton in Surrey, will be inviting a dentist relatively new to implants to perform live surgery under his supervision. This will be the first time live implant surgery will have been shown in public in the UK.

Although Dr. Lalani is comparatively new to implant surgery he says that working with the DIO implants makes the process relatively easy. "Working with DIO's implants is so simple and straightforward. They have no quirks," he said. "They are the perfect way to start for those dentists considering offering implants as an extra service to their patients or freeing themselves from the financial ties of another manufacturer."

The simplicity of the process is largely attributed to the innovative design of the implants themselves, which DIO have boldly called "The best implants in the world?". Their unique tapered design features a double thread to increase primary stability, even with low bone density. The design also prevents cortical bone loss, significantly reduces stress and increases the opportunity for immediate loading. The self tapping cutting edge allows easy insertion and automatically removes cut bone. The design also promotes fast healing and gingival recovery. Also presenting at the show will be Dr. John Ballentyne who will demonstrate his unique and innovative immediate loading technique using DIO's dental implants to provide a temporary full arch bridge in a simple way. Dr. Ballentyne has been practicing for over 40 years and established Chelmer Village Dental, Essex in 1990. He has a wealth of experience in both traditional and cosmetic dentistry. Having fitted more than one thousand implants, he has helped many patients achieve the perfect smile.

Dr. Ballentyne said he originally began using DIO implants following a visit to DIO headquarters and factory in South Korea. "When I visited the factory in Korea I was very impressed with the quality and attention to detail of the implants. They work beautifully for this immediate loading procedure."

Iain Forster, Managing Director of DIO UK

said that Dr. Lalani and Dr. Ballentyne are both perfect fi ts for DIO. He said, "Arrif and John are those refreshing breeds of implant surgeons who aren't blinkered by convention and are happy to do whatever is best for their patients and businesses. I think that's why they chose to use DIO implant systems."

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DIO UK will be appearing at The Dentistry Show, 19-20 March at the NEC. DIO's implant technology and immediate loading demonstration will be held in the Live Theatre at 13:30 on 19th March. 0845 123 3996 info@DIOUK.com www.DIOUK.com



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### DENTAL TRIBUNE United Kingdom Edition · March 15-21, 2010

### **Become a Fellow of the BACD**

The deadline is approaching for accredited members wanting to become Fellows of the British Academy of Cosmetic Dentistry (BACD).

The highest and final stage of the BACD's Career Path in Cosmetic Dentistry, Fellowship is aimed at those working at an advanced level who are also sharing their knowledge with the rest of the profession.

The Fellowship is open to accredited members who have either published a scientific article on a clinical subject related to cosmetic dentistry in a peer-reviewed publication, or have given a postgraduate lecture at a BACD meeting or another national or international conference.

A spokeswoman for the BACD said: "The BACD is committed to promoting clinical excellence through education and professional development.

"For accredited members, achieving BACD Fellowship indicates excellence in interdisciplinary treatment planning and the execution of complex treatments to consistently high standards. "The benefits of Fellowship status include use of the title 'Fellow of the British Academy of Cosmetic Dentistry'; a plaque acknowledging Fellowship status, which will be superior to the Accreditation plaque; and use of the approved Fellow logo."

For those considering submitting cases for examination, the deadline is 16 April.

For more information contact the BACD on telephone number 020 7612 4166 or email info@bacd.com.

#### Tougher action to support medicines supply

package of tough new actions to ensure that NHS patients can get the medicines they need was agreed at a summit to discuss concerns about current difficulties with the supply of medicines, hosted by Health Secretary Andy Burnham and Health Minister Mike O'Brien yesterday.

The actions that were jointly agreed between the delegates include:

• A more explicit duty for manufacturers and wholesalers to ensure that sufficient stocks of medicines are available to NHS patients;

• A series of targeted inspections by the Medicines and Healthcare Products Regulatory Authority;

• Tougher standards for the issue of licences for medical whole-salers; and

• Development of best practice guidance on how supply difficulties should be dealt with by healthcare professionals, pharmacists, manufacturers and wholesalers.

The targeted inspections mean that manufacturers and wholesalers will risk losing their licences and face prosecution if they breach legal duties on supply of medicines. Pharmacists and doctors risk being called to account by their professional bodies for breaching their ethical obligation to put patients first.



and the Medicines and Healthcare products Reg-ulatory Agency - to discuss the nature and scale of medicines supply problems and how the issues can be tackled collaboratively.

agreed to work together to resolve the issue.

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DIRECTA AB P.O. Box 723, SE-194 27 Upplands Väsby, Sweden Tel: +46 8 506 505 75, Fax: +46 8 590 306 30, info@directadental.com, www.directadental.com Ministers met with a number of pharmaceutical supply chain stakeholders from across the UK - including the Association of the British Pharmaceutical Industry, the British Association of Pharmaceutical Wholesalers, the National Pharmacy Association, the Pharmaceutical Services Negotiating Committee The issue of medicine shortages was raised publicly last year when some pharmacists and patients found it difficult to get hold of certain drugs, as a result of a number of unscrupulous traders exporting medicines meant for NHS patients to Europe for profit, because of the cheaper pound.

Health Minister Mike O'Brien said: "We have reached agr-eement on a way to help NHS patients get the medicines they need. Manufacturers, wholesalers, pharmacy bodies, regulators and Government all has resulted in some medicines destined for NHS pati-ents being sold abroad for extra profit by a small number of unscrupulous speculators. Some pharmacists have had trouble getting hold of certain drugs because of this. For months, I have been seriously concerned about the potential impact of this on patients. It is unacceptable that some people have already had to wait longer than they should have to get their medication. Patients must come before profits.

"This new package of measures will help to ensure that NHS patients do not suffer and get the care they need when they need it." **DT** 

# **GDPUK round-up**

#### The GDPUK online community is always keen to air and share its views, but this month members reveal an anarchic side, says Tony Jacobs

The spector of HTM 01-05 has really made a difference. Colleagues are making all sorts of plans, some with their tongue in cheek, and sometimes wishing for a revolution.

One discussion started with the concept of practising "underground" – could this be done in modern Britain? Only treat a limited number of people you know, ask them to maintain secrecy, deregister from the GDC, the PCT and all the paraphernalia of dental governance, hide from business rates, the taxman, banks, CQC. Cut governance costs, maintain standards, how much would fees reduce? Is it possible, would the snoopers find the dentist and what would happen? Intriguing? Jail?

Thoughts of civil disobedience with regard to the dreaded HTM document are rising. Will dentists march on Parliament? The *British Dental Journal* editor called for colleagues to create a quiet revolution by telling every patient what this political plan would cost each patient, without spoon-feeding his readers on how to go about this. How much patients' money will be wasted? Plus the environmental cost is huge, the thought of which alarms a further group of patients.

'Many intelligent readers could not count how many human rights had been trashed in this incident.'

#### **A NICE topic**

One GDPUK reader reminded us all that it is possible for anyone to suggest topics to NICE for their consideration, using a form on the NICE website. A number of GDPUKers have now done this, and more will be sought to do so. It is simple – there are many reasons why this document is political, and does not lead to a health gain for the patient. HIV. The dentist would then not be allowed to work until the results were in. When a discussion followed, the nurse warned him he could not leave until he had given blood for this purpose. In addition, he had to produce photoID, but was not allowed to leave until this was produced, so his wife had to leave work, and bring a passport from home to the hospital.

Many intelligent readers could not count how many human rights had been trashed in this incident. The dentist has now complained to the chair of the Trust, and no doubt there will be more information to follow. This seems to be a warning as to how occupational health deals with dentists. One the best pieces of advice was to anyone faced with this situation – produce your mobile phone with voice recorder, even if you don't know how to make this work, remind the threatening nurse that she does not have your consent, and you are recording the conversation.

To find out what happens next... join and read at http:// www.gdpuk.com. **pr** 

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### **Putting something back**

Dental Tribune profiles Seema Sharma, her career in dentistry, her love of business management and her journey from Millionaire to Mumbai

eema Sharma is the owner of a few successful dental practices in London, where she also runs a training business and management consultancy, Dentabyte Limited, looks after a property portfolio and has recently set up her own charitable foundation. All this she combines with bringing up two daughters with her cardiologist husband Sanjay.

It is not a bad list of achievements for someone who describes herself as a 'bit of a dabbler'.

Last year she added a new title when she became Channel 4's Slumdog Secret Millionaire, distributing much needed support for the street kids and slum dwellers of Mumbai. It is not a description she enjoys, but Seema says she has no regrets about taking part in the television series and raising awareness.

"I believe that if a bus of opportunity comes past you should get on it. This was a one-off opportunity, a chance of a lifetime. I had also become much more interested recently in my own cultural background, and thought this might be a way to give something back."

Seema qualified as a dentist 18 years ago. She chose this path because she felt it was a job she could combine with having a family. Although she enjoyed the clinical work and was able to set up her own practice at the age of 24, she found it was the actual running of the business that gave her the most pleasure. Inefficiencies in the practice frustrat-



Seema Sharma at the Doorstep school



ed her and she discovered she was good at finding solutions. So under her guidance the business began to flourish.

Soon she was spending more time as a practice lead than as a dentist, and even though she had become the mother of two daughters she still found the time and energy to pursue her other enthusiasm - property. In 1999 she saw the opportunity to buy a run down period house in London and renovate it. It doubled in value, and she enjoyed the process so much that in 2004 she decided to buy and renovate another one.

At the same time she took a chance and bought her Docklands dental premises when it came up for auction. It was a commercial investment that paid off in 2006 when she sold it on to a property developer and became a millionaire on the proceeds. These property gains have enabled her to further expand the core dental business. With a new business partner she put in a successful bid for a practice in Surrey.

Shortly afterwards they bid for another in East London, where Seema has spent all her working life, and won a fiercely competitive blended NHS contract tender for a new type of holistic practice in Bow, catering for underprivileged communities in East London. By this time the original practice had morphed into a small group, and Seema no longer had time to practise clinical dentistry. Instead she devoted her energies to running the business, and on management training.

The process of building the business was not, she insists, the result of a thought-out plan. "I just followed my inclination to sort things out, to improve things, and gradually evolved into being a leader. There was never an expansion plan. It was more of an organic development, of investing in people who could free me up so I could develop new activities."

By delegating day-to-day management to her team, Seema was able to turn her attention to new business opportunities. For years she has managed a medical teaching course for junior doctors, designed and run by her cardiologist husband, Prof Sanjay Sharma, and from this she built a practice management consultancy supporting dentists preparing for NHS blended contracting and Care Quality Commission registration.

The capital gains she made from her well-timed forays into the property market have now enabled Seema to safeguard the financial fut-ure for her family as well as expand her dental business. This year she has bought a new building to relocate the Docklands practice into state of the art space, and plans to devote 25 per cent of her time to her charitable activities.

Seema says that donations are beginning to roll into the Sharma Foundation, as she builds on the publicity from the TV programme. Her intention is to turn the charity into the kind of organisation that can make a difference to the lives of poor children in India. That is an ambitious project, but her track record suggests that Seema will not be satisfied with half measures. She is considering commissioning a double decker bus for a challenge team of London bus drivers to drive from Marble Arch to Mumbai to donate to Doorstep School - the school on wheels she met during the making of the programme - although she has not decided if she will get on this particular bus....watch this space.

Seema will be speaking at the **Clinical Innovations Conference** about her journey to success, and the satisfaction of putting something back.

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# The 10th dimension... the power of ten

Ed Bonner and Adrianne Morris discuss the etiquette of email communication



n days gone by we used to write letters, and this was generally considered an art form along with poetry and prose. By the same token, in bygone days, people used to prepare food for cooking and used telephones that were plugged into wall sockets. Those days are gone and today we are into instant mobile phones, pre-prepared food and instant communication systems. In respect of the latter, communication doesn't come much more instantly than an email. The corollary to 'instant' is 'brevity'. With this in mind, let's look at some things that we should or should not be doing;

Where possible, delegate to a secretary the task of screening, opening and responding to your emails. This implies that you should have a separate email address for personal emails.

busy, and cannot afford to spend important time reading spam or even low-grade ham, which can take up 80 per cent of your time to deal with, leaving 20 per cent for what is important. Kill it quickly and without regret. You could send a response saying: "Your forwarded stories are amusing but my inbox is becoming overcrowded, so please don't send any more".

4 If it looks important, open, read and respond instantly and succinctly. In all cases, keep your replies brief and to the point - wordiness is not virtuous in the ethereal world of email communication. The subject line should be very succinct, for example, "meeting", and the main message should be short, for example, "Let's meet at 12 – best wishes, Ed". What you do not want to do is to be repetitive. **6**Regarding copying and forwarding of a email, there is an unfortunate tendency to overdo this, and the technique should be reserved for essential reading only. If you keep getting information you don't really need, drop a note to the perpetrator expressing gratitude for keeping you in the loop but requesting that only essential information be sent.

Should you bother with the use of capital letters? This is a personal choice, and personally I have no issue with no capitals, but if it annoys you to receive a message in lower case only, do as you would be done unto.

Should you do a spell Check? In my book, definitely; I find spelling errors profoundly irritating.

'Your forwarded stories are amusing but my inbox is becoming overcrowded, so please don't send any more.'

**9** Rather than bunching a whole batch of information on different subjects into one email, send multiple shorter messages with succinct titles.

**10** Avoid printing copies of every email you receive or send, unless it is essential to do so. Filing paper can soon become a nightmare. Be kind to trees.

If on the one hand emails can be a brilliant way of communicating, on the other it can be distracting and a gross waste of time, so be parsimonious with how much you throw away on non-essential communication. You could be earning money in that time.



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2 Do something with each email you receive – either open, or delete. Don't just leave it sitting unopened. Nothing is more irritating than seeing the same heading crop up in bold each time we access our inbox. The number of emails in your inbox should always read zero when you close.

The quickest way to deal with an email is to delete it, and this should be the fate of every email that appears non-essential reading. There is an unfortunate tendency in our brave new world for friends to wish to share anything from a funny story to a dramatic picture. Most of us are

Kever write anything that Umay come back to bite you later, especially when the email you have just received evokes emotional or angry feelings. You should not reply immediately, but think through your response carefully, write it, read it and think again without sending. Rather acknowledge receipt, and say your written response will follow. Your response should not be angry or critical, but conciliatory and when necessary appeasing. Be careful with direct apologies, although you can say something like: "I am sorry you had an uncomfortable experience". Build bridges, not court cases.

#### About the author

Adrianne Morris is a highly trained success coach whose aim is to get people from where they are now to where they want to be, in clear measured steps.

Ed Bonner has owned many practices, and now consults with and coaches dentists and their staff to achieve their potential. For a free consultation, or a complementary copy of The Power of Ten e-zine, email Adrianne at alplifecoach@yahoo.com or Ed on bonner. edwin@gmail.com, or visit www.thepoweroften.co.uk.

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