DENTAL TRIBUNE

The World's Dental Newspaper · United Kingdom Edition

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News in Brief

Tackling waiting times

Health bosses have confirmed that an additional 12,000 NHS dental places will be made available in Plymouth in an effort to tackle waiting lists. It is hoped that the new places will also help encourage people to visit their dentist on a regular basis. Currently around 1,800 people are waiting to register with an NHS dentist in Plymouth, however, thanks to £400,000 of funding, the new contracts will open up a further 5,000 dental places, plus a further 7,000 dental places in some of the poorest areas of the city. Rob Witton, a public health dentist working for NHS Plymouth, has urged patients to make use of the services available to them and to attend regular check-ups to prevent oral health problems from developing and putting off treatment will increase the risk of complex diseases developing, which are much more costly to treat.

Brushing saves lives

A study that has identified a possible link between mouth bacteria and meningitis has suggested that regular brushing and flossing teeth could help prevent the disease. The suggestion comes after researchers in Zurich found the newly-identified bacterium Streptococcus tigurinus in the blood of patients with meningitis. According to a report, the bacterium was also found in people with spondylodiscitis, or inflammation of the spine, and a type of heart disease called endocarditis. It is thought that the bacterium could get into the bloodstream through bleeding comes, although more research is needed to confirm the risk. The study has been published in the *International Journal of Systematic and Evolutionary Microbiology*.

Whistle while you work

Dentist Harvey Cooperberg, or as he is more famously known, the singing dentist, is keeping his audience smiling at his practice on Main St. Markham, after being one of a dozen Canadians that featured on Way off Broadway on Bravo Canada at the beginning of March. For 30 years, 61-year-old Dr Cooperberg has been a dentist; however he admits that he is "addicted to theatre". Throughout his practice the walls are covered with pictures of Dr Cooperberg performing in Wizard of Oz, Beauty and the Beast and a whole host of productions.

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CQC Chief Exec Resigns

CQC Cynthia Bower resigns as critcal report is released

It's been a turbulent time for the CQC these past few weeks, what with another report on the performance of the CQC published by the Department of Health (turn to page two for more detail on *The Performance and Capability Review of the CQC*) and Cynthia Bower, Chief Executive of the Care Quality Commission (CQC) suddenly announcing her resignation.

Since the news there has been speculation regarding her sudden departure, and deepening the mystery surrounding her resignation, a non-executive member of the CQC issued a 'warning' less than 24 hours before the news, concerning 'planned changes' to the current inspection regime. The statement revealed that the new approach to be adopted by the CQC 'will see inspectors looking more for non-compliance, rather than compliance' and that from 1 April, there will be no time given for trusts to comply through improvement notices; they will simply be labelled as non-compliant or compliant.

Dental Tribune contacted CQC regarding the future of CQC now that the Chief Executive had resigned; a spokesperson said that "CQC will continue to regulate health and social care providers as directed by the Health and Social Care Act 2008."

In the official press release from the CQC, Cynthia Bower said: "After almost four years leading CQC, I feel that it is now time to move on. The process of setting up an entirely new system of regulation has been intensely challenging - but we have accomplished an enormous amount. We have merged three organisations, registered 40,000 provider locations and brought virtually the entire health and social care network under one set of standards, which focus on the needs of people who use services.

"I am pleased that the Department of Health Performance and Capability review, published today, recognises the scale of what has been achieved - and in particular the significant improvements made over the last nine months. I'm confident that CQC will continue to build on the progress already made, delivering increasing benefits to people who use services by shining a light on poor care - and I am proud to have played a part in this."

Jo Williams, Chair of the CQC, said: "I am very sorry that Cynthia has decided to move on, but I understand her desire to take on new challenges. I would like to take this opportunity to thank her for the enormous contribution she has made to the setting up and running of CQC. She has shown tireless commitment to this organisation, and she leaves it in a strong position to carry out our essential role in tackling poor care. This is confirmed by today's Performance Review from the Department of Health, which recognises CQC's "considerable achievements" in setting the essential platform from which tougher regulatory action can be taken."

Sir David Nicholson, NHS Chief Executive, said: "I would like to thank Cynthia for her commitment as CQC Chief Executive. Building a new regulator involves great vision, leadership and resilience. This is always a complex task and one under constant scrutiny. It is great credit to Cynthia's leadership to have achieved this."

Una O'Brien, Permanent Secretary of the Department of Health, said: "Cynthia has provided energetic leadership to the CQC from its very outset. Over her four years as Chief Executive, CQC has introduced - for the first time - a new model of regulation for health and social care. Cynthia is a committed public servant and I wish her well for the future."

Cynthia Bower has agreed with the Chair that she will remain in post until autumn 2012 to allow for an appropriate handover. The recruitment process for her successor will begin shortly. DT

Proving Turing's tiger stripe theory

Could there be a theory behind these stripes?

Researchers from King's College London Dental Institute have provided the first experimental evidence confirming a great British mathematician's theory of how biological patterns such as tiger stripes or leopard spots are formed.

The study, funded by the Medical Research Council and published online in *Nature Genetics*, not only demonstrates a mechanism which is likely to be widely relevant in vertebrate development, but also provides confidence that chemicals called morphogens, which control these patterns, can be used in regenerative medicine to differentiate stem cells into tissue.

The findings provide evidence to support a theory first suggested in the 1950s by famous codebreaker and mathematician Alan Turing, whose centenary falls this year. He put forward the idea that regular repeating patterns in biological systems are generated by a pair of morphogens that work together as an 'activator' and 'inhibitor'.

To test the theory the researchers studied the development of the regularly spaced ridges found in the roof of the mouth in mice. Carrying out experiments in mouse embryos, the team identified the pair of morphogens working together to influence where each ridge will be formed. These chemicals controlled each other's expression, activating and inhibiting production and therefore controlling the generation of the ridge pattern.

The researchers were able to identify the specific morphogens involved in this process - FGF (Fibroblast Growth Factor) and Shh (Sonic Hedgehog - so-called because laboratory fruit flies lacking the fly version have extra bristles on their bodies). They showed that when these morphogens' activity is increased or decreased, the pattern of the ridges in the mouth palate are affected in ways predicted by Turing's equations. For the first time the actual morphogens involved in this process were identified and the team were able to see exactly the effects predicted by Turing's 60-year-old speculative theory.

Dr Jeremy Green from the Department of Craniofacial Development at King's Dental Institute said: "Regularly spaced structures, from vertebrae and hair follicles to the stripes on a tiger or zebrafish, are a fundamental motif in biology. There are several theories about how patterns in nature are formed, but until now there was only circumstantial evidence for Turing's mechanism. Our study provides the first experimental identification of an activator-inhibitor system at work in the generation of stripes - in this case, in the ridges of the mouth palate.

"Although important in feeling and tasting food, ridges in the mouth are not of great medical significance. However, they have proven extremely valuable here in validating an old theory of the activator-inhibitor model first put forward by Alan Turing in the 50s.

"Not only does this show us how patterns such as stripes are formed, but itprovides confidence that these morphogens (chemicals) can be used in futureregenerative medicine to regenerate structure and pattern when differentiating stem cells into other tissues.

"As this year marks Turing's centenary, it is a fitting tribute to this great mathematician and computer scientist that we should now be able to prove that his theory was right all along!" DT

CQC performance review published

The Department of Health today published its findings from the *Performance and Capability Review of the Care Quality Commission.*

The review sets out that the CQC has made considerable achievements since it was established in 2009 as the new watchdog for health and social care services in England. It has brought together three different organisations, creating the largest organisation of its kind in the world, and set up a new system of regulation. It has delivered a challenging programme of work, registering more than 21,000 providers since April 2010 and is increasing thenumber of inspections taking place.

However, the review found that the scale of this task had been underestimated by CQC and the Department, and more could have done more to manage risks during the early years of the organisation's operation. The review also acknowledges that the role of the CQC has not been as clear as it needs to be to health and care providers, patients and the public.

But the review recognises that over the last nine months, the CQC has made significant improvements, increasing inspection staffing and focusing more on its core duties to register and inspect healthcare providers.

The review has made a series of recommendations that are designed to support its continuing improvement, by strengthening the CQC Board and building on what has already been learnt:

• The CQC must become more strategic and set out more clearly what success looks like
• The Board should be strengthened with the appointment of additional members and that there should be clearer arrangements between the Board and the Executive to ensure that the Board is holding the operation of the CQC to account
• The CQC should build an evidence base for its regulatory model to demonstrate and ensure confidence in its effectiveness
• Frontline inspectors should have greater access to individuals with professional experience, such as doctors, nurses or social care experts. There should also be more consistency in how inspections are carried out and there should be enough inspectors to meet future demand

The review also recognises that the Department has more to do to support the CQC and ensure that it is held to account for its role in regulating health and social care. Therefore, we will be working with the CQC to recruit additional non-executive members to the Board. This recruitment process will start imminently.

In a letter to the Chair of the CQC, Una O'Brien, Department of Health Permanent Secretary, said: "Over the last nine months, CQC has made significant improvements in performance and in focus on core purpose. However, the evidence has clearly shown there is more work to do to build on recent successes to ensure the organisation has the capability and capacity to respond to patient, public and Parliamentary expectations in the future. Lessons need to be learned from the performance shortcomings of the early years. The leadership of the organisation are willing to listen and act on issues raised about the organisation's performance."

In a letter responding to the Review, Jo Williams, Chair of the CQC said: "I would like to give a broad welcome to the findings of the review. The process has recognised the context and complexity of CQC's work, progress made and where more work is needed to further develop our regulatory approach. We take seriously the recommendations of the review and have a desire to make further progress on all areas of the review."

The Department will also take steps to strengthen the Board to ensure improvements can be sustained. This includes proposing changes to the Board so that instead of comprising only non-executives, it becomes a unitary Board made up mainly of non-executives but with senior executives also on the Board who are held more systematically to account. DH will set out shortly how it plans to take forward this recommendation.

The review can be found on the Department of Health website www.dh.gov.uk/health/2012/02/cqc-performance-review/ DT

NHS dental costs to increase in England

The government has announced that from April 1st the costs of basic dental treatment will be raised to £17.50, a 50p rise, whilst prescriptions will be raised by 25p to £7.65.

A BBC report also stated that there will be further rises of up to £5 for complex dental treatment.

Although doctors have previously called for all prescription charges to be abolished in England, the changes in the charges, which were outlined by Health Minister Simon Burns, will be put before Parliament soon.

In Scotland, Wales and Northern Ireland charges have already been scrapped.

The announcement will have an effect on dental treatment, with Band 1 treatment, consisting of examination, diagnosis and advice, X-rays, scale and polish and treatment planning, set to cost £17.50.

Charges for Band 2 treatment, consisting of root canal treatments, extractions and covering fillings, will increase from £47 to £48, whilst Band 3 treatment prices will be affected by a £5 increase, meaning that crowns, dentures and bridges will cost £209.

Mr Burns said: "Dental charges represent an important contribution to the overall cost of dental services.

"The exact amount raised will be dependent upon the level and type of primary care trusts and the proportion of charge-paying patients who attend dentists and the level of treatment they require."

However, with regards to prescription, the cost of a prescription payment certificate (PPC), which is valid for three months, will remain at £29.10 and the price of an annual PPC will be held at £104.

Mr Burns said: "PPCs offer savings for those needing four or more items in three months or 14 or more items in one year."

Further increases will also be imposed, such as the charges for elastic stockings and tights, wigs and fabric supports, which are supplied by hospitals. DT

Editorial comment

So, the event that many in the healthcare arena has been waiting for has happened. No, not a freak accident that has wiped the NHS reforms off the face of the planet (although for many that would be high on their miracle list), but the resignation of Care Quality Commission Chief Executive Cynthia Bower.

Ms Bower's departure coincided with the *Performance and Capability Review of the CQC*, where despite all the positive spin, the regulator is yet again criticised for simply not being up to the task. Not that that had anything to do with her resigning of course – according to her statement, she feels she can do no more after four years at the helm of one of the most unpopular regulatory bodies ever conceived.

Personally, I'm not sure that Ms Bower's departure will do more than decapitate the figurehead. The CQC did not grow organically – from the day it was established it was a large organisation that would be difficult to manage, not started small and allowed to grow into its regulatory function. Does the chief executive's role have any real bearing on the day-to-day running of the regulator or the problems that been so publicly reported? Interestingly, the regulator has stated that it will be business as usual and Ms Bowers' departure will not signal a change in direction – not sure that is what people will be wanting to hear! DT

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

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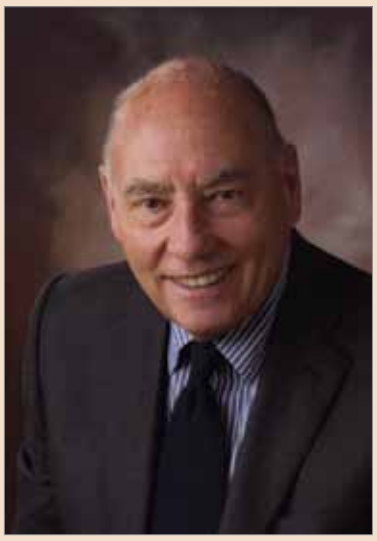
Foundation elects new President



John Siebert, *(pictured)*, has been elected as the new President of the British Dental Health Foundation.

John Siebert, Chairman of George Warman Publications, has become the new President of the British Dental Health Foundation. John replaces outgoing President Daniel Davis and will serve as President for the next two years.

John joined the Foundation in March 2002. After serving his tenure as President-Elect, he now takes his position as President in his 10th year with the Foundation.

John said: "I am particularly proud to lead the Foundation and I would like to thank outgoing President Daniel Davis who helped to lead the Foundation during very difficult times for charitable organisations.

"I believe the Foundation has developed a very strong reputation over the past 40 years. The Trustees and I are looking forward to increasing awareness of the Foundation's role and activities within the profession and the general public, as well as working successfully with our many partners to help improve the nation's oral health further." DT

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

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Dental pulp stem cells transformed by 'bad breath' chemical

Japanese scientists have found that the odorous compound responsible for halitosis – otherwise known as bad breath – is ideal for harvesting stem cells taken from human dental pulp.

In a study published in IOP *Publishing's Journal of Breath Research*, researchers showed that hydrogen sulphide (H2S) increased the ability of adult stem cells to differentiate into hepatic (liver) cells, furthering their reputation as a reliable source for future liver-cell therapy.

This is the first time that liver cells have been produced from human dental pulp and, even more impressively, have been produced in high numbers of high purity.

"High purity means there are less 'wrong cells' that are being differentiated to other tissues, or remaining as stem cells. Moreover, these facts suggest that patients undergoing transplantation with the hepatic cells may have almost no possibility of developing teratomas or cancers, as can be the case when using bone marrow stem cells," said lead author of the study Dr Ken Yaegaki.

The remarkable transforming ability of stem cells has led to significant focus from research groups around the world and given rise to expectations of cures for numerable diseases, including Parkinson's and Alzheimer's.

In this study, Dr Ken Yaegaki and his group, from Nippon Dental University, Japan, used stem cells from dental pulp – the central part of the tooth made up of connective tissue and cells – which were obtained from the teeth of dental patients who were undergoing routine tooth extractions.

Once the cells were sufficiently prepared, they were separated into two batches (a test and a control) and the test cells incubated in a H2S chamber. They were harvested and analysed after 3, 6 and 9 days to see if the cells had successfully transformed into liver cells.

To test if the cells successfully differentiated under the influence of H2S, the researchers carried out a series of tests looking at features that were characteristic of liver cells. In addition to physical observations under the microscope, the researchers investigated the cell's ability to store glycogen and then recorded the amount of urea contained in the cell.

"Until now, nobody has produced the protocol to regenerate such a huge number of hepatic cells for human transplantation. Compared to the traditional method of using fetal bovine serum to produce the cells, our method is productive and, most importantly, safe" continued Dr Yaegaki.

Hydrogen sulphide (H2S) has the characteristic smell of rotten eggs and is produced throughout the body in the tissues. Although its exact function is unknown, researchers have been led to believe that it plays a key role in many physiological processes and disease states. DT

• Source: Institute of Physics, Journal of Breath Research

Cigarettes vending machine ban reaches Northern Ireland

Cigarette vending machines will be banned

The new legislation comes as Northern Ireland follow the precedent set by England and Wales by banning the sale of tobacco products from vending machines in an attempt to make it more difficult for young people to purchase tobacco.

In a speech made last year, Health Minister Edwin Poots revealed that for 14 per cent of 11-16 year olds, cigarette vending machines were the usual source of obtaining tobacco.

A recent survey by the British Dental Health Foundation revealed around one in seven (13 per cent) of 12-16 year olds in the UK admitted to smoking. While 97 cent of young people knew the harmful effects of smoking, only half would change their ways.

Smoking is the major cause of mouth cancer in the UK. Drinking alcohol to excess, poor diet and some sexually transmitted infections (Human Papilloma Virus or HPV) are also known risk factors for mouth cancer which is likely to affect 60,000 people in the UK over the next decade.

Chief Executive of the Foundation, Dr Nigel Carter, welcomed the ban.

Dr Carter said: "The ban is another welcome measure to stop young people from obtaining tobacco from what is a largely unsupervised source.

"By joining England and Wales in introducing such legislation, the ban makes it more difficult for young people to engage in smoking. It will also protect them from the long-term ill-effects of tobacco use, including the risk of mouth cancer.

"It is really important that everyone knows the warning signs for mouth cancer. They include mouth ulcers which do not heal within three weeks, red and white patches in the mouth and unusual lumps or swellings in the mouth. Our message to everyone is 'If in doubt, get checked out'." DT

Most dentists not ready for compulsory EPCs

The majority of those dentists who are looking to sell their dental practices in 2012 are not ready for new legislation in regard to EPCs according to Andy Acton of Frank Taylor and Associates and Phil McCabe of the Forum of Private Business. The new changes will come into force on 6th April and mean that:

• An energy performance certificate will be required on all marketing for all properties that are to be sold or let

• The responsibility for the EPC will rest with the 'relevant person' – defined as either the owner or the agent. Both will have a duty to ensure an EPC is commissioned before marketing a property

• Trading Standards Officers will have new powers to force sellers and agents to produce copies of EPCs for inspection

• It will also be a mandatory requirement for air conditioning inspection reports to be lodged on the central Non Domestic EPC Register

• EPCs will need to be attached to written details of the property – the option to include the asset rating will no longer apply. The first page of the EPC must be included

Andy commented, "This legislation may slip under the radar as it seems to have been announced quite quietly and we want to ensure that dentists are aware of this. Put simply, after the 6th April, the marketing of a dental practice just cannot happen without an EPC."

Phil McCabe, Senior Policy Adviser at the Forum of Private Business added, "Any costs like these are an extra burden for small businesses to bear. The EPC scheme is essentially a watered down version of the unpopular Home Improvement Pack (HIP) scheme, which was dreamed up by the last Government but quickly abandoned by the Coalition after it came in to office for being unnecessary and costly. We would say the same of the EPC.

Aside from the cost implications, there's also the extra paperwork that will be involved. More red tape and yet more form filling for businesses at a time the Government is pledging to cut bureaucracy is just not necessary." DT

So, what were your views on CPD?

The General Dental Council (GDC) has published the findings of its recent survey exploring what registrants, stakeholders and providers think about mandatory Continuing Professional Development.

Almost 6,000 registrants responded to the online survey which was carried out by ERS: Research on behalf of the GDC as part of its wider review of CPD requirements.

Some of the key findings include:

• Online learning is generally the preferred learning style of over half of all GDC registrants

• Dental Technicians find it least easy, compared to other registrant groups, to identify the right CPD for them

• 27 per cent of all registrants have never had an appraisal in their current workplace

• 65 per cent of all registrants generally do CPD outside of working hours

• Time and cost are perceived as the greatest barriers to undertaking CPD

The GDC introduced compulsory CPD for dentists in 2002 and for Dental Care Professionals (DCPs) in 2008. The current requirements for both registrant categories have been in place since 2008 and the GDC felt the time was right to undertake a review.

The findings of the survey will feed into the on-going review of CPD. Throughout 2012 work will continue with an event for stakeholders in April, development of a CPD model, extensive stakeholder engagement and public consultation. All the details will be available on the GDC's website www.gdc-uk.org

Any new CPD requirements will not be introduced before 2013.

As registered dental professionals, all registrants have a duty to keep their skills and knowledge up to date so they can give patients the best possible treatment and care. Any changes to the GDC's CPD scheme will have an impact on registrants in the future so they are being encouraged to have their as the review continues.

The full survey can be found at www.gdc.org. General comments about CPD can be sent to CPDReview@gdc-uk.org DT

Unlocking a whole world of opportunity

Now in its 35th year, the BDA/DENTSPLY Student Clinician Awards is an outstanding showcase event, featuring research presented by some of the best young talent in UK dentistry.

Ross Leader of Liverpool University was recently awarded first prize for his research into the Wilms' Tumour Protein (WT1). As part of his prize won a trip to San Francisco to present his research to the American Dental Association in October:

"The Student Clinician Awards is a once in a lifetime opportunity, and I urge the other entrants to make the very most of it," he says. "I'm now really looking forward to meeting delegates from around the world, and I am keen to find out more about their research interests. There's a whole world of opportunity out there – I really can't wait to see what it brings!" DT

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Smoking zaps healthy mouth bacteria

Could smoking turn bacteria against the body?

A new study has suggested that smoking causes the body to turn against helpful bacteria that resides in the mouth, making the smokers more prone to disease and infection.

The report states that within the mouth of a healthy person there is a delicate ecosystem of healthy bacteria; however, in the mouth of a smoker, this system is turned into a chaotic and diverse ecosystem.

The effect of this imbalance can cause the body to become more susceptible to harmful bacteria and with smokers already at a higher risk of suffering from oral diseases, this can cause several problems.

"The smoker's mouth kicks out the good bacteria, and the pathogens are called in," said Kumar. "So they're allowed to proliferate much more quickly than they would in a non-smoking environment," said PurnimaKumar, assistant professor of periodontology at Ohio State University in a report.

"A few hours after you're born, bacteria start forming communities called biofilms in your mouth," said Kumar. "Your body learns to live with them, because for most people, healthy biofilms keep the bad bacteria away."

Likening the mouth to a lawn in one report, Kumar said: "When you change the dynamics of what goes into the lawn, like too much water or too little fertilizer, you get some of the grass dying, and weeds moving in." For smokers, the "weeds" are problem bacteria known to cause disease.

Kumar and her colleagues also looked at how bacterial ecosystems regrew after being wiped away. The researchers took samples of oral biofilms one, two, four and seven days after professional cleaning from 15 healthy non-smokers and 15 healthy smokers.

The researchers looked at which bacteria were present and monitored how the bodies treated them ie whether the body perceived the bacteria as a threat or not.

"When you compare a smoker and non-smoker, there's a distinct difference," said Kumar in the report. "The first thing you notice is that the basic 'lawn,' which would normally contain thriving populations made of a just few types of helpful bacteria, is absent in smokers."

"By contrast," said Kumar, "smokers start getting colonized by pathogens - bacteria that we know are harmful - within 24 hours. It takes longer for smokers to form a stable microbial community, and when they do, it's a pathogen-rich community."

The results also showed that smokers' bodies were treating even healthy bacteria as threatening.

For Kumar, the results have a clear message regarding patient care: "It has to drive how we treat the smoking population," she said. "They need a more aggressive form of treatment, because even after a professional cleaning, they're still at a very high risk for getting these pathogens back in their mouths right away.

"Dentists don't often talk to their patients about smoking cessation," she continued. "These results show that dentists should take a really active role in helping patients to get the support they need to quit."

The results of the study were published in the journal *Infection and Immunity*. http://iai.asm.org/ DT

157,000 UK kids start smoking each year

Under age smoking is a problem

New figures, produced by Cancer Research UK, has revealed that around 157,000 children between the ages of 11 and 15 start smoking each year.

The study not only revealed that 27 per cent of under-15s have tried smoking, but it also exposed how eight out of ten smokers took up the habit before their 19th birthday.

The figures have highlighted that more needs to be done to discourage youngsters from starting the habit and Cancer Research UK believes that introducing plain packaging on cigarettes is a good place to start, making cigarettes visibly less attractive.

Jean King, the charity's director of tobacco control, claimed in a report: "The tobacco industry spends a great deal of money on designing cigarettes and their packets so they seem glamorous, appealing, fashionable and attractive in an effort to recruit more customers.

"With advertising outlawed, the cigarette packet is now the most important marketing tool the tobacco industry has."

Charities have already criticised a new report from the Adam Smith Institute, which claimed that putting cigarettes in plain packs would have no benefit for public health; however, according to a report, Action on Smoking and Health argued that the think-tank had misrepresented the truth and was 'acting as the mouthpiece for the tobacco industry'. DT

Encouraging positive feeding habits

Families with children under three need better practical support if they are to encourage positive feeding habits from an early age, cautions an influential group of experts on childhood nutrition and development.

The Infant & Toddler Forum (ITF) has welcomed recent government focus on early intervention, highlighting the earliest years as key to positive outcomes in later life. However, if intervention strategies are to tackle the long-term impact of children's poor nutritional and physical health, expert advice that supports families in early years feeding must be a key element.

Dr Atul Singhal, Professor of Paediatric Nutrition at the UCL Institute of Child Health and Chair of the ITF, said: "Early intervention strategies make up a large part of government plans to tackle health and social inequalities, but practical guidance on how to attain good nutrition and feeding is largely missing. "Toddlers' eating habits are hugely influenced at home, and this is the key period when lifelong dietary preferences and eating habits are formed. If we want to see an improvement in health and wellbeing, now and in the future, it's vital that families have easy access to simple, evidence-based advice on what and how to feed toddlers." DT

Visit - ***www.infantandtoddlerforum.com***

Young dentists enjoy 'sell-out' conference

Young dentist conference

More than 300 young dentists attended the Young Dentist Conference in London on 4 February 2012, where the expert panel of speakers included Paul Redmond, Head of Careers and Employability at Liverpool University and Richard Porter, Consultant in Restorative and Implant Dentistry at St George's Hospital.

Richard Porter opened the seventh annual conference, with topics themed around the 'generation gap', by discussing the difficulties young dentists may face when treating the elderly dentate.

This was followed by Paul Redmond, who spoke to the audience about how different generations communicate with each other and how young dentists can utilise this knowledge to better communicate with their patients of all ages.

In an increasingly difficult financial climate, and with NHS pilots under way to review, many young dentists are concerned about how this will affect them in the future and the impact this will have upon their associate contract. Grace Chia and Nick Cooper, two young dentists from a pilot practice addressed some of these concerns and explored how the NHS contract in its current format will impact upon young dentists. Additionally, James Goldman a Senior Legal Adviser from the BDA, described some practical steps which young dentists can take to ensure they are fully protected at work.

In the final session of the day, Alpesh Khetia discussed his experience of team working and the leadership methods employed to get the best from his team members and himself.

The Young Dentist Conference 2012 was the seventh outing of this annual event organised by Dental Protection, the BDA and BDJ. The organisers also wish to thank the sponsors Schülke for their continued support. DT

Drink less a day to keep mouth cancer at bay

While mouth cancer charity, the Mouth Cancer Foundation, welcomes the new government campaign on alcohol it also believes it does not go far enough. The charity has been campaigning for a reduction in the amount of alcohol consumed by individuals due to its risk of developing head and neck cancers for many years.

Drinking alcohol is the second most important cause of mouth cancer and 80 per cent of mouth cancer patients say they frequently drink alcohol. Drinking just one glass of alcohol a day doubles the risk of developing Mouth Cancer.

The Government announces a campaign to show that drinking just over the recommended daily limit for alcohol increases the risk of serious health problems.

Drinking two large glasses of wine or two strong pints of beer a day triples the risk of developing mouth cancer, according to the Government campaign.

Two million leaflets will be made available to Change4Life supporters and health professionals across England to get the message across. Under the Change4Life banner the adverts will also inform people about a new online calculator to work out how much they are drinking.

Drinkers will be encouraged to cut down through measures such as having alcohol-free days, not drinking at home before going out, swapping to low or alcohol-free drinks and using smaller glasses.

The campaign follows a survey of more than 2,000 people which found 85 per cent do not realise drinking over recommended limits increases the risk of developing breast cancer.

Some 65 per cent were unaware it increases the risk of bowel cancer, 63 per cent did not know about a raised risk of pancreatitis and 59 per cent had no idea excess drinking increases the risk of mouth, throat and neck cancer.

Dr Vinod Joshi, Founder of the Mouth Cancer Foundation, said: "The current alcohol guidelines from the Government are still very high. To reduce the risk of mouth cancer risk, the Mouth Cancer Foundation recommends that people should limit or avoid drinking alcohol altogether. The evidence about alcohol and the link to cancer is growing and people should be more aware of the risks and reduce their alcohol consumption.

"Every additional drink a day shows risks of getting cancer will increase. People in the UK are drinking even more now than ever before and this could lead to more people developing cancer because of alcohol in the future. Bingeing is responsible for most cases, but some are triggered by drinking at levels below the suggested daily total."

The Department of Health's current advice is that men should not regularly drink more than three - four units of alcohol per day, and women should not regularly drink more than two - three units of alcohol per day.

Drinking alcohol increases the risk of cancers of the mouth, esophagus, pharynx, larynx, and liver in men and women. In general, these risks increase after about one daily drink for women and two daily drinks for men. For men, the Mouth Cancer Foundation recommends no more than occasional drinking of two standard drinks a day and for women no more than one standard drink a day. DT

Denplan Launches 'Mind the Gap' App

Many practices have reported reduced profitability as a result of the recession and an increase in missed appointments. In response to this, Denplan has developed a unique online application – the 'Mind the Gap App'.

How much your practice is losing in revenue due to missed appointments, holidays, illness etc can often be a mystery as most practices will be working a year or more ahead of their accounts. The Mind the Gap App not only calculates your practice's daily income, but the revenue lost through these missed appointments each year - allowing the practice team to highlight patterns and find appropriate solutions.

Head of Marketing at Denplan, Richard Ward, said: "The new Mind the Gap App is Denplan's latest innovation, designed to show dental teams just how much revenue they can lose from missed appointments each year and ways to combat this shortfall. "For example, 90 per cent of payment plan patients attend check-ups every six months, compared with 53 per cent of PFPI patients and PFPI patients are four times less likely to cancel an appointment[1] in the future given the current economic climate. So, if some patients are attending less often due to financial reasons, then you could consider offering a dental plan as a value alternative to help them budget.

"Not only does Denplan offer patients a way to plan for their dental care, it also provides guaranteed regular income to help guard against missed appointments, holidays, sickness, and practice training days to increase profitability - so it's win-win!"

For more information about the Denplan Mind the Gap App, please go to www.mindthegapapp.co.uk or contact your Denplan consultant. DT

GPs to 'prescribe' apps for patients

People could soon be directed to free or cheap apps by their GPs to allow them to monitor and manage their health more effectively.

The latest innovations in smartphone technology will help patients and the public to find and use NHS services, manage conditions and make better lifestyle choices in a way that is very convenient for them.

It follows a call to find the best new ideas and existing smartphone apps that help people and doctors better manage care which received nearly 500 entries and over 12,600 votes and comments.

Popular apps include 'Patients Know Best', where each patient gets all their records from all their clinicians and controls who gets access to them. The app means that patients can have online consultations with any member of their clinical team, receive automated explanations of their results, and work with clinicians for a personalised care plan. It has already proved successful with hospitals including Great Ormond Street, UCL and Torbay as well as with GPs and community nurses from across the country who are responding to patients' invitations.

The Diabetes App will also give people with diabetes reminders on checking blood sugar levels and taking medication. It will allow them to monitor, record and track blood sugar information, which can then be sent electronically to their surgery or clinic. The app also uses emerging FoodWiz software to help people control their diabetes or even help those at risk of diabetes to prevent it.

It will help patients to control their diet so they can rely less on medication and attending obesity clinics by allowing them to zap an increasing number of barcodes while shopping and get immediate information on the amount of calories, carbohydrates and fats.

The competition identified apps with potentially huge value to patients and the NHS that promote better management of long-term conditions or healthy living. Last month, NHS Choices was visited by 14.5 million people looking for information on health and local services – helping many to get the advice they needed without making an appointment to see their GP. Developing smartphone apps is the next step in giving patients the information and advice they need and want to stay healthy.

At an event showcasing the best ideas for new and existing health smartphone apps, the Health Secretary Andrew Lansley said: "So many people use apps every day to keep up with their friends, with the news, find out when the next bus will turn up or which train to catch. I want to make using apps to track blood pressure, to find the nearest source of support when you need it and to get practical help in staying healthy the norm."

We are looking at how the NHS can use these apps for the benefit of patients, including how GPs could offer them for free." DT

Dental Tribune United Kingdom Edition · March 5-11, 2012

35 years and still going strong

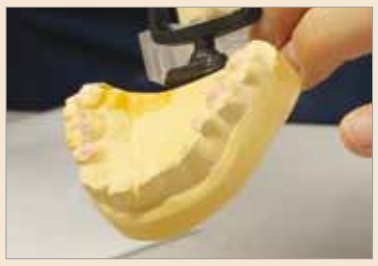
Dental Tribune attends the launch of CosTech's birthday celebrations

In 1977 dentistry was a little different to the dentistry we know today. The working week for a dental technician consisted of three and a half working days, gold crowns cost £20 (25 years later they cost less than £30) and dentists and dental technicians didn't talk.

Fortunately, times have changed and dental technology has grown into a respected profession, and after 35 years of elite service, the founding members of CosTech and their team would like to celebrate with the industry and everyone who have helped them along the way.

After six years as a vital part of the firm's service, David Hands and Neil Photay, the company's Elite Managers, have decided that the first course of celebrations is offering ZironArch to dentists for £35 instead of the usual £125 throughout April 2012. This will enable ever CosTech dentist and patient to enjoy having an all-ceramic zirconia crown, may they be NHS or private.

But the generosity doesn't seem to stop there. To help with the growing problem of dentists using disposable trays over and over again, CosTech will be supplying upper and lower impression trays to every job they send out from May. With the CQC hot on the case of infection control, this is an area that undoubtedly needs attention and their aim is to get every dentist to throw their old trays away and not re-use them on other patients.



Tooth mould

Neil Photay

"Trays cost pennies, not pounds," CosTech Founder, Mr Photay said. "So, for every job and new dentist, a new set of trays will be sent out. We call them Thank You trays."

Although CosTech will be giving back something different to the profession each month to celebrate their 35 years of service, the Thank You trays will be free forever.

Another new venture that CosTech are embarking on is the CosTech Implant Centre, a place dedicated to implants restorations, all designed and created in-house by a team of dedicated dental technicians, using the latest technology in implant restorations.

Watching the technicians at work, carefully crafting and creating the porcelain

crowns, it becomes apparent that this side of dentistry, (the unseen workforce), should be described as an art form. The detail that the technicians compose is so intricate and personalised to suit the patient: In essence, they are building smiles that change lives.

The CosTech Implant Centre, which is to be launched on 1st March 2012, has already received some fantastic feedback, especially with regards to the no hidden fees and the latest technology process of creating implant restorations that it has embedded in its foundations.

CosTech are also hosting a new product, Implant Complete, which is a one stop shop for implant restorations. By designing and creating the implants in-house, CosTech will be offering better alignment and better accuracy of abutments and restorations, meaning that patients can have all ceramic, bio-compatible and perfect gum fitting dentures and implants.

CDT at work

What's more, the implants work with most major implant systems so CosTech can give dentists the confidence that they will work. The fact that dentists can order any crown for the same price has also been a great hit.

A space to grow in

Amidst all the birthday celebrations, CosTech are also offering their boardroom to dental professionals, practices, companies and even the public.

For the public, CosTech will be putting on a series of live demonstrations to help out with providing patients with more options as to what dental treatments are available for them.

For the dental profession, CosTech will be providing CPD days, lectures hosted by guest speakers, and a space for dental practices to help enhance the relationships between dentists and technicians; because at the end of the day, the more the dentist understands, the more the patient understands.

The boardroom, where these events will be held, is the first of its kind to open its doors to the profession in the South East, and what's more, the facilities will be free to use. "This is the real deal," the elite managers explained.

Creating art

To top off the celebrations, CosTech are currently aiming to invest in the training of the next generation dental technicians. With the ever growing need for more technicians in the industry, if the training programme goes ahead, it will help encourage students to train up as technicians and help fill the expanding hole in the profession. The aim at the moment is to visit local schools to spread the word about the role of dental technology and explain how their work is the fine balance between art and science, creating perfectly functional and aesthetic restorations to match the patient's natural teeth. DT

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