Dental Tribune

The World's Dental Newspaper · United Kingdom Edition

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News in Brief

Patient receives £15k
Christina Knights, of Grimsby, has been awarded more than £15,000 in compensation after complications during dental work has left her with permanent facial numbness. As reported in the *Grimsby Telegraph*, Christina was told that it was a straightforward procedure and that the risk of sustaining permanent nerve damage was one in thousands. However, once surgery was complete, she soon realised something was not right when there was no feeling in her chin or lower lip. Evidence showed that the hospital had failed to review carefully an X-ray which demonstrated the root of the tooth ran very close to the nerve, increasing the risk of nerve damage.

Dentist fined after Scientology demand
According to reports in a US newspaper, an Oregon dentist has been ordered to pay nearly $348,000 after threatening to fire a dental nurse for refusing to attend a Scientology-related training session. Dr Andrew Engel ordered Susan Muhleman to attend a three-day Scientology training session for life skills. After refusing to go because of her Christian faith, Engel threatened to fire Muhleman. In November 2009 she filed a complaint with the Bureau of Labour and Industries' civil rights division. She was awarded with nearly $348,000 in compensation for emotional duress and the cost of finding new employment.

$9.8m for botched extraction
A US jury has awarded a record-breaking verdict of $9.8m to a 49-year-old man for the injuries he sustained as a result of a botched wisdom tooth extraction. After having gone to dentist Dr William Moody with toothache, he was sent home after three attempts at removing the wisdom tooth. He then had to be taken to the local A&E. Eventually he found his way to the care of oral surgeon, Dr Michael Miller. After spending four days at the hospital, Dr Miller surgically extracted the remaining roots. According to reports, Dr Miller had never actually seen or examined the patient prior to the surgery. The jury found both Dr Moody and Dr Miller were equally liable for the injuries and that they had failed to obtain an informed consent. The patient has been unable to return to work as a hydro-geologist, and remains totally disabled as a result of his constant pain.

News

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Dr Nedjat presents a case

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New pilot wave needs 25 practices

Second wave of piloting to begin in April 2013; practices being called for application process

The Department of Health (DH) has announced that 25 more practices will be joining the piloting of new contractual arrangements in April 2013, adding to the 70 practices that are already participating in the scheme.

As part of the pilot scheme, practices are trialling new ways of working. Patients at some of the pilot sites are given a thorough check-up and then a traffic light rating of red, amber or green depending on how healthy their mouth is. Dentists can then recommend a long term care plan for patients, and offer advice for better self-care.

The extra sites will help fine tune different parts of the new contract that will see dentists paid for the number of patients they care for, and the health results they produce, rather than the number of courses of treatment they perform.

This is all part of the Government's plan to modernise dentistry, with the aim of the pilot scheme being to provide the evidence needed to develop the new dental contract.

Dr Barry Cockroft, Chief Dental Officer for England said: "I am delighted the pilot scheme has been received so positively by dentists and a lot of excellent work has been carried out so far.

"We have worked closely with the sites and know some of the elements being tested need fine tuning. Making sure the new dental contract is fully tested and fit for the future is a vital part of our plans to modernise the NHS and the pilots have a key role to play.

"So far the pilot's been a success because we've actually learnt a lot. What we're doing is responding to that learning – we've agreed with the Ministers that the pilot process will continue beyond April 2013. We will also be seeking a further tranche of pilots including salaried services destined to extend the pilot legacy programme."

The British Dental Association (BDA) commented on the expansion of the pilots, calling it a 'positive step forward'. Dr John Milne, Chair of the BDA's General Dental Practice Committee, said: "The pilots require time, engagement with the profession and proper evaluation if they are to create a new contract that works for patients and practitioners. The BDA will continue to assert the importance of all three things.

"Feedback obtained from participating practices by BDA research earlier this year was largely positive. Where problems have been identified with the pilots, DH does appear to have listened to the profession and made sensible adjustments.

"The BDA will continue its independent evaluation of the pilots; press for further changes where they are needed and, when the time comes, insist that the final proposed new contract is properly negotiated with the profession."

The application deadline for the Stage two dental contract pilots is 8 November, 2012. Interested parties should go to http://dentalpilots.pcc.nhs.uk/ for more information about criteria and the application process. DT

Young endodontists celebrated at event

Four endodontists were celebrated as finalists of the Young Dentist Endodontic Award 2012, which were announced at an event to celebrate the 10th anniversary of the Harley Street Centre for Endodontics.

Speaking at the event at the Royal Society of Medicine, Julian Webber, owner of the Harley Street Centre for Endodontics and creator of the Young Dentist Endodontic Award, said: "The aim was to promote enthusiasm among dentists for endodontics and this had been amply demonstrated in the applications received. The quality of the entries was exceptionally high and some exhibited a level of professionalism you might expect from a specialist endodontist."

All the cases submitted by the finalists were worthy winners, said Dr Webber, but Rahul Bose, a graduate of Manchester University and an associate in Oxford and London, won first place by demonstrating his determination to master endodontics, a technique he used to dread when first in practice.

Second place was awarded to Luis Fernandez Escarabajal and joint third place went to Michael Taylor and Thomas Hickley. Between them, they won £3,500 of prizes sponsored by Dentsply, QED and SybronEndo.

"By his own admission," said Dr Webber, "Rahul admitted to being initially fearful of endodontics with minimal exposure to the field at dental school. He was willing to use new techniques integrating best evidence with clinical knowledge and patient preference. He is now no longer fearful of tackling endodontic cases."

Member of the judging panel for the award and director of Education and CPD, UCL Eastman Dental Institute Professor Andrew Eder commented: "Having seen the quality of the entries submitted by recently qualified graduates, I am confident that the future of the dental profession here in the UK is bright both clinically and academically." DT

Rahul Bose (left) with Award founder Julian Webber

Age of titanium key to implant success

According to a new study in *Implant Dentistry*, aged titanium is less effective at bonding to bone than newly prepared titanium.

The study authors, from the Yonsei University College of Dentistry and the University of California, Los Angeles (UCLA) School of Dentistry, describe the phenomenon as "the time-dependent degradation of the biological capability of titanium."

In order to meet the standard of new techniques of implant surface rejuvenation, a new guideline of titanium preservation expiration date will become an essential part of surgery in daily practice, Jae Hoon Lee, an assistant professor in the department of prosthodontics at Yonsei said.

The osseointegration strength of aged titanium surfaces is reduced to less than 50 per cent compared with newly prepared titanium surfaces, Dr Lee and his fellow researcher concluded.

"Moreover, a higher than 90 per cent bone-implant contact (BIC) obtained for new titanium surfaces can be reduced to less than 60 per cent for the aged surfaces," they wrote. "This degradation was primarily associated with considerably reduced capability of aged titanium surfaces to attract proteins and osteogenic cells."

Understanding why BIC does not reach an ideal 100 per cent is "a crucial unaddressed question," the researchers noted.

Titanium is an ideal material due to its myriad advantageous properties, such as corrosion resistance, strength, and the ability to apply surface modifications.

The research outlined in the review should spur action and could lead to standardisation of titanium products, according to the study authors.

"There is no regulation or expiration of manufacture, distribution, and storage in these products, except for the expiration of sterilisation, which is normally five years," the researchers wrote. Given the lag between manufacture and shipping, it can be assumed that many commercial products are "uncontrollably and substantially damaged." DT

EU medical device laws to undergo revision

The European Commission has announced a revision of the legislation governing medical devices in the EU dating from the 1990s. According to the European consumer organisation BEUC, the plans will affect a wide range of products, including dental filling materials, X-ray machines and implants.

To date, medical devices in the EU have not been subject to any pre-market approval by a regulatory authority but to a conformity assessment that involves an independent third party known as a notified body.

Recently, the existing directives have seen criticism owing to the breast implants scandal caused by French manufacturer Poly Implant Prothèse. Earlier this year, it was found that the company had used industrial silicone instead of medical grade silicone for its breast implants, contrary to the approval issued by the notified body, according to the European Commission.

With the revision, the authorities aim to eradicate gaps in the EU legislation, increase consumer protection, reduce risk and avoid costly recalls, said Monique Goyens, Director-General of BEUC.

The proposal includes stricter control of manufacturers and extends the definition of medical devices to include more products within the scope of the legislation. Moreover, it recommends closer monitoring of the notified bodies. A scrutiny panel is to be established for this purpose in order to assess medical devices according to certain risk-based criteria. Overall, the proposal is aimed at better product traceability.

Eucomed, a medical technology industry association that represents 22,500 European designers, manufacturers and suppliers of medical technology, has raised some concerns about the proposal. Although the organisation welcomes stricter control and monitoring, it believes that the measures would ultimately lead to a move towards a centralised pre-market authorisation system, which would affect European small and medium-sized companies negatively. With a centralised pre-market system, patients would have to wait three to five years longer on average for the release of a device, according to the association.

Before the regulations can be introduced, the proposal has to be approved jointly by the European Parliament and the Council of the European Union, which represents the governments of the member states. DT

Charter re-affirms anti-fraud culture in Scotland

BDA Scotland and NHS Scotland Counter Fraud Services (CFS) have signed a counter fraud Charter. The Charter will encourage a partnership between CFS and dental professionals, to help promote a counter fraud culture in the delivery of dental services. It will also enhance perceptions and attitudes towards combatting fraud.

The reality of the Charter means that BDA Scotland and CFS will work together to meet a number of commitments:

- Revising policies, procedures and systems to minimise any fraud risk;
- Establish arrangements to maximise transparency and minimise conflicts of interest;
- Clarify the crucial distinction between deliberate fraud and unintentional error, removing wherever possible any confusion or ambiguity.

Peter MacIntyre, Director, CFS said: "We recognise the contribution that dental professionals make to the health of the people of Scotland. We will work with the BDA to ensure that resources are not lost to fraud, and support any initiatives to promote fraud awareness."

Martin Fallowfield, Chair, BDA PEC, added: "Fraud by dental professionals is very rare, but where it does occur it takes money away from where it is most needed: front-line patient care. The BDA is pleased to reaffirm the profession's support for the work of NHS Scotland's counter fraud activities." DT

Editorial comment

I read something that amused me, and I need to share it with you!

According to research published in a new book by Kings College London and the Wellcome Trust countries with the highest per capita chocolate consumption also seem to produce the highest number of Nobel Laureates!

According to the research, which has been highlighted in an article in the The NEJM (New England Journal of Medicine) and published by Dr Franz Messerli, there is a *"powerful correlation between chocolate intake per capita and the number of Nobel laureates in various countries. The principal finding of this study is a surprisingly powerful correlation between chocolate intake per capita and the number of Nobel laureates in various countries. Of course, a correlation between X and Y does not prove causation but indicates that either X influences Y, Y influences X, or X and Y are influenced by a common underlying mechanism. However, since chocolate consumption has been documented to improve cognitive."*

He concluded with: *"Chocolate consumption enhances cognitive function, which is a sine qua non for winning the Nobel Prize, and it closely correlates with the number of Nobel laureates in each country. It remains to be determined whether the consumption of chocolate is the underlying mechanism for the observed association with improved cognitive function."*

I think that all dental professionals should take note of this research, especially if you are looking for a new patient base! All that chocolate can't be good for the teeth, even if it is good for the brain... DT

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UCLA grant to develop PTSD saliva test

A team of researchers at the University of California, Los Angeles (UCLA) School of Dentistry has been awarded a $3.8m research grant to develop a salivary-biomarker approach for identifying individuals at risk of developing post-traumatic stress disorder (PTSD) and depression following a traumatic event.

For the study, research lead Dr Vivek Shetty and his colleagues will conduct psychological assessments and obtain corresponding saliva samples over a six-month period among a group of 600 individuals who have recently experienced a serious physical injury or sexual assault. The team will use sophisticated analytical techniques to determine the levels of the individual salivary biomarkers at different points over the six months and to compare the biomarker patterns of individuals who subsequently develop PTSD and/or depression with those who do not.

"Utilising easily accessible saliva for evaluating stress reactions would allow front-line care providers to become more involved and proactive in the management of post-traumatic stress disorders, moving the focus away from treatment of unmanageable, late-stage conditions toward early identification and targeted interventions of vulnerable individuals," said Shetty. "Enabling health care providers to objectively and readily assess the risk for future psychological problems will set the stage for integrated post-trauma care that provides for essential and tailored mental health interventions in trauma care centres, as well as timely referrals for psychological after-care." DT

New gene test detects early mouth cancer risk

Researchers from Queen Mary, University of London have developed a new gene test that can detect pre-cancerous cells in patients with benign-looking mouth lesions. The test could potentially allow at-risk patients to receive earlier treatment, significantly improving their chance of survival.

Mouth cancer affects more than 6,200 people in the UK each year and more than half a million people worldwide, with global figures estimated to rise above one million a year by 2030.

Mouth lesions are very common and only five to 30 per cent may turn into cancers. If detected in the early stages treatment can be curative, but until now no test has been able to accurately detect which lesions will become cancerous.

The current diagnostic gold standard is histopathology – where biopsy tissue taken during an operation is examined under a microscope by a pathologist. This is a relatively invasive procedure and many mouth cancers are being diagnosed at later stages when the chances of survival are significantly reduced. For patients presenting with advanced disease, survival rates are poor (10-30 per cent at five years).

The qMIDS test measures the levels of 16 genes which are converted, via a diagnostic algorithm, into a "malignancy index", which quantifies the risk of the lesion becoming cancerous. It is less invasive than the standard histopathology methods as it requires only a 1-2mm piece of tissue (less than half a grain of rice), and it takes less than three hours to get the results, compared to up to a week for standard histopathology.

Consultant oral and maxillofacial surgeon, Professor Iain Hutchison, founder of Saving Faces and co-author on the study, said: "We are excited about this new test as it will allow us to release patients with harmless lesions from regular follow-up and unnecessary anxiety, whilst identifying high-risk patients at an early stage and giving them appropriate treatment. Mouth cancer, if detected early when the disease is most receptive to surgical treatment, has a very high cure rate." DT

Practice raises £1,000 for mouth cancer charity

Clinical Director Dr Raj Gogna (2nd left) with his team and their medals

London-based Chingford Mount Dental Practice has raised more than £1,000 for the Mouth Cancer Foundation.

Clinical director, Dr. Raj Gogna, and a group of his practice staff took part in the annual Mouth Cancer 10km Awareness Walk in London's Hyde Park in September. The team of ten included dentists, dental nurses, treatment coordinators and admin staff.

"I was delighted with the sum raised and that so many of our personnel wanted to take part", said Raj Gogna. "The Mouth Cancer Foundation undertakes very important work in raising awareness and supporting those affected by the disease and we were all very keen to support the event and the Charity".

The Mouth Cancer Foundation (MCF) is a charity which is dedicated to the relief of sickness and the promotion and protection of health among sufferers or those at risk of mouth, throat or other head and neck cancer. DT

Dental22 receives recognition at apprenticeship awards

L-R Graham Schumacher and Sarah Thompson

Nottinghamshire-based dental practice Dental 22 has been named as one of the East Midlands' best employers in the regional final of the National Apprenticeship Awards and National Training Awards 2012.

The finalists and winners were announced at a high profile joint awards ceremony organised by the National Apprenticeship Service, which was held at the Pera Conference Centre in Melton Mowbray.

Following the success of Dental 22 in providing NHS dentistry in Retford, the dental practice has been recognised in the 'Small Employer of the Year' business category and was awarded 'highly commended'.

Sarah Thompson, Practice Manager received the award on behalf of Dental 22 and said she was delighted to receive the highly commended award. Sarah said "We were one of three finalists out of all the employers that entered and I am so pleased we did so well. We have been open since 1st February 2011 and we have worked hard to make it a success. We are an innovative practice who takes pride in employing apprentices".

Karen Woodward, Divisional Apprenticeship Director, from the National Apprenticeship Service, said: "This year's awards were a terrific showcase of the outstanding wealth of talent that we have across the East Midlands. Given the volume and high calibre of entries we received, I'd like to take this opportunity to congratulate Dental 22 for this superb achievement. They are a testament to the many benefits Apprenticeships and training bring to businesses, allowing employers to tap into new raw talent, up-skill their staff and grow." DT

EU spends 80bn on oral health

The 27 EU member states will spend an estimated 79bn on oral health in 2012 and could be spending up to 93bn by 2020, a new report published by the Platform for Better Oral Health in Europe has suggested.

According to the report, despite a global decline in caries, the disease remains a problem for many groups of people in Eastern Europe, as well as for those from socio-economically deprived groups in all EU member states.

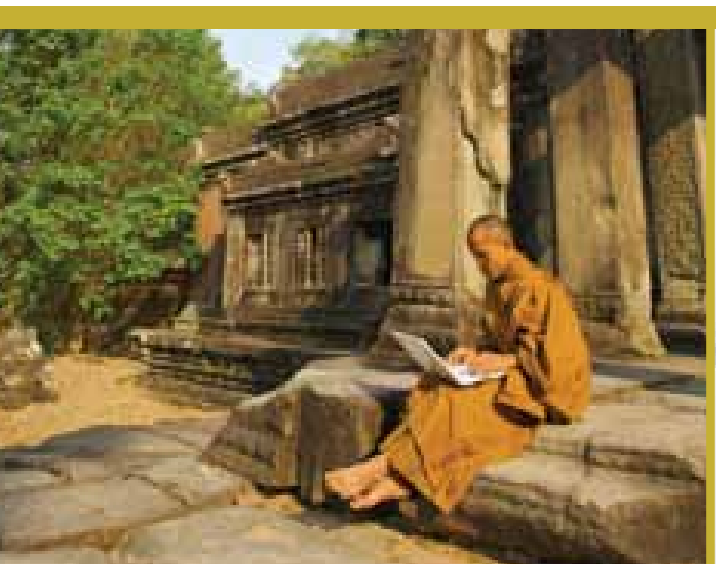
More than 50 per cent of the European population is estimated to be suffering from some form of periodontitis, and more than 10 per cent have a severe form of the disease, with prevalence increasing to 70 to 85 per cent among the population aged 60 to 65. Periodontal health in the EU may be deteriorating owing to an increasing number of elderly people retaining their teeth and an increase in the prevalence of diabetes.

Oral cancer is the eighth most common cancer worldwide, the report states. In the EU, lip and oral cavity cancer is the 12th most common cancer in men. In 2008, there were approximately 132,000 cases of head and neck cancer across Europe, resulting in 62,800 deaths.

The report also states that there are inequalities in health between people in higher and lower educational, occupational and income groups, with lower socio-economic groups being more susceptible to poor nutrition and to tobacco and alcohol dependency.

In 2010, public and private spending by the current 27 EU member states on oral health was an estimated 76bn. In 2012, it will be 79bn. If the trends continue, this figure could be as high as 84bn in 2015 and 93bn in 2020. DT

MSc in Restorative & Aesthetic Dentistry



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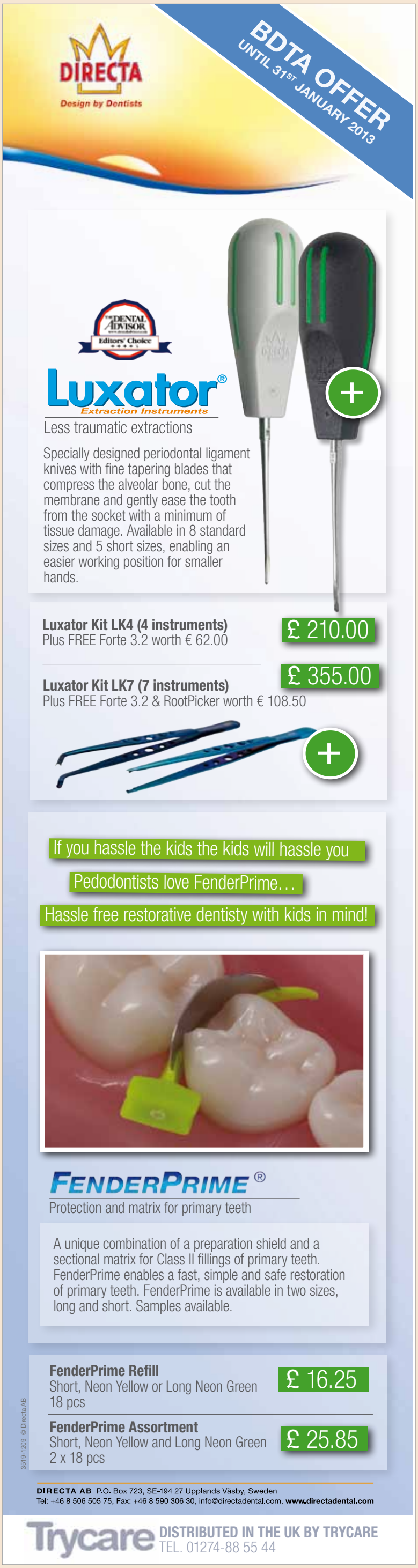

Early treatment for toothache uncovered

Researchers examining an ancient mummy have discovered one of the worst cases of dental decay on record, as well as an early treatment, which consists of linen dipped in medicine stuffed into the tooth.

According to reports, researchers were carrying out CT scans of the 2,100-year-old ancient Egyptian mummy when they discovered evidence of a sinus infection caused by severe dental decay and other dental issues. During the same scan the team also became aware of a novel treatment in the form of a cavity stuffed with linen, which had been doused in medicine.

Researchers discovered that the linen had been dipped in fig juice or cedar oil, early forms of medicine, and then inserted into a cavity on the left hand side of the mouth.

Andrew Wade, from the University of Western Ontario, used new high resolution CT scans to uncover the first example of packing the teeth. Researchers said that the linen was used to create a protective barrier to prevent food from getting into the cavity, while the medicine was used to soothe tooth pain.

The name of the man is unknown but researchers believe he was in his 20s or 30s when he passed away; experts think that he could have been in considerable pain as a result of dental and sinus infections when he died.

The research team said that the latest find supports the belief that there were dentists in ancient Egypt and they were willing to try new methods to treat decay and ease dental pain. DT

Showcase stand award winners

Colgate's winning stand at the BDTA Dental Showcase

This year's BDTA Dental Showcase brought together more than 330 impressive stands, both big and small, from a wide range of exhibitors. To recognise the time and effort devoted to creating these stands the British Dental Trade Association (BDTA) welcomed Paula Ripoll from the Association of Event Organisers (AEO) to the show to judge the 2012 Showcase Stand Awards.

The stands were assessed on a number of features, including presentation, professionalism, stand layout and appearance, staffing, and the range of products/information on display. There were three award-winning stands in total – a small stand/shell scheme, a medium stand and a large stand, and each will receive a full-page advert in their choice of dental magazine.

The winners are:

Shell Scheme Category - Dentalshop (S21): *Dentalshop had a busy stand, there was a good constant flow of visitors making enquiries and placing orders, a good selection of products on display, easy to access information and very professional staff who were always busy but very friendly, helpful and knowledgeable. A well-deserved winner.*

Medium-stand Category - J&S Davis (L13): *"J&S Davis had a beautiful and very welcoming stand, featuring a nice display of products, literature and information as well as a very well equipped demo area. Their staff were very helpful and professional when answering visitors enquiries."*

Large-stand Category - Colgate–Palmolive (UK) Ltd (Q03): *"The Colgate experience started well before the exhibition hall; Colgate placed signs on the floor at ExCeL, directing visitors to the hall. Their stand was beautiful, very inviting, displaying their corporate colours and brand. It had different zones: an area in which they delivered 30-minute CPD presentations, an area displaying a big model of their new toothbrush, rotating, a big screen showcasing and demonstrating the features of the toothbrush and an area for visitors to speak to Colgate staff, make enquiries and place orders. The Colgate staff were very friendly, polite, knowledgeable and always helpful. All in all, a perfect example to follow."*

Tony Reed, Executive Director at the BDTA, said, "The quality of exhibitor stands this year was once again extremely high, as were the staff, who showed commitment and professionalism. I would like to thank Paula and the AEO for their expertise, and offer my congratulations to the winning stands. Well done to all!" DT

Olympic legacy beyond the Games

The London Olympics 2012mean opportunities as people follow the rejuvenation process, says Richard T Lishman

With the fantastic London Olympics now over, our excitement levels can drop back to normal while we get on with our working lives. But, for some, there are still aspects of the Games that offer a real opportunity.

Part and parcel of a modern Olympics is the massive development effort that goes into the host area, and the long-term benefits that it hopes to gain as a result. For East London, and for several other host areas, this legacy planning has meant large-scale rejuvenation and home building projects of a size we don't often see in these difficult economic times.

The former Olympic Village, for example, will become 2,818 new homes. Other housing developments nearby are also set to benefit from the massive improvements to public transport and other facilities that were developed for the Games, and which have encouraged developers to create further homes.

This will see a huge influx of people moving into a radically changed area. And when nearly 3,000 families move into an area almost overnight, followed by more as additional new homes are completed, opportunity is bound to follow. Parts of Stratford that used to house light industrial units will now house hundreds of families with children, for example. Just a decade ago the area was a place where only brave first time buyers on a tight budget tended to seek homes, but it is now becoming accessible and desirable.

With the new people will come a demand for new dental and healthcare facilities. Populations the size of a small town will be coming into these areas, and they will be in need of dentists. With so many people arriving at once, existing practices will be finding it difficult to cope with demand. There can't be a clearer opportunity to launch new practices than that.

It has been said before that dentistry is a good profession in which to weather an economic downturn, and here is an example of an ideal opportunity presenting itself despite the country's fall back into a double dip recession.

Innovative and entrepreneurial types pride themselves on their ability to move quickly to capitalise on opportunities. Here is a chance for ambitious dentists to emulate Usain Bolt in the search for places to develop a new practice. Even now the games are over there is still a chance to win gold. DT

About the author

Richard T Lishman of money-4dentists, which are a specialist firm of Independent Financial Advisers who help dentists across the UK manage their money and achieve their financial and lifestyle goals.

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- 100% free from harsh abrasives (RDA 53)

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New Tooth Whitening Laws

Good news for dentistry says BDBS

The British Government has set in legislation the Council of European Dentists' changes that applied to dental bleaching. These new tooth whitening laws will help to protect patients and give more prominence to the dental professional's role.

Made on 2 September 2012 and laid before Parliament on 5 September 2012, the Statutory Instrument The Cosmetic Products (Safety) (Amendment) Regulation 2012 will come into effect on 31 October 2012.

First and foremost, UK law will officially recognise that tooth whitening is the practice of dentistry. Tooth whitening products containing or releasing between 0.1 per cent and 6 per cent hydrogen peroxide are to be sold to dental practitioners only.

Products containing or releasing between 0.1 per cent and 6 per cent hydrogen peroxide are legal for tooth whitening, provided that a dentist performs an initial clinical examination and either carries out the first treatment or supervises a suitably qualified dental professional. After this, the dentist can supply the product to the patient so they can complete the cycle of use at home.

Any non-dental professionals performing tooth whitening treatment are liable to be prosecuted. It is the role of the GDC to prosecute non-dental professionals who are providing a tooth whitening service, however Trading Standards can act if the individual or company are using a concentration of (or releasing) over 0.1 per cent hydrogen peroxide.

The new legislation will also announce that:

• Members of the public can legally purchase tooth whitening products containing or releasing a concentration of up to 0.1% hydrogen peroxide for at home use as over the counter (OTC) products.

• Tooth whitening products containing or releasing between 0.1 per cent and 6 per cent hydrogen peroxide may not be used on people under 18 years of age.

For many years there have been concerns over tooth whitening treatment performed by non-dental professionals such as beauty therapists. The Bleaching Society has campaigned vigorously for changes to the law to enhance clarity and bring dental bleaching firmly and solely within the remit of the dental profession. This ensures the patient's safety as well as that of the individual applying the treatment and the Bleaching Society welcomes the changes.

The new EU Council Directive, when incorporated in UK legislation, is making its intentions plain: for tooth whitening treatment, go to the dentist. At the same time, dental professionals will have an explicit set of guidelines for the provision of legal tooth whitening treatment at a time when a whiter, brighter smile is still the peak of desirability.

The Bleaching Society has played a significant role in raising awareness to drive forward legislative change and continues to lobby on dentists' behalf. Executive Committee Member of the BDBS, Sir Paul Beresford, has repeatedly raised the subject of dental bleaching at the House of Commons for debate on topics such as the dangers of non-dental professional operators and issues resulting from EU restrictions and Trading Standards. Sir Paul will once again approach the Parliamentary Under-Secretary of State for Business, Innovation and Skills to question him on the following points:

• Dental bleaching for under 18-year-olds in exceptional circumstances.
• Instances where greater than 6 per cent hydrogen peroxide would be acceptable.
• The involvement of Trading Standards Officers and/or the GDC in checking non-dental professional teeth bleaching establishments.
• Progress made on outlawing the use of chlorine dioxide for teeth bleaching.

Dr Linda Greenwall, Chair of the BDBS, says: "The Bleaching Society welcomes the new legislation as it makes it clear that only dentists can undertake tooth whitening, and that the supervision of home whitening using up to 6 per cent hydrogen peroxide will require first an assessment and treatment by a dentist."

The British Dental Bleaching Society offers in-depth, hands on, certified training in tooth whitening for all members of the dental team. With our help, you have the confidence and ability to dramatically improve your patients' smiles using a minimally invasive and affordable treatment.

In addition to unparalleled training opportunities, membership of the BDBS keeps you up-to-date on the latest bleaching products and techniques, as well as research material from leaders in the field of tooth whitening. Our experts are on hand to help you on all matters relating to dental bleaching. Whether you'd like some training, have a tricky case or are unsure of legal matters, contact the Bleaching Society – we're here to help. DT

Contact Information

For more information on this and the many benefits of BDBS membership, visit www.bdbs.co.uk or email info@bdbs.co.uk or call 0207 267 7070

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