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‘PLAN FOR CHANGE’ EXCLUDES DENTISTRY

Dental experts have criticised prime minister Keir Starmer’s ‘plan for change’, which did not mention the government’s pledges for dentistry.

On 5 December, Keir Starmer made a speech laying out the plan for change. It included targets and timelines for many key manifesto pledges, but those about dentistry were not included.

Shawn Charlwood, chair of the British Dental Association’s (BDA) General Dental Practice Committee, said: ‘Past promises on NHS dentistry are nowhere to be seen in this “plan for change”.

‘This crisis requires an action plan and a clear

timetable. Warm words won’t get millions the care they need.’

Of six new ‘milestones’ mentioned by the prime minister, only one related to the NHS – a vow to reduce medical waiting times in secondary care.

Keir Starmer said: ‘I make no apologies for sticking to our plan and no apologies for fixing the eyes of Whitehall not on the distraction of Westminster but on the long-term good of our country.’

He said the milestones would create ‘accountability’ and ‘give the British people the power to hold our feet to the fire’.

What has the government promised for dentistry?

In its manifesto, the Labour Party proposed a ‘dentistry rescue plan’ to deliver 700,000 additional emergency dental appointments and

recruit dentists in underserved areas. Supervised toothbrushing in schools and long-term contract reform were also pledged.

The BDA said there was no sign of the 700,000 appointments being delivered. It also highlighted that no timeline had been given for the implementation of supervised toothbrushing schemes.

The Labour government has also kept measures introduced in the previous term as part of the Conservatives’ dental recovery plan.

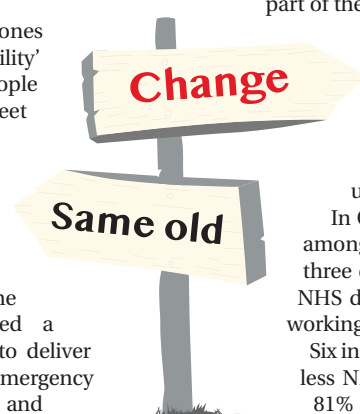
These include £20,000 ‘golden hellos’ for dentists willing to relocate to areas with low NHS dental access. However, delays meant that the first dentists were not appointed in these positions until October.

In October 2024, a survey found morale among NHS dental staff to be low. Almost three quarters of NHS dentists and 65% of NHS dental nurses said they did not enjoy working within the health service.

Six in 10 (61%) were also considering doing less NHS work in the next two years, with 81% expecting to carry out more private work in the same period.

New government milestones

1. Cutting NHS waiting lists, with 92% of patients to be seen in 18 weeks
2. Higher living standards/more money for working people
3. Building 1.5 million new homes and fast-tracking planning decisions
4. Recruiting 13,000 more police officers, special constables and PCSOs
5. Three quarters of five-year-olds ready to start school
6. Increasing clean power to 95% by 2030.



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Turn to page 14 to discover the exciting line-up of lecture theatres and what they have in store.

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Dentistry magazine's unparalleled coverage of current affairs, new developments and the latest thinking keeps the dental sector on top of the issues that matter. For further information and to get in touch, email guy.hiscott@fmc.co.uk.

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New year, not-so-new you?



Guy Hiscott
Editor's view

With the cobwebs by now (hopefully) blown away from December's festivities, the time is ripe to look ahead and ask what the coming year might hold.

In planning this column, I promised myself that I wouldn't make it about resolutions and those arbitrary decisions that we all (myself included) fall back on at this time of year. While I think resolutions can be a great way to structure new goals on a personal level – or in my case, find another yardstick with which to beat myself up come October – when it comes to the work side of my life, I'm more in favour of continual reassessment.

Unfortunately, writing about significant pledges for change is arguably exactly what I should do – because once again I find myself asking the very reasonable question of how I think 2025 is going to be any different from 2024.

When I think back to where dentistry was at this time last year, I can't quite believe how much change we've seen happen in the service of effectively zero progress. At this stage I'd say it's an open argument as to which of the NHS recovery plan, the general election or even Lord Darzi's NHS report has achieved less than the others.

From meeting the BDA on day one to totally ignoring it in his last December action plan, Labour's enthusiasm for restoring NHS dentistry appears to have been impressively short-lived.

There's a sense among political optimists that the new administration was simply trying

to get all the bad news out of the way before the new year. While I'd like to believe that, I haven't added 'being naively hopeful' to my own list of resolutions yet. Perhaps in the time between me writing this and you reading it, something will have been announced that changes my stance – but we will see.

Elsewhere, the General Dental Council seems to be determined to stall any progress it's ever made towards improvement, impressively dropping the ball on both fitness to practise timelines as well as equality and diversity. If anything, it's gone backwards, with the regulator now having more cases older than 156 weeks than at any time in the last three review periods.

The frustrating part of all this is that I know the dental profession will continue to do what it always does: turn up, prioritise patient wellbeing, and innovate in spite of the challenges arrayed against it.

The NHS backlog isn't going anywhere, but I have spoken to a host of practice owners over the last six months who are making inroads to tackle it in the worst-hit areas. They have subtly shifted the very structure of their practices to make them work with the reality of the contract, rather than against it.

Shift work, bigger teams powering longer opening hours – and reinvesting the increased turnover into training and development to change recruitment into an opportunity rather than an impossible challenge are some of the headline changes being adopted by these businesses. They are thriving as a result.

For all that it's a new year, this story at least is very old. It might well be time for some big resolutions in dentistry, but as ever, it's not the profession that needs to be making them.

GDC fails to reach all standards of 'good regulation'

The General Dental Council (GDC) has met 16 out of 18 Standards of Good Regulation for 2023/24.

This marks the same number that were met in the 2022/23 review period.

According to the Professional Standards Authority (PSA) annual review, it was found that the GDC failed to meet the standards for EDI (equality, diversity and inclusion) and fitness to practise timeliness.

The report also found the regulator is 'taking too long' to handle fitness to practise cases. While it acknowledged that the GDC has put in place measures to improve its fitness to practise timeliness, these have not yet made sufficient improvements to the time it is taking to reach decisions in cases.

There is a slight overall reduction in the total

number of older cases. However, the GDC now has more cases older than 156 weeks than at any time in the last three review periods.

Tom Whiting is chief executive of the General Dental Council (GDC). He said: 'We welcome the PSA's recognition of our progress across multiple areas, particularly in registration, while acknowledging there is more work to do. We remain firmly committed to improving fitness to practise processes and implementing our EDI strategy.'

'Our priority is ensuring we deliver effective regulation that protects patients and supports dental professionals. We welcome close working with partners and stakeholder organisations to build trust in effective regulation and achieve a goal that we all share, which is patient safety and public confidence in the dental professions.'

Who's counting?

How will we measure the successes and failures of the new year? Kevin Lewis suggests some answers and points to some challenges

Kevin Lewis | Consultant editor



“ Albert Einstein knew a thing or two, but if every quote attributed to him was correct and accurate, he wouldn't have had any time left for physics. But who cares? A good quote is a good quote in any language and irrespective of its provenance. Einstein may or may not ever have uttered the immortal words: 'Many of the things you can count, don't count. Many of the things you can't count, really count,' but I wholeheartedly agree with the sentiment even if the attribution is popular myth.

Some people view the new year as a wiping clean of one year's slate, and the unveiling of a new one. Others prefer to dial down the drama and significance, and treat it as just another day and another month in the continuum of life. Many don't care one way or the other, just as long as they are in convivial company at the stroke of midnight on New Years Eve. Or Hogmanay, if you prefer? For the rest, it is enough that they wake up the following morning with all their faculties intact. But your view as to the transition from any one year to the next is likely to be coloured by your experience of the old year, and your hopes and fears for the new one.

Life without targets

By the time you read this column, we will be at least 10% of the way through the term of office of the present government and you could be forgiven for wondering what has changed. In fairness, Keir Starmer has already brought a whole new meaning and flexibility to new year resolutions, with new and modified pledges rolled out before the ink is dry on the previous ones, but never with any hard measures attached to them. The home secretary is playing an even cannier game, learning from the painful experiences of a long line of her Conservative predecessors, in that her only resolution on illegal immigration and net migration is a firm resolution to do better, with no targets being set – which ensures that no targets

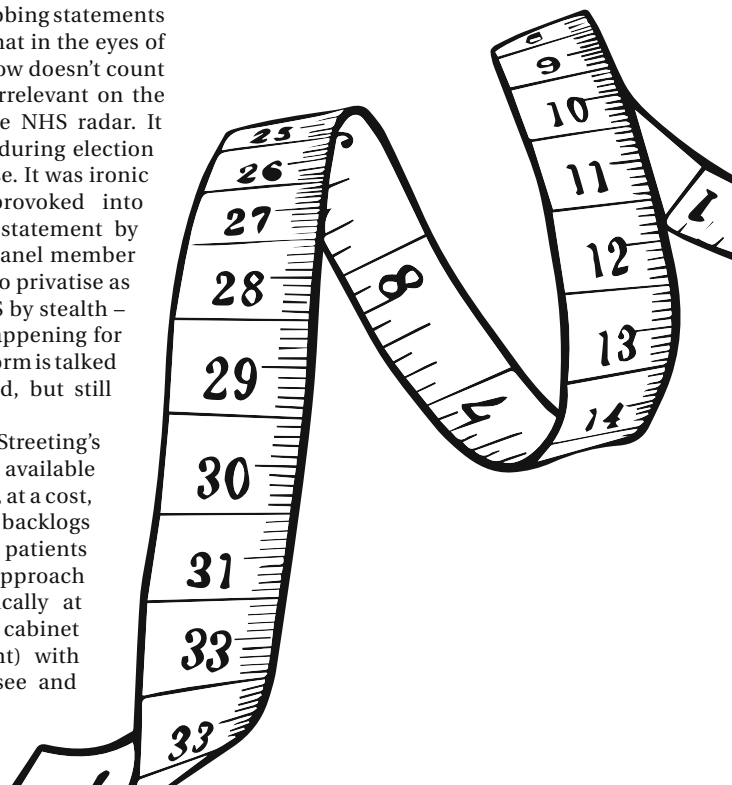
can be missed. It is clear that she plans to turn things around, but less clear as to whether this includes turning any small inflatables around.

As if NHS dental practices didn't have enough to deal with, all dental practices will have been hit financially by the chancellor's autumn mini-budget and it is a matter of record that some practices – like so many other businesses – will have closed their doors and others have laid off staff. Eyebrows were raised by Wes Streeting's categorical assurance, when speaking on the BBC's *Question Time* panel in early December, that no patient receiving NHS treatment on his watch will ever need to worry about the cost, because the NHS will remain free at the point of delivery, with no exceptions. When will politicians learn the lesson that this is not true of dentistry and hasn't been so for many, many decades – in fact since more than 30 years before Wes was even born? These ill-considered, headline-grabbing statements simply serve to emphasise that in the eyes of politicians, dentistry somehow doesn't count because it is invisible and irrelevant on the extreme outer fringes of the NHS radar. It is a valued part of the NHS during election campaigns, but not otherwise. It was ironic that Wes Streeting was provoked into making this defensive mis-statement by a suggestion from a fellow panel member that his unspoken plan was to privatise as much as possible of the NHS by stealth – which is precisely what is happening for as long as dental contract reform is talked about, and loosely promised, but still not delivered.

I actually welcome Wes Streeting's stated appetite for using available capacity in the private sector, at a cost, to eat into the growing NHS backlogs and expedite treatment for patients on long waiting lists – an approach which places him ideologically at odds with certain other cabinet members and (to an extent) with the prime minister. But I see and

hear no evidence that he is planning to use this approach in dentistry any time soon and continuing the NHS 'new patient premium' is not the same thing at all.

In this and other respects, we arrive into 2025 with a growing impatience for genuine evidence of any meaningful change or improvement, or of genuine action rather than fine words. And to fill this vacuum, desperate measures appear to have been signed off at a high level; one cabinet minister whose constituency is not a million miles from where I live made the mistake of pointing to the opening of a new non-urgent planned care centre in her city as a shining example of the speed at which the new government has rolled up its sleeves to deliver on its pre-election promises. It aims to deliver 100,000 extra appointments per year, a number which sounds vague but impressive in equal measure – until it was



“What would really count is for all of us to commit ourselves in 2025 to being better in a way that matters; being fairer and kinder, showing more mutual respect, tolerance and understanding, concern and compassion, focusing on our common purpose of caring for patients and leaving them better off than when we started.”

pointed out that all the work to design and create this timely new facility took place under the previous government, starting two-three years ago, while many clinicians and support staff have been moved across from other local units in order to get it open and reported upon before the end of 2024. I think we need to brace ourselves for a lot more ‘delivery’ numbers to be thrown at us, but I hope that they do not prove to be a smokescreen to obfuscate the slowness of other critically necessary changes beneath. We are told to expect another big plan in the summer, and asked to keep ourselves occupied having ‘the big conversation’ until then. I am not sure that Wes would approve of some of the big conversations I am hearing amongst impatient patients who would prefer more results, solutions and treatment, and fewer reports and think tanks.

Stakeholders

In my December column I expressed my deep concerns about the GDC’s performance across a range of issues. This will be Tom Whiting’s first full year as chief executive and registrar and there are some positive early signs, but is it fair to judge him and his management team (and the effectiveness of the council itself) after having given them an opportunity to acknowledge and rectify what is still so obviously amiss? Lord Toby Harris will be stepping down as (lay) chair during 2025, after a single term in office, which adds to the relentless and destabilising churn of recent years. As highlighted in his own most recent blog, he has during his tenure placed great emphasis on stakeholder engagement and understanding perceptions, and he stresses that this is not done for the purpose of burnishing the GDC’s own external reputation. Putting aside the fact that activity of this kind does precisely that by helping the GDC to meet one of the required standards set by the Professional Standards Authority (Standard 5), engaging with and listening to

a wide range of stakeholders (wholly funded by just one set of stakeholders, ie registrants) is not quite the same thing as hearing, understanding and acting upon what the stakeholders have told them.

Criticism

Unfortunately, since writing my December column, there has been yet another withering criticism of the GDC’s ‘lamentable ignorance’ (sic) of the law in the conduct of its fitness to practise (FtP) investigations – this time, from the High Court, and this time, as it relates to the confidential nature of documents within Family Court/Court of Protection proceedings. This is hardly the first time that the golden question of how and why this was allowed to happen, has remained unanswered. Stephen Henderson wrote a characteristically superb blog on the topic from his GDPUK platform about a month ago, and all I could usefully add to that tour de force is to ask why the GDC never feels the need to fess up publicly and apologise – not only to the parties and registrant(s) most directly affected, but to all the registrants whose ARF fees are being squandered as a result of the GDC’s incompetence. They can blame ill-fortune, junior staff, managers, the solicitors and barristers that they pay significant sums to, their appointed legal advisers and (in some cases) the individuals that they choose to use as expert witnesses.

The courts at various levels have certainly delivered some excoriating criticism of these experts recently in both GDC FtP and civil claim proceedings. But sure as hell, one or more people have not done their job and/or have come up short. Yet again.

These are moments for someone at senior level to look registrants in the eye, demonstrate insight and admit fault and not least to apologise – not a reason to draw the over-used and heavy GDC curtains over the whole sorry issue and return to business as usual. If registrants acted in this way they would be struck off without a backward glance. The GDC is very eager to share details of any alleged or actual, proven

or unproven failings of registrants with the media – in the public interest, and the interests of transparency of course – but curiously much less eager to share the many examples where the GDC itself has screwed up, whether allegedly or spectacularly.

I think we could all be forgiven for having lost count of how many FtP cases in recent years have been mismanaged by the GDC in one way or another, and there’s no point looking on the GDC’s website for a running total of how many cases, or how much money (your money) has been involved. Even in the GDC’s Annual Report and Accounts you would be hard pressed to get even close to the true cost of FtP – and within that, the cost of the GDC’s errors – because the associated internal and external costs are buried in so many places. One would like to believe that someone, somewhere in the GDC is keeping count and knows the answer, or is at least asking that question.

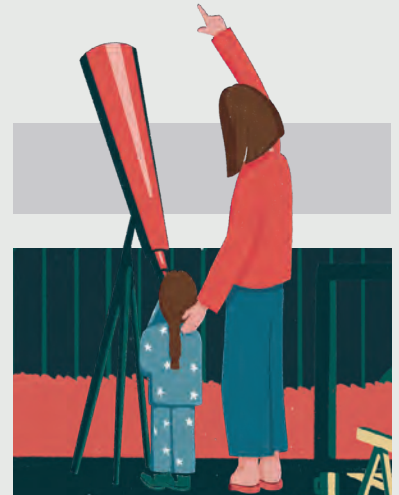
One would also like to believe that the chair and other 11 council members are asking that question too, and kicking up a fuss if they don’t get clear and satisfactory answers. Our worst fear, I think, is that nobody feels the need to count, nor ask too many awkward questions because the inexhaustibly deep well of ARF revenue remains a gift that keeps on giving.

But what would really make a difference – what would really count – is for all of us to commit ourselves in 2025 to being better in a way that matters; being fairer and kinder, showing more mutual respect, tolerance and understanding, concern and compassion, focusing on our common purpose of caring for patients and leaving them better off than when we started. It would also help if those surrounding the profession could understand that the profession is not the enemy. Something that Einstein really did say was that: ‘Blind belief in authority is the greatest enemy of truth.’ Smart guy, was Albert. D

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In memory of Tim Hogan

The dental profession is greatly saddened to hear about the passing of Tim Hogan, past executive director of the ADI, on 24 November 2024 after a battle with a long illness.

Prior to joining the ADI in 2013, Tim was chief executive at the Healthcare Infection Society, general secretary at the British Institute of Radiology, and worked in publishing with a focus on medical journals.

Tim completed a degree and PhD in chemistry – his thesis on the topic of vibrational spectroscopy – and gained a master's in voluntary administration from London South Bank University, a course type tailored to the charity sector.

During his 10 years as ADI executive director, Tim helped to take the organisation from strength to strength, building on events such as the ADI Team Congress and Study Clubs, while also improving services for members. The ADI is immensely grateful for Tim's contributions, and his dedication to developing the association for the benefit of its members and the wider dental implant profession.

Past president, Dr Abid Faqir, says: 'I am so sad to hear of the passing of Tim – his family and friends are very much in my thoughts at this difficult time. Tim loved the ADI and everything it embodied; he was amazing during my tenure as president. His help, advice and constant meticulous planning took the association from strength to strength. Work aside, he was a gentleman, a kind and helpful man. He will be sadly missed by all.'

Current president, Dr Zaki Kanaan, adds: 'Tim was the backbone of the ADI and the person who the board looked to for advice



when it was needed. He was the person that kept the ADI's wheels in motion and helped the ADI become the organisation it is today. A gentleman in every sense of the word, that will be missed by all at the ADI. My thoughts go out to his friends and family at this time.'

With a passion for classical music, Tim played violin in a local orchestra, and had an excellent sense of humour with favourites including Woody Allen, *The Office*, and *Mr Bean*. He leaves behind his wife, Tracey, his daughter, Catherine, and his son, Daniel. The ADI and *Dentistry* magazine extend condolences to his family at this difficult time.

Primary care 'at risk of collapse' in Northern Ireland

Bodies representing dentists, community pharmacists, general practitioners and optometrists have called for government intervention to prevent the 'collapse of primary care' in Northern Ireland.

Addressed to the health minister, the joint statement was released by the British Dental Association, British Medical Association, Community Pharmacy NI and Optometry NI.

It asks the government to approve an exemption to the recently announced National Insurance increase for primary care services. The increase in national insurance was announced as part of the autumn budget in October. Employer contributions for national insurance will now increase from 13.8% to 15%.

The statement says: 'Medical, pharmacy, dental and optometry providers are the front door to the health service for families across Northern Ireland and vital for the transformation of care.

'Yet these services are under extreme

financial pressure, resulting in the closure of general practices and community pharmacies, the most rapid shrinkage of NHS dentistry anywhere in the UK and reduced access to NHS optometry.'

As many care providers operate as small businesses, they will be subject to increased national insurance payments. The four associations said this could 'risk the collapse of primary care in Northern Ireland'. The statement continues: 'Without adequate protection from UK government policy changes, the precarious position of family practitioner services in Northern Ireland will deteriorate further.

'It is now an urgent imperative for the Northern Ireland Executive to make the case to the UK government for the protection of primary care or risk the collapse of these vital services in communities across Northern Ireland.'

NEWS IN BRIEF

Dentures with 'octopus' suckers

A team of scientists have designed a new type of denture with octopus-like suckers for improved grip and comfort.



Paracetamol linked with health issues



A new study has found an association between extended paracetamol use and gastrointestinal, cardiovascular and renal complications.

Junk food ad ban includes crumpets

Children will no longer view TV adverts for junk food products as a new law confirms the final details of advertising restrictions.



Males less likely to have a dentist



New findings from the Office for National Statistics (ONS) show just over half of adults report having an NHS dentist in the last month – with one third having private treatment.

Fat cells remember past obesity

A new study suggests fat cells may keep a memory of previous weight gain, which can lead to 'yo-yo dieting'.



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Komet Dental launches UK sales company

Komet Dental has established a dedicated sales company designed to enhance customer service and provide tailored solutions for the UK market.

This move builds on Komet's successful partnerships with dealers and reflects its unwavering commitment to meeting the needs of dental professionals.

'The establishment of Komet UK marks a significant milestone in our global growth journey, reinforcing our position as a leading international partner for innovative solutions in the dental sector. As part of the Brasseler Group, we are committed to direct customer engagement to deliver unparalleled support and expertise,' says Carsten Cieslik, director of the Komet Dental business unit.

A legacy of excellence

The launch of Komet UK ensures localised support with direct customer contact, specialised advice and exclusive, customised offers. Customers will benefit from faster access to new innovations, flexible delivery options, and services tailored to their individual requirements. This initiative enables Komet to work more closely with practitioners, offering high-quality tools and services that make dental and laboratory work more efficient, economical and reliable.

'We specialise in creating exclusive, customised solutions tailored to the specific needs of dentists and dental technicians. By maintaining close relationships with our customers, we remain agile and responsive, enabling us to support their daily workflows effectively. Our goal is to contribute to enhancing the quality of patient care,' says Heidi O'Carroll, CEO, Komet UK.

Komet Dental's offerings are built on over a century of expertise and a strong global presence. The family-owned company remains a top innovator in the industry, providing products developed through in-house research and development, and manufactured under strict quality standards in Germany.

Pioneering education programme unveiled

A first-of-its-kind education programme in Scottish dentistry has been unveiled to help meet the demand for practitioners across the country.

Scottish Dental Care has introduced Pathways, a groundbreaking education programme that sets a new standard as the most comprehensive professional development initiative for early-career dentists in the country.

The 16-module programme, spearheaded by John McQueen, clinical director of education and Philip Friel, co-founder and director of dentistry at Scottish Dental Care, has been designed to help bridge the gap between university training and independent practice, offering young dentists structured guidance as they embark on their careers.

John McQueen said: 'The transition from a structured, educational-based environment through vocational training to associate, developing your practice and managing your career, can feel like being thrown into the deep end, with young dentists left to find their own way.'

'Pathways is what I wish I had when I finished my university training. You don't know what you don't know – which is what inspired us to develop this training programme.'

'It is incredibly rewarding to be in a position to pass on knowledge to the next generation of dentists, while also learning from their fresh perspectives.'

'Pathways will provide an unprecedented level of comprehensive and hands-on training, aimed at empowering emerging dentists to excel in their careers.'

'There's no pressure to specialise or pick one discipline with this programme – this is an opportunity to develop skills and explore practices that you may not otherwise be exposed to.'

Holistic approach

Pathways offers a blend of hands-on and theoretical training, providing 16 dedicated training days over two years.

The curriculum covers all key areas of dentistry, including treatment planning, oral surgery, implants, prosthodontics, and endodontics, with modules led by Scottish Dental Care clinical leadership as well as other practitioners prominent in their field. In addition, participants will have opportunities to shadow experienced clinicians and observe real cases in clinic.

John added: 'We've structured Pathways to push the envelope beyond what's taught at university.'

'It's not just about developing technical skills, but also about preparing dentists for the personal, physical, and mental challenges of the profession. By including workshops on mental wellbeing and financial planning, we're helping young dentists build holistic careers.'

Learning opportunities for associates

The Pathways programme addresses the critical need for dental talent retention in Scotland by focusing specifically on early-career dentists in their first five years of professional practice.

Philip Friel added: 'We believe in continuous education and development, offering learning opportunities for associates at every stage of their career.'

'The programme delivers an exceptional professional development pathway, offering extensive training courses and opportunities at a significantly subsidised cost.'

'We want to set a new standard for professional growth and career satisfaction in the dental industry.'

Commencing in February 2025, training days will be held at Scottish Dental Care's Glasgow central office, it is open to all early-career dentists, with just 14 spaces available.

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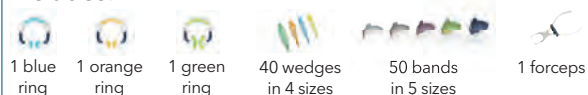
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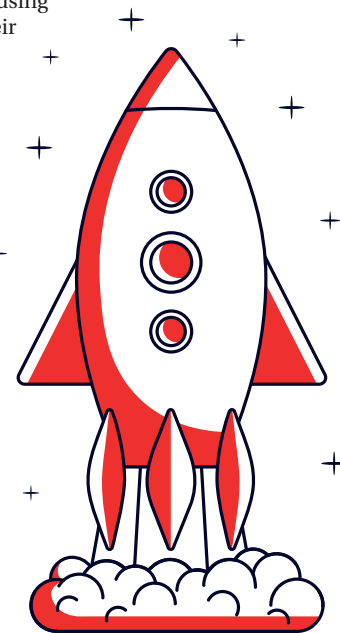
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*3M data on file



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Promoting understanding

Catherine Rutland highlights the need to communicate the unique needs of dentistry to the government and other stakeholders



CoreStrengths

Catherine Rutland
Clinical director at Denplan

As we begin another year, we will need to continue to work to help the government and stakeholders understand the challenges faced by the profession and the public.

Finishing last year by launching our white paper on the future of dentistry at a roundtable in the Houses of Parliament was a great way to round up the year.

Hearing the views from leaders across the profession and sharing those with MPs was an important part of expanding on the research we had gained from our membership.

To have our sponsor MP stay in for the whole session showed the quality of the conversation and the people involved.

Our research showed that 91% of our members surveyed felt that national decision makers do not understand the dental landscape. That's a big figure and really makes it clear how important it is to continue to help educate the government and wider stakeholders on the reality of the challenges faced.

Our area is complicated by our mixed economy which is well established and different to many other areas of healthcare.

Working together

I will often get asked whether it makes a difference to share our messages, but with that level of concern from our members we must do something! Pulling together our research and the white paper really allows focus on what to talk about.

Listening to the other leaders in the profession talk about their concerns it's clear we need to have joined up messages and work together, and that we must include all registrant groups. Some of the issues are cultural and behavioural, and these we should be able to solve ourselves.

If we aren't seen to be solving what we can as a profession, then it becomes more difficult to convince government of their part. Over the last few years, I've been challenged on this by MPs and members of the House of Lords who have a better understanding of dentistry.

It is not a comfortable question to answer, and one of the reasons I am so passionate about us working together to solve what we can – for our profession, but also because it should improve patient care. You can find the white paper on the Denplan website, if you want to find out more about our research and recommendations.

What's your financial resolution?

Iain Stevenson explains why you should put your finances in focus in 2025



MoneyTalks

Iain Stevenson
Head of dental at Wesleyan Financial Services

By the second day of the new year, many people might be fed up with hearing that seasonal question: what's your new year's resolution? By the third, many of those may already be broken.

However, there is merit in focusing your attention on areas of your life that truly matter and developing good habits can greatly improve our lives.

This year, rather than the worthy but clichéd resolutions of healthier diets and more exercise, perhaps it's time to put your finances in focus.

You would be forgiven for thinking that financial planning is solely about the numbers, however, the first step to good financial planning lies in recognising that money is a means to an end. So, what would you like to do in life?

Think short-, medium-, and long-term. The short-term might look like buying a new car or house, the medium-term might be planning for a family or furthering professional development, and the long-term might be to retire earlier or to protect your legacy for your family's future.

Taking action

Once you know your whys you can put the steps in place to reach your goals.

Timeframes are crucial, as they help you identify where might be best to place your hard-earned surplus earnings and what risk you may be comfortable taking.

For practice owners, last year's budget announcement regarding employer National Insurance contributions will make a strong financial plan all the more important. Anticipating changing costs due to some of these changes and tightening up other areas of your business' finances might soften the blow.

Remember that there is a price to inaction – something financial experts refer to as the cost of delay. A 'wait and see' approach to your financial planning is potentially a missed opportunity.

It is never too late to review your personal or practice business finances with a specialist, but the sooner you take the first step, the greater the potential benefit. This can be in the form of making informed decisions to retire earlier, buy your own practice or make the move to private provision. The world is your oyster.

Design or incompetence?

Nigel Jones reviews the government's approach to dentistry and its impact so far



PracticeMakes Perfect

Nigel Jones
Sales and marketing director at Practice Plan

Many years ago, I heard an anecdote about how a dentist had found himself on a long train journey sitting next to an MP. On discovering his fellow passenger was a health service dentist the MP, so the story goes, asked: 'Just what will it take to get you lot out of the NHS?'

I've no way of verifying the truth behind that tale but

it's hard not to wonder if the newish Labour government has been busy using its first few months in office to answer that question.

Take the examples of the budget and the Employment Rights Bill. Both can only increase the costs and complexity of running any business. But for small businesses who lack specialised HR expertise and flexibility to adapt, it must be particularly difficult.

Surely given one of the stated aims of the budget was to shore up the NHS, it did not go unnoticed that the NHS is supported by thousands of privately owned small businesses such as dental practices.

Repercussions

How might practice owners respond? Well, there are already reports of business and practice managers being made redundant which is, perhaps appropriate in some cases.

In other situations, it would seem short sighted especially as these could be the very people to help practices stay on top of the evolving regulatory minefield or drive additional revenue to offset the additional costs.

And therein lies another possible response. Drive up private income to compensate for the increased running costs of the practice.

Cross subsidy of NHS care by private patients is nothing new but increasingly looks like a form of localised stealth tax that challenges my concept of fairness and transparency.

To avoid that, an NHS practice could decide to follow the hundreds that have successfully gone before them and go wholly private which brings me full circle to my opening paragraph.

Is it a slip up or a strategy? Who knows? However it's hard not to view as ironic that efforts to protect the rights of workers might in part lead, as has been said many times over the years, to perceptions that the government is unfairly dismissing dentists from the NHS. **D**

Lighting up London

Jin Vaghela and **Kish Patel** discuss an evening of entertainment, community and celebration at the Smile Party

Jin Vaghela

Founder, Smile Dental Academy



Kish Patel

Founder, Smile Dental Academy



Hot on the heels of the Smile Dental Academy Graduation Ceremony at the Royal College of Surgeons of England, the celebrations continued with unparalleled energy at the Smile Party, hosted at Eight Embankment. With more than 1,000 attendees, it was a night of unforgettable entertainment, connection and celebration.

The Smile Party was more than just an evening of entertainment; it was a testament to the unity and vibrancy of the dental community. The event brought together leaders and influencers from across the industry, Smile Dental Academy graduates, diploma delegates, lecturing faculty, Smile Clinic Group team members, undergraduates, and professionals from all areas of dentistry.

It was a fascinating blend of generations and career stages, with seasoned professionals and emerging talent coming together in a celebration of shared achievements and aspirations.

The night was hosted by the ever-charismatic Tommy Sandhu, who set the tone for an evening of excitement and camaraderie. 'Singing Dentist' Milad Shadrooh kicked off the festivities with his trademark wit and musical charm, captivating the audience with his humour and creativity.

From there, the energy only intensified as iconic acts took the stage. So Solid Crew members Romeo, Lisa Maffia, Dandaman and Neutrino delivered crowd-pleasing performances, while Heartless Crew brought their signature vibe, keeping the party atmosphere alive.

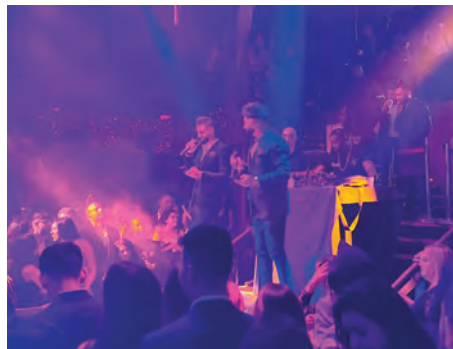
Adding a multicultural twist to the evening, Panjabi Hit Squad and Metz and Trix added their infectious beats, ensuring the dance floor remained packed well into the night.

Cross-generational community

The Smile Dental Party created an environment where connections were made, ideas were exchanged, and the dental profession came together as a unified community.

The event embodied the best of cross-generational networking, where graduates fresh from the day's ceremony celebrated alongside senior figures in the field. It was a space for conversations that transcended age and experience, fostering mentorship and collaboration in an informal and joyous setting.

Dr Jin J Vaghela and Dr Kish Patel, founders of Smile Dental Academy and Smile Clinic Group, reflected on the evening's success. Dr Jin said:



'We wanted to create an event that brought people together to connect, reflect, and celebrate the incredible progress we're making as a community. The energy and positivity in the room were incredible.'

The venue itself added to the grandeur of the occasion. Eight Embankment, with its stunning views of the Thames and its sophisticated ambiance, provided the perfect backdrop for such a landmark event. Guests were treated to an evening of premium entertainment, delicious refreshments and an atmosphere charged with excitement and camaraderie.

Dynamic and inclusive

The success of the Smile Party was also made possible by the incredible support of our sponsors. Their generosity and commitment to advancing the dental profession played a crucial role in bringing this vision to life. A special thank you to all the sponsors whose contributions ensured

that every element of the evening – from the performances to the atmosphere – was nothing short of spectacular.

As the night drew to a close, it was clear that the Smile Party had set a new benchmark for professional celebrations in dentistry. It highlighted not only the achievements of the Smile Dental Academy's graduates and community but also the dynamic, inclusive and forward-thinking nature of the profession as a whole.

The Smile Party 2024 was not just an event; it was a moment in history for the dental industry. It exemplified the fusion of professionalism, creativity, and unity, reminding everyone why dentistry remains such a vibrant and rewarding field. For those who attended, it was a night to treasure, and for those who missed it, the question is: how will next year's celebration top this?

Here's to the incredible achievements of our community and to many more nights of celebrating the profession we love. **D**



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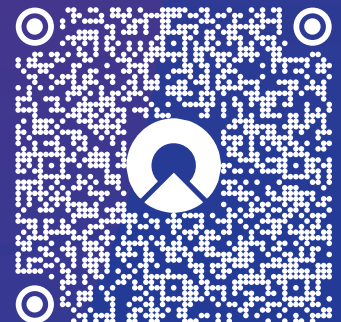
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The North of England Dentistry Show returns to Manchester for 2025 – here's what's in store

The North of England Dentistry Show returns to Manchester Central Convention Complex on Saturday 8 March 2025.

With a new look, new energy and new flow, this year's North of England Dentistry Show has been reimagined to deliver an unparalleled experience.

This year's show will showcase the latest advancements in dental technology, interactive workshops and a vibrant exhibition featuring more than 100 leading suppliers.

With a redesigned format, attendees can look forward to seamless session flows, meaningful networking opportunities and actionable insights tailored to enhance professional growth.

Best of all, the show is entirely free to attend, ensuring the whole practice can take advantage of this incredible opportunity to learn, connect and explore.

In addition, 40 world-renowned speakers will present cutting-edge research, innovative techniques, and practical expertise across multiple lecture theatres. Each session is CPD-verified, offering more than 40 hours of certified content to help you stay at the forefront of the profession.

Digital & Implant Theatre

The Digital & Implant Theatre makes its debut at the North of England Dentistry Show 2025! Honing in on the latest thoughts and techniques in digital and implant dentistry, you can expect to hear from leading clinicians and experts.

This theatre is dedicated to bringing you the latest updates on technological advancements and how you can utilise this in your practice.

By attending lectures in this lecture, you will be able to:

- Learn from the biggest names in dentistry – world-renowned speakers will be providing lectures throughout the entire day on the latest in all things digital and implants
- Discover all corners of digital dentistry – find out how to utilise the latest technological advancements in your practice and the best

ways to implement them

- Network with like-minded professionals – after each talk, you will have the opportunity to meet speakers and network with other like-minded professionals.

ADAM Theatre

Don't miss the brand-new theatre made for dental administrators and managers, providing the latest tips and tricks to ensuring practice processes run smoothly.

The North of England Dentistry Show covers every aspect of dentistry including dental practice managers and administrators who are key to keeping the practice running smoothly. This theatre gives insight into the latest trends and new advancements.

What's on at the ADAM Theatre?

- Learn the latest tools and techniques – ensuring you have what you need to keep current in this world of fast-paced changes and brand-new discoveries
- Discover the latest techniques – we pride ourselves on having the forefront and future of dentistry present at the North of England Dentistry Show. This is no different for our theatres – discover the latest techniques and technology
- Network with like-minded professionals – after each lecture is the perfect opportunity to meet other professionals, create lasting connections and meet speakers to expand your knowledge on their topic further.

Dentistry CPD Hub

The Dentistry CPD Hub will help clinicians of all disciplines stay abreast of their General Dental Council (GDC) recommended topics.

Recommended subjects covered include:

- Disinfection and decontamination – learn practical strategies for ensuring compliance with the latest guidelines
- Legal and ethical issues – keep updated with the latest changes and updates within legal and

ethical issues and how to address them

- Oral cancer – all dental professionals need to know the signs and understand treatments surrounding oral cancer
- Handling complaints – manage patient complaints with confidence, focusing on resolution techniques that protect your reputation.

Clinical Skills Theatre – powered by Smile Academy and Avant Garde

Delegates will experience unrivalled learning on every aspect of restorative dentistry at the Clinical Skills Theatre.

Powered by two of the UK's biggest brands in clinical education – Smile Academy and Avant Garde – this theatre will host an unmissable series of clinical lectures.

The Clinical Skills Theatre has been a favourite at the North of England Dentistry Show since its introduction. Known for hosting the biggest names in dentistry and housing knowledge on the latest techniques, you won't want to miss this!

- Learn from the biggest names in dentistry – some of the top names in clinical dentistry can be found here, including the likes of Robbie Hughes, Milad Shadrooh and *The Apprentice's* Paul Midha
- Discover all corners of dentistry – this theatre will cover topics from business tips and tricks to the latest techniques to utilise in your clinic
- Network with like-minded professionals – after each talk, you will be able to find the speakers from this theatre around the Avant Garde Dentistry and Smile Dental Academy stands that will be situated next to the theatre. This gives you the perfect opportunity to meet other dental professionals and pick the brains of the speakers.

Dentistry Hot Topics

Covering everything from impassioned debate on clinical approaches to detailed



examinations of personal branding, the Dentistry Hot Topics theatre will host expert conversation and panel discussions.

Laboratory Zone

The UK's most successful title for laboratories leaps off the page to present a line up custom-designed for technicians and clinical dental technicians.

Dedicated to bringing you the latest discussions and trends for dental technicians, this is the perfect space to learn something new and make ever lasting connections with like-minded professionals.

What to expect in the Laboratory Zone:

- Learn from the biggest technicians and clinical dentistry technicians – with leading dental technicians in attendance, you will have an abundance of knowledge at your fingertips
- Discover the latest techniques – we pride ourselves in having the forefront and future of dentistry present at the North of England Dentistry Show. This is no different for our theatres – discover the latest techniques and technology for 2025
- Network with like-minded professionals – after each lecture is the perfect opportunity to meet the speakers, network with other professionals and create lasting connections.



Business Lounge – powered by Towergate

The Business Lounge is a must-visit for practice managers, owners, and group owners. With expert-led lectures covering every aspect of practice management, you'll leave inspired and equipped with fresh ideas to elevate your practice. There will also be a dedicated area for networking before and after lectures, allowing you to exchange ideas and create meaningful business connections.

What to expect in the Business Lounge:

- Expert-led lectures – gain valuable insights from business specialists as they share their top tips for keeping your practice running smoothly and efficiently
- Ample networking opportunities – the business lounge has plenty of space to network after each lecture. Connect with like-minded professionals and the speakers throughout the day.

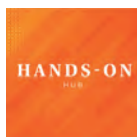


Hands-On Hub

The Hands-On Hub will have interactive demos on the latest equipment scheduled throughout the day. Offering a practical experience unlike any other at the show, attendees can try the latest technology in dentistry.

What's on at the Hands-On Hub:

- Leading dental equipment brands will be showcasing their latest innovations, technology, and advancements
- Attendees can gain first-hand experience with cutting-edge solutions
- Discover how the latest tools can transform and improve your dental practice.



Tailored to inspire

Leanna Ellis, FMC events director, said: 'The North of England Dentistry Show is set to be the most anticipated event of the year for the dental industry.

'We've designed this show to offer far more than just CPD hours. It's about providing each attendee with real, hands-on experiences, meaningful networking opportunities, and exclusive insights that truly elevate their practice.

'This year, we're bringing a new look and an enhanced flow to the existing event, with over 100 exhibitors, compliance and CPD hubs, and a new theatre crafted for an engaging experience that keeps all dental professionals feeling inspired and empowered.

'If there's one event to attend this year, it's the North of England Dentistry Show. We can't wait to welcome you all!'

Stay tuned over the coming months as more is revealed about what's in store. **D**

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dentistry.co.uk/shows/north-of-england-dentistry-show.



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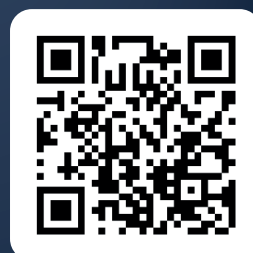
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Welcome to Chairside Chats

Dentistry's brand new columnist **Sarah McKimm** will share her practical tips, professional insights, and coping strategies

Hello and welcome to the very first edition of Chairside Chats! I'm Sarah – a qualified counsellor with more than 20 years of experience in the dental profession – and I'm here to offer a space where we can explore the human side of dentistry together, looking at what's behind the mask, through a unique perspective.

With over two decades of experience in the dental profession, I made the life-changing decision to transition into counselling after overcoming personal challenges through therapy. I've spent years helping people feel at ease in some of life's most vulnerable moments. Now, as a counsellor, I continue that mission on a deeper emotional level. I currently run a private counselling practice and in addition work as a commissioned counsellor for various organisations, supporting individuals impacted by traumatic bereavement, mental health struggles, and active recovery. As co-founder and director of Unmasked Neurodiversity Network CIC, I also champion support for neurodivergent individuals and their carers in East Leeds, inspired by my own ADHD diagnosis and the limited local resources available. Inspired by my own experiences of overcoming adversity, it's a privilege to now support others in finding their strength and resilience.

What's on your mind?

Let's be honest, working in dentistry can be tough. Whether you're a nurse, hygienist, receptionist, or even a dentist, this profession comes with its own challenges. Maybe you've faced tricky patient or colleague interactions, workplace stress, or the emotional weight of trying to support someone through their dental fears. Or perhaps you're struggling with burnout, navigating team dynamics, or balancing the demands of work and everyday life.

That's where this column comes in! Each month, I'll take a question from one of you – our incredible readers – and explore it with care, compassion, and insight. Drawing on my dual background as a counsellor and experience as a dental professional, I aim to provide empathic, non-judgmental responses tailored to the struggles faced in this field.

While I can't offer counselling here (or replace professional support where it's needed), I hope to share some practical tips, professional insights, and coping strategies. Plus, every article will include signposts to trusted organisations, should you need further help or guidance.

This column is all about you. What's on your mind? Is there a challenge in your professional or personal life you'd like to explore? Maybe

Today's Dental is a people-focused dental group, with a purpose to improve lives and create smiles. As a deeply human organisation, they believe that by starting with a clear purpose, they enable their people to connect with the business and find value in what they do. Where people feel supported and valued, they can reach their full potential.

They are delighted to be the official sponsor of Chairside Chats!

you're dealing with stress, navigating difficult relationships, or simply wondering how to better care for yourself while caring for others. Whatever it is, I'd love to hear from you.

So, here's my question for you:

- What would you like to see in this column?
- What topics or struggles feel most relevant to you?
- If you could ask one question right now, what would it be?

Your voice will shape Chairside Chats – let's build this together into a space where we can learn, grow, and support one another. Drop me an email at inconfidence@dentistry.co.uk. No topic is too big or small, and every question will be treated with care and confidentiality.

I can't wait to hear from you! Let's start the conversation.

Warm regards,

Sarah **D**

Send your questions, topics and ideas to Sarah at inconfidence@dentistry.co.uk. Your requests will be treated anonymously and in confidence.

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The Dentistry Awards: a summer of celebration

The **Dentistry Awards 2025** are making a seasonal shift to June, transforming into the ultimate summer party

It's time to mark your calendar – the Dentistry Awards will now take place on 6 June 2025. Imagine longer, lighter evenings, vibrant summer vibes and the perfect opportunity to honour excellence in dentistry against a backdrop of sunshine and celebration.

Dubbed 'dentistry's biggest party', the awards will return to The Athena in Leicester for another showstopping evening. You can expect all the excitement, glamour and prestige of previous years, now as the highlight of your summer.

Our team is working hard behind the scenes to make this year's awards a truly unforgettable experience. While we finalise the details, why not start planning your moment in the spotlight?

Why enter?

The Dentistry Awards celebrate excellence in dental practice, recognising dental professionals for their achievements and advancements. This prestigious event highlights talent, innovation and dedication in dentistry.

Nominees are chosen for their exceptional skills, patient care and community contributions. The awards not only honour individual and team accomplishments but also inspire continued excellence in oral health care.

Winning at the Dentistry Awards, or even being nominated, can have huge benefits for you or your practice. Patients are more likely to choose a practice that has been officially recognised as providing high-quality care. The awards also offer vital exposure, spreading the word that you are a big name in dentistry.

In addition, they can also help to boost morale in your team. It's a lot easier to attract and retain staff when your practice or team has been acknowledged for its excellence.

Whether you feel that your practice or laboratory has something special or your team always goes the extra mile, we'd love to receive an entry from you.

Register now

It's never too early to start considering your entry.

Which categories will you enter? What were your biggest achievements in 2024? How will you show the judges exactly what sets you or your practice apart?

The deadline for entries is 19 March –

register today at dentistry.co.uk/awards/the-dentistry-awards. You can then add your details and select your categories.

We'll be sure to remind you when it's time to upload your submission.

Entries can then be uploaded through an online form. This is now the only way to submit entries for all FMC awards.

As entry to the awards is completely free, you have nothing to lose by trying! **D**

For more information and to register, visit dentistry.co.uk/awards/the-dentistry-awards.

To learn more about all FMC awards, visit www.dentistry.co.uk/awards.



Dentistry
AWARDS 2025

ATHENA
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Entry deadline:
19 March 2025

Ceremony date:
6 June 2025

Venue
The Athena, Leicester

Supporting colleagues with cancer

Tim Woodman explains how to create a supportive workplace environment for someone with cancer

Tim Woodman

Medical director of policy and cancer services, Bupa UK Insurance



Cancer can be a life-changing experience for most people, affecting their personal and professional lives. It brings many challenges and uncertainties for the person with cancer, as well as for their friends, family and colleagues supporting them.

Knowing the best way to be there for someone living with cancer may not come easily, as no two experiences are the same.

Here Dr Tim Woodman, medical director of policy and cancer services for Bupa UK Insurance, offers advice to help those working alongside someone going through treatment.

Working while undergoing treatment

While not everyone may be able to continue working during cancer treatment, for some, work can provide a sense of normality and routine, and even boost self-esteem.

However, this must be weighed against the physical and mental toll of treatment, as cancer and certain treatments can cause side effects that may impact a person's ability to work as they did before their diagnosis. These may include increased pain, fatigue, digestive problems and a weakened immune system.

A cancer diagnosis and resulting treatment can also impact a person's mental wellbeing, where they experience a range of emotional responses, such as depression, anxiety, fear, anger, shock, guilt and feelings of isolation.

Recognising that someone's symptoms, emotions, and preferences may change over time is crucial, and being flexible, understanding and having open communication is important for creating a supportive workplace environment.

Ask thoughtfully

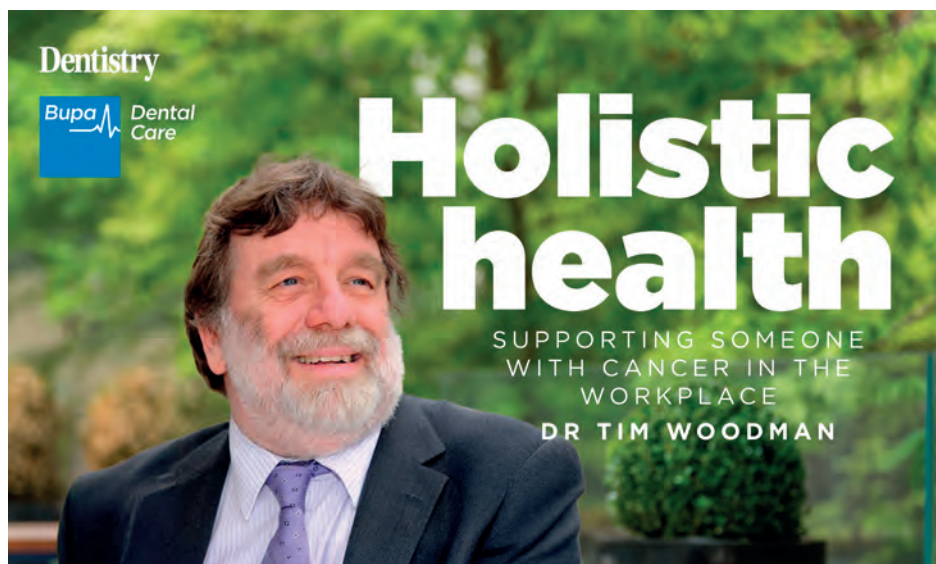
Your colleague may or may not feel comfortable discussing their diagnosis or treatment. Equally, they might only feel comfortable if asked about it.

Asking open-ended questions like, 'How can I best support you?' or 'Do you feel like talking about it today?' can give them the opportunity to share when they're ready, without feeling pressured.

It's important to be empathetic, approachable and let them guide the conversation.

Power of listening

Be prepared for a range of emotions, and don't take it personally if they become upset,



angry or withdrawn. Often, just being there to listen can provide more comfort than trying to offer solutions.

Avoid pushing for answers or trying to fix things – instead, let them steer the conversation. If they need silence, be comfortable with that too.

Allowing for moments of quiet can sometimes create space for more open and honest dialogue.

Empathy over optimism

When someone is going through a difficult time, it might feel natural to offer reassurance or tell them everything will be fine with phrases like 'stay strong'.

However, this may feel dismissive of the very real fears and anxieties they might be experiencing. Listening to their worries and simply saying 'I'm here for you' can be more meaningful.

Most people living with cancer will have also researched and be well-informed about their condition, so it's best not to tell them there are all kinds of 'new' treatments available.

The best approach is to focus on being present and emotionally available, rather than trying to provide solutions.

Keep things light

Your colleague might use work as a distraction, and that's okay.

Similarly, talking about different everyday topics like TV shows, sports or weekend plans, can provide much-needed light relief. Once more, gauge the situation, and let your colleague guide these conversations.

Supporting flexible work

As someone's treatment progresses, your colleague may need to take more frequent breaks or work remotely if they can. Accommodating these changes not only shows empathy, but can also help reduce the stress of balancing work with ongoing medical treatment.

Make sure they feel comfortable discussing any adjustments they may need and reassure them that it's okay to take time away from work when required.

Some workplaces like Bupa will offer Employee Assistance Programs (EAPs) or other mental health resources, which could be helpful for someone navigating cancer treatment. Make sure your team is aware of these options, and where to access these services if they need it.

Ultimately, supporting a colleague with cancer requires care, compassion, and a willingness to adapt to their changing needs.

By remaining flexible, listening without judgment, and offering empathy over solutions, you can make a significant difference in their journey, where they feel supported both professionally and personally to help them navigate this challenging time. **D**

You can visit the Bupa cancer information hub by searching www.bupa.co.uk/health-information/cancer.

Macmillan's work and cancer resources can also be found on www.macmillan.org.uk/about-us/what-we-do/how-we-work/work-and-cancer.

AGM and masterclass success for the ADI

The **ADI** reflects on a successful 2024 and looks ahead to a busy and eventful year ahead

The Association of Dental Implantology (ADI) held its Annual General Meeting (AGM) in late November at the Institute of Engineering and Technology London, presenting members with an insight into the changes made by the board and the latest financial report. Members convened in the Kelvin Lecture Theatre during the highly successful ADI Masterclass: Soft Tissue Regeneration (in collaboration with the Osteology Foundation).

Dr Zaki Kanaan, ADI president, led the meeting where he first confirmed the standing with charitable status, which requires the ADI to meet specific standards set by the Charity Commission. In effect, this necessitates actions to help educate clinicians for the benefit of the public.

There is also the need to govern appropriately; including the election of board members. The most recent occurred over the summer, and Dr Kanaan went on to thank departing members, and welcome those that are joining the board. The names and roles of these individuals are available on the ADI website.

Topics discussed include the multiple Masterclasses that have taken place, as well as more than a dozen regional study clubs – some of these were completed online, and others in person. Specialist webinars were also carried out.

Mentoring with the ADI was formalised in conjunction with the College of General Dentistry over the past year, creating a programme with listed guidelines that will serve to benefit everyone.

Looking ahead

Looking ahead, Dr Kanaan expressed his anticipation for the continuation of the study

clubs, and more webinars. Further major events are to take place, including ADI Masterclass: A Female Perspective on 8 March 2025, and the ADI Team Congress will be held in Brighton from 1-3 May 2025. The National Members Forum will take place in 2025, and members can now submit their proposals to deliver talks at the event.

The ADI is actively setting out to trial a free membership for those connected to the British Association of Dental Nurses.

The role of student ambassadors was also highlighted, with 20 individuals from eight different universities helping to bridge the gap between clinicians and trainees. Professor Nikolaos Donos, outgoing academic representative, presented awards to the two winners of the ADI Scholarships Initiative, Tanaka Kadiyo and Toyin Aiyegbusi. The project aims to support and encourage students from the black community to access educational opportunities in implant dentistry.

Membership figures were updated, with 2,073 members as of 31 October 2024.

Treasurer Dr Zubair Sacranie gave an update on the financial aspects of the ADI, noting that the association remains in a stable position, with further development of a reserve fund.

Furthering knowledge

The AGM was carried out in the middle of the schedule of the ADI Masterclass: Soft Tissue Regeneration (in collaboration with the Osteology Foundation). The day saw clinicians from across the globe gather to discuss prominent elements of modern implant dentistry, and further the knowledge of attending members.

Lecture topics were devised to actively help



members. Professor Rino Burkhardt delved into suturing training and development, helping clinicians not only recognise the gold standards for suturing but how to set out an active training plan to achieve it consistently.

Professor France Lambert spoke about the surgical considerations for soft tissue management when placing immediate implants and gave a comprehensive insight into factors to consider for case selection, including how to identify favourable levels of recession, tissue types, bone anchorage, and much more.

A proven success

In the afternoon, Professor Ronald E Jung put it best when introducing his lecture on soft tissue augmentation and regeneration for aesthetic results. In reference to the schedule of the masterclass, he said: 'This is a line-up that's hard to beat!'

Dr Marivsz Rzepski is a dentist at Princes Street Dental Care and a member delegate of the ADI. He was delighted with the event, saying: 'I'm really happy with it, everything is of interest. It's good to have a range of subjects spoken about because in implant dentistry everything is important. It's quite good to bring it all together at an event like this, I'm really impressed.'

The promise to deliver two more masterclasses in 2025 is testament to the drive and passion of elected clinicians to spread information with colleagues. With the November event a proven success, individuals can become ADI members and look to secure their spots at the upcoming events today. **D**



For more information about the ADI, or to join, visit the website www.adi.org.uk.



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The year for dental technicians to lead the charge

Following a challenging year for dental technology, **Ashley Byrne** discusses why dental technicians have reasons to be hopeful in 2025

Ashley Byrne

Owner, Byrnes Dental Laboratory



Last year was challenging for dental labs. A general election, a new government and a tough budget left many employers frustrated with the current economic climate. Patient demand has been unpredictable, and many labs have reported a significant drop in sales compared to 2023.

One lab owner I spoke to recently described it as their toughest year in decades – volatile sales, rising costs and staffing difficulties left them feeling like they worked harder than ever with little to show for it. Many of you might feel the same way.

Even though my own lab experienced growth this year, it didn't match the effort we put in. That's business though, rewarding yet relentless.

The UK economy barely grew in 2024, and forecasts for 2025 aren't much better – 1.5% growth at best, with whispers of a possible recession. Add the extra burdens from the recent budget, and it's easy to see why the outlook might feel bleak. But amidst these challenges, does dentistry – and specifically dental technology – have reasons to be hopeful in 2025?

Absolutely.

Albert Einstein once said: 'In the midst of every crisis lies great opportunity,' and I believe that rings true today. Recessions and slowdowns force us to rethink, adapt and innovate. While fear and cost-cutting might feel like natural responses, history shows that businesses that invest, adapt and push forward during tough times often emerge stronger, leaner and more competitive.

Rethink your role

I often hear technicians say: 'Labs are stuck because we rely on dentists for work.' With respect, I disagree entirely. Sitting back and hoping for more orders isn't a strategy – it's a recipe for disappointment. 'Hope' isn't a marketing tool, nor is it a business plan.

Dental technicians are highly skilled, resourceful professionals. Our role extends far beyond manufacturing. We have the expertise to collaborate with dentists to help them grow their businesses, which in turn grows ours. If a client's practice is struggling, it's an opportunity to step in with solutions. From hosting patient events to study clubs, promotions and training on new workflows or products, we can provide tangible value that helps our clients thrive.

At Byrnes, we've already mapped out a proactive 2025 strategy. Our mission is simple: help our clients not just survive but grow. Whether that's introducing digital workflows, streamlining processes, or exploring innovative ways to elevate their practices, we're ready to partner with them every step of the way.

Embrace innovation

Traditionally, technicians are viewed as fabricators, limited to fulfilling dentist orders. But we're so much more than that. As trusted members of the dental community, we have the opportunity to educate, inspire, and guide our clients. Rarely do we get such an opportunity to meet our clients face to face.

Quiet periods are ideal for offering training sessions, demonstrating the benefits of new technologies, and showing practices how modern dental tech can set them apart in their local markets.

Think about this: digital workflows and cutting-edge technologies aren't just tools for efficiency – they're tools for differentiation. By positioning ourselves as innovators and educators, we elevate our role from supplier to indispensable partner.

Arm your team

Preparation beats panic every time. At Byrnes, we're not crossing our fingers for fair weather in 2025 – we're gearing up for the storms. We've armed our team with training, tools, and a clear plan. If the year turns out to be as tough as predicted, we'll be ready. And if it's better than expected? Then we'll be positioned to make 2025 our strongest year yet.

This is our time to lead. Our industry is facing challenges, yes, but it's also ripe with opportunity for those who are willing to innovate, collaborate and take bold action. Let's make 2025 the year dental technicians redefine what's possible. **D**

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Life-changing treatments for edentulous patients

Cemal Ucer breaks down some of the options for treating patients with edentulism

Cemal Ucer

Specialist oral surgeon



Edentulism is a widespread condition affecting 12% of adults in the UK (World Health Organization, 2023). According to the 2021 adult oral health survey report, 5% of over-16s in the country are edentate, and edentulism becomes much more prevalent as people get older (OHID, 2024). With an ageing population, this figure will almost certainly remain high.

Loss of function as well as changes to the patient's appearance and ability to communicate can be psychologically damaging and physically limiting (Shah et al, 2015). Many edentulous patients experience social isolation and poorer overall quality of life (Hajek et al, 2022).

Restorative implant treatment can be completely life-changing for patients as well as a source of immense satisfaction for clinicians. However, the treatment of a severely atrophic maxilla requires a high level of skill, and careful planning to be successful (Aalam et al, 2023).

Strategising

Determining an appropriate clinical strategy when there is significant bone loss can be assisted by pre-treatment evaluations, such as the Bedrossian classification of the maxilla (Bedrossian, 2011).

In this model, an assessment of the patient's available bone and its relative quality is made from a panoramic radiograph. The assessment considers bone in four zones: I, canine to canine; II, the bicuspid; III, the molars; and IV, the zygoma.

This approach also examines the relationship between the alveolar processes, the nasal floor and the maxillary sinuses. Options are carefully considered, and decisions are informed by the presence or absence of available bone in these areas (Cudia et al, 2024).

Innovative surgical options

If conventional bone augmentation and implant treatments are not possible or appropriate, there are various innovative and increasingly predictable surgical options which can be considered.

Short implants are designed for cases with limited bone height, providing stability without the need for extensive bone grafting (Jain et al, 2016).

Tilted implants can be placed at an angle to engage available bone in the posterior maxilla, often reducing the necessity for sinus lifts (Cavalli et al, 2012).

In addition, 3D printed customised implants can be created to fit the specific anatomy of the patient. The latter technology is rapidly



developing and opening up a new and exciting set of possibilities for restoring aesthetics and function for patients (Pradies et al, 2024).

Trans-sinus implants are positioned through the maxillary sinus, and can be beneficial in cases of significant bone loss. This treatment can be suggested when there is atrophy in Bedrossian zones I and II, when there is a concave anterior sinus wall anatomy, and when there is adequate crestal bone height available (Aalam et al, 2023).

Pterygoid implants pass through the maxillary tuberosity and the pyramidal process of the palatine bone, subsequently connecting with the pterygoid process of the sphenoid bone. Pterygoid implants can be placed to support implants in zones I and IV and can increase the anterior-posterior spread of the final restoration (Jain et al, 2016).

Zygomatic implants

Zygomatic implants (ZI) make use of the zygomatic bone to support a prosthetic device – generally without requiring a bone graft. They are an effective treatment for patients with significant bone loss from complete or partial maxillectomy, as well as for those with severe maxillary atrophy, who cannot undergo bone grafting.

The classic procedure employs a single implant placed in each zygomatic bone, which transverses the maxillary sinus and is splinted to conventional implants in the anterior region (Polido et al, 2023).

Patients without adequate anterior maxillary bone can be treated using the quad ZI procedure, where two zygomatic implants are placed bilaterally and then splinted, creating a stable distribution of forces which makes them appropriate for immediate loading (Davó and David, 2019).

The unilateral approach adds a single zygomatic implant in one side, splinted to standard anterior implants (Shah et al, 2015).

The Zygomatic Anatomy-Guided Approach (ZAGA) focuses on patient-specific therapy applicable to all types of atrophic maxillary anatomy. The concept dictates that the placement

of ZIs is guided by both anatomical and prosthetic requirements (Aparicio et al, 2021).

Although surgical insertion of a zygomatic implant is complex, and has potential complications, when implemented correctly by clinician with adequate training and experience it can be considered less invasive than bone augmentation procedures (Shah et al, 2015).

Facial anatomy

Clinicians looking to incorporate these advanced procedures into their practice require proper training from experts who possess a thorough understanding of the latest innovations and techniques.

Given the complexity of facial anatomy and the potential for damage to sensitive structures, training should fully address established risk mitigation strategies.

In addition to practical instruction on each procedure, clinicians must also gain a complete understanding of the benefits and risks associated with each option.

Eminent specialist oral surgeon Professor Cemal Ucer provides just such an opportunity at the ICE Postgraduate Dental Institute and Hospital. The two-day course, 'Hands-on training in zygomatic, nazalus, trans-sinus, and pterygoid implants', offers comprehensive advanced surgical training in both novel and conventional techniques, aimed at delivering truly transformative outcomes for patients.

Edentulism is a debilitating condition that can have significant and far-reaching consequences for patients. Gaining the skills and confidence to provide safe and reliable treatment options for a severely atrophic maxilla enables clinicians to offer their patients truly life-changing opportunities. **D**

For references, email newsdesk@fmc.co.uk.

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Head and neck cancer: from signs and symptoms to recovery

Jaymit Patel discusses head and neck cancer and the impact dental professionals can have on patients with this life-threatening disease

Jaymit Patel

Consultant in restorative dentistry and Oracle Head & Neck Cancer UK ambassador



Cases of head and neck cancer are rising at an alarming rate of 30% per decade and dentists have a key role in the early identification of signs and symptoms in their patients.

Currently, only a third of head and neck cancer cases are diagnosed at stages one or two. To improve patient outcomes, the national charity Oracle Head & Neck Cancer UK is campaigning for more awareness of this life-threatening disease and is reinforcing the importance for dental professionals in undertaking regular mouth cancer checks.

Signs, symptoms and survival

Dentists are uniquely placed to identify individuals who may have signs or symptoms of head and neck cancer. The key visual features to look out for during an examination include a lump or ulcer on the lip or in the mouth that does not heal, and a swelling or a lump in the neck.

It is also important to listen out for other symptoms that may be observed when speaking with patients. These can include a persistent sore throat, changes in the voice or hoarseness, difficulty with swallowing, and pain.

It is well-recognised that early head and neck cancer referral, diagnosis and treatment can significantly improve cancer survival and reduce the morbidity associated with treatments.

Patients diagnosed at stage one or stage two have a five-year survival rate of up to 85%,

Head and neck cancer is the fastest accelerating cancer in the UK and prevention forms a key component in tackling this public health problem

whereas those diagnosed at later stages face much lower survival rates, dropping to 40% by stage four.

Delayed diagnosis can often result in more aggressive treatment, including surgery, radiotherapy, and chemotherapy, which can significantly impact the patient's quality of life.

There is evidence from UK data that patients who are referred with suspected head and neck cancer by a dentist are more likely to be diagnosed at an earlier stage (Langton et al, 2020). This has been put down to the fact that dentists more frequently refer oral cancer in the absence of patient-perceived symptoms and often at an earlier stage.

However, an article published in the *British Medical Journal* reported that, in the UK, more than 55% of patients with oral cancer were referred by their general medical practitioner (GP) and 44% by their dentist (Wise, 2018). On average, patients had two to three consultations before they were referred to a specialist.

Risk factors

Various lifestyle risk factors – such as tobacco use and alcohol consumption – can significantly increase the chances of developing head and neck cancer. A dental visit provides an excellent opportunity to discuss modification of these risk behaviours.

It is also important to raise awareness of other associated factors such as the human papilloma virus (HPV), which is reported to be responsible for the growing incidence of head and neck cancer in the younger population.

An estimated 700,000 people a year worldwide are diagnosed with HPV-related cancers, with a vaccination now available to both girls and boys aged 12 and 13 years. There are also 'catch-up' vaccine programmes available for certain older cohorts. However, vaccine uptake remains low, with only 52% of boys and 56% of girls receiving the vaccine in 2022. It is suggested the vaccine could prevent over 100,000 cancers by 2058.

Multiple governmental, healthcare and charity organisations are campaigning to improve the uptake of the HPV vaccine in all age groups. Additionally increasing vaccine awareness from dentists during a routine dental visit will form an integral and valuable part of this combined endeavour.

Referral pathway

Once signs and symptoms have been recognised, the patient is referred via an urgent suspected cancer referral pathway to a medical professional for assessment and diagnosis. If the patient is diagnosed with a cancer then treatments can include surgery, radiotherapy and/or chemotherapy.

The concept of recovery following cancer treatments has been evolving over recent years. Historically, this has focused on the months of recovery associated with mucositis, fatigue, pain, candidiasis, swallowing difficulties, and breakdown of skin. As a result, long-term impacts of cancer treatments can arise, which can include but are not limited to:

- Altered anatomy
- Altered sensation to the structures of the head and neck
- Neck and shoulder pain
- Dry mouth
- Difficulty speaking and swallowing
- Reduced mouth-opening.

The conventional oral rehabilitation pathway following treatment for head and neck cancer can often take several years, with patients typically requiring interim prostheses and multiple definitive prostheses, owing to challenges presented by the disease and recovery process.

Prehabilitation

Over recent years, all relevant specialties have begun developing methods to improve the patient journey during head and neck cancer treatment. One of these is the concept of 'prehabilitation', which prepares the patient for cancer treatments and aims to speed-up recovery.

Methods for prehabilitation for head and neck cancer patients include the role of physical exercise, mouth-opening exercises, proactive swallowing exercises and oral/dental prehabilitation.

In addition, contemporary oral rehabilitation techniques utilise a range of restorative treatment strategies to provide a functional and aesthetic dentition sooner than was previously possible.

Dentists' primary aim is to support head and neck cancer patients to keep their existing teeth and maintain their dentition. The pre-cancer treatment pathway continues ►



to involve dental extractions where required, however these have become less common, with a shift towards prevention.

Plans for teeth that are to be extracted are based on clinical findings as well as the shared decision-making process with the patient.

All potential prosthetic options are considered (dentures/obturators, bridges, implant rehabilitations) and the optimal solution for a patient is selected based on feasibility, appropriateness and patient choice.

If a patient opts for an oral rehabilitation, then the benefits of 'primary implant

placement' to facilitate tooth replacement are always considered by consultants in restorative dentistry. This involves planning any prosthetic rehabilitation prior to cancer treatments and placing dental implants during the primary cancer surgery.

A range of options are available to support this, including implant placement in native alveolus, zygomatic bone, or in a composite free flap (eg a fibula free flap from the leg). In most cases, these implants will be restored definitively within one year. In some cases, provisional rehabilitation can be provided within one month of surgery or sooner in some instances.

Indeed, the introduction of rapid oral rehabilitation pathways has greatly improved the patient experience following head and neck cancer treatments. I have seen the time to provide oral rehabilitation in Leeds reduce from several years to under 12 months where implants are placed during primary surgery.

In some instances, tooth replacement on the day of primary cancer surgery may be feasible. This can have a hugely positive and emotional impact on patients.

Helping patients and improving outcomes

It is acknowledged that it can be very difficult for any patient to make complex decisions regarding their oral health during the challenging head and neck cancer diagnosis and treatment journey.

However, this can be further compounded when combined with dental anxiety and limited dental access.

I have regularly observed a change in individuals' abilities to take a proactive and positive approach to their oral health when routine dental access is facilitated.

This ability to receive care from a general dental practitioner, who understands and supports their specific oral health needs, has helped many patients retain their sense of self and improved confidence following life-changing cancer treatments.

A significant amount of work has been undertaken at national and regional levels to improve head and neck cancer outcomes.

Given the importance of structures in the head and neck for daily physical and social functioning (eg eating, speaking, smiling),

It is well-recognised that early head and neck cancer referral, diagnosis and treatment can significantly improve cancer survival

even small improvements in outcomes can have profound impacts on a cancer patient's quality of life.

Within dentistry, we are currently working with the British Association of Oral & Maxillofacial Surgery to pilot dental quality outcomes in head and neck cancer. This data will help develop insight into the access to both specialist and primary care dental services, access to holistic oral rehabilitations, and timely pre-radiotherapy dental extractions.

There are currently several regional and national projects being undertaken to improve awareness of head and neck cancer, and its signs and symptoms.

The Office of the Chief Dental Officer has recently begun a campaign to introduce cancer awareness messages on oral health products in participating supermarkets.

Within Yorkshire, we are piloting a cancer awareness campaign in general dental practices, including raising awareness of the HPV vaccine in preventing head and neck cancer.

Indeed, head and neck cancer is the fastest accelerating cancer in the UK and prevention forms a key component in tackling this public health problem.

It is acknowledged that dental access has been a challenge across the UK for many years, however access to primary care dentistry is critical for the long-term health and wellbeing of head and neck cancer patients.

In Yorkshire, we have developed and implemented the first collaborative network between primary and secondary care services, which importantly enables and safeguards long-term dental access for all head and neck cancer patients.

This network has expanded over the past four years and now covers a large part of East and West Yorkshire, with support from a core group of dedicated general dental practitioners.

Quality of life

Head and neck cancer treatments can have significant effects on an individual's quality of life. In many cases, these can affect the ability to eat, speak, chew, and swallow, and have an impact on confidence in social situations.

As such, for me personally, sub-specialising in the care of head and neck cancer patients can be both emotionally and academically challenging, particularly if treatment options are limited or compromised, due to the extent of the cancer or side effects of treatment.

It can also be both rewarding and incredibly humbling to be part of the emotional navigation through a patient's cancer journey. This also helps me as a clinician to understand and appreciate the sheer courage and resilience of cancer patients.

Observing a patient take ownership of and maintain their oral health and improve their wellbeing and confidence is inspiring for all team members in the continued pursuit to provide the best possible care for patients.

Oracle Head & Neck Cancer UK recognises the role of dentists in contributing to the early identification of head and neck cancer.

The charity has produced a range of resources available for patients and healthcare professionals, including dental practices. This includes video guides on how to perform oral cancer screenings and examinations.

Oracle Head & Neck Cancer UK has also produced a 'self-check video', which can be promoted to the general public. This practical, step-by-step demonstration can help dental teams to promote body awareness and regular self-screening. **D**

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For more information about Oracle Head & Neck Cancer UK and to download resources, visit oraclehnc.org.uk.



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A new path to forge

Enrico Steger shares a message for the new year

A new year is like a blank canvas, ready to be filled with colours, shapes, and ideas. It gives us the chance to start anew, to dream, and to transcend ourselves. And yet, as pure as this beginning may seem, it is marked by our experiences, our insights, and our achievements.

Looking back, we realise it wasn't only our successes that pushed us forward, but also the challenges from which we have learnt. They are not barriers, but signposts – small life lessons

that teach us how to grow. Every experience shapes our thoughts and actions, preparing us to walk new paths with courage and determination.

A look to the future

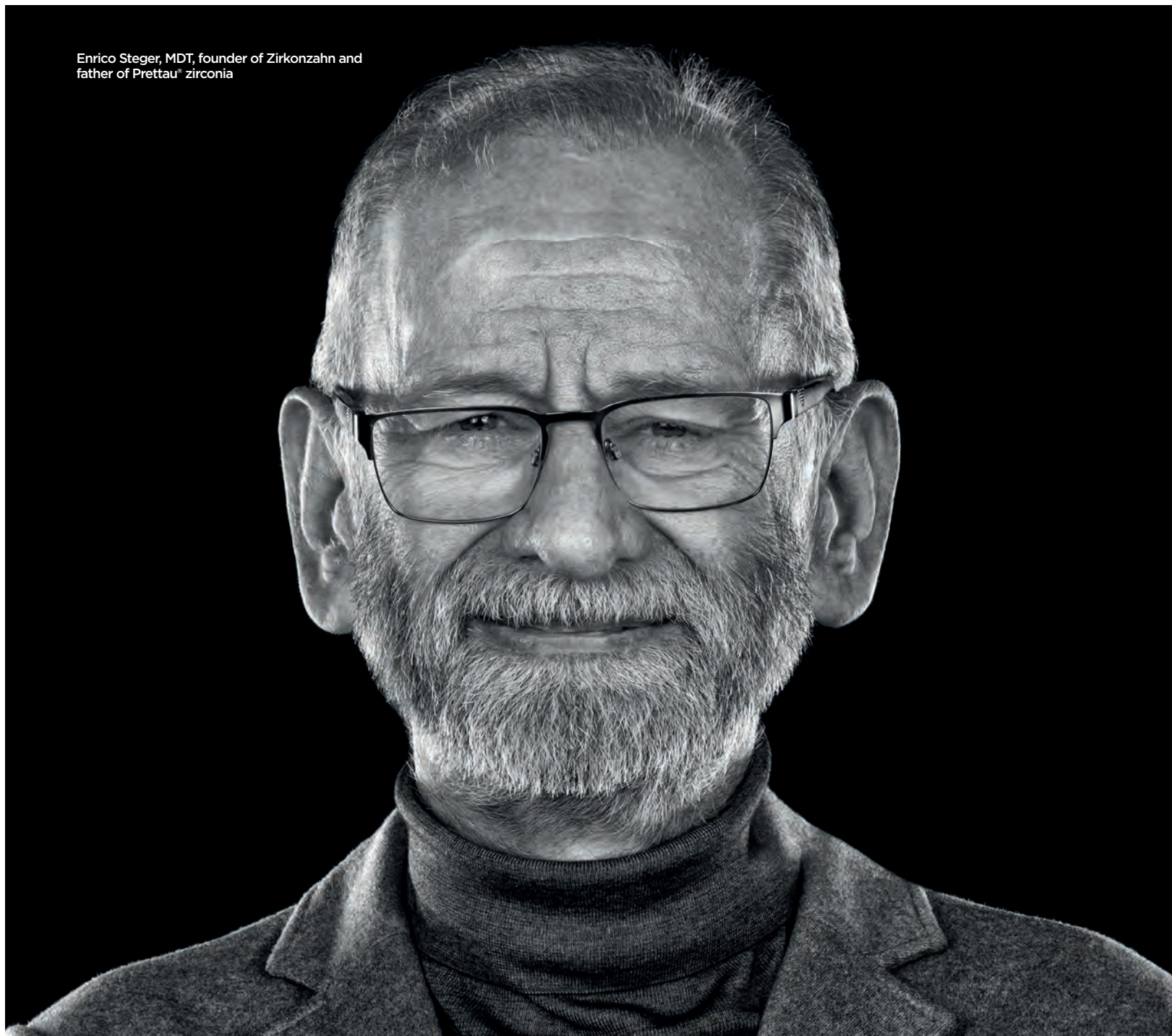
The year ahead is rich with new opportunities and possibilities. Every challenge holds a lesson that makes us stronger; each opportunity is an inspiration to grow. We do not walk this path alone, but together, driven by the will to work with passion, persistence, and creativity, to leave

an indelible mark.

May the coming year bring us the courage to explore the unknown and the patience to face trials with determination.

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Enrico Steger, MDT, founder of Zirkonzahn and father of Prettau® zirconia



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Augma's Bond Apatite is a natural mineral bone regeneration material that does not wash away, unlike other synthetic bone materials.

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Bond Apatite sets hard, so it won't wash away even in the presence of blood and saliva. And, because it sets hard, there is no need for a membrane which saves additional time and unnecessary expense. There is no need to achieve tension-free closure, this is actually contra-indicated, or even complete primary closure for gaps less than 3mm. Small dehiscences can be left exposed without any risk of infection or breakdown. Larger dehiscences can be protected by suturing an Augma Shield protective layer over it.



Formed from a patented mixture of biphasic calcium sulphate and hydroxyapatite in a 2:1 ratio, Bond Apatite sets like a cement in the oral cavity, even in the presence of blood and saliva.

After a few weeks it transforms into a radiolucent matrix, before calcifying and becoming radiopaque new bone. It produces 90% new bone after three months and over 95% new bone after eight months. These benefits have been challenged, but proven histologically correct.

Full-day Bond Apatite hands-on workshop

Augma are running a full day Bone Cement Hands-on Workshop on Saturday 29 March at the Leonardo Royal London City hotel, near the Tower of London.

It will be presented by Dr Lucio Faria who has been a national and international speaker for Nobel Biocare since 2011, is a surgical master in regenerative implant dentistry

and has undertaken extensive postgraduate studies in prosthodontics, bone and soft tissue grafting, and zygomatic implant surgery and rehabilitation.

Dr Faria will review four of the most common surgical protocols using Bond Apatite bone grafting cement, which sets immediately and is accompanied by minimally invasive surgical procedures that do not require a membrane.

Delegates will receive practical knowledge on how to perform socket grafting without flap reflection, lateral ridge augmentation and augmentation in the aesthetic zone.

The course includes a variety of resources, such as animated videos, recorded live surgery demonstrations and clinical videos.

Evidence based data histology shows how following the surgical protocols leads to clinical success and complete bone regeneration for the patient.

The course fee is £195.00 + VAT (including all course materials and lunch) with a £145.00 + VAT early bird rate for confirmed bookings before 31 January 2025.

For more information on Augma Bond Apatite or the 29 March hands-on workshop in London contact your local Trycare representative, Denise Law at the Trycare Events Team, on 01274 885544, email events@trycare.co.uk or visit www.trycare.co.uk.



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Put your career in safe hands

Vijay Kakkar shares his early career journey and why he chose Colosseum Dental as a reliable support system

Colosseum Dental is a 'first choice' career destination for dental professionals seeking a rewarding, lucrative and life-enhancing career. With 80 UK practices, they're small enough to maintain a close-knit and intimate people culture, while enjoying the benefits of being part of Europe's largest dental group.

Colosseum Dental's belief is that the growth and success of the business depends on the growth and success of its people. Therefore, they invest heavily in training, professional and personal development, wellbeing and maintaining a happy, supportive workplace culture.

Every year, Colosseum Dental carries out a Great Place to Work™ audit; a verified survey that measures happiness and satisfaction at work. Their Great Place to Work™ score has not only increased year-on-year over the last three years, they've also earned accreditations as a 'Top 20 UK Workplace' for Women, for Development and for Wellbeing.

For early career dentists, Colosseum Dental not only provide industry-leading training and ongoing CPD, they also work closely with every colleague, to carve out a bespoke and personalised career pathway.

Vijay Kakkar, an associate dentist at Colosseum's Halford House Dental Clinic in Newbury, joined Colosseum Dental as an FD+1 in 2022. Here he shares his story.

What inspired you to become a dentist?

I grew up in a very healthcare-orientated family. My dad was a doctor and sister a dentist, so I very naturally gravitated towards a career in healthcare – first exploring optometry (in which I completed a degree).

However, dentistry appealed to me more. I completed a stint of work experience within a dental practice, which made me appreciate the impact a healthy smile can have on people's lives. It's truly powerful. I attended King's College to train as a dentist, albeit a little later than my peers, and haven't looked back.

What were you looking for in a career partner?

When I was looking for my first role as an associate, like many early career dentists, I found it a little overwhelming. I knew the path I wanted to take, but wanted to make sure I started my career in the right practice, with good mentors and a reliable support system.

Why did Colosseum Dental appeal to you?

I was at a crossroads. I wasn't sure if I wanted to go down the DCT route, or go straight into general practice. I approached Colosseum



Dental as an option, because of their good reputation for career development and heavy focus on ongoing development. At interview stage, I was delighted to discover that Dr Farzeela Rupani, my clinical tutor at King's, was now Colosseum's chief commercial officer. I discussed my aspirations and ideas, concerns and apprehensions with her. She provided excellent advice and guidance, with impartial integrity – guiding me to make a decision that I 100% do not regret. I explained that mentoring was important to me, along with finding the right practice. She took this on board and matched me to a practice, support team and mentor who have been incredibly supportive.

How has Colosseum Dental supported you in your ongoing career?

Working at Colosseum Dental has provided me with a fantastic network of talented and experienced colleagues, that I can rely on for help and advice. They also have a UK-based Academy, offering multiple clinical courses that've been great for CPD, but also, for exploring other areas of dentistry and personal development. Having gained two years of experience as a general dentist, I'm now feeling confident about exploring specialisms. I'm really interested in endodontic treatments, so I'm looking forward to developing my knowledge and experience in this area. I know Colosseum Dental will be supportive of that.

In your view, what makes Colosseum Dental unique?

Colosseum Dental is owned by a charity; The Jacobs Foundation. This places care and human centricity at its heart, which permeates through the whole business. As a company, patient care and the wellbeing of staff and

colleagues are always at the forefront. From an operational point of view; obtaining materials and equipment has always been a seamless process. I have access to everything I need. They also host regular networking and social events, such as their Annual Conference in December and Summer Party in June. This is great for our company culture, as it provides an opportunity for us to network with other colleagues. It brings the company together, so we feel like one big team – instead of silo businesses across the UK. My professional network includes dentists at all career levels, all over the country.

What advice would you give to dental students?

Your first job after your foundation training year is the most important one. So do plenty of research and take lots of time to consider what you're looking for. Always make sure you visit the practice that you're looking to join. I personally feel this is essential. It'll give you a chance to meet the team and assess whether it's the right workplace culture for you. Happiness at work is important. And the people you'll be working with every day will play a big part in that.

NHS dentistry is a great way to gain experience. It's also incredibly rewarding; as you're providing an oral health service to those who need it the most. For me, it's been so educational, giving me exposure to many complex and challenging cases that've helped shape my expertise.

Finally, don't be afraid to ask for help! Even after you qualify you'll be faced with multiple challenging scenarios. Make sure you choose a career partner that'll be reliably supportive.

What does the future look like for you?

I've always been entrepreneurial and my long-term ambition is to own a practice. Colosseum Dental offer joint venture opportunities, which means I could explore the option of starting my own practice, with the support and financial backing of an experienced and established partner. This is certainly something I'll be aiming for.



If you're interested in joining Colosseum Dental, send an email to: recruitment@colosseumdental.co.uk or scan the QR code to view current vacancies. www.colosseumdental.co.uk.



Be chuffed

Practice Plan celebrates winning three prizes at the Dental Industry Awards

The whole team at dental membership plan provider, Practice Plan, is celebrating after a fantastic haul at the recent Dental Industry Awards ceremony at Wembley Stadium.

The prestigious Dental Industry Awards recognise excellence in the UK dental industry. The ceremony provides an opportunity for companies, teams and individuals to be formally acknowledged for achievements, projects and the high quality of work they do. The wide range of categories offers entry opportunities for companies of all sizes.

On the night, Practice Plan walked away with not one, not two but three awards: Advertisement of the Year for its 'Great Barrier Relief' ad, Marketing Campaign of the Year for 'Be Practice Plan' while its 'How to build a team of Highflyers' Workshop Tour was crowned Event of the Year.

At the ceremony to collect the trophies were creative director, Les Jones, and sales and marketing director Nigel Jones, along with a group of Practice Plan colleagues from across the business. After the ceremony Les said: 'I am absolutely delighted at these results. To have come away with one award would have been amazing. But to win three is just incredible!'

'Our winning "Great Barrier Relief" ad was aimed at busting some of the myths, or perceived barriers, about moving from NHS to private dentistry. The dental landscape has changed so much since the pandemic that some of the things that may have put them off making the move, such as not having enough patients, just aren't the case anymore.'

'"Be Practice Plan", which won us the Marketing Campaign of the Year Award, focuses on creating an emotional connection with our audience, emphasising the sense of community and support that comes with being part of Practice Plan. We want to convey that, to be part of Practice Plan, is to be part of something special and unique. It's something our competitors are unable to replicate. The campaign has a strong visual approach using real-life clients and Practice Plan staff to convey these emotions and highlight the unique value proposition that Practice Plan offers.'

'We foster and encourage creativity at Practice Plan, and we have a talented and super creative group of people who work for us. Whether they work in design, marketing or events they all work together to produce campaigns, collateral and events of the highest standard. To be recognised for this in three separate categories is a brilliant achievement and I couldn't be prouder of everyone.'

Nigel echoed Les' sentiments: 'We exist to support dentistry and our practices. We put our heart and soul into everything we do. We're not usually the kind of team to blow our own trumpets, but we're often told there's something special about Practice Plan. These awards feel a bit like a validation of that sentiment. To



be shortlisted for a Dental Industry Award is an achievement and to win one, a huge honour. But to win three – that was far above our expectations!

'We have brilliant teams working across the whole of the company whose focus is on doing the very best job they can. Being recognised for our creativity is an honour in itself but to also be recognised for the outstanding events we hold for our customers is phenomenal. We were up against stiff competition so for our Workshop Tour, "How to Build a Team of Highflyers" presented by Barry Oulton to win is even more of a thrill.'

'Our annual Workshop Tour is our most anticipated event of the year. Many of our customers look forward to it so much that they even close their practice for the day. They appreciate it's an opportunity for the whole

team to be treated to a fun, interactive and entertaining day delivered by the dental sector's most inspirational and engaging speakers. And, at the end of the day, they know they'll take away a host of practical and impactful ideas, tools and strategies that they can immediately implement into their practice and their personal lives.'

'I am extremely proud of everyone at Practice Plan, whether they were involved directly with these campaigns and events or not. We are all part of the family, so I feel these awards can be shared by every single member of the Practice Plan team.'

For more information about Practice Plan, call 01691 684165 or visit www.practiceplan.co.uk/be-practice-plan.



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First VST Course arrives in May!

Dr Abdelsalam Elaskary's one-day programme on the most recent and updated implant protocols is not to be missed

Trycare are delighted to announce that Dr Abdelsalam Elaskary, founder of Vestibular Socket Therapy (VST), will be bringing his internationally popular VST One Day Hands-on Workshop to the UK for the first time on Saturday 10 May 2025. But there are only 20 places available so early booking is recommended to ensure you secure your place!

An event not to be missed, Dr Elaskary's unique one-day programme of presentations and hands-on workshop focuses on the most recent and updated implant protocols, in particular VST which allows treatment of fresh extraction sites with immediate placement that reliably delivers optimised outcomes even in the absence of labial walls. Special emphasis will be on managing and optimising regenerative outcomes in the aesthetic zone.

Advantages of VST and the 'Six Day Protocol'

VST is an extensively scientifically validated surgical technique invented by Dr Elaskary and employed by many leading implantologists worldwide. It enables treatment of a wide range of socket varieties suffering from complete loss of their labial plates. This unique technique allows immediate placement in severely defective sockets and offers a protocol to place immediate implants in sockets with active infection via Dr Elaskary's 'Six Day Protocol'. Thanks to minimised intra-operative surgical trauma with less complicated surgical intervention, it saves treatment time and minimises the number of interventions. This innovative surgical approach

reduces post-extraction socket collapse and the need for long-term provisional restoration, and provides predictable aesthetic outcomes.

VST One Day Hands-on Workshop

Hosted by Trycare at the Royal Leonardo Hotel, Tower Bridge, London, on 10 May 2025, successful applicants will have the opportunity to learn everything they need to know in order to place immediate implants in the absence of labial bone using Vestibular Socket Therapy. With 6.5 hours CPD with Learning Outcome C, the course fee is just £795.00 including VAT, with an early bird rate of just £695.00 including VAT if booked before 28 February.

Places have already been booked by international delegates eager to take advantage of this opportunity to learn more about Dr Elaskary's Vestibular Socket Therapy.

Dr Abdelsalam Elaskary

Dr Elaskary graduated in dental science at the University of Alexandria in 1986 and implantology at the University of Frankfurt in 1993. In 1993 he also graduated from the Periodontics Department at Tufts University in Boston, Massachusetts, US.

Dr Elaskary subsequently obtained his Masters in dental implantology at the Periodontics Department at the Health and Science Center of San Antonio, Texas, US, in 1994.

Founder of the Vestibular Socket Therapy treatment, he is the owner of the Elaskary & Associates clinic and educational institute located in Alexandria, Egypt.



Formerly assistant clinical professor at the University of Florida, Jacksonville, US, from 2000 to 2005, Dr Elaskary is currently visiting lecturer at the Dental School of the Implantology Department at the University of New York, US.

He is president of the Arab Society of Oral Implantology (ASOI) in Cairo, Egypt, and has authored three books in the field of dental implantology and oral reconstruction, which have been translated into several international languages. The books are *Reconstructive Aesthetic Implant Surgery*, Iowa State Press, Black Well Science, June 2003; *Fundamentals of Esthetic Implant Dentistry*, Blackwell publishing, John Wiley, January 2008; and *Advances of Esthetic Implant Dentistry*, John Wiley, March 2019. Dr Elaskary has also authored many articles in the field of implant dentistry.

For more information including details of the Early Bird Discount before 28 February 2025 contact your local Trycare representative, visit www.trycare.co.uk or email Denise Law on events@trycare.co.uk.



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Disconnect to succeed

Trudy Gordon asks if it is possible to run a successful dental practice, or be a successful dentist, while enjoying your leisure time

Trudy Gordon

Operations director, The247dentist



The daily pressures on both dentists and practice owners have never been greater than they are today. However, it remains crucial for both practice owners and associates to disconnect and enjoy their evenings, weekends, and holidays, which includes effectively managing out-of-hours emergency cover.

It can be challenging to switch off, especially when you want to provide your private patients with the highest quality of care. But the need to take time off doesn't just benefit you – it's vital for your mental and physical wellbeing, and ultimately the long-term success of your practice.

Mental and physical health

Dentistry is a physically and mentally demanding profession. Long hours spent bent over patients, performing intricate procedures, and making critical decisions can lead to fatigue, back and neck pain, and even burnout. The mental load of managing patient expectations, administrative duties, and tricky situations can be emotionally draining.

Taking time off allows you to recover and recharge, maintaining your health and preventing exhaustion. Regular time away also ensures you can return to work refreshed, more focused, and better equipped to offer the highest standard of care.

Equally important is implementing a reliable out-of-hours emergency service. This allows you to enjoy your free time knowing your patients are still taken care of in case of urgent needs, without compromising the quality of service you provide. This peace of mind can go a long way in preventing burnout.

Improved focus and productivity

Working non-stop without adequate breaks can diminish focus, speed, and accuracy, ultimately affecting your ability to provide excellent patient care. Taking time off – whether

for a weekend getaway or a simple afternoon – rejuvenates both your body and mind, ensuring you return to work with renewed energy and sharper focus. A well-rested dentist is a more productive professional.

Additionally, having an efficient out-of-hours system in place ensures that patients receive timely care in emergencies, without disrupting your ability to maintain a balanced life. This system prevents unnecessary stress and helps you stay focused during working hours, knowing you have back-up support when you're off-duty.

Fostering creativity and innovation

Staying at the cutting edge of dental advancements requires creativity, whether it's adopting new technologies or improving patient care techniques. However, creativity thrives when you're able to step away from work and give your mind room to breathe. Engaging in hobbies, traveling, or spending time with loved ones can spark fresh ideas and new perspectives.

An out-of-hours emergency cover system offers peace of mind, allowing you the freedom to engage in such activities while ensuring your patients are still well taken care of in urgent situations. This time away from your practice can stimulate creative solutions that benefit your practice's growth and development.

Strengthening relationships

The relationships you build with your patients and your team are critical to your practice's success, but it's equally important to nurture your personal relationships. The demands of dentistry can sometimes lead to neglecting your personal life, but maintaining a healthy balance is crucial for overall wellbeing.

Spending time with loved ones and taking a break to recharge emotionally strengthens your resilience as a dentist. A strong support network provides the emotional stability you need to navigate stressful situations at work, while giving you fresh perspectives that can improve your practice.

Out-of-hours emergency cover ensures your patients receive the necessary care when you are off, helping you keep a healthy work-life balance.

Preventing burnout

Burnout is a significant risk for dentists who neglect their need for rest and time away from work. Constantly trying to meet patient demands, keep up with administrative tasks, and maintain a busy schedule without breaks can lead to physical and emotional exhaustion.

Incorporating rest into your schedule, with the added security of an emergency cover system, helps avoid burnout.

Creating boundaries between work and personal time by ensuring emergency cover is in place helps you stay motivated and energised, ensuring you can serve your patients for years to come. A dentist who values time off and leverages reliable out-of-hours services is more likely to remain passionate and successful in their career.

Time management and balance

To achieve a balance between your personal life and professional responsibilities, effective time management is key. It's about working smarter, not harder. By delegating administrative tasks, optimising your appointment scheduling, and utilising technology, you can maximise your productivity during working hours, while still ensuring ample time for rest and relaxation.

Having a robust out-of-hours emergency cover system allows you to fully disconnect from work, knowing that urgent patient needs are in capable hands. This makes it possible to manage your time effectively, fostering a healthier work-life balance.

Conclusion

In conclusion, enjoying your free time is essential not just for your wellbeing but for your success as a dentist. By prioritising rest, relaxation, and creating boundaries between your work and personal life, you ensure that your physical and mental health are protected, creativity and productivity are boosted, and burnout is prevented.

The ability to switch off your work phone and know that your patients are being cared for through a comprehensive out-of-hours emergency service has proven to be a game-changer for many practice owners in The247dentist network, allowing them to maintain a healthy balance and a thriving business. **D**

For more information on how your practice can begin using the free services of The247dentist today, get in touch on 02382 544 570 or info@the247dentist.com.



What does 2025 hold for dentistry?

Nigel Jones reads the runes and shares his predictions for dentistry in 2025

Nigel Jones

Sales and marketing director,
Practice Plan



It is not without some trepidation that I approach this year's attempt at clairvoyance. After all, in the wake of the arrival of the Labour government, the Darzi report has thrown the future of the NHS up in the air – and dentistry with it.

We're also still trying to anticipate the full consequences, intended or otherwise, of the first budget from Rachel Reeves. Unknowns around which mean the chance of this article surviving its first, to paraphrase Mike Tyson, punch in the mouth are slim.

Having said that, one thing about which I am confident is that the dental supply and demand imbalance that has driven so much change in UK dentistry in the post pandemic years will continue. By that I mean that while there may be local variations, patient demand for general and cosmetic dentistry will by and large outstrip the supply of clinical hours made available by clinicians.

Enough clinicians?

My views differ from those that believe we have enough clinicians in this country but not enough willing to work in NHS dentistry. I could simply point to the stats that Jason Wong has been presenting that clearly show the need for increasing clinician headcount.

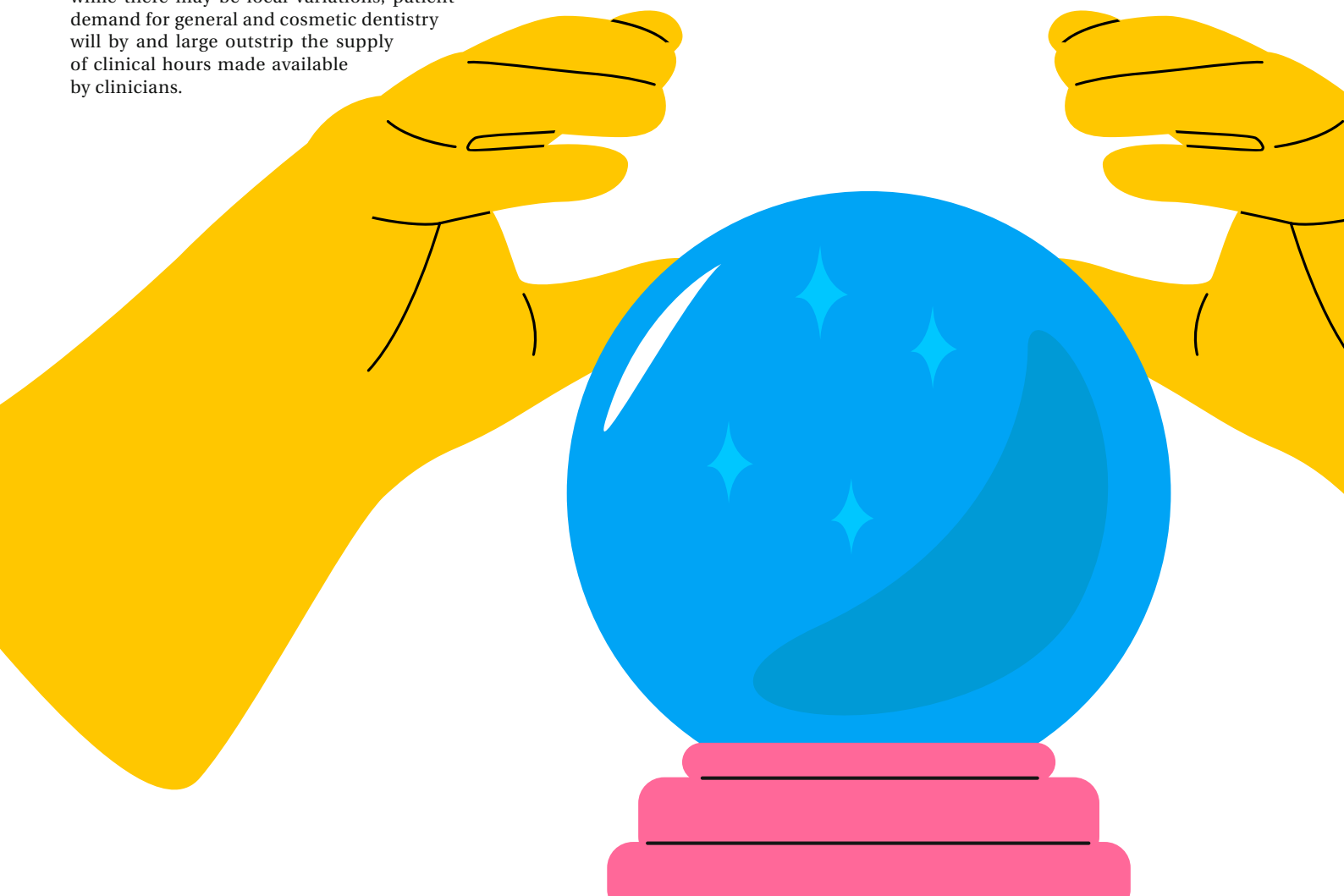
I will also draw attention to the hundreds of dentists who I've helped 'go private' whose main motivation was to spend more time per patient. In other words, they felt they needed to see fewer patients if they were to deliver the standard of patient care for which they were trained, so all went private.

Of course, 2025 may see demand soften because of the economic pressures that seem to be piling up again. Supply constraints may also be eased next year if, as many suspect, there is some success in increasing the number of overseas dentists on the register as well as more widespread use of skill mix within practices.

However any such increase in the headcount is likely to be partially offset by the continued drift to the private sector and other factors such as the trend for dentists to reduce their clinical hours as they seek to avoid burnout. In this regard, the GDC seems to have done little to help matters by perpetuating a climate of fear adding to an already stressful environment.

There is no arguing with the need to ensure individual causes of concern are investigated but the bigger picture of protecting dental patient safety cannot be served by doing so in a manner that further reduces access or leads to defensive dentistry. Maybe 2025 will see us reach a turning point in the relationship between the GDC and the profession.

However based on past history, I'm not optimistic.



Drift to private dentistry

That also means that during the coming year, the pressure of trying to balance the demands of the NHS treadmill while avoiding the attention of the regulator or Dental Law Partnership is likely to tip yet more dentists into the private sector where many feel the risk of complaints can be better mitigated.

In the immediate aftermath of the general election, the tug of war between NHS and private dentistry seems to have resulted in a temporary digging in of heels for some. This is in the hope rather than expectation that, as proclaimed by Labour at this year's British Dental Conference and Dentistry Show, the cavalry was coming.

During the coming year, the pressure of trying to balance the demands of the NHS treadmill while avoiding the attention of the regulator or Dental Law Partnership is likely to tip yet more dentists into the private sector

However such hope must be in danger of being extinguished, particularly in England, in the face of the budget, the lack of additional funding for the much-mentioned 700,000 urgent care appointments and the rumours of integrated care board (ICB) funding in general. The signs to date have not been good and there seems little grounds for optimism.

Towards a core service

Of course, we may find that the 10-year NHS 'treatment plan' in response to Lord Darzi's 'diagnosis' may lead to fundamental change when it's published in the spring.

Some argue that the additional funding needed to resurrect NHS dentistry is more than affordable and that the kind of contract reform needed is eminently achievable. Others point to the Nuffield report published at the end of 2023, arguing that now is the time to grasp the nettle and signal the move to a core or defined service, both in terms of eligibility and range of treatment.

Given the apparent willingness of the government to take the much trailed 'difficult decisions' and endure the resulting flak early in this parliamentary term, the core service option is not perhaps as farfetched as it might once have been.

However at this stage, it's hard to see that 2025 will bring anything other than the continued targeted use of flexible commissioning to edge us closer to a core service by stealth with the occasional intervention by government designed to manage public opinion rather than effect real change.

The challenge for Labour will be to ensure that the current stream of dentists leaving the NHS doesn't become an uncontrollable flash flood, and that may not be easy.

Easy move to private

The academics talk about how resistance to change can be overcome by a combination of the pain of the current situation, a positive vision of the future and an easy first step. In terms of moving to private dentistry, it's the perceived absence of an easy first step that has held back some in the profession.

Judging from the experiences of those practices going private in the last couple of years, that first step has never been easier. Of course, there is a patient demographic consideration and yes, converting practices will talk about the negative comments on social media when they announce the move.

However this is short lived and confined to a very small minority of patients. Among the majority, there is a level of understanding and even sympathy that speaks volumes for the effectiveness of the British Dental Association's (BDA) educational efforts in the media.

In another sign of an environment conducive to private dentistry, the increase in the number of successful private squat practices is a trend I anticipate continuing in 2025. The numbers of such practices are small but growing and the opportunity to

Dentistry remains a sector able to attract significant outside investment and there is a notable sense of optimism, particularly among many of the smaller groups

start with a blank sheet of paper will be appealing for many.

Groups remain popular

In fact, trends within practice ownership as a whole will be fascinating to observe in the coming year. The challenges felt by the owners of independent practices are amplified many times over for the owners of the larger dental chains.

In addition to the rise in general business expenses, scarcity is increasing the market value of clinicians. The budget will also increase the costs of employees, both at a time when debt servicing charges remain relatively high.

However dentistry remains a sector able to attract significant outside investment and there is a notable sense of optimism, particularly among many of the smaller groups. The explosive growth in practice numbers under group ownership witnessed in the years leading up to the pandemic may have slowed with the emphasis more on quality than quantity of practices. In spite of some occasional casualties, this is not a bubble that is going to burst.

Interestingly, it would seem there are signs that the investors and lenders are being less swayed by the apparent security of NHS contracts and more by the opportunity offered by private dentistry. That speaks volumes for the direction of travel of the UK dental market which, at least in the short term, will sadly lead to the continuation in 2025 of the wholly undesirable trend of widening oral health inequality.

For the entirety of my 34-year career, the attention seems to have been on the merits or otherwise of the payment systems and funding for dentistry. We've focused so much on the means that we seem to have forgotten the end. This surely has to be the ability to take advantage of the wonderful advances in clinical dentistry during that time and narrow the oral health inequality gap.

Maybe this year, a less adversarial and more collaborative approach to achieving that aim can emerge. One can but hope. **D**

For more information about Practice Plan, call 01691 684165 or visit www.practiceplan.co.uk/be-practice-plan.

New year, new financial strategy

Karen Watson-Brown explores top financial goals for the next two years and the steps you can take to achieve them

Karen Watson-Brown

Specialist financial adviser,
Wesleyan Financial Services



Another new year provides the perfect opportunity to develop good habits with a sense of optimism and camaraderie alongside others looking to reach similar goals. This positive outlook can be applied when discussing your financial planning with your financial adviser when taking steps to achieve those goals.

Recent research undertaken by Wesleyan Financial Services has revealed several short-term financial planning areas that dentists are prioritising, so here are a few talking points to get the ball rolling.

Retirement readiness

The top priority for 36% of dentists we surveyed was ensuring that they saved enough for retirement.

The key element of this financial goal is understanding two things – what kind of lifestyle you want to lead and when you would like to hang up the loupes for good.

Most respondents (57%) believed they would need £60,000 or less of annual retirement income for a comfortable retirement.

The Retirement Living Standard's guidelines for a 'comfortable' retirement are £43,100 per annum for single people and £59,000 for couples. The defining features of a 'comfortable' retirement allow more financial freedom than average with some luxuries, but may not live up to the standard of living higher earners would like to enjoy after hanging up the loupes.

For a single person, £43,100 per year would allow them £70 per week on food with some additional funds to go out for a meal or takeaway, a three-year-old small car replaced every five years, and a fortnight four-star holiday in the Mediterranean with three long weekend breaks in the UK per year, to pick out some highlights of what can be expected.

Do these features reflect your aspirations for retirement, or would you like more or less from your golden years?

Consider speaking to a financial adviser with access to a cashflow modeler tool who can demonstrate your income and outgoings, both now and in the future, to help you build a realistic and informed plan to meet those aspirations.

Savings vs investments

It's a common question asked of a financial adviser – where's best to put my money?

The answer isn't simple and will differ from dentist to dentist depending on their attitude to risk and timeframes for each objective, among other determining factors.

Interestingly there was a clear split between male and female dentists in which financial planning area they would prioritise.

Female dentists were 11% more likely to prioritise growing day-to-day savings, compared to their male counterparts. In reverse, male dentists were 12% more likely to prioritise growing investments compared to female dentists.

Interestingly, Warwick Business School conducted a comprehensive study involving 2,800 men and women in the UK who were investing through Barclays' Smart Investor platform, monitoring their performance over a span of three years.

The findings revealed that women in the study not only surpassed the FTSE 100 in their investment returns but also outperformed their male counterparts.

For objectives 10 or more years in the future (like saving for retirement or children's university fees), investing may give you the best opportunity to grow your money. Of course, investing might not be the right choice for everyone and the value of investments can go down as well as up, meaning you may get back less than you invest.

For short-term objectives in the next five years, a savings account might make the most sense for easy access and attitude to risk. However, savings are not entirely risk-free either.

In a low-interest savings account, there is a risk that your cash savings may struggle to keep pace with inflation. Although your cash balance is steadily increasing, your money may be worth less in real terms as things get more expensive to buy.

Including goal exploration during financial reviews can be particularly beneficial, as it enables you to determine the most suitable course of action for your unique financial situation.

You could potentially uncover avenues for enhanced returns on your funds according to your risk appetite.

Seek advice

One tangible step you can take to achieve financial priorities this new year is to book in a review of your financial situation with a financial adviser.

Specialists may offer an enhanced advice model that is more appropriate for those in the nuanced career of dentistry. Indicators of whether advisers are true specialists are if they understand your various income streams, whether or not they can provide guidance on the NHS pension scheme and whether they can pinpoint potential pitfalls and opportunities that are unique to those within the profession. **D**

You can book to speak to a dental specialist financial adviser at Wesleyan Financial Services by visiting wesleyan.co.uk/dentists or calling 0808 149 9416. Charges may apply.



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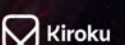
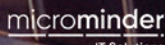
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Kickstart your 2025

Justin Leigh shares how to harness the enthusiasm that a new year brings to refresh and re-engage your team for a successful year ahead

Justin Leigh

Founder, Focus4growth



As we enter 2025, there's an opportunity for dental practice teams to set the tone for a thriving year ahead. January offers a perfect moment to engage in meaningful conversations that energise your team, spark creativity, and set clear expectations for the year.

Here's how you can use the start of the year to foster collaboration, encourage forward-thinking, and develop a plan that will drive success for your practice in 2025.

Why January is the perfect reset button

As we move into 2025, January presents a great opportunity for dental practice teams to reset, refocus, and create a foundation for an exceptional year ahead. The new year brings a natural sense of renewal. People are refreshed from the holiday break, motivated to take on new challenges, and often eager to focus on personal and professional growth. For dental practices, this is

the ideal time to reflect on what went well in the previous year, identify areas for improvement, and build excitement about the possibilities for the year ahead.

With fresh energy and renewed enthusiasm, this is the perfect time to re-engage your team and create a shared vision for the months to come. It's not just about appraising the past year but about stretching your thinking, embracing new opportunities, and stepping up as a cohesive, high-performing team.

By using January as a strategic starting point, you can create an environment where everyone feels part of something bigger – a shared mission to make 2025 your best year yet.

Here are some ideas you can use at the start of the year to inspire your practice team, spark creativity, and implement strategies that will help you thrive in 2025.

Begin with a powerful team conversation

One of the most effective ways to begin the year is to hold a focused, intentional team meeting that encourages collaboration, inspiration, and clear goal-setting. This isn't just a standard operational review; it's a chance to stir positive emotions, harness your team's collective energy, and lay the groundwork for success.

Here's how you can structure this conversation:

1. Start with inspiring questions

Set the tone for a forward-looking discussion by asking questions that spark excitement and encourage your team to reflect on their aspirations. For example:

- What are you most excited about as we enter 2025?

This question helps to tap into the optimism of the new year and invites team members to share their enthusiasm about what lies ahead

- Why is it important that this is our best year yet?

This prompts the team to think about the bigger picture and the significance of achieving



shared goals. It's about creating a sense of purpose that goes beyond the day-to-day

- What would you like to contribute to the practice this year that will make the biggest impact for you personally and professionally?

This question encourages personal accountability and helps team members connect their individual goals to the practice's success.

2. Embrace Honest and Open Dialogue

Encourage your team to share their thoughts freely in a supportive environment. By creating space for honest discussions, you'll gain valuable insights into what motivates your team and what barriers they may need help overcoming. This dialogue can spark innovative ideas and strengthen your team's commitment to the practice's vision.

Set clear expectations and stretch the team's thinking

January isn't just a time for reflection; it's a chance to set clear expectations and challenge your team to stretch their capabilities. As leaders, it's your responsibility to help your team think beyond what they believe is possible and set ambitious but achievable goals for the year ahead.

Shift from appraising the past to planning the future

While it's important to acknowledge the previous year's successes and lessons learned, the real focus should be on the future. Use the new year as a catalyst to:

Practical steps to make 2025 your best year yet

To ensure your practice thrives in 2025, consider implementing the following practical strategies:

- **Define a clear vision:** share a compelling vision for the practice that inspires and unites the team
- **Set measurable goals:** break down your vision into actionable steps and track progress throughout the year
- **Invest in training and development:** equip your team with the skills and knowledge they need to succeed through ongoing training and professional development opportunities
- **Foster open communication:** create a culture where team members feel comfortable sharing ideas, feedback, and concerns
- **Monitor and adapt:** regularly evaluate your progress and be prepared to adapt your strategies as needed.

- **Define clear objectives for 2025:** share the practice's overarching goals and ensure everyone understands how their role contributes to these objectives
- **Identify opportunities for growth:** discuss areas where the team can innovate or improve, whether it's patient care, operational efficiency, or team collaboration
- **Stretch individual and team thinking:** encourage team members to think creatively and challenge themselves to achieve more than they did the year before.

Create a rhythm of review

Success isn't achieved through one-off meetings or occasional check-ins. To truly thrive in 2025, establish a regular cadence of reviews that keeps the team aligned, motivated, and accountable.

- **Monthly check-ins:** Schedule monthly meetings to review progress, celebrate wins, and address any challenges. These check-ins ensure that the team stays focused and can adjust their approach as needed

By creating a culture of collaboration, setting clear expectations and fostering a shared sense of purpose, you can inspire your team to achieve their full potential.

- **Quarterly planning sessions:** Go deeper with quarterly sessions to evaluate the bigger picture, assess long-term progress, and make necessary course corrections.

By maintaining this rhythm, you'll create a culture of continuous improvement and ensure that your team remains engaged and on track throughout the year.

Inspire performance and morale through team collaboration

When teams feel united and valued, their performance and morale naturally improve. Use January to reinforce a sense of community and shared purpose within your practice.

1. Focus on patient experience

Encourage your team to prioritise the patient experience in everything they do. Discuss ways to enhance patient care, from improving communication to streamlining appointment scheduling. A patient-first approach not only boosts satisfaction but also strengthens the reputation of your practice.

2. Empower team members

Help your team feel empowered by giving them opportunities to contribute ideas and take ownership of key initiatives. Whether it's improving workflows, implementing new technologies, or leading a project, empowering your team fosters innovation and a sense of pride in their work.

3. Celebrate achievements

Recognition is a powerful motivator. Make it a point to celebrate individual and team achievements regularly, no matter how small. Acknowledging success reinforces positive behaviours and inspires continued excellence.

Thriving as a dental practice team

2025 is your chance to step up as a leader and guide your team to new heights. By creating a culture of collaboration, setting clear expectations, and fostering a shared sense of purpose, you can inspire your team to achieve their full potential.

Remember, success is a journey, not a destination. It requires consistent effort, regular reflection, and a commitment to excellence. But with the right mindset and strategies in place, your practice can thrive in 2025 and beyond. **D**

If you'd like support in preparing your team to make 2025 their best year yet, feel free to get in touch with Justin. With extensive experience in helping dental practices achieve their goals, Justin can provide the tools and guidance you need to create a thriving, high-performing team. You can connect with Justin or contact him directly here: <https://linktr.ee/JustinLeigh>

How to earn £1k a day

2025 is the year we work smarter, not harder, says Alan Clarke



Alan Clarke

Cosmetic dentist and owner,
Paste Dental



It's so easy to get caught up in the details and lose sight of the bigger picture. Trust me, I've been there more times than I can count. That patient who drains your energy, or the staff drama that consumes your free moments. Or perhaps the laughter that gets a bit too much, and before you know it, you've lost track of time. But in dentistry, especially as an associate, it's vital to remain strategic.

Let 2025 be the year of strategic thinking! Let me make this crystal clear: I'm all for ethics – finances should never interfere with your ethical commitment to your patients. If you're reading this, I know you're the kind of associate who always puts patient care first and makes decisions with their best interests at heart.

I'm also a practice owner of Paste Dental in Belfast, and here's something you should understand: you are your own business as an associate too. That's a crucial realisation. Just like me, you're operating within your own space, as part of your own brand. Now, let's shift gears and talk about earning money – good money. Yes, the 'dirty' word in dentistry, right?

But in 2025, let's get strategic about your income. Work smarter, not harder!

Let's reflect on some key questions

1. What are your financial goals for this year?
2. Do you want to earn £10k a month, £20k, or is £5k enough?
3. What pension contribution would you like to make?
4. How much do you need for a house deposit/business class flights?
5. What's your CPD budget and strategy? How will investing in your education help you level up your earnings?
6. What are your childcare costs/nursing home fees? We all have responsibilities outside of ourselves.

These questions are more than just numbers – they're the foundation for creating a strategy that works for you.

Focus on daily yield

To hit your financial targets, you need to keep track of your daily earnings and focus on treatments that bring the highest return.

A good friend of mine once gave me this analogy: think of your day like a jar. Fill it with rocks, pebbles, and sand.

- Rocks: high-value, high-income treatments that bring the most profit
 - » Examples: implant surgery, composite bonding, smile makeovers, comprehensive dentistry
- Pebbles: important but lower-revenue treatments
 - » Examples: restorative dentistry, periodontal care
- Sand: the smaller, lower-value treatments
 - » Examples: routine check-ups, repairing broken teeth.

The goal is to fill your day, starting with as many 'rocks' as possible, before we fill the jar with pebbles and then sand! Aim to hit 75% of your target by lunchtime – anything after that is a bonus.

Set your earnings target

If your daily target is £1,000 take home, break it down: calculate your gross earnings, subtract your practice percentage, and remember to factor in lab fees. Knowing exactly what you need to earn each day will help you stay focused.

Use your team to maximum effect

Your team is your greatest resource, so use them to help you succeed:

- Nurses: empower your nurse to assist with case presentations, patient communication, and ensuring everything runs smoothly
- Upselling: be confident in presenting treatments that improve patient outcomes and increase revenue
- Time management: efficient time

management is essential for maximising productivity while still providing excellent care.

In the end, earning £1k a day isn't just about the numbers – it's about aligning your income with your values, your purpose, and the lifestyle you want to create. Yes, dentistry is a rewarding and often lucrative career, but it's also only one part of your bigger story.

I encourage you to take a step back and ask yourself: why are you doing this? What drives you beyond the practice? Are you working towards more than just a financial goal? How do your values shape the way you approach your work, and how can they help you live a balanced, fulfilling life?

Remember, you are more than your job. Your career is just one piece of the puzzle – don't forget to nurture the other parts of your life, too. Your health, relationships, passions, and personal growth are just as important. In fact, when you find alignment between your financial goals and your deeper purpose, that's when you truly begin to thrive. So, as you move into 2025 with your strategy in place, don't just think about the numbers. Think about the life you want to lead – and how earning well can support that. Because at the end of the day, life is more than your career.

Stay strategic, stay focused, and most importantly, stay true to who you are. **D**

Key takeaways

- **Target small changes:** small, consistent improvements can lead to big results over time
- **Every patient should be financially generating:** whether it's a check-up or a full smile makeover, make sure every interaction has value, do not work for free, unfortunately the NHS has relied on this culture, but free work untimely devalues public perception of your skills
- **Charge for your time:** communication is key – your time is your most valuable asset
- **Follow what you enjoy, but be strategic:** pursue the treatments you're passionate about, but align them with profitability.

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An introduction to dental consent in the UK

Dental consent is a vital aspect of ethical and legal dental practice. In the following series of articles, **Biju Krishnan** describes how dental practitioners can uphold their professional responsibilities, enhance patient satisfaction, and protect themselves from legal challenges

Biju Krishnan
Dentist



Dental consent refers to the process of obtaining a patient's voluntary agreement to undergo a specific dental procedure after being fully informed about its nature, benefits, risks and alternatives.

Consent is a cornerstone of patient autonomy, ensuring that individuals have control over decisions affecting their health and wellbeing.

Translation: dental consent is essentially your patient saying: 'Yes, I trust you enough to poke around in my mouth with sharp instruments – please don't hurt me.'

It's a delicate dance where the dentist explains procedures in non-terrifying terms, and the patient agrees that they fully understand what 'minor swelling' means.

It's as much about permission as it is about ensuring everyone leaves the chair with their dignity – and legal safety – intact.

In the UK, the General Dental Council (GDC) outlines clear guidelines for consent under its ethical framework as described in Principle 3 of their Focus on Standards.

For those of you who have not had a chance to read this recently, here's a quick reminder:

Principle 3: Obtain valid consent

3.1 You must obtain valid consent before starting treatment, explaining all the relevant options and the possible costs.

3.2 You must make sure that all patients (or their representatives) understand the decisions they are being asked to make.

3.3 You must make sure that the patient's consent remains valid at each stage of investigation or treatment.

Dental consent safeguards both patients and dental practitioners, fostering trust and mutual understanding while ensuring compliance with the law.

Translation: if you skip getting proper dental consent, you're basically inviting the legal

When patients feel informed and respected they're less likely to view the dentist as an adversary armed with sharp objects

equivalent of root canal treatment sans the LA: a small oversight that can turn into a massive, painful ordeal.

Picture this: your patient didn't quite understand that 'minor discomfort' might include a swollen cheek the size of a watermelon. Fast forward, and you're not just facing an awkward review on Google but a court case where a lawyer will gleefully grill you about every conversation you thought you had.

Suddenly, your routine filling has snowballed into a dental drama, complete with accusations of negligence and possibly a cameo on a daytime TV court show.

The moral of the story? Always dot your Is and cross your Ts – or risk being the star of your very own legal nightmare.

Key principles of dental consent

1. **Voluntariness:** consent must be given freely without coercion or undue pressure. Patients should feel empowered to make their own decisions
2. **Capacity:** the patient must have the mental capacity to understand and evaluate the information provided. This is assessed based on the Mental Capacity Act 2005 in England and Wales, or equivalent legislation in Scotland and Northern Ireland
3. **Informed decision making:** patients must be provided with clear, relevant and accessible information about:
 - The proposed treatment
 - Potential risks and side effects
 - Possible alternatives, including no treatment
4. **Specificity:** consent is specific to the procedure in question. For instance, a patient consenting to a dental cleaning has not automatically agreed to a tooth extraction
5. **Documentation:** while verbal consent is valid for routine procedures, written consent is strongly advised for more complex or invasive treatments to ensure clarity and legal protection.

The importance of communication

In my experience, explaining dental procedures to patients can be a bit like trying to explain the offside rule in rugby to my ever-suffering wife.

You try to simplify it, but before you know it, you're knee-deep in jargon, and the patient is nodding blankly, hoping it will all make sense eventually.

Then there are the cultural barriers, language differences, and the occasional patient who insists they read something on the internet that sounds way more appealing than reality.

Effective communication is at the heart of the consent process. Dentists must use plain language, avoiding medical jargon that could confuse patients. Visual aids, models or demonstrations can be particularly helpful in explaining complex procedures.

For patients who speak little or no English, professional interpreters or translated materials should be provided.

Similarly, patients with hearing or visual impairments should be accommodated with suitable communication methods.

Legal implications of failing to obtain consent

The landmark case of *Montgomery v Lanarkshire Health Board* (2015) emphasised the importance of patient-centred consent. It established that healthcare providers must disclose any information that a reasonable patient would find significant, rather than relying on the clinician's judgement alone.

Failing to obtain valid consent can have serious legal consequences for dental practitioners. Patients may file complaints with the General Dental Council, which can lead to disciplinary action. In extreme cases, practitioners may face claims of negligence or assault in court.

In simple terms, skipping valid informed consent is like setting off on a road trip without checking the fuel gauge – it might work out fine, or you could end up stranded in a legal wasteland.

Without consent, you're one 'I didn't agree to that' away from a courtroom showdown where your meticulously crafted dental charts become evidence against you. It's not just your reputation on the line – it's your sanity, your license, and possibly your savings. Consent isn't just a formality.

Conclusion

Ultimately, dental consent isn't just about legal boxes to tick. It's about trust.

When patients feel informed and respected, they're less likely to view the dentist as an adversary armed with sharp objects. Instead, they see a professional dedicated to their health and wellbeing.

Over the next few articles, I'll be taking a deep dive into the nuances, challenges and occasional absurdities of dental consent.

Think of it as your ultimate guide to navigating the world of patient agreement without biting off more than you can chew. Understanding dental consent may save you more than just a bit of stress in the future. Plus, who doesn't want to be the life of the party armed with fun facts about *Montgomery v Lanarkshire*? **D**

Promoting racial equality in dental practices

Sarah Ide and **Alexandra Addington** discuss the importance of taking a zero-tolerance stance on racism in the workplace

Sarah Ide

Dento-legal adviser at the Dental Defence Union (DDU)



Alexandra Addington

Solicitor at Peninsula Business Services



It's important for employers to assess their position on racial equality in their workplace. Any actions should not be a token nod towards the concept; employers should have a continual eye on anti-discrimination measures to ensure they are embedded in the workplace.

When employers make decisions, they have a duty under the Equality Act 2010 to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation
- Promote equality of opportunity
- Foster good relations between people from different groups.

Many employers will acknowledge that it's the workforce that can make or break a business. The right team can elevate a business to its peak potential. A study by Businessolver found that 96% of employees believe showing empathy is an important way to advance employee retention. If you want to elevate your practice, build a genuinely inclusive environment.

Build a framework

There are some specific policies that can support your practice and help you build a framework of inclusivity.

An equality and diversity policy will set out your commitments for a happy and diverse workforce where individuality is celebrated and protected. It should include a commitment to equal opportunities for all members of staff, as well as outlining the steps that you will take to tackle any form of discrimination that may arise.

Reporting procedures and telling staff where they should direct complaints to is an essential starting point.

A bullying and harassment policy should set your expectations for employee behaviours and outline the responsibility of all workers to take an active part in identifying and raising issues as they arise, and the consequences if allegations of bullying and harassment are well founded.

A recruitment and selection policy can demonstrate that you are committed to eradicating unconscious bias and outline a framework for a more inclusive process.

Policies must be brought to life. Practices should be able to show that employees are aware of the policies and have received training on the practice's zero tolerance stance.

Employer liability

Employers are liable in law for an act of discrimination carried out by any of their employees in the course of their employment. Employers can only defend themselves against liability for that discrimination if they can show they took all reasonable steps to prevent their staff from behaving in a discriminatory way.

If a complaint of unlawful discrimination is upheld, the tribunal will usually order the employer to pay compensation. A compensation award will in most cases include damages for any loss of earnings (past and, where appropriate, future losses); there is no maximum limit on this element. A tribunal will also award an amount for injury to the employee's feelings. The level will depend on the circumstances, ranging from £1,200 for a less serious one off act up to almost £60,000 for more serious cases which may have involved a series of acts. In the most serious cases, the injury to feelings award can exceed that maximum.

In *Mr Fajojuro v Boots*, the claimant (Mr Fajojuro), who is Nigerian, worked as the 'responsible pharmacist', which meant that he could delegate duties as appropriate. When he

asked a colleague to carry out a work-related task, the colleague snapped at him. The claimant later had a 'private word' with the colleague and asked her to leave the store for the day. He was accused of having a very loud and aggressive tone in this conversation, as well as 'towering over' and shouting at another manager. He was reported to the police for aggression despite any third-party witnesses which the Employment Tribunal (ET), found to be a very serious matter. The way he was treated was unwarranted, distressing and humiliating. The ET found that he was constructively dismissed and harassed because of his race.

In *Pile-Grey v Ministry of Defence*, the claimant (Mr Pile-Grey), said that he was continually called offensive names related to his race throughout his career. He made a claim of race discrimination after an incident when a lance corporal refused to believe he was a soldier. He had left his ID card inside the guardroom when he left to make a phone call. He was wearing civilian clothes, had sunglasses on and had his hair, which was styled into dreadlocks, on show. When he attempted to get back into the guardroom, the lance corporal was 'disbelieving that he could be a soldier – he actually stuck his head back into the guard room and said "this gentleman thinks he's left his ID inside"'. The ET found that the Mr Pile-Grey had been treated less favourably because of his race.

From every angle, it makes sense for a practice to keep its zero-tolerance stance on racism at the forefront of its mind. **D**

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Behaviour change for practice transformation

Mark Topley explores the power of simple adjustments to boost sustainability and save money

Mark Topley

Dental CSR and ESG consultant



Sustainability isn't just a buzzword – it's a strategy that can transform your dental practice. Imagine saving thousands of pounds a year, building a happier, more engaged team, and boosting your reputation, all without requiring major investment. With a focus on simple behaviour changes, not costly upgrades, you can make a real impact in your practice.

But here's the key: behaviour change doesn't just happen. It requires a clear, purposeful approach that inspires your team to act. My aim and approach has always been to make sustainability simple by focusing on why, what and how. This must be backed by engagement and feedback – not dull policies or 'saving money for the boss'.

Behaviour change

Unlike expensive equipment upgrades or retrofitting, the changes outlined here involve no additional investment, just a shift in habits. By empowering your team to adopt sustainable behaviours, you can unlock significant savings while fostering a culture of responsibility and pride. Here's how it works, with cost savings based on a four-surgery practice.

Energy savings without the expense

Behavioural tweaks in energy use can dramatically reduce costs.

- Turn off computers when not in use – leaving a single computer on all year costs £75. For a practice with five computers, turning them off after hours saves £375 annually
 - Use natural ventilation – opting for fresh air instead of air conditioning can cut cooling costs by 10%. With a typical £3,000 electricity bill, that's a saving of £150 annually
 - Adjust the thermostat – dropping your heating by just 3°C, from 22°C to 19°C, reduces heating costs by 10% per degree. If heating accounts for 30% of a £3,000 energy bill, you save £1,000 a year.
- Total energy savings from behaviour change: £1,525 annually per practice, or £381 per surgery.

Smarter waste management

Many practices overuse clinical waste bags, with up to 50% of their contents classified incorrectly. Behavioural changes around waste sorting can yield substantial savings.

- Reclassify to general waste – reducing clinical waste and reclassifying appropriately can save £850 a year
 - Increase recycling – diverting 50% of reduced waste into recycling saves an additional £1,000 annually.
- Total annual waste savings: £1,850 per practice, or £463 per surgery.

Prompting behaviour change

At its core, successful behaviour change comes from a clear, engaging approach. Simply writing a policy or framing changes as 'cost-

saving for the boss' doesn't work. Instead, Go Practice Green uses a proven framework to drive meaningful, lasting change:

- Why – start with purpose. Explain why sustainability matters, not just for savings but for the environment, patients, and future generations
- What – outline specific, actionable changes. For example, switching off computers, managing waste differently, or adjusting thermostats
- How – provide clear guidance and resources. Use team training, visual reminders, and practical tools to make changes easy to implement
- Feedback and engagement – regularly check progress and celebrate wins. Involve the team, create challenges, and recognise efforts to keep momentum alive.

By focusing on purpose and engagement, behaviour change becomes something the whole team can take pride in, not just another directive from management.

Benefits beyond savings

The financial savings from energy and waste changes are substantial: £3,375 annually for a four-surgery practice (£843 per surgery). But sustainability offers so much more.

- Team engagement – sustainability connects your team to a shared purpose, improving morale and motivation. When staff feel part of something meaningful, engagement and retention improve
- Reputation – patients increasingly care about sustainability. A greener practice attracts value-driven patients who see your commitment to making a difference
- CQC compliance – sustainability supports the Care Quality Commission's focus on leadership, culture, and responsibility, helping you stand out as a well-led practice.

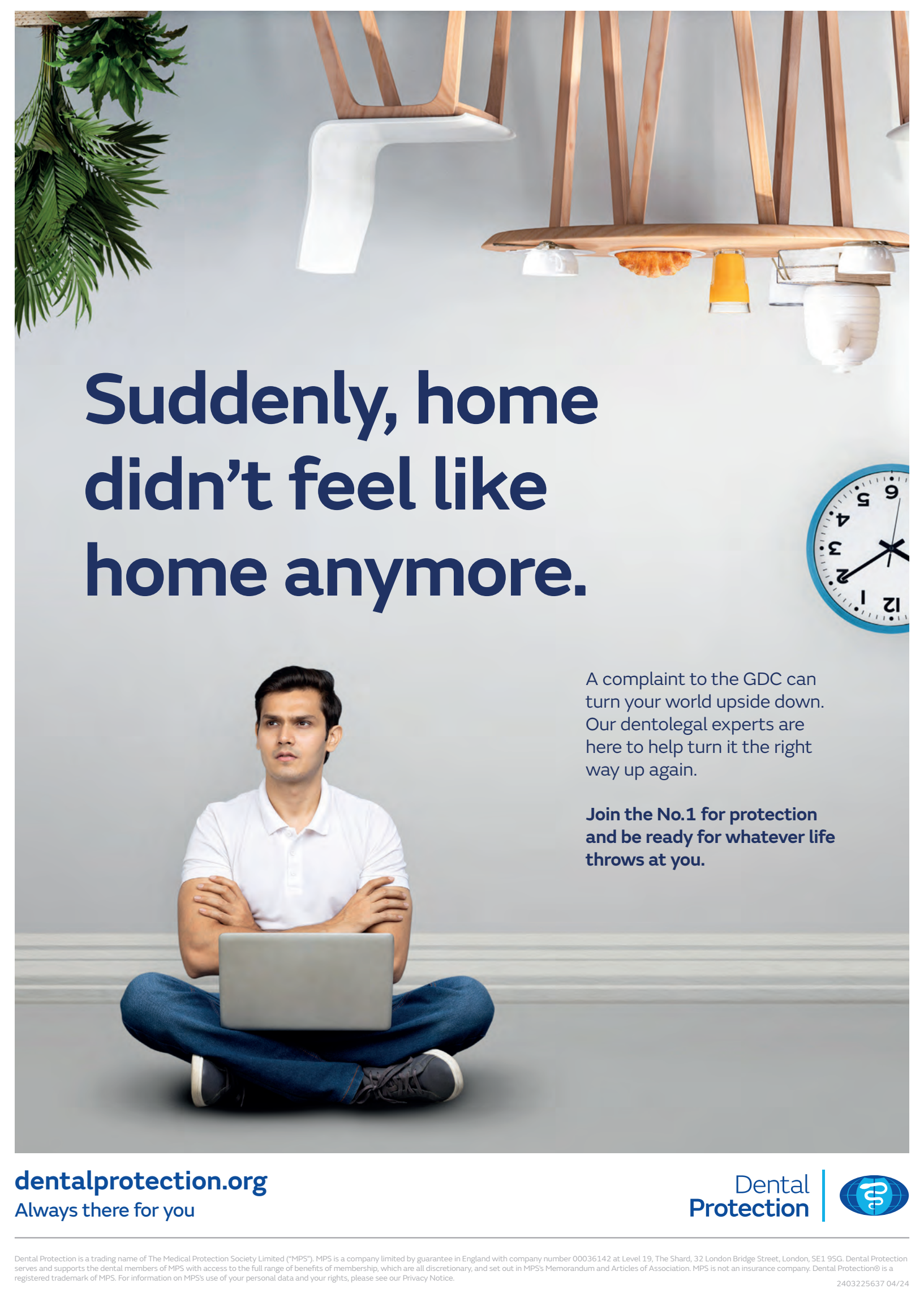
Start saving and leading

Making your practice more sustainable doesn't have to mean big investments or complex processes. Behaviour changes, when done right, can have an immediate impact on your costs, team and reputation.

Small changes, driven by purpose, lead to big results. Let's make it happen. **D**

For more information visit gopracticegreen.com to take a free sustainability audit. This simple tool provides tailored, actionable tips to help your practice reduce costs, engage your team and make a positive difference.





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Are apprenticeships the best way into dentistry?

Kathryn Taylor and **Alice Weir** explain the benefits of apprenticeships for dental practices and the people they employ

Kathryn Taylor

Apprentice dental nurse at Dr Rez Dental



Alice Weir

Clinical manager at Dr Rez Dental



Apprentice dental nurse Kathryn Taylor won Apprentice of the Year at the 2024 Dentistry Awards. She joined Dr Rez Dental in 2023 following a spell in the teaching profession and feels it was certainly the right choice for her.

We heard from Kathryn and Dr Rez Dental clinical manager Alice Weir on the benefits of apprenticeships for both apprentices themselves and their practices. How can employers and employees make the most of the experience and where can it lead in the future?

What are the benefits of apprenticeships?

Kathryn Taylor (KT): I chose the apprenticeship pathway for my training as I felt it would provide me with a really structured programme of high-quality training plus the opportunity to apply this learning in a busy workplace environment. This has been the case, with Harriet Ellis providing fantastic training plan, and the opportunity to work full time at Dr Rez Dental, an outstanding award-winning private practice based in Liverpool city centre.

Apprenticeships can provide an ideal package for someone wanting to become a qualified dental nurse – an excellent academic learning programme, the opportunity to apply these learnings practically at a dental practice, and to adjust to a regular working pattern. Plus the opportunity to earn a regular wage.

Alice Weir (AW): As a progressive dental practice, we are committed as an employer to providing employment opportunities to young people or people seeking a new opportunity to help them forge a new career pathway. To train an apprentice in the 'Dr Rez way' (processes, protocols, culture and values of the practice) from an early point can be extremely rewarding. We hope to foster a long-term relationship with the apprentice – from the onset of training through to achieving qualified status, and beyond. Our strategy is that we train and plan to retain for the long term.



Apprenticeships provide an outstanding opportunity for people to forge a career in the employment marketplace, a realistic pathway alternative to pursuing the academic pathway – college, university, etc.

I would really encourage practices considering providing an apprenticeship to go for it! Contact your nearest training provider to help you recruit the apprentice that is right for your business.

How can people and practices make the most of an apprenticeship?

KT: The best way for practices to get the most from their apprentices is to allocate sufficient management, time and resources to support them. This will help their continued progression. At Dr Rez Dental, this support has been fantastic throughout my own journey. Winning Apprentice of the Year at the 2024 Dentistry Awards is testament to this.

For prospective apprentices, I would advise making sure you do plenty of research into the profession and the day-to-day tasks of a dental nurse. It's also really important to choose a practice who will be supportive during your apprenticeship training period.

AW: A new apprentice must have a great

'can-do' attitude when they start. An employer can then build upon this with the necessary training and mentoring support.

Applicants can effectively prepare for life as an apprentice via a mix of things: fully researching the job role (to ensure its the right one for them) and also securing as much work/workplace experience as possible. Volunteering for a local business or a part-time Saturday job can be really beneficial to preparing for the routine of workplace hours and a working environment.

What are the career progression opportunities?

KT: After my apprenticeship, I hope to become an outstanding qualified dental nurse. I will also look to progress further within the sector.

AW: Dr Rez Dental prides itself on instilling a 'lifelong learning' culture for all of its employees, no matter what skills and experience they already have when they first arrive at the practice. Apprentices are very much part of this strategy.

The training opportunities they receive once they have qualified ensure that they will remain motivated and focused in their developing role at the practice, and very much in-line with the progression of Dr Rez Dental as a business. **D**

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To be or not to be self-employed?

Sarah Buxton explains the processes that HMRC uses to determine employment status

Sarah Buxton
Director, Buxton Coates



Practice owners are currently being bombarded with queries from team members about whether they are or should remain self-employed. Once again, the dental industry is considering this point and there is a lot of confusion about what is happening.

Practice owners need to look at a worker that is not paid through the payroll and their position from a tax perspective, the same as any other business. It is not the contract that is important but the actual reality of the relationship. HMRC will be looking at individual cases on a case-by-case basis.

Case by case

HMRC has tried to get people to determine whether someone is employed or self-employed for tax purposes by completing the CEST (Check Employment Status for Tax) test. This can be completed by both the team member and the practice owner.

What you input onto the online test appears to be of the utmost importance. This tool isn't the determining factor and care should be taken when answering the questions on this tool.

There are two elements to employment status. Firstly the tax perspective, defined by being employed or self-employed. Secondly, the employment legislation perspective, defined by three types of employment status – employee, worker and self-employed.

Both the tax and the employment tribunal look at similar indicators of where people fit and it's usually a judge who will make a decision based on the merits of each and every individual case. This is why HMRC have changed their guidance – every case will be looked at based on its merits rather than having a blanket approach.

Contract vs reality

In both employment and tax cases, it's not the role of the individual that's important when it comes to defining status. It's the relationship between the practice owner and the team member that will come under scrutiny.

There's no point in having a contract with several self-employed indicators if you don't follow these terms in practice because, in both cases, they will look beyond the contract and at what's happening in practice to determine the employment status.

For example, a key indicator of self-employed status is the ability to substitute. An employee cannot send someone else in to do their role, a self-employed person should be able to do so. This is why the locum clause is of vital importance. **D**

If you are currently having conversations with your team members about their status and are concerned about whether you are doing the right thing please call 0330 088 2275 or email sarah.buxton@buxtoncoates.com.



Don't go it alone

Sam Jethwa explains the power of loneliness and how to avoid it



British Academy of
Cosmetic Dentistry

SAM JETHWA
PRESIDENT BRITISH ACADEMY OF
COSMETIC DENTISTRY (BACD)



Dentistry can be a lonely profession. As dentists, we are often confined to the four walls of our surgeries. Although many of us are lucky enough to have a talented dental nurse for company, while also interacting with some fantastic patients, we remain solely responsible for planning and delivering care. For fellow principals, this is confounded by the pressures of running a business and all the tasks that come with that.

Not alone in loneliness

Loneliness at work has been defined as a 'perceived relational deficiency in the workplace' (Wright and Silard, 2021). It's about more than just not speaking to colleagues, rather, it describes a lack of connection.

Sadly, feelings of loneliness are not unusual in professions across the UK. Approximately one in 10 workers have reported

to often experience loneliness, while up to 45% of all those surveyed felt this way some of the time.

Individuals with disabilities or from minority ethnic groups are more likely to feel lonely at work, as are senior managers and those who already struggle with their mental or physical health (British Red Cross, 2023).

Why it matters

So, why is loneliness such a big deal, especially at work? Because it is closely associated with individuals' mental and physical health, increasing the risk of mortality by 26% (Holt-Lunstad et al, 2015).

These physical manifestations of loneliness can therefore have a significant impact on our lives.

There is also evidence to suggest that feeling this way can reduce job satisfaction and lower engagement at work (Jeffrey et al, 2017). That's why it's so important that we all take steps to tackle the issue.

It is also bad for business. Loneliness among the team is estimated to cost UK employers £2.5 billion a year and increase the risk of employees leaving a place of work (Jeffrey et al, 2017). In the dental practice, where team wellbeing and staff retention are crucial in the current climate, avoiding loneliness is essential.

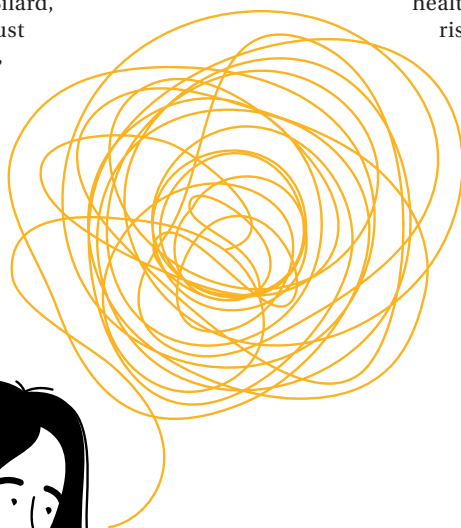
Build a community

Preventing feelings of isolation and loneliness is just one of the reasons I feel so strongly about being part of a community within dentistry.

It is crucial to have people you can turn to when life in the practice is getting tough. You might need advice on a complex clinical case, inspiration to get you out of a career rut or just a friendly face to talk to who understands the challenges you face.

This support is invaluable for every dental professional at any stage of their career. It requires an abundance mentality and an open-minded approach to sharing experiences and clinical expertise.

This is why I'm so proud to be a part of the British Academy of Cosmetic Dentistry (BACD). It is a community of like-minded dentists and dental professionals, who genuinely do what they can to raise colleagues up, not push them down. We help each other to thrive so that we can all enjoy our amazing profession while delivering exceptional patient care. Don't feel isolated and lonely at work in 2025. Build a community around yourself by joining a family-feel organisation such as the BACD, so you can fall back in love with dentistry. **D**



For more information about the BACD, please visit www.bacd.com.

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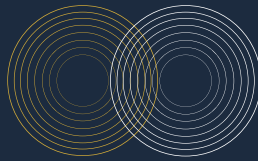
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A week in academia

Joanne Bowles shares a week in her life as a dental academic

Joanne Bowles

Dental therapist, senior lecturer, and secretary and chair elect, BADT



As a full-time dental therapist, academic and co-director for undergraduate programmes at the University of Liverpool School of Dentistry, a week can be very full and extremely varied – much like a clinical week in dentistry.

An academic role can be challenging but also extremely rewarding – one of the highlights is seeing the growth and development of the students from day one to graduation day. Whether that be after three years for the BSc in dental therapy or five years for the BDS, graduation day is a celebration for everyone involved in the students' journey to becoming a dental professional.

Something different

My career in academia started around 15 years ago, after a period of reflection I wanted to step out of my comfort zone and try something different. While working in general dental practice utilising my full scope of practice, I started as a part-time clinical supervisor initially before taking on a role as a full-time dental therapy tutor.

The years have rolled on and there has been so much change within dentistry but also within academia for me.

Now in my role, I use my clinical qualifications, my teaching qualifications and my experience to be part of the school senior leadership team overseeing the management of the undergraduate programmes alongside my colleague – we make a fantastic double act!

I am also teaching both clinically and academically as well as supporting individual academic advisees and mentoring colleagues.

Variety

If I were to look at my diary for my working week, no week is the same and I do like the variation it brings. It is important to enjoy what you do and most of the time I do. It can be stressful and challenging, but going through the difficult times allows reflection, individual growth and development.

There are some constants in my week. I have my own weekly clinical session, where I get time to go back to one of the things I miss about general practice – the patients! This enables me to keep up my clinical skills and take a break from the busy academic week.

Within the week there is usually some element of teaching, this might be delivering large group lectures, or smaller group sessions, simulation and phantom head teaching or clinical



supervision – supporting and developing the undergraduates across all years of study.

As a programme director with oversight of the undergraduate programmes many hours are spent preparing for and chairing meetings, developing standard operating procedures, and refining and reporting on quality assurance processes, including work for the General Dental Council.

Collaboration

Within dentistry teamworking is essential and it is no different in academia, I am very grateful for the support of colleagues I have around me. There is a huge amount of problem solving needed and sometimes it can feel like firefighting. But other times I can dedicate my time to focusing on specific set tasks that require quiet space and concentration. I do this work from home on occasion – it really does help the efficiency of my working day.

Within my academic role I am heavily involved with change, curriculum design, curriculum development and currently leading a new international partnership – which then brings the opportunity to travel.

On a teaching and scholarship contract within the school there always needs to be time for the scholarship activities such as educational research, dissemination of knowledge and collaboration with others.

Currently I spend late evenings on international teams calls working with colleagues around the world – sharing experiences, supporting one another and working on written pieces, again with the opportunity to travel and present at conferences.



External responsibilities

As a senior academic I also have external responsibilities, in the past I have held external examiner positions, chaired the British Society of Paediatric Dentistry's (BSPD) Merseyside branch, and I am now secretary and chair elect for the British Association of Dental Therapists (BADT).

I work as part of the BADT executive committee and council, representing members and driving the dental therapy profession forward. Therefore, some evenings in the week can be spent dedicating time to BADT.

As I will often say, it is so important to ensure you are happy in all that you do and with a busy academic week it is essential to ensure I step away from dentistry! I can often be found on a hockey pitch – either playing, supporting family members or developing the youngsters – as well as dog walking, enjoying family time and well needed holidays!

Factoring it all in it can be a very busy week in academia. I would encourage anyone interested to find out more and try something different, but equally as rewarding as, clinical dentistry! **D**





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THE ORALCLES

— Dental hygienists and dental therapists

Exemptions in focus

Rhiannon Jones explores how exemptions will transform patient care, enhance professional autonomy and support the delivery of preventive oral health

Rhiannon Jones

President, British Society of Dental Hygiene and Therapy (BSDHT)



The introduction of exemptions for dental hygienists and dental therapists marks a pivotal moment for the profession. Until now, providing care to the full scope of practice has often been challenging. Dental hygienists and dental therapists have required a Patient Specific Directive (PSD) or a Patient Group Directive (PGD) to administer certain prescription-only medicines (POMs), such as local anaesthetics.

The new legislation removes these barriers for those who complete the appropriate training, enabling independent administration of listed medicines and streamlining care delivery. This change therefore empowers dental hygienists and dental therapists, recognising their expertise and reinforcing their vital role in oral health promotion and disease prevention.

Enhancing care and autonomy

Exemptions allow dental hygienists and dental therapists to address patient needs in real time, reducing delays and improving the overall patient experience.

For example, treatments like fluoride varnishes or local anaesthetics can now be administered in a single appointment. This capability is especially impactful in underserved communities, where timely access to care can significantly affect outcomes.

The ability to work independently not only enhances the efficiency of care but also highlights the expertise of dental hygienists and dental therapists. As patients experience faster and more comprehensive treatment, these professionals will gain greater recognition as integral members of the primary healthcare team.

For practices, exemptions present an opportunity to redefine workflows, reducing reliance on dentists for routine prescribing and enabling smoother, more efficient care

pathways. This shift not only enhances patient satisfaction but also supports the profession's overarching goals of promoting health and preventing disease.

Practical considerations

Practitioners who regularly use the listed medicines and wish to utilise exemptions are encouraged to undertake training. However, for those who opt out, a PSD will still be required to administer these medicines.

This flexibility ensures that practitioners can make decisions based on their confidence, experience and practice setting. Open discussions within practices can help ensure that team members feel supported in their decisions, whether or not they choose to complete the training.

For those undertaking the training, it does not teach administration techniques. These should already be in place from undergraduate education or postgraduate skills courses. Clinicians who feel their practical skills need refreshing are advised to address this first. Administering medicines carries inherent risks, and patients deserve care from practitioners with the appropriate skills and confidence.

Additionally, clinicians intending to utilise exemptions must notify their indemnity providers to ensure they are appropriately covered. Taking this step ensures practitioners are not only adhering to professional requirements but are also safeguarding themselves and their patients.

Open communication within practices can help identify any overlooked details, such as indemnity coverage, while fostering mutual understanding and supporting decision-making among the team.

Addressing challenges

While the potential benefits of exemptions are clear, challenges remain. Issues around product labelling and sale regulations persist, although professional organisations are working to resolve them to ensure compliance with legal standards

and avoid disruptions in care delivery.

Additionally, exemptions cannot be delegated. For example, a practitioner with exemptions cannot ask a dental nurse to apply fluoride varnish on their behalf, even under their supervision. This limitation reinforces the importance of each practitioner's individual scope and responsibilities.

For those teaching dental hygienists and dental therapists or working in secondary care settings, these limitations may require careful planning to ensure compliance without compromising care quality. Clear guidance and collaboration are essential for overcoming these practical hurdles.

The wider profession must also support practitioners by providing clear explanations of how exemptions work in practice. Open discussions at the practice level can help ensure a shared understanding of roles and responsibilities, promoting respect and alignment across teams. This mutual understanding is crucial for delivering high-quality patient care.

Moving forward

The introduction of exemptions represents a transformative opportunity for dental hygienists and dental therapists. By enabling independent practice, the profession takes a significant step toward greater efficiency, improved patient outcomes and enhanced professional autonomy.

While challenges remain, the benefits are undeniable. Exemptions allow the profession to address care gaps, improve access to treatment, and provide safer, more efficient care pathways. With the right support, dental hygienists and dental therapists can confidently embrace these changes and continue to deliver exceptional care. **D**

For more information on exemptions, including guidance and training opportunities, visit the British Society of Dental Hygiene and Therapy (BSDHT) website at www.bsodht.org.uk.

Occlusion symposium tailor-made for early career dentists

A line-up of expert speakers provide a deeper understanding of the principles of occlusion

A new one-day symposium hosted by the Tom Bereznicki Charitable Educational Foundation and the College of General Dentistry, features a line-up of expert speakers and has been carefully designed to provide early career dentists with a deeper understanding of the principles of occlusion, which are crucial to the provision of successful, long-term restorations.

The theories of occlusion underpin successful restorative practice, but newly qualified dentists can often lack a firm understanding of this area of dentistry. The symposium's programme has been developed to help bridge this knowledge gap, with a series of lectures delivered by speakers who are all experts in the field.

Dr Tom Bereznicki explains: 'As the scope of clinical dentistry expands, for example digital dentistry, there is ever greater pressure to reduce other topics to accommodate the new ones – occlusion has unfortunately become a victim within the undergraduate curriculum. And yet occlusal harmony of the existing teeth and any restorations placed is of paramount importance to longevity and success.'

Delegates will leave the symposium with an enhanced awareness of the basic principles of occlusion and the impacts on the longevity and stability of the dental care they provide to their patients.

'To cover the length and breadth of the subject of occlusion would in all probability take a week. In the time available we will try to deal with the basic fundamental principles involved, particularly the intraoral occlusal examination which is crucial in treatment planning. In addition, examples of clinical success as well as occlusally related failures will be covered,' Dr Bereznicki clarified.

Anyone who is interested in extending their knowledge further, will be able to visit a selection of education stands to learn more about a range of postgraduate courses on aspects of occlusion.

Expert speakers

Speakers at the Symposium are all experts in the field of occlusion, and its importance in general dental practice, and are committed to delivering high-quality education. Dr Tom Bereznicki is set to launch the day's itinerary with an overview of the five basic principles of occlusion. His presentation will be followed by lectures from Professor Paul Tipton, Dr Ken Harris, Dr Tif Qureshi, Dr Shiraz Khan and Dr Koray Feran.



Interested in attending the symposium?

The Introduction to Occlusion Symposium, takes place on Saturday 5 April 2025 in London. It is open to dentists who qualified in the UK or overseas between 2019 and 2023 and have been practising in the UK for at least the past two years. To ensure it is accessible to dentists in the early stages of their career, the symposium fee has been set at £75 for each delegate. Eligible dentists can book their place by visiting <https://bit.ly/OcclusionSymposium>.

Opportunities for early career dental professionals

The Tom Bereznicki Charitable Educational Foundation and the College of General Dentistry, are working together to provide a variety of educational opportunities for early career dental professionals. Other joint initiatives underway include two clinical skills awards and a one-day symposium on perio-occlusion.

The CGDent and GC Award for Foundation Trainees offers each successful candidate a fully



funded place on a two-day composite layering course and the Tom Bereznicki Award for Advanced Aesthetic Dentistry, which is open to dentists who qualified between 2019 and 2023, awards each of the 36 entrants who submit the highest scoring cases with a fully-funded place on a two-day digital dentistry course. The one-day symposium on perio-occlusion takes place in September 2025 and will examine aesthetic aspects of perio and the functional occlusal aspects post orthodontic treatment. **D**

Introduction to Occlusion Symposium – for further information and to book your place please visit <https://bit.ly/OcclusionSymposium>



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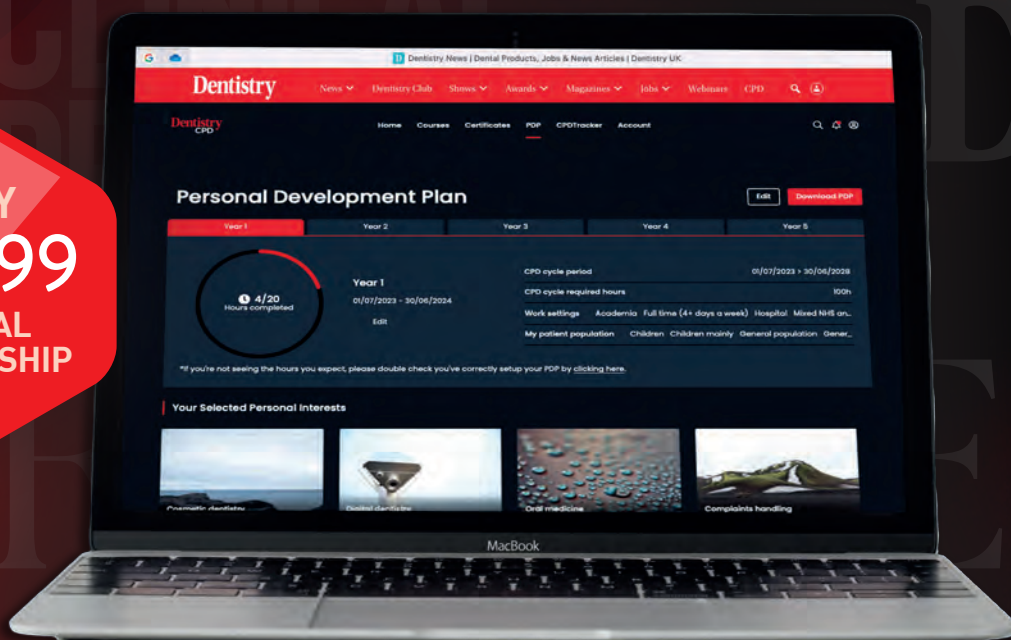
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'A lightbulb moment'

How donating waste dental metal is helping one practice meet environmental and community needs

When dental nurse Leanne Birkett spotted a Gold for Kids stand at a British Dental Association event in London, she knew she had to get her practice on board.

The award-winning charity collects unwanted crowns, bridges and other restorations to help transform the lives of underprivileged children. Since it began in 2018, it has raised over £55k, helping children and their families with absolute essentials like food, clothing, shelter and providing dinners during school holidays. But it doesn't stop there. Their help also extends to counselling, education and training opportunities. Leanne, from Ghyllmount Dental in Penrith, Cumbria, said: 'Finding out about Gold for Kids that day was like a lightbulb moment. I knew I had to go back to Cumbria to see what waste we had available. There was no doubt in my mind. We were absolutely helping.'

Full support

Ghyllmount principal John Lewis gave her his full support. He said: 'As soon as Leanne told me about Gold for Kids, I thought it was an inspirational idea. Previously we've given our scrap metal to a merchant and I was never overly convinced we were getting a fair price. Doing it this way, donating our patients' unwanted crowns and restorations, means we cut out the middle man entirely and all the money goes directly to those in need.'

'We have always been a community-based practice. It's our whole ethos. Becoming a partner and ambassador for Gold for Kids was a no-brainer for us.'

Ghyllmount Dental has now incorporated Gold for Kids into its daily work. They publicise it where they can on social media and within their practice. They tell their patients about the charity and the wonderful work it does. With GFK collection pots in each surgery, it's part of the consent process when a patient is having a crown extracted. John continued: 'The crown belongs to the patient so it's about giving them the choice of what happens to it. Do they want to keep it themselves, do they want us to dispose of it and, if so, would they like to donate it to Gold for Kids. In every case, they say yes because what good is it to them? Then they see us put their crown into the collection pot. They are amazed that such a small amount, when combined with others, can generate so much for children who are in desperate need.'

A movement for change

More than 4.5 million children across the UK, that's nearly 30%, are living in poverty, a figure that Gold for Kids is on a mission to eradicate. Set up by husband and wife team David Holmes and Leticia Casanova, of London Periodontics, Implants and Dentistry (LPID), they are urging more dental practices to join them.

Leticia Casanova, co-founder of the charity said: 'We are so grateful to Ghyllmount Dental



for their incredible support not only by sending us their waste dental metal products but also their help in spreading the word about what we are trying to do. We are proud of the amount we have raised over the last few years but we know we can raise so much more.'

Meanwhile, David Holmes described their charity as a movement for change in the dental industry. 'Gold for Kids has enormous potential to wipe out child poverty simply by recycling waste products and returning the benefits to some of the most vulnerable in our society. So many dentists and dental professionals aren't aware of the huge combined value removed restorations represent. We would love them to come on board as ambassadors and help drive our mission.'

Multiple benefits

For John Lewis at Ghyllmount, supporting Gold for Kids has incredible benefits across the board. Not only does it enhance their brand image and reputation in the community, it's a boost to the team because they are part of a wider movement for change.

'From a leadership point of view, being involved with Gold for Kids definitely helps promote a positive workplace culture and I encourage any member of my team to come forward with ideas that we can support. Leanne has been the prime driver behind this cause and deserves all the credit. She's really taken the idea and run with it.'

'It also fits in well with our broader environmental, social and governance (ESG) strategy and aligns with our practice's sustainability and social responsibility goals. For instance, we use biodegradable products so that we can dispose of our clinical waste in a way that is good for the environment. Gold for Kids is obviously helping us recycle precious metal from dentistry waste while helping poverty-stricken children and their families. It's a win-win whichever way you look at it and I encourage all practices to follow our lead. I mean, why would you not do it? There's no effort involved, you're doing something for the community and you're getting rid of scrap waste for a good cause. There's nothing negative about it.'

Leanne, who has been a Ghyllmount dental nurse for 17 years – 'I love it so much here!' – says it's also great for recruitment: 'When we have recruited in the past, they always love the charity work we do and it really draws them to the practice – it's a massive part of what we are and it definitely attracts people. It's also so easy to incorporate into our everyday conversations with patients.'

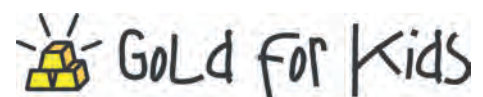
'We have little cards we pass out telling patients that Gold for Kids is the charity we'd like to send their waste dental metal to. They've never heard of it before and are thrilled their crown is going to such an amazing cause. They're helping without having to do anything at all. They thought we just threw them away or disposed of them somehow. It's a massive thing we're trying to do here. We have only done one melt so far and we have already raised nearly £700 just from the small amount our practice sent. I was absolutely gobsmacked because I didn't think we'd even sent in that many pieces. We were thrilled and proud as a practice to support the Gold for Kids charity and the children.'

'It just goes to show what you can do if you combine your efforts. It's so easy and simple to get involved, there's no hard work, you just literally collect the metal. And while we're doing a really good thing here, it also ties into our corporate social responsibility (CSR) strategy. We're about to send our next batch of waste metal off to Gold for Kids and we can't wait to see how much we'll be donating to charity this time!'

Spreading the word

As an ambassador, Leanne has taken Gold for Kids pots and literature to study groups she attends locally and shares them with other dentists, hygienists and nurses. She also spread the word at an event she ran earlier this year in Birmingham for dental nurses called Rising Stars, all designed to empower them in their work.

'It takes absolutely nothing to support Gold for Kids – and if you've got children yourself, it hits you at another level. You'd hate to think that there are children out there who can't do normal everyday things we take for granted like have a warm meal, wear a warm jumper, be happy, with a roof over their heads.' **D**



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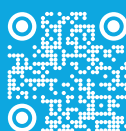
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Posture and performance

Justin Hind shares his advice for choosing a dental stool that works for you

Justin Hind

Territory manager covering London and southeast England, A-dec



When setting up a dental practice, selecting a dental stool may seem like a minor detail compared to other priorities. However, once your practice is operational, consider this: where will you spend most of your time? Most likely, it will be attending to patients, either standing or seated on your dental stool.

If you typically work seated, it's important to realise that with a 37-hour workweek over 48 weeks a year, you'll spend approximately 1,800 hours annually on your stool. If it doesn't provide adequate support or causes discomfort, upgrading to an ergonomic dental stool could make a significant difference to your comfort and long-term health.

Features to look for

Dental professionals often face muscle strain, fatigue, or discomfort due to hours spent leaning or bending over patients to gain optimal visibility. Many of these issues, including ischemia and premature disc degeneration, are linked to traditional sitting postures, including thighs parallel to the floor which is linked to legacy of outdated flat-seat designs.

Here's what to consider when selecting a dentist or assistant stool.

Adjustability

Look for a stool with four key points of adjustability:

- **Seat tilt:** promotes even weight distribution, supports lower back curvature, and reduces disc pressure, enabling closer positioning to patients and decreasing lower back pain
- **Seat height:** ensures your feet rest flat on the floor and your knees form a comfortable 90-degree angle
- **Backrest tilt:** allows the seat and backrest to move in multiple directions, relieving lower back pressure and improving comfort
- **Backrest height:** aligns the spine correctly and supports the natural lumbar curve to prevent poor posture and discomfort.

Ergonomics

Maintaining an ergonomic position is crucial for dentists and dental hygienists to preserve their health and productivity. Proper posture minimises strain on the back, neck and shoulders during long procedures. Dentists should adjust their stools to ensure their feet are flat on the floor, knees are at a 90-degree angle, and the lumbar region is properly supported.

By ensuring more body weight is transferred to the feet, the pressure on the seating surface is reduced, alleviating spinal strain and allowing for a more forward-leaning position. This position also improves access and visibility to the patient's oral cavity which prevents awkward and unnatural posture. An ergonomic stool promotes an open hip angle, reducing lower back pressure and enhancing circulation. By sitting close to the patient with minimal reaching or twisting, dentists can maintain precision while reducing fatigue and the risk of musculoskeletal disorders over time.

Ergonomically designed stools, with features like contoured backrests, adjustable torso supports for assistants, and 'rolled edge' seat cushions, enhance circulation and support healthy posture.

Continuous blood flow is vital during seated work, as it ensures tissues receive the necessary nutrients and energy while facilitating the removal of metabolic waste. The circulatory system plays a key role in delivering nutrients and removing waste, and efficient blood flow leads to better overall health.

Armrests are also essential in ergonomic seating, providing support for the arms, which account for about 5% of the body's total weight. Proper arm support helps alleviate strain and reduce fatigue in the shoulders and neck, enhancing overall comfort and posture.

Aesthetics

While functionality is key, a dental stool should also align with the aesthetic of your practice. Opt for stools with discreet, streamlined levers and upholstery that matches your dental chair for a polished, professional look. Minimal upholstery seams also make cleaning easier, ensuring hygiene standards are upheld.

Exploring options

Designed in collaboration with dental professionals, the A-dec 500 range promotes proper posture and positioning throughout the day. Move freely around the room without worrying about disturbing patients, thanks to whisper-quiet casters that glide smoothly on both carpet and hard flooring.

The A-dec 500 dental stool has a dynamic seat construction which supports pressure relief, healthy blood flow, and lumbar alignment, while the suspension frame adapts to body movements for continuous ergonomic support.

The seat features four distinct performance zones for personalised comfort and includes micro-adjustable paddles for tailored settings. Available in tall and short cylinder heights, the A-dec 500 is suitable for a wide range of users.

A-dec 400 dentist and assistant stools are crafted to support a healthy posture. Features like ergonomic tilt and rolled seat edges reduce muscle strain and disc pressure. Stools are available in sewn or formed upholstery and a variety of colours to complement your practice.

Choosing a dental stool with features like adjustability, ergonomic design, and dynamic support can help enhance your comfort, productivity, and overall health. **D**



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Easy management of oral pain

Orajel

Orajel is the go-to solution to help manage tooth pain in under two minutes. The effective gels can be applied to affected areas with a clean finger or swab up to four times daily, giving patients total control over their own oral pain management.

Rapid Toothache Relief contains 10% w/w benzocaine, a local anaesthetic, ideal for managing the pain associated with a broken tooth or a tooth requiring a filling.

Orajel Mouth Gel also makes use of 10% benzocaine to quickly relieve pain in gums, from mouth ulcers or dentures.

For acute dental pain, Orajel Extra Strength contains the maximum benzocaine allowed without a prescription – instantly blocking the pathways for pain signals along the nerves, temporarily numbing the affected area.

For fast, targeted and long-lasting relief, recommend Orajel!

www.orajel.co.uk



Planmeca real user stories

Planmeca

Around the world, dental professionals trust Planmeca's cutting-edge dental equipment and software to optimise workflows and deliver exceptional patient care.

Planmeca's dental care units, imaging devices and software solutions are designed and manufactured with the latest technology and the best materials in Helsinki, Finland.

But don't just take Planmeca's word for it! Why not visit the user experiences page on the website for insights from Planmeca customers and user stories from clinicians who have experienced the benefits of its dental solutions for themselves?

Discover how Planmeca's innovative products have transformed dental practices around the world and find out how they can make a difference in your own practice.

www.planmeca.com/user-experiences

0800 5200 330



Learn from the masters

ADI

The variety of lectures and workshops at the ADI Team Congress 2025 is the best place to be for all those wanting to further their knowledge and skills in implant dentistry.

Many of these educational sessions will highlight the challenges that clinicians and team members face and how exciting new technologies or innovative techniques can be reliable solutions to overcome such hurdles.

The ADI Team Congress is an unmissable event to hear from some of the leading pioneers in implant dentistry, many of whom have years of experience in the field. This means they know first-hand the importance of continual professional education and how events like the ADI Team Congress can enhance the careers of those who attend, with ample opportunities to network, socialise and have fun.

www.adi.org.uk



The Prettau zirconia line

Zirkonzahn

Zirkonzahn's zirconia range has grown over time into a material line consisting of six different types of Prettau zirconia.

- With a very wide range of applications – from partial crowns to full arches – Prettau solves common problems such as narrow spaces, bruxism or ceramic chipping for functional and aesthetic restorations
 - Prettau 2 and Prettau 2 Dispersive are translucent with excellent flexural strength. Their aesthetic properties allow the design of monolithic restorations, preventing the risk of ceramic chipping. With Prettau 2 and Prettau 2 Dispersive, patients receive biocompatible, individual and stable dental restorations, from single crowns to full arches. Dispersive has a slight natural colour gradient
 - With the new Prettau 3 Dispersive zirconia, the concept of Gradual-Triplex-Technology was introduced. In addition to the colouring, also translucency and flexural strength levels change. In this way, while the incisally increasing translucency results in a highly translucent incisal edge, the cervically increasing flexural strength leads to an extremely high flexural strength at the tooth neck
 - Prettau 4 Anterior and Prettau 4 Anterior Dispersive have been specially designed for the anterior region and are therefore characterised by a particularly high translucency. Both materials are suited for the posterior region. These two types of zirconia are suitable for the production of single crowns, inlays, onlays, veneers and three-unit bridges.
- Zirkonzahn Shade Guides are composed of monolithic zirconia sample teeth in the shape of premolars, upper and lower incisors. They are available in Prettau 2 Dispersive, Prettau 3 Dispersive and Prettau 4 Anterior Dispersive zirconia.

www.zirkonzahn.com



Zirkonzahn
Human Zirconium Technology



Your new approach to implants

Carestream Dental

Guided implant surgery is the treatment modality of choice for an increasing number of clinicians, as they endeavour to provide precise and predictable restorations that improve patient outcomes.

Join the journey to enhanced implant care with Smop, from Swissmeda, the clinical software and services portfolio from Carestream Dental.

Smop is a cloud-based open framework application that allows clinicians to precisely devise guided implant placement workflows, improving surgery times and patient outcomes in tandem.

The implant planning system has true integration between lab and clinician, allowing for enhanced collaboration between each member of the dental team. Together, surgical guides with a 'clamp' system can be designed, featuring the ability to easily irrigate and improve visibility, in turn creating the optimal environment for precision placement.

www.carestreamdental.co.uk



Sensing greatness

Carestream Dental

Digital dental radiography can sometimes be hard to interpret. With the right sensor, intraoral imaging can be made a whole lot easier and far less daunting.

The RVG 5200 sensor from Carestream Dental is a lightweight, easy-to-use device that quickly captures images in excellent quality. There is no need to sacrifice image quality for affordability – the RVG 5200 is both economical and technologically advanced.

Three anatomical image enhancement modes can be applied, including periodontics and endodontics, and a user-friendly sharpness filter makes it easy to see contrast changes in real time. The RVG 5200's customisable settings make it ideal for enhanced diagnosis.

For dentists taking their first step into intraoral imaging, the RVG 5200 is the perfect choice.

www.carestreamdental.com



GC contributes to flood relief

GC

GC, a global leader in dental products, has announced its support for the victims of the recent devastating floods in Eastern Spain. The company has made a significant financial contribution to aid relief and recovery efforts, emphasising its commitment to standing with communities in the event of major disasters.

Spain is enduring its worst flooding disaster in decades after huge rains swept the eastern province of Valencia and beyond, displacing families and disrupting lives across the region.

'We are deeply moved by the resilience of the people of Valencia during this challenging time,' said Eduardo Blanco, managing director GC Ibérica. 'Hopefully, our contribution will provide some relief and help pave the way for recovery.'

For those looking to assist the flood victims, GC encourages contributions to reputable organisations actively working on the ground in the affected regions.

www.gc.dental/europe

Get inspired this spring

British Endodontic Society



The British Endodontic Society (BES) Spring Scientific Meeting is a fantastic opportunity for clinicians with an interest in endodontics to gather and discuss all the latest developments in the field.

Hosted at the beautiful One Great George Street in Westminster, London on 8 March 2025, the Spring Scientific Meeting will attract excellent speakers discussing topics of interest to all in attendance, regardless of their experience level.

The educational programme offers clinicians the chance to earn CPD, whilst updating their knowledge in an inspiring environment.

www.britishendodonticsociety.org.uk

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Meet the board: Raid Ali

ADI

Dr Raid Ali is a principal dentist at Restore Dental Group. Dr Ali is ambitious about his career in dentistry, constantly furthering his education. His passion lies with implant dentistry, and he is always working to expand this knowledge as a practitioner and build on his learning.

Dr Ali has been elected as the Association of Dental Implantology's (ADI) regional rep for Wales. He shares an insight into his career and experience with the ADI, his election to the board, and why he believes ADI membership is important for implant dentists:

'I have been placing implants since 2013, and I joined the ADI as a member at that time. I have attended the full range of ADI events, including congresses and masterclasses.

'I wanted to get involved with a great organisation, which is why I was happy to be elected to the board. This will be a great learning opportunity for me, and a chance to meet lots of people.

'The ADI offers clinicians exposure to so many different implant dentists, and the study clubs are a really good thing to attend for those who are eager to learn and connect. I would say there are three key things that differentiate the ADI from other organisations: the Members Forum, which is held every year, is a great platform to present cases to other dentists; the Team Congress is a unique opportunity for implant dentists, we don't have access to this anywhere else in the whole of Europe; and the Study Clubs offer members across the whole of the UK the opportunity to get together and learn.'

www.adi.org.uk



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- Dr Biju Krishnan on Early Stage Orthopaedic Orthodontics.

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Fee £195. Secure your seat on the pre reg list by contacting malodentaluk@gmail.com to register interest

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