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Answering the Question

Dr. Sheldon Dov Sydney Editor ICD European Section
Raanana, Israel

I remember the “What do you want to be when you grow up” session in the fifth grade, mostly because of the emotional bruise it left behind. When our teacher asked the two dozen ten year olds, *who wants to be a dentist?* a solitary hand shot up: mine. Naively, I believed the others were just shy. I didn’t realize that most of my peers hadn’t the slightest idea of what being a dentist was all about. So with uncharacteristic bravado, I appealed to any like-minded pupils to join me in a show of hands for what seemed the obvious choice. The tsunami wave of never-to-be-forgotten laughter following that suggestion revealed the depth of my miscalculation.

Leaping forward five decades, it turns out my classmates had something in common with Sarah, a new patient who asked “Do you like being a dentist?” Like, being the operative word had an undertone akin to you’ve got to be kidding. At the time, I deflected Sarah’s question, but here I would like to proffer my answer to all the Sarahs and former grade school chums, who have expressed an incredulous curiosity in my allure for dentistry.

I was fortunate that my father’s home-based group dental practice provided an authentic insight into a profession that, by an early age, became my chosen career.

From a hidden vantage point, I often observed the arrival of a new patient in palpable discomfort while radiating fear of the unknown or worse, the imagined. However, after a sympathetically delivered, speedy and painless resolution, relief and appreciation became their dominant expressions. Needless to say, many of these patients would undergo a kind of metamorphosis into willing, if not devoted patrons, confident that adherence to the prescribed

prevention regime and scheduled appointments would decrease the likelihood of repeating their initial experiences.

The technical and therapeutic wonders dentists performed naturally fortified my dexterity-oriented ambition. I was equally motivated by having witnessed the meaningful and often trans-generation relationships between dentist and patient built on compassion and confidence. I would

listen to what appeared to be serendipitous chatter during treatment; only to discover that it was the dentists’ conscious choice of themes to create a non-threatening and relaxed atmosphere.

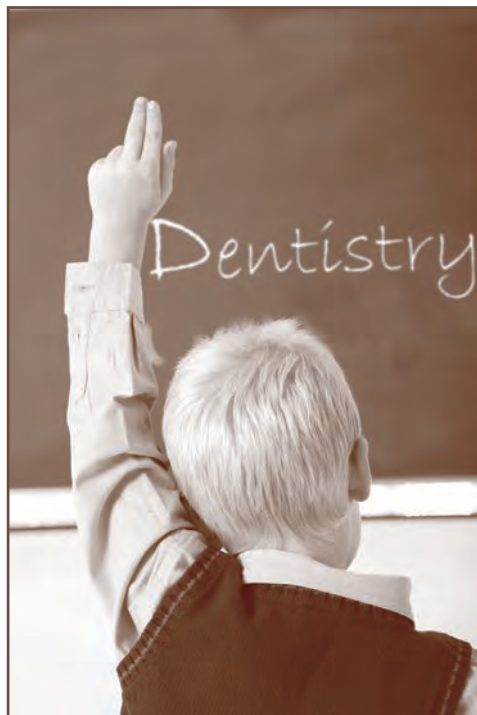
Over the years, I have met many dentists whose professional fulfillment derived from the combination of developing and maintaining these mutually-enriching relationships, while concomitantly and continually advancing their scientific and applied knowledge to provide the highest quality, state of the art therapy.

Now, in my 35th year of practice, I marvel how dentistry continues to be intellectually stimulating, professionally rewarding and personally satisfying; being able to

enjoy such a full measure of contentment and pride in one’s life’s work is a true blessing.

When Sarah returned, I showed her a draft of this column, and she asked for a copy to give her college-bound, career-undecided son. “I think if he read your article he might like dentistry”, she noted. This time the word “like” resonated with a sound of admiration.

And my fifth grade classmates?
Four of them are dentists.



The 2009 ICDIGEST

I received today my copy of the ICDIGEST. Congratulations Dov. It is absolutely amazing. The look, the articles, the paper, and the photos are all very well done. I loved it. Thank you for an extraordinary job.

*Dr. Antonio Tavares FICD
Lisbon, Portugal*

Congratulations Dov! You hit a homerun with the latest issue of the ICDIGEST. It was well done and the European Section should be very proud of what you have accomplished, as is the rest of the College.

*Dr. Bob Brady FICD
Rockville, Maryland*

I have just received the 2009 ICDIGEST and read it cover to cover.

It is magnificent! The quality of the paper, the layout, the content and the mix of photographs and text is so pleasing to the eye. You are to be congratulated for this historical document.

*Dr. Don Johnson FICD MICD
Atlanta, Georgia USA*

The ICDIGEST is an extremely well done magazine of which you should be very proud. Quality in every aspect!

*Dr. Anders Ericson FICD
Stockholm, Sweden*

Fellow Tufts Alumni

Congratulations Dov on a spectacular issue of the Journal of the European Section. Its design and color are fantastic and allow for easy readability. I am amazed by the amount of information you were able to fit into this journal, thus enhancing the amount of communication amongst the Sections. I was particularly impressed to read so much about my two dear friends who trained at Tufts: Aris Tripodakis and Argirios Pissiotis, who has been named Registrar.

*Dr. Van R. Zissi FICD
Winchester, Massachusetts*

On the International Council Meeting

I wish to add my best wishes and congratulations to you on the superb issue of ICDIGEST 2009. I have read it from cover to cover and enjoyed it immensely.

You captured something of interest to all with your inclusion of the Code of Ethics, highlights of social events, past and future meetings, personality profiles and articles of importance to each of the European Districts. I was especially impressed with your cogent remarks on the

International Council Meeting in San Antonio, Texas, USA.

*Dr. Charles Siroky FICD
Phoenix, Arizona, USA*

District News

I've just received the ICDIGEST; it is really beautiful and so well done as everything seems to have your personal signature. I especially appreciate the reporting of the Italian meeting.

*Dr. Mauro Labanca FICD
Milan, Italy*

Thank you and congratulations for a great ICDIGEST 2009 in which you prepared a wonderful report of our District's (14) activities.

*Dr. Ljubo Marion FICD
Ljubljana, Slovenia*

Code of Ethics

I would like to add my voice to all those who have said well done on your latest edition of the ICDIGEST. It is now very inviting and presentable.

It was also good to see the article on the CED Code of Ethics, particularly as I had an involvement with this through my previous incarnation with the EU Dental Liaison Committee. Again, well done on an excellent publication.

*Dr. Joe Lemasney FICD MICD
Limerick, Ireland*

The layout of the articles is lovely and I do like your "editor's note". One feels that it comes from the heart, and thus does provide a real incentive for dentists, young and old. I enjoyed our cooperation and hope to meet on some occasion in the not too far away future.

*Claudia Ritter - Director Council of European Dentists
Brussels, Belgium*

Dominican Republic Mission

It is with great pleasure that I read the article about my humanitarian mission in the Dominican Republic. This report motivated me and empowered me to continue dental support for needy populations.

*Dr. Hani Farr FICD
Vienna, Austria*

Letters to the Editor are both welcomed and encouraged, however, we reserve the right to edit for length and clarity. Letters may be mailed to Editor ICDIGEST, 13 Molskin Street, Raanana, Israel 43313 or e-mail to: editor@icd-europe.com



Anticipation and Tradition Candidates, supported by delegates and guests, moments before being honored with Fellowship during the 54th Induction Ceremony of the European Section.



*Warm Collegiality, Musical Surprises,
Scientific Expertise*

Lisbon 2009

President Antonio Tavares hosted the ICD's 54th Annual Meeting of the European Section in Lisbon Portugal this past summer. Delegates, family members and friends, along with 36 new Fellows, the guests of honor, enjoyed a four day scientific, collegial and musical extravaganza.

Early arrivals participated in the traditional pre-congress golf tournament at the Estoril Golf Club. On Thursday evening, the attendees enjoyed the welcome dinner in the congress headquarters of the Lisbon Sheraton Hotel. A buffet of Portuguese dishes were served before guests experienced the congress's first musical surprise, the songs and instrumentations of an authentic Fado performance.

Friday's scientific program, "The Avenues of Dentistry in Modern Daily Practice" under the able chairmanship of Portugal Regent Gil Alcoforado, took place in the dental school auditorium which boasts outstanding acoustic and video acuity. While delegates expanded their dentistry knowledge, guests toured well-known Lisbon historical sites.

Friday evening began with cocktails accompanied by a song and dance performance at the University of Lisbon. Dinner, served in the Noble Room, was followed by delicious traditional Portuguese desserts and a generous selection of indigenous cheeses. Then, on to the beautiful Aula Magna Auditorium for a magnificent concert by an ensemble of 200 performers composed of the Lisbon Symphony Youth Orchestra, three combined university choirs and two outstanding soloists. It was a glorious venue of Nicolai, Verdi, Rossini and Mozart in the uncommon ambience of the oldest university in Portugal.

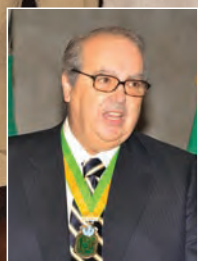
The much anticipated Induction Ceremony was held Saturday afternoon in the historic Mafra Castle's ornate library, lined with thousands of original manuscripts. It was followed by the customary photo opportunities over Portuguese port and hors d'oeuvres, the Black Tie Gala Dinner and yet another surprise musical treat. This time, six remarkable soloists thoroughly entertained Fellows and guests.

The post-congress tour included a visit to Óbidos, a charming Portuguese village, enclosed within the ramparts of a medieval castle. The next stop was Nazare, the most famous fishing town in Portugal, and a delicious lunch facing its pristine beach. The final attraction was the inspiring site of the famous three shepherd children's visions in Fatima.

From beginning to end, the 2009 Annual Meeting in Lisbon was marked by Portuguese hospitality at its best. We warmly express our appreciation to Dr. Tavares, his lovely wife Isabel and all the members of the organizing committee who created a momentous meeting in the true spirit and tradition of the ICD.

Lisbon 2009

Scientific Program



Speakers (Left to right) Dr. Gil Alcoforado, Scientific Chair, Dr. Maria Rodruigues, Dr. Inês Faria, Dr. Francisco Brito, Dr. Antonio Mata, Dr. Sheldon Dov Sydney, Dr. Orlando Monteiro da Silva, Dr. Peter Kotschy, Dr. Joao Caramês, Dr. Pedro Leitao.
Insert: The scientific meeting is called to order by Congress Chairman and President of the European Section Dr. Antonio Tavares.

The Avenues of Dentistry in Modern Daily Practice

Early Diagnosis of TMJ Disorders

Maria Rodruigues

Rehabilitation of The Atrophic Maxilla

Joao Caramês

Microscope-Controlled Glass Bead Blasting

Peter Kotschy

Evidence Based Dentistry

Antonio Mata

The Treatment of Advanced Ortho-Perio Cases

Pedro Leitão, Gil Alcoforado

New Bone Graft Materials for Implantology

Fernando Guerra

Short Implants and Atraumatic Sinus Lift Techniques

Inês Faria, Francisco Brito

Dentistry in Europe

Orlando Monteiro da Silva

Open Forum

Sheldon Dov Sydney

Questioning Minds

The quality and interest of the lectures was evidenced by the many questions raised by the audience (Clockwise from upper left) Drs. Ephraim Winocur, Elinor Bouvy-Berends, Richard Graham, Phillip Dowell, Michael Gahlert and Hubert Newman. (Below) Time to socialize and enjoy a lovely lunch in the dental school foyer.



Lisbon 2009

Welcome Dinner



Dr. Tavares introduced the assembled to the origins of the unique Portuguese music known as Fado.



Around the Tables

Guests and Fellows enjoyed the unique evening of Portuguese song and food. The European Section was especially honored to have in attendance (immediate left) esteemed ICD leaders and their wives from the United States.

Lisbon 2009

Concert for the ICD



Special Performance Delegates and guests were seated in the front rows of the auditorium for the concert conducted exclusively for the ICD group and the families of the artists.



Magnificent Music A riveting and emotional musical Tour de Force was immensely enjoyed by all.



Before the Concert

Before entering the Aula Magna Auditorium, a group of young musicians, dancers and singers entertained while the assembly gathered for a cocktail hour and dinner in the University of Lisbon's Noble Room.

Lisbon 2009

Gala Dinner



A Grand Entry Accompanied by the musical delight of six popular Portuguese soloists and the applause of admiring Delegates and guests, President Tavares and his lovely wife Isabel enter the Gala Dinner.



The Italian (left) and Benelux delegations take time for group pictures during the Gala Dinner festivities.



ICD Neckwear New Portuguese Fellows proudly wear their College Key-holding ribbons of gold and green (left to right) Drs. Ana Marques, Helena Rebelo and Joao Ramos.



◀ **Then and Now... 24 Years Later**
Dr. Gil A. Alcoforado (left) with his wife Anna and his parents Dr. Gil P. Alcoforado and his wife Marie Helene strike a similar pose to a photograph which appeared in the 1986 *ICDIGEST* featuring the Annual Meeting held in Lisbon the previous year under the Presidency of Dr. Alcoforado Sr.

Dr. Wolfgang Bockelbrink and Mrs. Mary Shields receive their awards for the pre-congress golf tournament. ▶



Lisbon 2009

Induction Ceremony



The President's Address, Dr. Antonio de Vasconcelos Tavares

I was very honoured to be awarded a fellowship in the International College of Dentists in Vienna and later, as Regent for Portugal, in 2000. It was a particular privilege to be elected President of the European Section a year ago in the beautiful town of Athens, a cradle of knowledge, poetry and classic history. I believe that important moments like these are propitious for reflections.

It has been not only a privilege, but a pleasure to serve the College as your President. Without exception, everyone has offered their highest level of cooperation and I wish to express my gratitude. I served our beloved College with dedication and tried my best to justify your confidence and fulfill our motto "Recognizing service and the opportunity to serve". We still honour those two goals from 1928, although a great part of our current activities are humanitarian and educational.

In this moment of reflection I can't forget my parents, from whom I received the precious gift of life, who taught me to fulfill my duties as well as imbibed in me moral and ethical values. They taught me to admire intellectual pursuits and artistic culture and to exercise humanity, compassion and citizenship. Included among the list of

people to whom I owe all of my affection are my wife, sons, daughters, grandchildren and friends. They supported me throughout this special year of intense work. I can never repay all the love and affection I owe them.

The traditional ceremony that has just been initiated is the highlight of our annual meetings and certainly an important moment, for all, especially the inductees. Their qualifications make all of us very proud, and we thank the Regents for presenting them today.

As a Fellow of this College you are joined with dental leaders from around the world. I am confident that you will gain personal appreciation from your new level of recognition. Dear inductees, you must not rely only on the honour of being recognized as a Fellow and what membership in the ICD can do for you; you must also ask what you can do for the ICD.

Thank you dear friends and colleagues, once again, for all the confidence and trust you have placed in me. I promise to continue working to bring honour to our International College of Dentists.



Fellows and guests received messages of praise and obligation from College leaders; (l. to r.)

Dr. Antonio Tavares, President ICD European Section; Dr. Peter Pré, Master of Ceremonies; Dr. Bob Brady, Secretary General ICD and Dr. Richard Shick, ICD World President.

The European Section Fellowship Class of 2009



Laurence Adriaens
Belgium



Fernando Branco
Portugal



Jean-Christophe Butty
Switzerland



Ricardo Cabral
Portugal



Claudette Christie
Ireland



Marilou Ciantar
Scotland



Ulpee Darbar
England



Cecile De Vaureix
France



Yves Decoularée de la Fontaine
France



Afonso Pinhao Ferreira
Portugal



Michael Gahlert
Germany



Inaki Gamborena
Spain



Martin Holohan
Ireland



Sturle Tvedt
Norway



Eva Homolka
Austria



Hong Lan Huijboom-Tan
Netherlands



Ioannis Karoussis
Greece



Fernando Guerra
Portugal



Rasikkumar Ladwa
England



Werner Lill
Austria



Ana Paula Marques
Portugal



Antonio Duarte Mata
Portugal



Konstantinos Michalakis
Greece



Manuel Neves
Portugal



Susana Noronha
Portugal



Rajesh Patel
England



Joao Ramos
Portugal



Helena Rebelo
Portugal



Meir Redlich
Israel



Mariano Sanz
Spain



Naresh Sharma
England



Michael Sultan
England



John Tiernan
England



Raffaele Vinci
Italy



Antonio Virgillito
Switzerland



Ephraim Winocur
Israel

Lisbon 2009
Post Congress Tour



Fatima The site of the famous three shepherd childrens' visions where the miracle is revered and remembered.



Congress participants listening to the guide's explanation of the unique and charming Portuguese village of Óbidos; (right) Strolling the narrow streets.



Enjoying a delicious lunch facing the pristine beach of Nazare, Portugal's most famous fishing town.



A Perfect Ending The rain didn't dampen their spirits (as the smiles attest) when the group gathered for one final photograph of the outstanding 2009 Lisbon Annual Meeting.



Where Dentistry is Heading in the Next Decade

Dr. Phillip Dowell
Dr. Stephen Hancocks

In his prologue to *Under Milkwood*, Dylan Thomas, under the guise of first voice, narrates the following passage: “Time passes. Listen. Time passes. Come closer now. Only you can hear the houses sleeping in the streets in the slow deep salt and silent black, bandaged night. Only you can see, in the blinded bedrooms, the combs and petticoats over the chairs, the jugs and basins, the glasses of teeth, Thou shalt not on the wall, and the yellowing dickybird-watching pictures of the dead”.

A poetic look back to a village anywhere, and as we look back on, in some cases, many years of dental practice, can we still see similar images of our practicing life; and who would have thought where we would be today? Where would we be without the new techniques and materials? Where would we be without good research and a good evidence-base, and where would we be without new practical and commercially driven dental health care systems?

Perhaps more importantly, looking back is easy but in looking forward we consider “Where dentistry is heading in the next decade”.

PART I

The Practice of Dentistry and Dental Science

Application of New Technologies

The practice of dentistry has become so specialized and diverse that it is impossible to cover all aspects here. Notwithstanding this one major change is the ever more

common usage of osseointegrated implants. Since the early 1980s new surgical and restorative protocols have evolved and manufacturers have continued to produce new product lines, increasing the range of componentry.

In the future there will be a need to rationalize componentry and procedure to ensure that implant dentistry can become simply routine. The high demands set by clinicians will mean that dental implants of the future need to integrate more quickly, function immediately and produce excellent aesthetics³.

The rapidly changing face of restorative dentistry today presents us with new developments and techniques providing an ever expanding armamentarium to help us meet the challenges presented to us by our patients. New materials and technology will evolve in the next decade and there will be a greater uptake of, in particular, computer aided design/computer-aided manufacture (CAD/CAM).

Technology will undoubtedly become more affordable and embraced by more practitioners in the next decade

This technology digitally scans a model, or even the oral site, and mills a restoration from a ceramic block, ready for bonded placement. The scans can be sent digitally to a laboratory that can mill many different types of restorations from an ever increasing number of different ceramic materials.

Today computer-aided dental treatments are not just the realm of digital technology enthusiasts. These high tech procedures are used for crown, inlays and implant abutments throughout Europe and the United States with a staggering 25 million all ceramic restorations having been manufactured worldwide. This very expensive technology will undoubtedly become more affordable in the future and be embraced by more practitioners in the next decade.

The use of digital imaging techniques for periapicals through to digital orthopantomographs and CT scanning giving 3D imaging has given the clinician more information which is quickly obtained. This not only reduces the radiographic dose to the patient, but also serves as an educational tool for demonstrating procedures. Chairside screen monitoring for digital oral cameras and radiographs will improve, reduce in price and be further embraced in the next decade.

Future dental practices will follow the lead of many medical practices and go paperless; explanation of risk analysis, differential diagnoses and potential treatment options will be made available at the touch of a button.

Genetics and Molecular Biology

Advances in genetics and molecular biology have also affected dentistry. Over the last 30 years the understanding of the nature of periodontal disease and its aetiopathogenesis has changed dramatically. Resolution of acute inflammation, mainly by the exodus of neutrophils from the tissues, has long been thought to be a passive process. Recent research⁴ has identified distinct biochemical pathways that are actively turned on during inflammation in the resolution phase and thus points to an 'active' biochemical resolution.

By moving towards drugs that promote resolution rather than just anti-inflammation, it may be possible to harness the advantages in the inflammatory cascade

From a histological standpoint, this resolution phase has been aptly defined as the interval from maximum neutrophilic infiltration to the point where they are lost from the tissue⁵. Anti-inflammation is, therefore, not the same as resolution of inflammation. Consequently, our approach has evolved from blocking inflammation to moderating it. By moving towards drugs that promote resolution rather than just anti-inflammation, it may be possible to harness the advantages in the inflammatory cascade, while leading to a speedy return to homeostasis and health.

Development of drugs based on endogenous mediators inherent to resolution may represent a new strategy in

anti-inflammatory treatment in general and periodontal therapy in particular. These are some of the exciting prospects for the treatment of periodontal diseases in the next decade⁶.

Oral Cancer

Oral cancer is the most important condition seen by the dental professional and seems to be increasing. Cancer is the result of DNA mutations arising spontaneously and from the action of various mutagens, especially in tobacco, alcohol, betel and some micro-organisms. A sequence of genetic changes leads eventually to loss of growth control and autonomy. Countering these changes are mechanisms to metabolize carcinogens, repair DNA damage, control growth and defend against cancer. Cancer is a consequence of the interaction of these many factors.

Better understanding of the aetiopathogenesis should lead to more accurate and earlier diagnosis and more effective treatments. Diagnosis is increasingly aided by detection of cellular and now molecular changes. Treatment in the future is increasingly looking towards chemotherapy and now gene therapy. However, there is no doubt that prevention is the most important aspect, particularly patient education and the reduction of risk habits and environmental factors, focused at the highest risk groups⁷.

Scientific Research

Scientific research has underpinned advances in dentistry and with more rigorous research protocols and methods which now exist, progress in biomedicine and dentistry will advance rapidly. Today's evidence-based dental practice is aided by new guidelines, such as the Consort Guidelines, but one of the biggest challenges remaining is getting important research developments into practice. Indeed, coping with the information explosion in the digital era can seem more of a problem than an opportunity. Systematic reviews of well planned and well executed clinical research will provide better validated evidence in the future.

Clinical Practice

In the United Kingdom there are new centers of excellence opening up to cater for all oral needs. Recently a new £3 million private centre was opened in Glasgow, Scotland. There are six surgeries and one operating room allowing the centre to provide advice and treatment on aesthetic dentistry, implants, endodontics, periodontics, oral and facial surgery, orthodontics, prosthodontics and also hypnotherapy.

The operating room in the centre is linked by two-way radio and a video with a 60 inch television in the seminar room on the 1st floor.

Three of the surgeries also benefit from multi-media links to allow for real time training and professional observations. Three surgeries feature operating microscopes as well as rooms for their digital, OPT and i-cat cone beam CT scanner.

These centers will become more apparent in the next decade in order to meet the needs of the public and the ever increasing expectation of patients, let alone translate anticipated advances in medical sciences and related technologies into mainstream oral healthcare provision.

Where we have not progressed as quickly as our medical counterparts is in the ability to devote roles and responsibilities to others. We need to expand the range of skills and provide global leadership in developing “Team Dentistry.” Demographic trends mean that increasing numbers of older people and fewer children will have traditional treatment ⁸. Patterns of disease are changing over time, however, the prevalence of oral diseases is such that almost everyone in Western society will need and use, dental services at some stage in their lives ⁹.

The prevalence of oral diseases is such that almost everyone in Western society will need and use dental services at some stage in their lives

In summary, dentistry has a very important relationship with technological and scientific advances. Looking to the future this relationship will continue from restorative materials using nanotechnologies, to genetics and developments in molecular biology, facilitated by 3D imagery and new diagnostic risk assessment, preventative procedures and disease treatments.

The creation of new academic health science centers with links to industry, should contribute an appropriate environment for the dental research community. In the future we need more researchers at all levels, particularly clinical researchers and systems to ensure that developments influence dental care provision.

PART II

Political and Organizational Dentistry

The Economy: The Need for Financial Prudence

There is no doubt that the world is going through the worst economic crisis and recession since the 1930s and it would be facile to believe that this will have no effect on dental practice in the next decade. Economic pundits vary in their doom laden assessments but it would seem reasonable to assume that some patients will delay some of the more

complicated and expensive treatment plans. At the same time, both commercial and government sponsored research programs may be cut due to budgetary restraints.

In his presidential election campaign in 1992 Bill Clinton said “It’s the economy stupid!” Economic drivers are very powerful influences on human behavior and organization and the economics of healthcare delivery are thought to be key influences in current reforms of healthcare systems¹. Marcia Angell ² has coined the phrase double agency to describe the changed relationship between patient and professional, that ‘economics is now driving ethics’. As the future costs of treatment increase, it may be appropriate to consider treatment plans that serve to save societal resources, although they may not be in the patient's best interest.

The overriding need for economic considerations will certainly drive decisions on spending on dentistry for the foreseeable future

For the “pure clinician” there is only the best dental treatment that can be provided. But, in actuality, there can be no such entity as a “pure clinician” since we all have to operate within the constraints of the real world. Politically and financially such factors range from the macro-economics in terms of the prevailing world monetary situation, to regional considerations such as EC regulations governing movement of labor, to national and local aspects of the organization of oral health care whether state systems or insurance schemes. The way in which these factors, sometimes overlapping, sometimes synergistic and at other times conflicting, will change is quite impossible to predict in detail, but there are general trends.

Although now a cliché, the overriding need for economic considerations will certainly drive decisions on spending on dentistry for the foreseeable future and the effects of that will model dental practice beyond any world economic recovery. This will be at both a personal and government level. In the UK, slowdown in personal spending on dentistry has not been especially marked. It seems that at the functional level people acknowledge the need to visit the dentist regularly, although the frequency may be reduced; while at the discretionary spending aesthetic level there is more resistance to commit to higher cost treatment plans. However, there is also some evidence to suggest that in a recessionary time of gloom and doom people actually positively decide to make themselves look better and consequently feel better.

This leads us to one of the clues towards developments in general dental practice in particular, and that is the widely acknowledged rise of consumerism.



For dentistry this can be a double-edged sword, the more that people decide to spend on their oral health the better, but the more they expect in return and the more demanding they become if all does not go according to plan.

Handling patient expectations is a risk management exercise that is of increasing importance and is ignored by practitioners at their peril. What has been adequate in the past will not survive the brave new world and what has been good will have to get even better to prosper. However, this aspect of society's view of dental services has already been affected by the radical improvements in oral health in recent decades. In the UK, for example, the Adult Dental Health Survey of 1968 showed that a terrifying 30% of the adult population over the age of 16 years had no natural teeth of their own. By 1998, the last year for which comparable figures are as yet available, this has plummeted to just 12%.

For the epidemiologist lost in the mists of the academic this means a decline in DMFT indices, for the patient this means 'fewer fillings', less negative association with the dentist and the possibility of being able to focus on improving good health rather than having to dwell on disease management. This fundamental shift in therapy, whilst as noted above will still mean that almost everyone in Western society will need and use dental services at some stage in their lives, also means that they will be using them for modified reasons.

What has been adequate in the past will not survive the brave new world and what has been good will have to get even better to prosper

Of particular significance for politicians and thus for organized dentistry is the fact that much of this treatment is less technically demanding and can, therefore, be provided by dental team members trained at a less sophisticated level than dentists, which in turn means more cheaply. For governments in particular but also for insurance-mediated schemes, this is the very best news; lower cost, lessened risk and greater predictability.

How Will Organized Dentistry React to This?

Dentistry is organized along reasonably standardized lines in most countries in that practitioners belong to dental associations usually at a national level, as well as by specialist societies.

These are defined by the type of practice undertaken for example periodontology, pediatric dentistry and so forth, or by other more philanthropic organizations, such as the ICD itself.

Such organizations can take two courses, either they are guided by and represent their members' views and wishes or they lead their membership in ways in which they feel are beneficial and appropriate. This latter course is usually fraught with internal political difficulties and upheavals. Unless the 'threat' to the members' livelihoods or wellbeing is great, it is rare that new directions are easily agreed upon and implemented. Dentistry being such a collection of individually strong personalities makes any such process particularly prone to disagreement and dissention.

Protectionism has been seen to fail in many aspects of life, businesses and professions throughout the world that had hitherto had a far stronger powerbase than dentists ever have had

It may well be that as disease trends change, patterns of treatment follow and governments as well as individuals increase pressure to change delivery of service, then dental organizations will also have to plan and work more tactically.

Political lobbying will become increasingly important and is an activity in which, for example, the American Dental Association has engaged on Capitol Hill for many years. Similarly, it may be prudent to set up communications, create discussions and possibly forge alliances with associations and groups representing dental professionals such as dental hygienists, therapists, nurses and others whose role is likely to be of increased significance in the future.

If there is one message that needs to be heeded strongly it is that dentists cannot realistically expect to stay in splendid isolation forever. Protectionism has been seen to fail in many aspects of life, businesses and professions throughout the world that had hitherto had a far stronger powerbase than dentists ever have had.

Quo Vadis Dentistry?

It seems likely that dentistry will tend to polarize into those treatments and therapies that can be provided by personnel not as highly trained as dentists, perhaps more 'health oriented' while the technical advances such as implants and complex restorative options will be practiced by dentists trained to a greater level than today.

How this polarization will manifest itself in dental practices will depend very much on the way in which dental care is provided nationally and on certain 'cultural' elements and expectations of dental care.



Dentistry as a business will face important choices; single-handed or multiple-surgery practices, the services offered and consequently the way in which they are funded and by no means least, the type of practice that the dentist as an individual wants to provide for her or his own professional and career satisfaction.

There is no doubt that dentistry has a future and if anticipated, planned and implemented wisely it can be a



Professor Phillip Dowell is a visiting professor at the University of Surrey and past President of the British Society of Periodontology. He is former Regent for the UK District and President of the European Section of the ICD in 2006-2007.

very positive future indeed. However, we are moving into a new era which is being guided, driven and dictated by an ever increasing set of diverse influences. We need as never before to raise our vision above the immediate limitations of our patients' mouths (important as they are) to the wider world and the way in which it will shape our future with or without our consent.



Dr. Stephen Hancocks OBE is Editor-in-Chief of the *British Dental Journal* and Editor of the *International Dental Journal*. He also owns his own publishing and theatre companies: www.shancocksLtd.com, www.outlaw-theatre.com.

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Past Presidents of The ICD European Section

The International College of Dentists, and in particular the European Section, is rich in tradition. No better example is the respect and admiration we render our Past Presidents who unselfishly guide this Section during their terms of office culminating in the Annual Meeting usually held in their home country.

Philip Dear	France	1955-1956	Michel Varin	France	1989
Ch.F.L.Nord	Holland	1957	John O. Forrest	England	1990-1991
Louis Fitting	Switzerland	1958	Gil Alcoforado	Portugal	1992
Jacques Foure	France	1959-1960	Andreas Tsoutsos	Greece	1993
Frans Ackermann	Switzerland	1961-1962	Gerald Wootliff	England	1994
Robert Vielleville	France	1963-1964	B David Glynn	England	1995
Fritz Schon	Germany	1965-1966	Carlo Pejrone	Italy	1996
Louis Baume	Switzerland	1967-1968	Peter Kotschy	Austria	1997
Frans Lankhof	The Netherlands	1969-1970	T. Wahr-Hansen	Norway	1998
C. deVere Green	England	1971-1972	Jan Pameijer	Holland	1999
Frederico Singer	Italy	1973-1974	Jaime Gil	Spain	2000
Charles Vallotton	Switzerland	1975	Heinz Lässig	Germany	2001
Jose. M Losada	Spain	1976 -1977	Nicole Vallotton	Switzerland	2002
Aré Edwards	France	1978-1979	Joseph Lemasney	Ireland	2003
Walter Reif	England	1980-1981	Peter Pré	France	2004
Charles Przetak	Germany	1982-1983	Anders Ericson	Sweden	2005
Umberto Bar	Italy	1984-1985	Giorgio Blasi	Italy	2006
G. van der Harst	Holland	1986-1987	Phillip Dowell	England	2007
William Fitting	Switzerland	1988	Aris-Petros Tripodakis	Greece	2008
			Antonio Tavares	Portugal	2009



I prefer the intimacy of our annual meetings and the chance to make long-lasting and valued collegial friendships that come from the uniquely “limited” size of the College

Dr. Frans Kroon President ICD European Section
Bloemendaal, The Netherlands

Editor: What do you think are the major challenges facing the European Section of the College today?

The major challenge for the European Section is expanding and implementing its broad capabilities into Eastern Europe using continuing dental education for growth and development. A second challenge is participating in and continuing with humanitarian projects worldwide. I feel, the main tool for our Section is to use the vast experience and knowledge of its Fellows for local, regional and worldwide projects.

And it is also important to note; Fellows, both new and old, should understand and accept that our challenge should not be what the College can do for you, but what you can do for the College.

What role should the ICD and, in particular, the European Section play in European dentistry?

As ICD fellowship is based on “invitation-only” and awarded to colleagues following a peer reviewed evaluation of their contributions to dentistry, being inducted in the ICD could generate a renewed personal stimulus within the context of one’s professional life and activities.

The combination of our wide international personal networks and friendships, untouched by the animosity sometimes encountered in other dental organizations, should enable Fellows through the Districts, Sections and Regions to achieve the mission and the goals of the College. Influence on “European Dentistry” will be mainly realized by individual actions and contributions, rather than “groups-wise” through the ICD, except for the educational programs to which we could decide as European Section by combining it with as much attention as possible to the growth and development of the ICD in the Eastern European Countries.

There’s been discussion of encouraging younger potential Fellows into the College. Do you agree and if so, how do you think we can do that?

In the past, Fellowship was considered a badge of honour generally worn by those who had spent considerable time in the profession and, thus, had reached a mature age upon induction. However, if we focus on younger, highly qualified and motivated colleagues, whom we trust to be

willing to serve the College’s mission and goals, I think we can improve the depth and quality of College activities. The addition of a new group of Fellows with vitality and vigour will naturally lead to an increased enthusiasm and participation in College activities and an attraction to leadership opportunities, which should be encouraged through the Districts.

You have held many positions in the College from Regent to Secretary General and International Councilor; could you tell the members what motivates someone to make such a commitment of time and energy that is required to take so many leadership roles?

After my induction in Bergen, Norway 1998 my wife Ineke and I attended a one-week post conference tour. It allowed us to meet quite a few very active and enthusiastic European Fellows. In addition to the memorable experience of that Annual Meeting and the induction, we both felt very privileged to meet such experienced, motivated and devoted Fellows. When I was asked to serve as Regent for the Benelux District, it was easy to say yes because it would give me the opportunity to work with this most admirable group of dedicated officers and Board members. Shortly thereafter, when Secretary General Ian Poplett suddenly passed away, I was honoured to become Secretary General.

You’ve been a participant on the International Council for a number of years now. Could you describe the influence that the European Section Councilors have had on the ICD?

My participation as a delegated Councilor of Europe on the International Council since 2003 has been interesting and stimulating. The European Section has delivered eight International Presidents and all European delegates who have served as Councilors have contributed and were well appreciated by the other Sections.

The major improvements of communication by e-mail and through websites make Council work much easier and productive. The potential contributions by the Section editors may be an underutilized facility. However, the structure of the European Section and the high quality of communication productions is well recognised and appreciated in the College at Large.



Besides that, it must be said, that in many other Sections “project productivity” is on a much higher level than in the European Section. In this respect, the wide cultural variety in our Section, with its many countries, might have played a major determining role in our productivity as compared to other Sections.

When you think about the perception of the ICD within the dental community, is it accurate? Incomplete? Misunderstood? If so, what should we do to change that?

Good quality should be easily recognised like good wine. Public relation activities are somewhat contradictory to the system of membership based on invitation-only. As long as we keep that policy, we should not just grow in numbers, but by improving quality within the Districts and Sections and by spreading into new areas like we are doing in Eastern Europe. Today, we have our website facilities which are a wonderful way to be known and recognized by others. More PR is not necessary.

Definitely some negative feelings may result from those who are unfortunately overlooked. But, all in all, I prefer the intimacy of our annual meetings and the chance to make long-lasting and valued collegial friendships that come from the uniquely “limited” size of the College. In my view, this facilitates the goals and objectives of the College. So, why change?

You have chosen Maastricht for the Annual Meeting. Could you tell us what the attendees can expect? What is unique or unusual? What are the attractions?

In 1999, the European Section met in Amsterdam. I have purposely chosen another location to avoid repetition. Maastricht is recognized as a real “European” town. Besides its great ancient history, it recently played host to the EEG political conference regarding unification of



Frans and Ineke Kroon

West and East Europe. It is, therefore, a symbolic and suitable background. It is unique in its rather small size with well-kept historically interesting buildings. But Maastricht also boasts a modern town with an easily accessible structure and is well known for its cultural activities. A major concern will be the congress fees. Although they have not been raised recently, in last year's Portugal congress many new Fellows from Eastern Europe were unable to attend for financial reasons.

However, the fine tradition of the Annual Meeting to favor the integration of the different countries and to meet each other personally still requires a certain standard.

I'll try to find a solution by keeping the essential parts on a low budget. Also, we'll inform Fellows about alternative hotel accommodations at fees lower than at the congress hotel.

Attendees can expect a wonderful and special atmosphere: such as a cozy river cruise and brightness by candlelight in dark caves, but above all for the scientific part an enlightening program to be followed by a real Open Forum; all “On-Line” to accommodate those who are unable to attend and encourage contact with Sections abroad in a modern way.

Your wife Ineke is very well known to all of us as your constant companion. How does she feel about the additional responsibilities and demands of Section President? What role will she have during your presidential year?

Ineke enjoys the personal friendships with colleagues afforded by the ICD. She appreciates my intentions and work for the College. She is the more extroverted half of the two of us and enjoys socializing. But, she is also a well appreciated “listening ear” for me and I share discussions as well as reports of our ongoing activities with her.

Moreover, she is a constant helpful guide for the Maastricht program. We have been together from the onset and we are now, in combination with the various committees, a finely tuned and organized team; I trust we can look forward to a very interesting program and a most enjoyable meeting in Maastricht.

Have you made plans for what you're going to do after your year as President?

Planning to be Past President should mean gracefully relinquishing your gavel, leaving the initiatives to your successors, but promising to help them, if needed. The European Board has always welcomed the input of its Past Presidents and Past Officers. So, there seems to be a future even for a Past President.

Journalism Award for ICDIGEST



ICDIGEST Editor
Dr. Sheldon Dov Sydney

The editorial, *For The Telemachus Among Us*, which appeared in the 2009 ICDIGEST won the Honorable Mention Award for the Best Leadership Editorial in the USA Section, sponsored ICD Journalism Awards Competition.

Open to all English language journals worldwide, the annual awards program “recognizes

and awards outstanding dental journalism by editors in and out of the dental profession”.

Dr. Sheldon Dov Sydney, Editor of the European Section and the ICDIGEST authored the award-winning submission. “In all my years of journalism,” Dr. Sydney noted, “I have never received an acknowledgement more meaningful to me than this one from my respected peers and the organization I value so greatly”. The editorial’s central theme encourages the mentoring process while demonstrating that the experienced ICD dentist has a wide range of opportunities to participate in and substantially influence a young dentist’s professional life.

New European Section Information Brochure Published

Dr. Cecil Linehan Helen’s Bay, Northern Ireland

Even though Regents and nominating Fellows provide as much information as possible, new Fellows (and their families) have often expressed questions about the goals and mission of the ICD. Even veteran ICD Fellows sometimes forget the important history of our College and in particular the European Section. Well rest assured, because the European Section has published a new comprehensive information brochure.

The brochure gives a brief account of how the College was formed in 1920 by a few forward thinking dentists and how it has grown to include 11,000 dentists in over 90

countries. There is information on the establishment of the European Section as an autonomous unit in 1955, how it has expanded into fourteen Districts each with its own Regent and Vice Regent, the list of projects funded by the Section’s Philip Dear Foundation, and the Section’s written and electronic communications.

The brochure is available online at www.icd-europe.com. Requests for a hard copy should be sent to the Registrar, Dr. Argirios Pissiotis, 14 Pavlou Mela Street Thessaloniki 54 622, Greece or e-mail: apissiotis@hol.gr.

FLAG Committee in Progress

The Flexible Learning Advisory Group (FLAG) was set up by the European Section Board of Regents in November 2008. Flexible Learning allows learning resources to be stored and shared among colleagues worldwide. The FLAG Committee itself has utilized the internet to allow members unable to attend meetings on-site to participate in real time.

The Section was formally introduced to the FLAG program during an introductory seminar held in conjunction with

the 2009 Annual meeting in Lisbon.

The goals of the FLAG committee are: Identification of Flexible Learning programs which can enhance continuing education in Central and Eastern European Countries and elsewhere, support humanitarian projects in which Fellows are already involved through Flexible Learning and determination of a European Section humanitarian project.

A comprehensive FLAG committee report can be found on the Section website at <http://icd-europe.com/learning.html>.



FLAG committee members in Lisbon (left to right) Drs. Richard Vaughan, (Chair) Cecil Linehan, Pat Reynolds, Isobel Madden, Phillip Dowell, Dov Sydney, Frans Kroon, Hubert Newman, Corrado Paganelli; Not pictured: Drs. Walter van Driel and Peter Owen.



Lifelong learning is the basis for dental excellence

Dr. Peter Brandstätter President Elect of the European Section
Vienna, Austria

Dr. Peter Brandstätter was born in Vienna in 1961. His father was an architect and his mother a chemical engineer. Studying medicine was a change from his parents' traditional technical education.

After graduating from Vienna University in 1987, he worked in different hospitals, becoming a general practitioner and emergency physician. After several years of practice, he returned to university to study dentistry, graduating from the Vienna Dental University in 1994. Immediately after graduation, he joined the dental department of the Austrian Army Hospital.

Following post-graduate studies at Zürich University at the Department of Prof. Peter Schärer and endodontic programs in California, he worked in his private practice in Vienna. Dr. Brandstätter is a founding member of the Austrian Endodontic Society, and works in the Institute of Dental Education in Vienna as a teacher and as an administrator. Dr. Brandstätter is also a board member of the Vienna Dental Society.

From Deputy Regent to President Elect

Dr. Brandstätter entered the ICD in Amsterdam in 1999. "After some years of fellowship Peter Kotschy, Austria's Regent and Past President of the European Section, asked me if I would support him in the Austrian Section. I agreed and in 2004 became the first Deputy Regent in our Section. In this position I organized local fellowship meetings and encouraged more group contacts. In spite of our efforts to expand to the neighboring unaffiliated countries, we were unable to develop new contacts with dentists from the Eastern European countries".

"I have always encouraged our Fellows to be active and we published an article about the ICD in the local dental journal several years ago", said Brandstätter. "Our own Dr. Doneus was head of the European Union's Dental Liaison and some Fellows were running dental charity projects, such as Peter Schopf's outstanding program in Burkina Faso. In the last year, we collected dental equipment and instruments for Dr. Hani Farr's endeavor working for the "Casa Austria" in Mexico".

What Drs. Kotschy and Brandstätter have in common is their appreciation for lifelong learning, and post-graduate education. Thus, Dr. Brandstätter finds many of his personal objectives realized in the ICD's core objectives. "Post-

graduate programs, e-learning and supporting humanitarian projects are my main focus for the future. During my tenure as President, I will do my best to spread our ICD roots to our close neighbors Tschechia, Slovakia, Hungary and Poland".

"ICD membership should not only be an honour, but also an inspiration that will encourage other dentists to raise their personal level in professional competency and personal ethics", said Brandstätter.

Family Together at Work and Play

Dr. Brandstätter enjoys working in his dental office with his wife and fellow dentist Sabine. The oldest of their three children Karoline is 12 and their two boys Max and Konrad are 9 and 7 years old. They all attend the Lycee Francais in Vienna. On summer holidays the family enjoys caravan traveling to Greece or France. "Our children enjoy adventurous holidays, and we love the feeling of freedom to travel unrestricted by a fixed travel plan". In the winter the family skis in Tirol. In his rare free time Dr. Brandstätter enjoys nature, taking long walks with his dog Basko around Vienna.

Dr. Brandstätter and his wife Sabine will be hosting the annual ICD Meeting in 2011. They plan to share the culture and history of Vienna, their lovely hometown.



Dr. Brandstätter and his family



Introducing the New Registrar

Dr. Argirios L. Pissiotis Thessaloniki, Greece

The Section's first new Registrar (previously termed Secretary General) since 2002, Dr. Argirios Pissiotis, was born into a dental family. "It would sound peculiar if I did not become a dentist", he said. He explained that his father was a general dentist and a Professor of Operative Dentistry, his uncle, and four cousins all worked in dentistry.

"I learned to trim and polish orthodontic models for fifty cents a model and make Hawley retainers for two dollars at the age of fourteen in my uncle's practice. Dentistry was my primary source of pocket money". In spite of his early foray into dentistry, Argirios was drawn to architecture as a teenager. "This dream soon faded, environmental influences and feasibility prevailed", he said.

Dr. Pissiotis attended Aristotle University's dental school in his hometown of Thessaloniki, graduating in 1980. His post-graduate studies at Boston's Tufts University led to a Certificate in Prosthodontics in 1982. After graduation Dr. Pissiotis taught for one year in Tuft's Restorative Department while researching anatomy. In 1983, he received his M.A. from Tufts.

"This last year as a faculty member was decisive. The opportunity to work among young people, and share knowledge with peers was the environment that I wanted for my future career", said Dr. Pissiotis.

Return to Greece and Beginning ICD Activities

Dr. Pissiotis returned to Greece and was accepted to the Dental School for a teaching position. He received his Ph.D. in 1990 and eventually became a Professor in the Removable Prosthodontics Department. "During these twenty-five years I was fortunate to see my students develop into specialists, academicians and successful practitioners. This was the most satisfying aftertaste of an academic career. In the same period I established and maintained a private practice, specializing in Prosthodontics and Implant Prosthodontics in Thessaloniki".

Past Section President Andreas Tsoutsos introduced Dr. Pissiotis to the ICD and in 1992 he was inducted to the College in Vilamora, Portugal.

"The real challenge came in 2004 when Past President Aris Petros Tripodakis invited me to serve as Vice Regent for Greece and Cyprus", said Argirios. "It was then that

I really became involved with the College. Attending Board of Regents Meetings taught me a lot about the ICD. The next challenge came when President Elect Frans Kroon asked me to serve beside him as Deputy Secretary and to succeed him in June 2009. I will do my best to fulfill the duties of the Secretary General and continue working towards the goals of the College. I believe that through my involvement in the Balkan Stomatological Society (BaSS) I will be able to introduce the ICD to the Balkan countries, especially the ones neighboring Greece.

My Home Team

"Last but not least I would like to introduce my home team. None of what I have achieved would be possible, if I was not fortunate to have beside me a wonderful person, a teammate by all means, my wife for 25 years, Christina Kosmidou. Although she runs her own shoe retail store, she was there for me when I needed to be away, raising our daughter Elina, 22 and son Leonidas, 17.

"For twenty years we have enjoyed a family tradition of alpine skiing and we spend our summers in our summer house by the beach. Cooking is a hobby, and I have the opportunity to cook for them all on weekends and vacations and so far they have not complained about tasting my "specialties", although I do get some criticism about my pepper. We travel together as much as our work obligations permit.

"I am looking forward to serving the ICD European Section as Registrar and I invite everyone to share their thoughts and ideas with me".



(Left to right) Elina, Christina Kosmidou, Leonidas and Argirios Pissiotis.

Dr. Wolfgang Bockelbrink Elected Vice President



Dr. Wolfgang Bockelbrink, Regent for Germany, was elected Vice President of the European Section at the 2009 Lisbon summer meeting of the Board of Regents. Dr. Bockelbrink, who was inducted into the ICD in Lausanne in 2002, served as Vice Regent for Germany before replacing Dr. Heinz Lässig, the former long-term Regent in 2007.

Born in 1952, Dr. Bockelbrink studied dentistry at the University of Marburg. He furthered his training with two years in the University and one year in a private oral surgery practice. He then received his certification as an oral surgeon. Dr. Bockelbrink's professional inspiration and motivation have been connected to the preventive concepts of Prof. Per Axelsson, and the prevention program at the Zurich Dental School.

He successfully taught prevention in the 1980s at a time when it was almost unknown in German dentistry. His "course related therapy concept" was the beginning of the preventive success story in Germany. Colleagues soon nicknamed him the "Pope of Prevention". Dr. Bockelbrink has lectured throughout Europe, Mexico and Japan. He authored "My Child Stays Cavity Free," which led to frequent television appearances and numerous newspaper articles. Dr. Bockelbrink is a member of many scientific societies and was Vice President of the German Society of Operative Dentistry and is a Board member of the International Health Care Foundation. In his spare time, Dr. Bockelbrink enjoys tennis, biking, travelling, and golfing.

Dr. Bockelbrink and his wife Minu look forward to greeting the European Section Fellows at the 2012 Annual Meeting in Munich.

Dr. Juan Salsench Named Regent for Spain



Dr. Juan Salsench, who succeeds Dr. Jaime Gil the former long serving Regent of the Spanish District (8) and Past President of the European Section, was inducted into the ICD in London in 1991. He studied Medicine in Zaragoza and Stomatology in Barcelona University where he serves as Associate Professor and has a private practice.

In 1982, he obtained a Ph.D. from Barcelona University and two years later became Professor of Prosthodontics.

Dr. Salsench is chair in Prosthodontics and Director of Department of Stomatology at Faculty of Odontology, Barcelona University. He was President of European Prosthodontic Association in 1989. He strongly supports and encourages postgraduate education and is Director of the Postgraduate course in Prosthodontics.

Dr. Salsench and his wife Carmen have 3 daughters and 4 grandchildren, 2 of them being twins.

Dr. Christian Robin Begins Term for Switzerland



Dr. Christian Daniel Robin the new Regent for the Switzerland District (13) replaces Dr. Philippe Hediger who has served the District with distinction. Dr. Robin completed his dental training at the University of Geneva School of Dental Medicine and currently serves in the Department of Prosthodontics holding the title of specialist in reconstructive dentistry. For the last 28 years he also has maintained a private practice in the canton of Geneva.

He became a Fellow of the International College of Dentists in 1994 and in 2002 helped organize the 47th Annual Meeting of the ICD that was held in Switzerland. In 2005, Dr. Robin was appointed Vice Regent for Switzerland. Dr. Robin has served as President of the Geneva Dental Association and President of the Scientific Information Commission. He is married to Christine and they have three children.

New Vice Regents

Three new Vice Regents were recently appointed to assist their Districts' Regents. They officially took on their new positions after the Annual Meeting in Lisbon.



(left to right) Dr. Pedro Leitao, Portugal; Dr. Phillip Dowell, UK; Dr. Britta Wengel-Buns, Germany.

Philip Dear Foundation Has Active Year in Ukraine

Dr. Paul Becker Odessa, Ukraine

This year in the Ukraine has been a positive experience for everyone involved in our work with the ICD and the dental professionals of the Academy of Medical Sciences, Institute of Dental Research in Odessa, Ukraine and the neighboring countries of Eastern Europe. In the pages that follow you will learn that we were again honored to have **Dr. Jan van Hoeve** participate in the dentists' and post-doctorate continuing education program, and that **Professor Sabine Maréchaux** worked with the Philip Dear Fund to sponsor a promising student's work experience in the University of Geneva School of Dentistry.

Through our relationship with the Academy, we again provided free treatment for 200 children at the State orphanage in Odessa. The professors performed many procedures, and supervised local fifth year dental students while they provided chair time at the orphanage as part of their training. This effort was greatly assisted by the cooperation of the ICD American Section. **Professor Howard D. Strassler** of the University of Maryland provided the majority of dental restorative materials for the orphans.

While the Institute of Dental Research has taken the lead in providing free preventative and restorative care for the

orphans, the post-doctorate orthodontic students give free complete orthodontic care. The Heritage House Program finances the children's transportation to the Dental Institute.

The ICD's investment in Eastern Europe has proved invaluable and will hopefully continue, particularly with the Odessa Academy of Medical Sciences, Institute of Dental Research. We have only begun to scratch the surface of possibilities of bringing dental care to the underserved and needy population of the Ukraine.



Dr. Paul Becker demonstrating modern dental treatment to his students.

Hygienists' Vital Role Emphasized in Odessa

Dr. Jan van Hoeve Oosterbeek, The Netherlands

In April 2009 I had the opportunity to deliver a lecture entitled, *The Importance of Oral Hygiene in Daily Practice* at the International Conference on Scientific and Practical Aspects of Individual and Professional Hygiene of the Oral Cavity in Children and Adults. The conference was organized by the Institute of Stomatology at the Academy of Medical Sciences of Ukraine, Odessa.

The conference emphasized the vital role of the dental hygienist in dental teams and in preventive programs. The foundation of an Odessa School for Dental Hygiene was also discussed. Speakers from various Eastern European countries discussed the financial and political problems associated with organizing the training of dental hygienists.

I lectured extensively on periodontology-related subjects to groups of about 150 graduate and post-graduate dental students, often provoking lively discussions. Information provided in this way is very important for dental students and dentists. However, because few dentists have a working knowledge of English, there is still an enormous knowledge-gap between us and our Ukrainian colleagues.

Improvement in dental training and other dentistry professionals is greatly enhanced by the cooperation between the European Section of the ICD and the Odessa Academy of Medical Sciences, Institute of Stomatology.

As on my previous visits, the overwhelming hospitality shown to me by Professors Oskana Denga and K.N. Kosenko impressed me, and I am extremely appreciative.



Dr. van Hoeve (right) with colleagues from the Institute of Stomatology.

Mexico Mission Continues with Dr. Farr

For almost a decade **Dr. Hani Farr** and his team of Austrian physicians and dentists have been traveling to Mexico's San Isidro Area (Oaxaca) to treat the indigenous population. The volunteer team is expanding both in numbers and medical expertise: this year's team was backed up by a general doctor and a dermatologist. As every year, the team was supplied with Austrian and German dental products.

With the help of Austrian and international organizations, a fully functioning medical station has been built. This new station, Casa Austria-Mexico, ensures free expanded dental care to the indigenous population.

The main focuses in the dental field are tooth and root extraction, dental fillings and restorative measures, as well as several operations in the upper and lower jaw. Patients receive immediate and free dentures. Furthermore, the mission continued the prophylaxis for children as well as teenagers in the field of dental hygiene, including

correct brushing instruction.

This year installing a water filter system was a major part of the mission. The system mainly provides free and clear drinking water in addition to its medicinal purposes.



Dr. Hani Farr and his very appreciative patients in Mexico.

IADR and ICD European Section Sponsor Student Research Prize

Ariel Shusterman, a student at the Hebrew University Hadassah School of Dental Medicine in Jerusalem, Israel was the recipient of the first ICD European Section - IADR Israel Division Student Research Prize. His work was entitled, "Dissecting the Host Susceptibility to Periodontitis Using Collaborative Cross Mouse Resource Population".



Ariel Shusterman (left) receives the first IADR-ICD Student Research Award from Israel IADR Vice President Dr. Doron Aframian.

The prize was presented during the 44th annual meeting of the IADR-Continental European Division (CED) which was held together with the Scandinavian and Israeli IADR Divisions in Munich, Germany

in the fall of 2009. The grant from the Philip Dear Foundation (PDF) was adopted by the European Section Board of Regents in order to facilitate the participation of an outstanding young dental researcher at an IADR international conference. The protocol for awarding the

prize winner was approved by the District Nine Regent **Dr. Dov Sydney** and IADR-Israel Vice President **Dr. Doron Aframian** after a complete evaluation of the selection criteria. The protocol includes evaluation by at least two independent, anonymous reviewers, who are not involved in the candidate's research. Each submission is then ranked according to excellence and advanced to the Prize Selection Committee, which includes members of the Israel division of the IADR and Fellows of the ICD European Section for the final decision.

Ukraine Institutions receive Internet Access Funding

The PDF has approved a grant subscription to the HINARI program of the WHO which provides access to one of the world's largest collections of biomedical literature offered by leading biomedical publishers. With access to the WHO, all faculty, staff, researchers and students of the Ukraine's Academy of Medical Sciences, Dental Research Institute and Dental School will have free access to thousands of journals via the internet. The grant was proposed by FICD **Dr. Paul Becker** from Odessa.



An ICD Exchange Student's Geneva Diary

Anastasia Eduardovna Denga Odessa, Ukraine

February 2009, Geneva

Monday, 16th

I observed implants were used for retention in the treatment of edentulous patients. Unfortunately, this method is too expensive for the patients in the Ukrainian public clinics. The afternoon lectures covered periodontal pathology and embryological pathology.

I felt very proud that I successfully used the Geneva public transportation system to get home.

Tuesday, 17th

I spent the morning at the "Clinique Dentaire De La Jeunesse". It was pleasant to see how gently pedodontists performed procedures and psychologically prepare the children for treatment. I spent the afternoon at the Dental School, participating in the diagnosis of periodontal pathology. Exhausted, I fell asleep as soon as I got home.

Wednesday, 18th

The morning patient was told where I came from, he said his favourite author was "Taras Shewchenko", a Ukrainian national writer. I felt very proud.

In the afternoon I had my special pedodontic clinic. It is challenging to work with children, but when you help them, you feel completely happy. Then we had lectures on jurisprudence and philosophical and psychological aspects of medicine.

Thursday, 19th February - Friday, 20th

I spent today in the treatment of prosthodontics and periodontics.

In the evening I had a gorgeous dinner with Madame Maréchaux, her husband Monsieur Daniel and Tatiana Becker (Dr. Paul Becker's wife). The evening's highlight was a magnificent Swiss chocolate cake prepared by Madame Maréchaux.

By 8:00 a.m. on Friday we had treated a boy under general anaesthesia. Working time after lunch was dedicated to pedodontics. In the evening I enjoyed Geneva's nightlife, dancing until 5 a.m.

Saturday, 21st, Sunday, 22nd, Monday, 23rd

I rose in time to visit the lovely market downtown basking in the winter sunshine surrounded by a view of the snow

capped mountains. The Patek Philip Museum alone and its exotic watch collection are worth a visit to Geneva. On Sunday we climbed Mount "Le Salève" with Madame Maréchaux. I saw a wonderful collection of statues of Ursula Paquet-Malbin. Later, we went to the Opera and Ballet of "Salome". Monday is the most demanding day of the week. I spent the first half of the day in the clinic. Later we had lectures on benign epithelial tumours and gerontology (these old ladies and gentlemen are our roots; without them we are nothing) and Ethics in Dentistry,

Tuesday, 24th - Wednesday, 25th

I started my working day at the "Clinique Dentaire De La Jeunesse". All of the children were so sweet and accepted the information about healthy food with great interest. Some presented me their hand-made gifts which made me happy. The next day I was lucky to participate in some interesting perio cases.

Thursday, 26th

While reading in the library. I realized that it's true when people tell you, that in a good place everything is good. The department heads and their assistants were wonderful. The students at the Dental School were nice and helpful. Should they ever wish to come to Odessa, I look forward to welcoming them.

Friday, 27th - Saturday, 28th

The day started with treatment under general anaesthesia. In the afternoon, we drove the 180 km along the Lake of Geneva to Sion, the capital of the Valais a charming city, where the spirit of hospitality is in every corner.

Saturday we took the bus to Crans Montana to see the snow and the mountains. The view was out of this world.

Sunday, 29th

This is the worst day of the two weeks because I am leaving. The exchange program was a unique experience. I thank all concerned, but my special appreciation goes to the ICD and Madame Maréchaux for this opportunity.

Anastasia Eduardovna Denga is a 3rd year student of Dental Medicine at the Odessa State Medical University of Ukraine and participated in the ICD European Section's sponsored Student Exchange Program under the guidance of FICD Madame Maréchaux.



Burkina Faso A love story in one of the world's poorest countries

Dr. Fabrice Macheret Lausanne, Switzerland

My story begins on the day my wife and I decided to adopt a second African child. A patient of mine told me about an orphanage in Kaya, small town about 100 km outside of Ouagadougou, the capital of Burkina Faso.

We soon learned that a one and half year old boy was waiting for us. The adoption procedure was difficult. We had many administrative hurdles that included meetings with numerous civil servants, and mediators. Finally, we adopted our little Nicolas.

During the long and difficult tribulations in Ouagadougou, we met a local dentist named André. This colleague became like a brother!



Patients waiting to enter the dental clinic in Burkina Faso.

At the same time, we fell in love with the beautiful and fascinating country. We met extraordinary people and shared the local customs. The population is poor, but generous. Poverty was the other significant aspect of our trip; we decided to help, modestly but concretely. As a dentist, I initially organized a permanent toothbrush sale in my office.

This helped pay for the necessary milk for the orphans. We also financially participated in the creation of a local pharmacy.

A Dental Office for André

Our second effort was creating a dental office for my friend André in Kaya. André studied in Kazakhstan. He

was a true friend, a good practitioner and a generous man. We tacitly established a contract: he agreed to treat the poor patients for free part-time, and manage the dental office the rest of the time. While he was manager he followed the principle of taking from the rich and giving to the poor and charged the rich patients accordingly.

In order to provide André an opportunity to advance both his dental and management skills, we invited him to Switzerland. He spent one month in my office learning the concepts of modern dentistry including how to receive patients, dental hygiene and preventative dentistry.

At the same time we purchased a large supply of dental materials and products, so that it was possible for André to establish his new office in Kaya.

Burkina Faso Dental Statistics

- Burkina Faso has 71 dentists for 16 million inhabitants
- The vast majority of patients cannot pay for basic dental treatment.
- The literacy rate is 39%.
- Life expectancy is 47 years.
- The infant mortality is 19%.

We returned many times to Burkina with more humanitarian missions. We wanted to help set up the dental office and instruct and motivate the dental team. But rapidly a new project began. We decided to finance and install a complete medical center with the profits from the pharmacy.

Our principal occupation was to provide this new center with medical materials and products, especially for treatment and surgery rooms. During our last stay I had the great privilege and satisfaction of treating some patients myself. I even had the opportunity to set what was probably the first dental implant of the Burkinese Savanna.

The Burkinese people are kind, warm and grateful. Can you believe that some patients walk fifty kilometers to our dental clinics? They are able to patiently wait many hours before treatment, and still maintain big smiles. It is the best reward we could receive!

News, Events and Reports from the Districts of the ICD European Section

District 1 Austria

At the Austrian District's local spring meeting in Vienna there was a roundtable discussion on modern endodontology under the chair of **Dr. Karl Schwaninger**, with enthusiastic participation from all attendees. We discussed the upcoming mission in the South of Mexico under the direction of **Dr. Hani Farr** whose more than a decade of experience in Mexico and the Dominican Republic was very illustrative in this matter.

Dr. Farr thanked 2011 ICD President and Austria Regent **Dr. Peter Brandstätter** for his recognition of the programs and the team of contributors in Europe for their support in providing NPH Dominican Republic with dental equipment this past June.

Dr. Brandstätter discussed the scientific and social programs that the delegates can expect at the upcoming ICD Annual Meeting of the European Section 2011 in Vienna. Later, the Fellows were briefed on the three inductees that will be presented by the Austrian District in Maastricht. The successful meeting ended with a dinner that was very much appreciated by all the participants.

District 2 Benelux

The ICD Benelux District held a well attended regional meeting last November at the Academisch Genootschap Eindhoven. To begin the program, 26 active Fellows enjoyed a tour through the DAF museum in Eindhoven, The Netherlands. Fellow **Dr. Joop Advokaat** reported on the organized Anniversary Congress in Lisbon last June and some items from Lisbon's scientific and social program were discussed.

In Lisbon two new Fellows from the Benelux were inducted, **Dr. Laurence Adriaens** and **Dr. Hongkie Huijboom-Tan**. They presented themselves to the Benelux group and both gave an interesting presentation.

Dr. Adriaens discussed the prosthodontic rehabilitation of patients with a history of periodontitis, concluding that fixed restorations should not be performed without prior thorough periodontal examination and/or periodontal treatment. In periodontitis susceptible patients supportive periodontal therapy (SPT) is a sine qua non for the long-term success of their overall treatment. SPT is a lifelong commitment of both teams: patient and professional.

Dr. Huijboom discussed the dental care for special paediatric patients, explaining the main reason for referring those patients to special clinics. The two most important factors are uncooperative behaviour and extensive or

difficult dental problems. Uncooperative behaviour is usually seen with dental fear, early negative experience, young age, behaviour management problems, disability and medically compromised patients. Extensive dental problems are seen in early childhood caries, nursing bottle caries and developmental abnormalities. She mentioned a very clear treatment strategy with the aid of the so called behaviour management technique. In this technique the tell-show-do approach is very effective in reducing uncertainty. The use of sedation techniques (local anaesthesia systems, oral, inhalation, intravenous and general anaesthesia) for the treatment of those patients were also explained.

Location and dates for the forthcoming Annual Meeting in Maastricht were mentioned and Regent **Dr. Walter van Driel** urged everybody to attend. After the meeting, a very nice dinner was served in a pleasant atmosphere that allowed Fellowship and friendship to come together.

District 3 Scandinavia



Dr. Anders Ericson

Former Section President and District Regent **Dr. Anders Ericson** from Sweden has been elected President of the Scandinavian Academy of Esthetic Dentistry. ICD Fellow **Dr. Henrik Helsengreen** received his diploma in implantology from FGDP in London. The first local ICD meeting in the Scandinavian region was scheduled for February 2010 at the Copenhagen Admiral Hotel.

District 4 England, Scotland, Wales

The UK District had their Annual Dinner at the Royal Thames Yacht Club in London last November. Regent **Dr. Shelagh Farrel** organized the event attended by twenty six people. We all had a thoroughly enjoyable evening.



UK District Fellows and guests at the Royal Thames Yacht Club.

Choosing the ideal evening is never easy as people who live in London prefer to leave the City at the weekend. Those who live in far flung places find it difficult to make week days, the perennial problem. We are looking forward to welcoming several new Fellows in Maastricht. We regret to have to inform our colleagues that **Dr. John McLean** OBE passed away earlier this year.

District 5 France



Dr. Bertrand de Beaupuis

This past fall the French District held its Annual Meeting in the Paris office of Regent **Dr. Bertrand de Beaupuis** attended by 70% of the District Fellows. It was a great moment of friendship and we were all especially pleased to welcome our new Fellows, who had been initiated in Athens and Lisboa. Dr. Beaupuis's video presentation of excellent photographs of the Athens and Lisboa Annual Congresses began the meeting.

Then ICD Master **Dr. Robert Baldensperger** gave a stimulating presentation on the history of the ICD followed by the introduction of our new life member **Dr. Claude Wawerka**, who expressed his gratitude for this great honor. The audience appreciated his speech and the newest Fellows found it particularly inspiring. Following our featured speakers, the new Fellows addressed the group with a short presentation about themselves. The evening ended with a lovely cocktail party.

District 6 Germany

Because of the numerous congresses in the autumn of 2009, the German Section of the ICD was unable to find a separate date for a meeting. The Neue Gruppe (New Group) had their Annual Meeting in Munich from October 8th to 10th that included a superb scientific program. Many ICD members are also members of the Neue Gruppe, including Regent **Dr. Wolfgang Bockelbrink** and Vice Regent **Dr. Brita Wengel-Buns**.

The German Dentist Day, which convened in Munich last November, includes all of the scientific societies, and many of our ICD Fellows regularly participate as lecturers or attendees.

District 7 Greece, Cyprus

Thirty-one Fellows and their spouses attended the Annual Meeting of the Greece and Cyprus District this past November. The evening was held in the faculty club of the National and Kapodistrian University of Athens in the restored neoclassical mansion "Kostis Palamas," built in 1857. After a welcoming cocktail, there was a short address by the Regent of Greece and Cyprus and Registrar of the

ICD-European Section, **Dr. Argirios Pissiotis**. He introduced the Fellows who were newly inducted in Lisbon last June, **Drs. I. Karoussis and K. Michalakis**. Then he updated the College's recent activities and presented the contents of the Scientific and



Regent Dr. Argirios Pissiotis introduces Dr. Alexander Grous.

Social Programs of the 55th Annual Meeting of the ICD's European Section in Maastricht from June 17-19, 2010, organized by our President **Dr. Frans Kroon**. Dr. Kroon also invited the Greek Fellows to attend. Both programs were well received by the audience.

Finalizing his remarks, Dr. Pissiotis referred to the ICD motto, "Recognizing Service as well as the Opportunity to Serve" and said that the 7th District of Greece and Cyprus can initiate actions that promote and support humanitarian projects within the District. For this reason he invited Fellow **Dr. Alexander Grous** to give a short presentation entitled "Opportunities for Dental Volunteering in Greece". Dr. Grous explained that a volunteer needs motivation, support and recognition, three things that are lacking on an organizational level in Greece, which explains why they are presently personal initiatives.

He concluded by saying, "Don't just send money. Go and do something with your own two hands as a volunteer". The presentation was unanimously appreciated and triggered two proposals by other Fellows for specific volunteering actions. The evening entertainment included a delicious four-course dinner which left the attendees, an aftertaste of an excellent evening with their ICD Fellows.

District 8 Ireland



Drs. Edna and Joe Lemasney (Past District Regent and Section President)

The Irish District held its Christmas Meeting and Dinner in the Royal Marine Hotel in Dun Laoghaire with an excellent attendance of 40 people.

In his speech Irish Regent **Dr. Tom Feeney** thanked everybody present for

the great support. He reminded them of the very successful meeting in Lisbon and many tributes were paid to **Dr. Antoni Tavares**, **Dr. Gil Alcoforado** and the Portuguese team

for the excellent scientific content and social success of the June Annual Meeting. The feedback from the meeting was all positive and all who attended praised the fellowship and camaraderie shown between like minded colleagues. The Gala Dinner, with its enchanting musical performance, was singled out as a truly stunning occasion.

Dr. Feeney also welcomed new Fellow **Dr. Claudette Christie** to her first meeting as an ICD Fellow. Claudette's husband Richard is the Vice Regent of the Irish District and Claudette has been a regular attendee at ICD meetings for years. Details were given of the Maastricht meeting and a strong attendance is expected.

Dr. Feeney also welcomed a special guest, **Professor Hubert Newman**, who is a Fellow of the UK District. Hubert graduated from the Dublin Dental School and has over the years excelled internationally in the area of Periodontics. **Dr. Cecil Linehan**, well known to all for her great work in ICD, was unfortunately unable to make the meeting due to the death of her beloved husband Tom. Dr. Feeney read out a note from Cecil in which she described how Tom's medical condition quickly worsened for a number of weeks prior to his sudden passing. The membership asked that their sympathies be passed on to Cecil.

Finally, Dr. Feeney also thanked **Dr. Joe Lemasney** for the great work he continues to do in the international arena, most recently in Yokohama. The membership currently stands at 46, inclusive of two Masters, two Life Members and one Honorary Member.

District 9 Israel, Malta, The Baltic States

The District's Student Prize Award celebrated its sixth year by recognizing outstanding senior dental students from the dental schools in Tel Aviv and Jerusalem. The District is very appreciative of the support from the GC Europe Company, who has partnered with us from the beginning.

The Israeli IADR Division in collaboration with the ICD European Section presented its first Student Research Award under the grant provided by the Philip Dear Foundation to an outstanding dental student scientist from the Hadassah School of Dental Medicine in Jerusalem (see story on page 30).

District Regent **Dr. Sheldon Dov Sydney** serving in his capacity as Section Editor, participated in the ICD Editors Conference held during the meeting of the International Council Meeting in Yokohama, Japan. Dr. Sydney began his tenure as Chair of the ICD Editors Task Force, a resource and advisory committee composed of ICD editors throughout the world. Vice Regent **Dr. Joseph Xuereb** is

spearheading a program, an association with BioEden UK, that will make Malta one of the first European countries to offer a service whereby stem cells may be collected, cultivated and stored from deciduous teeth. **Dr. Stuart Fischman**, who recently moved to Israel and joined our District, was installed as Vice Chair of Jewish Health International, a non profit organization based in Atlanta Georgia, USA that assists needy communities with healthcare support and services worldwide.



Dr. Stuart Fischman

District 10 Italy



Dr. Giorgio Blasi

The first Italian meeting of the International College of Dentists organized by the Italian committee took place last summer in the beautiful setting of Villa Pomela Hotel, located on a magnificent park upon Novi Ligure Hills. An all-day scientific program for Fellows was held as well as a comprehensive social program for accompanying persons and guests. The Congress was opened with an address by our Past Regent and former European Section President, **Dr. Giorgio Blasi** from Genoa. The theme of the Congress was multi-faceted and the speakers' professional backgrounds included those unrelated to dentistry.

Along with the scientific and surgery state-of-the-art updating, other interesting aspects were analysed and discussed. One psychiatrist's speech, for example, profiled a new, modern relationship between dentist and patient and suggestions were given on how to follow the path to patient awareness.

Possibilities of applying marketing techniques to dentistry were also proposed and actively discussed by the Fellows. The scientific meeting underlined both the latest medical aspects of surgery and the complexity of the new approach in the dentist-patient relationship. At day's end all participants appreciated the exclusive and stylish "College style" gala dinner.

District 11 Portugal

Most of 2008 and the beginning of 2009 were spent preparing for the Lisbon meeting, under the scrupulous and efficient leadership of the **President and Mrs. Antonio Vasconcelos Tavares**. Candidates who were to be inducted at the Lisbon meeting were made aware of the enormous responsibilities they must assume upon receiving the ICD Key during the District meeting where they were welcomed by the Portuguese Fellows.

After dinner, **Prof. Joao Aquino**, who was recently elected Dean of the Lisbon Dental School, was kind enough to talk on “Ethics and Marketing in the Dental Profession”. After Prof. Aquino’s very interesting talk, our President presented the full program for the Lisbon meeting. The Portuguese Regent **Dr. Gil Alcoforado** explained to the candidates the real significance of ICD Fellowship, which entailed an increased ethical responsibility and their positioning within the dental profession. The importance of taking part in the College Annual meetings and local activities was also stressed. A full report on the Annual Meeting held in Lisbon this past summer appears in this year’s ICDIGEST. In particular we were honored to have in attendance the ICD President at large, **Dr. Richard Schick** and his wife Rosemarie, Past USA President **Dr. Charles Simons** and his wife Alice and the General Secretary **Dr. Robert Brady** and his wife Janet.

In October, the Portuguese Regent **Dr. Gil Alcoforado** received a Fellowship in the American College of Dentists and attended the Convocation Ceremony of the USA Section of the ICD in Honolulu, Hawaii. A special thanks to President-at-Large **Dr. Richard Schick** and his wife Rosemarie, General Secretary Robert Brady and his wife Janet, Vice President **Dr. Michael Kinney** and Past President **Dr. Vangel R. Zissi** and his wife Barbara for



Regent Dr. Gil Alcoforado with ICD President, Dr. Richard Schick in Honolulu.

their very warm welcome during all of our stay. Their company made all the difference and make us understand why it is so important to be a part of an organization like

the ICD. We are all looking forward to being with our European ICD family in Maastricht.

District 12 Spain

New Regent **Dr. Juan Salsench** is very pleased having been elected to lead our District and appreciates the support during the transition from past Regent and former European Section president, **Dr. Jamie Gil**.

District 13 Switzerland

In order to reinforce the ties and the friendship between all Swiss Fellows, a local meeting of the 13th District of ICD-Europe was organized at the beginning of May in a marvelous countryside, just near our country's most central location, Lake of Murten. We met together in the wonderful and gastronomic Hotel Le Vieux Manoir.



From left to right: Past Regent Dr. Philippe Hediger, Past Section President Dr. Nicole Vallotton, and Dr. Paul Feinmann.

This five star hotel is an extraordinary bijou bordering reality and fantasy, in an idyllic and romantic park. A good number of Swiss Fellows were present with their spouses or companions, and every participant enjoyed a perfect and succulent dinner. The atmosphere was happy, and cool. The camaraderie between the Fellows was clearly demonstrated, and we all decided to repeat this pleasant experience as soon as possible.

District 14 Central and Eastern Europe

This year there were two dental meetings in Slovenia to which ICD members were invited and presented lectures. The first was a small meeting in Ljubljana, which focused on esthetic dentistry. Presenters were from Japan, Italy and Hungary. **Dr. Paul Gerloczy** from Budapest presented an outstanding lecture about the basics of esthetic dentistry. After his presentation, many of us met together at a local restaurant to celebrate our successful meeting. The second meeting was at Bled and the subject matter was Temporomandibular Disorders. We enjoyed lecturers from USA, Swiss, Slovenia and Greece. From Greece we were fortunate to have with us ICD Fellows **Drs. Aris Petros Tripodakis** and **Ilia Roussou**. We first met Ilia at the ICD Annual Meeting in Athens last year at which she presented an exciting lecture about TMD treatment. Aris Petros presented a meticulous lecture on the neurophysiology of occlusion using his original drawings of neural pathways in the stomatognathic system.



Drs. Aris Petros Tripodakis and Ljubo Marion liven up the Bled conference with a Greek dancing demonstration.



Ethical Dilemmas with Standards of Care and an Alternative

Dr. Peter Owen Johannesburg, South Africa

The legal definition of standard of care is derived from elements defining negligence,^{1,2} all of which must be proven to win a case of malpractice. One of these is that “the applicable standard of care was violated”. However, there is little consensus on how to define a standard of care and this gives rise to some ethical dilemmas. This article will highlight some of these, and suggest an alternative.

Three Dilemmas

The first concerns research involving human subjects³⁻¹⁰. This has prevented some appalling practices of the past, such as experimenting with pulpal exposures to encourage dentine formation and then serially extracting teeth just to follow the histology over time.¹ In developing countries, a standard of care may not justify what should be provided in a research trial,² especially where there may be no care currently being experienced at all. Resources, therefore, have to be taken into account: this leads to the second dilemma.

A standard of care is increasingly being used to assume a standard of treatment without taking into account the resources available to provide or receive that treatment. An infamous example is the McGill consensus statement: in 2002 a prosthodontic conference in Montréal concluded that the “first choice” standard of care for the edentulous mandible, was an overdenture retained by two implants. The McGill consensus statement on overdentures. Mandibular two-implant overdentures as first choice standard of care for edentulous patients.

It is astonishing that the contributors to this statement seem to have forgotten that the majority of the world’s population is poor, contains the majority of the world’s edentulous population, and lives on less than US \$2 per day. As Fitzpatrick¹⁴ has pointed out, does this mean that the provider of mucosa-borne dentures is providing less than adequate treatment?

A third dilemma is the bioethical principle of autonomy, whereby all possible treatment options must be presented, even if the patient has limited choices. This puts the onus on the practitioner to stay current with emerging therapeutic

options and new technologies. For example, since the early 1980s the majority of implants have been successfully placed without the benefit of 3-D imaging and surgical guides. But now that we have these aids, is it right to even think about placing an implant fixture ‘blindly’ based on two dimensional images?

The MAP Alternative

We need an alternative to standards of care which dictate treatment without allowing for resource constraints. Obedience to a standard of care limits other approaches which, if they do not violate any principles, will be beneficial. The alternative I propose is a protocol composed from set principles associated with each treatment modality. I have referred to this as a Minimum Acceptable Protocol or MAP,^{5,6} where the capital P is also synonymous with Principles. These can be agreed by the profession using the best available evidence, even if the highest available is expert opinion (eminence-based). This is similar, but not the same as clinical practice guidelines which often fail to recognize different therapeutic solutions.⁵ The difference is this: standard of care implies that anything else is inferior, whereas a MAP allows for a variety of treatments, provided there is compliance with the principles.

A standard of care that specifies treatment assumes the availability of resources to comply with that treatment. A MAP, although absolute, allows resources to be adapted to circumstances, while complying with the principles. For example, a set of mucosa-borne complete dentures can be completed in few visits using inexpensive materials, while still complying with the guidelines for a MAP for complete dentures.

Conclusion

The concept of a MAP obviates many ethical dilemmas created by a standard of care: it takes into account resources, and allows the patient and clinician a variety of beneficial choices. Unlike with a standard of care, violation of the principles would be negligent, not the manner of complying with them.

Adapted from Owen CP. Standards of Care: Good or Evil? Int J. Prosthodont. 2009;22:328-330 where the the numbered footnote citations are listed.



2009 A Year of Changes

Dr. Argirios Pissiotis Registrar ICD Europe
Thessaloniki, Greece

The year of 2009 was marked by many changes. For me, it was the commencement of my service as the new Registrar at the 54th Annual Meeting in Lisbon last June organized by District 11 under the presidency of Dr. Antonio de Vasconcelos Tavares. The meeting was a perfect integration of high level scientific information exchange and social interaction under the wonderful settings of Lisbon on the banks of the Tagus River, the University and Mafra Palace. During the meeting, I watched as my mentor, former Secretary General and now President of the European Section Dr. Frans Kroon, was orchestrating the Board Meeting and the Induction Ceremony with the skill of a virtuoso conductor. I wondered...will I ever come close? I will try my best. I consider myself lucky to have Frans and the rest of the Board as guides and advisors.

The name Secretary General has been changed to Registrar. The International Council ruled that the term Secretary General is to be used only by the Secretary General of the College at Large. All Sections' Secretary Generals are now termed Registrars.

Board of Regents Activities

The entire Board of Regents met twice in 2009: first during the Lisbon Annual Meeting and second in Paris in December. Minutes of the Board meetings are available in the members only section on the website. Most of our Districts report annual gatherings of District Fellows, in an effort to maintain high levels of interest in the goals and mission of the College. There are also two changes in Board membership: Dr. Juan Salsench is the new Regent of Spain, replacing Dr. Jaime Gil who is also a Past President of our Section. Dr. Christian Robin formerly Vice Regent takes over from Dr. Philippe Hediger for Switzerland. The Board of Regents' interest in the Central and Eastern Europe District (14) is high. We continue to seek individuals to enrich the number of Fellows who will bring the mission and goals of the ICD to these communities.

The Board authorized the production of an Information Brochure which joins the other publications of the European Section, the ICDIGEST and the ICD Eurogram. This

brochure is based on a proposal and long lasting wish from the International Council, that each Section should provide a brochure combining the general information about the College at Large and basic information about each Section. Developed by our former Editor Dr. Cecil Linehan, it is available on our website in PDF form, through the Regents and the Registrar. It is to be used by Regents especially to inform future Fellowship candidates about the history, mission and goals of the ICD.

The agreement with the Academy of Medical Sciences, Institute of Stomatology, and Odessa, Ukraine was renewed for another three years. The keen interest of the Board of Regents in Flexible Learning methods led the Advisory Group to hold a special session during the Lisbon Meeting. Our President Dr. Kroon is planning an afternoon in next year's Maastricht Meeting, devoted to Flexible Learning Platforms (Distance Learning).

Philip Dear Foundation

The Philip Dear Foundation provided two grants this year; one entitled "Expanding Potentials Providing Access" provides access to Ukraine's faculty members, staff and students to one of the world's largest collections of biomedical literature, and the other entitled "Program For Dental Skills For Medical Primary Health Workers" will provide a laptop, a series of educational CD-ROMs and technical support that will teach medically trained health care workers to recognize and treat simple dental conditions and the ability to refer the more complex ones.

Separation of the Central Office from the USA Section has begun and the location of the new Central Office will be only one mile from the current office. A Chief Office Administrator, Kathleen Bula, was selected and Secretary General Designate Dr. J. Terrel (Terry) Hoffeld will replace Dr. Robert Brady, who is retiring.

2009 indeed was a year of changes which I hope will all be in favor of the effective communication and functioning of the Board of Regents of the European Section.

Board of Regents 2009-2010



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