In the last edition, I concentrated on our College’s actions and planning. In this column, I present thoughts on some extremely capable new Fellows recently inducted into the College, and a few thoughts on the Induction event in general.

It’s a very positive part of our ICD Australasian Section when the much smaller ‘partner’ – New Zealand - can host Inductions on our home soil and attract a few Australians in the process.

I thank the NZ Dental Association for their generosity in providing such a wonderful waterfront location and venue (gratis) for the recent ICD lunch and Induction and also thank the Presidents of the New Zealand (Susan Gorrie), Australian (Rick Olive) and British (Stuart Johnston) Dental Associations for being in attendance.

One of the very enjoyable aspects of the President’s role within ICD and this Section in particular, is the opportunity it provides to directly encourage colleagues and to actively talk positively about them.

In an attempt to be as welcoming as possible, I believe in the current context it is worth trying to be a little more relaxed in the formalities of College Induction and as such (particularly for smaller NZ events) the attempt by me was in removing the ‘procession’ in, the ‘head table’ and to arrange seating for new Fellows intermingled at tables with the ‘old’. The limited time (lunchtime function within the Conference) is better spent in having an inspiring Fellow present the work they do with (in part) our support. Let new Fellows see what we do.

On a day which recognises these new Fellows, it is important for the College leadership to not only list the Inductee’s CV achievements but also where possible, to present personal observations regarding those who join our College and those who have accepted Fellowship but who were unable to be at this Induction.

A key characteristic of leadership is finding, nurturing, encouraging and promoting those who are better than yourself to continue the work you currently lead. I really believe in the resource that exists within our experienced and fully accomplished Fellows to do just that with younger members of our profession. Introducing younger candidates to ICD Fellowship and perhaps linking them with existing Fellows is one of our potential strengths and probably not fully exploited.

So with respect to comments made regarding new Fellows, let’s start with the ‘young’…

**Assil Russell**

For those who were at the 2015 Induction in Auckland, you will remember Assil was our guest speaker on that occasion. She has since been invited and has accepted ICD Fellowship and was to be inducted in Wellington this year. Her charity work within Iraq and in NZ is simply inspiring and amazing. She is the NZDA Outstanding Young dentist and she is now (in her early thirties) the youngest of our nearly 600 ICD Fellows across Australia and NZ. Assil, amongst everything else that she is doing, is also about to complete her doctorate in endodontics and unfortunately...
those final exams coincided with this Induction. She will be presented with her Fellowship in Melbourne at the ADA Congress next May. I certainly wanted to mention her and give her a presence in front of this, her home audience.

Robert Beaglehole

Similarly, Rob another younger practitioner has also just accepted Fellowship to our College, but is unable to attend. He is in Geneva with WHO. Rob has an absolute passion for oral health promotion through his work with community water fluoridation and the attention he has drawn to the sugar debate is unique. He ‘front foots’ these issues with strength and determination. Rob emailed me last week to say he had managed to get WHO Headquarters sugar free!

Rob will be inducted in Melbourne and again it was important to acknowledge him here in NZ at this function and in the presence of NZ colleagues.

David Excell

Dave’s contributions to the Wellington Branch of NZDA, to NZDA Peer Review, to promoting oral health and his interest in nutrition are well known. Late last year he joined the NZDA Executive. Dave is in an age group where I see a lessening of collegiality, a lessening of contribution beyond one’s immediate practice, and growing inter-practitioner competition.

On a personal level Dave brings to NZDA leadership what some would say are fundamental professional values of the older generation in this room today, but my total observation is that he is in fact very refreshing in the way he presents these values. He engenders respect, and I feel very good about our profession when people like him are involved.

Usha Narshai

Usha is also a most welcomed Fellow to this College. She launches herself into things dental with an enthusiasm that’s inspiring and so highly organised. Usha recently joined the NZDA Board, is a member of the Auckland Branch NZDA Executive and chaired the Association’s Northern Region Peer Review. Within NZDA she is currently working a project concerning the welfare of our members and I believe, because of the people she has involved and because of her enthusiasm and capabilities that this is going to produce significant and practical results in understanding and assisting the welfare (and wellness) of New Zealand dentists.

Stuart Johnson (moving to a slightly older age group)

Past NZDA Board member and long-time NZDA Canterbury Branch Executive member, plain speaking, direct and involved – that’s Stuart! The work that he has done, his central involvement in setting up the dental components of the Charity Hospital in Christchurch, particularly against the backdrop of what has happened to Christchurch over the last 5 years, is brilliant. Stuart, simply put is a really good person, also most welcome to the College.

Johnston Luen

The smiling nature of Johnston. The many years of assisting in aid work particularly in Fiji and community work with Rotary, Johnston recently retired and we wish him well. This Fellowship is not just recognition - it also comes with hope that this College is part of keeping Johnston in touch with colleagues and with dentistry.

Professor Alison Rich

Alison is an icon in the oral pathology world, an outstanding academic and person. She is the current Deputy Dean at the Faculty of Dentistry, University of Otago. During her term as Acting Dean she re-ignited the dental school partnership with the profession. She has been a conduit to really good changes in that regard and positive outcomes are possible as our profession gets more connected with the development of the new dental school building. On the more individual level it’s been my observation that Alison presents a caring, pastoral side to the leadership of the School with respect to students in particular and that is important. Dental School is where one’s collegiality and notions of ‘profession’ and support begin. Again it is a pleasure to welcome Alison to this College.

Assoc. Professor Lyndie Foster-Page

From being a practitioner in provincial NZ, hugely connected to her community, to a passion to seek more knowledge, to considerable involvement in public dentistry and now in academia, Lyndie just has such an enthusiasm for what she does. It’s inspiring. I was involved in the accreditation team for the Otago BDS degree about 5 years ago. We interviewed a lot of the staff – Lyndie was part of a ‘younger’ group who just proved the strength of the staff, their direction and their real passion not only for research, but for clinical teaching as well. She like many others at Otago illustrates just how good our dental school is.

Geoffery Squires

I have heard of Geoff’s very significant contribution to the Health Reserves (Australian Airforce), his responsibility across all health reservists (doctors, dentists, physiotherapists, pharmacists, technicians). We heard of his extensive work with the University of Sydney Dental Alumni. Prior to his being an orthodontist Geoff had a period of time as Aide de Camp to the Governor General of Australia and an anonymous source informed me that he is an extremely efficient and organised person (apart from the time as best man he forgot the ring!). It was an honour to have Geoff travel to NZ to be part of this induction.
Kenneth Douglas-Savage

I had not met Ken prior to this Induction, but had learned that in his early dental career he worked in private practice in Queensland, the UK and PNG and then in the early 1980’s moved to working in the public sector in south east Queensland. He then became heavily involved in the administration of public sector clinics and with student education until he developed eyesight problems, and he was declared legally blind in 2008. Since that time Ken has not practiced clinical dentistry but despite his disability he has continued to serve the profession through work with the QHCC and providing advice and support to members of the dental profession. Since 2011 he has been working to assist practitioners in his role as Community/Peer Relations Officer with ADAQ and has provided a number of voluntary lectures and presentations on ethics, communication, and maintaining professional and practice compliance within the profession. I attempted to find out more about him but when told he had contemplated wearing a Wallabies jersey to the NZDA Conference – I felt I really did not need to investigate further!

Michael Mandikos

Michael Mandikos hails from Queensland where he runs a specialist Private Practice in Prosthodontics in Brisbane in the leafy suburb of Graceville. Amongst other roles he is currently Visiting Prosthodontist to the University of Queensland Dental School and well respected speaker nationally and internationally. As a student at the University of Queensland he was regarded as having one of the best pair of hands in his year and CV Black would have been proud of him. He was awarded numerous prizes including the coveted J Owen Pearn memorial prize for the best student in operative dentistry so it was hardly surprising that he went on to become a specialist in prosthodontics. Michael was admitted as a Fellow of The Royal Australasian College of Dental Surgeons in 2000, after receiving the Sutherland Prize for the highest examination pass that year.

He is known as a lecturer of note who freely gives his of time and expertise to advance knowledge among his colleagues.

So there you have it – at this recent induction we add to our numbers-

- some younger practitioners involved in charity and oral health advocacy work
- several leading academics and teachers
- up-and-coming leaders of the New Zealand Dental Association – experienced in Peer Review, leadership at a Branch level and now nationally.
- others who have contributed significantly to aid and charity work in New Zealand and overseas or who have demonstrated substantial organisational and administrative skills employed in the support of colleagues both in New Zealand and Australia.

To conclude, my thanks to all those who attended this event. My particular thanks to Vice President John Owen AM whose presentation regarding his and Jan’s work in the Kimberley brought home just how good is the work Fellows like him are involved in, and how fundamentally useful our support and encouragement is to them.

With respect to new Fellows, I think International Councillor Clive Ross CNZM (in his message to this event) best summed it up -

To these new Fellows, you bring new ideas, new skills and perspectives which the College needs. As Fellows it is vital for us to have continual renewal and revitalization and you do that, as will future new inductees do for you.

One of the wonderful things about this ICD is the professional development that comes with the privilege of being given the opportunity of association at such a personal level with new inductees and the wisdom and commitment that comes with them over the broad range of our profession.

This is very special and should be cherished

David Crum

Registrar’s Report

The Australasian Section of the International College of Dentists now has a total membership of 681. This is comprised of:

- 601 Active Fellows
- 71 Retired Fellows
- 2 Masters
- 6 Honorary Life Members
- 4 Honorary Fellows

595 Fellows reside in Australia and 79 Fellows reside in New Zealand. Other Fellows of our Section have spread
to many parts of the globe with Fellows now living in Cambodia, Eritrea, Fiji, State of Qatar, Timor L’este, South Africa and the United States of America.

Over the past 10 years, membership of our Section has grown from 560 in 2007 to 681 in 2016. I am pleased to report that in the most recent Australian Queen’s Birthday Honours awards, 2 of our Fellows received awards:

Dr Edward Crawford AM (VIC)
Dr Michael McGuinness AM (WA)

**Vale Fellows**

Since our last Newsletter in June 2016, it is with much sadness that I have to report the passing of the following Fellows:

David Blaikie AM (SA), Jim Grainger (NSW), Peter John-son (VIC), Ron Czernezkyj (SA), Peter Ryan OAM (QLD) (Honorary Life Member)

Peter was made a Fellow of the Australasian Section of ICD in 1980. Subsequently, Peter served on the Board from 1991 to 1998 as Regent (QLD) and Editor. He was made an Honorary Life Member of the Australasian Section in 2007. Honorary Life Membership is a rare distinction bestowed on ICD Fellows in recognition of their outstanding contribution to the International College. Peter was one of only nine Honorary Life Members in our Section. We were fortunate and privileged to have Peter and his wife, Ariane, attend the 50th anniversary celebrations of our Section held in Sydney in October 2014.

At 18 years of age L Peter Ryan (LPR) volunteered for the Royal Australian Air Force and became a Wireless Operator – Air Gunner. Aircrew over Europe had short life expectancies but duty called. Dispatched to the 57 Lancaster Bomber Squadron in the Great Britain, he quickly learnt to fear sunrise, survived 30 operations and was then transferred to the 617 Dam Buster Squadron. He was one of the 55 percent that survived.

Peter served as an ADA Qld Committee Chairman, Branch Councilor and President in 1976 and 1981. He received their Meritorious Service Award and Life Membership and also the ADA Inc Service Medallion. He was awarded OAM in the 2003 Australia Day Honours list.

A Brisbane dental practitioner and widely acknowledged as the perennial fluoride advocate in Queensland, Peter Ryan OAM, was an unassuming but driven man always courteous and always ready to listen. For decades, widespread fluoridation in Queensland was his dream. The challenging and divisive campaigns for water fluoridation. Advocates came and went but one campaigner persisted for over forty years. L Peter Ryan! His commitment to fluoridation never capitulated as evidenced via countless “Letters to the Editor” in major daily and provincial newspapers.

From his war experiences, LPR learnt camaraderie, resolve and how to face adversity. These traits served him well throughout his long and outstanding career and he will be missed.

**State ICD Committees**

Following the feedback from fellows, the ICD Australasian Board resolved it would form state based local membership committee. These will assist with fellow nominations and state based dinners on a biannual basis.

**Queensland & NT**

Ian Meyers (Chair)
Julee Birch
Michael Foley
Anders Blomberg

**NSW & ACT**

Tom Tseng (Chair)
Deb Cockrell
Peter Duckmanton
Scott Davis
Stephen Dahlstrom (ACT)

**South Australia & Tasmania**

Rick Sawers AM (Chair)
Daniel DeAngelis
Sam Gue
Chris Pazios

**Western Australia**

John Owen AM (Chair)
Yee Sang Welten
Lyn Loreck
Michael McGuinness AM

**Victoria**

Keith Watkins (Chair)
Eryn Agnew
Warren Shnider
Felicia Valianatos

**New Zealand**

David Crum
Clive Ross
John Boyens

**South Australian ICD Dinner**

There were 32 attendees and it was held at The Adelaide Club. There were 2 informative presentations firstly by Colin Twelftree on his project providing dental care for Vietnamese orphans followed by George Manos regarding dental care for child monks in Nepal.

Rick Sawers spoke giving some details of how the ICD College is not just an honour organisation but one which uses significant funds each year helping various projects and people in the Asia Pacific region.
Western Australian ICD Dinner

John Owen organised the first WA dinner with 39 Fellows attending. WA Function was a great night with a strong consensus to make it a Fellows only annual event. With future formal dinner in the “off” Congress year and informal in the congress year. It proved an opportunity to re-engage with Fellows from many diverse backgrounds yet dentistry, the common denominator.

Project Reports

For more information and photographs of our section projects please look on the ICD Australasian Facebook site. It is interactive with any questions welcomed.

https://www.facebook.com/ICDAustralasian

Esperansa no Saude (One-2-One Timor Leste)

Due to the local regulation we are now changing the name of 121 Timor Leste into local name called “ Esperansa no saude”

Letefoho is 4 hours’ drive by car from Dili made all the more challenging when September rain washed out many of the roads. Letefoho belongs to the Ermera district and is in the west central part of the country. We collaborated with the Paroquia Nossa Senhora de Fatima Letefoho Church. This is one of the biggest district with about 20,000 people, and most of them working as coffee farmer. There is no dental clinic in this region. We could not have been able to carry out the Mobile clinic without the generous funding from ICD. There were 4 portable dental chairs provided by Dentaid and volunteers including, 2 dentists, 2 medical doctors and 15 dental Therapy students.

Over 4 days in September 629 patients were seen, 523 medical and 106 dental patients. Treatment was predominately extractions but there was scaling and some restorations.

The relatively small number of patients seen at this dental mobile is due to the time spent in proactive preventative actions. The dental team was active in oral health education with training in the communities and school, approx. 2500 tooth brushes and pastes was given out after teaching and training. Dr Nando and team were also very active in teaching about hand washing and skin care as community schools were seriously afflicted with scabies/ fungal and bacterial infections.

Fernando Jong
fernando.jong@ymail.com

Ho Chi Minh City, Vietnam

This visit was the twelfth annual voluntary surgical team mission that I have led to the Odonto Maxillo Facial Hospital in Ho Chi Minh City. It is an oral and maxillofacial surgery center for the southern half of Vietnam. Over the twelve years, our team has operated on nearly 550 individuals.

The 2016 team was composed of nine volunteer members: two oral and maxillofacial surgeons, a plastic and reconstructive surgeon, two anesthetists, a trainee oral and maxillofacial surgeon, a dentist and two OR nurses.

On the first morning we screened 97 patients and during the week we operated on 47 cases. These patients either lived in Ho Chi Minh City or came from the impoverished rural provinces of the southern half of Vietnam. The range of cases included very severe panfacial fractures, dento-facial deformities, cleft lip and palate, various facial congenital deformities, post jaw resection deformities for reconstruction, large fibrous dysplasia cases and a range of other extensive pathologies.

The 2016 Surgical Team

During the week the team worked long hours, commencing work at 8:00AM and sometimes finishing at 10:00PM. Some procedures were very complex involving up to seven hours of surgery to complete. We were supported by, and worked closely with, the local maxillofacial surgeons, anesthetist’s and nurses. Most of these hospital staff members have worked with our team on each of our visits to the hospital throughout our association with the hospital. The close collaboration between our team members and the local hospital staff has been a particularly rewarding and enriching experience for all. It was particularly rewarding for all team members to experience the expressions of gratitude from all of our patients and their families. In all cases the procedures the patients underwent was life changing.
On the last afternoon of our visit the Australian team members presented lectures to the hospital surgical and other staff.

A grant from the International College of Dentists part funded the costs of an OR nurse. All other team members were self-funded. We received donations of essential equipment and materials from a range of companies. A grant from the OOAC of ANZAOMS was used to part fund team materials and logistics.

Michael Schenberg
michael@schenberg.com.au

Kimberley Dental team
KDT Kimberley:

In 2016 KDT provided oral health education and dental services at 1033 visits; 978 examinations, 357 extractions, 400 restorations, 177 scale and cleans, 120 fluoride treatments and 850 fissure seals and twelve partial dentures. This was over seven clinical weeks with 12,000 kms of road covered.

After eight years of KDT, we continue very strong professional relationships. The ADAWA, providing two scholarships to assist our final year students, as well as the recipient of the UWA, John Pritchard Memorial scholarship which supports a student in the Kimberley. DHS with the provision of materials and use of their clinics in Balgo Hills and Halls Creek, KAMSC with the use of their invaluable dental truck, BRAMS, WACHS, and our corporate Sponsors. We have ongoing support from Rotary, the International College of Dentists, Dental Partners/ Maven Dental Group and DentiCare and the WA Oral Health Improvement Unit of the WA Government. KDT was again the recipient of two Awards in 2015-2016, the CBA Staff Community Award for the second time and the ADAF Wrigley Award for the third successive time.

Evidence of the effectiveness of the tooth brushing and tooth paste program, Strong Teeth for Kimberley Kids, is now very clear in our treatment profile towards prevention. It is now firmly embedded in the hygiene and health mantra of eye, ear and oral health.

KDT Southern teams continued activities in the Perth metropolitan area with visits to Uniting Care and Family Foundations. If you would like to be involved in KDT Southern activities, please email us to express your interest and availability and find out about the roster and scheduled visits for 2016.

The KDT model in both the North and the South, continues to demonstrate that from 2009 when our initial services were almost 100% surgical (extraction of teeth) with no restorative care, to now, thousands of patients and many, many, thousands of teeth, only require and receive non-invasive preventive care including fissure sealants, topical fluoride applications and prophylaxis/scaling, with our aim that all patients receive dietary advice, dental health education and instruction with demonstration of brushing. To supplement this, we have always and continue to supply all patient’s households with toothbrushes and tooth paste for all the occupants of their house and always provide and show their relevant problem or our concerns diagrammatically using our [provided], Strong Teeth, Strong Body, Strong Mind, booklet.

Follow our 2016 travels and adventures on the Craig the Croc Facebook page and see our team photos on the KDT website.

Jan and John Owen
John.Owen@owenorthodontics.com.au
www.kimberleydentalteam.com

August trip

Week 1 We provided a clinic at the Broome Aboriginal Medical Service (BRAMS) and had a team go to Milliya Rumarre Rehab Centre. Also visiting the communities of Beedunburra and Pandanus Park followed by the community of Jarlmadangah, 86km south east of Derby.

Week 2. Camping at the community of Kupingarri at Mt Barnett we travelled a further hour north east to provide a service at the Gibb River Community to screen the children. The team also worked at the Kupingarri clinic treating community members and children previously identified at a school screening. Finally driving back to the community of Mowanjum for a morning and afternoon clinic.
Long Tan Vietnam

The Long Tan Preschool and OHE program continues to expand its activities in the province of Vietnam for which the Australian Army had responsibility during the Vietnam War in Loc An and Phuoc Hai.

The schools in the area are now quite well controlled dentally and we received a request to provide treatment for adults who have no access to dental treatment. Local Health Department Officers recount that they frequently relieved dental pain by dripping battery acid into the offending cavity.

In August/September this year fellow Dr John Denton led a team of 3 OHT’s. They used the mobile surgery which we hire from the Health Department and provided treatment to people in Loc An and Phuoc Hai. During the week they treated 157 patients with 48 extractions 14 fissure sealants 80 restorations and 59 prophylaxes.

Adapting to no running water in the slums.

ICD funds sponsored a final year dental student to travel with 2 dentists for a week in December 2016. Three other 4th year students are also volunteering at M’Lop Tapang under supervision by Dr Maclean, Dr Mcadam and Dr Bowden. We are encouraged by the active participation of future dentists in many volunteering projects.

Petrina Bowden
petrinabowden@gmail.com

One-2-One Cambodia Prison Dental Service

Cambodia has 25 prisons spread throughout the country. Some prisons have never been visited by a dentist, and many prisoners suffer from pain and infection for years on end.

One-2-One Cambodia is a local NGO which aims to bring basic medical and dental services to disadvantaged people in Cambodia. It has an agreement with the Department of Prisons to provide basic dental services to prisoners all over the country. Presently Dr Philip Sussex (FICD) from NZ, who has been living and working in Cambodia for the past 5 years, is the team leader. He goes to one of the Phnom Penh prisons every Wednesday, accompanied by a Cambodian dentist, a One2One dental assistant, and a group of about 15 dental students, from two of the local universities, International University and University of Puthisastra. On arrival, the team sets up six portable dental chairs, along with lights, mobile dental units, a pressure cooker sterilizer, a generator, and a set of basic dental instruments and materials. The team works quickly to provide treatment to about 50 prisoners each day in the time available. The students do most of the treatment, and enjoy the experience. They feel happy about helping the prisoners, many of whom have long prison sentences.

Provincial prison trips, are arranged every few months, but rely on volunteer overseas dentists and students.
One-2-One is seeking volunteer dentists and dental students to help. Volunteers can come in groups of up to 10 people, to provide a week of dental services at one of the provincial prisons. One-2-One organizes the necessary government permissions, airport pickups, transport, accommodation, food, translation, and some sightseeing for groups that come. The volunteers contribute funds which pay for all this, as well as for the dental materials and local costs of mounting the outreach. One2One provides local support staff. Donations of dental materials help keep costs to a minimum.

If any senior dental students or ICD members would be prepared to come and help relieve the suffering of prisoners, or take part in other mobile dental services around Phnom Penh or in the provinces, please contact: 121Volunteer Coordinator, 121visitor@gmail.com

Callum Durward
callumspencerdurward@gmail.com

Bula from Fiji

The ICD donation of local anaesthetics, needles, syringes, masks, gloves, fluoride gel and disinfectant wipes significantly improved our dental service delivery to the community following cyclone Winston. We managed to visit the majority of the affected regions with our community health care team. Treatments included emergency extraction, palliative drug therapy for acute pain, referral of complicated cases to the nearest base clinic/hospital and subsequent restorative treatment.

We continue with outreach and access to our communities has greatly improved.

Our current priority is school children, with 70% of all schools visited by our school team. We are targeting 90% coverage for 2016.

Jone Waqalevu
jwaqalevu@govnet.gov.fj

Smiles For The Pacific

Cyclone Winston caused major damage in February 2016. SFTP and ICD were able to organize and deliver a container of goods half of which was dental gear and the other was clothes, toys, games etc. to help alleviate that had been lost due to the cyclone.

SFTP was founded in 2012, with the intent to provide free dental treatment to the under-privileged people of north western Fiji, including complex dental treatment and elimination of pathology. We are heavily involved in the up-skilling and training to all ranks of dental professionals in the South Pacific region.

A volunteer visit by the Palmerston North dental practice - All 14 of them.

SFTP operates in partnership with the Ministry of Health Fiji. We have set up a treatment and training center (TTC) at Lautoka Hospital 30 minutes north of Suva. This clinic is equipped with state of the art dental equipment.

Since 2013, SFTP has conducted over 90 programs in further training of the dental team and treatment of complex patient cases from both with in Fiji and the Pacific.
A volunteer visit by the Palmerston North dental practice-All 14 of them.

SFTP has helped to upskill dental professionals from the South Pacific basin, including visitsations and aid to Tonga and Vanuatu. We also run training programs for Fiji National University, Fiji Dental Association and Fiji Oral Health Workers Association. SFTP assisted in further training in NZ of five dental health professionals from Fiji. We were honoured to host 13 dental students from Fiji National University last year.

We are currently focused on improving the delivery of oral surgical care at Lautoka Hospital, which will include refurbishment of the unit.

Together with the Ministry of Health and Fiji National University, we are organizing training of a local Maxilla-Facial technician who will visit Waikato Hospital early 2017, to further upskill in the area of prosthetic eyes, ears and nose with our world renowned team. Especially in the north west of Fiji, a lot of oral disease does not get diagnosed due to their remoteness.

We are continuing to involve other South Pacific nations and intend to run a joint conference in Fiji involving delegates from these regions.

“Give a man a fish, and you feed him for a day. Teach a man to fish, and you feed him for a lifetime”.

We are always keen to get more volunteers and funds to assist with our refurbishment project of the oral surgery clinic in Lautoka Hospital

Jonathan Cole
jcole@xtra.co.nz
www.smilespacific.co.nz

Congo, Aru Dental Institute

It is now more than a year since Australian ICD Fellow Dr Graham Toulin AM from Springwood, NSW, and his wife Wendy AM, came out of retirement and returned to the Democratic Republic of the Congo, this time as the dental faculty leaders training 4-6 students a year at the Aru Dental Institute.

They have made steady progress, despite having to do all the teaching in French.

The dental building, equipment and supplies provided by donors in Australia, has created a facility with 2 private patient surgeries and a 5 chair student clinic, all functional Adec 500 chairs, 3 intraoral xray units and an OPG machine (still to be installed), 2 portable chairs for village visits, two classrooms, a waiting room and reception office, two laboratories - one for wax work and the other plaster work, a sterilizing room and a large depot for the supplies. It is arguably the best equipped dental facility in an impoverished country, the size of NSW and Queensland. Outside there are the long-drop toilets for ‘Malades’ (patients) and ‘Personnel’, an incinerator, a contaminated waste hole, a generator house and the 40 ft container that brought it all from Sydney.

The Institute, which concentrates on teaching good practical dentistry on patients, started the dental faculty in 2013. Most dental training is theoretical in DRC with a dental school in the capital having 400 students but only 7 chairs (in poor shape). The Toumins met a graduate from this university who, after 8 years, had never done an injection, an extraction or a restoration. The three year Course, a level below university degree, seeks to equip dental officers with theory but lots of supervised patient treatment opportunities, so that at the end of three years and a one year internship, they will be able to examine and assess a patient proficiently and to do simple preventive and periodontal treatment, simple and complex extractions, simple restorative dentistry including single canal endodontic work, to provide dentures (personally doing all the laboratory work), ... and, believe it or not, be able to treat the many fractured mandibles that occur from motor bike accidents there.

The ICD in Australia came to Graham and Wendy’s assistance with a grant towards providing a water supply to the Dental School building. The water supply at the moment comes from a single tank of 2000 litres with very limited guttering to collect the water. There is one tap in the whole building from which the staff fill buckets for each of the clinical and laboratory areas.

However, as the dry season approaches (from November to March) the tank will run dry and water will be carried daily in 20 litre containers on a motor bike from a water source a kilometre away.

The grant has helped them but they do need more help to reach the goal of $10,000 to put guttering all around the roof and place 3 or 4 more large water tanks around the building to enable enough rain water to sustain them throughout the year. The alternative is to sink a bore hole which would cost $15,000.

Graham and Wendy Toulmin
graham.toulmin@gmail.com

Adelaide Community Outreach Dental Program

Volunteer dentists are an integral part of our student’s experience at the clinic providing mentorship, advice and a practical point of view when managing unfamiliar and difficult treatment decisions.

The student body (AUDSs) ran their annual “Sleepout” for homelessness at the Salvation Army centre in the Adelaide CBD. The Saturday evening meal served to the homeless patrons the student chatted and offered dental information and handed out dental products. We are finding need for the dental program is increasing as we
are looking after an increasing number of asylum seekers who are unable to obtain care via conventional services due to financial hardship and no eligibility to a health care card.

We encourage students to engage with the community in a variety of ways for example – Oral health presentations at community housing estates, support centres such as Teen Challenge for teenagers- early thirties recovering from addictions, University staff health expo and Homeless Connect expo. Activities provide information in prevention and where to seek help.

This program encourages philanthropy, a sense of social justice and equity in dental care for all people in the community.

Margie Steffens

NZDRF Grant

A 5-year retrospective assay of the outcomes of implant therapy in New Zealand private dental practice

Co jointly funded by ICD and NZDRF. The program has recruited 2 prosthodontists, 2 periodontists and 5 general dental practitioners to assess implant outcomes in private dental practice in New Zealand.

150 implant treatments have been evaluated to date, with further data collection in November and December 2016 and Jan 2017 for completion. The statistical analysis is to be completed in 2017.

Suzanne M Hanlin,
Sunyoung Ma,
Lara Friedlander

ADRF Grants

The International College of Dentists Award is given annually during 2013, 2014 and 2015. Funds were awarded to the following projects:

Explaining the links between mother’s and child oral health—a prospective cohort study, aims to examine the influences of maternal factors on child oral health using a birth cohort design

A/Prof Loc Giang Do,
E/Prof A John Spencer,
Dr Diep Hong Ha

The project is nested within a large population-based birth cohort study funded by National Health and Medical Research Council (NHMRC). The parent study is at the final stage of data collection. Parents completed a questionnaire when their child had turned 24 months. Over 1,200 mother and child dyads were examined to assess their oral health status. The data collection is expected to be completed by the end of 2016.

This ICD Awarded project is expected to be completed by mid-2017. Findings will be published as scientific publications and at Conferences.

Maternal and perinatal factors associated with early childhood caries.

A/Prof Karen Peres

Mother and Child study paperwork has been updated, packed at the Australian Research Centre for Population Oral Health (ARCPOH) and delivered to South Australian Dental Service (SADS) in June 2016.

Cases and control participants were selected and documentation posted out during May/June and July 2016. With a follow up reminder in July and August. Recently, data entry and data linkage has been finalized whilst data cleaning is in progress.

Impact of Oral Health on Nutrition Intake and General Health of Older People - A Longitudinal Study

Ms Saima Islam,
Prof David Simon Brennan,
Prof Kaye Roberts-Thomson

The study builds upon oral health assessments conducted within the Enhanced Primary Care (EPC) health assessment program.

In the “Oral Health for Older People” study the dental needs of community dwelling persons aged 75 years or older is being assessed by integrating oral health screening within the regular Enhanced Primary Care Assessments conducted by medical practitioners in general practice medical clinics and then those persons identified as being in need of dental care are referred to appropriate public dental care.

We have introduced a Food Frequency Questionnaire (FFQ) to assess nutrition status to investigate the impact of oral health on nutrition status and general health in older people. A follow-up with a FFQ after one-year to longitudinally assess nutrition after older people have received appropriate dental care.

By conducting a longitudinal follow-up, we aim to investigate how potential improvement in their oral health influences the nutritional regime and consequently quality of life for older people. With this grant opportunity, we are collecting follow-up nutrition-related data.

We have finished analyzing the baseline data of oral health, quality of life and nutrition, and collecting data from follow-ups.

ICD Induction and Dinner

The next Australasian Section VIII induction will be held on Friday, 19th May 2017 in Melbourne.
International Councillor’s Report

The 2016 annual ICD Council meeting was held in Denver, Colorado, USA on October 22 – 23. Dr Clive Ross CNZM represented Section VIII at the Council meeting. Fellow Dr David Thomson again acted as the invited Speaker for the Council meeting.

The Council meeting was attended by 25 international councillors from around the world as well as the Executive Committee comprised of President Phillip Dowell (UK), President-Elect Rajesh Chandna (India), Vice-President Clive Ross (New Zealand), Immediate Past President Joseph Kenneally (USA), Treasurer Richard Smith (USA), Editor and Director of Communications Dov Sydney (Israel) and Secretary-General Jack Hinterman (USA).

At commencement of the Council meeting, it was noted that the USA Section had presented an award for “outstanding cover” to The Globe 2015 as part of the Section’s annual journalism awards. The cover of The Globe 2015 featured a photo taken by our Fellow Petrina Bowden during her volunteer work in Cambodia (see photo below). Editor Dov Sydney commended our Section on the article and photos submitted. We, in turn, commend and thank Petrina for her outstanding contribution.

Business conducted at the Council meeting included presenting an award to Raghu Putlaiah who founded the ICD Dental Safety Program which provides education on infection control guidelines. In 2016 two 2-day educational seminars were conducted under the program: in India, February and in Vietnam, September.

A number of Constitutional and Bylaw changes were discussed at the meeting including language changes, standing rules for operations and nominations to Executive Council. It was approved that payment of annual dues will be based on the number of active Fellows in each Section as at December 31 of the prior year. It was recommended that all Sections include a fellowship oath in their induction ceremonies. Guidelines were also discussed for projects which are branded ICD for promotional or fundraising purposes.

Other discussions centred on membership which has been a priority in recent year due to the lack of growth in some Sections of ICD. Recommendations discussed encourage Sections to operate in smaller units to more actively engage Fellows, to recruit both younger and older dentists, to encourage Fellows to share and educate others about ICD and to encourage all Fellows to make nominations.

Discussions on infrastructure comprised part of the Council meeting. There are currently approximately 15,000 ICD Fellows worldwide. Work is being done on developing an ICD presence in Russia. Julio Rodriguez has been appointed as an ICD Ambassador to Cuba. Myanmar has been re-structured as a Region rather than an autonomous Section. A number of Asian countries within Section XX have been combined to form the “ICD Asian Union” with its office in Malaysia.

The Council meeting featured a strategic planning session which concentrated on recruitment, infrastructure and retention. Development of a five year business plan has been recommended.

Project work and support remain a core priority for ICD leadership. An award was presented to William Cheung, Vice-President of the ICD Asian Union, for his support and services in disaster relief in Nepal in 2015.

It is noted that ICD will celebrate its 100th anniversary in 2020. A working party has been established to recommend activities for this momentous occasion.

The 2017 Council meeting will be held in Taipei City, Taiwan on November 10-11.

The 2016 Council meeting concluded with appointments to Executive Council for the coming year:

President Rajesh Chandna (India), President Elect Clive Ross (NZ), Vice-President Bettie McKaig (USA), Immediate Past President Phillip Dowell (UK), Treasurer Richard Smith (USA), Editor and Director of Communications Dov Sydney (Israel). Jack Hinterman remains the Secretary-General.

President Elect, New Zealand Fellow Dr Clive Ross CNZM
Next Induction Ceremony

The next ICD induction ceremony and dinner will be held in Melbourne in May 2017 at the time of the ADA Congress. Details will be sent to all Fellows in the first quarter of next year. Enquiries can be directed to Dr Ron Robinson, Administrative Officer, at admin@icd sectionviii.org.

Nominating New Fellows

The future of our Section relies on identifying outstanding professional colleagues who deserve the honour of ICD Fellowship. All Fellows are encouraged to nominate deserving dentists. A nomination form and guidelines are enclosed with this newsletter for your convenience.