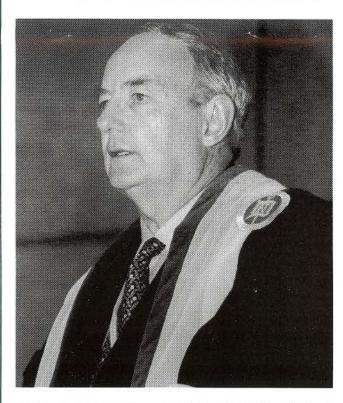


International College of Dentists Australasian Section

News effer

Issue Number 23, October 2004

PRESIDENT'S MESSAGE



While many are relieved that the Australian Federal election is now over and we can all resume our lives free of mail-outs and political advertising, one of the downsides is that oral health will now no doubt sink to the low profile it has sadly suffered in recent years. Political debate over national dental schemes is no longer of immediate relevance and we must accept that our Federal Government is of the view that oral health treatment is not generally part of its health care responsibility, being rather the responsibility of the State and Territory governments. The latter must now cease fruitless arguments over this issue as there would appear to be little chance of a change of attitude in the

early years of a Federal government, which has been elected with an increased majority.

There are serious problems to be addressed if good oral health and access to care are to be enjoyed by all Australians. It would seem that, even among those sections of the population that have had improving oral health in the past, notably schoolchildren, the situation is deteriorating.

Other disadvantaged groups in the community and those with special needs continue in a poor state of oral health and public sector waiting lists continue to grow.

An emerging factor of a particularly serious nature is the forecast workforce shortage. Unless there is a significant increase in the number of dentists being trained in our dental schools, Australia will suffer a serious workforce shortage in future years. Spencer et al have estimated that, in the year 2010, we face a shortage of some 1500 dental providers that he translates to the equivalent of 3.8 million dental treatment visits. He also recognises that, in times of shortage, it is only natural that the graduating dentists will seek more rewarding opportunities in the private sector, thus further depleting the needy public sector.

State and Territory governments must act immediately to reform the systems of public dental care and guarantee that funding is directed to those most in need. The Commonwealth government, whilst not directly concerned in oral care provision, must provide leadership in quarantining oral health funding within finances provided to the States and Territories and must continue to assist, through the NH& MRC, with funding for national oral health research.

President: Rob Butler Treasurer:

Registrar's Report

Membership

The Australasian Section comprises 331 active members. There are 286 Australian Fellows, and 41 New Zealand Fellows. There are also two Fijian Fellows, and two Australian Fellows resident in France and Malaysia respectively.

Life Membership numbers 151 in total, including 127 Australian Fellows (one resident in the UK), and 41 New Zealanders.

Convocations

Since the last Newsletter, a Convocation was held in Christchurch in August of this year, in association with the Biennial meeting of the New Zealand Dental Association. Four New Fellows were inducted: Michael Bain, Christine Casswell, David Hay and Brendan O'Dea. The ceremony was held at the Crowne Plaza Hotel, and was followed by a luncheon attended by both Fellows of the International College and the Academy of Dentistry International.

The next Convocation of the Australasian Section will be held in Adelaide in association with the 31st Congress of the Australian Dental Association, on Saturday March 5th, 2005.

Meetings

A dinner meeting of the Section was held at the Athenaeum Club in Melbourne on August 5th of this year. It was attended by over fifty Fellows and partners. Dr Ed Stanley presented a 'state of the art' address on Stem Cell research to enthusiastic response. The Treasurer, Dr Gerry Dickinson, organised the meeting, which was attended by interstate and local Fellows.

Projects

A fundamental aim of the International College is the support of Dental Services in areas of need. The Australasian Section has traditionally contributed to communities in the Pacific region as well as South-East Asia. Recent grants have been made to aid projects in East Timor (through Dr Sandra Meihubers), Papua-New Guinea (through Dr John McIntyre) and Cambodia (through Dr Callum Durward). The Section is concerned to ensure that its grants provide clear and direct assistance to appropriate communities.

Apology

In my report for the June Newsletter, I omitted the name of Dr Robin Hawthorn, who had received an OAM in the Queen's Birthday Honours List - I wish to express regret for the error. Fortunately, Robin was mentioned elsewhere in the Newsletter by the Editor, who displayed greater efficiency than myself.

Dr Braham Pearlman Registrar, Australasian Section ICD

Is Australia's oral health on the downslide?

In a paper commissioned by the Australian Health Policy Institute, University of Sydney, and presented in November this year by Professor John Spencer, University of Adelaide, it was reported that there was a deterioration in dental health status among two significant groups - school children attending the school dental services and adults attending public dental clinics. A number of studies carried out by Armfield, Spencer and others from the Australian Research Centre for Population Oral Health (ARCPOH), University of Adelaide, have shown that since the mid-1990s, decay levels among these two population groups have increased. Given that there are also a large number of disadvantaged members of the community who have inadequate access to public dental services, there are clear indications that large numbers of Australians, albeit a minority of the population, are facing a crisis in oral health.

In his paper, Spencer suggests that this is leading to a polarisation of the burden of oral disease and points out that access to dental care is also polarised, with a deterioration of this access among eligible adults over the past decade.

In an analysis of the financing of dental services, Spencer shows that State and Territory governments have increased their funding levels since the Commonwealth Dental Health Program of the Keating government was withdrawn, although these increases have not made up for the shortfall. He is critical of the current Commonwealth funding direction in the provision of the rebate system for private health insurance. He points out that only approximately 4% of those visiting a public dental clinic have private dental health insurance, although

some 20% of those eligible have private cover, and that this government policy only further polarises the provision of dental care away from those most in need.

The forecast dental workforce situation is serious, with an estimation of a shortage of some 1500 providers by 2010, being the equivalent of a provision of some 3.8 million dental treatment visits. Undoubtedly, the public sector and rural areas will suffer most from any shortages. Some would say that there is also the danger that governments may see the need for short term solutions, with relaxation of registration requirements in an attempt to recruit overseas workforce. Escalating university costs and their recovery from students will only lead to higher fees in attempts to pay off student debt and encouragement for new graduates to seek the more financially rewarding positions, in preference to public sector jobs.

In his paper, Spencer makes a number of recommendations. These are:

- · Extension of water fluoridation
- Engagement in oral health promotion as part of general health promotion
- Revitalisation of the school dental services, including population oral health promotion emphasis, clinical prevention modalities and targeting of specific groups
- Reform of the public dental services with interaction with the private sector, priority setting and targeted programmes
- Reshaping of funding arrangements for public dental care, specifically through and Australian Dental Care Agreement involving Commonwealth and States/Territories, with setting of benchmarks and minimal funding levels
- Expanding the dental workforce, with the aim of Australia being self-sufficient in this respect

The established links between oral health and general health have stimulated general health community interest in the deficiencies in dental service provision. It is now common to see medical bodies drawing attention to the nation's problems in oral health, something that dental organisations have been doing for a number of years. Spencer's paper, delivered at a general health forum of some standing, will no doubt contribute to the debate.

Dental Expenditure

Recent data from the Australian Institute of Health and Welfare shows that there is an expenditure of some \$4.1 billion on dental services, almost 67% of which is contributed by individuals.

For the period from 1992 - 2002, real growth in dental health expenditure was 3.9%, compared with a growth of 4.5% in total health expenditure over the same period. On the other hand, during the five years from 1997-2002, dental expenditure increased 1.6% faster than total health expenditure.

In the 2002-2003 period, private health insurance fund expenditure on dental services totalled \$977 million, some 12.9% of their total expenditure. It is little wonder that private health insurance funds seek to control the way in which dental services are provided! He who pays the piper

International Council

A meeting of the Council was held in Orlando, Florida at the end of September, avoiding Hurricane Jeanne by one day and causing small delays to a few, but all survived and fruitful discussions followed.

By now you all should have received your copy of the Globe which incorporated two years of events and reports, and hopefully from now on it will be produced on an annual basis to be mailed in April-May of each year.

The Council will also be trialling a six monthly Newsletter to be issued between Globe publications to keep Fellows more up to date with news of the College and the various activities of the Sections.

This will commence in September, 2005 and will be available on the College web-site - www.icd.org.

The College is to produce an up to date roster of all Fellows

and their details which is to be placed on the College web-site. The web-site continues to be developed and each Section is being encouraged to place as much information as possible about their activities, meetings, projects etc. to keep all Fellows informed. The cost of all this will be in the vicinity of \$15,000.

The image brochure has been produced and sent to each Section and this can be adapted for each individual Section's needs.

The Australasian Section has found it increasingly difficult to pursue some of its aid programmes in the Pacific region due to unrest in areas such as the Solomon Islands, Fiji and Papua New Guinea, and following discussions we can now look further afield to provide assistance and sponsorship in places such as Laos, Vietnam and Cambodia.

The following Fellows will hold office in 2005:-

President:

Dr Lon Carroll(USA)

President-Elect: Dr Chan, Chao Chang (Taiwan)

Vice-President: Dr Donald Johnson(USA)

The next meeting of the College Council will be held in Taipei, Taiwan in September, 2005.

Geoff Hall International Councilman

Editorial Notice

The Newsletter editor welcomes contributions from fellows which can be sent to:-

8th Floor, 68 St Georges Terrace PERTH WA 6000 (Hard copy)

dick@orthodonticclinic.com.au (emailed copy -photographs acceptable)

In common with many organisations, Australasian Section of the ICD can foresee cost savings and increased convenience to fellows by electronic distribution of the Newsletter.

While this may not happen in the life of the current Board of Regents it is planned to add emails of fellows to the address database.

To this end fellows are asked to forward their email addresses to either of the above addresses to start this process.



ICD Australasian Section Convocation and Luncheon 5th March 2005 - Adelaide Convention Centre

The next Convocation and Luncheon of the Australasian Section will be held in Adelaide in association with the 31st Congress of the Australian Dental Association, on Saturday March 5th, 2005.

Reply slip to:

Dr B A Pearlman

Registrar

ICD Australasian Sect 10 Michael Cres

VALENTINE NSW 2280

WEELTHINE HOW 2200
Name:
Accompanied by:
I will attend the ICD Convocation and Luncheon at the Adelaide Convention Centre on Saturday 5th March 2005

I enclose \$.....in payment (\$75.00 per head)

Please RSVP by 24th February 2005 for catering purposes.