



THE BRITISH SOCIETY OF PERIODONTOLOGY

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NEWSLETTER

November 2004

PRESIDENTIAL ADDRESS

Survival of the Species Homo Periodontus



Earlier this year Judy and I visited the Galapagos Islands, off the coast of Ecuador, the islands on which Charles Darwin based his "The Origin of the Species". He actually gave it a second title - "The Preservation of the Favoured Races in their Struggle for Life" - and he made some very pertinent remarks relating to the way in which species ensure survival by

changing and adapting to their environment that we felt paralleled what we are going through now in periodontology.

When I qualified, I did a 6 month general duties house job and then was appointed a lecturer at King's. Contrast that to what happens now in my present institution, where I wouldn't get a lecturers job without a PhD. If you wanted to be a clinician the only exam that you did was the FDS. I did my primary Fellowship, which was really a rehash of second BDS and in career terms was probably less important than my cycling proficiency badge and definitely not as important as my 50 yard swimming certificate. I then went to the Eastman as a registrar in Perio and I finished my Fellowship. Now bear in mind that the Fellowship was designed for people who wished to do maxillo-facial surgery and during the course of my Fellowship I never answered a question on periodontology. But that was the essential exam I needed to pass in order to become a consultant in periodontology. My apprenticeship included research posts and lecturer's jobs, I was cutting in and out of academic and hospital posts as you could do very easily in those days, while at the same time having a part time private practice. Practice respectability came from hospital commitments. It was a very flexible system.

There are 14 islands in the Galapagos each of which has it's own sub-species of the same species of finch. The main difference between the sub-species is the beak - adapted to the food supply available, thus ensuring survival. This is a very good parallel for myself and my colleagues who were in private practice at that time, practising periodontology in Central London. We came from a vast variety of backgrounds. There was David Manson, a senior lecturer with an Honorary Consultant contract. He had done a PhD on rat mandibles which was excellent for private practice. There was John Zamet, probably the best educated of us all because John had done a taught programme in periodontology in America but John didn't have the FDS (the

useless exam that I have), and for that reason it was many years before John was a consultant. There was Brian Wade and Robin Powell who were respectively the Royal and UC Heads of Department - they dabbled in practice. Their respectability for practice came from the fact they were heads of periodontal departments. There was Bernie Kieser who was in a similar situation to me and there was a new young chap who came on the scene. Peter Floyd, in his short trousers, had done an MSc and Peter was one of the first MSc's to come through the English system.

So there I was as a consultant and when these fledgling periodontists came to ask my advice about what to do to become periodontists I would suggest the one year MSc then work for a time as a registrar in a supervised capacity. Much better than the consultant programme. There were some excellent people who came through from that pathway.

Approximately 7 years ago, Brian Mouatt, Chief Dental Officer, recommended a specialist programme comprising a 2 years taught MSc with one year in a supervised capacity. I was absolutely delighted with his excellent suggestion which I felt was very achievable. The result would be a well trained specialist and most importantly it was extremely flexible. People could come from general practice, develop an interest in perio and go back and do it. I think I can speak for my colleagues when I say that those of us who were in private practice were extremely keen to see this specialisation programme come into being, not because of the mono-specialities *per se* but because we were sick and tired of seeing our patients in practice being butchered with extensive crown and bridgework by people who had no training and had absolutely no idea what they were doing. So we welcomed the specialist programme, not for the benefit of the profession, but as a protection for the general public. However, in all the recent talk about specialisation this concept seems to have been lost.

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This is the Galapagos hawk, the main predator on the islands. It lives on dead flesh, kills animals by sinking its talons into them and rips them to pieces with its beak. So, let us talk for a few minutes about the Royal College of

Surgeons. After Mouatt's extremely sensible proposals we have ended up with a 5 year training programme consisting of an MFDS examination to enter the programme, specialist training and an MRD. And we have the ludicrous situation that I see at the Eastman, with people that are training in periodontology sitting in the cons lab trying to wax up bridgework that they have to submit as part of their case study. I don't understand this. I also don't understand why we have training numbers for the mono-speciality. You must have a training number in order to enter the training programme so at the end of it you can get your certificate of specialisation. What's wrong with the law of supply and demand? The only reason I can see for training numbers is to allow certain authorities to control what is happening in a specialisation. To put this into perspective, there are 128 training numbers for orthodontists and there are 14 for periodontology. I'm sure people want straight teeth but why should the State pay for people to get them? I would suggest that it may be more important to have a branch of the profession that stops teeth falling out rather than one producing a population with aesthetic malocclusions.

What is the result of what is happening? Well, if you wished to complete a mono-speciality programme, taking into account course and examination fees, living costs, loss of earnings, paying off student debt and other expenses, it's going to cost you approximately £450,000 to become a specialist. This figure is based on Eastman training and I know if you go to places like Uzbekistan or Guy's it's probably cheaper.



This is George, a saddle back land tortoise from San Bartholomew Island. George is a very sad creature, with no wife, children, uncles or aunts. He is the very last of his kind. We have at present (July 2004) 278 people on the perio

specialist list, 85 of whom are also on the restorative list. Of those 278, 17 are people that I think you or I would regard as true periodontists. Essentially 68 of those on the specialist perio list are not really "mono-speciality". Twenty eight on the list have overseas (mostly South African) addresses, obviously people who are keeping their options open just in case. So the total number in reality who are active perio mono-specialists in this country is 182, looking after a population of 60 million. Now I was interested to know how many of these people were there by examination and how many were grandfathered. So I wrote a very polite letter to the General Dental Council who replied: "unfortunately the Council are not able to provide the figures for the routes of entry to the specialist list as we do not have either the resources or easy access to the type of data you require". In fact this information can be found in the appendix to the review of the dental specialities list which was produced by the CDO last year. In 2003 there were 265 people on the mono-speciality list, only 19 of whom were there by examination. Over a 5 year period, that is less than 4 mono-specialists a year coming onto the specialist list. The vast majority of these people are mediated. If you look at the entries in the register, you can get an idea of the age of people and how long they are likely to stay in practice. There's mine, I came on the register in 1967, it was a

beautiful summer, I remember it well, and you can reckon that someone like myself is going to be around for about 40 years. It is therefore possible to do some age-related analysis; if we take for example the period 1975 -1980 there are 52 people on the register who entered the profession then, and 40 years on there are going to be 52 people coming off the register, roughly 11 people a year. So if we've got 4 people a year coming on the register and 11 a year dropping off their periodontal perches and we've only got training numbers for 14, we're going to have a major discrepancy. And the end of this is going to be George - it's inevitable. We're going to be a dying breed.



This is the Galapagos cormorant. The Galapagos cormorant is a bird. It is a bird that can swim but cannot fly. Which brings us on to GDPs with a special interest in periodontology, or DwSIs. DwSIs would operate in a

primary care setting and manage simple cases of periodontitis which do not require or justify specialist or consultant-driven services. How clever the government are - if a patient is referred to a hospital department that is secondary care and they don't contribute any funds whereas in the primary care area the patient pays. DwSI (Periodontology) is a job title and not a qualification. It is a position of appointment to a contract to fulfil a defined job plan by commissioning PCTs. And incidentally these people must also have an NHS number. And here's the killer statement: "DwSIs (Periodontology) could work in their own primary care practice and treat their own periodontal patients or accept referrals from other primary care practitioners or work in a secondary care environment". What's that if it's not a specialist? Now I can quite understand why this should be attractive to the government but who supervises the training of these people? Who is going to be responsible for them?



This is the red footed booby. The word booby comes from the Spanish bobo meaning cloud. I just show you that because DwSIs are going to be administered by the Faculty of General Dental Practice.

So what are the solutions for a GDP with a periodontal patient when the GDP feels he has insufficient skills to manage the problem or isn't paid enough to do the treatment necessary? The answer is referral, but to whom does he refer? If the patient can afford it then he may be referred privately and be well looked after because we have a specialist register and people on the register have skills. But what happens if the patient can't afford a private referral? Well, he may be referred to a hospital where with luck he may be seen by a mono-specialist (although probably by a restorative dentist) and he may be taken on for treatment or, as often happens, he may be sent back to the GDP with a treatment plan. This is the GDP who either didn't feel he had the skills to treat him in the first place him or was going to suffer financial loss in so doing. I'm now beginning to understand why the government finds DwSIs attractive. But be aware: DwSIs are semi-skilled, dumbed-down specialists and this is the future.

Now they have a major problem on the Galapagos - man introduced many alien species to the islands (donkeys, horses, cats and rats for example) and this is the biggest single threat to the stability of the islands' ecosystem. I would suggest to you that what we should be doing, instead of trying to introduce an alien species to the periodontal

world, is looking at the specialist programme that we have at the moment and trying to adapt it to make it possible for our interested youngsters to become the specialist periodontists of the future.

The blue-footed booby is similar to its red-footed cousin. The female is the slightly larger, honks extremely loudly and makes a lot of noise. The male of the species whistles very loudly. Now in professional terms I am old and I retire in a short time. But the majority of you are youngsters and if you feel that you have skills as periodontists which are valuable to the health of the population you must be prepared to agitate and you must honk and whistle extremely loudly in

the corridors of dental power. I was very discouraged to find out that this year there were no people putting themselves forward to stand for BSP Council and this is not the attitude that is going to ensure your survival. So, Ladies and Gentlemen, honk and whistle or I fear the periodontal health of this nation is going to go the way of George and we may as well get rid of our BSP oak tree and put the giant tortoise there instead.



WEBSITE

The BSP web site has been online since 1997. Many thanks are due to Graham Smart who, in conjunction with Miles Internet Limited, set up the site and now steps down as webmaster.

In 1998 the BSP established a regional educational initiative for GDPs and anyone else with an interest in periodontology. The website 'Meetings and Courses' page contains details of the Society's Autumn and Spring Meetings and information on the regional programmes and meetings.

The patient section has a brief but informative page on periodontal disease and its management. It also has a helpful link to the excellent American Academy of Periodontology website where a vast amount of information can be found. A link gives access to the GDC website to search for periodontal specialists.

There is a comprehensive links page with access to all the major periodontal societies, periodontal journal home pages, evidence-based websites as well as

numerous other useful dental links. Users will find this a good place to start searching the web for the vast amount of information that is currently available.

A more recent inclusion to the website is a case studies page. If any members have a case that they feel would be interesting to other members of the society then please send them to me at the address below. The Society has agreed that a payment of £100 will be paid for every case used.

Members should already have a username and password to enable them to access the members section. Members who have forgotten their password or who do not want all their details available on the website should contact Anne Hallowes.

Any suggestions on the website content would be much appreciated -addyld@cardiff.ac.uk .

Liam Addy

SPRING MEETING

Thursday 19th - Friday 20th May 2005

PERIO-RESTORATIVE DILEMMAS

When planning periodontal treatment an understanding of restorative dentistry is essential as it is pointless to spend effort, time and money periodontally treating a tooth which then cannot be predictably restored. Periodontists do not need to know how to perform restorative procedures but they do need to know if they are appropriate.

As periodontal and restorative dental treatments are interdependent, both must be considered when planning therapy, therefore it is not uncommon for the Periodontist to have to discuss methods of tooth replacement with the patient and the referring dentist.

The aims of this meeting are firstly to consider restorative factors that may influence periodontal treatment planning and secondly the periodontal implications of the various options for replacing teeth which cannot be saved or have been lost.

Vivian Ward, President



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NEWS ROUND UP 2003/04



Honorary Secretary
Dr Mark Ide

The AGM on 24th September 2004 began with the report of the new BSP secretary, Dr Mark Ide, on the Society's news and activities.

The President, Professor Richard Palmer, has had an exceptionally busy year, culminating in a highly successful and extremely well-attended Spring Scientific Meeting at the ICC in Birmingham.

Membership

The Society has 790 members comprising 9 Honorary Members, 654 Full Members, 16 Post-graduate Members, 23 Associates and 88 Hygienist Associates. Despite recruiting 80 new members this year, the overall membership has been hovering around this level for some time, and we are currently looking at new ways of increasing our membership.

2003 Autumn Scientific Meeting

The 2003 AGM was held on Friday the 19th September 2003 at the Royal Society in London. The formal Autumn Scientific Meeting entitled "Bacteria, Host Response and Treatment Outcome" began after Professor Palmer's Presidential address and continued in the afternoon, with presentations by Professors Greg Seymour, Michael Curtis, Philippe Hujoel and Dr Veronica Booth addressing issues of microbiology and host response in the aetiology of gum diseases, together with possible ways to manage periodontitis and the potential for periodontitis to impact on systemic health - or not!

Prizes, Awards and Scholarships 2003/04

The Society made its first "Research Prize" award jointly to Dr Anthony Roberts (Birmingham) and Dr Kevin Davey (Dundee). Two prizes of £5,000 were awarded. In future a single prize of up to £5000 will be made. The closing date for the next award is 31st March 2005 and details are available on the BSP website. The George Cross Fellowship Award was presented to Dr Adam Hasan, and the Marsh Midda Travel Fellowships to Dr Dan Sadoh and Dr Dean Barker (for travel in 2004). The Undergraduate Prize was awarded to Ms Roopa Khagram (Manchester) and jointly to Msrs Bashir and Sarwar from Glasgow.



Dr Dean Barker

Council Meetings and BSP Activities

Over the past year, there have been 4 meetings of Council, which have dealt with the following principal issues :

- *Standing Dental Advisory Committee & Review of the Dentally Based Specialties and Specialist Lists* The Society responded robustly to the initial draft documents that were floated at the end of 2003 and early 2004 with regard to DwSIs. Council is grateful to those members who wrote in support. The BSP has good representation on the group involved in developing DwSIs within DoH and with the FGDP.
- *GDC Specialist Lists Review Group* In addition we are

represented on the independent Specialist List Review Group by Dr John Coventry. A report on the Specialists Lists should go to the Education Committee of the GDC in October 2004.

- *"Gum Disease Information Bureau"* You will all have received communications regarding a website from the Gum Disease Information Bureau, which was carrying some members' home addresses on the web. Thankfully the company involved have contacted members and when requested removed details from the website.
- *NICE Guidelines* We have provided input to the NICE guidelines on dental recall and on diabetes, the former with more success than the latter.
- *Hygienist Issues* We have communicated with the NHS and BDHA concerning the provision of specialist hygienist courses covering periodontal issues. We agreed that courses should be held to help update hygienists but not to create specialist hygienists *per se*. We also replied to a communication received from the Council for the Regulation of Health Care Professionals (CRHP). We pointed out that their remit did not extend to Professionals Complimentary to Dentistry such as dental hygienists and therapists (who were also regulated and subject to investigation by the Dental Auxiliaries committee of the General Dental Council).
- *Joint Advisory Committee for Special Care Dentistry* We have replied to two documents published by the Joint Advisory Committee for Special Care Dentistry relating to the development of a specialist training programme in Special Care Dentistry. After discussion it was agreed that the Society would be willing to help with the development of the periodontal aspects of the proposed training programme. However there was concern that the document proposes that the three-year programme would lead to a Fellowship level exit qualification whereas all other comparable programmes in the dental specialties lead to a Membership (e.g. MOrth, MRD). Council wished to see this changed to ensure consistency between specialties.
- *Other Committees* Members of Council continue to play an active role on many external committees. Dr Floyd has represented the Society at the Dental Senate, while Dr Giedrys-Leper, Professor Palmer and Dr McLaughlin have represented the Society on the SAC. Dr Giedrys-Leper and Dr McLaughlin have completed their terms on the SAC and we are grateful for all their work on behalf of the Society. They will be replaced by Dr Paul Baker and Dr Ravi Saravanamuttu. Dr John Coventry continues to represent the Society on a Royal College of Surgeons Working Party on Dental Specialists in Practice, whilst Professor Iain Chapple and Dr Graham Smart are serving on a Working Party related to GDPs with Special Interests, chaired by Dr Roger Mosedale .

Birmingham Spring Meeting 2004

The Spring Scientific Meeting was held in association with the Scandinavian Society of Periodontology at the International Convention Centre in Birmingham between the



The President plus admirers!

23rd and 25th May 2004. Over 440 delegates were impressed by the facilities available, as well the combination of high quality catering and excellent clinical and scientific presentations. The opening John Richards Memorial Meeting featured a novel and popular interactive session on case management. Feedback suggested that this would be an exercise worth repeating.

Having experienced a magnificent conference dinner that evening, delegates returned the next day for a second series of presentations of the same high standard (see page 10 for further details). The meeting was sponsored by Astra Tech, Colgate, Oral-B Laboratories and Philips Oral Healthcare, and sessions on Tuesday were sponsored by 3i Implant Innovations, Geistlich Biomaterials, Nobel Biocare and Straumann. In addition, a further 22 exhibitors took stands in the trade exhibition. This is an outstanding number and we owe a debt of gratitude to Dr Paul Baker, our Commercial Liaison Officer. However such meetings could not happen without the extremely hard work and dedication of Ghilaine Ower, our Conference Manager, and Anne Hallowes, supported in this instance by Phil Ower, Graham Smart and Veronica Booth.



The President and guests before the Conference Dinner at the ICC

EuroPerio 6 2009

The bid for Europerio 6 in 2009 at the ExCeL site in London has proceeded well thanks to the hard work of Professor Hughes and our bid will be in competition with bids from Greece, Sweden, The Netherlands and Turkey. We have prepared an excellent bid and will await further developments with interest.

2004/05 Programme



Mark Ide with William Wade and Philip Preshaw

The first day of the Autumn Scientific Meeting on 23rd September 2004 began with the Teachers' Forum, chaired by Dr Mark Ide, on "Advances in periodontal microbiology & clinical use of antimicrobials", presented by Dr William Wade and "Full mouth disinfection",

presented by Dr Philip Preshaw.

This was followed by the Sir Wilfred Fish Prize presentations given by Filippo Graziani and Yu-Kang Tu. The two Fish Prize presentations were of a very high standard and the decision on a winner extremely difficult. In the end the prize was awarded to Dr Yu-Kang Tu. The presentations were preceded by an eloquent and humorous tribute to Sir Wilfred Fish which is reproduced in this newsletter. (page 8)



Dr David Manson with SWF Research Prize contenders Drs Yu-Kang Tu and Filippo Graziani



The Outgoing President is presented with a tankard by Past President Professor Phillip Dowell



Outgoing President Professor Richard Palmer congratulating new President Dr Viv Ward at the AGM, 24th September 2004

Dr Viv Ward was installed as President at the AGM on 24th September. His Presidential Address was entitled "Survival of Species Homo Periodontus" and caused a certain amount of mirth amongst the delegates!



Viv and Judy Ward at the Autumn Meeting

The new President's theme for the second day of the meeting was "My Way", in which colleagues well known to all the membership presented practically-based papers on their favoured methods for carrying out a variety of clinical procedures. The morning session saw presentations on regeneration using enamel matrix proteins from Dr John Coventry, plaque control from Mrs Jean Suvan and the elimination of root surface caries from Dr Martin Ursell. In the afternoon, Dr Graham Smith described his smoking cessation techniques, Dr Michael Zybutz "covered" root surfaces and Dr Elaine Giedrys-Leeper presented her technique for crown lengthening surgery.

The Spring meeting under the Presidency of Dr Viv Ward will be at Savoy Place, London on Thursday and Friday, 19th – 20th May 2005. The theme of the meeting is "Perio-Restorative Dilemmas" and more details can be found on page 3. The conference dinner will be held aboard the "Silver Sturgeon" while cruising along the Thames, giving delegates an opportunity to appreciate the sights of London by night from the river. Tickets £50 per person.



Present and future Presidents scrutinise the names of their predecessors at the Autumn meeting

Future meetings include the 2005 Autumn meeting at the Royal Society, London from 22nd – 23rd September, with the theme "Truth and its application in periodontics", and the 2006 Spring meeting at Keble College, Oxford from 25th – 26th March with the theme "Blame the bug, not the patient". Members are reminded that 2006 is EuroPerio 5 year, with the meeting in June in Madrid, hence the early Spring meeting. Discussions are currently underway regarding a possible joint meeting with other UK restorative specialist societies in 2006 or ideally 2007. Council will keep members informed of progress.

Education Committee

The Educational Initiative continues to be a success with over 35 regional meetings held during the academic year 2003-2004 for general and specialist dental practitioners and dental hygienists. Specialist level hands-on courses

were run in April 2004 at ICED in London and another on the use of regenerative techniques was held in September 2004. A Resource Pack is to be made available to all regional representatives to include information on the role of regional representatives, guidelines for organising meetings, budget summaries, a list of sponsors, evaluation forms for delegates and speakers, a list of speakers with their chosen topics and the like. Council thanks Dr Veronica Booth and her Regional Advisors for all their continued work this year. One of the prime aims of BSP is to promote periodontal education and Veronica and her team play a major role in this.

Website

The Society's website has continued to develop under the direction of Dr Graham Smart and through the Education Committee. Graham will be stepping down from this post and is to be replaced by Dr Liam Addy. The Administrative Manager now updates and directly inputs to the site. The site continues to provide valuable information to members, non-members and the public globally. This was borne out earlier this year, when we needed to avail the membership of the release of certain DoH documents related to DWSIs. We are currently considering a number of options for upgrading the website further in order to facilitate our management of content as well as providing a better service to you. There is still only one case report on the website. We would dearly welcome any suitable material for placing on the website. Good practice cases, or those used for Membership or Fellowship exams would be ideal.

Thanks to departing Council Members

Thanks were recorded at the 2004 AGM to the following Council members who stood down after the meeting :

- *Dr David Hillam* who had first served on Council in 1980.

Education Committee Report 2003-4

Throughout the past academic year the Education Committee has continued to support the periodontal education of both BSP members and non-members throughout the UK. Each region has access to financial sponsorship from the BSP, but each region has its own approach to the manner in which it delivers the educational opportunities. In the past year over 30 courses or meetings were run throughout the country as evening, half day or whole day meetings. Up to date information about future regional meetings can be found on the society's website (<http://www.bsperio.org>) on which details of the BSP representative for each region can also be found. We would recommend that members check the details of courses on an occasional basis as meetings may be added to the programme throughout the year. We hope that by sponsoring the diverse programme of regional meetings the BSP is helping its members to meet the requirements for continuing professional development.

Dr Veronica Booth, Chairman of the BSP Education Committee, would like to thank all of the BSP regional representatives who give their time freely to organise the meetings and courses. Without their support it simply would not be possible for the BSP to offer the Regional Educational

He had been Honorary Treasurer for 5 years and President from 1988-89. He was the first EFP General Secretary and was President in 1998.

- *Professor Iain Chapple* who joined Council in 1984 and had served as Honorary Treasurer from 1998-2004.
- *Professor Phillip Dowell* who had served as Chairman of the Practitioners' Section to 1998 and was President from 2002-03.
- *Professor Valerie Clerehugh* who had been Honorary Editor from 1999-2004. Professor Clerehugh is to be President in 2006-07
- *Dr Mary Gibson* who had been Chairman of the Practitioners Section from 1998 to 2004.
- *Professor Francis Hughes* who was retiring as the Member of Council elected in 2001. Professor Hughes would continue on Council as the EuroPerio 6 representative.
- *Dr Graham Smart* who had served on the Education Committee from 1998-2004 and had been the Webmaster from its inception.

Last but by no means least!



Ghilaine and Anne working hard at the registration desk

Dr Ide reminded members that the Society couldn't function without the advice, support and hard work of Anne Hallowes, our Administrative Manager. He pointed out that the Society relied on the generosity, patience and hard work of both Anne and of Ghilaine Ower who, as Conference Manager, had provided much support in organising and running our meetings.

Initiative and the society is very grateful to them for their commitment. She would also like to thank those BSP members who contribute their time and effort to teach on and deliver the courses.

This year the Education Committee ran the first two specialist level hands-on courses for BSP members. The first course in April was led by Dr Elaine Giedrys-Leeper and was on crown lengthening. The second course was on the topic of regenerative techniques in chronic inflammatory periodontal disease and was led by Dr Viv Ward. We're very grateful to both of them for the time they spent ensuring the success of these courses and to the teams of teachers who helped them deliver the teaching. Both courses were oversubscribed and were very positively evaluated by the participants. The Education Committee is therefore planning to develop further hands-on courses. Those wishing to register an interest in future specialist level hands-on courses should email ghilaine.ower@btopenworld.com.

Dr Mary Gibson recently retired as the secretary of the Education Committee, and we would like to thank her for her service in that role. We are however very pleased that she will continue in her role as one of the most experienced regional representatives. During the past year the Education Committee has welcomed new members Drs Philip Greene, Nik Pandya, Sarah Manton and Will McLaughlin who are already working hard for the Committee on behalf of the Society.



Outgoing Honorary Treasurer, Professor Iain Chapple, in action at the AGM

THE LIFE AND TIMES OF A BSP TREASURER!

My time as BSP Honorary Treasurer has been immensely rewarding and I have enjoyed every minute. Staying with the theme of Viv Ward's most recent meeting "MY WAY"..... I shall recall a few events to the words of Frank Sinatra, that linger in my mind during that period:

I Did It My Way

And now, the end is near
And so I face the final curtain
My friend, I'll say it clear,
I'll state my case, of which I'm certain.
I've lived a life that's full
I've travelled each and ev'ry highway
And more, much more than this,
I did it my way.

Regrets, I've had a few^{1,2,3;}
But then again, too few to mention
I did what I had to do
And saw it through without exemption
I planned each charted course;
Each careful step along the byway,
But more, much more than this,
I did it my way.

Yes, there were times, I'm sure you knew
When I bit off more than I could chew.
But through it all, when there was doubt,
I ate it up and spit it out.
I faced it all and I stood tall;
And did it my way.

For what is a man, what has he got?
If not himself, then he has naught.
To say the things he truly feels;
And not the words of one who kneels.
The record shows I took the blows -
And did it my way!

Read

Thank God its over
Just the last accounts to present to the AGM
No B.S. this time
Give the subs rise to them straight
Its taken me ages to work this lot out
Just accept it will you
No difficult questions from Hull or Hughes
Take it or leave it - I'm out of here

One or two cock ups (see below)
Well loads but I'm not admitting to them all
Hey – no one's perfect
And it got past the auditors
I gave them the spiel
Largely serendipitous rather than planned
Except the bits Anne did
They were properly planned her way

Well some of the Council knew
The VAT man was a bit scary
Which was most days really
It gave me indigestion
All 5ft 8 inches of me

Careful how you answer that one
I've got my pals @ the BSP to have a beer with
After a few drinks I must admit
I prayed over the VAT bill
But we got away with it
My way.

1. Whilst suffering from sleep deprivation after the birth of my first daughter I completely forgot the Speakers' Dinner at the rather exclusive R.A.C. Club, which Peter Floyd had kindly organised many months before. Whilst sitting in my jeans in Covent Garden with my good colleagues from Birmingham's Perio unit, my wife phoned to say Peter had been trying to make contact and they were worried about me. Roy Page and his new wife along with the other speakers had waited an hour before eventually having to order their meal. I arrived very late (having changed accordingly) to have the proverbial taken out of me by Richard Palmer and Peter Floyd, who had had a drink. I will always be grateful to them for totally de-fusing a very embarrassing situation. Peter forgave me (I think).



Dr David Hillam presenting Professor Iain Chapple with a tankard

2. Why did I ever allow Fred Smales to persuade me that the BSP Tree (the stand you see at every BSP meeting) was a good investment!
3. I never managed to out serve the last of the infamous BSP ties. Anne Hallows assures me that 4 have survived but didn't you feel proud to see David Manson wearing one during his fantastic recollections of the life and time of Sir Wilfred Fish.

Iain Chapple

SIR WILFRED FISH – AN APPRECIATION

J.D. Manson

September 2004



J. D. Manson

By 1920 Wilfred Fish was on the fast track, a married man with a child on the way, settled in practice in Sevenoaks (subsequently having Churchill as a patient), helping the great Colyer at a nearby hospital, and starting on the research for his MD at UCL. He was doubly qualified but always a general dental practitioner.

This was at a time when the Dental Act (of 1921) was being hotly contested by the medical profession. As an editorial in the BMJ of 1920 stated, "Medicine is a profession, dentistry a business". Dentistry was run by the GMC with not one dentist on its board. In 1939 the Privy Council appointed Fish as chairman of the Dental Board (of the 4 candidates, Fish received three quarters of the total vote), a position he retained until 1964, and in 1956 the General Dental Council was set up with Fish as its first president.

In his career he gave more lectures and wrote more articles than anyone in dentistry, and his research reports appeared so regularly in the BDJ that he became a household name. He was not a charismatic lecturer like Bradlaw; indeed he was rather a cold, aloof person, difficult to get close to, but he was an eloquent lecturer as one might expect from the son of a Wesleyan minister. He was immensely lucid and logical, making his case step by step, drawing his audience to an indisputable conclusion. One of Fish's most quoted lectures was "Research in clinical science", in which he spelt out the qualities of the good researcher. Curiosity came first, then enthusiasm, hard work, tenacity of purpose and a clear and logical brain. He was so eloquent that after he had talked to the American Dental Society of London, its secretary, my late friend Hamish Thomson, wrote a thank you letter in his own hand because he could not express his thanks sufficiently well in type. Can our community of e-mailers understand this?

One of the hazards of research is assuming that what you think you know is correct. Fish never took any received knowledge for granted, and always started with fundamentals. His work on the physiology of the dental tissues started with the question then debated - was enamel a vital tissue? This enterprise earned him a DSc for UCL. You all know his work on denture stability and the oral musculature, and those lingual flanges, or Fish fingers, which predated Birds Eye by years. His book sold out in weeks.

But when asked which field of research gave him the greatest sense of achievement he replied, "Oh undoubtedly – periodontia – one had to start from scratch." In those days gingival disease and pyorrhoea were mysteries. Thinking was confused. Even the great Canadian, H.K. Box, thought alveolar rarefaction preceded gingival disease. Fish found a sound basis in Gottlieb's famous studies of periodontal anatomy and pathology, and Fish always acknowledged his debt to the great histologist.

Fish believed that gingival health depended on the presence of a firm keratinous cuticle. In health there was little or no small round cell infiltration in the subgingival connective tissues, but such infiltration was present where the epithelium had been breached and a microscopic ulcer, a portal for toxins and bacteria, was present. In his famous paper of 1935 he writes:

"Signs of inflammation in the sub-epithelial connective tissue must be caused by one of three types of irritation - mechanical, chemical and physical or infective - it is almost safe to say that the chronic irritant is at first mechanical, since the epithelium is at first completely intact over these patches of cellular infiltration so that neither chemical nor bacterial irritants could reach the connective tissue concerned."

He could not know that small molecules of bacterial products could diffuse through the epithelium. His ideas were fortified when he went to Melbourne to collect an honorary DDS, and met H.V. Mattingley, an expert on the dental state of the Australian Aborigine, a people who had gingival hyperkeratinisation and little dental disease. So Fish came to believe that the gingivae received insufficient friction from our soft civilised diet, and therefore were inadequately keratinised, therefore easily breached by hard and sharp food particles. He believed that mechanical gingival stimulus to promote the needed keratinisation would prevent disease. This message came in 1944 in his marvellous little book, "Paradental Disease". The dental profession was persuaded to instruct patients in the use of balsa wood dental sticks – with, as you all know, consequent deforestation of balsa wood forests and a dearth of material for model aeroplanes.

One of the most interesting and personally far-reaching mistakes that Fish made can go under the heading, "The dog that fell off the roof of the RDH". It related to Fish's experiments on rickets in dogs. This was peripheral to the controversy with Lady May Mellanby over the causation of caries. She was the wife of Edward Mellanby whose work led to our understanding of Vitamin D and rickets, and as secretary to the MRC a very influential and powerful person.

Fish wanted to compare the effect on dogs of a diet short of Vitamin D compared with a control on adequate Vitamin D. He was surprised to find that both groups of dogs kept in cages on the roof of the RDH had rickets. Then he remembered that all dogs get rickets if not exercised. So he instructed a lab assistant to exercise all the dogs on the roof. Alas, that person was not vigilant and a dog fell off the roof into Leicester Square. There was a public outcry. The animal rights campaign so embarrassed the Management Committee of the Royal that they told Fish that he must restrict his work to small animals. Fish, in high dudgeon, resigned, and continued his work at St Mary's.

The scientific dispute with Lady Mellanby was coloured by social snobbery. She was from an upper middle class family, and both Mellanbys were Cambridge graduates with a great disdain for dentists and their research. Fish scarcely

had a finger touch on the lower rungs of the middle class. Furthermore Fish was a graduate of a red-brick university, Manchester. But the greatest irritant was Fish's financial success. In 1936 an article in the Evening Standard on the high earnings of top doctors reported that the dentist, Mr Fish, was earning over £7,000 a year, i.e. over half a million in today's values. In her private correspondence Lady Mellanby not only questions Fish's research, but calls him a social climber. No doubt, in an earlier age she would have regarded John Hunter in the same way.

Fish's research was in the same empirical tradition as that of that great surgeon and experimenter, and at St Mary's at the Meyerstein Laboratory Fish did some of his most important work - on focal infection. Meyerstein, a patient of Fish, was a great philanthropist to hospitals, and at that time patients with inexplicable chronic diseases like arthritis and rheumatism, even mental disease, were subject to the removal of tonsils, teeth, appendix, gall bladder, in fact anything removable without killing the patient, in the belief that these were the foci of toxins. Even children were not immune from the application of these ideas, and many children with heart lesions and some gingivitis had their teeth extracted, got bacterial endocarditis and died. Fish, with the bacteriologist Dr I H MacLean, demonstrated that

the idea of focal infection was without scientific basis, and their conclusions were accepted by the Ministry of Health. Clearances were no longer demanded by the doctors. Every endodontist should be grateful to Fish for demonstrating that the medical profession was more dangerous to public health than they were.

Politically Fish achieved even more. No-one since John Tomes had the breadth of vision and wide influence that Fish had. And what is more, according to the writer, Compton Mackenzie, Fish won the Second World War. Without his partial upper denture, supplied by Fish, no one could understand what Churchill was saying!

Fish lived the life of two or three men. So how did he do it? As I have said, his father was a Wesleyan Minister, and although Fish was not religious he lived by the Wesleyan creed that the road to salvation lies in making the most of every day.

John Wesley's mantra was:

Do all the good you can / by all the means that you can / in all the ways that you can /
In all the places you can / at all the times you can /
to all the people you can / as long as ever you can.

This was the road map – to coin a phrase – to Fish's life.

Sir Wilfred Fish Research Prize Abstracts

The dynamics of periodontal wound healing in dehiscence type defects following GTR therapy. A longitudinal study in monkeys.

Filippo Graziani, Department of Periodontology, Eastman Dental Institute, London



The aims of this study were (i) to describe the periodontal tissues formed in dehiscence-type defects during healing after GTR therapy, (ii) to compare the regenerated periodontium to pristine periodontium in the same teeth.

The study was performed on 10 *Macaca fascicularis* monkeys. The 1st premolars, 1st and 3rd maxillary molars were extracted 6 weeks later, plaque exposed chronically inflamed buccal dehiscence-type defects was created on maxillary 2nd premolars and molars. After additional three months, GTR therapy surgery was performed followed by biweekly plaque control. The animals were sacrificed 6 weeks, 6 months and 2 years after surgery. Tissue blocks containing experimental teeth were harvested, demineralised in trifluoroacetic acid and embedded in paraffin. Bucco-lingual serial sections of 5µm were cut parallel to the long axis of the roots. The sections were stained with hematoxylin-eosin. From each root 3 sections, 50µm apart, representing the mid portion of the defect were selected for light, polarised light and interference contrast microscopy examination. Histometric and morphometric measurements were then performed in different areas. At 6 weeks a thin layer of acellular cementum with extrinsic fibres had formed along the treated root surface. At 6 months the defect was healed with new mixed cementum, periodontal ligament and to some extent new supporting bone. While the cementum attached to the new bone via newly formed periodontal ligament had increased significantly in thickness by apposition layers of extrinsic/intrinsic fibre cellular cementum on

top of the initially laid acellular cementum, supracrestal cementum remained thin. The PDL was wider and the number of extrinsic fibres less than in the pristine cementum. At 2 years the healed periodontium showed the same characteristics as at 6 months but the cementum connected to new bone appeared twice as thick and the numbers of extrinsic fibres entering the cementum doubled resembling more the structure of the pristine periodontium. The cementum thickness and number of extrinsic fibres are however yet less.

It is concluded that 6 weeks after GTR therapy the structure of the regenerated periodontium is already organised. Over time the newly formed periodontium undergoes a maturation process which seems to be partly governed by function.

Analyses of the relationship between baseline disease and treatment effect in periodontal research: the problem of regression to the mean and its solutions

Yu-Kang Tu, Biostatistics Unit, Centre for Epidemiology and Biostatistics; and Leeds Dental Institute, University of Leeds



Objective: Many studies in periodontal research tried to investigate the relationship between baseline disease severity and treatment effect. In the previous literature, there were two approaches to solve this problem: one is to correlate or regress the changes in the treatment outcome with their baseline values; and the other is to categorize

the patients into several groups according to their baseline values of treatment outcome and to test whether or not the average changes in outcome differ. Our previous studies have shown that the correlation/regression approach suffer mathematical coupling (MC) and can give rise to misleading results. In this study, we wish to show that although the dichotomization approach avoids the problem of MC, it does not avoid regression to the mean (RTM) due to measurement errors and/ or biological variation.

Material and Methods: Computer simulations were performed to model the treatment of periodontal regeneration to investigate the impact of RTM on the significance testing of the differences in the average treatment effects between two groups of patients, which were dichotomised according to their baseline values, when in reality the treatment effect is constant and there was no differences in the variances of the two outcome measurements. Further simulations were performed on the significance testing of the differences in the average baseline values between two groups of patients that were dichotomised according to their changes in the baseline values.

Results: Computer simulations show that, when the sample sizes become greater, and when the ratio of standard deviation (SD) of measurement error over SD of the sample increases, the power to detect a spuriously significant difference between dichotomized groups increases. Simulations also show that the correction method proposed by Oldham corresponds well to the nominal 5% false positive rate (p -value) when error variances are constant.

On Friday 24th September, it was announced that the prize had been awarded to Yu-Kang Tu.

EDITORS COME, EDITORS GO.....



Outgoing...

This will be my last report after 5 years in office. With the tremendous assistance of Anne Hallows, last year's BSP newsletter was completed on time once again, and circulated to the membership in November. Anne's excellent rapport with the printers and her uncanny ability to prompt, nudge and get things done has made my role so much easier. Anne deserves my very special thanks. I am also grateful to my colleagues on Council who have provided and co-written various news articles and have supported me throughout my period of office. It has been a privilege to serve 5 different Presidents and the Society. I wish my successor well.

Val Clerehugh



Who looks more pleased about this handover!

Incoming...

I look forward to carrying on with the marvellous work that Val has done with the newsletter over the last 5 years and I hope I can continue to produce a useful and informative document for you, the BSP membership. You may have seen me wandering around with my camera at BSP meetings in the past, shadowing Val and her camera, a deliberate and cunning plan to ensure that we get some decent pictures between us. I suspect that this is why my name came up as Val's successor and I sincerely hope that Val will now do the same for me! I would welcome feedback from the membership on the newsletter (philip.ower@btopenworld.com) and whether there are any changes that you would like to see. Please get in touch. Anyone fancy a letters page?

Phil Ower

SPRING AND AUTUMN SCIENTIFIC MEETINGS 2004

Spring Meeting, Birmingham

The Society joined forces with the Scandinavian Society of Periodontology for a very successful meeting at the International Convention Centre, Birmingham 23-25 May 2004. This was the first time that this venue had been used by the BSP, and 445 delegates took advantage of the excellent facilities. Once again, we were all grateful that the conference and administrative arrangements were in the capable hands of Ghilaine Ower and Anne Hallows.



Professor Richard Palmer

The theme for the Conference was "The Recalcitrant Patient – Treatment Strategies from Behavioural to

Implants". The BSP's President, Professor Richard Palmer, with the aid of the Conference Advisory Committee, compiled a varied programme and this was delivered by a dazzling array of internationally renowned speakers.



Dr Ken Hemmings

An innovative interactive treatment planning session opened the proceedings for the John Richard Memorial Meeting. The audience entered into the spirit of voting for different case management options presented by Viv Ward, Ken Hemmings, Richard Palmer and Jan Wennström by using centrally linked electronic push button handsets on their chair arms!



Professor Jan Wennström



Professor Mariano Sanz

It was a pleasure for the Society then to welcome Professor Mariano Sanz of the European Federation of Periodontology to deliver the closing presentation of the Sunday afternoon.



Professor Ken Kornman



Professors Ray Croucher and Tim Newton

On the second day, Professors Ken Kornman, Jan Wennström, Tim Newton and Ray Croucher tackled the topic of the 'refractory' or 'recalcitrant' patient. Dr Markus Hürzeler



Dr Markus Hürzeler

shared his periodontal plastic surgery techniques and practical tips in treating the aesthetically demanding patient. A splendid reception and dinner followed in the ICC.

Biotechnical advances for the patient with missing teeth provided the focus for the last day, with contributions from Professors Paul Sharpe, Maurizio Tonetti and Lyndon Cooper and from Drs Hugo de Bruyn and Mithridade Davarpanah.



Professor Maurizio Tonetti

As ever, for a meeting of this size, the Society is grateful for generous sponsorship from Astra Tech Ltd, Colgate, Oral-B Laboratories and Philips Oral Healthcare and appreciates the support of the many companies who exhibited. All the delegates enjoyed

the trade stands!

Report by Valerie Clerehugh

Autumn Meeting, London



Dr William Wade

Teachers' Forum

The theme of the Teachers' Forum on the afternoon of Thursday 23rd September 2004 was non-surgical therapy, in particular the use of antimicrobials and the value of a full mouth instrumentation approach. Dr William Wade first spoke on "Advances in periodontal microbiology & clinical use of antimicrobials". Dr Wade first reminded us of the extent of the bacterial problem by quoting from Antony van Leeuwenhoek : "there are more animals living in the scum on a man's teeth than there are men in a kingdom". He went to describe the relationship between bacteria and their mammalian hosts (suggesting that antimicrobial use may have damaged this relationship), illustrating the enormous diversity of the subgingival microflora and describing the development of the ecological plaque hypothesis in relation periodontal disease pathogenesis. There was a ripple of alarm in the audience when we learnt that 90% of our body cells were bacterial! He questioned the need for antimicrobials if mechanical therapy was optimal but pointed out that most studies of adjunctive systemic antimicrobials showed some benefit. He concluded by advising that antimicrobials should be used with care and that microbial diagnosis was unnecessary.

Dr Philip Preshaw then spoke on "Full mouth disinfection". He too stressed the role of bacteria in disease pathogenesis, indicating that bacteria in a biofilm were over 500 times more



Dr Philip Preshaw

resistant to antibacterial agents than planktonic organisms. Biofilms must therefore be physically disrupted. He described the rationale for a global approach to this disruption, citing the studies from Quirynen and co-workers which seemed to show that this approach offered significant clinical and microbiological benefits. He pointed out however that some studies disputed these findings and it was clear that further research is needed in this area. He outlined the advantages and disadvantages of full mouth disinfection, suggesting that it might be appropriate for some patients but not necessarily for all. A lively discussion period followed both presentations.

Autumn Scientific Meeting



Dr John Coventry

For the meeting on Friday 24th September 2004, the new President, Dr Viv Ward, had invited close colleagues with whom he has worked over the years, to give short presentations on various clinical topics with the overall theme "My Way". Thus we were treated to a series of short, snappy, clinically-based presentations that were greatly appreciated by the delegates. For the morning session, Dr John Coventry first spoke on the use of enamel matrix proteins in regenerative therapy, showing some impressive cases and providing a number of useful tips in the use of this material. He was followed by some equally useful advice on how to achieve optimal plaque control, from Jean Suvan, and how to eliminate, prevent and treat root surface caries in periodontal patients from Martin Ursell



Dr Martin Ursell

The afternoon session was opened by a non-dentist, Graham Smith, who talked on smoking cessation by means of neuro-linguistic programming, a subject that was probably new to most. It was a tribute to Graham's public speaking skills that he was able to talk for 45 minutes in the "graveyard slot" after lunch, with a single slide, and keep his audience spellbound (or maybe we were all hypnotised without realising it!). Two highly competent and practical presentations followed, from Michael Zybutz on the coverage of exposed root surfaces and from Elaine Giedrys-Leeper on surgical crown-lengthening, that rounded of a very full and satisfying day of CPD.



Dr Michael Zybutz



Mrs Jean Suvan



Dr Graham Smith



Dr Elaine Giedrys-Leeper

The Society acknowledges the generous sponsorship of this meeting by Gillette (Oral-B) and Straumann.

Report by Phil Ower

Changes to the BSP Constitution

At the 2004 AGM, several changes to the Society's constitution were proposed and agreed.

Article 7 Section 3

Nomination from members for Council members other than Officers must be received by the Honorary Secretary at least six weeks prior to the Annual General Meeting and be circulated to all members at least three weeks prior to the Annual General Meeting.

Add on:

In the event of no nominations being received by these times, and with the approval of Council, the Honorary Secretary may waive these time limitations in order to facilitate nominations for election to Council.

Article 7 Section 6

The Council may employ an Administrative Secretary and an assistant to the Administrative Secretary to assist in the daily management and running of the Society and of Council's affairs. The Administrative Secretary will be present at

Council meetings and may offer advice and comment but will not be a full or voting member of Council, nor a trustee of the Society.

Changed to :

The Council may employ an Administrative Manager and a Conference Manager to assist in the daily management and running of the Society and of Council's affairs. Both the Administrative Manager and Conference Manager will be present at Council meetings and may offer advice and comment but will not be a full or voting member of Council, nor a trustee of the Society.

BSP Council

Reorganisation of the JCP Editorial Board in 2003 led Council to lose the post of Journal of Clinical Periodontology (JCP) Board Representative. This potentially led to a reduction in Council numbers, and so it was agreed that from September 2003 there would be four rather than the previous three "other" members of Council. In order to ensure representation from Scotland, Dr Penny Hodge from Glasgow was co-opted and her position ratified at the AGM.

MEMBERS OF COUNCIL 2004/05

President	Dr V J Ward
Senior Vice-President	Dr J B Kieser
Vice-Presidents	Dr T L P Watts
President-Elect	Prof. R M Palmer
Immediate Past President	Dr M Ide
Honorary Secretary	Professor P A Heasman
Honorary Treasurer	Dr P C Ower
Honorary Editor	Dr R J Tucker
Honorary Assistant Secretary 2004/05	Dr P J Hodge
Honorary Assistant Secretary 2005/06	Dr P Baker
Commercial Liaison Officer	Professor G J Linden
Other members of Council:	Dr R Saravanamuttu
	Dr P J Hodge
	Dr P R Greene

Representatives and ex officio:

President Elect (2005-06)	Professor V Clerehugh
Educational Initiative	Dr V Booth
Specialist Registrars	Dr A Roberts
EFP	Dr P S Hull
Webmaster	Dr L D Addy
EuroPerio6	Professor F J Hughes

SECTIONS

Teachers	Chairman:	Dr W Turner
	Secretary:	Dr P M Preshaw
Dental Practitioners	Chairman:	Dr N Pandya
	Secretary:	Dr P L Barnes

FUTURE MEETINGS

2005

Thursday and Friday 19 and 20 May - Spring Meeting
Savoy Place, London
Theme - 'Perio-Restorative Dilemmas'

22 and 23 September

Teachers' Forum, SWF Presentations, AGM and Autumn Scientific Meeting
The Royal Society, 6-9 Carlton House Terrace London
Theme - 'Truth and its application in periodontics'

2006

Saturday 26 March - Spring Meeting

Keble College, Oxford
Theme - 'Blame the Bug not the Patient'

EuroPerio5 - 29 June to 1 July - Madrid

September (date and venue to be confirmed)

Teachers' Forum, SWF Presentations, AGM and Autumn Scientific Meeting

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Practitioners' Section

Dr Mary Gibson and Dr Iain Manson had both informed Council of their resignations as Chairman and Secretary of the General Dental Practitioners' Section for personal reasons. The practitioner members of the Society were mailed for nominations for replacements and at the Section business meeting on 23rd September 2004 Dr Nik Pandya was elected Chairman, and Dr Paul Barnes Secretary, of the Section.