EuroPerio 8 coming to London in 2015

Also in this issue...

- BSP Presidential Address
- Body of Gods, Teeth of Yobs
- Tributes for BDHF Founding Father
As is traditional, the President told of a personal journey, but mapped his story to the themes of the congress “Perio, Perio, Wherefore Art Thou Perio - A collaboration between medical science and art” and “Harnessing the power of youth”...How you may ask?

Well Iain Chapple called his address “The Seven Ages of Man”, an expression whose origins lie in one of Shakespeare's monologues from the play “As You Like It”, which begins with the verse “All the world is a stage, and the men and women merely players”. Given that this was Shakespeare's 450th anniversary year, this seemed a fitting backbone upon which to build vignettes of a life story, illustrated with very personal images and video clips and lain's core values that spelled a word. The audience were challenged to a game of hangman and to guess the word that each letter, which was attached to each value, spelled out.

So we started with “Identity” and the importance of being comfortable with who we are and where we come from and, in a random order arrived at a sequence that included “Mentorship” being essential throughout home and working life, then “Optimism” – having a dream or a vision and believing you can achieve it. “R” appeared next for the importance of “Role Models” in inspiring us to achieve our goals, then “T” for the vital importance of “Teamwork”. This latter word was laboured and was in lain’s view essential for success at the highest level. “A” was to recognise the need for “Advocates” to smooth life’s journey, and “L” for “Luck”, which we all need from time to time. “I” stood for “Industry”, recognising that hard work pays off and is essential to many of life’s successes. The final letter was “Y” for “Youth”, the importance of youth and vitality in providing energy and refreshingly naive but often very effective belief in a goal or ideal. Iain pointed out that English had never been his strong point and he recognised there were two “M's” in the word “IMMORTALITY”, and he reinforced the importance of the Teamwork contribution to the first “T” in the word; otherwise his address may have taken on a completely different theme!!

He ended with a touching story of his Mother, who suffers from advancing Alzheimer's at 80 years of age and he emphasised how this “Seventh Age of Man” was an appallingly neglected one by the medical and dental profession, who did not seem to have care plans or protocols for caring for this group of society, who are ever growing in number as our population ages. A poignant end and one that set the scene for a day of lifestyle and medical management, which would end with Prof Janet Lord’s presentation on “As Old as your Cytokines” – recognising the need for healthy ageing and quality of life rather than quantity...a message also conveyed by Dr Tieraona Low Dog.

**Dates for Your Diary 2015/16 Events**

**17th – 18th April 2015**
The Dentistry Show NEC Birmingham
The BSP will be hosting the Periolounge with a range of speakers throughout the 2 days.

**Spring 2015**
A full programme of Regional Events is planned
To book please check the website for full details

**3rd – 6th June 2015**
EuroPerio 8, ExCeL, London

**Autumn 2015**
Regional Lectures and more...
Please check the website for full details

**22nd – 24th October 2015**
BDIA Dental Showcase, NEC, Birmingham

**7th – 9th April 2016**
BSP Annual Conference, Oxford

**11 & 12 November 2016**
Pan Dental Society Conference, ICC Birmingham

Full details of all these events are available on the BSP website [www.bsperio.org.uk](http://www.bsperio.org.uk)
The BSP invited delegates to congregate at SAGE Gateshead in Newcastle for a jam-packed, two-day meeting in April. This conference was filled with notable speakers attending from across the globe, providing varying insights and lively debates. The meeting started off with natural Newcastle humour, which kept reappearing throughout the talks.

Prof Jimmy Steele delivered the keynote lecture, ‘Population trends in periodontal diseases and implications for services in the UK’, highlighting the improvement of general oral health but the escalation in severe periodontal disease. Currently, contractual agreements offer dentists few incentives to treat these conditions, and the proposed contract has not defined the future roles of secondary care, specialists, and dentists with special interests.

Prof Nalin Thakker then described the influence of genetic mutations, in the correct environmental conditions, on the initiation of periodontal disease.

Then ensued back-to-back speeches from the USA with Prof Armitage firstly discussing the oral microbiome and instigation of periodontal disease due to disruptions in host-microbe homeostasis. Prof Offenbacher followed this explaining the role of oral microbiome inducing alterations in the DNA methylation pattern of host tissues in chronic inflammation and the basis of epigenetic upregulation.

Following lunch, Prof Preshaw considered the ‘Future of periodontal diagnostics’ such as measurement of GCF, saliva or genetic testing. The benefits of developing additional tools would only be beneficial if it were to yield additional diagnostic information and may only be used to detect biomarkers in specific patients. Dr Christoph Ramseier reflected on the continual process of delivering smoking cessation advice when managing periodontal care.

In the afternoon, surgical interventions to eliminate periodontal pockets via access, resective or regenerative techniques were discussed with Prof Eickholz. The day closed with Dr Andreas Stavropoulos describing the use of supportive periodontal therapy in minimizing the risk of peri-implantitis in periodontal disease patients.

The evening saw the BSP enjoy a wonderful drinks reception and dinner at BALTIC Centre for Contemporary Art. As a special treat guests admired the tilting of the Gateshead Millenium Bridge, which provided spectacular lighting across the River Tyne.

The second day started with Prof Herrera discussing ‘Systemic antimicrobials in periodontics: are they useful?’ Currently there is no clear protocol regarding antimicrobials. However they can be used as adjuncts to subgingival debridement in selected patient cases.

Prof Armitage returned to the stage to deliver an ever-controversial topic of the use of systemic adjunctive antibiotics in periodontal therapy. Through their deliverance there are shown to be clinical improvements in outcome measures. However their routine use currently does not outweigh the health risks they pose to society.

Prof Offenbacher also returned to discuss impact of periodontal disease on systemic health.

The concept of quality assurance was found difficult to apply, as periodontal disease is a non-linear, chaotic, dynamic process, explained Dr Oystein Fardal. Prof Linden considered the use of periodontal maintenance and its cost effectiveness in maintaining periodontal health. The final talk, delivered by Dr Finbarr Allen, discussed implant-retained prosthesis and whether they maintain quality of life.

Congratulations to the conference team for pulling off such a great programme and we look forward to the Autumn Conference in Birmingham and Europerio 8 in 2015!
BSP Launches First Strategic Plan

The BSP launched its first strategic plan at the annual business meeting on 21st September 2014 in Birmingham. The plan, produced by a working group comprising Iain Chapple, Helen Cobley, Philip Greene, Mandeep Ghuman, Peter Heasman, Ian Needleman and Philip Ower, was agreed by the membership and implementation has already commenced with the establishment of industry partnerships and an operational plan.

Whilst the BSP has always had a clear set of values and a mission, it was deemed timely by Council to develop the plan with a clear set of aims that will form a roadmap for the BSP’s activity over the next 5 years. The Strategic Plan is a live document and the group, comprising the President, 3 President Elects, ECG (Early Career Group) member and Administrative Manager, will meet annually to review progress against targets, and to continually update and refresh the plan.

The group met on several occasions over a period of 18 months in order to develop a new vision and mission, a process that led to an ambitious and exciting plan and one that will necessitate a re-organisation of Council and indeed changes to the BSP constitution. For those unable to be at the ABM, below are highlights of the plan, which led to an ambitious and exciting plan and one that will necessitate a re-organisation of Council and indeed changes to the BSP constitution. For those unable to be at the ABM, below are highlights of the plan, which will be delivered by specific working groups, with specific terms of reference, rather than standing committees. The groups will be small in membership but broadly represent the BSP’s membership.

Vision: “Periodontal Health for a Better Life” – this vision aligns with that of the EFP and embraces the importance of periodontal health to general health, quality of life and wellbeing, as well as oral health.

Mission: “Promote public & professional awareness of periodontology & implant dentistry to achieve our vision of “Periodontal Health for a Better Life” – the BSP delivers its mission by providing education, supporting research, engaging with the public, policy makers, health professionals, and industry.

Strategic Aims:

Aim 1: To operate an open process of 2-way engagement with patients, the public & other key stakeholders and provide exchange of knowledge, views & priorities between the Society & the public, patients & healthcare professionals;

Aim 2: To develop, implement & maintain strategic partnerships that will further the strategic aims of the Society & each partner organisation;

Aim 3: To ensure long-term growth & sustainability necessary for the Society to achieve its specific objectives.

The 3 aims are broad and recognise a need to communicate more effectively with the public and patients and to leverage greater impact in all we do by working more effectively with our industry sponsors, whose help we need to finance the various initiatives listed below.

Strategic Aim 1:

1. Develop a media strategy through which the BSP can provide a rapid response to media requests & disseminate crucial messages to patient groups & the wider public.

The importance of all forms of media, whether they be social media, traditional paper-based media (newspapers or health magazines), or indeed audio-formats to disseminate information and knowledge about periodontal health, periodontal and peri-implant diseases cannot be understated. Traditionally the BSP has been low profile in the media and the majority of the public have no idea what “Perio” is or means, or of its impact upon their lives and those of others. We commenced this activity with the EFP media team and Reena Wadia at the Birmingham conference, where speakers and delegates were interviewed and filmed for key messages and thoughts that will be edited and released iteratively over the next 12 months as we approach EuroPerio 8, and via various formats including our website and YouTube. However, in order to co-ordinate such activity we will engage a media consultant to draw up a media plan under the guidance of a BSP Media Group. The latter will be chaired by Reena Wadia (ECG) and supported by Ian Dunn and Helen Cobley.

2. Redesign & maintain a website to provide simple access for key stakeholders; a contemporary & effective primary interactive portal for the delivery of our Strategic Aims.

The website is now looking tired and is no longer fit for purpose in delivering BSP outputs and messages using contemporary formats and methods. Therefore Ian Dunn, our webmaster and Honorary Editor, has already started work on designing a new site that will hopefully be ready next spring. Ian is working on this with Canterbury Web and has already received ideas from members for the design, appearance and functional requirements of a new website, which must be attractive as the “window of the world into the BSP”.

3. Engage with the public & patients to raise awareness of periodontal health & to support, connect & campaign on behalf of all people affected by & at risk of periodontal disease to enhance the Society’s delivery of education, support for research & development of policy.

This is an ambitious plan that will be led by Ian Needleman as President Elect 2015-2016. It involves the establishment of a charity called “Periodontal Health UK”. The charity, rather like “Diabetes UK”, will be run by patients for patients and the public, and the BSP will help establish and support it, but will not interfere with what will essentially be an independent organisation. The charity will broadly aim to support, connect and campaign on behalf of all people affected by, and at risk of, periodontal diseases.

4. Engage with healthcare professionals regarding the effective delivery of periodontal care & the development of educational outreach.

In order to improve our engagement with all our stakeholders we will develop a publication strategy. This will involve:

Establishing a rapid response team to communicate quickly and effectively with professionals, public & media;

Developing and maintaining position statements for frequently asked questions (FAQs);

Developing education outreach opportunities;
Expanding our current educational programme;
Improving the Society’s “reach”.

There will be a need to establish a “publications” working group in order to effectively guide and plan this activity. In addition the “Education Committee” will cease to exist as its activities will be embedded within several “working groups”.

However, a major aspect of its former role will be taken on by the “Conference and Events Group” (CEG), chaired by the President and including the President Elect, BSP Conference Manager and an ECG member. The CEG will assume the duties of the former Conference Advisory Group and broaden its remit to regional events amongst other activities.

Strategic Aim 2:

1. Develop formal partnerships with oral healthcare industry to help achieve our respective strategic goals.

In order to fund this ambitious plan it is important the BSP secures financial support and therefore we have started developing “BSP Partnerships” with selected industry partners whose goals align with those of the BSP. Working together in a professional manner will benefit both organisations. There is no intention to endorse products or move into areas that members would be uncomfortable with, but there is huge scope to develop closer working alliances with the industry. This has been something the EFP have done for 7 years now and it has worked extremely well.

2. Establish an expert panel of senior/experienced clinicians representing all of the Society’s membership: Hospital Practitioners, General and Specialist Practitioners, Academics, Dental Care Professionals, to provide advice/support on policy development & implementation to Government, EFP, BDA, GDC & other professional & charitable health bodies.

From time to time there is a need to provide specialist expert input to working groups in policy forming bodies such as the Department of Health and GDC. The BSP has to react at short notice and draw upon expertise from different facets of its membership. We plan to create an expert panel that will facilitate this process and ensure we are represented in key discussions and policy making and therefore be in a position to influence.

3. Develop & nurture media relationships in order to provide a voice for the Society through traditional & contemporary media, as part of the BSP media strategy for the public & profession.

Given that the world we now operate in is dominated by media stories, the BSP are regularly approached to comment on media reports at very short notice. Or as a specialist professional body we feel compelled to react to a media story that may mislead the public or our patients, and thus require clarification. There may also be occasions where key research findings or events are deemed by the BSP as being worthy of media coverage. Therefore we need to develop relationships with columnists or medical reporters in different newswires or newspapers in order to help us disseminate our messages to a wider audience.

4. Establish a EFP support/liaison group led by the Federation’s ambassadors to facilitate 2-way engagement.

The EFP have developed a category of “junior officer” and the BSP have nominated ECG members for such a role. In addition the EFP representative of the BSP (currently Prof Griffiths) and the BSP President attend the EFP General Assembly. There is a strong desire by the EFP to engage more actively with national societies through such officers and the BSP intends to engage with this policy.

5. Develop & grow a database of Trade contacts to support national congresses.

The success of our conferences depends very much upon support from the industry, not only to engage sponsorship at Diamond, Platinum and Gold levels, but also to run a Tradeshows which is important to our members as well as to the Trade themselves. The importance of periodontal and peri-implant health to our patients and to the public purse strings has never been greater than today, therefore growing our base of industry contacts is timely in order to support our meetings and expose our members to new products.

Strategic Aim 3:

1. Develop an achievable plan to secure long-term growth and sustainability of membership.

The BSP is a society for our members and growing our membership is vital to our future stability and vitality. There is a need to develop approaches to recruiting new members and helping to spread our core messages to patients and the public via a thriving membership base.

2. Develop an achievable plan to secure & retain high quality management support for the Society.

We are incredibly fortunate to have truly superb management support team in Helen Cobley and Ghilaine Ower, but as we become more active delivering our strategic plan, we need to develop cover for these two key positions, to help support their delivery of our core business and to future proof of high quality management support.

3. Develop a Brand image which uniquely identifies the Society.

The BSP is a very highly respected brand within dentistry, but it does not have a brand image, a symbol that professionals, and eventually the public, identify our society. Brand images are important in today’s world, perhaps the best example being the “apple” on the back of i-phone and mac computers. We have already started to explore a simple, modern brand image that bases its impact through simplicity and colour…..it may mean a return of the Oak Tree in a modern guise…. or it may not……WATCH THIS SPACE!!!

Prof Iain Chapple

Want to Contribute?

Just a quick reminder that there is a case study section on the BSP website with new cases going up all the time.

Submissions should be sent to our Honorary Editor Dr Ian Dunn and successful submissions receive an honorarium of £100.

Full details: http://www.bsperio.org.uk/members/case-studies.htm
Body of Gods, Teeth of Yobs

Ian Needleman

On 14 October 2014 Last year’s, South Africa posted “Bodies of gods, teeth of yobs” their take on our recent paper and a fair representation of international media’s interest in this topic.

We started with an epidemiological study at the London 2012 Olympics. The project was a privilege and joy and certainly the most complex to organise that I have ever encountered involving collaboration between the London Organising Committee (LOCOG), the International Olympic Committee (IOC), UCL and OMUL. However, the enthusiasm from each organisation was exceptional throughout. We were situated in the dental clinic on the third floor of the Polyclinic in the Olympic Village, which was a state of the art health centre including mobile CT and MRI.

The study collected both clinical and questionnaire data with the games maker dental teams working flat out to carry out the examinations. I had the privilege of being in the village 3-4 very long days per week for the three weeks of the games mostly recruiting and consenting athletes for the study. Farida Fortune and Wendy Turner and their team were also wonderfully supportive from the service delivery element.

We recruited 302 athletes from 25 sports with a wide distribution geographically. The sample included athletes both from developing and developed countries. The headline results were of high levels of dental caries (55% and 45% of athletes respectively) and periodontal diseases (15% BPE 3 or 4 as worst score). An innovative element of the study was to investigate impact on performance by athlete self-report (equivalent to patient-reported outcomes). 40% of athletes were ‘bothered’ by their oral health, 28% reported an impact on quality of life and 18% on training or performance.

Whilst these are frankly startling data, it should be remembered that we sampled only from those visiting the dental clinic (although many were attracted simply due to the free examination, scaling and mouthguards).

The study was published in the British Journal of Sport Medicine in September 2013 and created a stir in media impact – it was weird to be interviewed by the BBC on a Sunday afternoon, having just returned from running the Robin Hood Marathon in Nottingham. But what has surprised people is the mismatch between the popular image of elite athletes at the peak of their game and in seemingly excellent physical health, but with oral health similar to that of disadvantaged populations. The paper has become one of the highest impact studies in the history of the Journal – not bad for oral health!

Subsequently, we have completed a systematic review (in press British Journal of Sport Medicine 2014) which also highlighted consistent findings of poor oral health in elite sport although the number of studies and their methodological quality are low. For us, the key learning outcomes were that robust epidemiological studies were needed and in particular on representative samples of athletes in order to understand the scale of the problem and how it might vary across different sports. Furthermore, the intriguing finding of impact of poor oral health on self-reported performance needed investigation with the development of valid tools for assessment as well as the possible underlying mechanisms.

Our next step has been a study in professional football over the 2014 summer pre-screening period. We have been fortunate to work with eight premier league and championship teams including Manchester United and Manchester City, recruiting most of each senior squad with around 200 players kindly consenting to participate. The data are under analysis and we hope to report results early in 2015.

Concurrently, we have secured funding for a PhD study to conduct careful epidemiology in representative samples of athletes together with the development of performance impact tools and mechanisms. We have received tremendous interest from GB teams and will be focussing on Olympic sports as well as professional rugby (with further research in football depending on the data). This study is now underway and we have an advisory group including Olympic athletes, sports and exercise medicine physicians and scientists and sport funding and policy-making bodies. We will report findings as each stage is completed.

In parallel has been extensive engagement with key stakeholders, similar to the research advisory group. I was honoured to become a member of the International Olympic Committee’s scientific committee for the 2014 conference on prevention of injury and illness in Monaco in March. This was a great forum to present our research but more importantly to understand how the sport and exercise medicine and science community were researching athlete health. We also presented a beta version of an evidence-based prevention toolkit for athlete oral health, attempting to distill best practice, but in a manner relevant to implementation in the elite sport environment. It has been received very favourably and we are working on further development before more general dissemination.

A further product of engagement was the first symposium on oral health and elite sport performance that we ran in London in April this year. This was highly successful in bringing together opinions and perspectives from oral health, elite sport and sport and exercise medicine and has achieved a consensus statement on oral health and performance selected by the British Journal of Sports Medicine for press release.
Again, media interest has been phenomenal, including the American Association for the Advancement of Science and BBC Naked Scientists. We even got to share the UCL front page with the Nobel Prize winner, John O’Keefe. In addition, we were delighted that the British Dental Journal agreed to simultaneously co-publish the statement to reach these different communities (slated for early November 2014). We were also invited to write a position statement for the Faculty of Sport and Exercise Medicine on oral health in elite sport which is due for publication any time.

So, our experience has been that the sport and exercise medicine community has been very supportive in developing this new field. Almost every team we have met has anecdotes relating to catastrophic experiences with lost or nearly lost medals due to oral health problems. However, in reality whilst highly significant, these are uncommon. For us, what is especially intriguing is whether poor oral health might also have smaller, less obvious, impacts on performance but on a larger number of athletes.

This research is all about teamwork and I would particularly like to acknowledge my co-developer, Dr Paul Ashley from the Eastman. What we have also experienced with this research, more than ever before, is the remarkable enthusiasm and energy of people to help, guide and support the work across elite sport, oral health, sport and exercise medicine and science and sport policy organisations. As a keen endurance athlete, the opportunity to research into a subject of passionate interest is like a dream. We also feel that with these collaborations, we have a wonderful opportunity to try to make a difference to the health and wellbeing of these athletes.

The BSP Faculty is a “virtual” faculty, membership of which will be a mark of esteem within the UK periodontal community. Its aim is to provide an expert group of educators who are formally recognised as capable of delivering high quality, evidence-based educational lectures and seminars in periodontology and implant dentistry.

**How will it work?**

- BSP members will be invited to become Faculty members by the President of the BSP, upon recommendation by Council.
- Eligibility will require members to have delivered a BSP presentation at a national or several regional events and have received positive feedback from delegates as an indication of their knowledge and expertise. This should be over a minimum period of 5 years.
- Nominations should be made by a BSP Faculty member to the President of the BSP, along with support from 2 other BSP Faculty members.
- Self-nominations are invited and further information can be found on the website at www.bsperio.org.uk

**HONORARY MEMBERSHIP**

Professor Richard Palmer and Dr Peter Floyd were awarded Honorary Membership of the Society at the recent AGM in Birmingham. Very well deserved and congratulations to you both.
The European Federation of Periodontology will be celebrating its Silver Anniversary next year. The BSP has always been an active and proactive member of the EFP right from its inception, with David Hillam originally taking a driving seat in the organisation and many other BSP members making great contributions since then. Now EuroPerio, which over the years has matured to be overwhelmingly recognised as the world’s leading conference in Periodontology and Implant Dentistry, is finally coming to the UK in 2015.

In fact the BSP has bid to host the EuroPerio meeting 3 times previously (twice for Glasgow and once for London) so for those BSP members who are getting a bit long in the tooth, like myself, the overwhelming thought is perhaps – “about time too!” So my challenge to the BSP, firstly, to ensure that the membership actually attends the meeting. For me it is difficult to think of a good reason why anyone would be a member of BSP but not want to attend our very own EuroPerio meeting.

Secondly, we really want to use this opportunity to raise the profile of Periodontology generally – within the profession, with other health professionals and the general public. You may have sensed an increased profile for “Perio” recently, including through BSP visibility, stories in the dental press, social media and also sometimes breaking through to general press and media. This is not an accident – we have a solid PR strategy working on developing this profile and leading up to next June.

One way you can all help with the promotion of Perio in the UK is to try to encourage your colleagues who are not BSP members to attend – in addition to the “specialist end” implant and perio master clinic and academic presentations there is a whole programme titled “contemporary practical periodontics” specifically intended for the primary care dentist and for dental hygienists. If each BSP member can attract one additional UK delegate who is currently not a BSP member then we will have at least 2000 dentists from the UK attending.

It is also a pleasure for the BSP to be working in partnership locally with the British Society of Dental Hygienists & Therapists on this project. The BSDHT are completely behind EuroPerio8 and indeed are using this as their only national meeting in 2015. Thus we hope we might attract at least a further 1000 hygienist delegates to the meeting. We expect the meeting to benefit greatly by the enthusiastic support and participation (as always) of the BSDHT membership.

**Scientific Programme.**

There are really so many top speakers on the programme, covering the whole range of topics in periodontology and implant dentistry, that it would probably be invidious to pick out specific sessions as potential highlights. I would also expect each of you to have your own potential favourite sessions, so just make sure you check out the programme which is online now. Suffice it is to say that we have inspirational clinical presenters, top periodontal scientists, and simply just the best communicators and speakers in these fields. Some of the sessions will certainly inspire even the most experienced clinicians, and some promise fireworks - where controversies within the field are debated by the well-held views of different experts!

Some of the general sessions of the programme do deserve specific comment and highlighting:

On Wednesday afternoon a special session being organized by the BSP will tackle the vital issue of public and patient involvement in Periodontology. We will be premiering a film, “The Sound of Periodontitis”, telling the story of the patient’s view of periodontal disease. The session will also feature a panel discussion including patients involved in the making of the film and experts in public engagement with time for Q&A with the audience. You will gain fresh insights into how periodontal disease affects people, how you might harness these insights for better communication with patients and for lobbying to promote prioritisation of periodontal health in Europe.
On Thursday morning, we are delighted that Professor Steve Jones FRS will give the Plenary opening lecture. Professor Jones is a distinguished geneticist, writer and broadcaster who is also regarded as one of the best scientific communicators in the UK. His lecture will be titled – “Incest and Folk Dancing : 2 Things to Avoid.”

The programme on Saturday will include parallel plenary lectures from Professors Jan Lindhe, Klaus Lang and Paul Sharpe, and will be followed by a closing session that will also mark the 25th anniversary of the EFP.

Social Programme

Regular attendees of BSP conferences will not be surprised to hear that there is a great social programme lined up to complement the scientific programme. The Opening Ceremony on Wednesday afternoon will try to capture something of London and will contain some surprises; it will be followed by a welcome reception in the main exhibition space. On Thursday evening we have an informal conference party which will include some light food, drinks and live band with dancing. This promises to be a typically enjoyable BSP-hosted party and will sell out very fast as the tickets are strictly limited to 1200. (A good incentive to register early and buy your party tickets then).

On Saturday evening after the conference is over there will be a grand Conference Evening and Gala Dinner. This will take place in the magnificent venue of the Royal Courts of Justice (and, incidentally will be the second last function ever to be held in this iconic venue). This evening will include reception, 3-course gala dinner and finishing up with live music and dancing.

The Perio Olympics?

Overall, many of the opportunities and challenges for EuroPerio8 do feel, in a small way, rather similar to those London2012. Indeed even our venue ExCeL London, one of the best large conference venues in Europe, was host to a number of sports during the Olympics (and coped with 0.5M visitors during that time). Firstly, we have the ambition to make this the best EuroPerio ever. Secondly, we expect to be very welcoming hosts for all our visitors to the meeting. And we have the opportunity for a large legacy for the BSP, for perio in the UK generally and ultimately for our patients also.

I am really looking forward to seeing you all in June 2015.
Professor Francis Hughes
Chair, EuroPerio 8

London 3rd – 6th June 2015

Patient Engagement Session EuroPerio 8
Prof Philip Preshaw

What is it like for patients with periodontitis? What do they think of the treatment we provide? How do they manage their day-to-day oral hygiene, and how do they comply with periodontal maintenance programmes? These are big questions that rarely get asked. As clinicians, we tend to concentrate on probing depths, plaque scores, and bleeding on probing, and perhaps we sometimes can be guilty of overlooking the impact that periodontitis has on patients’ daily lives.

The forthcoming EuroPerio 8 conference provides an ideal opportunity to tackle these big issues, and so, for the first time, there will be a session at the conference to explore this topic, in the form of a Public Engagement session. Plans are well underway for this landmark event which is likely to be extremely popular. It will involve a panel of patients discussing their experiences of the journey they embark upon once they receive their diagnosis and they progress towards achieving health. It will provide an insight into the impact that periodontitis has on people, as well as providing opportunities to develop new partnerships to improve periodontal health and care of the disease. This is the first time such a session has been run at a EuroPerio conference and it will act as a starting point for future development of engagement between patients and the public, dental professionals and periodontal specialists and other key stakeholders.

A leading UK film-maker is working with the BSP and patient representatives to produce a short film, “The Sound of Periodontitis” which will be premiered at the EuroPerio 8 session. This will be followed by discussions between an invited panel of patients (some of whom feature in the film), members of the public and dental professionals, to discuss their reaction to the film. The session will be facilitated by an experienced chairperson in public engagement in healthcare. Ian Needleman and Philip Preshaw (representing the BSP) and Julie Rosse (President of the BSDHT) are working together with the production company to deliver this important event.

This should be an inspiring and innovative session, sign up early to make sure that you can say...
“i was there!”
The Annual General Meeting took place on Sunday 21st September 2014 and provided a lively discussion. The highlights included the unveiling of the Strategic Plan and the awards of Honorary Membership.

The Autumn Scientific meeting took place this year at Birmingham Town Hall. Coinciding with the 450th anniversary of William Shakespeare in nearby Stratford-Upon-Avon, this 1834 Grade I listed hall with Roman influenced architecture, provided the perfect backdrop for the conference theme of a collaboration between medical science and art.

Over the next two days 380 delegates were treated to a packed programme of lectures and events centred around an integrated approach to periodontal therapy and important issues surrounding the success of surgical treatments and implant placement.

Following the Presidential Address from Professor Iain Chapple, looking at the seven ages of man, Professor Francis Hughes introduced Act 1 – Scene 1 the Integrative Medicine Session. This session considered the role lifestyle factors such as nutrition, sleep, stress, depression and exercise, play in the aetiology and management of chronic inflammation.

Dr Tieraona Low-Dog highlighted the fact that lifestyle and environment are major determinants of health and disease. She demonstrated that inflammation and insulin resistance are driving chronic disease and that while early detection enables disease management, this is not health promotion. In her second presentation of the day Dr Low-Dog identified eight integrative strategies for reducing chronic inflammation.

These included reducing sugar consumption (including fructose), increasing omega-3 fatty acids and polyphenols in the diet, identifying food allergies, improving gut health through probiotics, addressing stress, depression and loneliness, getting enough sleep and exercise.

This was nicely followed up by an illuminating presentation from Professor Manfred Lamprecht looking at the role exercise can play in supporting anti-inflammatory pathways. He presented the evidence behind the myokine concept, and was able to show that while IL-6 produced by macrophages, leads to an inflammatory response, muscle cells produce and release IL-6 without activating classical pro-inflammatory pathways. He suggested that in conjunction with specific nutrition, the correct amount of exercise can therefore, be seen as an anti-inflammatory mechanism.

Professor Thomas Dietrich then brought us up to date with the current evidence for the association between periodontitis and CVD. Several pathways for the relationship between periodontal disease and CVD have been postulated, either via increased systemic levels of inflammatory mediators or via bacteraemia. This is also compounded by non-causal factors, such as age, smoking, nutrition, stress, exercise and obesity, particularly in those with pro-inflammatory genetic factors.

There is strong epidemiological evidence that periodontitis imparts increased risk for CVD. However, RCT’s and intervention trials are needed to further confirm this. He recommended that more studies looking at periodontal history and/or CVD risk factors over time are required.
Act 1- Scene 2 in the afternoon focused specifically on the inflammatory process itself, with Professor Thomas Van Dyke discussing new understandings in the resolution of chronic inflammation and new families of lipid mediators derived from Omega-3 fatty acids. It is now recognised that resolution is not simply a passive termination of inflammation but an active biochemical process. Professor Van Dyke introduced lipoxins as anti-inflammatory lipid mediators in the resolution of chronic inflammation. Lipoxins bind to pro-inflammatory receptors and rapidly "switch off" the inflammatory process. They inhibit the migration of PMLs and eosinophils; they also prevent vascular leakage and block pain signals. Professor Van Dyke concluded that whilst periodontitis is still bacterial in aetiology, neutrophil-mediated injury plays an important role in establishing chronic periodontal lesions, creating a local environment favorable for the overgrowth of pathogens. Inflammatory disease, therefore, may result from the failure of resolution factors.

Professor Janet Lord concluded the first day of the conference by taking a look at age-related changes to the immune system and the impact on oral health. She introduced the concept of "inflamageing", highlighting the impact of nutrition and lifestyle factors in age-related immune decline. Professor Lord presented statistics on the rising incidence rate of CMV with age, stating the possibility of 70% of the UK population being seropositive by age 65 years. It was also suggested that this factor may also be part of the IL-1 immune risk phenotype. Evidence of increased IL-6, TNFα and IL-10 with age was also presented despite the absence of stimulation from infection or injury. Factors that influence age related inflammation include obesity, lack of exercise/movement, oxidative stress all of which exacerbate age related disease.

At the end of a very stimulating first day we were whisked off to the stunning Birmingham Universities Great Hall where we were treated to a fantastic performance by the children from the Playbox Theatre group before entering the Great Hall for an evening of good food, singing waiters, great entertainment and dancing. There was even a live video link to the AAP meeting in America so that we could congratulate them as they celebrated their Centenary year.

The focus of day two surrounded periodontal surgery and implantology. After a welcome from Dr Paul Baker, Act 2 Scene 1 began with Dr PierPaolo Cortellini discussing periodontal plastic surgery, highlighting the principles that influence the short and long term healing outcomes in periodontal surgery. This was followed by a thought provoking presentation from Professor Mariano Sanz identifying the different therapeutic options for achieving complete root coverage in the treatment of localized gingival recessions. Professor Sanz presented two surgical approaches to root coverage and demonstrated the use of sliding flaps with and without the use of replacement grafts. The morning presentations were rounded off with an informative presentation from Professor Anton Sculean, considering the importance of flap design and suturing on outcomes of reconstructive periodontal surgery. The main goal of successful surgery being a reduction in PD and a gain in CA with minimal soft tissue recession. He compared data on outcomes from both open flap and modified flap techniques, and also discussed the influence of flap designs in wound stability, advising against the use of vertical incisions.

After lunch everyone was treated to an organ recital from Professor Needelmaen. Finishing with the Crown Imperial Coronation March, the full power of the 88 stops and six thousand 32ft pipes was demonstrated leaving everyone wanting more!

Act 2 Scene 2 in the afternoon looked at the Myths and Realities of Implantology with Dr Anthony Summerwill discussing the provision of Teeth in a Day – Immediate Full Arch Loading. The rationale and outcomes of full arch loading were presented, along with surgical and technical issues related to the IFAL technique. Professor Frank Schwartz then looked at How do we Maintain Implants and Salvage Failures. After showing the importance of probing and baseline measurements, he then went on to clearly identify peri-mucocitis as being the first sign of implant failure caused by the presence of bacterial biofilm. When treating peri-implantitis and failing implants, Professor Schwartz recommended non-surgical therapy as a first phase. Although non-surgical techniques have limited effects, a reduction in inflammation and infection is required prior to a surgical approach to provide an optimal healing response in the tissues. He presented improvements in surgical techniques and innovated methods of surface debridement along with a review of biomaterials and soft tissue augmentation techniques in the management of peri-implant lesions.

Professor Stefan Renvert concluded the afternoon sessions with a look at Implant Survival - The Truth. He discussed the handling of biological complications occurring around dental implants and the risk factors associated with this. Strategies to reduce the risk of peri-implantitis and the loss of implants include the treatment of periodontal disease prior to placement, prosthetic design with adequate hygiene access, implementation of a smoking cessation program, the use of screw retained implant prosthetics where possible and the provision of a close monitoring system post placement.

The program concluded with a lively panel discussion and concluding remarks from Dr Paul Weston including an invitation to attend Euro Perio 8 in London next June.
BSP HONORARY MEMBER WINS PRESTIGIOUS EFP AWARD

David Hillam

The BSP is delighted to announce that David Hillam, Honorary member of the Society, has been awarded the Distinguished Service Award by the EFP in recognition of his tremendous contribution to the development of the EFP and its success.

During the founding meeting of the EFP in December 1991, David was appointed Secretary General. His appointment has been of fundamental importance in the development of the EFP. His amiable personality, his writing skills and dedication to accuracy in recording meetings, and articulating clearly the difficult issues facing the newly formed Federation played a major role during his period in office and beyond.

As Secretary General he played an important role in getting booklets printed on curricular guidelines in undergraduate and postgraduate education and distributed to all Deans of 225 dental schools and heads of Periodontology Departments in Europe.

After 7 years of serving as Secretary General, in 1998 he became President of the European Federation of Periodontology. He continued to serve as the BSPs representative up to 2002.
Obituaries

Mr Roy Howell
(BSP President 1983-1984)

It is with immense sadness that I write to inform members of the passing of Roy Howell who died peacefully in a residential home on Saturday 7th June 2014, aged 89. Roy was Treasurer of the Society for many years and President of the Society during 1983-1984.

Roy served in the Royal Air Force during the Second World War before studying dentistry at the Royal London from where he graduated in the early 1950s. After working in General Practice he took up the Lectureship in Operative Dentistry in Newcastle and, after Professor Hopper moved to Leeds in 1959, he took over the responsibility of Lead in Periodontology. He was also pivotal in the development of the School of Dental Hygiene at Newcastle.

I have special reason to remember Roy both as a teacher when I was an undergraduate at Newcastle and then as President of the Society when he held his Spring Meeting at the Gosforth Park Hotel, almost 30 years to the day prior to my own meeting at the Sage. Roy invited some ‘big hitters’ to Newcastle with Professors Ainamo and Page being ‘top-of-the-bill’. This was only 2 or 3 years after Page and Schroeder’s seminal publication of the histopathological classification of periodontal disease and it was truly inspiring, as a junior academic attending his first BSP meeting, to hear Professor Page giving his lectures on the Early and Established lesions.

Roy retired from academia in 1985 to care for his wife, Margaret, who had Parkinson’s disease. They moved to Devon where, until his death, he remained totally independent and very active in his pursuit of steam (and other kinds of) trains around the UK and other parts of the world, camera always at the ready. Indeed, I recall many journeys on the (now) East Coast line between King’s Cross and Newcastle with Roy, Robin Seymour and Ian Macgregor. Roy would often announce that we would be arriving ‘wherever’ in 7 minutes not from having seen landmarks from the window but from his extraordinary knowledge of the camber of the track in various places along the line. A truly remarkable talent!

Peter Heasman

Colin Hall Dexter - Tribute by Sally Goss

It is with huge sadness that I write this short tribute to Colin Hall Dexter having learned of his death on 6th July.

Sometimes in life you get lucky – and my luck was in meeting Colin Hall Dexter. I’d been to his lectures and marvelled at how someone could be so amusing and yet get across his very serious message about Prevention. At times I cried with laughter at his words yet to this very day I can remember all that he said (in particular the ‘Fruit Index of Periodontal Disease’ and ‘Architectural Classification of Dental Overhangs’) whilst lectures from other so-called eminent speakers have disappeared into the mists of time. And then I started work as the hygienist in his practice in Harley Street – it quite literally changed my life. His support and admiration for the work of dental hygienists knew no bounds. And he was a man so far ahead of his time with his skill in getting the preventive message over to patients. These days we hear people heralding ‘a new approach’. Co-diagnosis? We did it 30 years ago in Colin’s practice. Helping patients to understand their own role in controlling dental disease? We did it 30 years ago. Hygienists having an assistant to enable them to work more efficiently and effectively? We did it 30 years ago. I could go on and on. Since Colin retired I have heard nothing new about the Preventive message – I’d already learnt it all from Colin.

Life around Colin was tremendous fun. He could light up a room with his energy and dynamism. This enthusiasm for life allowed him to encompass so many roles. To briefly attempt to touch on them all: he was instrumental in setting up the British Dental Health Foundation and in later years became the Chairman twice. He ran the Gibbs Oral Hygiene Service, and later on the UK division of Mentadent, developing many dental health products which are still in use to this day. He was involved in establishing one of the early Corporates, Dencare. He ran memorable courses for dentists in Majorca and in his very successful practice in Harley Street. His Christmas parties were legendary. He loved food, he loved wine and he loved France. But more than anything, even more than dentistry, he loved music and he eventually retired from dentistry so that he could spend more time composing. His efforts were brought to life on 2 CDs which he released privately to family and friends.

I feel enormously privileged to have known Colin. He was a funny, kind and most generous man. The last of the truly great characters in dentistry has gone. We will all miss him.
Out and About

with the BSP admin team......

By Helen Coble, Administrative Manager

This year has been a busy one for the BSP team with two major conferences, 9 Regional Events and attendance at the Dentistry Show in February, the BDIA Dental Showcase in October and the BSDHT Oral Health Conference & Exhibition in November.

The Dentistry Show in February was an extremely well attended event in Birmingham where the BSP hosted the Periolounge. Speakers included Professor Francis Hughes, Dr Sarvi Drone and Mr Nik Gkranias. Dr Philip Greene introduced the speakers and the lounge was packed to capacity for each lecture.

The Spring Meeting at SAGE Gateshead, Newcastle in April was, as you have already read, a great success in the most wonderful of venues. Thanks to Ghilaine and Peter Heasman for a fantastic event.

June saw the first of the Regional Events in Cardiff, and this was followed by Guildford, Sheffield, Chester, Scarborough, Norwich and Exeter. Still to go in November are Exeter, Oxford and Aberdeen. These events have had a fantastic line-up of guest speakers including Peter Heasman, Richard Talwar, Francis Hughes, Ros O’Leary, Ian Dunn, Shekha Bhuva, Philip Greene, Paul Weston, Gareth Griffiths, Nik Pandya, Gerry Linden, Saffina Nanji, Nicola West, Joon Seong, Phil Ower and Marilou Ciantar.

A big thank you to Ghilaine and me to our local organisers who have really helped to get these events off the ground. They are: Matt Locke, Leo Briggs, Bhavya Mohan, Ian Dunn, Andy Moran, Hamed Karimi, Mark Neal, Adetoun Soyombo and Steve Bonsor.

The next round of Regional Events is being planned and hopefully will include a venue near you!

In September we all met up in Birmingham for the second of our own major conferences. You will have already seen a full review of this brilliant event. Thanks again to Ghilaine and Iain Chapple for a spectacular “bells and whistles” conference!

October was a busy month for me with the BDIA Dental Showcase at ExCel in London. Although unashamedly a “trade” show, there was nevertheless a lot of interest in the Society and Periodontology as a whole. Over 500 information packs about the BSP were given out at this event and the other non-BSP event, the Dentistry Show.

We are into November now and this month sees the last of this year’s Regional Events in Oxford, Exeter and Aberdeen as well as our attendance at the BSDHT Oral Health Conference & Exhibition in Liverpool – a lively and friendly event where BSP are always made very welcome. Please come and see me on Stand 28!

December is also a busy month, preparing for next year and taking on board the feedback you give us from all of these events. Your comments are invaluable to us and really do make a difference.

Thank you for all your support this year. It has been a fantastic year for the Society and as I write this round up I can report that our membership, for the first time in its history, is within single figures of reaching 1000 - one of many reasons to celebrate!

Early Career Group (ECG)

Dr Rajan Nansi

At the end of the Spring Meeting in April, the Society’s ‘Early Career Group’ (ECG) met for the first time since its inaugural meeting in London in 2013. This new group forms an exciting new sub-section that is evolving within the Society and highlights a refreshing change with the purpose of harnessing the power of youth and tailoring BSP activities so they are relevant to members who consider themselves to be ‘early career’. The intention is that the new group is as inclusive as possible in order to benefit all those wishing to develop their career within the field of periodontics, be it in primary or secondary care, education and/or research. Professor Iain Chapple presented a brief outline of the Society’s plans for the future and focused on how engagement of young practitioners as part of this strategy was key to the future of the Society and the appeal for new aspiring members to join us. This session was a pertinent conclusion to the group’s first session at the Autumn Meeting 2013 in London, where initial interactive discussions took place to begin brainstorming the scope and purpose of the new group and establish suitable eligibility criteria for membership.

Professor Chapple presented nominations for the position of Chairperson, Vice-Chairperson and Secretary for the group and an election by ballot was held to appoint these three executive officers. Dr Rajan Nansi, Specialist in Periodontics (East Midlands), was elected to the position of Chairperson. Dr Rajiv Patel, Specialist in Periodontics (London), was elected as Vice-Chairperson and Dr Praveen Sharma, Lecturer in Restorative Dentistry (Birmingham) was elected as Secretary. Rajan Nansi was invited to the stage for his acceptance speech and he presented the ideas and momentum that had been gained through initial discussions and from the website forum. His address and summary helped define the initial notions that were critical to the group moving forward in establishing a draft constitution and a planned non-executive committee to work with the executive officers. It was again a very well attended and interactive session, which reflected the vibrant outlook and appreciation our younger members have. It is their energy and enthusiasm that will help shape the future direction of the society and allow the younger practitioners within the BSP to remain visible, relevant, and influential.
Membership Statistics

- Full Members 670 (including 64 overseas members)
- Associate Overseas 12
- Postgraduate/SpR 53 73
- Associate Retired 9 9
- Dental Hygienist/Dental Therapist 159 159
- First Four Years 49
- Undergraduate 9
- Honorary 12
- Emeritus 1
- Total 994

Subscriptions for 2015

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<td>£136</td>
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<td>A dental practitioner who has retired from practice - NO JCP</td>
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Caption Competition

Last year’s caption competition was won by Praveen Sharma from Birmingham with:

“The auditions for Super(io)man started with a bang!”

This year’s caption competition comes from The Honorary Editor. Emailed submissions should be sent to Ian Dunn dunnian@me.com and his decision is final!
Council Members

President: Professor Iain Chapple
President Elect: Dr Philip Ower
Senior Vice-President: Professor Richard Palmer
Immediate Past President: Professor Peter Heasman
Honorary Secretary: Professor Nicola West
Dr Mike Milward
Dr Shekha Bhuva
Dr Ian Dunn
Dr Rosalind O’Leary
Professor Jeremy Rees
Dr Joon Seong
Dr Paul Baker
Dr Nikunj Pandya
Dr Aradhna Tugnait
Professor Gareth Griffiths
Dr Richard Holliday

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to Philip Ower for his excellent photographs
used in this newsletter

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