>>> of our colleagues. There will always be those posters who never have a good word to say about anything, but even the comments from other users seem worrying when talking about morale and the state of dentistry.

But something recently came about that really made me sit up and pay attention – the Heart your Smile Campalgn. This is a potential target for the ultra cynical, of course, but look at the logic and it makes perfect sense.

Launched by D. James Goolnik, the Campaign says: "Fewer people are going to the dentist because there is a low opinion of dentistry. People are not having regular check-ups because of negative

reasons such as fear of costs, pain and how they are treated."

Findings in the OFT have led to a reported conclusion that dentists' costs are not transparent and practices are not communicating properly with their patients.

As a result, the Campaign has been set up by a group of 15 industry leaders with the intention of improving the public's perception of dentistry.

This starts with an opening Manifesto for Change, which every dental professional should aspire to achieve.

These nine points are designed to be a catalyst to make a real difference in patients' and dentists' lives:

1. Be confident: Believe you can make the

difference.

- 2. Smile: It's attractive and it's free.
- 3. Connect: Join in, listen, understand.
- 4. Innovate: Challenge your boundaries.
- 5. Excel: Excellence is a journey, not a destination.
- 6. Inspire: Lead by example.
- 7. Mentor: Everyone benefits.
- 8. Respect: Treat every person as you wish to be treated yourself.
- 9. Care: Everyone's health matters.

The first step is to get the dental profession to embrace Heart Your Smile. Then the initiative will be taken to the wider public, where the ultimate aim is to educate patients about the positive benefits of dental health, and create a

strong attachment for every patient to their dentist.

I have to say, I have great admiration for the idea behind this movement and it's something, that in my opinion, the industry has needed for years. It is always hard to know how successful something like this will be when in practice, when the real issues and problems dentists face every day take priority.

But the fact is that many of the problems we do face could be prevented if we all become part of this idea. I think there is real mileage in this brave idea.

www.heartyoursmile.co.uk.

Good luck.



An end to "making do".

MICHAEL SULTAN,
clinical director of
EndoCare, discusses
new tools available for
endodontics...

HILE there is a degree of truth in the old saying, "A bad workman blames his tools", as far as endodontics is concerned, I think we deserve some credit for managing for decades with imperfect tools.

It's hard to believe how we persevered to enlarge sclerosed and curved canals with rigid stainless steel instruments; often they ended up ledged, perforated and straightened canals. Indeed, Treating the Curved Root was the title of many a memorable conference, but we struggled on using the best instruments we had in a difficult environment.

We also moved on from reamers to files. Although the idea of us trying to enlarge canals by filing all the way around it, progressively enlarging, would cause great mirth to engineers.

The real problem was that our instruments could not predictably file round comers. The most efficient way is a rotary instrument.

The advent of hyper elastic NiTi files was not the answer to all our prayers, as they were prone to fracture and expensive, but, on the plus side, they are efficient and designed for the job and thus, a solution.

In endodontic surgery, when the aim was to remove apical problems by raising a flap – resecting the root and using a bur to cut a cavity into the root with a retrograde filling, usually amalgam – we used to make do with what was available.

However, now we use microscalpels so the flaps can be raised neatly without excessive trauma to the gingivae. We also use microscopes to visualise roots, and ultrasonics to prepare cavities actually down the long axis of the root. Another great improvement is being able to place retrograde fills that seal rather than amalgam, which both leaked and tattooed the patient. While there have been significant developments in the range and capability of specialised instruments at our disposal, there has been no corresponding huge jump in success rates for all of our procedures.

But, we are both treating and re-treating many more difficult teeth with conventional endodontics. And the more recent clinical research papers suggest much higher success rates with treatments done with the newer micro-surgery techniques, than the 50:50 success rates of previous years.

The right equipment should improve the speed and success rate of procedures, albeit more in surgery than conventional endodontics.

However, having the right equipment gives us an added dimension. It encourages us to rethink when we should do surgery and when we should dis-assemble teeth, cutting off crowns and removing posts in order to re-treat.



ED ATTENBOROUGH, President of the BDTA, argues that collaboration and partnership are vital skills for the smaller dental suppliers who want to trade globally... HE fact that October's Dental Showcase had a higher than ever level of exhibitors is testimony to the vibrancy of the dental supply industry, even in these straitened economic times.

The UK has long been the home to innovative heathcare technology companies, and the sector is of enormous value to the country. A government report in 2009 identified over 3,500 companies, employing over 75,000 people engaged in the health and bioscience technology industry in the UK. These companies had annual sales of over £15bn.

Companies manufacturing and supplying dental technology form an important subsector of this larger market. They benefit from the cross-fertilisation of ideas and expertise within the sector, and the infrastructures that are in place to encourage and develop healthy and growing medical technology companies.

Dental technology companies can be expected to be similar to the overall profile of companies in the medical technology sector. It might surprise you to hear that 98 per cent of companies are SMEs, i.e. employing under 250 people; while 65 per cent are micro businesses, i.e. employing

less than 10 people.

Another feature of the market for dental technology, evident at Showcase, was the fact that it is a global business. UK dental technology companies are competing at home with an array of international competitors. If they are to grow and thrive, they will need to compete in overseas markets with these same companies.

The question which needs to be answered is, how can the predominantly small UK supplier hope to make its mark in the global marketplace?

Of course, part of the answer is that the international medical market is changing. No longer do the large conglomerates seek to dominate every part of the supply chain and every part of the research and development process. They recognise that there are activities that can be undertaken more effectively by smaller specialist companies, who can be more innovative and fleeter of foot.

Increasingly, there are good examples of collaboration between larger and smaller companies, which is being encouraged across the country by organisations such as Medilink. This company exists as a networking organisation and also,

in many areas, provides training events and mentoring for fledgling and growing healthcare and bioscience businesses.

In the past, such activities gained some support through government, particularly through the Regional Development Agencies, but, despite current austerity squeezing funds, it appears that these organisations are being able to cut their cloth accordingly, and still provide good support to companies.

In my own region of the East Midlands, the Medilink organisation also has supported companies by visiting important exhibitions in the US, and elsewhere overseas, to encourage their exporting opportunities.

The BDTA is actively engaged in helping members to promote their products overseas. In recent months, it has put together UK pavilions at international shows and developed a UK brand to help with recognition abroad. The Association has just been recognised by UK Trade & Industry as the Accredited Trade Organisation for the UK dental industry. This will allow us to expand our activities and to provide even more practical support to our exporting members.

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