bsspd BSSPD

newsletter

Volume 7. September 2009

The British Society for the Study of Prosthetic Dentistry

BSSPD President Editorial

Dr Craig Barclay



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'BSSPD - The next ten years': A society for the membership

In 2005 the Society commissioned a report 'BSSPD – The Next Fifty Years', many of the recommendations of which were adopted. The challenge for the society was to ensure the appeal of this society could be disseminated to the dental profession and the benefits afforded to all.

When I became President of this society back in April 2009 I felt incredibly honoured, while at the same time challenged, to steer this illustrious society on a continuing course to both expand it's membership, but also for the society to achieve the national and international recognition within the dental profession that I feel it deserves.

The society not only exists to run an annual conference, but also needs to be involved with member benefits throughout the year and voice the opinions of the membership with regards to political decisions. With this in mind, much support from BSSPD council has allowed the design and launch of a new modern website, conference fliers and posters. A new publicity mechanism has also been put in place and some work on changing the image of the society has been undertaken.

Understanding that this would be occurring during my presidential year, I started to put in place, many months ago now, ambitious plans for the Annual Conference to be held in March 2010 in Scotland. My aim was to hold a meeting that would appeal to a broad range of the profession while at the same time maintaining the standard of excellence for which our society is renowned. To be able to challenge other dental meetings, I felt it was imperative that we had to invite the very best of international speakers, as well as the finest national speakers available, to provide a forum in which other groups would feel welcome and also provide a lasting legacy for the society.

I think we have succeeded in all our aims, in that the conference will be preceded by a consensus meeting to be hosted by the Royal College of Physicians and Surgeons of Glasgow on Friday 26th March 2010 to which twenty national and international experts have agreed to contribute. The conference itself will start on Saturday 27th March 2010 in Stirling and five international experts have agreed to speak.

Prof Albrektsson, Professor Renvert, Dr Palacci, Dr Schwarz and Dr Ellner, for those working in the implant field, need no introduction and we have been extremely fortunate to be able to attract such a high calibre of speaker due to the financial support of our five platinum sponsors. This symposium day will address the important issues of implant maintenance and failure. The Saturday will be held with ADI, BSOI and BOS involvement and is open to both dentists and all dental care professionals. The evening dinner will be held in Stirling Castle, an impressive venue for an evening hopefully never to be forgotten.





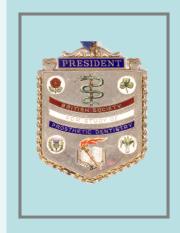
The following two days will involve five national speakers: Dr Peter Briggs, Mr Chris Butterworth, Dr Karl Bishop, Dr Paul Stone, and Mr Donald Cameron talking on dental implants in hypodontia, oncology and cleft cases, education in the subject and what to do when it goes wrong. Free paper sessions and a poster session, along with a formal conference dinner will also be held. A packed three days I think you will agree, which I am hopeful will appeal to a wide array of dental personnel, so that our society can share its renowned hospitality with all delegates. As you will be aware this is an exacting challenge for our society and therefore I would encourage all members to actively participate and encourage others to attend, what I feel will be a most exciting and thought provoking meeting.

I feel confident that all who attend Stirling will benefit from the content and hope it is one of those meetings that will live long in the memory.

I would like to finish by acknowledging the endeavour of many of our past Presidents and illustrious colleagues and members, who have in the last few years retired from clinical dentistry and left our society. I feel it is now imperative that the remaining membership unite and stand up to the challenges together, maybe with fewer national figures in our midst than previously, but with a greater collective voice.

We wish to acknowledge the support of our Platinum Sponsors: Astra, Nobel Biocare, Southern Implants, Straumann and 3i.

Craig W Barclay





2 Conference News

2010 Annual Conference – 27-29th March: Stirling



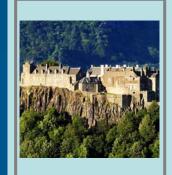


Presentations to annual conference

Those wishing to give an oral or poster presentation should submit a 250 word 'IADR' style abstract via the BSSPD website (www.bsspd.org) by the **18th December 2009**.

There will be limited number of standard oral presentations on the Sunday and Monday programme on implant topics only which will be fifteen minute slots as well as this a large poster demonstration area on topics related to all aspects of prosthodontics would be welcomed.

Please indicate the preferred type of your presentation and whether you wish to be considered for either the main Schottlander oral presentation prize or the Schottlander Poster Prize.



Fixed | Removable | Implant | Maxillofacial











Prof Tomas Albrektsson Department of Biomaterials / Handicap Research Göteborg University Göteborg, Sweden



Mr Chris Butterworth
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Dr Frank Schwarz Department of Oral Surgery Westdeutsche Kieferklinik University of Düsseldorf Germany



Dr Paul StoneSpecialist Oral Surgeon and
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Prof Stefan Renvert Professor of Oral Health Sciences and Research Director, Kristianstad University, Sweden



Dr Karl BishopConsultant in Restorative Dentistry and Cleft Palate
Lead, Abertawe Bro
Morgannwg University NHS
Trust, Wales



Dr Stefan Ellner Head of the Clinic for Prosthodontics Specialist Dental Care Centre Kalmar, Sweden

For further information about the British Society for the Study of Prosthetic Dentistry please visit our website at www.bsspd.org. More information about our conference including online booking will be available on the site from 01/09/2009.



2011 Annual Conference - 18-19 April: Birmingham

The 2011 BSSPD Annual Conference will take place in Birmingham on the 18th & 19th of April (with a meeting of council on the 17th).

The venue will be a purpose built conference centre, Austin Court – an 'idyllic waterside location' right in the heart of Birmingham (www.austincourt.co.uk). It is in easy access of the conference hotel which will be the City Inn (www.cityinn.co.uk). The conference centre is located behind the Malt House where Bill Clinton had a beer during a break in Proceedings at a previous G8 summit. The conference dinner will be held in the picturesque setting of the Botanical Gardens (www.birminghambotanicalgardens.org.uk).

The conference speakers will reflect the local flavour of the city and the opening lecture will be given by Miss Gay Penfold who is the Manager of the Jewellery Industry Innovation Centre (JIIC). The Centre has developed an excellent reputation both nationally and internationally for its holistic 'concept to prototype' approach to new product development, and for working closely with industry, small and medium sized enterprises, associations, universities, and research institutes. The remaining speakers will return to dentistry and cover the interaction of the restorative specialties with our own Society.

The City Centre of Birmingham has been transformed in recent years to an exciting blend of restaurants, museums, theatres and night clubs. Delegates will be well placed to sample much of this during the conference and we enjoy welcoming BSSPD to the City in 2011.







2012 Annual Conference - 31 March - 2 April: Liverpool

The 2012 BSSPD Annual Conference will be held in Liverpool on the 31^{st} March to the 2^{nd} April.

The theme for the conference will be 'Complex problems – innovative solutions' and the venue will be the Liverpool Hilton Hotel (http://www.hilton.co.uk/liverpool) which is currently being built and will be a landmark hotel, situated in the heart of Liverpool's "newly designed" city centre, Liverpool 1 with spectacular views over the historic Liver Buildings, Albert Dock and Chavasse Park.

Further details to follow.



2009 Annual Conference Report

The 56th Annual BSSPD conference was held in the week before Easter at the Hilton Hotel in York and was the first of a new two day format for the BSSPD. The conference was opened on the Monday by the President, Professor Mark Thomason, who expressed his delight in being able to present a superb line-up of internationally regarded speakers that would help the meeting re-visit the precepts of the Montreal Consensus Conference in 2002 and go on to develop the BSSPD York Consensus Statement on Implant supported Overdentures.

Monday's programme was a symposium on Mandibular Overdentures, at which the presenters offered a synopsis of the research available on the impact of edentulism on patients and efficacy of implant-supported mandibular overdentures in the edentulous mandible. Emphasis was given to both qualitative and quantitative research based on patient-centred outcomes of treatment. The team of speakers comprised Professor Jocelyne Feine from Montreal, the leader of the 2002 McGill Consensus meeting and Associate Editor of the JDR; Professor Ignace Naert from Leuven - (both recipients of The IADR Distinguished Scientist Awards for Prosthodontics), Professor Frauke Müller from Genève, Professor Paula Moynihan, Dr Janice Ellis and Dr Cath Exley from Newcastle. The speakers presented both qualitative and quantitative data that strongly supported the concepts of the use of implant supported mandibular overdentures as the minimal standard of care for edentulous patients.

The draft consensus statement was developed by the presenters and the BSSPD Council and was made available to all members via the Society's website. It was modified in the light of the symposium discussion following the presentations and members' feedback. The final version of the Statement will be published in the BDJ and in the autumn issue of the BSSPD newsletter, as well as being available on the BSSPD website www.bsspd.org

Monday's programme concluded with the annual conference dinner which was perfectly rounded off by the former Postgraduate Dean of the Northern Deanery, Mr David Smith, with a splendid after- dinner speech and toast to the Society.

Parallel sessions took place once again during Tuesday afternoon with a poster session and an educational session. The educational session, inkeeping with the conference theme, focused on the appropriateness of delivering training in implantology within the undergraduate curriculum. We were very fortunate to have Professor Jocelyne Feine from McGill University, Montreal, to shed light on the Northern American experience.















2009 Prize winners

Schottlander Oral Presentation

The Schottlander Oral Presentation Prize was awarded to Kushal Gadhia from Birmingham Dental Hospital for his presentation "Is botulinum toxin effective and safe? A systematic review of randomised controlled trials".

Kushal Gadhia (right) receiving his award from Dr Brian Schottlander (left)



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Schottlander Poster Prize

The Schottlander Poster Presentation Prize was awarded to Sam Rollings from Aberdeen Royal Infirmary for his poster "A novel technique for the fabrication of a speech bulb appliance – a case report".

Sam Rollings (right) receiving his award from Dr Brian Schottlander (left).

President's Prize

The winning clinical poster entry for the President's prize was Hiba Al-Diwani, an undergraduate from Leeds Dental Institute, for her poster entitled "Providing support for the pontic of immediate replacement, resin bonded fixed partial dentures that use the extracted natural tooth: a clinical report".

Hiba Al-Diwani (left) receiving her award from the President of the BSSPD, Professor Mark Thomason (right).





BSSPD New Graduate Award

The assessors agreed to make the award to three applicants this year – Kathryn Durey, Upen Patel and Ayanthi Wickramasinghe. Kathryn presented a poster entitled "A review of the activity of a multidisciplinary clinic" and Upen presented his poster entitled "Slippy skin and lazy bones: A prosthodontic rehabilitation".

The President of the BSSPD, Professor Mark Thomason with (from left) Ayanthi Wickramasinghe Kathryn Durey and Upen Patel.

Heraeus Kulzer Undergraduate Essay Prize This prize was awarded to Ambika Chadha, an undergraduate student from Kings College, London for her essay entitled 'Discuss the

evidence for the social value of prosthodontics'

BSSPD Research Award

The panel of judges recommended that the award be given to **Wouter Leyssen** who works at Kings College London. The award will support a study into the role of clinical dental technicians in the current dental team.



2008 Prize winners



Coltene Student Bursary The winner of the 2008 Colt

The winner of the 2008 Coltene Student Bursary was Eamon Howard–Bowles from Cork Dental School who presented his study entitled "The clinical performance of resinbonded bridges delivered by undergraduate dental students: a retrospective view".

Eamon Howard-Bowles (left) receiving his award from Samantha Mallison (Coltene-Whaledent).

Elective Prize 2008

The winner of this award was Freccia Williams, an undergraduate from Birmingham Dental School. She presented a poster of work carried out during her elective on marginal gap corrosion of dental implants.

Freccia Williams (left) receiving her award from the President of the BSSPD, Professor Mark Thomason (right).





Schottlander Prizes

Closing date for both oral & poster presentation is Friday 18th December 2009

The BSSPD, in association with Schottlander, offer two annual prizes for the advancement of knowledge in Prosthetic Dentistry.

The first prize will be awarded for a twenty-minute *oral presentation limited to dental implantology* (to reflect the theme of the meeting) delivered to the Annual Conference of the Society in 2010. A manuscript of the paper, submitted prior to the conference, will also be taken into consideration in the award of this prize. The Society gratefully acknowledges the generosity and continuing support of Dr Brian Schottlander for this award which is set at £750.

Schottlander also provide a prize for the best *poster* display/table demonstration on any prosthodontic-related topic. This takes the form of a cash award for £150 for a single winner. If the judges recommend that the prize should be awarded to two posters, the cash award would be £100 each.

Prize winners will receive a certificate and will be invited to a dinner hosted by Schottlander in the autumn.

Heraeus Kulzer- Undergraduate Essay Prize Essay deadline is Thursday 28th January 2010

The prize is awarded annually for the best essay on a topic chosen by the President. Information regarding this prize, valued at £250, is circulated to the Heads of Departments of undergraduate teaching units: the President's choice of essay title for this year is 'Discuss the prosthodontics needs of patients who have suffered from Head and Neck Cancer'. The entry form must be returned to the Awards Administrator at least two weeks before the essay deadline. The Society would be grateful if members were to actively encourage undergraduates to enter.

Coltene Student Bursary Closing date is Friday 18th December 2009

Coltene (UK) Ltd sponsor a bursary to assist undergraduate students with a study relevant to the field of Prosthetic Dentistry. Joint applications by two students as well as single authors are allowed. The award is valued at £400. A certificate will be presented at the Society Conference following the period of study/travel and the award winner(s) will be encouraged to present a poster at the meeting. PLEASE NOTE: *In addition up to two other applicants will be considered for BSSPD Bursaries of £300 and £150.*

BSSPD Travel Fellowship Closing date is Friday 18th December 2009

The £1000 travel scholarship is aimed at members of the Society who are Junior Staff or Specialist Trainees. It is provided to support applications, to fund, or partly fund, travel and cost of living expenses in the course of a research project or further education in Prosthetic Dentistry



BSSPD Research Award

Closing date is Friday 18th December 2009

The Society sponsor the award to encourage research into aspects of Prosthetic Dentistry. The award of £1000 is available to one winner per year who must be a current member of the Society.

The award will not be given to support travel to a meeting but should be used to support a research project with regards to the purchase of hardware or consumables.

The application should detail the exact nature of the research project and how the BSSPD funding will contribute to it. The winner of the award is required to present their results on completion to the society.

BSSPD New Graduate prize Closing date is Friday 18th December 2009

This prize will be awarded annually to up to three new graduates (up to three years post-graduation) to attend the Saturday symposium of the 2010 annual conference of the BSSPD in Stirling with all expenses paid (including up to £50 for travel), and one year's free membership of the Society. Applicants should submit a short three to five hundred word account of their reasons for applying and its expected benefits.

Undergraduate Student Elective award Closing date is Thursday 28th January 2010 & Thursday 22nd April 2010

The British Society for the Study of Prosthetic Dentistry, announces an elective prize for four undergraduate dental students on an annual basis. Each award would be to the value of £500. Applications would be considered to support an elective period of study related broadly to the field of Prosthetic Dentistry. The winners of the award would need to submit a report to the Society on completion of their elective and would be encouraged to present a report of their study, either as a communication, or a poster at the annual conference.

Potential applicants should note that the first two awards will be made from proposals submitted for the January deadline and the remaining two from those submitted for the April deadline. This is to allow for the fact that the timings for elective studies are different across the dental schools. Applicants can only apply for one round and therefore should complete the appropriate form so it is clear for which date they wish to be considered. Further details are available in the regulations document.

Full details, regulations and application forms for all the BSSPD awards can be found on the website (www.bsspd.org).

All enquiries about the Society's awards should be addressed to: Dr D.C. Attrill (BSSPD Awards Administrator) Dept. of Prosthetics, School of Dentistry University of Birmingham St. Chad's Queensway

St. Chad's Queensway Birmingham B4 6NN

Tel: 0121 237 2769 (secretary) *E-mail*: d.c.attrill@bham.ac.uk



BSSPD consensus statement

Introduction

In the seven years since the publication of the McGill Consensus Statement in 2002,1 uptake by dentists of implant technology for complete denture wearers has been slow. To help to improve this situation, this statement has been developed after examining the currently available data and is released as a support and follow-up to the McGill Consensus Statement.

This report was jointly created by members of the BSSPD Council and the panel of presenters at the BSSPD Conference in York on 6 and 7 April 2009. It is based on the data presented at the conference, the wider available scientific data and the experience of the BSSPD members and participants at the conference. It represents a wholly independent report and is not a policy statement for any profitmaking body or business and, as such, is presented in line with the mission of the BSSPD to advance patient care, education and research in fixed and removable prosthodontics.

Consensus statement

It is fully recognised that the rate of tooth loss in most industrialised countries has declined rapidly over the last two decades. Nevertheless, as a result of the steady increase in the mean age of industrialised societies, and because the overall prevalence of tooth loss increases with age, the proportion of edentulous individuals in these societies will remain significant. For over a century, the accepted treatment for edentulous patients has been to provide maxillary and mandibular dentures that rest on the soft tissues of the alveolar ridges and are not directly connected to them. This has been the traditional standard of care as there have been no practical alternatives. For many patients, these conventional complete dentures have allowed them to eat, to speak and to function in the wider society more easily than they could without any prostheses. Despite this, it is well recognised that many struggle to use dentures, particularly the lower denture, because of mobility and discomfort, and these difficulties have been shown to be linked with social, psychological and functional disabilities, a situation which can deteriorate further as the ridges reduce in size over time.

Clinical studies over the last two decades have been undertaken to determine the benefits to patients from the use of mandibular implants to support the lower denture. This formed the basis of the McGill Consensus statement of 2002, and the current statement addresses these questions in light of contemporary research. The objective is to see if the benefits of this treatment modality should be regarded as large enough for this group to propose it, rather than conventional dentures, as the first treatment option of choice for edentulous patients.

There has been a very large body of work published that has established that the survival of titanium dental implants is very high, especially in the anterior mandible, and that the rate of bone loss in the edentulous jaws is greatly reduced when implants have been placed. Until the last decade, there was much less data available on the benefits of using these implants to support mandibular prostheses, particularly basing the decision-making process on patient-centred data.

Patient-centred outcomes

Conventional complete dentures are supported by the edentulous ridges and the mucosa that overlies them. There is close contact, but no direct attachment between the prosthesis and the ridges, and the prostheses are constructed to







maximise any potential retentive forces whilst attempting to minimise those that displace them. In such an active, muscularly-controlled environment this is problematic, and many patients have difficulties adapting to their dentures, particularly the lower denture. Edentulism is also associated with a less healthy diet. Many patients report that they have to modify their food choices, especially when eating in a social environment, because of the limitations of their dentures. Evidence also suggests that if patients are challenged to eat a different range of foods, their current satisfaction with their conventional dentures is reduced. In a wider context, patients' social interactions can be negatively affected by conventional dentures. People report avoiding going out to eat, being self-conscious of the presence of others as they feel they may notice them moving in the mouth when talking, eating or laughing and because they may find it difficult to wear their dentures for a prolonged period of time.

A substantial body of evidence is now available demonstrating that patients' satisfaction and quality of life with implant-supported mandibular dentures is significantly greater than for conventional dentures. Much of this data comes from high quality randomised controlled trials. Patients report greater satisfaction with the stability and retention of their prostheses which, in turn, appears to contribute to greater satisfaction with comfort and ability to chew different foods. Patient's objective chewing efficiency is also significantly increased when the lower conventional denture is stabilised by means of implants. There is accumulating evidence that these advantages can be carried into old age.

More recent evidence demonstrates that patients with mandibular implantsupported overdentures are more likely to positively modify their diet than patients with conventional dentures, particularly following dietary interventions. In contrast to conventional denture wearers, when encouraged to modify their diet, the satisfaction with their prosthesis of those wearing implant overdentures appears to increase.

Cost

This remains a very real perceived barrier to the delivery of implant supported prostheses. Whilst they are certainly more expensive than conventional dentures, the use of just two implants can keep the initial cost to a minimum. Furthermore, deferring the whole cost over the expected life span of the patient shows that the annual difference in costs between the two modalities is relatively small, especially compared with the initial first year costs.

Conclusions

With the advent of dental implants there is now more than one available treatment for edentulous patients. Current evidence suggests that the restoration of the edentulous mandible with a conventional denture is a much poorer alternative than the use of an implant-supported prosthesis. There is now a large body of evidence that supports the proposal that a two-implant supported mandibular overdenture should be the minimum offered to edentulous patients as a first choice of treatment.

Reference

1. Feine J S, Carlsson G E, Awad M A *et al.* The McGill Consensus Statement on Overdentures. Montreal, Quebec, Canada. May 24-25, 2002. *Int J Prosthodont* 2002; **15**: 413–414.



Embedding implant dentistry into the undergraduate dental curriculum

Clinical evidence has demonstrated that when restored with implant supported over-dentures, edentulous patients have an improved oral health related quality of life and increased satisfaction with their prosthesis in comparison to when conventional dentures are provided (Thomason et al 2007). Conventional dentures are no longer seen by many as the most appropriate first line treatment for the restoration of the edentulous mandible and it is recommended that an implant supported overdenture should be the treatment of choice for the edentulous mandible (Feine et al, 2002, Thomason et al 2009). Currently the provision of implant supported overdentures is largely limited to secondary care settings and in primary care under private contract. It is believed that there is an unmet need for sufficient numbers of general dental practitioners who are confident and indeed competent in the treatment and maintenance of patients with implant retained prostheses. In order to develop this treatment modality further within the primary dental care environment, and to support patients currently restored with implant retained prostheses, there is a need to provide relevant training for dental practitioners.

This report presents a view from the BSSPD's education group when it met at the 56th Annual conference in York 2009. The aim of the meeting was to discuss the integration of implant training (in the context of implant supported overdentures) into the undergraduate dental curriculum. The subject was introduced to the group with a number of formal presentations including a review of the relevant undergraduate curriculum requirements, recommendations in relation to the teaching of dental implants at undergraduate level (as published by the General Dental Council), the 2008 Association for Dental Education in Europe (ADEE) workshop on implant dentistry, experiences in delivering undergraduate implant dentistry programmes in the UK and Canada and the published findings from a United Kingdom and Ireland survey.

There is considerable variability of undergraduate implant teaching within the UK, mainland Europe and Northern America (DeBruyn et al, 2009; Addy et al, 2008; Afsharazand et al, 2005; Petropoulos et al, 2006; Seckinger et al, 1995). It is known that 13 of the 15 undergraduate dental schools in the UK and Ireland provide teaching and or training in implantology but with significant variation in the extent, timing, nature and delivery of this training (Addy et al, 2008). At the present time there are no dental schools in the UK who routinely facilitate implant treatment provision by *all* undergraduates although the majority provide limited exposure to such treatment modalities. Some schools provide opportunities for a small number of students to be directly involved in implant restoration and others plan to introduce such undergraduate clinical experience in the near future (Addy et al, 2008).







The delegates were in agreement that suitable training of undergraduates was paramount in order to embed the use of implant supported overdentures as a mainstream treatment strategy for the successful treatment of edentulous patients. The group felt that implant dentistry should be led by teachers within Restorative Dentistry and must have full horizontal and vertical integration to ensure a good basis for life long learning and the development of skills.

Following extensive discussion and reflection, the group felt quite strongly that implant therapy should be taught as a core item within treatment planning for replacing missing teeth and especially where conventional treatment modalities had failed or were inappropriate. It has been shown that that implant therapy and treatment is more likely to be offered to patients if it was an integral part of undergraduate training (Maalhagh-Fard et al, 2002). It was considered to be important to provide a good grounding in basic implant theory and practice prior to graduation with competency being assessed in this context. Concern was expressed that currently in the UK much implant training is delivered as short commercially delivered courses that have been organised by the individual implant companies which provides little or no control on the course content and a risk that marketing strategies and commercialisation may unduly influence what is being delivered.



Curriculum congestion presents a very real barrier to the delivery of additional training at an undergraduate level and the group recognised that in order to effectively deliver education in any implant programme there may need to be increased utilisation of non-traditional teaching methods such as on-line resource, multi-media resource, the internet, directed and self directed learning. Resource days and modular teaching may also need to be considered when conventional teaching was felt to provide an inappropriate model. The introduction of novel approaches to training opened up the opportunity to develop and share educational resources and in so doing optimise the teaching and learning experience. All agreed that there needed to be a willingness to share experiences in delivering existing teaching programmes.

Clinical experience was felt to be fundamental with respect to education in implant retained prosthodontics and clinical practice experience at undergraduate level within dental schools should be encouraged. However, it is perhaps this area of training which presents the largest challenge in terms of financial resource and ensuring appropriately trained teaching and support staff. Provision of implant retained overdentures was believed to be a very suitable area to be included in undergraduate curricula, and that it should be integrated into the undergraduate programme, rather than being delivered as a "bolt-on" or extra. It was believed there is considerable merit to be gained by providing experience of



restoring patients with implant retained overdentures before progressing to conventional prosthetic treatment and attempting to treat totally edentulous patients with problematic anatomy and unrealistic expectations of what can be achieved. The stability afforded by two osseo-integrated implants could contribute significantly to making many of the more difficult stages in conventional complete denture construction considerably easier e.g. occlusal registration. This in turn may result in increased confidence amongst students and an improved learning experience which would allow them to appreciate these clinical procedures more fully rather than worrying over their difficulty.

Other key issues (barriers) which may prevent the development of implant retained prosthodontics teaching and delivery into curricula were highlighted and discussed throughout the day. Issues such as staff training, funding for support staff, patient recruitment, costs of long term maintenance, politics and legislation were just some of the areas explored. It was agreed that these barriers were very often significant and that a concerted effort to overcome them is needed if we are to maximise the benefits of implant retained overdentures for our patients.

In conclusion delegates believed that the skills required for delivering and maintaining implant retained prostheses needs to be fully integrated into the undergraduate dental curriculum if edentulous patients are to benefit routinely from implant supported overdentures. Acquisition of knowledge and clinical skills regarding implant retained restorations was of fundamental importance in undergraduate education if this treatment modality is to be more widely available within primary care. Undergraduates need to graduate with a suitability assessed grounding in implantology from the clinic to the laboratory and skills to expand upon this basic competence. The development of suitable educational programmes needs to link clearly with government health policies and changing population demographics with implant dentistry being no exception. Equally important is the increasing body of research that suggests the positive impact that implant retained prostheses can have on patient satisfaction and oral health related quality of life (Thomason et al 2007). The evidence for this most successful and entirely appropriate treatment modality is clear, our patients, our institutions and indeed our undergraduates should not be denied it.

Dr Robert McAndrew



Who's who and how to contact us

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Mr Chris Butterworth (Membership Secretary) christopher.butterworth@rlbuht.nhs.uk

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Association of Consultants & Specialists in Restorative Dentistry Mr Dean Barker

Pan Society Meeting
Mr Richard Welfare & Prof Damien Walmsley

Advisory Board in Restorative Dentistry, RCS Edinburgh Prof J Mark Thomason

BSSPD Administrator

Mrs Linda Erickson I.e.erickson@ncl.ac.uk

Future Diary Dates

BSSPD Annual Conference 27 – 29 March 2010 BSSPD Annual Conference 18 – 19 April 2011 BSSPD Annual Conference 31 March – 2 April 2012



External courses of interest to members

RCPSG Annual Meeting

Dental Fellow & Members

23rd October 2009

RCPSG, Glasgow – www.rcpsg.ac.uk

AM open meeting, PM Cleft lip & palate, TC White lecture

Aesthetic Dentistry

RCS Edinburgh, RCPS Glasgow & British Society of Restorative Dentistry

6th November 2009

The Royal Society, London. - www.rcsed.ac.uk

Modern Management of Cleft Lip & PalateRCS England

13th November 2009

RCSEng, London. – www.rcseng.ac.uk/fds

Maximising the Workforce – Trusting the Talent Sympoisum for Primary Dental Care Practitioners & DCP's

19th November 2009

RCPSG, Glasgow – www.rcpsg.ac.uk

Head & Neck Oncology & Restorative Dentistry St Georges Hospital Department of Restorative Dentistry

27th January 2010

St. Georges Hospital, London – e-mail: richard.porter@stgeorges.nhs.uk

Oral Rehabilitation Crossing Borders for a Common Aim 1st joint meeting of the DGI, ÖGI, SGI & IAOFR

14th -16th May 2010

Berlin, Germany - jointmeeting2009.dgi-event.de/home.html

Maxillofacial Rehabilitation

International Congress: International Society for Maxillofacial Rehabilitation

19th -22nd May 2010

Sestri Levante, Italy - www.ismr-org.com

2nd Pan Society Meeting – 2011

11th & 12th November 2011

Liverpool Echo Arena -Further details to follow

Hands-on Restorative Courses

Manchester Dental Education Centre - www.mandec.co.uk

Foundations in Contemporary Endodontics –November 2009 & March 2010

Plastic Surgery Around Teeth & Implants (Soft Tissue) – November 2009

Aesthetic Dentistry – December 2009

Crown Lengthening January 2010

Direct Fibre Reinforced Composite Restorations - May 2010

Manchester Dental Implant Foundation Course – July 2010



Announcements and Society News

Membership fee

An increase in the cost of membership subscriptions from £50 to £60 was agreed at Council and approved at the AGM in April 2009. The purpose of this increase was to fund the new website. If you have yet to complete a direct debit form for collection of your membership subscription please see the website (www.bsspd.org).

Honorary Membership for Prof Jocelyne Feine

At the 2009 Annual Conference in York, Honorary Membership of the society was awarded to Professor Jocelyne Feine from McGill University, Montreal. Prof Feine was the leader of the 2002 McGill Consensus meeting and has made significant and sustained contribution to improving the minimal standard of care for edentulous patients. She is Associate Editor of the JDR, and her research involves the assessment of therapies for chronic orofacial conditions in order to provide clinicians and patients with scientific evidence that can be used to support treatment decisions. These studies are designed to gather clinical data, as well as information from patients about how satisfied they are with a particular therapy, how the therapy has affected their condition and how their lives may have changed due to the intervention. With a team of investigators, Prof Feine has now begun to focus on testing the efficacy of the least costly innovative therapies and to gather information on cost-effectiveness. For edentulism, the team is also studying the effect of oral rehabilitation on general health through improved nutrition.



Members news

It was with sadness that the society learned of the deaths of two longstanding members of the BSSPD: Barbara Geddes, a member of the society for 33 years (since 1st April 1976) and Prof Anderson who was a member since 1st April 1954, was President of the society between 1961-62, and had been awarded Honorary Membership of the society.



New website – new webmaster

The BSSPD website (www.bsspd.org) has recently been redesigned and re-launched in association with a professional company. The new fresh look will help to promote prosthodontics: fixed, removable, implant and maxillofacial. The new website provides more on-line functions including membership applications and conference booking on-line with credit card payment as standard. The membership section is improved to include a discussion forum, search facility to find other members, abstract and publication upload facilities, as well as scope for future development such as case presentations and photo archive. There is also the ability for members to add additional practices which can be searched for via the 'find a prosthodontist' section.



The development of the new website has been overseen by Chris Butterworth who has served the society for many years as webmaster and membership secretary – as he steps down from his position as webmaster, he hands responsibility over to Dr James Field who will no doubt continue to build upon this work and take the website from strength to strength.

The website is the prime means of communication with the society membership – please remember to log in to update your details and take advantage of the new site.

Membership

The BSSPD is actively interested in expanding its membership to continue to fulfill it's purpose of advancing education in the field of contemporary prosthodontics. Please encourage dentists, doctors and scientists who are interested in prosthodontics to join our society.

Application for membership can be made via the on-line form (www.bsspd.org). Full membership is £60 and includes subscription to The European Journal of Prosthodontics & Restorative Dentistry

If you have any further queries about joining the BSSPD then please do not hesitate to contact the BSSPD Membership Secretary