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NEWS

APRIL, 1970 VOL. II, NO. 2

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EDITORIAL

The Nova Scotia Dental Association, under the able direction of Dr. Earl Dexter and his committee, has won a battle -- not a war.

On Wednesday, March 25, 1970, Bill No. 54 came before the House of Assembly for second reading. Several Members of the House spoke to this Bill with the result that it was voted out at this stage.

If passed, Bill No. 54 would legalize the activity of the "dental mechanic" in his direct dealings with the public in the field of prosthetic dentistry. However, the Government of Nova Scotia, aware of the dangers of such an Act, forcefully defeated the passage of the Bill.

Is this the end of illegal dentistry? It is not!!
Has there been any benefit from this activity? Yes,
there has!!

Illegal dentistry will continue to occur until full dental health care is available to all people of Nova Scotia. To accompolish this result, many problems must be overcome. The number of professional personnel cannot meet the need for dental health care treatment. Efficient use of auxiliary personnel in clinical dentistry is a must. Procedures not requiring the skills of the professional must be delegated to auxiliaries who are under the supervision, direction

and responsibility of the dentist.

Manpower, of course, is not the only problem. Economics is a deterrent to many Nova Scotians. However, the responsibility of providing dental health care to the public does not lie with the dental profession. This is government's responsibility!

I have suggested that there has been certain direct benefit resulting from this activity with the "dental mechanic".

The importance of a harmonious relationship between the dentist and his auxiliaries becomes increasingly obvious.

The Nova Scotia Dental Technicians Association strongly opposed the passage of Bill No. 54. This association was never in favor of the activities of the "dental mechanics".

We all know that the skilled dental technician is an invaluable member of the dental health team. His status and technical skills are continuing to develop over the years. There may be specific areas of difficulty with laboratory service but by and large, the quality of service in Nova Scotia is generally acceptable.

If quality of service and technical skills is a problem, then the profession must advise the Technicians Association of this fact and work in co-operation to provide standards of quality control. The profession should be prepared to encourage, assist and co-operate in the development of a formal training program for the technicians.

I see the necessity for the training of a clinical type of auxiliary, hygienist or otherwise, to carry out many of the technical clinical procedures which do not require the talents and skills of the dentist. Obviously, ultimate responsible for treatment rests with the dentist both for his and auxiliary services rendered.

If one appreciates the "dental health team concept" whereby the professional dentist, technician, preventive hygienist, clinical hygienist, chairside assistant and business receptionist, all working in unison rendering dental health treatment, it seems to follow that the Nova Scotia Dental Association should have one legislative act governing all members of the team.

Representation of all groups should be made on a governing body which administers the business of the association.

I feel this would result in a unified body whereby optimal dental health care could be made available to more Nova Scotians.

Such a combined team may be more effective in combating the "dental mechanic". Further than this, the Legislative Act of the Nova Scotia Dental Association must contain more teeth making prosecution of "dental mechanics" more readily attainable as well as providing for a stronger deterrent to violation of The Act.

- D. M. Bonang, D.D.S., Editor.

CANADIAN DENTAL ASSOCIATION STATEMENT

Re: Voluntary fee restraint to help curb inflation

TORONTO, February 25, 1970 - The Canadian Dental Association today threw its weight behind the effort to fight inflation when the Executive Council of the Association, recognizing the fact that the provincial associations are responsible for establishing their own fee schedules, passed a motion urging the 10 provincial associations to postpone or limit increasing fee

schedules for 1970.

The president of the 7,000 member national association, Dr. H. R. McLean, said, "As providers of essential services, members of the CDA are concerned not only with the physical health of Canadians, but also with the economic and social health of Canada."

"Recognizing the severe inflationary spiral operating in Canada and conscious of our responsibility to do all we can to alleviate the problem, " said Dr. McLean, "the Executive Council of the CDA is encouraging the provincial dental associations and its individual members, in the national interest, to keep increases in fees and fee schedules well within the increases brought about by rising office expenses during the remainder of 1970".

Dr. McLean continued, "At the invitation of the federal government, CDA representatives attended the national conference on price stability where the desirability of voluntary, rather than mandatory, price restraint was stressed."

"This attitude," said Dr. McLean, "was endorsed by industry, the professions and government, and it is this approach of self-imposed voluntary restraint that we shall be communicating through the provincial organizations to our membership."

Dr. McLean went on to say that postponement or limiting of fee increases by the dental profession would in no way affect "the high standard of dental care available in Canada."

CFDE NEWS

DENTISTS SUPPLY MOMENTUM FOR 1969 CFDE GAINS

TORONTO -- Dentists respond to the increasing need for more dental teachers and research. Dentists' contributions to the Canadian Fund for Dental Education during 1969 have increased by 36%. Personal contributions by 1,367 dentists created \$25,660. for the Fund in 1969. Dental organizations and companies have maintained an impressive level of support for CFDE, contributing \$30,367. and \$23,655. respectively.

CFDE's 1969 investment in fellowship awards increased to \$38,960, providing assistance for twenty-three dentists and one dental hygienist in their pursuit of dental teaching and research careers during 1969. In addition, the Fund continued to make unrestricted grants to Canada's ten dental faculties. Since 1965 CFDE has awarded \$34,000. through these unrestricted grants.

The Fund's 1969 grant of \$5,000. to the Association of Canadian Faculties of Dentistry is helping to foster communication between Canada's ten dental schools.

Notable among the Fund's other achievements for 1969 are the financing of a Student Field Training Program conducted by Dalhousie University, Faculty of Dentistry and funding of the first Canadian Dental Students' Conference held at CDA headquarters in Toronto.

CFDE's Executive Director, Mr. Murray McDonald, says: "The enthusiastic support given to the Fund in 1969 has allowed CFDE to make commitments which will help meet dentistry's needs in the 70's."

February 9, 1970.

CFDE NEWS

FIRST CANADIAN DENTAL STUDENTS' CONFERENCE

TORONTO -- The first Canadian Dental Student's Con-

ference was held at the Canadian Dental Association's headquarters, 234 St. George Street, Toronto, on November 20-22, 1969. The conference was sponsored by CDA and financed by a Canadian Fund for Dental Education grant.

The delegates, one from each Canadian dental school, are members of their local dental student organization. The sessions were chaired by Mr. David Kenny of the University of Western Ontario, a member of the Canadian Dental Association's Student Membership Committee.

The conference featured many guest speakers. They gave presentations in the following order: Dr. A. T. Storey, Associate Professor of Dentistry, University of Toronto; Dr. R. E. Jordan, Professor and Chairman, Department of Restorative Dentistry, University of Western Ontario; Dr. H. R. MacLean, President of the Canadian Dental Association; Dr. I. Hrabowsky, President-elect of the Ontario Dental Association; and Dr. D. C. Way, Chairman of the Canadian Dental Association's Insurance Committee.

The discussions covered subjects ranging from school curriculum to dental societies and activities of the Canadian Fund for Dental Education.

The students felt that many worthwhile benefits resulted from this first conference and, therefore, enthusiastically recommended that the conference be made an annual event.

February 4, 1970.

BITS & BITES

HALIFAX COUNTY DENTAL SOCIETY

The Halifax County Dental Society is approaching the end of another term. The year will end with a ladies night

to be held May 8, 1970, at the Citadel Inn.

Since our last publication, the Society has held three regular monthly meetings.

Dean J. D. MacLean, Dalhousie Dental Faculty, addressed the January meeting reviewing the proposed new dental school.

The February meeting was addressed by Dr. J. Aldous, head of the Pharmacology Department, Dalhousie University. Dr. Aldous spoke on the use and abuse of drugs with special emphasis on marijuana.

Mr. R. L. Robertson, a consultant hypnotist, was the guest speaker at the March meeting of this Society. Mr. Robertson spoke on the role of hypnosis in the practice of dentistry.

Again, an invitation is extended to any member of the dental profession to attend our monthly meetings if you are in the city.

MECHANICS ISSUE HEATS UP IN MANITOBA

A leader of Manitoba's dental mechanics has reportedly warned that illegal practice by members of his group will continue if their activities are not legalized by the provincial government. In a hearing last December before the legislature's Special Committee on Dental Services, he said some mechanics may be tempted to practise outside their present scope unless controls are standardized for all. He told the committee that he and his colleagues would agree to a two-year technical training and two-year apprenticeship program for new trainee mechanics, and also to retraining existing mechanics if they would be able to continue to make and fit dentures while retraining.

A second year student from the University of Manitoba's Faculty of Dentistry took sharp issue with the mechanics. He warned the committee that by legalizing mechanics, the government could permanently remove them from the dental team, thus impeding the growth of dentistry as an integrated health service.

A. J. Shinoff, president of the Manitoba Dental Association, reportedly warned the committee that the dentist-sponsored Manitoba Denture Clinic, established in 1960 to provide low cost professional denture care without a means test, may close if the provincial government allows mechanics to do dentists' work legally.

Dr. Shinoff said that the dental association recently declared a moratorium on the prosecution of mechanics when it was thought new legislation was pending but that during this moratorium period the mechanics "proliferated like rabbits."

The continuing controversy over the mechanics dates back to an earlier committee which in 1964 concluded that "dentists should retain full control of and be fully responsible for the oral health of the public" (J. Canad Dent Ass 32:388, 1966). Its report said that only qualified persons should work in patients' mouths. It also urged that dental mechanics be brought under a proposed Manitoba Dental Technicians Act and absorbed as auxiliaries into the dental health field. No legislation was enacted pursuant to this report, however.

Chicago -- It costs American dental schools about \$7,340 per year to educate each dental student. This is the estimate given in the Annual Report on Dental Education published by the American Dental Association and the American Association of Dental Schools.

The report is based on information received from 46

dental schools in the United States during the 1968-69 academic year. It revealed that the average contribution of the dental schools and of their parent universities to the cost of educating each student was \$2,147. This is the amount by which the \$7,340 cost exceeded the average income of \$5,193.

The report also showed that the cost of a dental education program on a per student basis far exceeds the tuition income. Typically, income from student tuition and fees accounts for approximately 40 per cent of the cost of educating each student. Clinic income provides about 25 per cent of the cost of education and the balance comes from other sources such as state and federal support and private contributions.

DENTAL INSURANCE WOULD ADD \$130 MILLION TO ONTARIO MEDICARE

Ontario Health Minister Thomas Wells has estimated that provincial medicare costs would rise by more than 50 per cent if drugs and dentists' bills were paid by the plan.

He said that adding dental charges would cost \$130 million a year.

He did not say how much of the figure was dentists' fees and how much would be administrative costs of processing and paying them.

He said covering drugs would cost \$128 million.

Mr. Wells detailed the costs of the current medicare program as \$508 million a year, including \$28 million for the program's administration. He said the sources are \$309 million from individuals' premiums "at the present rate," \$168 million in federal grants and \$31

million from general provincial revenue "to balance the total."

NEW BRUNSWICK TO JOIN MEDICARE NEXT JANUARY

New Brunswick will join the federal medical care program next January, and Ottawa will pay about 70 per cent of the cost, Premier Louis Robichaud announced March 5.

New Brunswick was one of the first provinces to commit itself to the scheme and will be the last to enter. All other provinces but Quebec and Prince Edward Island are operating medicare programs and the latter two are set to join later this year.

The premier said the program will cost about \$24 million in the first year, equivalent to 7 per cent of last year's provincial budget, but there will be no premiums and no tax increases are planned to pay for it.

He said it is within the present financial capabilities of the province to finance its portion of the scheme. "There may be some variations in the tax structure in the province but no substantial tax increases."

VIRUS ACTION DETECTED IN TOOTH DECAY

New York -- Virus-infected bacteria may be the cause of tooth decay.

Oral biologists at the University of Miami, comparing cariogenic strains of streptococci with noncariogenic strains, found virus particles in the cariogenic strains, The noncariogenic streptococcus strains were virus-free. Sheldon H. Greer, PhD, associate professor of microbiology at the UM School of Medicine, reported discovery of the virus, as yet unnamed, at the 48th general meeting of the International Association for Dental Research here.

Dr. Greer's colleagues in the work were Dr. William Hsiang, a graduate student, and Doran D. Zinner, DDS, professor of oral biology and director of the university's Institute of Oral Biology.

"The relationship between bacteria and viruses has been observed before in other diseases," Dr. Greer said in an interview. "Bacteria are altered by viral infection, and this may be associated with pathogenicity."

"This was discovered first in diphtheria. It was found that the bacteria that caused all the problems many years ago produced a toxin, and that the toxin was produced only in the strains which carried viruses. The same thing happens in scarlet fever."

"So here we have bacteria causing tooth decay, and that decay appears to be produced only in bacteria that have a virus."

To gain more information on the role of the virus, the researchers are trying to immunize or "to cure" the infected cells to find if the removal of the virus will cause the streptococcus to lose its cariogenicity.

NOTICES AND ANNOUNCEMENTS

Re: Dental Health Mannual - A Publication of The Department of National Health and Welfare, Canada

This is to inform you that the Dental Health Manual is available by mail from the Queen's Printer, Ottawa, and at the Canadian Government bookshop at 1735 Barrington St., Halifax. The price, subject to change without notice, is one dollar (\$1.00). The catalogue number is H55-169.

We would appreciate any announcement in journals and newsletters which would pass this information on to dental personnel and the lay public.

Yours sincerely,

R. A. Connor, D.D.S., D.D.P.H., Chief, Dental Health Division Dept. of National Health & Welfare.

Congratulations are extended to Dr. & Mrs. E. F. Kirk on the recent birth of their son on April 12, 1970.

The Annual Student Table Clinics at Dalhousie Dental School, were held Wednesday, February 25, 1970.

The winning dental student was Mr. F. R. Jackson while the prize for the best hygiene table clinic was won by the combined efforts of Miss Susan Brownlee and Miss Marie Rushton.

Sincere best wishes for a speedy recovery are extended to Mr. Bill Camp who is in the Victoria General Hospital following a serious car accident.

 $\operatorname{Mr.}$ Camp is a fourth year dental student at Dalhousie University.