



## **Oral Health E-Newsletter July 2009**

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### **The Oral Health E-Newsletter Has Been Revised!**

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Starting with this month's issue, you will notice several changes to the overall layout and formatting. Along with a revised font, we have added page banners for each section and divided the resources and journals into their own groups. We have also added links on the first page that will allow you to jump between sections.

Our intent is to make this resource useful and easy to read. If you have any comments about the new layout or suggestions about how this tool could be more useful to you, please e-mail us at [oralhealthinfo@aap.org](mailto:oralhealthinfo@aap.org).

## ANNOUNCEMENTS

### **National Children's Oral Health Foundation Announces New Web Site**

<http://www.ncohf.org>

Since 2006, the National Children's Oral Health Foundation (NCOHF) has worked to eliminate pediatric dental disease by staying focused on oral health and education among the nation's most economically challenged children and their families. The new NCOHF Web site features photos and elements that help users understand its mission while offering visitors an opportunity to explore the programs and elements of the foundation.

### **Participants Needed for Survey of Work with Underserved Populations**

[https://lessons.ummu.umich.edu/2k/dentists\\_in\\_community\\_dental\\_clinics/survey\\_001](https://lessons.ummu.umich.edu/2k/dentists_in_community_dental_clinics/survey_001)

Researchers at the University of Michigan School of Dentistry are collaborating with a dental student on a project aimed at gaining a better understanding of the motivation of dentists who work with underserved populations. The Web-based survey is anonymous and should take less than 10 minutes. For more information about the survey, visit the National Network for Oral Health Access Web site at <http://www.nnoha.org>.

### **Access to Dental Care Summit Proceedings Now Available**

[http://www.ada.org/public/topics/access\\_dental\\_care\\_summit.pdf](http://www.ada.org/public/topics/access_dental_care_summit.pdf)

On March 23, the ADA convened representatives from a variety of communities of interest to create a shared vision to improve the oral health of underserved populations. The Access to Dental Care Summit affirmed the dental profession's commitment to serve as a convener and collaborator committed to finding common ground and shared solutions to one of the major health problems facing some of the nation's most vulnerable people.

### **Dental Trade Alliance Launches Oral Healthcare Can't Wait Awareness Campaign**

[http://www.dentalofficemag.com/display\\_article/365633/54/none/none/IndNw/Dental-Trade-Alliance-launches-Oral-Healthcare-Can't-Wait-awareness-campaign](http://www.dentalofficemag.com/display_article/365633/54/none/none/IndNw/Dental-Trade-Alliance-launches-Oral-Healthcare-Can't-Wait-awareness-campaign)

The Dental Trade Alliance, recently launched the Oral Healthcare Can't Wait awareness campaign. The campaign is an effort to warn consumers about the risks of postponing regular dental checkups and recommended treatment.

### **Requests for Examples of Successful Public Health Programs**

<http://www.cphfoundation.org/news.html>

The Campaign for Public Health Foundation is collecting examples of successful public health programs in all areas of study operating at the local, state, or national level. Download the survey form online at <http://www.cphfoundation.org/documents/PHProgramSurveyfin.doc> and submit completed forms to [KristenL@CPHFoundation.org](mailto:KristenL@CPHFoundation.org) by July 24. Responses are welcome after that date, but those findings may not be mentioned in a white paper the Foundation will publish in August.

## IN THE NEWS

### **Dentists Need Patience to Treat Special-Needs Patients**

(The Canadian Press - July 14)

<http://dailygleaner.canadaeast.com/liveit/article/727902>

Many community dentists are reluctant to treat people with special needs because they are concerned they do not have the right equipment or skills, says Dr Michael Sigal, head of the Dental Program for Persons with Disabilities at Mount Sinai and dentist-in-chief at Mount Sinai and head of pediatric dentistry at the University of Toronto. Community dentists may cite a combination of factors for their reluctance to treat patients with special needs, such as physical barriers or the time involved in treating a patient with special needs. There may also be financial barriers. But perhaps the biggest reason community dentists refer patients to Mount Sinai is their fear of how a patient with special needs will behave during their appointment. According to Sigal, however, in almost all cases dentists do not need special equipment or skills to treat persons with disabilities.

## **\$1.85m Grant to Study Blocking Oral Bacteria from Damaging Pregnancy**

(MedCity News - July 14)

<http://www.medcitynews.com/index.php/2009/07/case-western-reserve-university-dental-school-receives-185-million>

Yiping Han, a researcher at the Case Western Reserve University School of Dental Medicine, will use a \$1.85 million grant from the National Institute of Dental and Craniofacial Research at the National Institutes of Health to study how to block oral bacteria from reaching and harming an unborn child, a path that she links to prenatal problems. The focus of this grant is fusobacterium nucleatum and the specific molecule FadA that may trigger a process that lets bacterium enter and spread within a woman's placenta during birth. Fusobacterium contributes to periodontal disease, but once it reaches the placenta it could be a cause of preterm and stillborn births, according to Han's research. "We want to block the bacteria before it can do any damage," Han states. "It's an upstream approach to go back to where the whole process begins and stop it from starting its destruction."

## **Mobile Surgeries Part of Plan to Replace School Dental Clinics**

(The Timaru Herald, NZ – July 13)

<http://www.stuff.co.nz/timaru-herald/news/2587447/Mobile-surgeries-part-of-plan-to-replace-school-dental-clinics>

Timaru will have 2 mobile dental surgeries and one 4-chair community clinic to service the city and outlying rural areas by June next year. The move is part of a national revamp of dental services for children up to 18 years of age. About half of South Canterbury 5-year-olds had disease-free teeth but 1863 children had an average of 4.3 decayed teeth. Most school dental clinics in Canterbury will close as a result. They will be replaced with 12 multi-chair community clinics supported by 18 mobile dental surgeries, which will provide examinations and preventative work such as fluoride treatments and fissure sealing. If children need more dental work, an appointment will be made at one of the multi-chair community clinics.

## **Diets Bad For The Teeth Are Also Bad For The Body**

(ScienceDaily – July 12)

<http://www.sciencedaily.com/releases/2009/07/090709170807.htm>

Beyond the immediate distress, dental pain may portend future medical problems. It may be a warning that a high-glycemic diet that led to dental problems in the short term may, in the long term, lead to potentially serious chronic diseases. A report published in the *Journal of Dental Research* reviews the relationships between diet, dental disease, and chronic systemic illness. Two viewpoints on the role of fermentable dietary carbohydrates in health and disease are weighed. One viewpoint is that certain fermentable carbohydrates are beneficial to general health and that the harmful dental consequences of such a diet should be managed by oral hygiene tools. The contrasting viewpoint suggests that fermentable carbohydrates are bad for both dental and general health, and that both dental and general health need to be maintained by restricting fermentable carbohydrates. A change in perspective could have a significant impact on the dental profession, as a diet higher in fat and protein does not cause dental diseases, and dentists would no longer be pressed to recommend diets that are bad for teeth.

## **Children from Poor Backgrounds More Likely to be Overweight**

(The Irish Times, IE – July 11)

<http://www.irishtimes.com/newspaper/ireland/2009/0711/1224250462468.html>

A recent study that determined 1 in 5 9-year-olds in Ireland is overweight and 7% are obese also found that social class had a significant influence on these children, with those from poorer backgrounds more likely to be overweight and practice poor dental hygiene. In terms of oral health, the study found that 95% of 9-year-old children brushed their teeth at least daily, but 9% of children from the lowest income bracket did not brush regularly, compared with only 3% of those in the top income bracket.

## **New Weapon Emerges to Fight Kids' Cavities**

(US News & World Report – July 7)

<http://health.usnews.com/articles/health/healthday/2009/07/07/new-weapon-emerges-to-fight-kids-cavities.html>

A syrup containing the sugar substitute xylitol helps prevent tooth decay in baby teeth, according to a new study in which researchers tested the syrup in 94 children in the Republic of the Marshall Islands, where early childhood tooth decay is a major problem. Two groups of children were given 8 grams of xylitol syrup a day, in

either 2 or 3 doses, and a third group was given a single 2.67-gram dose of the syrup each day. After an average of 10.5 months, tooth decay was found in about 24% of the children who had gotten 2 doses of xylitol syrup a day, 41% of children who received 3 doses of xylitol syrup a day, and 52% of children in the control group. According to Dr Peter Milgrom of the University of Washington, Seattle, "Our results suggest that exposure to xylitol (8 grams per day) in a twice-daily topical oral syrup during primary tooth eruption could prevent up to 70% of decayed teeth." Although more research is needed, xylitol appears to be a cost-effective preventive measure in populations with high rates of tooth decay. The study appears in the July issue of *Archives of Pediatrics & Adolescent Medicine*.

### **Chorley Dentist Reveals Parental Role is Key to Oral Health**

(The Chorley Citizen, UK – July 3)

[http://www.chorleycitizen.co.uk/news/4474480.Chorley\\_dentist\\_reveals\\_parental\\_role\\_is\\_key\\_to\\_oral\\_health](http://www.chorleycitizen.co.uk/news/4474480.Chorley_dentist_reveals_parental_role_is_key_to_oral_health)

New research reveals the important role of parents when it comes to instilling good habits from an early age. A survey questioned parents with children younger than 12 years of age across Lancashire and revealed that 18% of parents said their children do not brush twice a day. According to dentist Andrew Brierley, "Parents play a vital role when it comes to instilling thorough brushing routines in their children that they carry into adulthood ... [and] should not underestimate their role in the supervision of the twice-daily tooth-brushing routine."

### **Tooth Taxi Offers Services, Screenings to Youth in Need**

(StatesmanJournal.com – July 1)

<http://www.statesmanjournal.com/article/20090701/COMMUNITIES/907010329/1117>

With 2 dental station chairs and a waiting room, the 38-foot traveling dental lab and volunteer oral health care professionals have provided approximately 3,000 screenings, 1,000 treatments, and an estimated \$765,000 of dental services since September 2008. The overriding goal of the Tooth Taxi is to promote oral health, and to do this, it aims for demographic areas showing school populations with a high rate of subsidized lunch-programs, shortages of dentists in the area, or large numbers of uninsured. Statistics illustrate a compelling need for this service: 35% of Oregon's children have untreated tooth decay, compared to 19% in Washington, 27% in Idaho, 29% in California, and 28% in Alaska.

### **Cancer Patients Should Check Dental Health Prior to Therapy, Say Dentist and Oncologist**

(Palm Beach Daily News – June 30)

<http://www.palmbeachdailynews.com/news/content/news/2009/06/30/DentalHealthCancer0630.html>

Taking care of their teeth is likely not a top priority for people who've learned they have cancer. But cancer patients who don't discuss their situation with a dental professional before starting chemotherapy or radiation may jeopardize the health of their teeth or cause a delay in treatment. In addition, radiation and chemotherapy can temporarily reduce the mouth's ability to produce saliva. Using a custom fluoride tray to coat the teeth in a concentrated fluoride solution for 10 minutes once a day while undergoing cancer treatment can prevent discoloration and weakening of the teeth. A topic solution can help a patient get rid of canker sores and may also help reduce mucositis.

### **OJ Worse for Teeth than Whitening, Researchers Say**

(PhysOrg.com – June 30)

<http://www.physorg.com/news165577618.html>

Eastman Institute's YanFang Ren, DDS, PhD, and his team have determined that the effects of 6% hydrogen peroxide, the common ingredient in professional and over-the-counter whitening products, are insignificant compared to acidic fruit juices. Researchers were able to see extensive surface detail thanks to a new focus-variation vertical scanning microscope and determined that orange juice markedly decreased hardness and increased roughness of tooth enamel. "The acid is so strong that the tooth is literally washed away," said Ren, whose findings were recently published in the *Journal of Dentistry*. "The orange juice decreased enamel hardness by 84 percent." No significant change in hardness or surface enamel was found from whitening.

### **Oral Health Center Has Focus on Disease As a Whole**

(Genetic Engineering & Biotechnology – June 30)

<http://www.genengnews.com/news/bnitem.aspx?name=57379136>

Australia's premier research centre for all aspects of oral health will be established at the University of Adelaide thanks to a \$2.4 million Federal Government grant. The new Centre of Clinical Research Excellence (CCRE) for

Oral Health, which will be part of the University's School of Dentistry, is being funded by the National Health and Medical Research Council. The CCRE Oral Health will be the first research centre of its kind in Australia to focus on all aspects of oral health research and its relationship with the broader health problems that are made worse by poor oral health.

### **Health Chiefs Post 30,000 Free Toothpaste and Toothbrushes to Improve Dental Care**

(Runcorn and Widnes World, UK – June 29)

[http://www.runcornandwidnesworld.co.uk/news/4456143.Alarming\\_levels\\_of\\_child\\_tooth\\_decay\\_in\\_Halton\\_program\\_prevention\\_programme](http://www.runcornandwidnesworld.co.uk/news/4456143.Alarming_levels_of_child_tooth_decay_in_Halton_program_prevention_programme)

In Halton, 50% of 5-year-olds are affected by dental decay compared to the national average of 38%. These alarming levels of child tooth decay have prompted a prevention program, in which approximately 30,000 free tubes of toothpaste and toothbrushes have been provided to all children ages 3 to 11. Free toothpaste will be distributed to children again in the summer and for the next 2 years. In addition, extra capacity in dental surgeries is being made available so that all children requiring dental treatment are able to receive it and dentists are being encouraged to expand the use of fluoride varnish to strengthen teeth against decay.

### **Oral Health Suffers in Down Economy**

(My Journal Courier – June 27)

<http://www.myjournalcourier.com/news/local-22898-eat-books.html>

As layoffs and furlough days continue to eat away at pocket books, dentists say they've noticed a decrease in people's appetite for oral health care and are concerned. Most patients end up paying more when they do get back in the chair because problems like cavities, gum diseases, and cracked teeth go undetected and get worse. When the economy does turn around, dentist offices will face a pile up of patients who avoided care. In addition, elective dental work has been affected by the economic slowdown, as has the number of patients deciding to have their teeth removed rather than treated and saved.

### **Youth Benefit from Mobile Dental Service**

(Arizona Republic – June 27)

<http://www.azcentral.com/arizonarepublic/arizonaliving/articles/2009/06/27/20090627heretohelp0627.html>

The Community Dental Foundation operates a mobile dental clinic that gives free oral health care to uninsured youth ages 2 to 20 in Maricopa County. Equipped with 2 dental chairs, the van allows the foundation to treat 20 to 50 patients at each location. Seventy-five percent of children treated by the mobile program have never been to a dentist. All needed dental work is done in one visit. The van's dentists and dental assistants do cleanings, fillings, root canals, and crowns but not orthodontia, tooth whitening, or extensive oral surgery. Each child examined is X-rayed, then, even if there are 10 cavities and a root canal, the child doesn't leave until everything is done. Children take home a goody bag of dental supplies, a video on how to brush, and a T-shirt. Thanks to the van's mobility, the program overcomes one of the biggest obstacles to pediatric dental care among the disadvantaged—a lack of transportation. It also visits when parents are more likely to be home from work.

### **Shocking Emergency Dentistry Figures Revealed**

(Norwich Evening News 24, UK – June 26)

<http://www.eveningnews24.co.uk/content/news/story.aspx?brand=ENOnline&category=News&tBrand=ENOnline&tCategory=news&itemid=NOED25%20Jun%202009%2010%3A45%3A14%3A280>

More than 200 patients needed emergency dental treatment last year, raising fears about a lack of access to NHS dentistry. Health officials are working hard to ensure everyone in the county can see a dentist after it was revealed 219 patients sought emergency dental care. These urgent admissions are a direct result of patients not having an NHS dentist to treat them in an emergency. Access to dentists declined when a controversial new contract was introduced 3 years ago, and although in Norfolk the number of people who can get to see a dentist has risen in recent months, there is still an estimated 10% of the population who do not even have one.

### **Are Immigrant Populations Aware of Their Oral Health Status?**

(BioMed Central – June 26)

[http://7thspace.com/headlines/312908/are\\_immigrant\\_populations\\_aware\\_about\\_their\\_oral\\_health\\_status\\_a\\_study\\_among\\_immigrants\\_from\\_ethiopia.html](http://7thspace.com/headlines/312908/are_immigrant_populations_aware_about_their_oral_health_status_a_study_among_immigrants_from_ethiopia.html)

Evidence from Western countries indicates there are fundamental discrepancies between self-perceived illness of immigrants and the provision of health care, according to the Western bio-medical health service model.

However, a 2004-2005 study reveals an unexpected high level of oral health status perception in the 340 Ethiopian immigrants studied. Therefore, oral health promotion initiatives among immigrants should be based upon optimal descriptive data to accomplish the inherent social commitment to these diverse populations.

### **Survey Looks Into Oral Health Of New Zealanders**

(Voxy News Engine, NZ - June 24)

<http://www.voxy.co.nz/national/survey-looks-oral-health-new-zealanders/5/16896>

Approximately 2000 adults and 1000 children are expected to take part in the 2009 New Zealand Oral Health Survey being conducted from March to November 2009. The Ministry of Health commissioned the survey to gather up-to-date information about the oral health of New Zealand children and adults and the oral health services they use. This is the first nationwide survey looking at people's teeth, mouth, and gums in 20 years. The survey consists of a face-to face interview and a dental examination. During the interview, participants will be asked questions such as what problems they may have with their teeth and mouth, how often they brush their teeth and the main reason for their last visit to a dentist.

### **Emergency Prescribing – A Change for Dentists**

(Dentistry.co.uk – June 23)

[http://www.dentistry.co.uk/news/news\\_detail.php?id=2011](http://www.dentistry.co.uk/news/news_detail.php?id=2011)

The General Dental Council is welcoming a change in the law that regulates who can request an emergency supply of a prescription-only medicine in the UK. According to the Royal Pharmaceutical Society of Great Britain, dentists have never been legally able to request an emergency supply of medicine. However, the legislation was amended in May so UK-registered dentists can now arrange for the supply.

### **A Good Dentist Sees More Than Molars**

(The Washington Post – June 23)

<http://www.washingtonpost.com/wp-dyn/content/article/2009/06/22/AR2009062201657.html>

Troubled teeth and gums aren't always just a dental problem. Sometimes they indicate deeper issues, and dentists are increasingly picking up on this. The relation of oral health to the rest of the body has gotten more attention in recent years, spurred by such experts as Richard H Carmona, who as US surgeon general urged policymakers in 2003 to "increase the understanding of how the signs and symptoms of oral infections can indicate general health status and act as a marker for other diseases." Non-oral-health issues dentists may be able to identify include heart disease, Type 2 diabetes, kidney disease, acid reflux, leukemia, and sleep apnea.

### **New Online Resource Bridges Gap on Oral Health - University of Manitoba answers the needs of Canadian health professionals**

(CNW Group – June 23)

<http://www.newswire.ca/en/releases/archive/June2009/23/c9072.html>

The University of Manitoba is preparing to launch a new online resource to bridge a major gap in oral health information among Canadian health care professionals. Advancing In Oral Health will go live as of September 2009 to improve quality of care and patient health in Canada. A recent survey indicates that 85% of health professionals currently practicing in Canada do not have enough information on oral health and the link between oral and overall patient health. The online survey of over 400 Canadian physicians, pharmacists and allied health professionals revealed several stunning gaps in their oral health knowledge relative to patient care: Although 60% of Canadian health professionals reported speaking to their patients about oral health, over 85% said they did not feel they had enough information on oral-systemic links. Further, more than 90% said they would recommend oral health strategies to their patients if they were aware of appropriate treatment methods.

### **“No Proof” for Filling Baby Teeth**

(BBC News, UK – June 22)

<http://news.bbc.co.uk/2/hi/health/8112603.stm>

Approximately 40% of 5-year-olds in the UK have tooth decay and at least 1 in 10 of these is treated with fillings. But anecdotal evidence from 50 dentists gathered by Manchester University researchers suggests filling baby teeth may not offer significant benefits. Advisers to the NHS are now beginning a study on treatment options to provide dentists with clear guidelines. Dentists currently have to rely on their experience and judgment to decide whether or not to intervene. When the decay is not causing symptoms, it can be difficult to decide what is in the child's best interests, given that their tooth will ultimately fall out by the time they are 11

years of age. Indeed, anecdotal evidence gathered from the case notes of 50 dentists suggests filling baby teeth may achieve nothing but expose children to the discomfort of an injection and the sound of the drill.

### **Dental Care Changes Report Due**

(Press Association – June 22)

<http://www.google.com/hostednews/ukpress/article/ALeqM5iiqtN1ab2ZRgsCzqYRTQBvJG0TzQ>

A review into the quality of the NHS dental service is being published. Patients and dentists were consulted for the independent report, which will recommend changes intended to improve the current system. The research team was asked to look into how funding should be allocated to Primary Care Trusts and identify how developments in workforce planning, training, and regulation can support NHS dental services and improve the working lives of dental professionals over the next 5 years.

### **One Mouth, Five Opinions**

(Israel News – June 19)

<http://www.haaretz.com/hasen/spages/1094163.html>

How can you be certain that the dentist you have chosen will give a credible and correct answer about the state of your mouth? Two mystery shoppers investigated the matter in Israel. Both testers were sent to a dental practice run by Israel's 4 health management organizations. The clinics diagnosed the same major problems in each case, and in every case but one the testers were told to have their teeth cleaned by a dental hygienist. When it came to cavities, implants, tooth extractions, and gum disease, however, a variety of diagnoses and treatment plans were offered. According to Dr Amnon Zinger, head of the Clinic for Oral Rehabilitation at Tel Aviv's Sourasky Medical Center, "It would be hard to find absolute congruence in the treatment recommendations of different dentists. [Treatment] depends on the dentist, their experience, their perspectives." Further clarification is necessary, however, when different dentists recommend radically different treatments. Dr Haim Neuman, chairman of the Israel Dental Association's ethics committee, concurs that therapeutic diversity is unavoidable: "In dentistry, as in ordinary medicine, there are different treatment approaches originating in different schools. Each approach would be valid in a large proportion of cases."

### **Eco-Dentistry Association Announces International Launch**

(About.com – June 19)

<http://dentistry.about.com/b/2009/06/19/eco-dentistry-association-announces-international-launch.htm>

The Eco-Dentistry Association announced its international launch this month. So far, dentists from 20 US states and Canada have joined the association that was formed to help dentists and dental professionals alike become Eco-friendly in their place of employment; the dental office. According to the Eco-Dentistry Association, by switching to reusable and non-toxic disinfection methods, the dental industry would considerably reduce the amount of waste that ends up in our landfills.

### **Cardinal Health Foundation Awards \$1 Million to Fund Patient Safety Initiatives**

(PRNewswire – June 18)

<http://news.prnewswire.com/DisplayReleaseContent.aspx?ACCT=104&STORY=/www/story/06-18-2009/0005046297&EDATE>

The Cardinal Health Foundation has awarded \$1 million in grant funding for new and innovative programs to improve patient safety at 35 hospitals, health systems, and community health clinics across the country. Grants of up to \$35,000 per facility will provide funding for programs that implement creative and replicable methods to improve the quality of patient care. The University of Alabama at Birmingham Hospital has received a grant to compare Chlorhexidine Rinse and the commercially available Oral Health Kit.

### **A Health-Care Exchange of Sorts already Exists: Barter**

(Kaiser Health News – June 17)

With the economy in recession and many people strapped for cash, bartering of various kinds has increased. Now, health care is surpassing auto repair and advertising as the service in most demand, said people who run local barter exchanges. Barter is little more than a stopgap solution for the uninsured. But with doctors, dentists, psychiatrists, chiropractors and even cosmetic surgeons offering their services, bartering is providing a temporary safety net of sorts for some workers who've lost their jobs and health coverage. And in some cases, people who have inadequate insurance are using barter to get services such as dental and vision benefits.

### **Movie Snacks Can Put Teeth at Risk**

(The Detroit News – June 17)

<http://detnews.com/article/20090617/LIFESTYLE/906170304/1005/Movie-snacks-can-put-teeth-at-risk>

Dentists warn that movie theater snacks can wreak havoc on teeth and advance tooth decay. Scariest than *Streptococcus mutans*, a bacteria that causes tooth decay, is that popcorn, a staple for moviegoers, can crack teeth and rip out fillings. Gummy candies, soft drinks, and candy coated with sour sugar are just some of the snacks that get a thumbs-down from Delta Dental. Delta Dental also suggests sticking with candies that have sugar substitutes that are less harmful to teeth and avoiding long-lasting hard candies that cause an acid attack on the teeth while they are in the mouth and another 20 minutes after melting.

### **Recession And Budget Cuts Hit Children Especially Hard**

(Kaiser Health News – June 17)

<http://www.kaiserhealthnews.org/Daily-Reports/2009/June/17/Children.aspx>

As the recession forces more hospitals and doctors to pare costs and services, children are being especially hard hit. According to the Wall Street Journal, "Children's hospitals and pediatricians are among the hardest hit by state cuts. That's because, while children have always made up about half of Medicaid's rolls, their numbers have swelled in recent years to the point that at least 22 million, or 1 in 4, US kids now get their health coverage through Medicaid or a state Children's Health Insurance Program. States often administer CHIP, which is aimed at families with more income than Medicaid participants, as part of their Medicaid programs. ... It's becoming increasingly difficult to find a doctor, particularly a specialist, who takes Medicaid."

### **Australia Lagging on Children's Health**

(ABC News, AU – June 17)

<http://www.abc.net.au/news/stories/2009/06/17/2600303.htm?section=australia>

New research shows Australia is falling behind other developed countries when it comes to infant mortality rates, teenage births and joblessness among families with children. The latest report card on the wellbeing of Australian children from the Australian Institute of Health and Welfare found that Aboriginal and Torres Strait Islander children are far more likely to be disadvantaged and 2 to 3 times as likely to have dental caries.

### **Dental Team Teaches Colombian Class Oral Hygiene**

(US Air Force – June 16)

<http://www.af.mil/news/story.asp?id=123154397>

Members from the dental team assigned to Military Sealift Command hospital ship USNS Comfort taught an oral hygiene class for 400 students at Chilvi School on June 15. The team partnered with a Colombian dental student to provide cursory exams to ensure the students' teeth were healthy and to give fluoride treatments. The course is one of the many services offered as part of Continuing Promise 2009 (CP09), which combines US military and interagency personnel, non-governmental organizations, academia, and partner nations to provide medical, dental, veterinary, and engineering services afloat and ashore alongside host nation personnel. The ship's next stop is El Salvador, where Comfort continues its 4-month humanitarian and civic assistance mission in the Caribbean and Latin America in support of CP09.

### **Case Western Reserve University's Dental School Wins \$9.5 million NIH Grant to Research Oral Health Defense Systems against Invading Bacteria**

(Cleveland.com – June 16)

[http://www.cleveland.com/medical/index.ssf/2009/06/case\\_western\\_reserve\\_universit\\_1.html](http://www.cleveland.com/medical/index.ssf/2009/06/case_western_reserve_universit_1.html)

Case Western Reserve University's Dental School has received a \$9.5 million grant from the National Institutes of Health's National Institute for Dental and Craniofacial Research, which will fund 4 research projects over the next 5 years. The grant will fund researchers at Case and 5 other institutions while they study how bodies use the mucus membranes of the mouth, nose, ears, and stomach to repel invading germs. The new funding builds on 7 years of work in the lab of Dr Aaron Weinberg, a microbiologist and dentist who discovered that bacteria in the mouth stimulate proteins in the lining of the mouth called defensins that are our natural defense against infections. Dr Weinberg will head up 1 of the 4 interrelated studies to try to create a defensin-type mimic that can bolster the immune system, potentially helping people who cannot fight off infection.

### **Nitrous Oxide: Do Dental Patients Want Laughing Gas?**

PRLEAP.com - June 15

<http://www.prleap.com/pr/136725>

Although 2 out of 3 dentists offer nitrous oxide to their dental patients, it is no longer as popular as it once was. In a survey by dental marketing resource The Wealthy Dentist, 18% of dentists reported that they never use laughing gas, and another 13% rarely do. Notably, dental specialists are more likely to offer nitrous oxide, sometimes needing more sedation dentistry options.

### **Scientists Explore Gene Variability in S Mutans**

(NIDCR – June 11)

<http://www.nidcr.nih.gov/Research/ResearchResults/ScienceBriefs/CurrentSNIB/June/Smutans.htm>

Scientists have long known that the oral bacterium *Streptococcus mutans* varies in its ability to metabolize carbohydrates, produce acid, and thus induce tooth decay. This was made evident 2 years ago when scientists in the UK compared the genomes of 9 distinct *S mutans* strains originally isolated in Scandinavia, England, and the United States and discovered tremendous heterogeneity in the gene content, supporting the idea that each species contains not only a "core" *S mutans* genome but also a "dispensable" genome consisting of genes acquired from other sources that are not essential for the bacterium's survival. But this raised important follow-up questions: If gene content varies among *S mutans* species from throughout the world, what about those present in the same geographic location? Could the type of *S mutans* that colonizes a person's mouth potentially contribute to the variability that dentists see in each patient's susceptibility to tooth decay? In the June issue of the journal *Oral Microbiology Immunology*, a team of NIDCR grantees provides a preliminary answer from a study of *S mutans* species present in the mouths of 9 randomly selected children from Eastern Iowa. The scientists found that each child had from 2 to 9 confirmed strains of the bacterium in their mouths. The 7 children with little or no tooth decay had multiple *S mutans* strains that were genetically identical, while the 2 children with significant decay had isolates with unique genotypes.

### **Simulation Helps Students Learn Dental Implant Procedures**

(Medical College of Georgia News – June 11)

<https://my.mcg.edu/portal/page/portal/News/archive/2009/Simulation%20helps%20students%20learn%20dental%20implant%20procedures>

A realistic computer game will soon be used to help dental students worldwide learn and reinforce dental implant procedures. The Virtual Dental Implant Training Simulation Program, developed by Medical College of Georgia School of Dentistry faculty and students and BreakAway, Ltd is designed to help students in diagnostics, decision making, and treatment protocols. Research shows that health care providers who practice clinical skills via simulation have better patient outcomes than those who don't. The implant simulation game uses multiple patients and clinical scenarios that can be randomly selected, letting students interact with virtual patients by asking about their medical history, examining them, and arriving at a diagnosis. Like humans, the virtual patients have different personalities, and students must tailor treatment based on the mental, physical and emotional needs of the individual. If the virtual patient is a candidate for implant therapy, the simulation then ventures into a virtual clinical treatment area, where students decide the type, location and orientation of the implants, type and location of anesthesia and tools for surgery.

## **AWARDS / FUNDING OPPORTUNITIES**

### **Innovative Dental Assessment Research and Development Grants Program - Joint Commission on National Dental Examinations**

The Joint Commission on National Dental Examinations, an agency of the American Dental Association, provides Innovative Dental Assessment Research and Development Grants Program funds to support a limited number of research and development projects aimed at studying innovations in testing methods. Proposals for the 2009-2010 funding cycle can be submitted from July 1, 2009 through October 1, 2009. The Joint Commission Steering Committee will make decisions about the final disposition of proposals in April 2010. More information is available on the American Dental Association's Web site at <http://www.ada.org/prof/ed/index.asp> or by contacting Dr Tsung-Hsun Tsai at [tsait@ada.org](mailto:tsait@ada.org) or 312/440-2684.

### **Applications Accepted for Residency Program in Dental Public Health**

The National Institute of Dental and Craniofacial Research (NIDCR) is now accepting applications for its Residency Program in Dental Public Health. Qualified applicants with a DDS or DMD degree or its equivalent and a prerequisite graduate degree in public health are eligible to apply. The program provides a formal training opportunity for dentists planning careers in dental public health, with an emphasis on oral and craniofacial, health-related epidemiologic research. The program is accredited by the Commission on Accreditation of the American Dental Association. Graduates receive a certificate of completion and are qualified educationally to apply for examination by the American Board of Dental Public Health for specialty certification. Additional details and an application are available online at <http://www.nidcr.nih.gov/CareersAndTraining/Fellowships/DentistsandPhysicians>. (Click on the "Residency in Dental Public Health" link.)

### **Facility Investment Program Funding for Health Centers under the American Recovery and Reinvestment Act**

On June 19th, HRSA announced the availability of approximately \$515 million under the Facility Investment Program (FIP) initiative to support one-time, 2-year funding requests from existing Health Center Program grantees. Details are available at <http://bphc.hrsa.gov/recovery>. The FIP application is available in the HRSA Electronic HandBooks (EHB) as of June 23, and applications must be submitted in EHB by August 6, 2009, at 8 pm ET. If your Health Center is considering using the Stimulus Plan's capital funding, NNOHA can help you direct that funding toward oral health care. For consultation on your specific oral health plans, please contact NNOHA at 303/957-0635.

### **HHS Announces \$40 Million CHIPRA Grant Opportunity**

The US Department of Health and Human Services (HHS) has announced the availability of up to \$40 million in Children's Health Insurance Program Reauthorization Act (CHIPRA) outreach and enrollment grants. These grants will be awarded to recipients (including states, local governments, Indian tribes or tribal consortiums, federal health safety net organizations, non-profit organizations, faith-based groups, schools and others) who can provide demonstrated ability to identify and provide outreach, enrollment, and program retention to eligible but unenrolled children in Medicaid and CHIP programs. Grant awards will be a minimum of \$25,000, with a maximum of \$1 million, averaging around \$200,000, and HHS anticipates making 200 awards in total. This is the first cycle of funding authorized by CHIPRA and will cover the budget period of September 30, 2009 - September 29, 2011. Those interested in applying have until July 27, 2009 to inform HHS of an intent to apply, August 6, 2009 to file an electronic grant application, and August 10, 2009 to mail hard copies and a CD of grant proposal materials to HHS. Award recipients will be announced prior to September 30, 2009. An applicant's teleconference will be held Wednesday, July 22, 2009 from 2:00-4:00 pm at 800/837-1935 (confirmation ID 17418037). The HHS grant full announcement and application are available online at <http://www.grants.gov/search/search.do?oppId=48293&mode=VIEW>.

### **Applications for Technical Assistance from States Seeking to Advance Medical Homes**

The National Academy for State Health Policy is offering a year-long program of technical assistance for up to 8 states seeking to improve the availability of medical homes in their Medicaid and Children's Health Insurance Programs. States interested in joining the Consortium, which is supported by The Commonwealth Fund, should submit an application by August 5, 2009. The program will be designed to support states in applying the 5 strategies for advancing medical homes identified in our previous work: 1) forming key partnerships, 2) defining and recognizing a medical home, 3) improving purchasing and reimbursement policies, 4) supporting practice change, and 5) measuring progress. More details on the Consortium, the benefits it offers participants, and the state selection process are available in the Request for Applications at [www.nashp.org](http://www.nashp.org).

## **TRAINING AND CAREER DEVELOPMENT**

### **Protecting All Children's Teeth (PACT): A Pediatric Oral Health Training Program**

<http://www.aap.org/oralhealth/pact.cfm>

The Oral Health Initiative is pleased to announce the launch of Protecting All Children's Teeth (PACT): A Pediatric Oral Health Training Program! This 13-chapter module aims to educate pediatricians, pediatricians in training, and others interested in infant, child, and adolescent health about the important role oral health plays

in the overall health of patients. PACT features topics such as dental development, fluoride, and oral injury and includes interactive tools such as roll-over definitions, chapter photo galleries, and self-assessment pages. The American Academy of Pediatrics is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The AAP designates this educational activity for a maximum of *11.0 AMA PRA Category 1 Credits™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

### **American Dental Association, The Forsyth Institute Collaborate to Pilot Evidence-Based Dentistry Training Course**

[http://www.ada.org/public/media/releases/0906\\_release02.asp](http://www.ada.org/public/media/releases/0906_release02.asp)

The American Dental Association (ADA) Center for Evidence-Based Dentistry (EBD) and The Forsyth Institute announce the offering of an intensive, 5-day training course in evidence-based principles and tools, including systematic reviews and applications for clinical decision making. The collaborative "ADA/Forsyth EBD Course" scheduled from Oct 19 to 23 at Forsyth headquarters in Boston, MA, will link the evidence-based dentistry initiatives of the ADA with the breadth and depth of Forsyth's scientific research. The interactive course will include a pre-assignment and multiple hands-on activities throughout the week.

### **An Introduction to NYS OMRDD Training Modules in Special Care Dentistry**

<http://www.omr.state.ny.us>

A Free CE Course designed to provide dental residents and all dental professionals with the tools necessary to increase their comfort level in treating patients with disabilities. To be held July 22, 2009, from 5:00 to 8:00 pm. Attendees will receive 3 CE credits. Reservations are required.

### **American College of Dentists Introductory Ethics Course**

<http://acd.org>

The American College of Dentists is planning a 7-hour introductory ethics course as part of its Annual Meeting & Convocation, Wednesday and Thursday morning, September 30–October 1, 2009, in Honolulu, HI. Completion of the course is the first step toward a planned certification process in dental ethics (currently under development). This is a great opportunity for those who wish to increase their knowledge and understanding of dental ethics. The course is open to all dentists, dental students, educators, and hygienists. This course is separate from the LeaderSkills workshops and a small registration fee will apply.

### **New British Dental Association Online Training Brings Qualification In Oral Health Education To Dental Care Professionals**

<http://www.bda.org/dcps/course/ohe/index.aspx>

A new online training course from the British Dental Association (BDA) that qualifies dental care professionals to advise patients on oral health has been launched. Combining theoretical knowledge and the development of communication skills, the course aims to see dental care professionals put an enhanced skill-set into practice with confidence. Over a period of 8 weeks, the Oral Health Education for Dental Care Professionals course guides participants through 27 'bite-sized' modules comprising mini-lectures complemented by animated videos and diagrams. A dedicated tutor supports participants, and a textbook, revision notes and mock exams are also provided. The cost of the course is £475 per student, with a concessionary rate of £425 per student for staff employed by BDA members.

## **CONFERENCES**

### **96<sup>th</sup> Annual Convention of the National Dental Association (July 24-29)**

Hyatt Regency Jacksonville- Riverfront – Jacksonville, FL

<http://www.ndaonline.org>

### **RDH Under One Roof (July 29-31)**

Rio All-Suite Hotel & Casino – Las Vegas, NV

<http://www.rdhunderoneroof.com/index.html>

**National Dental Benefits Conference 2009** *(August 28-29)*

ADA Headquarters – Chicago, IL

<http://www.ada.org/prof/events/featured/benefits/index.asp>

**2009 FDI Annual World Dental Congress** *(Sept 2-5)*

Suntec Singapore International Convention & Exhibition Centre – Suntec City, Singapore

<http://www.fdiworldental.org/microsites/Singapore/congress1.html>

**9<sup>th</sup> World Congress on Preventive Dentistry** *(Sept 7 – 10)*

Hilton Phuket Arcadia Resort & Spa – Phuket, Thailand

<http://www.iadr.com/i4a/pages/index.cfm?pageid=3777>

**4<sup>th</sup> Annual New England Rural Oral Health Conference** *(Sept 11)*

Sheraton Harborside – Portsmouth, NH

<http://www.newenglandruralhealth.org/activities/oralhealth.htm>

**Annual Meeting of the American Academy of Periodontology** *(Sept 12-15)*

Boston Convention & Exhibition Center – Boston, MA

<http://registration.experient-inc.com/ShowPER091/Default.aspx?App=A>

**American College of Dentists Meeting & Convocation** *(Sept 30–Oct 1)*

Sheraton Waikiki Hotel - Honolulu, HI

<http://acd.org/upcoming.htm>

**American Dental Association's 150<sup>th</sup> Annual Session** *(Sept 30 – Oct 4)*

Hawaii Convention Center – Honolulu, HI

<http://www.ada.org/prof/events/session/index.asp>

**American Dental Assistants Association Annual Session** *(Sept 30 – Oct 4)*

Waikiki Beach Marriott Resort and Spa – Honolulu, HI

<http://www.dentalassistant.org>

**3<sup>rd</sup> International Symposium on the Oral-Systemic Health Connection in Children** *(October 9)*

North Pointe Conference Center – Columbus, OH

<http://www.nationwidechildrens.org/gd/templates/pages/medpros/medpros.aspx?jrl=409&page=4609&clk=58094>

**American Academy of Pediatrics National Conference and Exhibition** *(Oct 17-21)*

Washington Convention Center—Washington, DC

<http://www.aapexperience.org/>

**ADEA Fall 2009 Meetings** *(Oct 21-24)*

Hilton Anatole – Dallas, TX

<http://www.adea.org/events/Pages/Fall2009Meetings.aspx>

**17<sup>th</sup> Annual Meeting of the Hispanic Dental Association** *(Oct 22-24)*

Hilton Americas – Houston, TX

[http://www.hdassoc.org/site/epage/25547\\_351.htm](http://www.hdassoc.org/site/epage/25547_351.htm)

## RESOURCES

**Americans Rank Prevention as Most Important Health Reform Priority**

<http://healthyamericans.org/pages/?id=265>

Trust for America's Health and the Robert Wood Johnson Foundation released a new public opinion survey, which finds that Americans rank prevention as the most important health care reform priority and support

increased funding for prevention programs to reduce disease and keep people healthy. Americans believe the nation needs to put more emphasis on prevention (59%) instead of treatment (15%) by nearly a 4 to 1 ratio. This represents a significant shift toward prevention over the last 2 decades.

### **Report Reviews National Early Childhood Policy in Four Countries**

[http://www.commonwealthfund.org/~media/Files/Publications/Fund%20Report/2009/May/International%20Comparison/1241\\_Halfon\\_intl\\_comparison\\_early\\_child\\_init\\_svcs\\_to\\_sys\\_FINAL.pdf](http://www.commonwealthfund.org/~media/Files/Publications/Fund%20Report/2009/May/International%20Comparison/1241_Halfon_intl_comparison_early_child_init_svcs_to_sys_FINAL.pdf)

*An International Comparison of Early Childhood Initiatives: From Services to Systems* describes components of efforts in England, Canada, Australia, and the United States to develop early childhood systems and considers the implications of the experiences for the development of US policy through the first quarter of 2009. Descriptions of early childhood initiatives in the United States include Head Start and Early Head Start, From Neurons to Neighborhoods, Early Childhood Comprehensive Services Initiative, state early childhood initiatives, local innovations, and innovations in pediatric care. Information about dental health is also included.

### **New ADA Standards and Report Available**

<http://www.ada.org/prof/resources/pubs/adanews/adanewsarticle.asp?articleid=3624>

Seven new standards and 1 new technical report from the ADA Standards Committee on Dental Products have been approved and are now available from the ADA.

### **Listening to Learn: Southeast Center for Research to Reduce Disparities in Oral Health**

<http://www.nidcr.nih.gov/Research/ResearchResults/InterviewsOHR>

Public awareness has been slow to extend to head and neck cancers, including oral cancer, particularly among the low-income and underserved Americans that are most at risk. To learn how to enhance awareness and save lives, the National Institute of Dental and Craniofacial Research (NICDR) began supporting the Southeast Center for Research to Reduce Disparities in Oral Health at the University of Florida's College of Dentistry in Gainesville. The Inside Scoop recently spoke with Dr Henrietta Logan, the center's principal investigator and a professor at the College of Dentistry, in the latest of NICDR's Interviews with Oral Health Researchers.

### **Child Health Report Highlights Racial/Ethnic Disparities**

<http://ppc.uiowa.edu/health/ICHHS/iowachild2005/2009DisparitiesIPHA.pdf>

The Iowa Department of Public Health has released its fifth and final report on the 2005 Iowa Child and Family Household Survey. This report focuses on the racial and ethnic disparities in the health and well-being of Iowa children and indicated children with Spanish-speaking parents were most likely to report problems accessing medical and dental care. Children whose parents completed the interview in Spanish had the lowest overall health and oral health status and were less likely to be insured. They were also less likely to believe their children needed medical care. African-American children were most likely to have public insurance coverage and dental insurance. The next Iowa Child and Family Household Survey will be conducted in 2010.

### **A Picture of Australia's Children 2009 – Dental Health Must Be Addressed**

[http://www.ada.org.au/App\\_CmsLib/Media/Lib/0906/M175722\\_v1\\_633815394038119828.pdf](http://www.ada.org.au/App_CmsLib/Media/Lib/0906/M175722_v1_633815394038119828.pdf)

A new report of how Australia's children are faring according to key national indicators of health has been released by the Australian Institute of Health and Welfare. This summary focuses on dental health as a key indicator for healthy child development.

### **Lexi-Comp Releases 15th Edition of Drug Information Handbook for Dentistry**

[http://www.dentalofficemag.com/display\\_article/366012/54/none/none/IndNw/Lexi-Comp-releases-15th-edition-of-Drug-Information-Handbook-for-Dentistr](http://www.dentalofficemag.com/display_article/366012/54/none/none/IndNw/Lexi-Comp-releases-15th-edition-of-Drug-Information-Handbook-for-Dentistr)

Lexi-Comp has released the 15th edition of its drug reference, the *Drug Information Handbook for Dentistry*. The resource includes dental-specific content on thousands of drugs, natural products, and dietary supplements. Dental-specific fields, such as Effects on Dental Treatment, Effects on Bleeding, Local Anesthetic/Vasoconstrictor Precautions, and Dental Comment, are highlighted in red for look-up. Special sections dedicated to medically compromised patients, specific oral conditions, and sample prescriptions are also included. The handbook, for chair-side use, supports safe pharmacotherapy, and improved patient care.

## American Dental Association's Update to State Innovations to Improve Access to Dental Care: A Compendium Update

<http://ada.org/prof/advocacy/medicaid/medicaid-surveys.asp#disclaimer>

In 2002, the ADA developed an extensive written review of each state's Medicaid and SCHIP dental health initiatives and updated it again in 2004. To keep information in the Compendium current in the face of rapid changes in Medicaid and SCHIP dental programs, the ADA initiated a new data collection project (questionnaire) in the spring of 2008. This new format offers substantial state-by-state detail, comparative analyses of state data, and a set of standard reports. It is now available on the ADA Web site.

## JOURNALS

### **Ambulatory Pediatrics** (Volume 9, Issue 3; May-June 2009)

<http://www.journals.elsevierhealth.com/periodicals/acap/current>

### **American Journal of Orthodontics and Dentofacial Orthopedics** (Volume 135, Issue 6: June 2009)

<http://journals.elsevierhealth.com/periodicals/yomod/current>

### **American Journal of Public Health** (Volume 99, Issue 7; July 2009)

<http://www.ajph.org/current.shtml>

### **Archives of Disease in Childhood** (Volume 94, Number 7, July 2009) – **NEW!**

<http://adc.bmj.com/current.dtl>

Articles of interest:

- *Factors Associated with Dental Admissions for Children Aged under 5 years in Western Australia*

### **Archives of Pediatrics & Adolescent Medicine** (Volume 163, Number 7, July 2009) – **NEW!**

<http://archpedi.ama-assn.org/>

Articles of interest:

- *Xylitol Pediatric Topical Oral Syrup to Prevent Dental Caries: A Double-blind Randomized Clinical Trial of Efficacy*
- *Solving the Problem of Early Childhood Caries: A Challenge for Us All*

### **Asia-Pacific Journal of Public Health** (Volume 21, Number 3, July 2009) – **NEW!**

<http://aph.sagepub.com>

Articles of interest:

- *Effects of Oral Health Care on Salivary Flow Rate in Patients With Type 2 Diabetes: Preliminary Study*
- *Oral Health Status of Vietnamese Children: Findings From the National Oral Health Survey of Vietnam*
- *Roles of Parents in Preventing Dental Caries in the Primary Dentition among Preschool Children in Thailand*

### **British Dental Journal** (Volume 206, Number 12; June 2009)

<http://www.nature.com/bdj/index.html>

Articles of interest:

- *Teddy Bears Help Anxious Children*
- *Focus on World Oral Health*
- *Tooth Decay Treatments for Children to be Examined in National Project*
- *Do School Break-time Policies Influence Child Dental Health and Snacking Behaviors?*

### **Caries Research** (Volume 43, Number 4; June 2009)

<http://content.karger.com/ProdukteDB/produkte.asp?Aktion=Ausgabe&Ausgabe=248979&ProduktNr=224219>

Articles of interest:

- *Reexamination of Caries and Fluorosis Experience of Children in an Area of Jamaica with Relatively High Fluorosis Prevalence*
- *CO<sub>2</sub> Laser (10.6 μm) Parameters for Caries Prevention in Dental Enamel*
- *The Isolation of Bifidobacteria from Occlusal Carious Lesions in Children and Adults*

**Clinical Pediatrics** (Volume 48, Number 6, July 2009) – **NEW!**

<http://cpj.sagepub.com/>

Articles of interest:

- Ludwig's Angina in the Pediatric Population

**Community Dental Health** (Volume 26, Issue 2; June 2009)

[http://www.cdjournal.org/view.php?journal\\_id=22](http://www.cdjournal.org/view.php?journal_id=22)

Articles of interest:

- *Differences in Oral Health Behavior between Children from High and Children from Low SES Schools in the Netherlands*
- *Caries Prevalence in Suriname Schoolchildren*
- *Early Childhood Caries and Related Risk Factors in Mongolian Children*

**Community Dentistry and Oral Epidemiology** (Volume 37, Issue 4; August 2009)

<http://www.blackwell-synergy.com/loi/COM>

Articles of interest:

- *Fluoride Ingestion from Food Items and Dentifrice in 2–6-year-old Brazilian Children Living in a Fluoridated Area Using a Semiquantitative Food Frequency Questionnaire*
- *The Influence of Sense of Coherence on the Relationship between Childhood Socioeconomic Status and Adult Oral Health-related Behaviors*
- *Optimizing the Mix of Basic Dental Services for Southern Thai Schoolchildren Based on Resource Consumption, Service Needs and Parental Preference*

**Contemporary Pediatrics** (June 2009)

<http://contemporarypediatrics.modernmedicine.com/contped/issue/issueDetail.jsp?id=17478>

**Dental Clinics of North America** (Volume 53, Issue 3, July 2009)

<http://www.dental.theclinics.com/current>

Articles of interest:

- *How Dental Care Can Preserve and Improve Oral Health*
- *The Role of Non-Dental Health Professionals in Providing Access to Dental Care for Low-Income and Minority Patients*
- *Improving Access to Oral Health Care for Children by Expanding the Dental Workforce to Include Dental Therapists*
- *Managing Clinical Risk: Right Person, Right Care, Right Time*
- *Using Teledentistry to Improve Access to Dental Care for the Underserved*

**Dental Economics** (Volume 99, Issue 6; June 2009)

<http://www.dentaleconomics.com/issue/toc.html>

**Dental Practice Management** (Summer 2009) – **NEW!**

[http://www.oralhealthjournal.com/issues\\_DPM/table\\_of\\_contents.asp?issue=06012009&RTtype=&PC=DPM](http://www.oralhealthjournal.com/issues_DPM/table_of_contents.asp?issue=06012009&RTtype=&PC=DPM)

**Dental Traumatology** (Volume 25 Issue 4; August 2009)

<http://www3.interscience.wiley.com/journal/118537215/home?CRETRY=1&SRETRY=0>

Articles of interest:

- *Consumer Products and Activities Associated with Dental Injuries to Children Treated in United States Emergency Departments, 1990–2003*
- *Correlation between Socioeconomic Indicators and Traumatic Dental Injuries: A Qualitative Critical Literature Review*
- *Evaluation of Sixth Grade Primary Schoolchildren's Knowledge about Avulsion and Dental Replantation*
- *Traumatic Dental Injuries among Primary School Children in Sulaimani City, Iraq*

**Dutch Journal of Dentistry** (Volume 116, Number 6; June 2009)

<http://english.ntvt.nl>

**European Journal of Paediatric Dentistry** (Volume 10, Issue 2; June 2009)

[http://www.eapd.gr/EAPDJournal/2009v10/Issue\\_2/Vol\\_10\\_Issue2\\_June\\_Contents.htm](http://www.eapd.gr/EAPDJournal/2009v10/Issue_2/Vol_10_Issue2_June_Contents.htm)

Articles of interest:

- *A Comparison of Pain and Anxiety Associated with the Administration of Maxillary Local Analgesia with Wand and Conventional Technique*
- *Oral Health Status and Behavior of Greek Patients with Cleft Lip and Palate*
- *A Form of 'Parental Presence/Absence' (PPA) Technique for the Child Patient with Dental Behavior Management Problems*
- *The Teaching of Management of the Pulp in Primary Molars in Europe: A Preliminary Investigation in Ireland and the UK*

**Evidence-based Dentistry** (Volume 10, Issue 2; June 2009)

<http://www.nature.com/ebd/journal/v10/n2/index.html>

Articles of interest include:

- *Early Childhood Caries – Risk Factors*
- *Is Oral Irrigation Beneficial to Gingival Health as an Adjunct to Toothbrushing?*

**General Dentistry** (Volume 57, Number 2; July/August 2009)

<http://www.agd.org/publications/issue/?PubID=17>

**International Journal of Paediatric Dentistry** (Volume 19, Issue 4; July 2009)

<http://www.blackwell-synergy.com/loi/ipd>

Articles of interest:

- *A Prospective Study of Dental Anxiety in a Cohort of Children Followed from 5 to 9 Years of Age*
- *An Evaluation of the PALS after Treatment Modeling Intervention to Reduce Dental Anxiety in Child Dental Patients*
- *Factors Associated with Caregivers' Perception of Children's Health and Oral Health Status: A Study of 6- to 36-month-olds in Uganda*
- *Oral Health Program for Preschool Children: A Prospective, Controlled Study*
- *Dentists' Involvement in Identification and Reporting of Child Physical Abuse: Jordan as a Case Study*
- *A Novel Mouth Guard for Prevention of Post-operative Graft Contraction of Severely Burned Pediatric Patients*

**Journal of the American Dental Association** (Volume 40, Issue 1; July 2009)

<http://jada.ada.org/current.dtl>

Articles of interest:

- *Infant Formula and Enamel Fluorosis: A Systematic Review*
- *The Association Between Enamel Fluorosis and Dental Caries in US Schoolchildren*
- *Assessing Patterns of Restorative and Preventive Care Among Children Enrolled in Medicaid, by Type of Dental Care Provider*
- *In Vitro Enamel Erosion Associated with Commercially Available Original-Flavor and Sour Versions of Candies*

**Journal of Contemporary Dental Practice** (Volume 10, Number 4; July 2009)

<http://www.thejcdp.com/issue047/index.htm>

Articles of interest:

- *Dental Caries in Pre-term and Low Birth-weight Children and Related Factors*
- *Bronchial Asthma and Dental Caries Risk: Results from a Case Control Study*
- *Teething Problems and Parental Beliefs in Nigeria*
- *A Review of the Biological and Clinical Aspects of Radiation Caries*

**Journal of Dental Education** (Volume 73, Issue 7; July 2009)

<http://www.jdentaled.org/current.shtml>

**Journal of Dental Research** (Volume 88, Number 6; June 2009)  
<http://jdr.sagepub.com/current.dtl>

**Journal of Evidence Based Dental Practice** (Volume 9, Issue 2; June 2009) – **NEW!**  
<http://www.sciencedirect.com/science/issue/12976-2009-999909997-1197067>

Articles of interest:

- *Identifying Predictive Values and Correlations with Caries using Cutoff Points (various pH levels) in the Cariostat Caries Activity Test*
- *The Provision of Remuneration Encourages the Placement of Sealants*
- *Secondhand Smoke May Be Associated with an Increased Risk of Primary Tooth Caries*
- *Obese or Overweight Children Do Not Have a Higher Risk of Dental Caries*

**Journal of Periodontology** (Volume 80, Number 7; July 2009)  
<http://www.joponline.org/toc/jop/80/7>

**New England Journal of Medicine** (Volume 361, Issue 1, July 2, 2009)  
<http://content.nejm.org/content/vol361/issue1/index.dtl?query=TOC>

**Oral Health** (June 2009) – **NEW!**

[http://www.oralhealthjournal.com/issues/table\\_of\\_contents.asp?issue=06012009&RTtype=&PC=](http://www.oralhealthjournal.com/issues/table_of_contents.asp?issue=06012009&RTtype=&PC=)

Articles of interest:

- *Implant-Anchorage-Assisted Orthodontic And Surgical Correction Of A Severe Class II, Division 1 Post-Traumatic Malocclusion*
- *Prophylactic Removal Of The Impacted Third Molar: A New Paradigm*

**Pediatric Dentistry** (Volume 31, Number 3; May/June 2009)

<http://www.ingentaconnect.com/content/aapd/pd/2009/00000031/00000003>

Articles of interest:

- *The Role of Pediatric Dentistry in Multidisciplinary Cleft Palate Teams at Advanced Pediatric Dental Residency Programs*
- *Maternal Transmission of Mutans Streptococci in Severe Early Childhood Caries*
- *Infant Oral Health Examinations: Pediatric Dentists' Professional Behavior and Attitudes*
- *Preventive Resin Restorations: Practice and Billing Patterns of Pediatric Dentists*
- *Body Mass Index of Children With Severe Early Childhood Caries*
- *Effect of Sensory Adaptation on Anxiety of Children With Developmental Disabilities: A New Approach*
- *Dental Caries and its Association With Sociodemographics, Erosion, and Diet in Schoolchildren from Southeast Brazil*
- *Xylitol: Effects on the Acquisition of Cariogenic Species in Infants*

**Pediatrics** (Volume 124, No 1; July 2009)

<http://pediatrics.aappublications.org/current.dtl>

Articles of interest include:

- *Preventive Dental Care for Young, Medicaid-Insured Children in Washington State*
- *Effect of a High-Flow Open Nasal Cannula System on Obstructive Sleep Apnea in Children*

**Pediatric News** (Volume 43, Issue 6; June 2009)

<http://www.epediatricnews.com/current>

**RDH Magazine** (Volume 29, Issue 6; June 2009)

<http://www.rdhmag.com/issue/toc.html>

## ONLINE NEWSLETTERS

**American Public Health Association Oral Health Special Interest Group**

<http://www.apha.org/membersgroups/newsletters/sectionnewsletters/oral>

**Association of Managed Care Dentists Newsletter**

<http://www.amcd.org/news.html>

**Bellweather – American Association for Community Dental Programs**

<http://www.aacdp.com>

**Cochrane Oral Health Group Newsletter**

<http://www.ohg.cochrane.org>

**Communique – American Association of Public Health Dentistry**

<http://www.aaphd.org/default.asp?page=pubs.htm>

**Dental Pipeline Newsletter – Community-Based Dental Education**

<http://www.dentalpipeline.org/newsandmedia/newsletters/index.html>

**Flossline – National Dental Association**

<http://www.ndaonline.org/flossline.asp>

**HDA News and Reports – Hispanic Dental Association**

[http://www.hdassoc.org/site/epage/32799\\_351.htm](http://www.hdassoc.org/site/epage/32799_351.htm)

**IADR Reports – International Association for Dental Research**

<http://www.iadr.com/i4a/pages/index.cfm?pageid=3332>

**MCH Alert – Maternal & Child Health Library**

<http://www.mchoralhealth.org/alert/2009/ohalert0609.html>

Articles of interest:

- *Body Mass Index of Children with Severe Early Childhood Caries*
- *Effect of Having a Personal Healthcare Provider on Access to Dental Care Among Children*
- *Infant Oral Health Examinations: Pediatric Dentists' Professional Behavior and Attitudes*
- *Preventive Dental Service Utilization for Medicaid-Enrolled Children in New Hampshire: A Comparison of Care Provided by Pediatric Dentists and General Dentists*
- *Use of Emergency Departments for Conditions Related to Poor Oral Healthcare: Implications for Rural and Low-Resource Urban Areas for Three States*

**News from NIDCR – National Institute of Dental and Craniofacial Research**

<http://www.nidcr.nih.gov/NewsAndFeatures/ENewsletters/CurrentNews>

**NNOHA News – National Network for Oral Health Access**

<http://www.nnoha.org>

**Oral Health Alert: Focus on Head Start**

<http://www.mchoralhealth.org/alert/archives.html>

**Oral Health America e-Newsletter**

<http://oralhealthamerica.org/news/news.html>

**Oral Health Matters – Association of State and Territorial Dental Directors**

<http://www.astdd.org/>

**Update – Bi-Weekly News Service from the American Dental Hygienists' Association**

[http://adha.informz.net/adha/archives/archive\\_231868.html](http://adha.informz.net/adha/archives/archive_231868.html)

**Update – Friends of the National Institute of Dental and Craniofacial Research**

<http://www.fnidcr.org/newsletters/FundingNews.html>

## OPPORTUNITIES



**PedJobs** is the electronic recruitment resource for pediatrics. View available jobs or post a resume. PedJobs is found online at:

### **Indian Health Service**

Indian Health Service (IHS) has vacancies in facilities large and small in some of the most beautiful areas of the United States. Whether you choose the Commissioned Corps, Civil Service, or direct Tribal hire career path, IHS has a position that will meet your specific needs for opportunity, adventure, and purpose. There are currently 79 vacancies—74 available now. To access an unofficial listing of vacancies open or soon to be open go online to: <http://www.dentist.ihs.gov/Positions/vacancies.cfm>. For more information contacts each area's contact person found by clicking on the job title opening to page 2 of the vacancy listing.

### **National Network for Oral Health Access (NNOHA) Job Listings**

The NNOHA Web site lists health center dental openings throughout the United States. The job list is available at [http://nnohajobbank.com/NNOHA%20Logon/Job\\_List.aspx](http://nnohajobbank.com/NNOHA%20Logon/Job_List.aspx).

### **Flagstaff, AZ—Dental Hygiene Faculty Position (Northern Arizona University)**

The position will be directing students in a clinical educational experience on the Hopi reservation and may include didactic classroom teaching as needed. Successful applicants will hold a dental hygiene license and will have a minimum of 3 years clinical experience, with master's credentials preferred. The reservation position includes housing in Keams Canyon Arizona. Salary commensurate with experience. Send or e-mail letter of intent, CV, and 3 letters recommendation to Marge Reveal, Dental Hygiene, NAU Post Box 15065, Flagstaff, AZ 86011-5065 or [Marjorie.Reveal@nau.edu](mailto:Marjorie.Reveal@nau.edu). The position will remain open until filled.

### **San Francisco, CA—Professor and Chair, Department of Preventive and Restorative Dental Sciences and Leland A & Gladys K Barber Distinguished Professorship in Dentistry (University of California, San Francisco School of Dentistry)**

The University of California, San Francisco School of Dentistry invites applications and nominations for the position as Chair of the Department of Preventive and Restorative Dental Sciences. Strong departmental research programs in behavioral sciences, epidemiology, biomaterials/bioengineering, lasers, and caries are related to the department's clinical responsibilities. The successful candidate will hold a Leland A and Gladys K Barber Distinguished Professorship in Dentistry and will take a strong leadership role in the teaching, research, patient care, and service missions of the department and school while being responsible for overall strategic planning and management of the department. UCSF seeks candidates whose experience, teaching, research, or community service has prepared them to contribute to UCSF's commitment to diversity and excellence.

Applicants should e-mail a letter of interest and curriculum vitae plus the names and addresses of 3 references to Peter B Sargent, PhD, Chair, PRDS Search Committee at [peter.sargent@ucsf.edu](mailto:peter.sargent@ucsf.edu) or mail to UCSF School of Dentistry, Box 0640, 521 Parnassus St, Room C-734, San Francisco, CA, 94143-0640.

### **San Francisco, CA— Faculty Members, Department of Preventive and Restorative Dental Sciences / Division of Oral Epidemiology and Dental Public Health (University of California, San Francisco School of Dentistry)**

Positions will be for full-time faculty members at the Assistant or Associate rank in the Adjunct Professor series or the Assistant rank in the In Residence Professor series to contribute to biostatistical, clinical, and oral health disparity-related research, teaching, and mentoring. Applicants must have a PhD or equivalent with advanced training in biostatistics and strong oral and written communication skills. Training or experience in clinical research, randomized clinical trials, public health, pain research and/or oral health (e., caries, joint disorders), along with collaborative grant application experience is preferred. Incumbents will join the team of the NIH-funded UCSF Center to Address Disparities in Children's Oral Health (CAN-DO). Applicants must have a demonstrated record or strong evidence in support of his/her potential for obtaining successful research funding. Interested applicants should submit a letter of intent, CV, and the names of 3 references to Dr Stuart

Gansky, Department of Preventive and Restorative Dental Sciences, University of California, San Francisco, Box 1361, 3333 California St, San Francisco, CA 94143-1361 or [stuart.gansky@ucsf.edu](mailto:stuart.gansky@ucsf.edu). Positions open until filled.

**Chicago, IL**—*Manager, Community Oral Health Workforce Program (American Dental Association)*

This position's main responsibilities include planning, overseeing, managing, and coordinating the Community Dental Health Coordinator (CDHC) Pilot Program. This position is supported by a pilot program initially set up as a finite, 3-4 year project with full-time funding (100%) for 3-4 years. This position requires a Masters degree in public health (MPH) or a Master's of science degree in public health (MSPH); a minimum of 7 years of experience in health care professional association management, health care field/organization, health care education, public policy formation or analysis, or related areas. Direct correspondence to: American Dental Association, 211 E Chicago Avenue, Chicago, IL 60611, or apply online at <http://www.ada.org>.

**Urbandale, IA**—*Dental Director (Iowa/Nebraska Primary Care Association)*

The Dental Director position is a full time, exempt position responsible for developing, evaluating, and/or expanding oral health programs in community health centers of primary and preventive dental care; fiscal development, leadership, and education in dental clinics at community health centers; community development, education, and relationship building at the state and local levels; development of a variety of programs in community health centers; and overall guidance to the Iowa/Nebraska Primary Care Association on oral health issues and developments. Graduation from an accredited dental school is required and an unrestricted license to practice dentistry in the State of Iowa and State of Nebraska is preferred. A full job description is available online at [http://www.ianepca.com/uploads/pdf/ianepca\\_dental\\_director\\_job\\_description\\_2009\\_06\\_29.pdf](http://www.ianepca.com/uploads/pdf/ianepca_dental_director_job_description_2009_06_29.pdf). Please submit resume/CV, cover letter, salary requirements, and references to Kate Burgener at [kburgener@ianepca.com](mailto:kburgener@ianepca.com) or Deb Kazmerzak at [dkazmerzak@ianepca.com](mailto:dkazmerzak@ianepca.com). Questions should be directed to Kate at 515/333-5025 or Deb at 515/333-5013.

**Indianapolis, IN**—*Various academic positions (Indiana University)*

Numerous dental health positions are listed at [http://www.iupui.edu/~oeo/academicjobs/acad\\_jobs.htm](http://www.iupui.edu/~oeo/academicjobs/acad_jobs.htm).

Available jobs include:

- *Research Associate Department of Preventive and Community Dentistry*
- *Visiting Assistant Professor/Department of Preventive and Community Dentistry*
- *School of Dentistry Assistant/Associate Dean for Diversity, Equity, and Inclusion*
- *Assistant Professor, Department of Endodontics*
- *Assistant or Associate Professor - Division of Oral and Maxillofacial Surgery*
- *Pre-Doctoral Director - Department Of Periodontics And Allied Dental Programs*

**Boston, MA**—*Director of Dental Services (MassHealth)*

The Director of Dental Services is a full-time key policy-making position in the Office of Medicaid. The Dental Director shall oversee the MassHealth dental program within the MassHealth Office of Acute and Ambulatory Care (OAAC) and work in collaboration with the Massachusetts Department of Public Health Office of Oral Health on dental public health programs. The Dental Director shall also work to increase access and work on oral health prevention activities and other initiatives to address oral health disparities, including but not limited to workforce shortages. The Dental Director must be a Massachusetts-licensed dentist with public health experience. The Dental Director will report directly to the Director of the MassHealth Office of Clinical Affairs and indirectly to the Deputy Assistant Commissioner for the OAAC. The Dental Director will be an important representative of and spokesperson for the MassHealth dental program, participate on various committees, and provide outreach to dentists in the Commonwealth. The Dental Director will lead the MassHealth Dental Advisory Committee, chair applicable joint committees, and consult with the Division of Health Care Finance and Policy regarding dental rate development. Frequent travel throughout Massachusetts and occasional evening hours for board meetings are required. More information and a link to apply online is available at [https://www.jobs-umassmed.org/umm/jobboard/JobDetails.aspx?\\_ID=\\*C34CD1B14930B825](https://www.jobs-umassmed.org/umm/jobboard/JobDetails.aspx?_ID=*C34CD1B14930B825).

**Minneapolis, MN**—*Director, Dental Therapy Program*

The University of Minnesota is now accepting applications and nominations for Director of the newly created Dental Therapy Program. The Program will launch in the Fall of 2009 as the first to be associated with a dental school in the United States. The candidate must have a DMD/DDS and be eligible for licensure within the State of Minnesota or a degree in Dental Therapy and eligible for licensure within the State of Minnesota at the time

the Minnesota Board of Dentistry approves licensure requirements. The candidate must also have a record of teaching and research experience with a minimum of 5 years of clinical or community practice experience. Demonstrated success in communication and administrative skills and a high degree of comfort in working as a member of a team is also expected. Review the full job description and apply online at <https://employment.umn.edu/applicants/jsp/shared/frameset/Frameset.jsp?time=1247663801835>.

**Minneapolis, MN**—*Various academic positions (University of Minnesota)*

Numerous dental health positions are listed at <http://www.dentistry.umn.edu/employment/home.html>. Available jobs include:

- *Adjunct Assistant, Associate or Full Professor*
- *Teaching Specialist*
- *Post Doctoral Associate*

**Lincoln, NE**—*Dental Health Director (Nebraska Department of Health & Human Services)*

This position provides overall management and leadership in the strategic design, analysis, and development of improved dental health care. Responsibilities include providing information on policies and programs that can improve oral health; represent the office to external stakeholders, including public and private organizations, providers, and the general public; building both state and national visibility for Nebraska's oral health initiatives through participation on various leadership committees, conference attendance, submissions to national publications, and networking; and working with communities, review scientific literature and determine the oral health evidence base for policy recommendations. The position is open until filled. Apply online at <http://www.statejobs.nebraska.gov>.

**El Paso, TX**—*Public Health Dentists*

Reporting to the Senior Public Health Dentist, this position provides professional chair side dental services to El Paso County residents from ages 1 to 21, both in the Public Health Department's Rawlings Dental Clinic and in 3 Mobile Dental Clinics, which operate at schools throughout El Paso County. Important aspects of the Dental staff's responsibilities are Oral Health Education and related preventive services. Responsibilities of this position include restorative and surgical services, preventive services to include prophylaxis, topical fluoride, oral hygienic instruction, diet instruction and sealant placement, and the interpretation of radiological survey of oral structures and tissues. The Public Health Dentist also completes required documentation of treatments and patient assessments and ensures compliance with guidelines related to infection control, radiation safety, hazardous chemicals and other policies and regulations as promulgated by the El Paso Public Health Department and/or Texas State Board of Dental Examiners. The position is open until filled. Qualified candidates please submit your resume online at <http://www.watersconsulting.com/recruitment>.

**Morgantown, WV**—*Assistant/Associate Professor, Division of Pediatric Dentistry (West Virginia University School of Dentistry)*

Responsibilities include course development and clinical instruction for predoctoral training, patient care, and scholarly activity. There may also be future involvement in postdoctoral training with the potential of a pediatric dental residency program. Candidates must have a DDS or DMD degree from an accredited US or Canadian dental school or foreign equivalent, be board certified or board eligible in pediatric dentistry, and be eligible for a West Virginia License. Prior academic and/or private practice experience is desirable. Review of applications will begin immediately and continue until the position is filled. Salary and academic rank will be commensurate with qualifications and experience. Financial compensation for student loan repayment is available. Interested individuals should submit a letter of interest; current CV; and the names, addresses, and phone numbers of 3 references to Dr Elliot Shulman, Chair, Search Committee, West Virginia University School of Dentistry, PO Box 9485, Morgantown, WV, 26506-9485.

**Australia**—*Australian-American Health Policy Fellowship (Department of Health and Ageing)*

The Australian-American Health Policy Fellowship offers a unique opportunity for outstanding, mid-career US professionals—academics, government officials, clinical leaders, decision-makers in managed care and other private health care organizations, and journalists—to spend up to 10 months in Australia conducting research and working with leading health policy experts on issues relevant to both countries. The fellowship is structured around mutual areas of interest, such as health care quality and safety, the private/public mix of insurance and providers, fiscal sustainability of health systems, management and efficiency of health care delivery, health care

workforce, and investment in preventive care strategies. Proposals should address one of the program's areas of interest and clearly demonstrate the intention to combine research and practical experience; relevance to both the United States and Australia; achievable outcomes, given the duration of the placement; and the potential to advance policy in Australia and the United States. US citizenship is a requirement for eligibility. More information and applications are available online at <http://www.commonwealthfund.org/fellowships>. Please direct questions to Robin Osborn at 212-606-3809 or [ro@cmwf.org](mailto:ro@cmwf.org). The deadline for receipt of applications is August 15, 2009.

**Sydney, Australia—*Professor and Dean of Dentistry (University of Sydney)***

The Dean is responsible for the general management of the faculty, providing leadership and support for all research, teaching and learning activities provided by the Faculty, overseeing the finances of the Faculty, and for the overall supervision of its staff. The successful applicant will be a distinguished scholar and researcher of international standing in a field of knowledge or clinical discipline within Dentistry, and have a breadth of interests and sympathy for other research interests represented in the faculty. In addition, he/she will demonstrate a capacity for high-level academic leadership, strategic vision and planning at a senior level; a capacity for practical and supportive administration, good financial management, and clear decision-making; and a record of success in fund raising through partnerships with alumni and external parties. The new Dean will be expected to actively contribute to its work and participate in University-wide projects. An information brochure can be obtained from Kevin Mitchell, Senior Recruitment Manager at (+61 2) 9036 7294 or [srsacademic@usyd.edu.au](mailto:srsacademic@usyd.edu.au). More information is available online at <http://tinyurl.com/dentistrydean>.

**Geneva, Switzerland—*Director or Associate Director, Dental Public Health (FDI World Dental Foundation)***

This position's main responsibilities include providing leadership and oversight to the FDI's public health efforts and administering all of the activities within the department in order to reach the goals established by the Federation's Council and World Dental Development and Health Promotion Committee. This position requires a dental or medical degree, or PhD, or equivalent experience in a biomedical field; specialty credentials in public health with at least 7 years experience in both general and oral health settings; recognition by other public health leaders as a peer; strong team working and networking skills, experience of strategic planning; a track record of project management with emphasis on setting priorities, completion and evaluation; a minimum of 5 years administrative management experience; communications competency in peer-reviewed, advocacy and lay channels; fluency in English; ability and willingness to travel worldwide. Applications or inquiries should be directed to Dr David C Alexander, Executive Director at [mdalexander@fdiworldental.org](mailto:mdalexander@fdiworldental.org) or by phone at +33 4 50 40 50 50. Applications should include a full CV, a 1-page resume, and a cover letter (max 2 pages) detailing how the applicant's qualifications and experience meet the above requirements. There is no closing date, but it is anticipated interviews will be held in June 2009.

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