Grant Announcement!

The American Academy of Pediatrics (AAP) has been awarded an extension on its Partnership to Reduce Early Childhood Disparities Grant from the Health Resources and Services Administrations Maternal and Child Health Bureau (MCHB). The AAP has been funded through January 2011 to complete the work on this grant. We are grateful to the MCHB for their continued support and look forward to continuing to provide you with high quality resources on early childhood oral health. This grant makes this E-Newsletter and many other AAP oral health activities possible!

Join Us at the AAPD Annual Session!

If you are planning to attend the American Academy of Pediatric Dentistry (AAPD) Annual Session in Chicago May 26-31, 2010, please stop by the AAP table to visit! We will be located next to the registration table. If you are already a member of the Section on Pediatric Dentistry and Oral Health, please stop by to get your badge sticker. If you are not a member, please stop by to join! We look forward to seeing everyone there! Please contact Lauren Barone at lbarone@aap.org if you have any questions.
ANNOUNCEMENTS

Information Needed on State Oral Health Coalitions
A group of state oral health coalitions is forming a national network to provide opportunities to share best practices, program ideas, and educational collaborations and to provide technical assistance to coalitions that are just getting started. The group is seeking to identify existing state oral health coalitions across the United States. If you are a staff or board member of a state oral health coalition, please contact Tanya Dorf Brunner, Executive Director for Oral Health Kansas, Inc, at tdorf@oralhealthkansas.org or 785/235-6039. Because this is the information-gathering phase, any information about existing state coalitions will be helpful.

HHS Launches Oral Health Initiative
The US Department of Health and Human Services has announced an initiative to expand oral health services, education, and research. Through this initiative, the department is increasing support for and expanding its emphasis on access to oral health care and the effective delivery of services to underserved populations. The initiative will use a systems approach to create programs that emphasize health promotion and disease prevention, increase access to care, strengthen the oral health workforce, and eliminate oral health disparities. As part of the initiative, HHS agencies will emphasize a number of activities such as securing dental homes for Head Start children; developing a long-range plan to monitor oral diseases, conditions, and oral health-related behaviors in the US population; reviewing 8 state Medicaid programs to identify and highlight innovative service strategies to increase access to care; developing a national surveillance system for American Indians/Alaskan Natives; and developing online cultural competency training modules for oral health clinical providers. More information about the Oral Health Initiative is available at http://www.hrsa.gov/publichealth/clinical/oralhealth.

Raising The Momentum Through Continuity of Care: Finding Dental Homes for America’s Children
http://www.ada.org/3955.aspx
Those interested in learning how to move existing dental care systems to the next level for America’s underserved children and sharing their ideas with counterparts are invited to attend this event, which kicks off Thursday, July 22, at 5:00 pm with a networking reception. The symposium continues Friday, July 23, with breakfast, followed by the program at 8:00 am. Boxed lunches will be provided at roundtable discussions held during the midday break, and adjournment will be at 4:30 pm. Thanks to the event’s sponsor, the Dental Trade Alliance Foundation, there is no charge for the symposium. All food and drink, including the Thursday reception, will be free of charge. Participants are only responsible for hotel and travel costs.

INTERVIEW WITH AN ORAL HEALTH CHAMPION

Mary Brown, MD
Dr Brown attended medical school at the University of Oregon. She then served in Vietnam as a general medicine officer with the Army. She completed her residency at the University of Oregon, where she received pediatric training. She has been in a private pediatric practice in Bend, OR for 35 years.

Dr Brown became interested in oral health while working in a general pediatric practice. It was here that she first noticed a need for children to have focused care on their teeth. She saw first-hand how poor oral care affected not only children’s physical health but their mental health, as well.

Pediatrician Involvement
In 2005, Dr Brown became involved in oral health advocacy when she was elected American Academy of Pediatrics (AAP) District VII Chairperson. In this role, she was asked to introduce the issue of oral health to the AAP Board of Directors in the hope it would become part of the organization’s overall strategic plan. It seemed to her there were not enough dentists to care for all the kids in need, and there were not enough pediatricians with the expertise in Oregon to help or refer children for oral care. After this fact was brought to the Board’s attention, oral health became a priority for the AAP and has remained so to this day.
In Bend, OR, there are fortunately enough pediatric dentists to care for children’s oral health, and Dr Brown finds that pediatricians are focusing on it more as well. This has helped to create a unique connection and a great relationship between pediatricians and the dental community. Previously oral care was left to the families to figure out, but now that more health professionals are involved, stronger connections have been formed.

**Obstacles to Care**

Even with all the progress being made, there are still significant obstacles in implementing oral health services for children, both locally and nationally. Oral health is a good indicator of poverty, and those most in need are the hardest to reach. Dr Brown feels that preventive dental care is more than just a solution to fixing what is wrong—there are still the problems of access and availability. Oregon participates in fluoride varnish reimbursement, for example, but at a lower level than many states. As preventive dentistry comes to the forefront, the amount of reimbursement for services has the potential to improve.

**Oral Health Training**

One tool that Dr Brown finds helpful is Bright Futures – Promoting Oral Health, which she considers “a marvelous resource for pediatricians”. She also helped to review the content for the Protecting All Children’s Teeth (PACT): A Pediatric Oral Health Training Program, which she hopes will one day become part of residency programs. Although there has been progress in bringing attention to oral health in resident training, more needs to be done. For example, there is still no requirement or specific focus on oral health. Five years ago there were no materials available for pediatricians on the subject of dental health, but the modules are increasing the accessibility of this information. For this reason, Dr Brown anticipates oral health will eventually become a larger part of the resident training, as well as a useful tool for CME and continuing education.

**Closing Thoughts**

Dr Brown says it has been “a real pleasure” to make connections between the pediatricians and the dentists. They need each other, and with a joint effort, they can have an impact. “It is no longer us and them. It is just us together. It is not a competition.” Rather, it is just everyone working together for the good of children.

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**IN THE NEWS**

**Adverse Dental Health Put Young Aboriginal Adults at Higher Chronic Disease Risk**  
(MedIndia – May 16)  

Young Aboriginal adults have 2-11 times higher adverse clinical oral health outcomes than young Australian adults, according to research published in the Medical Journal of Australia. Dr Lisa Jamieson, Senior Research Fellow at the Australian Research Centre for Population Oral Health, and co-authors compared oral health outcomes of a birth cohort of young Aboriginal adults from the Aboriginal Birth Cohort (ABC) study with those of age-matched counterparts in the National Survey of Adult Oral Health (NSAOH). They found that the mean number of decayed teeth was 8 times higher in ABC study participants than NSAOH participants, while the prevalence of untreated decayed teeth was 3.1 times higher. The study also showed that ABC study participants experienced 10.8 times the prevalence of moderate or severe periodontal disease of NSAOH participants, and 1.9, 4.1, and 4.5 times the prevalence of calculus, plaque, and gingivitis. “Of particular concern is the high rate of untreated dental decay and periodontal disease in young Aboriginal adults, with links between periodontal disease and cardiovascular disease, kidney disease, diabetes and obesity,” Dr Jamieson says. “Although it is difficult to ascertain the role that periodontal disease might play in the development of chronic disease among Australia’s Indigenous population, with half the Indigenous population currently aged under 21 years, this high prevalence of periodontal disease may contribute to a heavy burden of chronic disease in the future.”

**Virginia Medicaid Agency Probes Boy's Death After Dental Work**  
(Richmond Times Dispatch – May 14)  

The death of a 6-year-old Virginia boy who was sedated for a dental procedure is being investigated. Dentists typically use sedation and anesthesia to control pain and keep patients, particularly children, from moving during procedures. But sedation carries risks, and there have been deaths in Virginia and elsewhere. “It’s used thousands of times every day,” says dentist Indru Punwani, a spokesman for the American Academy of Pediatric
Dentistry (AAPD) and head of the pediatric dentistry department at the University of Illinois at Chicago. The AAPD did not have any statistics on how frequently adverse events occur, but there have been recent news reports of 2 Florida children who died during separate dental procedures in which sedation was used. According to Punwani, sedation is common in pediatric dental procedures because so many children are coming into dentist offices at younger ages with tooth decay and the need for extensive work. Sedation also is a safety issue because dental instruments move at high speeds. "If the patient starts moving around inordinately and we cannot control them, then that drill bit can rip down inside of the mouth and produce huge problems," says Dr Robert Campbell, a pediatric oral surgeon. According to Dr Campbell, the level of sedation depends on how many procedures are being done and the patient's ability to remain still. Campbell says the most common cause of death in dental offices under anesthesia is related to an airway condition.

In Ireland, 75% of Kids Have Tooth Decay by 15
(Irish Health – May 14)
http://www.irishhealth.com/article.html?id=17309
Three in four Irish children have experienced tooth decay by the time they reach the age of 15, dentists warn and are calling on the Minister for Health to introduce public health warning labels for fizzy drinks in an attempt to combat this problem. They say that the warning could be similar to the health warning which is currently carried on tobacco products. This would increase public awareness of the negative impact these products have on oral and general health. According to Dr Billy Davis, incoming president of the Irish Dental Association, Ireland currently has one of the highest per capita soft drink consumption rates in the western world.

Oral Health of Canadians Has Improved
(CBC News – May 10)
http://www.cbc.ca/health/story/2010/05/10/dental-health-oral-statistics-canada.html#ixzz0ngslmicl
The Canada Health Measures Survey suggests that Canadians' oral health has improved since 1972. According to the report, 84% of Canadians surveyed reported their oral health as good or excellent, and 74.5% said they made a dental visit in the previous 12 months. But there was also evidence of inequalities in oral health and access to care. For example, more lower-income Canadians with at least one natural tooth (46.6%) needed one or more types of treatment compared with 25.6% of those with higher income. Age, income, country of birth and risk factors such as smoking and regular visits for care were also strongly associated with oral conditions, the report's authors said. "The real challenge is not the measurement of the problems but taking effective action to address them," the report concluded. "The survey results provide a platform from which to explore policy options, such as the need for achieving improved access to care and improved oral health."

Underground Dentistry Rife in Texas
(Cosmetic Dentistry Guide – May 7)
http://www.cosmeticdentistryguide.co.uk/news/underground-dentistry-rife-in-texas-5053
The number of dentists practicing without a valid license has reached shocking proportions in Texas. Although the practice of working without a license is illegal, there are currently several cases under investigation across the state, most of which involve dental professionals offering services beyond their usual role and dentists that have licenses to practice in other countries but not in the United States. According to Dallas County Assistant District Attorney Raquel Jones, an increasing number of underground operations offer patients dental care, running the services from their homes or in the back rooms of other business establishments. These dentists have the necessary equipment and instruments, but most do not operate in sterile environments, increasing the risk of infection. They target low income families, illegal immigrants, and the unemployed by offering reduced rate or affordable care, knowing that the patients are not in a position to decline the offer because they would never be able to afford dental care at a licensed clinic. According to the Texas State Board of Examiners, these practices target the weak and vulnerable and have the potential to cause great harm.

American Academy of Pediatric Dentistry Encourages Parents to ‘Get it Done in Year One’
(PR Newswire – May 6)
Many parents are missing the preventive measures and specialized care needed to keep their baby’s smile healthy, according to a new survey by the American Academy of Pediatric Dentistry (AAPD). According to the survey, 97% of respondents did not know their children needed to visit a pediatric dentist in the first year of life with 78% of respondents agreeing they would take their children to visit a pediatric dentist before their first

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birthday if they knew that the visit would result in better oral hygiene as they developed. "We were astounded that only one-third (33%) of moms considered oral health a concern for their infants," says AAPD President William C Berlocher, DDS. The survey also revealed that 88% of the moms surveyed were concerned about cavities in baby teeth but many were unsure of how to keep their baby's teeth healthy at home. Approximately 45% of moms surveyed did not regularly clean their babies' mouths, and less than one-third began brushing their children's teeth before 1 year of age. In addition, the survey found that 26% of parents felt that children only need to see a dentist in the case of a serious health problem. "We hope that these survey results serve as a wake-up call for parents," says Dr Berlocher. "Helping children grow into strong, healthy adults begins in the first year of life and the pediatric dentist is crucial to the team of physicians necessary for that growth."

**Study Finds Medical Homes Help Lower Health Care Costs, Maintain Quality**
(Kaiser Health News - May 5)
http://smtp01.kaiserhealthnews.org/t/10250/439259/10149/0/
Some health policy experts and clinicians have long maintained that there is no place like a medical home to reduce health care costs and improve patient outcomes. A new study in the May issue of the journal *Health Affairs* seems to validate that notion. Medical homes, where primary care doctors are held responsible for coordinating care for individual patients, are seen as a model for lowering costs without sacrificing quality. For this study, Dr Rob Reid and colleagues from the Group Health Research Institute examined the costs and patient outcomes from a team of medical professionals providing care for 10,000 patients at a Seattle-area group health medical home and found that the medical home produced significant cost savings. The medical home patients also reported better care experiences.

**Information Shortfall for the Sightless Worries Top Dental Expert**
(HealthCanal.com – May 5)
One of Britain's leading dental experts, Dr Nigel Carter, has expressed concern over a lack of oral health information for the visually impaired following the results of a study that examined 100 such patients. For this study, each participant underwent a visual oral check, during which each tooth was assessed and recorded alongside the levels of plaque and calculus in the mouth. Despite the results, which showed the group to have equal oral health levels to that of adults tested in the 1998 Adult Dental Health Survey, the visually impaired were less likely to obtain dental check-ups and more likely to only visit the dentist when in pain. More than half the sample group complained that there is inadequate information about dental care available in platforms they are able to access. It is Dr Carter's belief that oral health educators need to be more aware of visually impaired audiences and adjust the formats of their information so that it is accessible for everyone.

**Deamonte Driver Dental Project Unveils First Mobile Clinic**
(Dentistry IQ – May 5)
http://www.dentistryiq.com/index/display/article-display/0078460550/articles/dentistryiq/industry/2010/05/deamonte-driver_unveils.html
The Deamonte Driver Dental Project has announced the launch of its first mobile dental clinic as part of a school-based community initiative to increase access to care for uninsured and underinsured children and is evolving as a model for the nation. "I applaud the efforts of the Deamonte Driver Dental Project to make sure that no other child in our nation dies from tooth decay," says Senator Ben Cardin, who authored the provision requiring dental benefits be included in the reauthorization of the Children's Health Insurance Program. "Deamonte Driver's tragic death is a reminder that oral health is part of overall health care and all American children must have access to dental care." The 39-foot mobile dental clinic features 3 dental operatories, digital X-ray systems, internal and external flat-screen monitors, and a software management program for data collection and case management. Goals for the second year are to expand the scope of the project, increase the number of adopted schools, use the new mobile clinic to implement school-based emergency, restorative, and preventive services for the children, and to increase venues for community health education by increasing participation in community health fairs at schools, churches, and community centers. More information about the project is available online at http://www.ndaonline.org.
Is Medical Advice on the Internet Reliable?
(Journal Watch– April 28)
http://pediatrics.jwatch.org/cgi/content/full/2010/428/1?q=etoc_jwpeds
More patients are turning to the Internet for medical advice. To determine the accuracy of online medical information, UK researchers used keywords to search Google for advice about common pediatric topics. The first 100 Web sites listed in the results for each search were evaluated, with the following results: 39% of the Web sites gave accurate information (consistent with current UK recommendations); 11% provided inaccurate information; and 49% did not provide pertinent advice. It was also determined that the news sites were accurate only 55% of the time, and sponsored sites (sites that pay premiums to be featured prominently in results lists of search engines) were never accurate. Researchers concluded that online medical information is highly variable and often inaccurate; therefore, it is important for health care providers to learn the best sources of information for patients and recommend government-sponsored sites when available.

Pew Urges Congress to Fund Reforms Meant to Improve Children's Dental Health
(PR Newswire – April 28)
The Pew Center on the States urges congressional leaders to fund dental care measures in the new Patient Protection and Affordable Care Act. "With federal funding to back these measures and smart state efforts to implement them, millions of children would gain better access to proper dental care," says Shelly Gehshan, director of the Pew Children's Dental Campaign. "These proven policies can help eliminate the pain, missed school hours, and long-term health and economic consequences of untreated dental disease." Pew is currently conducting research on the economic benefits of new providers and working to help states develop these models. According to Gehshan, "More dental coverage will encourage more demand, so federal support for innovative workforce models will help spur states to improve access and efficiency."

American Academy of Periodontology Calls on CDC to Assess Periodontal Health
(EurekAlert – April 27)
The American Academy of Periodontology was recently invited to provide testimony to the Centers for Disease Control and Prevention's (CDC) Division of Oral Health as part of the strategic planning process for 2011 through 2014. The testimony called for the CDC to prioritize resources to analyze and validate the results of the 2009-2010 National Health and Nutritional Examination Survey (NHANES), which includes self-report questions on periodontal health as well as a complete periodontal examination. This recommended analysis is vital in establishing a baseline measure of the periodontal health status of the US population, especially in light of the growing body of research that links periodontal disease to other diseases, such as cardiovascular disease and diabetes. The testimony also recommends that the 2 organizations, along with other stakeholders, partner to promote public awareness of periodontal disease prevalence in the United States, and raise awareness of the importance of periodontal health in achieving overall health.

Tobacco Hinders Maintenance of Oral Health
(TopNews – April 27)
http://topnews.us/content/218277-tobacco-hinders-maintenance-oral-health
The cosmetic impacts of smoking on teeth are known, but few people think about the serious effects of tobacco on their dental health, such as how it affects the bone and soft tissue to their teeth. According to Dr Robert MacGregor, Canadian Dental Association Vice-President, “Tooth discoloration and bad breath are two of the better known side-effects of smoking, but smokers need to be aware that they’re also contending with gum disease, periodontal disease, loss of jawbone density, loss of teeth, leukoplakia, inflammation of the salivary gland openings on the roof of the mouth, and oral cancer.” Where oral health maintenance is concerned, no form or amount of tobacco is safe.

After Teeth Are Pulled, Platelet-Rich Plasma May Speed Healing
(Business Week – April 23)
http://www.businessweek.com/lifestyle/content/healthday/638278.html
Platelet-rich plasma accelerates healing and bone formation after tooth extraction, a new study shows. Poor healing after tooth removal can result in excessive jaw bone loss that may delay the use of dental prosthetics or implants, require expensive reconstructive surgery, or be impossible to repair, say researchers. The study
included patients who had surgery to remove wisdom teeth. One extraction site was treated with platelet-rich plasma (PRP) while the site on the other side of the mouth was used as a control. During 24 weeks of follow-up, the patients were checked for jaw bone density, healing, bleeding, inflammation, pain, and facial swelling. "The PRP treatment has a positive effect on bone density immediately following tooth extraction," while the control sites showed a decrease in bone density in the first week after surgery, the researchers found. PRP had little effect on bleeding, inflammation, pain and facial swelling and "the immediate start of bone formation seen with PRP treatment is of clinical relevance because it is the initial 2 weeks following bone manipulation oral surgery that are important." Using PRP to promote faster jaw bone formation may reduce the waiting time for dental prosthetics or implants to 2 to 4 months instead of the current 4 to 6 months. The study was recently published in the Journal of Oral Implantology.

**People May Be Eating up to 46 Teaspoons of Sugar Without Realizing It**
(Cosmetic Dentistry Guide – April 21)
http://www.cosmeticdentistryguide.co.uk/news/people-may-be-eating-up-to-46-teaspoons-of-sugar-without-even-realising-6911

A study has revealed that food manufacturers are putting increasing amounts of sugar in their food products. The research project, which was recently published in the Journal of the American Medical Association, concluded that not only were manufacturers stuffing their foods with sugar, but consumers were completely unaware of how much sugar they were eating, with some people may be eating up to 46 teaspoons of sugar per day, without even realizing it. The study examined nutritional data given by 6000 men and women during the period of time between 1999 and 2006. Those with a high daily consumption were unwittingly consuming around 46 teaspoons of sugar a day, while those with the lowest daily consumption were taking in around 3 teaspoons of added sugars a day. (The study did not examine natural sugars, which are often found in fresh fruit and fruit juices.) Along with health conditions such as heart disease and high blood pressure, a diet that is high in sugar intake also contributes to oral health problems including tooth decay and gum disease. Dentists have reported an increase in the number of young children with cavities and decay, which is largely due to a poor diet that is high in sweet foods. Adults that eat a diet which is made-up of fast food and ready-made meals are also endangering their oral health and are much more likely to experience dental health problems than people who eat a healthy, balanced diet. Experts advise people to read food labels carefully and moderate their sugar intake accordingly.

**Is Whitening Teeth With Hydrogen Peroxide Harmful for Tooth Enamel?**
(WorlDental.org – April 19)

Researchers have discovered that hydrogen peroxide does not affect the surface of tooth enamel even with repetitive use, and dentists using hydrogen peroxide that consists of 38% hydrogen peroxide noted no changes in the structure of the enamel after using repeated whitening applications. However, some studies suggest that hydrogen peroxide in high concentrations can change the enamel of one’s teeth by increasing their porosity. Further, the use of hydrogen peroxide in higher concentrations than 38% has been found to result in calcium loss in the teeth and demineralization; this makes some whitening systems potentially harmful to delicate tooth tissues and gums. The studies on using hydrogen peroxide found that having visits at the dentist office once every week for 4 weeks time and having a whitening session does not have any kind of effect on tooth structure, on the porosity of the teeth, or on enamel's roughness. In contrast, some over-the-counter whitening systems contain carbamide peroxide that affect the enamel of one’s teeth and porosity in high concentrations.

**Younger Children Getting More Cavities in Canada**
(Vancouver Sun – April 19)

The incidence of dental cavities in older schoolchildren has dropped dramatically in the past 20 years, but 40% of Canadian children younger than 5 years of age have cavities. “Research came out 5 years ago to say that the rate of cavities had dropped by 33-50% compared to what it was 20 years ago,” says Dr Sarah Hulland, a pediatric dentistry specialist in Calgary. “But in dentists' offices in the past 5 to 10 years, we've seen a progressive increase in cases of children aged [up to] 5 with rampant decay.” As with childhood obesity, diet is at the heart of the issue. Many factors contribute to the problem “but diet and the way we are managing food is not good ... Another issue is that kids are being told to hydrate, so they're constantly sipping on juice and sugary drinks. As well, we live in a culture where small children are constantly being fed little snacks that have hidden sugars.” Compounding the problem is low fluoride levels. Despite public health campaigns, it remains
difficult to convince parents “that poor dental health is related to the global health picture,” Hulland says. “Children don’t eat or sleep properly when they have cavities. There are many epidemiological studies showing that they don’t meet the developmental milestones. And those first 5 years make all the difference in terms of their long-term success. It’s not just about teeth, it’s about their whole health.”

**Why a Rotten Tooth Is Hard to Find**
(Science News – April 16)
[http://www.sciencenews.org/view/generic/id/58340/title/Why_a_rotten_tooth_is_hard_to_find](http://www.sciencenews.org/view/generic/id/58340/title/Why_a_rotten_tooth_is_hard_to_find)
A new imaging study shows that to the brain, a painful upper tooth feels a lot like a painful lower tooth. The results, which will be published in the journal *Pain*, help explain why patients are notoriously bad at pinpointing a toothache. In the study, researchers led by Clemens Forster of the University of Erlangen-Nuremberg in Germany analyzed brain activity in healthy volunteers as they experienced tooth pain. Many brain regions responded to top and bottom tooth pain, carried by signals from 2 distinct branches of a fiber called the trigeminal nerve, in the same way. In particular, researchers found that regions in the cerebral cortex behaved similarly for both toothaches. “The activation was more or less the same,” Forster says, although he adds that their experiments might have missed subtle differences that could account for why some tooth pain can be localized. Because the same regions were active in both toothaches, the brain—and the person—couldn’t tell where the pain was coming from. “Dentists should be aware that patients aren’t always able to locate the pain,” Forster says. “There are physiological and anatomical reasons for that.” Understanding the pathway from tooth to brain may help researchers devise better treatments for acute tooth pain, such as cavities or infections, and more chronic conditions such as phantom pain that persists after a tooth has been removed.

**Susceptibility for Caries, Gum Disease Found in Genes**
(Science Daily – April 15)
Certain genetic variations may be linked to higher rates of tooth decay and aggressive periodontitis, according to researchers at the University of Pittsburgh School of Dental Medicine. In a study published in the *Journal of Dental Research*, researchers found that the rate of dental caries was influenced by individual variations in a gene called beta defensin 1 (DEFB1), which plays a key role in immune response. “We were able to use data gathered from our Dental Registry and DNA Repository ... to see if certain polymorphisms were associated with the development of caries,” said Alexandre R Vieira, DDS, PhD, senior author. “This could help us find new ways to treat people who are particularly susceptible to tooth decay.” In a second paper, published in *PLoS ONE*, Dr Vieira and colleagues studied saliva samples of 389 people in 55 families to look for genetic links to aggressive periodontitis. They found hints of an association between the disease and the FAM5C gene. Although further testing did not find any mutations or polymorphisms that bore out a relationship, other experiments showed elevated levels of FAM5C expression in areas of diseased periodontal tissue compared to healthy tissue.

**Oral Bacteria Linked to Intrauterine Infections and Pre-Term Birth**
(Science Daily – Apr 15)
Bacteria in the mouths of pregnant women can contribute to pre-term birth, according to researchers from Case Western Reserve University, Cleveland, Ohio, and Hathaway Brown School, Shaker Heights. The findings are published in the April 2010 issue of the journal *Infection and Immunity*. Approximately 12.7% of births in the United States are pre-term deliveries, a rate that reflects a 36% increase over the last 25 years. Intrauterine infection is recognized as a main cause of pre-term birth as well as late miscarriage and still birth. The cause of intrauterine infections has long been attributed to bacteria ascending into the uterus from the lower genital tract; however, recent studies indicate such infections are caused not only by bacteria found in the vaginal tract, but also in the mouth. In this study, saliva and plaque samples were injected into the tails of pregnant mice to determine what bacteria are capable of oral-uterus transmission. Researchers identified a diverse group of bacterial species colonizing the placenta, of which the majority originate in the oral cavity and are associated with adverse pregnancy outcomes in humans. “This study provides the first insight into the diversity of oral bacteria associated with intrauterine infection,” say the researchers. “Based on our findings, we postulate that periodontal therapies targeted at consistently reducing the total bacterial load in the mother’s oral cavity may be effective in improving birth outcomes.”
British Dental Health Foundation Calls for Stricter Measures to Control Children's Diets
(Cosmetic Dentistry Guide – April 14)
The British Dental Health Foundation has called for stricter measures to help control children's eating habits and prevent childhood illnesses such as tooth decay, gum disease, and child obesity. A research study has revealed shocking statistics related to children's eating habits and oral hygiene routines, with many parents failing to control their children's diets and struggling to cope with their children's behavior when they don't give them the foods they ask for. The report suggested that modern parents face the challenge of a “sweetie culture”, where children are constantly surrounded by sweet treats and are consequently demanding them on a regular basis.

In previous generations, children considered sweets to be a weekly treat as a reward for good behavior or doing well at school. Now, sweets form an integral part of a large proportion of children's daily diets and this is undoubtedly contributing to oral health problems. Dr Nigel Carter, chief executive of the British Dental Health Foundation, agrees that parents face an increasingly challenging role, with so many sweet, sugary foods to offer their children. More support is needed for parents who are struggling, but ultimately parents needed to be stricter with their children. For example, starting to introduce sweets and chocolate as a treat from an early age will help children to learn that sweets are not part of their daily diet. Teaching children about healthy eating and getting them involved in cooking and preparing healthy food will encourage them to take an interest in what they eat and they will begin to learn about the benefits of living a healthy lifestyle.

Some Toothpastes Work Better Than Others
(UPI.com – April 14)
http://www.upi.com/Health_News/2010/04/14/Some-toothpastes-work-better-than-others/UPI-86961271298108/

Some toothpastes work better than others in curbing the some 800 to 1000 different kinds of bacteria that live in the human mouth, US researchers report. According to Joseph J Zambon of the University at Buffalo School of Dental Medicine, many of the bacteria form dental plaque, which causes cavities, gingivitis, and gum disease. Researchers tested one kind of toothpaste containing triclosan/copolymer and 2 fluoride toothpastes on different kinds of bacteria that mimic germs in the mouth grown in the laboratory as well as bacteria from human mouths. The study, published in the journal General Dentistry, found the toothpaste with triclosan/copolymer outperformed the fluoride-only toothpastes in curbing the growth of bacteria.

The Health Risks of Smokeless Tobacco Use Deserve Congressional Attention, Advocates Say
(PR Newswire – April 14)

Oral Health America (OHA) participated in “Smokeless Tobacco: Impact on the Health of our Nation's Youth and Use in Major League Baseball,” “a congressional hearing on the use of smokeless tobacco by young people, the effects it has on oral health, and the impact of its use by professional baseball players. Speakers included OHA's former National Spit Tobacco Education Program (NSTEP®) Chairman, Joe Garagiola, and Gruen Von Behrens, an oral cancer survivor and member of the NSTEP speaker's bureau. Mr Von Behrens first started using smokeless tobacco at the age of 13 to fit in with his peers. As a high school baseball star at the age of 17, he was diagnosed with cancer and has since undergone 34 surgeries. He now travels throughout the United States, sharing his story with more than 2 million young people and collegiate and professional athletes. OHA established the NSTEP program in 1994 to reduce the use of spit tobacco and to help break baseball's association with it. NSTEP reaches out to 325,000 Little League players every year.

Increasing Number of UK Children Suffering From Preventable Illnesses
(Cosmetic Dentistry Guide – April 13)

The number of children in the UK suffering from preventable health conditions has reached epidemic proportions, according to research by the BBC. Staff at Alder Hay hospital, the busiest children's hospital in Europe, has become increasingly concerned about the number of children being admitted with preventable illnesses such as tooth decay and obesity and problems associated with passive smoking. In addition to causing obvious distress to children, treatments cost the National Health Service millions each year and prevent money,
resources, and time from being devoted to other patients. The dental department in particular has seen an alarming rise in the number of young children being admitted for complex dental procedures and tooth extractions, with more than 500 operations carried out each year on children younger than age 6. In addition to the general increase in the number of children being admitted, experts say that patients are getting younger each year, with 2- and 3-year-olds now suffering extensive decay. According to Steve Ryan, medical director, the importance of these statistics should not be underestimated—this could perhaps be the first generation of children to die before their parents due to poor general and dental health and unhealthy lifestyle habits.

**Survey Indicates Poor Standards of Oral Health in India**
(Cosmetic Dentistry Guide – April 13)
The Consumer Usage and Attitudes Survey was implemented to learn about general standards of dental health and the nature of dental habits India. Amongst the most shocking revelations is that nearly half of Indians do not use a toothbrush, with only 51% of people surveyed stating that they regularly brushed their teeth using a toothbrush and toothpaste. Only 28% of participants said they brushed their teeth twice a day, and 34% said that brushing their teeth once a day was sufficient for good oral health. In regard to the consequences of poor oral hygiene; 56% of people thought there were no serious consequences of never changing a toothbrush, and 65% believed that their diet had no significant influence on their dental health. Both of these revelations show a very poor understanding of oral hygiene and oral health across India, causing health ministers to increase their efforts to improve education about oral hygiene and the dangers of poor oral health.

**Study Links Heart Disease With a Person's Number of Teeth**
(MedIndia – April 13)
People with dented smiles run a greater risk of dying of heart disease than those who still have their teeth intact, according to a Swedish researcher. “Cardiovascular disease and in particular coronary heart disease is closely related to the number of teeth” a person has left, says Anders Holmlund, explaining the results of a Swedish study to be published in the *Journal of Periodontology*. “A person with fewer than 10 of their own teeth has a 7 times higher risk for death by coronary heart disease than a person of the same age and of the same sex with more than 25 teeth left.” Although many studies published in the past 15 years have shown a link between oral health and cardiovascular disease, Holmlund’s study shows a direct relationship between cardiovascular disease and the number of teeth in a person's mouth. The theory connecting teeth numbers and heart disease, Holmlund explained, maintains that “infections in the mouth and around the teeth can spill over to the systemic circulation system and cause a low graded chronic inflammation,” which is known to be a risk factor for heart attacks and other cardiovascular episodes.

**Five-year-old Girl Loses 8 Teeth to Decay**
(Cosmetic Dentistry Guide – April 13)
http://www.cosmeticdentistryguide.co.uk/news/five-year-old-girl-loses-eight-teeth-to-decay-8518
A 5-year-old girl has had 8 teeth extracted as a result of extensive tooth decay. Because she was so young, she had the operation under general anesthetic and had to stay in hospital for a period of time after the procedure. The girl's mother blamed her love of sugary foods and tomato ketchup for the decay, a trend that is becoming increasingly common. Decay is now one of the most common childhood illnesses, and a poor diet that is high in acidic and sugary foods is usually cited as the main cause. Dentists are urging parents to take more control of their children’s diets and set a good example by eating a healthy diet themselves. It is not necessary to ban sweet foods, but they should be moderated carefully and eaten as a treat rather than an integral part of the diet. Parents are also encouraged to replace sweet treats with fruits and healthy snacks that are high in essential vitamins and minerals, as well as improved dental health.

**Tap Water May Be Beneficial To Dental Health**
(Better Health Research – April 13)
Researchers have found that the quality of tap water may help individuals avoid the dentist. According to a new study published in *General Dentistry*, scientists found that more people would rather drink tap water as a means of having good dental health than go to the dentist for treatment. More than 144 million Americans consume tap water on a daily basis. “Fluoride makes the entire tooth structure more resistant to decay and promotes
remineralization, which aids in repairing early decay before damage is even visible," says CH Chu, lead author of the study. "Studies have confirmed the most effective source of fluoride to be water fluoridation."

**Dental Costs Keep Many Students From Paying Visit**
(Valley Vanguard – April 12)
http://www.svsu.edu/clubs/vanguard/stories/2573

Dental floss and a toothbrush may come free of charge, but for many college students once committed to their dental health, the visit's costs often prove to be the deal-breaker. "The only college students I have seen come in are on their parents' insurance," says Marie Yax, a registered dental hygienist who has worked in the field for 25 years. Some students skip all 4 years of college and then wait a few years to get a job. By the time they come in, 10 years have passed and with them have come a great deal of decay. According to Vickie Yahn, a registered dental hygienist, it is especially important for college-age students to be checked regularly. "College students tend to lack in sleep, drink sugary beverages, and become run down from the stress of school. These factors can affect gum tissue and could cause a general gum infection. ... It really is not wise to skip cleanings. If a cavity is there, the larger the cavity gets, the treatment becomes more severe."

**Oral Inflammatory Diseases and Diabetes are Linked**
(WorldDental.org – April 12)

A recent study conducted in Canada suggests that there is an interaction between diabetes and oral inflammatory diseases. The ineffective immune system is less effective in fending off bacteria so periodontal conditions can get aggressive quickly in the diabetic. In turn, the onset of periodontitis intensifies systemic inflammation in the diabetic and it can even play a role on the body's insulin resistance, thereby making the diabetic's condition even worse. If the diabetic is treated and the periodontal disease is also addressed, the diabetic's condition improves. These findings suggest that diabetics require regular dental treatments, and if periodontal issues are identified, they need to be treated immediately. These findings could lead to dental offices and health care professionals working in unison to ensure that diabetics get the appropriate treatments.

## AWARDS / FUNDING OPPORTUNITIES

**Application for Grants Under the Promise Neighborhoods Program**
http://www2.ed.gov/programs/promiseneighborhoods/index.html

Promise Neighborhoods, established under the Fund for the Improvement of Education Program, provides funding to support eligible entities, including nonprofit organizations, which may include faith-based nonprofit organizations, and institutions of higher education. The program is intended to significantly improve the educational and developmental outcomes of all children in the most distressed communities, including rural and tribal communities. The closing date for applications is June 25, 2010.

**Half-Time Loan Repayment Pilot Project**
http://www.nhsc.hrsa.gov/loanrepayment/halftime/default.htm

The National Health Service Corps has announced a new Loan Repayment Pilot Program for part-time clinicians. Clinicians can now receive up to $50,000 in loan repayment for a 4-year service commitment. Applications are due by 5:00 pm EDT, May 25, 2010. More information and instructions on how to apply is available online.

**New CDC Funding Announcement**
http://www.grants.gov/search/search.do;jsessionid=QrLWL7rZR7Jc2LjKTW4VjdBrvTxvzDpcCFFSGVyd8nb2m28T7Mn5t-28231359?oppId=53418&mode=VIEW

The Centers for Disease Control and Prevention (CDC) has released a new funding opportunity announcement, "State-Based Oral Disease Prevention Program" CDC-RFA-DP10-1012. The CDC will provide approximately $1.2 million in fiscal year 2010 to fund up to 4 awards to states, territories, or tribes. The purpose of this program is to help state and territorial health departments or tribal groups to establish, strengthen, and enhance their infrastructure and capacity to plan, implement, and evaluate population-based oral disease prevention and promotion programs, prioritizing populations based on oral disease burden. The application due date is June 1, 2010, and the anticipated award date is September 30, 2010. Questions about this funding announcement can be directed to Kevin Ramos at KRamos@cdc.gov or 770/488-5630.
**TRAINING AND CAREER DEVELOPMENT**

**Caries Prevention, Risk Assessment, Diagnosis, and Treatment**
http://www.ohiodentalclinics.com/curricula/caries

This series of modules, developed for clinicians working in safety net dental clinics in Ohio, provide a framework for assessing patients’ risk for dental caries and determining prevention, treatment, and education strategies. The modules also include information about dental caries prevention, examination, restorative treatment, and recall intervals. Two CE credits will be awarded to oral health professionals upon successful completion of the curriculum. There is no charge for CE credits.

**Preventive Medicine Residency Opportunity**
http://www.cdc.gov/prevmed

The Centers for Disease Control and Prevention (CDC) is now accepting applications for its 12-month fellowship from registered nurses, dentists, physician assistants, or physicians who meet the following requirements: currently a US government physician or will be eligible to be hired as such (in either a fellowship personnel system or as a Commissioned Corps officer in the US Public Health Service) before entering the program; has a current, full, and unrestricted medical license from a US licensing jurisdiction; has completed at least 1 year of ACGME-accredited postgraduate clinical training involving at least 6 months of direct patient care; has an MPH or other appropriate postgraduate degree, as defined by ACGME, or is eligible for US government-sponsored full-time long-term training for an MPH (see Program Requirements); and will have trained for 2 years in the Epidemic Intelligence Service or has comparable experience before entering the program. Residents will develop a range of knowledge and skills in leadership, management, public health policy, program development, epidemiology application, and administration. Training activities include didactic and supervised practical experience and will contribute to the professional development of physicians in public health careers.

**Protecting All Children’s Teeth (PACT): A Pediatric Oral Health Training Program**
http://www.aap.org/oralhealth/pact/index.cfm

Protecting All Children’s Teeth (PACT): A Pediatric Oral Health Training Program is a 13-chapter module that 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.

**CONFERENCES**

**Organization for Safety and Asepsis Procedures Infection Prevention Symposium (Jun 10-13, 2010)**
Hyatt Regency Tampa – Tampa, FL
http://www.osap.org/events/event_details.asp?id=94411

**ADA 24th New Dentist Conference (Jun 24-26, 2010)**
Catamaran Resort Hotel & Spa – San Diego, CA
http://www.ada.org/3533.aspx

**American Association of Women Dentists 2010 Annual Meeting & Conference (Jun 24-26, 2010)**
Wyndham Hotel – Chicago, IL
http://www.aawd.org/dzapps/dbzap.bin/apps/assess/webmembers/tool?webid=AWDSite&pToolCode=TAB3&pCategory1=TAB3_ANNUALCONF&pSaveCat1=Yes

**Raising the Momentum Through Continuity of Care: Finding Dental Homes for America’s Children**
American Dental Association Headquarters – Chicago, IL
http://www.ada.org/3955.aspx
The 26th International Pediatric Association Congress of Pediatrics 2010 (Aug 4-9, 2010)
Sandton Convention Centre – Johannesburg, South Africa
http://www.ipa-world.org/IPAcongress/default.htm?ref3=db1

Fourth ADEA International Women’s Leadership Conference (Sept 5-8, 2010)
Pestana Bahia Hotel – Salvador, Brazil
http://www.adea.org/events/Pages/FourthInternationalWomensLeadershipConference.aspx

Fifth Annual Rural Oral Health Conference (Sept 24, 2010)
Westford Regency Inn & Convention Center – Westford, MA
http://www.newenglandruralhealth.org/activities/oralhealth.htm

AAP National Conference & Exhibition (Oct 2-5, 2010)
The Moscone Center – San Francisco, CA
http://www.aapexperience.org

Gaylord Palms Hotel – Orlando, FL
http://www.nnoha.org/conference/npohc.html

Hispanic Dental Association Symposium & Annual Meeting (Oct 28-30, 2010)
Palmer House – Chicago, IL
http://www.hdassoc.org/site/epage/25547_351.htm

APHA Annual Meeting & Exposition (Nov 6-10, 2010)
Colorado Convention Center – Denver, CO
http://www.apha.org/meetings

RESOURCES

Dentistry.com Launches Redesign to Meet Growing Demands
http://www.prweb.com/releases/2010/05/prweb3975404.htm
Dentistry.com has unveiled its new Web site, which was redesigned to meet growing online needs. The site features a robust search engine, dentist reviews, and consumer dental articles. It also has a dental forum and access to live help. Patients can search for dentists by ZIP code, dental treatment and type of dental coverage. By selecting a Dentistry.com certified dentist on the site, consumers can discover where a dentist went to school, if that dentist offers weekend appointments, whether the staff is good with kids, what treatments are offered, and which languages are spoken. The site also includes the ability to submit dentist reviews. Hundreds of consumer dental articles are available and are categorized by dental conditions, daily care, and dental treatments. Dental topics include flossing techniques, TMJ, mouth guards, and invisible braces.

Health Care Reform Timeline
http://www.ada.org/2389.aspx
The American Dental Association (ADA) has put together a timeline showing when the various provisions of the new health care reform law will take effect. This side-by-side chart summarizes the provisions affecting dentistry in the health care reform law and includes the ADA’s comments and positions. A set of responses to frequently asked questions is also available.

Integrating Oral Health into School Health Programs and Policies
http://www.dentalhealthfoundation.org/programs/school-policy-framework
The California School Boards Association and the Dental Health Foundation have created a guidebook to serve as a comprehensive approach to oral health education policy in schools. The primary objectives are to educate school board members and communities on the critical link between oral health and academic achievement, develop a policy framework that supports local organization and solutions, share knowledge of best oral health practices in schools, encourage school-based oral health projects and partnerships in local communities, and develop a comprehensive guide to oral health community services.
JOURNALS

AAP News (Vol 31, Issue 5, May 2010)
http://aapnews.aappublications.org/content/vol31/issue5/index.dtl
Articles of interest:
- Core Principles of New Health Reform Law Benefit Children and Pediatricians, Say AAP Leaders
- ABCs of Health Reform: What the New Law Means for Children and Pediatricians
- Health Information Technology Now a Reality: Are You Ready?

http://www.journals.elsevierhealth.com/periodicals/acap/issues/contents?issue_key=papers:S1876-2859(10)X0003-1
Articles of interest:
- Health Care Reform for Children: Views From the Academic Pediatric Association
- Double Jeopardy: What Social Risk Adds to Biomedical Risk in Understanding Child Health and Health Care Utilization

http://journals.elsevierhealth.com/periodicals/ymod/issues/contents?issue_key=papers:S0889-5406(10)X0005-1
Articles of interest:
- The Need to Establish an Online Cleft Palate Teaching Program For Orthodontic Residents and Practicing Orthodontists
- Demineralization Properties of Newly Erupted and Mature Premolars Around Orthodontic Brackets: An In-Vivo Study
- Noncompliance Maxillary Molar Distalization With the First Class Appliance: A Randomized Controlled Trial
- Comparative Analysis of Traditional Radiographs and Cone-Beam Computed Tomography Volumetric Images in the Diagnosis and Treatment Planning of Maxillary Impacted Canines
- Relapse of Anterior Open Bites Treated With Orthodontic Appliances With and Without Orofacial Myofunctional Therapy
- Agreement Between Mothers and Children With Malocclusion in Rating Children's Oral Health-Related Quality of Life
- Optimum Conditions for Parallel Translation of Maxillary Anterior Teeth Under Retraction Force Determined With the Finite Element Method
- Effect of Saliva Contamination on Bracket Failure With a Self-Etching Primer: A Prospective Controlled Clinical Trial
- Spontaneous Eruption of a Canine after Marsupialization of an Infected Dentigerous Cyst
- Brodie Bite With an Extracted Mandibular First Molar in a Young Adult: A Case Report
- Lateral Open Bite: Treatment and Stability

Antimicrobial Agents and Chemotherapy (Vol 54, Issue 5, May 2010)
http://aac.asm.org/content/vol54/issue5/index.dtl
Article of interest:
- Systematic Approach to Optimizing Specifically Targeted Antimicrobial Peptides Against Streptococcus mutans

BMC Oral Health (Issue 10, 2010)
http://www.biomedcentral.com/bmcoralhealth
Articles of interest:
- Additional Psychometric Data for the Spanish Modified Dental Anxiety Scale, and Psychometric Data for a Spanish Version of the Revised Dental Beliefs Survey
- Socio-Demographic Disparity in Oral Health Among the Poor: A Cross Sectional Study of Early Adolescents in Kilwa District, Tanzania
- Caries Risk Assessment in School Children Using a Reduced Cariogram Model Without Saliva Tests
British Dental Journal (Vol 208, No 9, May 2010)
http://www.nature.com/bdj/journal/v208/n9/index.html

Articles of interest:
- General Medicine and Surgery for Dental Practitioners. Part 2 - Metabolic Disorders
- Health Risk From Occlusal Interferences in Females
- Summary Of: Success Rate Of Calcium Hydroxide Pulpotomy in Primary Molars Restored With Amalgam and Stainless Steel Crowns
- Evidence Summary: Do People Living in Deprived Areas Define Oral Health Differently From People Who Live in Less Deprived Areas?
- Teaching of Direct Posterior Resin Composite Restorations in UK Dental Therapy Training Programs

Dental Economics (Vol 100, No 4, Apr 2010)
http://online.qmags.com/DE0410/Default.aspx?sessionID=CFB2F992BED240F5D8FE10+1DE&amp%3bcid=1279438&amp%3beid=15152#pg6

Articles of interest:
- Eliminating That Irritating “Numb” Feeling
- Don’t Cross-Contaminate Me

Dental Traumatology (Vol 26, Issue 3, Jun 2010)
http://www3.interscience.wiley.com/journal/118537215/home

Articles of interest:
- Review of Recommendations for the Management of Dental Trauma Presented in First-Aid Textbooks and Manuals
- Traumatic Dental Injuries – Knowledge and Awareness Among Present and Prospective Teachers in Selected Urban And Rural Areas of Norway
- Dental Injuries Among Children and Adolescents Aged 1-15 Years Attending Public Hospital in Temuco, Chile
- Facial Fractures in Children and Adolescents: A Retrospective Study of 3 Years in a Hospital in Belo Horizonte, Brazil
- Knowledge of Emergency Management of Avulsed Teeth: A Survey of Dentists in Beijing, China
- A Successful Outcome Using a Minimal Invasive Approach to Manage a Severe Trauma to the Primary Maxillary Incisor in a Toddler
- Routine Systemic Antibiotic Prescription in the Management of Permanent Avulsed Teeth – Should We Stop?

Dentomaxillofacial Radiology (Vol 39, Issue 4, May 2010)
http://dmdnr.birjournals.org/content/vol39/issue4

Article of interest:
- Intradiploic Frontal Bone Aneurysmal Bone Cyst in a Child: A Case Report

Dutch Journal of Dentistry (May 2010)
http://english.ntvt.nl

Articles of interest:
- Traumatic Ulceration of the Tongue in an Infant
- Prevention of White Spots During Orthodontic Treatment With Fixed Appliances

European Archives of Paediatric Dentistry (Vol 11, Issue 2, Apr 2010)

Articles of interest:
- Etiology of Molar-Incisor Hypomineralization: A Systematic Review
- Treatment Modalities in Children With Teeth Affected by Molar-Incisor Enamel Hypomineralization (MIH): A Systematic Review
- Dental Arch Dimensions in Children With Hypophosphatemic Vitamin D Resistant Rickets
- A Two-Year Evaluation of Four Different Fissure Sealants
- A Comparison of Pediatric Dentists’ and General Dental Practitioners’ Care Patterns in Pediatric Dental Care
- Pathways To Emergency Dental Care: An Exploratory Study
Articles of interest:

- Oral Health in the Pacific Islands
- Sustaining Oral Health Services in Remote and Indigenous Communities: A Review of 10 Years Experience In Western Australia
- Essential Health Care Package for Children - The 'Fit for School' Program in the Philippines
- Socio-Cultural Practices of Deciduous Canine Tooth Bud Removal Among Maasai Children

Articles of interest:

- Oral Health Status and Treatment Needs Among School Children in Sana’a City, Yemen
- Dental Health Behavior in Relation to Caries Status Among Medical and Dental Undergraduate Students Of Udaipur District, India
- A Comparative Study of Oral Health Knowledge, Attitude and Behavior of Non-Medical, Para-Medical and Medical Students in Udaipur City, Rajasthan, India
- Factors That Effect Dental Caries Status of Medical Students in Udaipur City, India

Articles of interest:

- Oral Health in Preschool Children With Asthma – Followed From 3 to 6 Years
- The Oral Health of Children Considered Very High Risk for Infective Endocarditis
- Salivary Bacteria and Oral Health Status in Children With Disabilities Fed Through Gastrostomy
- Pain and Fear in Connection to Orthodontic Extractions of Deciduous Canines
- Relations Between Dental and Somatic Pain in Children
- Long-Term Follow-up of Root Canal Treated Primary Molars
- Clinical Evaluation of 3Mix And Vitapex® as Treatment Options for Pulpally Involved Primary Molars
- Protein-Energy Malnutrition During Early Childhood and Periodontal Disease in the Permanent Dentition of Haitian Adolescents Aged 12–19 Years: A Retrospective Cohort Study
- How Preschool Children Learn to Brush Their Teeth in Sharjah, United Arab Emirates

Articles of interest:

- Children More Likely to Visit a Dentist If Parents Do, Study Finds
- A Systematic Review of Dental Recall Intervals and Incidence of Dental Caries
- Oral Hygiene Practices and Dental Service Utilization Among Pregnant Women

Articles of interest:

- Evaluation of Subantimicrobial Dose Doxycycline as an Adjunct to Scaling and Root Planing in Chronic Periodontitis Patients with Diabetes: A Randomized, Placebo-Controlled Clinical Trial
- Oral Rehabilitation of Primary Dentition Affected by Amelogenesis Imperfecta: A Case Report

Articles of interest:

- Curriculum Change in Dental Education, 2003–09

Articles of interest:

- Familial Aggregation of Maxillary Lateral Incisor Agenesis
- The Antimicrobial Peptide DEFB1 Is Associated With Caries
- Building Caries Risk Assessment Models for Children
http://www.jendodon.com/issues/contents?issue_key=50099-2399(10)X0004-8
Article of interest:
• Maxillary First Molar With Seven Root Canals Diagnosed With Cone-Beam Computed Tomography Scanning

Journal of Evidence Based Dental Practice (Vol 10, Issue 2, Jun 2010)
http://www.sciencedirect.com/science/journal/15323382
Articles of interest:
• Preliminary Evidence of an Association Between COL1A2 Polymorphisms and Dental Fluorosis in a Population With High Fluoride Exposure
• Settling of the Occlusion Following Orthodontic Treatment May Not Improve Functional Occlusion
• Type of Dietary Fluoride Source May be Associated With Varied Fluoride Consumption Levels
• Autism Spectrum Disorder May Lead to Lower Prevalence and Severity of Dental Caries
• No Evidence to Support the Claim That Amoxicillin Causes Molar-Incisor Hypomineralization
• The Association Between Soft Drink Consumption and Caries Risk Among Low-Income African-American Children Is Not Clear
• Silver Diamine Fluoride (SDF) May be Better Than Fluoride Varnish and No Treatment in Arresting and Preventing Cavitated Carious Lesions

Journal of the Canadian Dental Association (Vol 76, No 2, Apr 2010)
Articles of interest:
• Treatment and Care Options for Patients With Facial Differences
• Examining the Implications of Dental Treatment Costs for Low-Income Families
• More Emphasis Is Needed on Patient Well-Being in the Dental Curriculum
• A Place for Oral Health in Diabetes Management

Lasers in Surgery and Medicine (Vol 42, Issue 4, Apr 2010)
http://www3.interscience.wiley.com/journal/34073/home
Article of interest:
• In vivo Near-IR Imaging of Approximal Dental Decay at 1,310 nm

http://content.nejm.org/content/vol362/issue17/index.dtl
Article of interest:
• Specialist Physician Practices as Patient-Centered Medical Homes

Pediatric Dentistry (Vol 32, No 2, Mar-Apr 2010)
http://www.ingentaconnect.com/content/aapd/pd/2010/00000032/00000002;jsessionid=37cogdnbwpvy.alice
Articles of interest:
• Effect of Topical Fluoride Application on Titanium Alloys: A Review of Effects and Clinical Implications
• Effectiveness of a Basic Training Presentation on Infant Oral Health Care for Family Medicine Residents
• The Impact of Community Workshops on Improving Early Childhood Oral Health Knowledge
• When Treating Dental Fear and Phobia in Special Needs Patients Consider Psychology
• Comparing Bond Strengths of Brackets on Primary Teeth With 3 Different Primers
• Prevalence of 3-Rooted Primary Mandibular Second Molars Among Chinese Patients
• A Case-Control Study of Dental Development in Hypodontic And Hyperdontic Children
• Taurodontism in Children With Hypodontia and Supernumerary Teeth: A Case Control Study
• Descriptive Study of Perioperative Analgesic Medications Associated With General Anesthesia for Dental Rehabilitation of Children
• A Review of ECC in Indigenous Children and Its Impact on Childhood Health and Well-Being
• Eruption Hematoma As a Possible Oral Sign of Infantile Scurvy
• Remineralizing Capacity of Sealants
Pediatrics (Vol 125, No 5, May 2010)
http://pediatrics.aappublications.org/current.dtl
Articles of interest:

- What Makes a Great Clinical Teacher in Pediatrics? Lessons Learned From the Literature
- The Effectiveness of Baby Books for Providing Pediatric Anticipatory Guidance to New Mothers
- The Burden of Suboptimal Breastfeeding in the United States: A Pediatric Cost Analysis
- The Pediatric Obesity Epidemic Continues Unabated in Bogalusa, Louisiana
- A New Regulatory Challenge: Youth and Tobacco

ONLINE NEWSLETTERS

ADA News Today (May 3, 2010)
http://www.ada.org/3407.aspx
Articles of interest:

- Progress Reported on IHS Dental ‘Challenges’
- ADA Commends Tribal Caries Initiative to Congress

Health Care Innovations for Exchange - Agency for Healthcare Research and Quality (Apr 28, 2010)
Articles of interest:

- Community-Based Provider Training and Education Enhances Access to Oral Health Screenings and Fluoride Treatments for Low-Income Children
- Free Oral Health Services Enhance Self-Esteem and Employability for Individuals Living With HIV/AIDS, the Homeless, and the Uninsured

HDA News and Reports - Hispanic Dental Association (Issue 160, Spring 2010)
Articles of interest:

- Dental Summary Review
- Beyond the Four Walls: A New Adjunct for Dental Students

MCH Alert - Maternal & Child Health Library (May 14, 2010)
Article of interest:

- Journal Publishes Theme Issue on Primary Care

Oral Health Alert: Focus on Head Start (Apr 2010)
Articles of interest:

- Children’s Oral Health Benefits
- Maryland’s Mouths Matter: Fluoride Varnish and Oral Health Screening Programs for Kids—Training for EPSDT Providers in Maryland
- Increasing Dental Care Utilization by Medicaid-Eligible Children: A Dental Care Coordinator Intervention
- Preventive Dental Utilization for Medicaid-Enrolled Children in Iowa Identified with Intellectual and/or Developmental Disability

Update - Friends of the National Institute of Dental and Craniofacial Research (Apr 2010)
http://www.fnidcr.org/newsletters/Apr10eNews.html
Article of interest:

- OPPERA Project Identifies TMJ Female Risk Factors
National Listings

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 52 vacancies—44 available now. Access an unofficial listing of vacancies open or soon to be open online at http://www.dentist.ihs.gov/index.cfm?module=vacancies.

National Network for Oral Health Access (NNOHA) Job Listings

State Listings

Flagstaff, AZ—Dental Hygiene Assistant Clinical Professor Position (Northern Arizona University)
http://hr.nau.edu/node/2796&job_req=557718
The Assistant Clinical Professor position is located in Keams Canyon, AZ, with weekly travel between Keams Canyon and Flagstaff. The following credentials are required: RDH diploma from an accredited US dental hygiene program, BS or BA degree in dental hygiene or a related field, 3 years full-time clinical experience in dental hygiene, and eligibility for licensure as a dental hygienist in Arizona. Qualified candidates should send a letter of intent, CV, and 3 letters of recommendation to Chair of Dental Hygiene, Northern Arizona University, Department of Dental Hygiene, PO Box 15065, Flagstaff AZ 86011-5065 or Majorie.Reveal@nau.edu.

Phoenix, AZ—General Dentist (Mountain Park Health Center)
Mountain Park Health Center is a federally qualified community health center with 5 clinical locations throughout the valley. The General Dentist position is full-time with rotating Saturday hours. The focus of this job is to provide high-quality dental care to patients in a quality oriented, efficient, and cost effective manner. Qualified candidates will be graduates of an accredited Dental School, with general dentistry residency preferred. Three to 5 years of experience in a general dentistry practice, public health experience is also preferred. Candidates must have a current Arizona License, DEA Certificate, and CPR Certification. Interested parties should contact Rebecca Schaffer, DDS, Dental Director, at rschaffer@mphc-az.org or 602/323-3258.

Farmington, CT—Chair, Division of Endodontology, Department of Oral Health and Diagnostic Sciences (University of Connecticut School of Dental Medicine)
https://jobs.uchc.edu
Applicants must demonstrate strong academic, clinical, leadership and mentoring qualities. Individuals with diverse educational backgrounds are encouraged to apply. We are especially interested in candidates with a strong research program and extramural funding in basic or clinical science. A PhD in an appropriate discipline and board eligibility/certification in Endodontology are highly desirable. Review of applications will begin immediately and continue until the position is filled. Interested individuals should apply online to search number 2010-777, and the following documents should be uploaded through the Web site: a letter of interest, CV, and names and addresses of 3 references. Questions about this search should be addressed to Dr. Arthur R. Hand, Chair – Endodontology Search Committee, University of Connecticut School of Dental Medicine, 263 Farmington Ave, Farmington, CT 06030-1610 or e-mailed to hand@nso1.uchc.edu.
Hartford, CT—Multiple Positions (Connecticut Oral Health Initiative)
http://www.ctoralhealth.org
The Connecticut Oral Health Initiative is seeking qualified applicants for the positions of Advocacy Director, Development Coordinator, and Administrative Assistant. To apply, e-mail a cover letter and resume (PDF or Word files only) to the Connecticut Oral Health Initiative at lisar@ctoralhealth.org.

Kansas City, KS—Dentist (Kansas City Free Health Clinic)
http://www.kcfree.org/about/employment.html
Kansas City Free Health Clinic, a community-based organization serving the uninsured/underinsured in the Kansas City metropolitan area since 1971, is looking for a full-time dentist. Oral health care is a core service of the clinic and is integrated with an array of general medicine, including HIV primary care, behavioral health, and prevention services to more than 6000 patients a year. The opportunity exists for clinical faculty appointment as well as other professional development. Competitive salary and benefits. For more information about this position contact Reagan Tesar, Human Resources Manager, at reagant@kcfree.org.

Montgomery County, MD—Dental Director (Community Clinic, Inc)
http://www.cciweb.org/human-resources/job-opportunities/332
Community Clinic, Inc. (CCI), a Montgomery County, Maryland Federally Qualified Health Center, seeks experienced dental director for its new dental program. Construction of a fully equipped facility will be complete in June 2010 and soon ready for expansion to 7 operatories. CCI has a current dental patient base of 30,000 Women, Infant, and Children's Nutrition Services participants and 12,500 patients. Qualifications include community dental experience; demonstrated ability and willingness to work as a team player in a growing organization; and preparedness to work at developing a dynamic community oral health program, including provision of direct patient care. Multi-cultural experience required. Because 80% of CCI clients are Hispanic, bilingual Spanish is desirable.

Ann Arbor, MI—Paid Research Opportunity (Michigan Institute for Clinical and Health Research)
http://www.michr.umich.edu/education/sip.html
The Michigan Institute for Clinical and Health Research is offering a paid intensive summer research experience for medical and dental students and graduate students in nursing, social work, pharmacy, and public health. Each student will work 20-30 hours per week with a research mentor on an ongoing project. Weekly seminar series will explore disparities questions and problems, scientific approaches, research methods, and career issues. Travel (airfare, train, etc), housing in Ann Arbor (for non-residents and non-University of Michigan students), and a $5200 stipend will be provided.

Minnesota—Dentists (Apple Tree Dental)
http://www.appletreedental.org/AboutUs/Staff/Employment.aspx
Apple Tree Dental, a nationally recognized innovative non-profit, provides comprehensive care to patients of all ages and abilities in our outpatient clinics and onsite at long term care facilities, Head Start centers, and other community-based settings. Apple Tree is currently seeking qualified, compassionate dentists wishing to make an immediate impact on the lives of their patients for our programs in multiple Minnesota locations (including loan repayment eligible sites). We offer meaningful work, competitive salaries and comprehensive benefits. More information is available online or by e-mailing mhr@appletreedental.org.

Saint Louis County, MO—Full-Time Dentist (St Louis County Department of Health)
http://agency.governmentjobs.com/stlouis/default.cfm
St. Louis County Department of Health has an opening for a full time Dentist. This position provides oral health care to all age groups at three Health Centers located within the County as well as the St Louis County Justice Center, with emphasis on the prevention and treatment of disease. The dentist in this position is responsive to the oral health need of all patients for accessible, quality oral care without regard to socioeconomic status. A competitive salary is available along with a generous retirement plan and benefit package. Apply online or call 314/615-5429 for more information.

Raleigh, NC—Dental Public Health Residency (North Carolina Oral Health Section)
http://www.communityhealth.dhhs.state.nc.us/dental/residency_2.htm
The North Carolina Dental Public Health Residency Program has received HRSA funding for a stipend and support for the residency. This is a 12 month, full-time residency located in the State Health Department in Raleigh, NC. Applications are being accepted from dentists who have completed formal academic training in
dental public health. The start date is negotiable. For more information about the NC Dental Public Health Residency Program, contact C Jean Spratt, DDS, MPH, at 919/707-5491 or Jean.Spratt@dhhs.nc.gov. Applicants should submit all materials by March 1st of the year in which they wish to enter the residency; however, applications will be accepted until the position is filled.

**Cincinnati, OH—Associate Director (CincySmiles Foundation)**


The CincySmiles Foundation (CSF) provides or arranges for access to oral health care (dental services) for all at-risk populations in the Greater Cincinnati & Northern Kentucky region, including the working poor, children, the homeless, the disability community, and the elderly. CSF is currently seeking an individual with a proven track record of advocacy, data collection and analysis, program management and evaluation, developing budgets, professional writing, and grantsmanship to represent the agency and its mission in a variety of local, state, and national forums. The successful candidate must be able to multi-task; meet deadlines; possess strong computer, verbal, and written communication skills; be able to travel; and have relevant educational preparation. Previous experience with non-profit organization management is preferred. For consideration, send a resume to CincySmiles Foundation, 635 W 7th St. Suite 309, Cincinnati, OH 45203, fax to 513-621-0288, or email to oralhealth@fuse.net. For more information about this position, contact Dr Larry Hill at 513-544-8844.

**Pittsburgh, PA—Dental Informatics Research Position (University of Pittsburgh)**

http://di.dental.pitt.edu/postgrad.php

The Center for Dental Informatics is currently recruiting a trainee in one of the following research areas: clinical informatics, with focus on applications in dental care; information model and/or terminology development; 3D visualization and simulations; human-computer interaction; computer-supported cooperative work; and informatics in evidence-based healthcare. The program is open to individuals with a variety of backgrounds, such as information science/computer science, dentistry, medicine, or information technology and prepares trainees for a research and teaching career in dental/biomedical informatics. Financial support from the NIDCR/NIH is available to eligible individuals. The program starts in August 2010. (Please note: The National Institutes of Health (NIH) offers a loan repayment program for qualifying educational loans. This program is open to trainees through a separate application and award by the NIH. The program provides a maximum of $35,000 per year for 3 years in loan repayments.)

**Memphis, TN—Various Positions (University of Tennessee College of Dentistry)**

http://www.uthsc.edu/dentistry/Fac_Depts/jobs.php

The University of Tennessee College of Dentistry invites applications for the following positions:

- Assistant Professor, TMD/Sleep Disorder Clinic
- Faculty Position, Pediatric Dentistry and Community Oral Health
- Assistant/Associate Professor, Endodontics and Operative Dentistry
- Faculty Position, Dept of Oral and Maxillofacial Surgery

**San Antonio, TX—Dental Public Health Residency (University of Texas Health Science Center)**

http://www.uthscsa.edu/CommunityDentistry/residency.asp

The University of Texas Health Science Center at San Antonio (UTHSCSA), Department of Community Dentistry offers a 1 year full-time (or 2 year part-time) accredited residency in Dental Public Health (DPH) for admission in July 2010. Candidates with a dental degree and MPH or its equivalent may be eligible to apply. The curriculum is designed to provide the resident with experiences that result in achieving competence in the field of dental public health. The DPH residency program is arranged to address the 10 competency statements, and the curriculum consists of 4 content areas, including didactic coursework, undergraduate dental teaching, research, and field and clinical experiences. Upon demonstration of competency in dental public health, the residents are awarded a specialty certificate. Visit the program’s Web site for more information about the program and admission criteria. Stipends may be available. For additional information or application materials, please contact the Department of Community Dentistry at 210/567-3200 or Cappelli@uthscsa.edu.

Inclusion in this publication does not imply an endorsement by the American Academy of Pediatrics. The AAP is not responsible for the content of these resources. Web site addresses are as current as possible, but may change at any time.