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AMERICAN DENTAL ASSOCIATION

ADA News®

MARCH 15, 2004

www.ada.org

VOLUME 35, NO. 6

Evidence-based dentistry

Panel seeks member input for clinical priorities

BY MARK BERTHOLD

Ask Dr. Jeffrey Hutter whether evidence-based, systematic reviews have direct clinical relevance for dentists, and you'll get a straight answer.

"Most certainly, the evidence-based approach can help clinicians to determine the best available treatment for their patients," he states.

EBD UPDATE

"EBD was at times considered a controversial topic. But EBD is simply a tool, and it can significantly benefit our profession."

Dr. Hutter chairs the ADA Advisory Committee on Evidence-

Based Dentistry, which has guided the Association on all matters pertaining to EBD since forming in 2001. The committee also ensures that the entire spectrum of research, dental practice and education are taken into account as the Association moves forward on EBD activities.

Committee members, who repre-

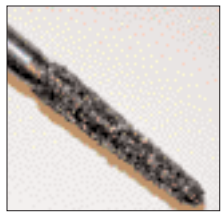
sent multiple ADA agencies and councils, are working to educate private-practice dentists, dental students and dental educators and researchers on the concept of EBD. They're also demonstrating how systematic reviews can enhance dental practice, education and research.

See EBD, page 10

BRIEFS

Clinically effective? The ADA Council on Scientific Affairs is preparing reports on diamond rotary cutting instruments and endodontic posts. If you have an opinion on these products' clinical effectiveness, would you like to share it with the council?

If so, please take a brief online survey at ADA.org. Just answer a few questions that concern cutting ability, longevity, cost and other properties of diamond instruments; and a few questions on cost, strength, failure rates and other properties of endodontic posts that you are using. In return for your assistance in this project, you will receive an AT&T 60-minute phone card upon returning the survey.



"Dentists can learn a lot from each other about the dental products they use, and the council is conducting this survey to facilitate this shared exchange," says Dr. Arthur Jeske, council chair. "The council is also interested to know if this type of survey can help us to provide more useful information to the practitioner. So we're asking members to share their opinions."

To participate, visit ADA.org at "www.ada.org/surveys/surveys/EF6KY7". For questions, call Ext. 2503. ■

Two more amalgam cases dismissed

Total now at 33 and counting

BY JAMES BERRY

The dismissal of two lawsuits in Florida March 1 brings the number of amalgam-related cases withdrawn or dismissed against the ADA to 33, Association attorneys said.

In the past two years, they noted, 36 lawsuits challenging the use of dental amalgam and naming the ADA and others as defendants were filed in courts nationwide. Now only three remain, and the Association is working to have those cases set aside as well.

"We are extremely pleased that the vast majority of amalgam cases have been dismissed against the ADA," said Peter M. Sfikas, ADA chief legal counsel. "These dismissals represent a significant victory for organized dentistry and reaffirm the right of the Association to speak out on an issue of public importance to both dentists and patients."

See AMALGAM, page 11

INSIDE



Thanks to Schein

ADA recognizes Sullivan-Schein and its vendors for their GKAS efforts. Full picture, page 20.



The unwelcome message

Most e-mail users worldwide are inundated each day with unsolicited commercial messages, commonly known as "spam." In this special report, your ADA News explores the effects spam is having on modern electronic communications, what government, industry and your ADA are doing about it and the steps you can take to regain control of your in-box.

BY JOE HOYLE

If you are online, chances are you use e-mail.

Nine out of 10 Internet users have sent and received e-mail, the Pew Internet & American Life Project found. Dentists named e-mail as the chief use of the Internet at the office in the Dentists' Computer Use report from the ADA's 2000 Survey of Current Issues in Dentistry.

If you use e-mail, chances are you receive spam.

According to market researcher IDC, there are more than 30 billion e-mail messages zipping across the Internet and private networks each day. Of that total, about 7.3 billion qualify as unsolicited commercial e-mail, better known as "spam." There are 3.7 billion unsolicited messages sent to e-mail in-boxes in North America alone every day, according to IDC.

- ADA e-pubs, page 14
- Anti-spam help, page 15

Internet service provider America Online, which manages more than 90 million e-mail accounts, blocks nearly 80 percent of the 2.5 billion messages sent each day to AOL subscribers because they have been identified as spam, an AOL spokesman recently told PCWorld magazine.

Another study conducted by the Pew Internet & American Life project, which explores the impact of the Internet on society, found that 70 percent of e-mail users interviewed said the proliferation of spam has made being online "unpleasant or annoying." More than three-quarters said they were bothered by what they see as the deceptive, dishonest, offensive and obscene content of much of the spam they receive, while a little under

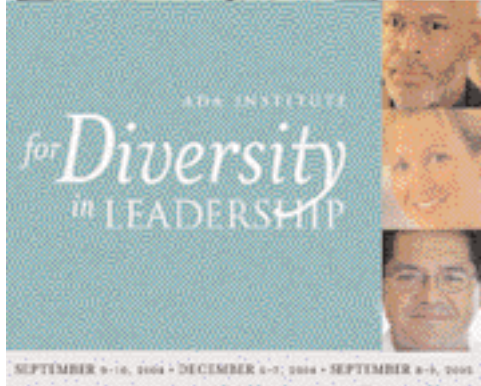
See SPAM, page 14





Applicants sought

New brochures available for ADA Institute for Diversity in Leadership



Brochures and applications for the ADA Institute for Diversity in Leadership are now available for dentists interested in the program.

The brochure includes the Institute's goals, eligibility for participation and information on how to apply. Applications for the 12 slots available in the 2004 class are being accepted through May 3.

The ADA Institute for Diversity in Leadership is a personal leadership training program designed to enhance the leadership skills of den-

tists belonging to racial, ethnic and/or gender backgrounds traditionally underrepresented in leadership roles. The Institute helps participating dentists enhance skills needed to successfully make a difference in their communities, organizations or the dental profession.

Information and application forms are also online at "www.ada.org/prof/events/featured/diversity.asp". For a copy of the brochure, contact the ADA at Ext. 4699 or "starsiaks@ada.org". ■

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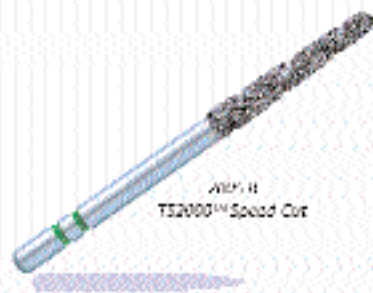
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Child's play

Your children can learn about careers in dentistry April 22

Interested in promoting careers in dentistry and mentoring the future work force?

Team up with the ADA April 22 by participating in Take Our Daughters and Sons to Work Day.

The national program gives dentists, dental educators and dental teams an opportunity to share the world of dentistry with youths age 8 to 12.

The ADA Headquarters participated last year, welcoming 41 children of its staff members for science experiments, job shadowing, interviews with staff and Web page design.

Dental societies and dental schools are also encouraged to get involved with National Groundhog Job Shadow Day, a program that enables young people to shadow a workplace mentor during a normal day on the job. The ADA promotes job shadowing as a way to expose students to dental careers.

The National Groundhog Job Shadow Day program kicked off in February but activities take place throughout the year. For materials

supporting the initiative, go to "www.jobshadow.org", or call the Job Shadow Day Coalition at 1-800-373-3174.

For ideas on developing your own Take Our Daughters and Sons to Work Day event, go to "www.daughtersandsonstowork.org". Or contact your constituent society or Beverly Skoog, coordinator, Career Guidance, at Ext. 2390 or "skoogb@ada.org". ■



Future scientists: An ADA researcher addresses a captive audience during the science demonstration on April 24, 2003, for Take Our Daughters and Sons to Work Day.

It's Golden Apple time

For the 16th consecutive year, the ADA Golden Apple Awards Program presents a unique opportunity for dental societies to be recognized for their leaders, members and staff.

There are two deadlines to keep in mind this year. May 3 is the deadline for two awards:

- Excellence in Dental Health Promotion to the Public;
- Dental Society Web Site Award.

The deadline for all other award categories is June 1, including:

- Legislative Achievement;
- Excellence in Membership Recruitment and Retention;
- Excellence in Member-Related Services/Benefits;
- Outstanding Achievement in the Promotion of Dental Ethics;
- Achievement in Dental School/Student Involvement in Organized Dentistry;
- Excellence in Science Fair Program Support and Promotion;
- Excellence in Dentist Well-Being Activities;
- Outstanding Mentoring of Dental Students and/or Junior Faculty Interested in Academic Careers.

A new award added this year is "Outstanding Mentoring of Dental Students and/or Junior Faculty Interested in Academic Careers," which includes awards for a dental educator at the pre-doctoral and post-doctoral levels.

To be considered for Golden Apple Awards, programs and activities must have been produced between June 1, 2003, and May 31, 2004. For the "Excellence in Dental Health Promotion to the Public" and "Dental Society Web Site Award," programs and activities must have been produced between June 1, 2003, and May 1, 2004.

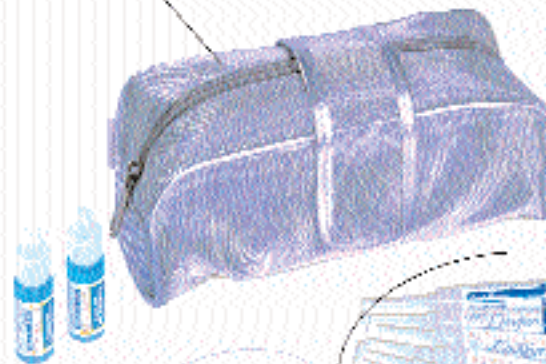
Nominations must be postmarked by May 3 and received no later than May 10.

Questions? Contact Ron Polaniecki, Dental Society Services, Ext. 2599 or "polanieckir@ada.org". ■

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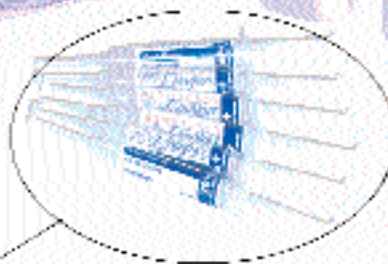
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VIEWPOINT

Snapshots OF AMERICAN DENTISTRY

LAURA A. KOSDEN, *Publisher* DR. MARJORIE K. JEFFCOAT, *Editor*

JAMES H. BERRY, *Associate Publisher* JUDY JAKUSH, *ADA News Editor*

MYVIEW

Influencing others has rewards

If paint-on whiteners are more expensive than a competitor's stick-on whitening strips, does that mean they must do a better job? This is the innocent question that perhaps began a quest with a conclusion I've longed to someday witness. It's a question Amanda had this past winter while shopping at a local supermarket, and a question science fair projects are made of.

In the June issue of the Ohio Dental Association's "ODA Today," there was a news story about this year's state science fair dental award winners. "Earning Third Place was Amanda R. Sorge, a 7th grade student at Mason Middle School." Her project, "Let The Teeth Do The Talking," earned her a \$50 prize. This may not seem special, but it has been for me and there are a couple of reasons why.



Robert Buchholz, D.D.S.

That Amanda is my patient is one.

I've been blessed with three daughters who chose career paths that have led to endeavors in other professions. I have no regrets about their decisions and am extremely proud of them. But I've always wondered how satisfying it must be when a son or daughter chooses to follow in a parent's footsteps—when they say, "Mom (or Dad), I want to do what you do." I can only imagine the pleasure that statement gives each of you that have experienced it.

Amanda has provided me a hint of those types of emotions. My experience began on a wintry

Friday afternoon. The week's pace was finally slowing when the message came through my operatory's intercom.

"Dr. Buchholz, Amanda Sorge is on line three and wants to ask a favor."

I punched the line three button and a voice, a little nervous I perceived, began asking if I would help, technically, with a science fair project. It would be a study pitting bleaching strips against paint-on bleach material.

My mind wandered to a science fair 44 years ago and a handshake with Edward Teller, often referred to as the Father of the Hydrogen Bomb. I quickly returned to thoughts of, yes, I've previously helped other students with science papers, but this young lady, with an enthusiasm that can't be resisted, perhaps this one will be special ... and then I said, "Let's do it."

She came to the office a couple of days later. We discussed the merits of collecting good scientific data. She needed volunteers, lots of them. Some would use the strips, others the paint-on, while some would use nothing and be controls. She would provide the product and take pre-bleaching shades with a Vita shade guide. The volunteers would receive a bleaching log form.

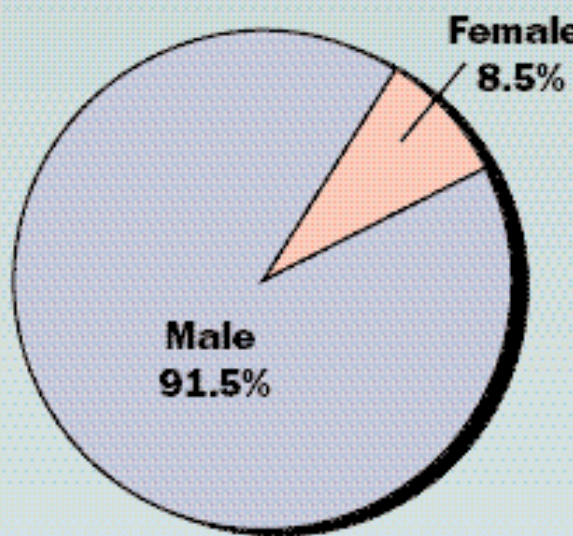
See MY VIEW, page five

Dental practice

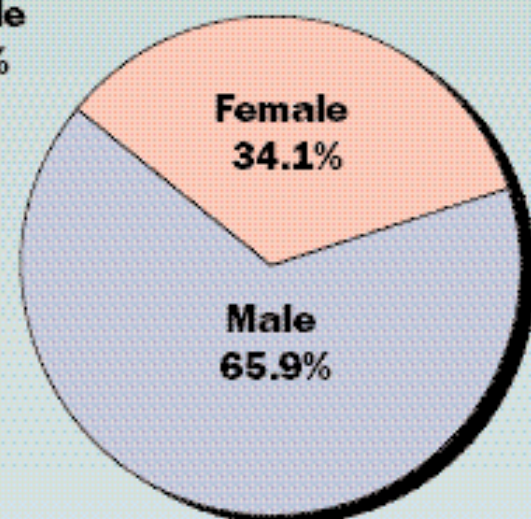
More than one-third of all new solo dentists are women, while women comprise only 8.5 percent of solo dentists overall. A new dentist is one who graduated from dental school less than 10 years ago.

Gender distribution of solo dentists, 2000

All solo dentists



New solo dentists



Source: American Dental Association, Survey Center, 2001 Survey of Dental Practice.

LETTERS

Bottled water

The benefits of fluoride in the drinking water are in my opinion irrefutable. Now that we have that straight, let's tell the real truth about the myriad of articles referring to fluoride in bottled waters.

The anticaries benefit of a 1-ppm fluoridated water supply relates to systemic absorption for children up to age 10 maximum. After that time, their enamel is completely formed, case closed.

If systemic fluoride would penetrate into adult enamel, we wouldn't have tooth decay. Adults receive no benefit whatsoever from such a small concentration when applied topically as in water sources.

So why waste our valuable time over bottled water? Even toothpaste, which does get absorbed topically, has to be at 1,500 ppm compared to the water's 1 ppm. The prescription toothpastes have 5,000 ppm. The in-office topical treatments have over 20,000 ppm.

How much fluoride do you think an adult tooth will absorb at this miniscule concentration? Children

under ages 8 to 10 do not usually drink bottled water as their main water source. They get what they need from conventional water sources, while teenagers and adults can drink whatever they like. Placing 1 ppm of fluoride in the adult water supply (bottles), will have no effect whatsoever topically on those adult teeth.



Our efforts would be better served by informing the public about the deleterious effects of acidic and sweetened drinks like soda pop, not wasting our time fooling ourselves into thinking that we're helping by putting 1 ppm fluoride in adult bottles.

Glen R. Meyer, D.D.S.
Cincinnati, Ohio

Editor's note: The ADA Council on Access, Prevention and Interprofessional Relations responds to Dr. Meyer:

Fluoridation plays a protective role against caries throughout life, benefiting both children and adults. Studies have shown that maximum caries reduction occurs when fluoride is available for incorporation during all stages of tooth formation (systemically), and by topical effect after eruption. Inadequate exposure to fluoride places children and adults at increased risk for caries.

The Beverage Marketing Corporation projects that by 2005, consumers will drink more bottled water than any other beverage, alcoholic or non-alcoholic, with the exception of carbonated soft drinks. The vast majority of bottled water contains less than 0.3 ppm fluoride. Individuals who drink bottled water as their primary source of water could be losing the caries-preventive effects of optimally fluoridated water available from their community water supply.

More information on how adults benefit from fluoride as well as bottled water and fluoride exposure can be found at "www.ada.org/goto/See LETTERS, page five

LETTERS POLICY

ADA News reserves the right to edit all communications and requires that all letters be signed. The views expressed are those of the letter writer and do not necessarily reflect the opinions or official policies of the Association or its subsidiaries. ADA readers are invited to contribute their views on topics of interest in dentistry. Brevity is appreciated. For those wishing to fax their letters, the number is 1-312-440-3538; e-mail to "ADANews@ada.org".

LETTERS

Continued from page four
fluoride". Additionally, the ADA's premier resource on fluoridation, "Fluoridation Facts" (Item J120), can be viewed online or ordered through the ADA Catalog at 1-800-947-4746 or "www.adacatalog.org".

Osmosis

In his letter to the editor, Dr. Robert Gherardi comments that when bottled water is consumed, "minerals are actually leached out of teeth by simple osmosis" ("Letters," Jan. 19 ADA News).

Osmosis is defined as the diffusion or movement of a liquid, usually water, through a semi-permeable membrane until concentration is equal on both sides. Below pH 5.5, teeth undergo decalcification—not osmosis. Daily exposure to topical fluorides will reduce decalcification.

Water has a pH of 7.0. Fluoridated water has been proven to reduce dental caries, but nonfluoridated water does not cause caries.

*Andrew Casterline, D.D.S.
Scottsdale, Ariz.*

MYVIEW

Continued from page four
After two weeks, they would have to return for post-bleaching shade evaluations. We also talked about pre- and post-bleaching digital photos.

A week later, she called and said she had people, lots of them, they were ready to start and she had a deadline to meet. As quick as the project began, a month passed and Amanda's study was finished.

I had almost forgotten the study when I received a new call. This time, without a hint of nervousness she announced, "I won, I got a superior score and I'm going to regionals and I want to thank you so much." Three or so weeks later, again I received a call. "I'm going to state. I received another superior score and I want to thank you so very much."

And then, even though I had previewed June's ODA Today and knew that she had won an award, she called. It was one week before Father's Day. "I may get a chance to go to Washington, D.C., for nationals and I really want to thank you again, so much." And then she added one additional statement.

"I think I want to be a dentist."

Whether or not you have offspring follow your career path, I am certain each of you have had an "Amanda" enter your life. If he or she, with your guidance, became a fellow professional, I now know the pride you feel.

For those who haven't received a request for help or a question about what it is that we do, no matter how busy you are, take a moment, a deep breath and pause to answer that individual's questions.

There's no guarantee you'll get more that one opportunity, and that's the second reason it's so special.

Dr. Buchholz is the former executive editor of the Ohio Dental Association's "ODA Today." His comments, reprinted here with permission, originally appeared in the July 2003 issue of that publication.

Editor's note: The ADA is encouraging component and constituent societies to get involved with the national Take Our Daughters and Sons To Work Day event (April 22) and promote careers in the dental profession. For information, see page three.

VIH to hold 'teleworkshop' on access March 30

Pawtucket, R. I.—Volunteers In Health Care will offer a "teleworkshop" on developing dental access programs March 30, beginning at 2 p.m. Eastern time.

"Dental Access Initiatives: Developing Innovative Programs" will include a panel of three access program representatives who will provide details on how their programs were developed and how they benefit their communities.

Presenters will include:

- Bill Solberg, director of community programs, Columbia-St. Mary's Hospital for Madre Angela Dental Clinic, Milwaukee,

Wis., a hospital-sponsored dental clinic that delivers \$100,000 a month worth of free dental care with the help of paid staff and volunteer dentists;

- Dr. John Gusha, project director, Central Massachusetts Oral Health Coalition, Worcester, Mass., a collaborative of 25 organizations focused on improving oral health that established a dental clinic at a community college;

- Lori Tate, vice president and director of information and referral, United Way of Howard County for Dentists Delivering Smiles, Kokomo, Ind., a referral program for

private practicing dentists who see uninsured patients in their private practices.

Sarah Hanson, VIH consultant, will moderate the call. Participants will have opportunity to ask questions of the presenters during the call.

The cost to participate is \$50 per phone line, payable by check, Visa or MasterCard. Visit the VIH website "www.volunteersinhealthcare.org" to fill out the registration form. Registrations and payment must be received by March 29. Call Volunteers in Health Care toll-free at 1-877-844-8442 for more information. ■

AD 246044m118 to be placed at Quad!!!

Sun and sand and the ADA

New dentists to meet in San Diego

BY KAREN FOX

San Diego—Join your colleagues in sunny Southern California for “Sailing Into San Diego,” the ADA 18th New Dentist Conference June 24-26.

Registration is now open for the conference,

funded by a generous grant from Mentadent since 1987 with added support this year from the California Dental Association and San Diego County Dental Society.

“This conference is definitely unique in that there is no other setting where new dentists will have so many opportunities to interact one-on-one with ADA officers and trustees,” said Dr. David Anderson, chair of the Committee on the New Dentist. “Networking is the most impor-



Point Loma: The peninsula at San Diego Harbor offers scenic views of the city's skyline.

Photo courtesy San Diego Convention and Visitors Bureau

Ad 246044m120 to be placed at Quad!!!

tant part of the conference, so we really encourage the communication between new dentist leaders and leadership.

“The continuing education program is based on the input and feedback we’ve received in the past,” he continued. “And as requested, many of the programs are not geared strictly to the general practitioner but cover multidisciplinary topics.”

Featured workshops this year include:

- “Pediatric Restorative Dentistry” by Dr. Greg Psaltis;
- “Interdisciplinary Dentistry: The Key to Managing Complex Treatment Plans” by Dr. Vince Kokich Sr.;
- “Patient Compliance: Team Up for Treatment Acceptance” by Robin Wright;
- “Achieving Ultimate Financial Success and Maximum Tax Reduction” by Ken Rubin, CPA;
- “Guaranteed Profit Increase for Your Dental Practice” by Steve Anderson.

Conference programming includes a special training workshop to help new dentist leaders present Smart Start and Transition programs and the Orientation for New Network Leaders/Outreach to New Dentists (June 24); and the Network Idea Exchange, Open Forum and interactive Q&A with officers and members of the ADA Board of Trustees (June 25).

The Westin Horton Plaza Hotel is the conference’s host hotel. Special events highlight the best of San Diego, including a June 25 private reception at the famous San Diego Zoo.

Early registration for the New Dentist Conference is encouraged. The early registration fee for ADA members is \$295. Undergraduate and graduate student members pay only \$95. Advance registration ends May 14 at 12 p.m. Special rates also apply for spouses, guests, dental office staff and nonmembers.

For more information or to request a conference brochure, contact the CND at Ext. 2779 or “newdentist@ada.org”. Conference details and registration information are also on ADA.org, at “www.ada.org/goto/newdentconf”. ■

ADA resources for new dentists

New practitioners seeking guidance on starting a dental practice or entering associateships will find several resources in the ADA Catalog:

- Starting Your Dental Practice: A Complete Guide (newly revised);
- Practice Options for the New Dentist: A Financial Guide;
- Associateships: A Guide for Owners and Prospective Associateships.

All three items are priced at \$49.95 for ADA members and \$74.95 for nonmembers. For these and other ADA Catalog items, call 1-800-947-4746 or go to “www.adacatalog.org”. ■

Who knows?

Ask the ADA Survey Center

BY ARLENE FURLONG

How many people will apply to dental school in 2005?

What are the chances your daughter will have a thriving practice in the same town where she attends dental school?

Are you considering moving to a warmer climate, buying a practice? How many dentists will practice there 10 years from now? Men or women? Of what age range?

The ADA Survey Center has the answers. It collects, analyzes and disseminates statistical information on dental-related trends for the American Dental Association. This information helps dentists broaden their professional knowledge and make better practice decisions.

Reports are grouped in areas including Dental Issues; Dental Practice; Workforce Issues; The Dental Health Policy Analysis Series; Educational and Institutional Issues and Consumer Issues and Public Opinion.

A collection of new reports are now available at reduced prices to ADA members.

The 2001 Distribution of Dentists report reveals results of the most recent ADA survey census of all known dentists in the United States.

Among its findings are data showing there were 155,716 active practitioners in the United States in 2001. Age, gender, full-time/part-time status, ownership, and primary occupation are among topics covered in the survey.

It also reveals that in 2001, nearly one-third of all professionally active dentists were between 45 and 54.

Also recently released: The 2002 Survey of Regional Dentist Workforce Distribution. This report, based on the survey responses from the executive directors of 51 constituent dental societies, consolidates information on the dentist workforce within each state. It also broaches how states are approaching regional dentist workforce issues.

The 2003 American Dental Association Dental Workforce Model: 2001-2025 forecasts the size of the dental workforce by analyzing retirement rates, occupation changes, specialties and death rates. The data is collected from previous ADA surveys including the Distribution of Dentists and Surveys of Dental Graduates and Surveys of Predoctoral Education.

Among its forecasts, the report projects that the number of dental school graduates will decline slightly in 2005, then resume a general pattern of growth through 2020.

How much do new dentists owe these days? Find out in the 2002 Survey of New Dentist Financial Issues.

The research follows dentists graduated within the past 10 years. The report includes income, educational debt and career satisfaction issues for new dentists in private practice, dental school faculties, government or hospital employees and those in the armed forces or in graduate school. In addition to income data, statistics on student loans, loan payments and employed dentists' contracts are included in the report.

The Economic Impact of Dentists assesses the monetary impact of dental services on the nation's economy overall, the impact one additional dentist office has and the impact a new dentist office has in a two-county area in Texas.

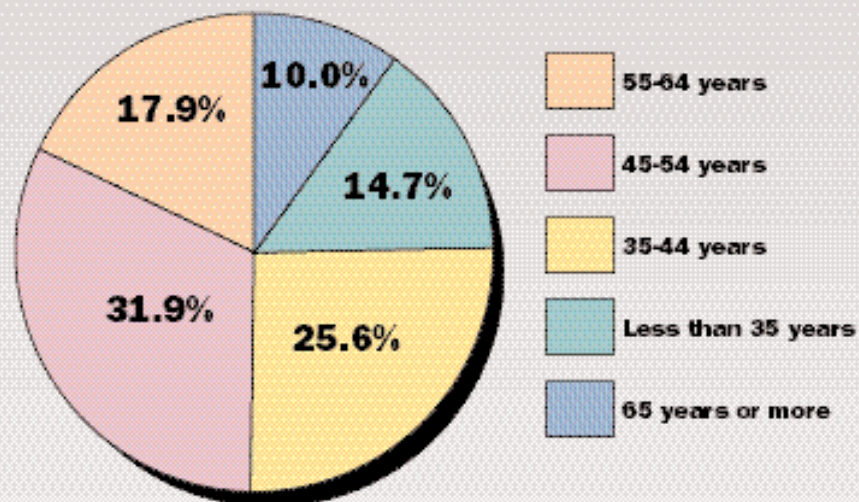
Medicaid and Dental Care for Children: A Review of the Literature, reveals factors that contribute to the lack of access to Medicaid and to the State Children's Health Insurance Program for young children. It also identifies dentistry-related literature that focuses on access to Medicaid and SCHIP programs.

Check out the most complete source of infor-

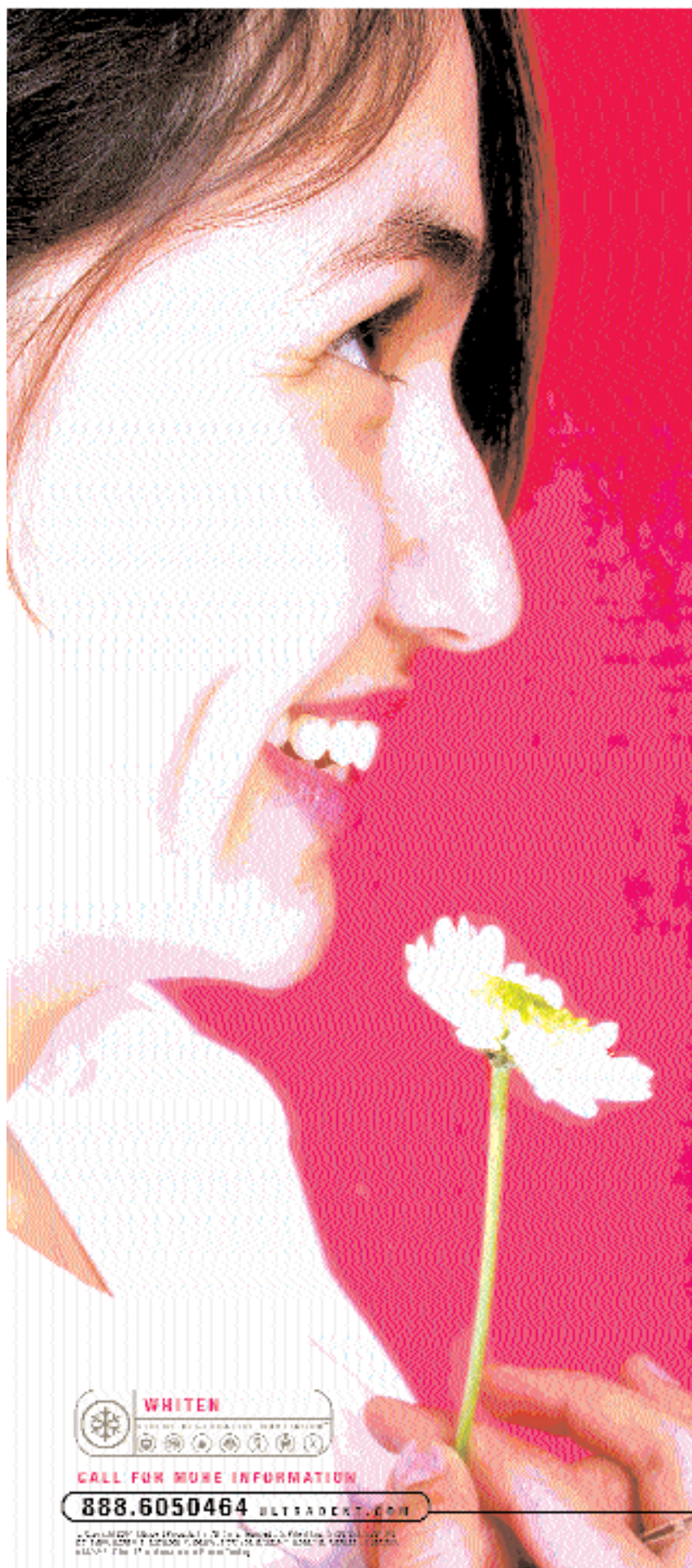
mation on private practice dentistry in the United States, available in four volumes: The Survey of Dental Practice Series. These annual reports on private dentistry in the U.S. are based on random samples of active, private practitioners.

For ADA Survey Center highlights, the latest reports and ordering information go to ADA.org and click on Surveys and Statistics. Or, contact the ADA Survey Center toll-free at Ext.2568 or e-mail "survey@ada.org". ■

Percentage distribution of all professionally active dentists by age, 2001



Source: American Dental Association, Survey Center, 2001 Distribution of Dentists in the United States by Region and State.



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Ross nominations due June 1

Award recognizes outstanding clinical investigation

BY MARK BERTHOLD

Know a dentist whose clinical investigations have significantly advanced the diagnosis, treatment and/or prevention of craniofacial-oral-dental diseases?

Then nominate him or her for the Norton M. Ross Award for Excellence in Clinical Research. Nominations must be received at ADA headquarters by June 1.

The Ross award considers accomplishments in periodontics, oral and maxillofacial surgery,

orthodontics, oral pathology and other areas of clinical research. Periodontal researcher Dr. Robert Genco won last year for his work into the relation between oral diseases and cardiovascular diseases.

Selection is based on the scope of research done, with special emphasis on its impact on clinical dentistry, and the nominee's publications in refereed journals. The winning researcher will receive a plaque and \$5,000, presented during an ADA Board of Trustees

dinner in Chicago in August.

Nominations, due by June 1, must include a letter that describes the nominee's accomplishments in the context of the award objectives, and that explicitly describes the impact of this research on clinical dentistry. Also include a curriculum vitae with list of published articles. Address to Marcia Greenberg, American Dental Association, 211 E. Chicago Ave., Chicago 60611. For more information, call Ext. 2535.



Dr. Genco

The Ross award is sponsored by the American Dental Association through the ADA Foundation, with support of Pfizer Consumer Healthcare. It is given in memory of Dr. Norton M. Ross, a dentist and pharmacologist who con-

tributed significantly to oral medicine and dental clinical research. ■

NIDCR seeks dentist-scientist for intramural research

BY CRAIG PALMER

Bethesda, Md.—The National Institute of Dental and Craniofacial Research invites applications through March 31 from D.D.S./D.M.D., M.D., Ph.D. or equivalently-degreed scientists to lead the institute's division of intramural research.

"The applicant must have a broad knowledge of the oral health sciences and a compelling vision for the future of the field," says a job description posted at the NIDCR Web site.

Send curriculum vitae, bibliography and names and addresses of four references to Carol M. Beasley, National Institute of Dental and Craniofacial Research, Building 31, Room 2C39, Bethesda, Md. 20892-2290; e-mail "Carol.Beasley@nih.gov", or fax 1-301-402-3288. ■

FDA launches online database of approved drug products

BY CRAIG PALMER

Washington—The Food and Drug Administration March 3 launched a Web site aimed at giving consumers and health professionals quicker access to information on FDA-approved drug products including prescription, some over-the-counter and discontinued drugs.

Drugs@FDA ("www.accessdata.fda.gov/scripts/cder/drugsatfda"), a searchable database on drug approvals, is accessible at the FDA Web site ("www.fda.gov").

"Better information for consumers and health care practitioners is one of this agency's top priorities," said FDA Commissioner Mark B. McClellan, M.D., Ph.D. "Consumers, health care professionals and product developers will now be able to locate the complete profile of a product with just a few easy clicks." The FDA plans to increase access eventually to information on drug recalls, warnings and shortages. ■

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ADA hosts EBD symposium in August

BY MARK BERTHOLD

The Association's Symposium on Evidence-Based Dentistry will commence Aug. 12-13 at ADA headquarters in Chicago.

Why is the ADA taking this leadership initiative? "Because systematic, evidence-based reviews can give to practicing clinicians the much-needed, unbiased information to answer practical questions, and make sense of the large volume of data and opinions out there," says EBD expert Dr. Amid Ismail.

Dr. Ismail is a member of the ADA Evidence-Based Dentistry Advisory Committee, which is organizing the upcoming symposium.

Training in EBD enables the practitioner to remain current with new developments in den-

EBD UPDATE

istry, says committee member Dr. Thomas Leslie of the Council on Dental Practice, "and to better understand the quality research—versus any article that may appear in the vast number of so-called 'educational literature.' As a practice and educational tool, EBD is a great fit with the ADA's goal of lifelong learning for its members," he adds.

Notes committee member Dr. Ralph Epstein: "Dentists have a duty to promote the welfare of their patients by delivering competent and timely dental care. As professionals, we are obligated to keep our knowledge and skills current.

Evidence-based dentistry is a tool to help us meet these ethical obligations.

"With experience gained by using EBD with greater frequency," adds Dr. Epstein, representing the ADA Council on Ethics, Bylaws and Judicial Affairs, "it will become easier for dentists to access the enormous amount of scientific literature being published and advance our ability to provide the most current and efficacious care for our patients."

The upcoming EBD symposium will bring together allied dental organizations and other professional groups involved in evidence-based dentistry.

"The purpose," says Dr. Jeffrey Hutter, committee chair, "is to share our activities in con-

ducting systematic reviews and, together, we'll define roles and identify the key clinical questions for future evidence-based reviews."

The EBD symposium will also feature a plenary discussion. All attendees are invited to discuss three main items:

- What are the most important clinical questions facing the dental profession today?
- How can organizations involved in evidence-based dentistry work together over the next year to answer these clinical questions?
- What programs should the ADA and allied dental organizations consider implementing to answer these key clinical questions and transfer the findings into clinical practice?

"Our goal is to be all-inclusive for anyone with a stake in oral health care: health care organizations that use evidence-based reviews, dental manufacturers, third-party insurance payers and, most important, dentists and other oral health care practitioners," says Dr. Hutter.

"Relevant, everyday clinical questions confront the dentist on a daily basis. We want to provide the scientific answers, if they're presently available," he adds. "If they're not available, we want to support and encourage further research to address the issue and get those questions answered. The EBD symposium will move us toward that goal." ■

EBD

Continued from page one

And during 2003, the committee members were able to complete a number of activities in accordance with its action plan.

"We're pleased with the progress made and plans completed," Dr. Hutter is proud to say. "For example, we trained ADA staff in the evidence-based systematic review process. We submitted a request to the ADA Continuing Education Recognition Program Committee to consider ways to use reviews in their coursework.

"We cosponsored with the American Dental Education Association an online survey of dental schools," he continues. "This survey measured the current levels of instruction and curriculum content in evidence-based research methods at their institutions. And we're working with ADEA to support dental education and resident training in the evidence-based review process.

"We also developed a formal, comprehensive survey on EBD, which the ADA Survey Center is mailing out to a representative sample of member dentists and specialists," adds Dr. Hutter. "Their feedback should help us to identify the most relevant clinical priorities, the key practice issues that dentists face daily."

This kind of reaching out, to find out what ADA members feel are the most important clinical questions for the practice of dentistry, is what EBD Advisory Committee members look forward to in 2004.

"We're all very excited about it," says Dr. Hutter, also associate dean for academic affairs at Boston University School of Dental Medicine.

"Just this past week," he notes, "we presented 'Educating Tomorrow's Practitioners in Evidence-Based Dentistry' at the ADEA annual session. The American Association for Dental Research also cosponsored this expert panel of Drs. Amid Ismail, James Bader, Carol Anne Murdoch-Kinch and myself."

This October at the 144th ADA annual session in Orlando, Fla., Drs. Hutter and Ismail will join Dr. Paul Farsai to present, "Evidence and Decision Making in Clinical Practice and Policy," an interactive program on implementing an evidence-based approach in clinical settings.

In the meantime, members can read the Practical Science article, "Survey of Systematic Reviews in Dentistry" by Drs. Bader and Ismail, featured in the April issue of the Journal of the American Dental Association. ■

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Switching to Paymentech is a simple process and one that the front office staff can handle for you. If you don't know how much you're paying in credit card processing fees, Paymentech can provide you with a free analysis. Saving a few dollars on every transaction can really add up.

- Offer third-party financing to patients.

Another way to receive payment sooner is to offer financing through a third party, such as CareCredit, a company endorsed by ADA Member Advantage.

This is a win-win for you and your patients, since you'll be paid at the time of treatment and

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your patients have the flexibility of several payment options. Plus, patients are more likely to accept treatment if they know that a no-interest or low-interest payment plan has been approved. Look for a patient financing company that has experience in working with dental patients and offers a wide range of financing options. CareCredit offers a 50 percent discount

on the one-time set-up fee for ADA members.

- Outsource to a collections agency at 60 days past due.

Every dental practice encounters late or slow-paying patients from time to time. Follow-up phone calls can be a drain on staff resources and may not lead to a full recovery of the fee.

That's where a trusted collection agency can

help simplify your office processes. According to experts in the collection industry, placing past due accounts with a third party agent between 60 and 90 days past due has about a 65 percent chance of recovery.

Diversified Services Group has worked with ADA members for three years—treating patients with dignity and respect. They offer a low fee of 29 percent, and there is no charge unless a collection is made.

If you have questions about Paymentech, CareCredit or Diversified Services Group, contact ADA Member Advantage at 1-800-ADA-2308. The staff is eager to help improve your practice's cash flow. ■

Paymentech has strategies for rising credit rates

Effective April 1, Visa and MasterCard are increasing their rates by up to 0.11 percent.

All processors are likely to raise their rates as a result. If you use a credit card processor to swipe transactions, your rates may be affected.

Some companies, like Paymentech, simply pass the increase itself on to their clients. Other companies may raise rates further.

Now might be a good time to have your office manager contact Paymentech (1-800-ADA-2308) for a free analysis of your credit card processing rates. ■

Amalgam

Continued from page one

Association leaders learned March 2 that the plaintiffs in two amalgam cases filed last year in the Circuit Court for Brevard County, Fla., had voluntarily dismissed their complaints against the ADA and other defendants, including the Florida Dental Association.

Both cases had been filed by James and Lori Bradstreet on behalf of their minor children, a boy and girl purportedly harmed by the effects of mercury poisoning. As sources of mercury, the Bradstreets cited a local power plant, vaccines the children had received and the mother's exposure to mercury through her dental restorations and through her profession. Dr. Lori Bradstreet is a dentist.

Of the three remaining cases, one is pending in Florida, in the Circuit Court for Orange County, which will hear an ADA motion to dismiss April 26. In the other two cases, both in California, the ADA was dismissed in the trial court, but those dismissals are on hold pending the outcome of an appeal in the California Supreme Court. ■

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AD 28138 (2/04)

Volunteers honored

In February, the ADA Committee on International Programs and Development awarded the Certificate of Recognition for Volunteer Service in a Foreign Country to dentists and dental students who spent at least 14 days performing dental services in a foreign country. Recipients were nominated by their state or local dental society, federal dental service or dental school. A total of 108 dentists and dental students from 18 states were honored, including 15 participants in the Dentistry Overseas/Health Volunteers Overseas program, which is sponsored by the ADA. For more information, award guidelines or an official nomination form, contact the ADA Center for International Development and Affairs by calling the toll-free number, Ext. 2726, or visit "www.ada.org/ada/international/certificate.html".

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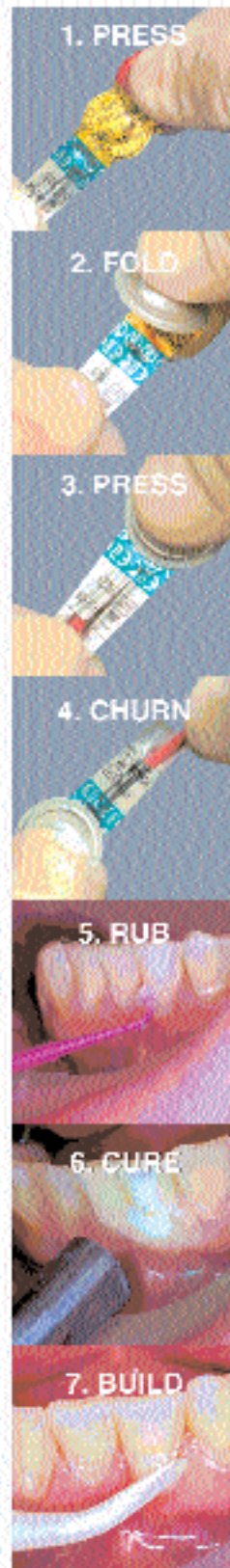
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Spam

Continued from page one
one-third said 80 percent or more of the messages they receive are unsolicited.

Unsolicited junk e-mail can gridlock Internet service providers' networks, slow the delivery of legitimate messages and even crash systems, particularly when a computer virus or Internet worm is involved. However, estimating the economic impact of dealing with spam in wasted time and resources is difficult.

In a January 2001 report to the Commission of the European Communities, the bandwidth charges to Internet users worldwide accruing from downloading spam were estimated at \$10 billion. The report also cited research concluding that the average e-mail user could spend

more than two hours per year identifying and deleting unwanted junk e-mail.

More recently, Ferris Research, a market research organization focusing on e-mail, messaging and collaboration, put the cost of dealing with spam at \$10 billion each year in the United States alone. Another market researcher, The Radicati Group, estimates the yearly worldwide cost is now more than \$20 billion.

Recognizing the growing pressure to deal with spam legislatively, President Bush last December

signed into law the Controlling the Assault of Non-Solicited Pornography and Marketing, or CAN-SPAM, Act, aimed at stemming the flow of spam by outlawing common junk e-mail practices including disguising or falsifying routing information such as the sender's address and using misleading subject lines. The act also requires that all unsolicited commercial messages include



a mechanism for refusing future communications and that messages containing sexually explicit content be labeled as such.

Since the law went into effect, however, some large providers of networked anti-spam applications report they have seen no significant decrease in the amount of junk e-mail they intercept and in some cases the amount of spam has increased, according to a recent article in the e-magazine, InternetWeek.

Advocacy organizations such as the Coalition Against Unsolicited Commercial Email, which are concerned about the proliferation of junk e-mail, have taken issue with the fact that the CAN-SPAM Act targets only deceptive e-mail advertising, not unsolicited e-mail in general.

"This law does not stop a single spam from being sent," said Scott Hazen Mueller, who chairs the Coalition. "It only makes that spam slightly more truthful. It also gives a federal stamp of approval for every legitimate marketer in the U.S. to start using unsolicited e-mail as a marketing tool."

Individuals, then, are left to deal with the problem of unsolicited commercial e-mail, pitting themselves against the wide range of tactics spammers employ to get their messages through.

Among the most important steps in protecting an e-mail account from unsolicited mail is to ensure the address is only given to trusted organizations with a clear policy on how e-mail addresses are used and shared.

The ADA considers e-mail addresses that its members provide as private, used only for "member-to-member, member-to-Association and Association-to-member" communications. Addresses are not released to any entity outside the Association, other than the Association's subsidiaries and affiliated entities including state and local dental societies. Nor does the ADA sell e-mail addresses its members provide.

See SPAM, page 15

How do spammers get your e-mail address?

BY JOE HOYLE

Last year, the Center for Democracy and Technology, a nonprofit policy group specializing in digital communications, released the findings of a novel study on unsolicited commercial e-mail, or spam. The CDT made some 260 e-mail addresses available in different locations across the Internet and analyzed the more than 10,000 unsolicited messages sent to the addresses over the course of six months.

Statistics from the study showed that putting an e-mail address on a publicly available Web site was by far the best way to guarantee the address will receive a great deal of unsolicited mail. The more traffic the site garners, the more spam the address will receive, the study found.

Spammers gather addresses from Web sites using automated software that "crawls" the Internet to compile large lists of e-mail addresses, which are then transferred to CD-ROM and made available for purchase by other bulk e-mailers.

Second to public Web sites for generating spam was using an e-mail address as part of a posting to the Usenet, a worldwide, distributed electronic bulletin board organized by topic and driven by user submissions.

But e-mail addresses that never appear in such public forums are still vulnerable to spam. Unscrupulous Web sites may gather information such as e-mail addresses as part of a registration process and then sell lists of those addresses.

And for an e-mail address that has never even been used, unsolicited messages may come from a "brute force" attack in which the spammer uses software to put together words and letters in thousands of combinations, compiling them into e-mail addresses and targeting them with unwanted messages. ■

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Manage your ADA e-pubs

BY JOE HOYLE

One of the unfortunate side effects of the proliferation of unsolicited commercial e-mail is that legitimate e-mail can sometimes be blocked by the anti-spam measures enacted by Internet service providers.

If you are a subscriber to any of the Association's electronic publications, including ADA Community Brief, ADA Member Advantage NewsFlash, ADA Update or ADA eGram, the Division of Communication's Electronic Communications Department has this advice on how to ensure you receive the publications you have requested:

- Put the ADA in your electronic address book/contacts. Once someone is listed in your address book, they are considered a "friend" by spam filters and mail from those senders will always get through. Add "directmailer@adamail.org", "briefmailer@adamail.org", and "ADABEI@adamail.org" to your address book. If your software allows, it

may be easier to add the domain name "adamail.org" as a trusted domain.

- If you have been successfully receiving ADA e-publications, select "Add to Address Book" or "Add to Contacts" after opening each different ADA e-publication. This should ensure continued receipt, even if your provider enacts new spam filtering techniques.

- If you no longer wish to receive a publication, use the "Unsubscribe" hyperlink provided in the e-publication instead of using your ISP's anti-spam measures. The unsubscribe option allows the ADA to directly remove you from the mailing list for a publication. Using your ISP's anti-spam measures to decline an e-publication may cause the Association to get blacklisted by your service provider.

If you are interested in learning more about the electronic publications the ADA offers, visit "www.ada.org/prof/resources/pubs/epub/index.asp". ■

Controlling spam

BY JOE HOYLE

For subscribers to large Internet service providers like America Online or EarthLink, the first line of defense against unsolicited commercial e-mail is the filtering software provided by your ISP.

Most ISP-based e-mail filtering applications employ a combination of "black lists" and "white lists" through which each user builds a database of both e-mail addresses from which he or she never wants to receive messages and trusted e-mail addresses from which all messages are accepted. By adding addresses from spam messages to the black list, users can eliminate future spam from those addresses.

Another technique used by ISPs to control spam is the "challenge request" in which a message suspected of being spam is automatically sent back to the sender, who must open it and confirm the authenticity of their "reply to" address before the message is routed to the intended recipient.

Some anti-spam applications also employ "Bayesian" filters which examine each word in an e-mail message, assign the word a score based on the probability it is part of a spam message and reject messages whose scores are above a predetermined level.

Anti-spam applications are available that run on individual computers rather than through an ISP. Such applications often use similar techniques as those described above and are configured to work either in concert with an e-mail application or as a stand-alone service. PCWorld magazine published a review of six popular anti-spam utilities in its May 2003 issue, which is available online at "www.pcworld.com/resource/printable/article/0,aid,109698,00.asp".

Even advanced anti-spam software applications will occasionally mistake legitimate e-mail messages for spam and treat them accordingly, making it necessary to keep an eye on what the software is automatically deleting.

In addition to anti-spam software, there are a number of simple techniques you can employ to stem the flow of spam. Among them:

- Exercise your privacy options when registering with Web sites. A study on spam by the Center for Democracy and Technology found that most sites offering visitors a choice about receiving commercial e-mail respected that choice.

- Use "disposable" e-mail addresses for public postings. With the many free, Web-based e-mail services available, it is easy to create an account to use for a short amount of time and then abandon. Another option is to sign up with a provider that can redirect messages sent to several addresses into one location—as addresses are discovered and exploited by spammers, they can simply be deleted. An Internet search for "disposable e-mail addresses" will return service options.

- Disguise your address when posting it in a public place. The CDT found that writing out

your address in "human-readable" form—"yourname at domain dot com" instead of "yourname@domain.com"—virtually eliminated spam. This technique confounds the e-mail address harvesting software with which spammers scour the Web but still allows individuals to contact you electronically.

- Report spam to your ISP and to the ISP through which it was sent. For more information about how to report spam, consult your ISP and the Network Abuse Clearinghouse Web site at "www.abuse.net" or go to "SpamCop.net". ■

Anti-spam resources

For more information on unsolicited commercial e-mail and how to deal with it, visit these Web sites:

- Coalition Against Unsolicited Commercial Email: "www.cauce.org";
- Network Abuse Clearinghouse: "www.abuse.net";
- Federal Trade Commission: "www.ftc.gov/spam";
- The Spamhaus Project: "www.spamhaus.org";
- Internet ScamBusters: "www.scambusters.org". ■

Ad 246044m119 to be placed at Quad!!!

Spam

Continued from page 14

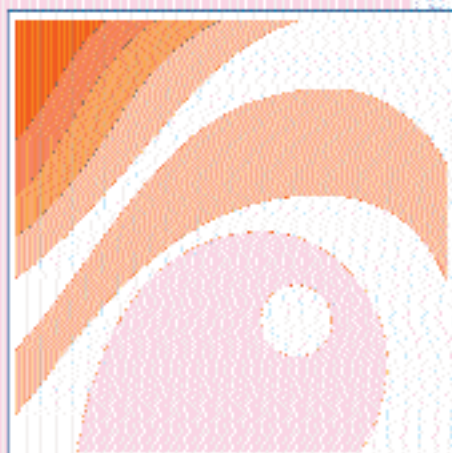
"We regard the privacy of our members as an important and serious matter," said Dr. Eugene Sekiguchi, ADA president. "Member dentists can rest assured that their e-mail addresses will be treated with the utmost care so that e-mail will continue to be a convenient and viable way to communicate with your Association."

Last December, the Association responded to membership concerns about increasing numbers of unsolicited e-mail messages by removing member e-mail addresses from the publicly accessible ADA.org member directory.

The Association also has a stringent review process and "opt-out" capabilities for its electronic publications to ensure that members do not receive unwanted e-mail from the ADA. For more information about the Association's electronic publications and e-mail policies, visit "www.ada.org/prof/resources/pubs/epubs/index.asp".

Mr. Hoyle is the ADA Publishing Division's electronic media editor.

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Program

Friday, June 11, 2004

Ceramics: New Developments and Their Application in Your Practice

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Peter Schäfer • Robert Winter • Masao Yamazaki

Periodontal Prognosis as a Determinant for Clinical Decisions

Ulf Lekholm • Gary Maynard • James Mellonig • Myron Nevins • Robert Schallhorn
Sigmund Socransky • Maurizio Tonetti

Implant Delivery: Predictability and Patient Satisfaction

Vincent Iacono • Burton Jagger • Louis Rose • Thomas Wilson

The Impact of Implants on Prosthetic Dentistry

Steven Lewis • Steve Patel • Michael Reisman • H. P. Weber

Saturday, June 12, 2004

The Clinical Significance of Developments in Tissue Engineering

David Cochran • Joseph Fiorellini • William Giannobile • Jeffrey Hallinger
Samuel Lynch • Michael McGuire • Gilbert Triplett

Bone Augmentation for the Purpose of Dental Implants

Daniel Heiser • Sascha Jovanovic • Marc Nevins • Carlo Tinti

Sinus Elevation: Is There an Optimal Approach?

Sergio DePaoli • Richard Iazzano • Dennis Tenover • Georg Watzek

Restoration of the Periodontally Compromised Dentition

Marion Amsterdam • John Kois • Kevin Murphy • Howard Sklarow

Adult Orthodontics and the Periodontal Treatment Regimen

Frank Celenza • James McNamara • Maurice Salama • William Wilcko • Roger Wise

Sunday, June 13, 2004

Periodontal Plastic Surgery: The Treatment of Recession-type Defects

Pat Allen • John Barro • Fredrik Miller • Yoshihiro Oda • Giovanni Pini Prato
Gary Reiser

Distraction Osteogenesis or Vertical Ridge Augmentation?

Martin Chin • César Guerrero • Ole Jensen • Jay Malmquist • Bradley McAllister
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Leonard Abrams • Gerard Chiche • David Garber • Ueli Grunder • Konrad Meyenberg
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Special Pre-Symposium Program

Thursday, June 10, 2004

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Camp call

Dental summer camp for high school students

BY KAREN FOX

Indianapolis—The University of Indianapolis' Summer Dental Camp is slated to meet for the second time July 25-30.

"Last year's camp exceeded our expectations," said Dr. Richard K. Shelly, the UI graduate and retired Indianapolis dentist who came up with the idea. "For me, it was a very rewarding experience to have counseled and taught such bright young people."

Twenty high school students attended the six-day camp designed to generate interest in dental careers. Most hailed from Indiana but some traveled longer distances. An ADA member from Arizona sent his brother, a high school student in California.

Summer Dental Camp gives high school students a taste of what it's like to be a dentist through discussion, hands-on activities and field trips. Camp faculty include Indiana Dental Association

members, UI graduates and Indiana University Medical Center dental school faculty and students.

Dr. Shelly encourages ADA members to consider the feasibility of launching similar summer programs. He took his idea for dental camp to the University of Indianapolis and found that not only did the school seek opportunities to bring high schoolers to its campus, it would also offer them one hour of college credit for attending the program.

For more information, contact Dr. Shelly at 1-812-332-6131. ■



What did you do on summer vacation? Twenty high schoolers attended the University of Indianapolis Summer Dental Camp in July 2003.

AD 246044m114 to be placed at Quad!!!

Something to Smile About



Careers in the Dental Profession

ADA video on dental careers targets youth

The ADA recently unveiled its new video: "Dentistry—A Unique Profession."

Highlighting the practice of dentistry and its many career options, the video includes testimonials from a public health dentist, an academic dentist, a dentist operating a mobile clinic, a military dentist and more. All comment on the unique aspects of a career in dentistry and discuss the importance of service to others, flexibility and professional practice options.

The video is the latest addition to the "Something to Smile About—Careers in the Dental Profession" resources and materials that comprise the Campaign for Dentistry, an initiative to attract qualified students to dentistry—especially underrepresented minority students.

Designed for an adolescent audience, the Something to Smile About materials promote careers in dentistry, dental assisting, dental hygiene and dental laboratory technology careers.

A mentoring initiative that pairs practicing dentists with students (K-16) who have an interest in dental careers is now under way, with several dental societies and dental schools participating in a pilot program. The initiative gives students a glimpse of dentistry from the practitioner's perspective.

"Something to Smile About" includes fact sheets, brochures, posters and CD-ROMs and a tabletop exhibit. Go to "www.ada.org/public/education/careers/index.asp" for more information on dental career resources, or contact Beverly Skoog, coordinator, Career Guidance, at Ext. 2390 or "skoogb@ada.org". ■

India's wonders

FDI offers post-congress tours

New Delhi, India—Enjoy royal comforts fit for a Maharaja as you explore India on one of six post-congress tours offered in conjunction with the FDI World Dental Congress Sept. 10-13.

- The Palace on Wheels (PT 1)—It's all aboard the Palace on Wheels for a luxurious eight-day train journey through the former royal kingdom. As a royal passenger, you will enjoy incredible comfort and cuisine while visiting Jaipur, Jaisalmer, Ranthambhor National Park, Chittaurgarh, Udaipur, Bharatpur and the Taj

Mahal—one of the seven wonders of the world.

- The Golden Triangle (PT 2)—Explore north India's "golden triangle" in a three-day tour. Explore vintage Delhi, the city established around 900 B.C.; Agra, home of the Taj Mahal; and the most modern stop on the tour—Jaipur—the "pink city" established in 1728, known for its royal palace, citadel and fort.

- The Heritage Trail (PT 3)—Marvelous sites and experiences await you, including breathtaking views from the back of a camel and an elephant. Stops on this six-day tour include



A wonder: See the Taj Mahal, one of the seven wonders of the world, on an FDI tour.

Rajasthan, Delhi, Samode, Jaipur, Jodhpur and Udaipur.

- Golden Goa (PT 4)—With the flavor of

Portuguese and Indian architecture and culture, beautiful beaches, shops and nightlife, this four-day tour of Goa on India's west coast offers peaceful relaxation and fun.

- Kerala Spice and Wilderness Treats (PT 5)—Enjoy the beauty of beaches, mountains, lakes, islands and wildlife and indulge your senses with a rejuvenating ayurvedic body massage during this five-day tour. Stops include Cochin's sightseeing and nightlife, Periyar's rubber plantations and forests, Kumarakom's bird sanctuary and more.

- The Path to Ananda (PT 6)—Retreat to the luxury spa, Ananda-in-the-Himalayas, to enjoy personalized therapy and activity programs that can help you de-stress, relax and enhance your health and beauty. Yoga, aromatherapy massage and other therapies transport you to true wellness.

In addition to these post-congress tours, the FDI offers six accompanying persons activities, including sightseeing in Old Delhi and New Delhi; visits to Delhi museums; a trip to the Taj Mahal; a class in Yoga; and a class in Shringar, the traditional art of Indian beauty techniques including sari tying, using henna, choosing bangles and relaxing with an ayurvedic massage.

Since passports and travel visas are required to travel in India, it's not too early to start planning for your trip. If you register for the FDI congress by May 1 you will also save money with advance registration discounts.

Bravo Meeting Management Solutions is the ADA's official travel agency for the FDI congress. Secure the best possible options and rates by calling 1-800-268-8084 or e-mail "adafdi2004@bravomeetings.ca."

The four-day dental congress will feature a technical exhibition and scientific program that includes ADA CERP-recognized continuing education courses and symposia. FDI is the first international organization to receive recognition from the ADA Continuing Education Recognition Program. CERP-recognized courses will span a wide range of topics, from access to care to TMD.

For more information on the FDI Congress and its tour program, or to request an official program, visit "www.fdiworldental.org" or contact John Hern, FDI USA Section by calling the ADA toll-free number, Ext. 2727 or e-mail "hernj@ada.org". ■

AD 246044m112 to be placed at Quad!!!!

Correctional meeting set

Updates in Correctional Health Care, the annual spring conference of the National Commission on Correctional Health Care and the Academy of Correctional Health Care Professionals, will meet in Chicago May 22-25.

Continuing education credit is available. Preconference seminars, tours and activities and a technical exhibition are planned.

For more information or to register, contact the NCCHC by calling 1-773-880-1460 or log on to "www.ncchc.org". ■

Dental mission needs you

BY MARK BERTHOLD

Lake Victoria, Kenya—Twenty-three million citizens of this country share only 350 dentists, so Dr. C. Wilson Lathrop hopes you'll help make his trip there on May 25 have the greatest possible impact.

Dr. Lathrop, with Drs. Jerry Denning and Joe Lindner, will visit Kenya for about three weeks on a medical missionary trip as part of the non-profit Medical Strategic Network of Phoenix, Ariz.

"As the people of Kenya and several countries bordering Lake Victoria go through dietary changes to white flour and white sugar, we are seeing a dramatic increase in dental decay, periodontal disease and abscessed teeth," says Dr. Lathrop.

"We want to help, and a good way is to train

those humanitarians in the field who have dedicated their lives to helping others. We want to give them the support and education they need to help those larger groups."

To accomplish this, Dr. Lathrop's team will provide training in tooth extraction and instruction in oral hygiene and nutrition to 30-40 local people.

And he needs your help, in the form of donated dental forceps, anesthetic syringes, mouth mirrors and cotton forceps, to allow the trained people to perform tooth extractions after the dentists leave. They would also appreciate frequent flyer miles.

To donate these items and get your tax-deductible receipt, contact Dr. Wilson Lathrop at 1-602-493-5055 or e-mail him at "wilathrop@cox.net". Mail items to Africa Dental Mission, P.O. Box 37697, Phoenix, Ariz. 85069-7697. ■

Millions in need: Kenyans could use your donated dental forceps, syringes, mirrors and frequent flyer miles.



WHO releases global oral health report

BY JOE HOYLE

An estimated five billion people worldwide have experienced dental caries and diseases of the oral cavity represent a global health problem in both industrialized and developing nations, particularly among poorer countries, the World Health Organization said in a comprehensive report on global oral health released Feb. 24.

The World Oral Health Report 2003 aggregates data from a variety of sources to present a picture of oral health worldwide and to recommend a series of strategies to address the impact of oral disease in pain, suffering, impaired function and reduced quality of life, which WHO calls "both extensive and expensive."

Treatment for diseases of the oral cavity accounts for between 5 and 10 percent of health care costs in industrialized nations but can be beyond the resources of many developing countries, according to the report. Changing lifestyles that include the increased consumption of sugar and continued widespread use of tobacco mean that many developing nations are experiencing increased prevalence of dental disease.

The report spells out the major priorities of WHO's Global Oral Health Programme to address these needs, including:

- addressing modifiable risks such as oral hygiene practices, sugar consumption, lack of calcium and tobacco use;
- addressing major sociocultural barriers including poor living conditions, low education levels and the lack of traditions supporting oral health;
- encouraging the appropriate use of fluorides for dental caries prevention;
- orienting oral health systems to primary health care and prevention;
- mobilizing health promotion and education at local, national, regional and global levels;
- increasing emphasis on the oral health problems of the elderly;
- contributing to the early diagnosis, prevention and treatment of HIV/AIDS, which often shows up first in oral fungal, bacterial or viral infections and lesions.

The complete report ("www.who.int/oral_health/publications/report03/en") is available for download in PDF format from the WHO Web site. ■

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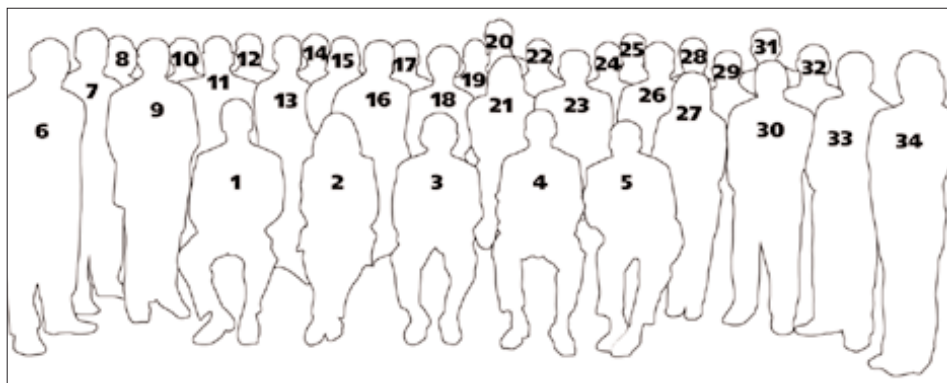
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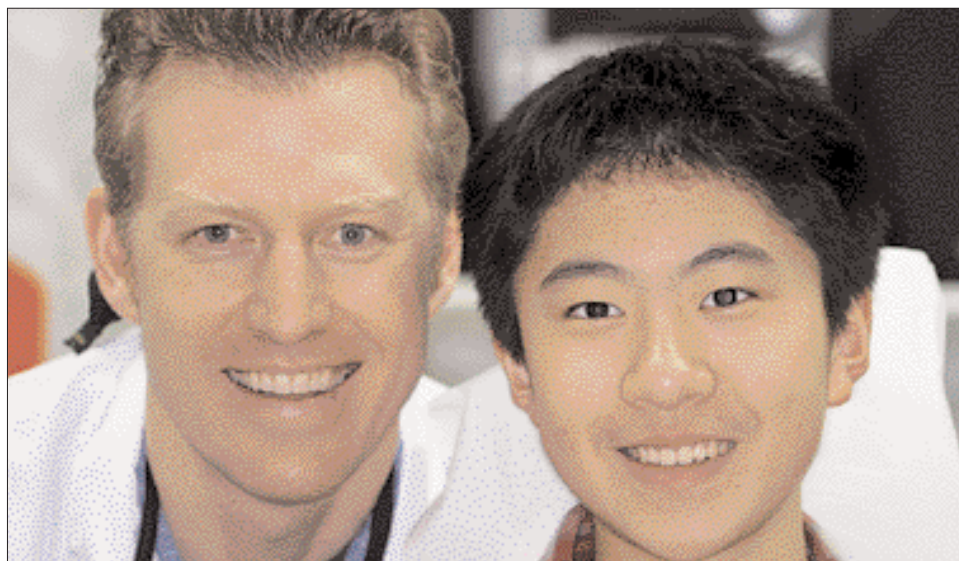


GKAS2004

Thank you: ADA leaders extend gratitude to Sullivan-Schein Dental and many of its manufacturer partners for their contributions to Give Kids A Smile. Sullivan-Schein and 51 of its partners donated professional products to dental team volunteers for this year's program. The vendors are identified below the numbered diagram at left.



Contributors: Sullivan-Schein Dental staff and vendors pictured include (1) Tim Sullivan, Sullivan-Schein executive vice president; (2) Maureen Knott, Sullivan-Schein marketing director; (3) Dr. Eugene Sekiguchi, ADA president; (4) Dr. Richard Haught, ADA president-elect; (5) Dr. James Bramson, ADA executive director; (6) George Sproul, Sunstar Butler; (7) George Rogiokos, Sultan Chemists; (8) Araxi Garabed, Sultan Dental Products; (9) Boyd Relac, Dentsply-Caulk; (10) Wil Bosanko, Sultan Dental Products; (11) Peter Belsky, Sullivan-Schein product category manager; (12) Robert Geller, Coltene Whaledent Inc.; (13) Mike Donohue, Pulpdent; (14) Mike Beaudoin, SDS-Kerr; (15) Kathy Devaney, Sullivan-Schein product category manager; (16) Steve Kess, Sullivan-Schein vice president, Professional Relations; (17) Jeff Lynch, Banta Healthcare; (18) Lynne McHugh, Sullivan-Schein senior vice president, Operations and Administration; (19) Ron Malerstein, Kerr; (20) Paul Hinsch, Sullivan-Schein vice president, Marketing; (21) Lisa Gorgone, Sullivan-Schein product category manager; (22) Kevin McNamara, Banta Healthcare; (23) Paul Mondock, Septodont; (24) Carey Lyons, Sultan Chemists; (25) Mike Etheridge, Kerr; (26) George Romero, Heraeus Kulzer; (27) Marguerite Walsh, Sullivan-Schein marketing director; (28) Brian Reichert, SS White; (29) Don Hobbs, Sullivan-Schein vice president, Equipment Marketing; (30) Steve Merrick, Septodont; (31) Bob Size, Dentsply-Caulk; (32) Brian Watson, Sullivan-Schein senior vice president; (33) Mark Nolan, Dentsply-Caulk; and (34) Jelena Christensen, Dentsply Professional.



Great results: Dr. Brian Fick of the Center for Cosmetic Dentistry in Madison, Wis., shares a smile with Dennis, a 16-year-old Madison resident. Dennis received comprehensive treatment and 13 resin fillings, valued at over \$2,500. Three other area children were also given comprehensive treatment at a value of nearly \$7,000. Dr. Chris Kammer owns CCD.



X-rays: Dr. Charles Tatlock, assistant professor at the University of New Mexico Dental Hygiene School, assisted by Laura Bleck, UNM pre-dental club member, on Feb. 6 shows fourth-grader Yeiry Astorga her bitewings in UNM Dental Hygiene Clinic. New Mexico Dental Association members also screened children in the rotunda of the state capitol.



All done: Sylvia Rosado holds her daughter, Nayeli, at the Infant Welfare Society of Chicago's GKAS event Feb. 6. Elizabeth Grace, R.D.H., looks on.

Some dentists make \$50,000 their first year.
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If I as a Navy Dentist, you'll experience all that dentistry has to offer sooner than you ever thought possible. Imagine being able to run your own practice without any of the costs or challenges normally associated with doing it yourself. You'll get to travel the world and experience the kind of adventure you've always dreamed about. Plus you'll receive a \$50,000 sign-on bonus. So if you're looking to further your dental career while you travel the world, then the Navy is the choice for you.

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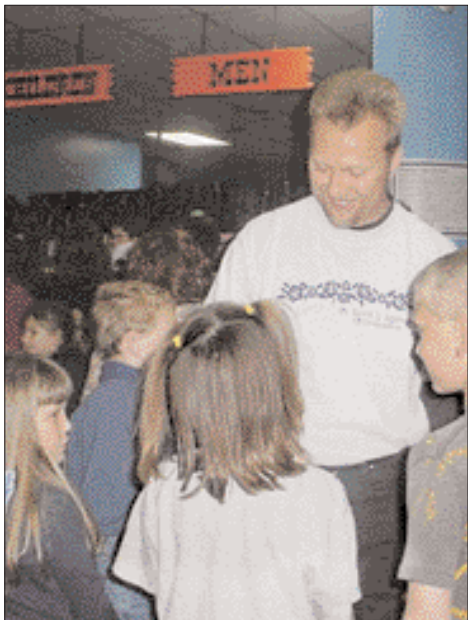
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GKAS Feb. 26: Dr. Monica Bruce (left), a Los Angeles Dental Society volunteer at the University of Southern California's Feb. 26 observation of Give Kids A Smile, treats Ana Cleto of Norwood Elementary. Also at USC are (above from left) Russ Baker, Sullivan-Schein Dental; Dr. Harold Slavkin, dean, USC School of Dentistry; Dr. Eugene Sekiguchi, ADA president and USCSD associate dean; Dr. Roseann Mulligan, associate dean for community health programs; Dr. Charles Goldstein, director of community health programs; Nava Bloom, Healthy Start; Dr. Steven Le, USC GKAS director; and David Sullivan, Sullivan-Schein Dental.



Skating soiree: Dr. Kevin Andrews visits with kids attending the Northern Nevada Dental Health Program's 8th annual Happy Tooth Skate Party Feb. 26. More than 500 children and family members attended the GKAS event, where kids swapped an old toothbrush for an evening of skating and a goody bag with toothbrush, floss, toothpaste, stickers and an ADA oral health brochure. Dental hygiene students were also on hand to teach preventive care. Throughout the year, the program's 105 volunteer dentists provide pro bono care for about 500 children in Northern Nevada.



Eager: Parents and children await dental care at the Appolonia Foundation's Children's Oral Health Program in Seaside, Calif., Feb. 5.

AD 246044m115 to be placed at Quad!!!

AD 246041p117 to be placed at Quad!!

Notice to all former participants in the ADA MedCASH Plan/Hospital Indemnity Insurance Program

A special distribution of surplus funds held by the ADA MedCASH Plan has been approved by the ADA Board of Trustees at the recommendation of the Council on Members Insurance and Retirement Programs. The surplus was generated from the favorable financial experience of the predecessor Hospital Indemnity Plan from its inception in 1980 until March 14, 1993. If you were a participant in the Hospital Indemnity Plan during that period (either as an insured ADA member or as an insured dependent of a deceased insured ADA member), you are eligible to receive a share of this distribution. The amount to be made available to each eligible participant is \$80.89 for each year of participation between the original Plan's inception date of March 15, 1980, and March 14, 1993, up to a maximum of 13 years. If you were not insured in the Hospital Indemnity Plan during that period, you are not eligible for a share of this distribution and you should disregard this notice.

Please note that if you are currently participating in the MedCASH Insurance Plan and were insured in the Hospital Indemnity Plan prior to March 15, 1993, your share of the surplus distribution has already been mailed to you. **Please do not respond to this notice.**

Due to the change in the Hospital Indemnity Plan's insuring companies in 1993, records no longer exist for some individuals who were insured prior to 1993. Consequently, if you are an eligible former participant and wish to claim your share of the surplus, you must provide proof of your participation, satisfactory to the ADA. This proof can be a copy of your certificate of insurance issued by the Life Insurance Company of North America, billing statements issued by the Life Insurance Company of North America or the Plan's former administrator William M. Mercer/M. A. Gesner, Inc., or canceled checks payable to any of these organizations evidencing that payment was for coverage under the Hospital Indemnity Plan.

The Board of Trustees has accepted the Council's recommendation that any unclaimed shares of the surplus distribution should be used for the benefit of all ADA members. To this end, the Board will use the surplus to reduce the need for dues dollars to fund Association activities and programs in the future. If you wish your share of the funds to be used for this purpose, simply disregard this notice.

If you are not a current MedCASH Plan participant but are eligible to claim a share of the surplus, please complete and sign the coupon below and mail it to the Great-West Life & Annuity Insurance Company within **90 days** of the date of this notice along with proof of your pre-1993 participation in the Hospital Indemnity Plan. Please allow 60 days for processing. For additional information, please call 1-800-568-2001.

I hereby apply for a share of the surplus distribution from the ADA MedCASH/Hospital Indemnity Insurance Plan based on the information stated above. Date of this notice: March 15, 2004. Offer expires 90 days after this date.

I participated in the Plan from 19____ to 19____ and have enclosed the required proof of my participation during that time. I certify that all the information shown on this form and the proof attached is correct.

Full Name: _____
(Print Clearly)

ADA Membership # _____

Street Address: _____

City, State, Zip: _____

Telephone Number: _____

Signature: _____

Mail to: **Great-West Life & Annuity Insurance Company, P. O. Box 340, Attention: MedCASH Distribution, Denver, CO 80201.**



Save the date: Watch the mail for a postcard full of smiles and highlights of the ADA's upcoming annual session in Orlando, Fla.

Juicy choices

Get ready for annual session courses and events, Orlando fun

Orlando, Fla.—This year's annual session in Orlando, Sept. 30-Oct. 3, will be ripe with juicy opportunities to enhance your practice and squeeze in lots of fun, too.

Quench your thirst for knowledge by choosing from more than 150 continuing education courses for dentists, 130 courses for dental auxiliaries and 60-plus hands-on participation workshops. Some of this year's top picks include the women's and the new men's health conferences, team building, tech day, one-hour Marketplace seminars in the exhibit hall and 75-minute "Rising Star" lectures.

You can also extend your educational opportunities and fun in the sun by attending the ADA's post-session seminar at the Ritz Carlton Orlando Grande Lakes Resort and Spa.

The all-new ADA Marketplace will be bursting with smart shopping opportunities for dental products and services. More than 700 exhibiting companies will arrange their booths in four easy-to-navigate categories: over-the-

counter products and pharmaceuticals; dental services; materials and infection control; and instruments and equipment. The new Marketplace design lets you shop and compare easier and faster than ever before.

This year's entertainment, social events and local attractions will put a sunny smile on your face. Immerse yourself in events around the globe and in space by attending the ADA/Sonicare Distinguished Speaker Series, featuring former prime minister of Britain John Major and former NASA astronaut Capt. James Lovell. Spend an evening enjoying family-style fun with comedian Bill Cosby and make the ADA's private night at Universal Studios Florida a must-see on your family's list of attractions.

Watch the mail for the "save the date" postcard with more information on how to plan for annual session; or call 1-800-232-1432 or e-mail "annualsession@ada.org". Registration and hotel reservations open online at "www.ada.org/goto/session" on April 6. ■



Click! Add new ADA 'go-to' logo link to your Web site

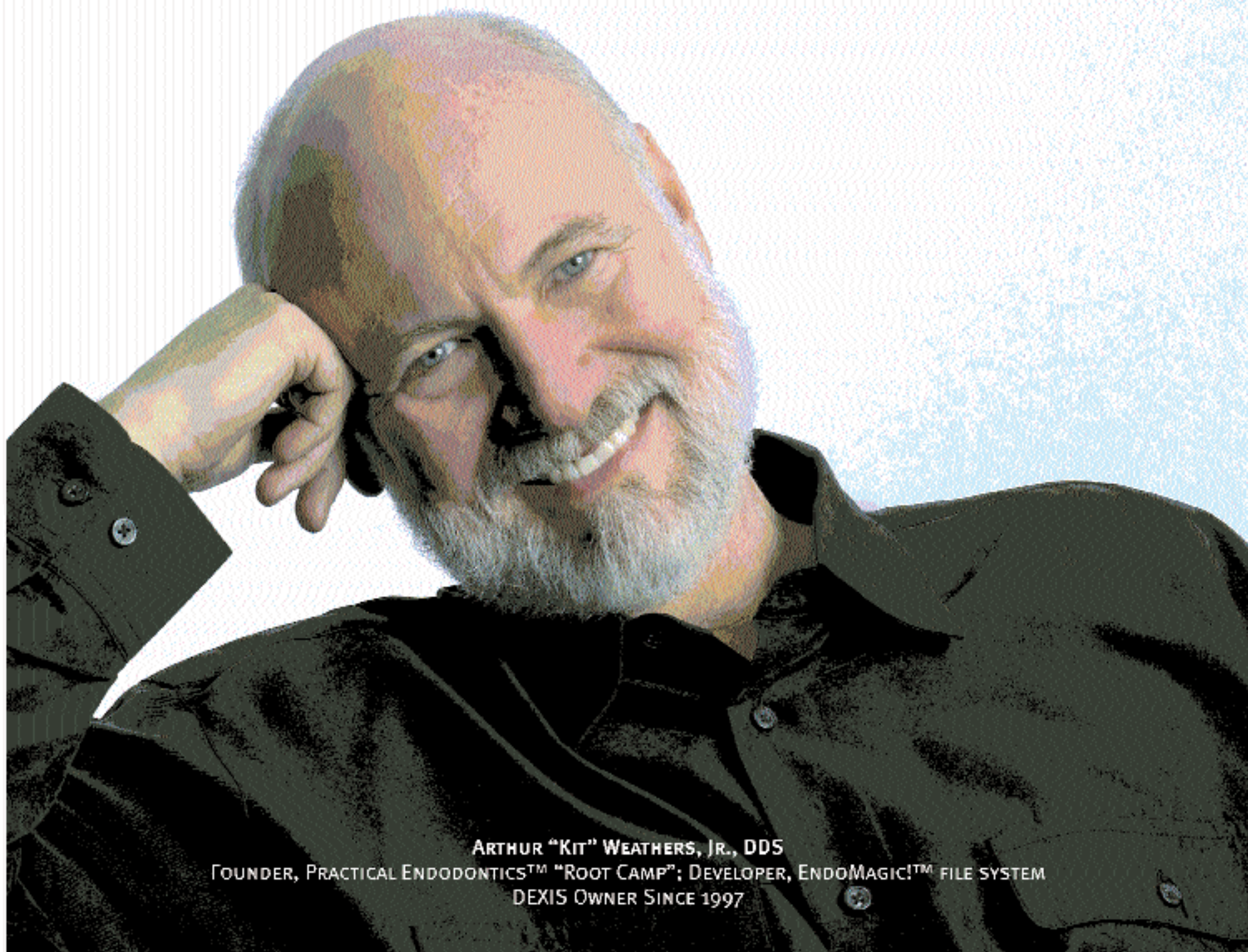


The ADA has developed a "Go To ADA.org" logo that Association members and dental societies can display on their Web sites and link to ADA.org.

The logo is available at "www.ada.org/

members/goto.asp" along with specific links to popular public content offered on ADA.org that also can be added to member or society Web sites. Visit the Web page above for more information. ■

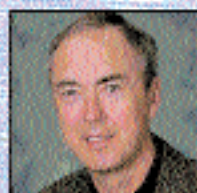
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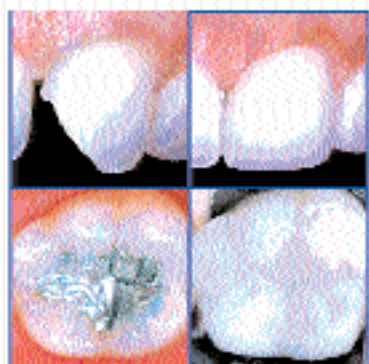
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1. As in past original Esthet-X literature.
2. In the context of this study, MC (poly-urethane) resin, Dentsply[®] Montreal.