Introducing the new BSG Newsletter

This first edition of the BSG bi-annual newsletter is just to introduce our vision to you - its future will largely depend on your contributions. We need your ideas for a name for the newsletter, articles to include, examples of good practice you would like to share, and any other thoughts or comments relating to the field of Gerodontology.

This is a ‘work in progress’ – deadline for contributions for the Spring edition is 1st February 2008. Please email them to: Thelma.Edwards@dsl.pipex.com – but please don’t leave it to the last minute!

BSG IS NOW A CHARITY!

THE NEW CHARITY NUMBER IS 1118671.

Our thanks go to Vicki, Janet, Heather and her husband John Frenkel for their work in helping BSG achieve charity status.

THE AIM of the Society is to improve, preserve and protect the oral health of older people.

THE OBJECTIVES of the society are highlighted in the BSG constitution:

- To encourage research, publication and dissemination of information related to the oral health care of older adults.
- To encourage and develop undergraduate and postgraduate teaching and training of the dental team in the subject of oral health care for older people.
- To promote links with other organisations, professional bodies, carers and the general public regarding oral health and its benefits for older people.
- To provide an advisory body to which questions concerning oral health for older people can be referred.

The Committee is considering awards for new graduates and dental nurses, developing the website with resources and guidelines on specific topics, and links to voluntary agencies such as Help the Aged, Age Concern and Alzheimer’s Society.

BSG TRUSTEES

Vicki Jones
Barbara Hylton
Debbie Lewis
Paul Wright
Janet Griffiths
Mark Taylor
Jim Newton

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CO-OPTED DCP COMMITTEE MEMBERS

Susan Maddock - Dental Nurse
Thelma Edwards - Oral Health Promoter
Fiona Sandom - Dental Hygienist

BSG Newsletter Issue 1 October 2007
Editor’s Reflections

The BSG conference in June 2007 took place in the beautiful surroundings of the RNLI Headquarters in Poole, Dorset. As a comparative newcomer to BSG, I drew inspiration from my environment and reflected on the purpose of the BSG. Was it to support a workforce to continue to send out the lifeboats to rescue those in trouble? Or was it moving upstream waving a red flag of danger to highlight risks to prevent rescue being required? Or was it a synergy of inflatables, large lifeboats, lifejackets and training programmes?

The best package of oral health includes treatment, prevention of disease and the promotion of health. For those of us who continue in professional practice whilst entering later life, the realities of being part of the post-war bulge generation are very real. It’s payback time - like the pension letter that notifies me that what I will receive now is based on what I have paid in over the years. I am a product of the lifestyle norms of my childhood – the daily tablespoons of cod liver oil and molasses and iron to build me up, bottles of National Health orange juice full of vitamin C suspended in glucose syrup, tins of fluoride-free toothpowder resembling VIM, and the drill and fill culture of dentists! No wonder most of my teeth were filled before I left school!

And now, like the growing population of the recently or retired and those approaching retirement, I have big expectations to retain a healthy mouth, albeit heavily restored.

So what do I bring to the BSG as a new co-opted member of the committee? 19 years in oral health promotion, a non-clinical background and my feet firmly planted in being a consumer as well as a professional. I have been invited to take up the role of Newsletter Editor. I know from my time spent on the committee of the National Oral Health Promotion Group (NOHPG) and from the success of the NOHPG email Newsgroup, that members are the lifeblood of a publication that pulsates with ideas, examples of good practice, questions, debate, and challenge. Please help me develop something relevant to you by commenting on this first issue, suggesting what you would like to see in the future, and contributing yourself to the next edition. I look forward to hearing from you. Thelma Edwards

A sample of the Delegates’ reflections:

Made me more aware of elder abuse
Pharmadynamics lecture was very interesting
Good advice on restorations and the older person
More observant and less ageist when treating older people
Promote prevention earlier
Advice to carers/clients on how dental conditions may be treated
Encourage oral hygiene by carers
**Winter Meeting 2007.**

**IS IT ALL IN THE MIND? MENTAL HEALTH THROUGH THE AGES**

Back to back meeting of the British Society of Gerodontology and BDA CDS Group and the British Society of Disability and Oral Health at the Chartered Accountants’ Hall, 1 Moorgate Place, London EC2R 6EA on 6th and 7th December 2007

**British Society of Gerodontology and BDA CDS Group**

**Thursday 6th December 2007**

9.15 registration to 4 pm close

The meeting will focus on the mental health care issues that affect older people, their oral health care and dental service provision. This will include the impact of the Mental Capacity Act, Advance Directives, Mental Health and well being in later life, Dementia and specific Mental Health Problems in relation to oral health.

**Background Reading on our Winter Meeting Topic.**

**Extracts From Mental Health in Later Life Inquiry**

This is the second and final report of the UK Inquiry into Mental Health and Well-being in Later Life. The Inquiry identified 5 main areas for action:

**Ending Discrimination** — older people with mental health problems face discrimination in policy, practice and research. Direct age discrimination, such as age barriers to accessing services, can have a devastating effect.

**Prioritising Prevention** — many mental health problems in later life can be prevented. The risk factors for depression, anxiety, suicide, delirium and some types of dementia are well known. Social isolation is a common risk factor across a range of problems. The problems are diverse but all of them require preventative action at multiple levels, from the individual to the broader policy level.

**Enabling Older People** to help themselves and each other. Only a small percentage of older people with mental health problems receive help through formal services. The vast majority cope using their own resources, so support for self-help and peer support is necessary.

**Improving Current Services** — although only a minority of older people with mental health problems access them, housing health and social care services can play an important role.

**Facilitating Change** requires action in several areas. There are many opportunities, with policy emphasis on age equality and self-directed support. Improved education, training and support for those who work with older people will facilitate change. Stronger professional, managerial and political leadership is essential, as is the effective targeting of much-needed investment.

The Inquiry makes 35 recommendations. Age Concern have agreed to audit responses to these recommendations and report on progress in 2009.

Web Link to Executive Summary: http://www.mhilli.org/documents/inquiryfinalreport-EXECSUMMARY.pdf

**Mary Riddell Illustrates the Reality of Our Topic.**

She was articulate and 95 when she got too frail to live alone. At her first care home, she was sedated so heavily that she slept constantly until her daughters had her admitted her to a place where she thrived until its closure forced her to move on again.

Like all pensioners, Scots apart, whose assets exceed £21,000, she had to pay for her own social care. Her bill had risen towards £30,000 and her money had all gone by the time she fell and broke a hip. Although she recovered, she had become mildly confused and again she was given medication. One day, her daughters visited her and found that she had emerged from her blurred half-life. She recognised them and spoke lucidly.

They were told that her pills had been stopped while she was given antibiotics. Suspicious, they discovered that her normal drug was actually a remedy for schizophrenics that had left her mute, helpless and tractable as a doll. Staff said that medication would start again. Otherwise her daughters could take her away. They should see how they liked it when she wept in the undrugged moments of terror that her dementia induced. Her family has found no solution yet. They watch their mother sitting in a chair all day and staring at nothing, still as stone apart from one trembling hand. She is almost 100 now and caught, like many, in a pocket of pointless time.
### Calendar of Events 2007

**BDA CDS Group Annual Presidential and Scientific Meeting ‘Special Care Dentistry- From Cradle to Grave’**

Assembly Rooms, Bath, Somerset BA12QH  
October 31st - November 2nd 2007  
**Contact:** Sue Ensor, Events Department, BDA, 64, Wimpole St, London W1G 8YS  
Tel: 02075634199  
Email: events@bda.org

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**British Society of Gerodontology and BDA CDS Group Winter Meeting**

**Is it all in the Mind?**

**Mental Health through the ages**

**Back to back meeting with BSDH**

Chartered Accountants’ Hall, 1 Moorgate Place, London EC2R 6EA  
6th December 2007  
**Contact:** Vicki Jones, Dental Department, Ringland Health Centre, Newport  
Gwent NP19 9PS  
Vicki.Jones3@gwent.wales.nhs.uk

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**British Society for Disability and Oral Health Winter Meeting**

**Is it all in the Mind?**

**Mental Health through the ages**

Chartered Accountants’ Hall, 1 Moorgate Place, London EC2R 6EA  
7th December 2007  
**Contact:** Pauline Watt-Smith  
01865375113  
pwattsmith@yahoo.co.uk

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### Calendar of Events 2008

**British Society for Disability and Oral Health Spring Meeting**

**Neurodisability-Nature to Nuture**

Marriot Hotel, Cardiff  
9th May 2008  
**Contact:** Pauline Watt-Smith  
01865375113  
pwattsmith@yahoo.co.uk

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**British Society of Gerodontology Spring Meeting**

Queen Mary’s College, London  
20th June 2008  
**Contact:** Vicki Jones, Dental Department, Ringland Health Centre  
Newport, Gwent NP19 9PS  
Vicki.Jones3@gwent.wales.nhs.uk

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**IADH 19th Congress**

**Oral Health and Disability – Quality of Life**

SANTOS, Brazil  
28th to 31st October 2008  
**Contact:** www.iadh2008santos.dinoh.org

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**British Society of Gerodontology and BDA CDS Group Winter Meeting**

SOAS, London  
4th December 2008  
**Contact:** Vicki Jones, Dental Department, Ringland Health Centre  
Newport, Gwent NP19 9PS  
Vicki.Jones3@gwent.wales.nhs.uk

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**British Society for Disability and Oral Health Winter Meeting**

SOAS, London  
5th December 2008  
**Contact:** Pauline Watt-Smith  
01865375113  
pwattsmith@yahoo.co.uk

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**Websites:**

- British Society of Gerodontology: [www.gerodontology.com](http://www.gerodontology.com)
- British Society for Disability and Oral Health: [wwwbsdh.org.uk](http://wwwbsdh.org.uk)