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Dean's Update

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As we all know, it is how we respond to change that dictates whether or not we are successful. During and after COVID-19, it is not just the dental team who will need to adapt to change; so will our patients and the NHS as a whole. Undoubtedly, the NHS will continue to face huge challenges over the months ahead. However, we often see good emerge from adversity, and I sincerely hope that this pandemic will be seen as a cathartic moment in the history of UK dentistry. A moment when we finally modernise the NHS dentistry system and enable our dental health care professionals to focus on prevention and delivery of high quality person centred care.

Despite the untold anxiety, frustration and pain caused by the pandemic and felt throughout the dental profession, it is uplifting to see so many people coming together to support each other. Practices, groups and organisations are joining forces to share information, offer advice and provide mentorship and guidance through this incredibly difficult time. So many colleagues have stepped up to help others, whether that has been in terms of redeployment, helping in the local community or spending hours on Zoom, Skype or Teams developing advice sheets or guidance documents to share with the profession. It has been a truly remarkable effort by so many, and I have no doubt that the attitude, fortitude and commitment demonstrated will see us through to better times.

Even in the current uncertainty, there is one thing we can be sure of; people still need help to look after their oral health, and definitely some more than others. One particular group who will increasingly need our support is the older generation. When I was a young dentist training in Glasgow, treatment of the older patient was fairly straightforward. In these days, it was all blood and acrylic - job done! Nowadays, it is a very different situation with the vast majority of the elderly population retaining a functional natural dentition, albeit one which is increasingly being held together by complicated dentistry.

We are now experts at retaining, restoring, and replacing teeth, but this can present challenges in itself as restorations start to fail over time. Expectations do not necessarily decline with age, and patients in their later years still value their oral health and quite rightly expect to have a pain-free functional dentition. However, delivering and maintaining this involves the technical challenges of restoring the aging dentition, the complexity of health conditions and medications, and the physical and mental challenges of aging. Together, these factors can make dentistry extremely difficult in the older person, but we need to be prepared to increasingly face these challenges in the years ahead. As the population ages, the oral health improves and expectations rise, gerodontontology will undoubtedly be a growth area.

Gerodontontology is an incredibly important area of dentistry, and none more so than at the present time when many older patients have been shielded during the COVID-19 pandemic and unable to access the support and advice they desperately need. I am therefore delighted that Igor and the editorial team have chosen to publish this themed edition of the Primary Dental Journal.

I would like to thank Igor, Gerry, Hillevi and the various authors for contributing to this issue. It is another excellent series of articles which will be relevant to all members of the dental profession, and will yet again remind us of what an important role we can play in caring for some of the most vulnerable in our society.