Sharing Scientific Knowledge

It's time for a change, but what's the best way to proceed?

**Dental Side Effects**

The results of a study published in the September/October 2004 issue of General Dentistry suggests that treatments for mood disorders may cause adverse dental side effects. The clinical, peer reviewed journal is published by the Academy of General Dentistry. Medications used in treatment can cause xerostomia and a higher rate of dental caries and periodontal disease. It is estimated that approximately 7% of adults face mood disorders—depression or bipolar disorder are common—at some point during their lives. Early diagnosis and treatment can significantly reduce the risk of suicide from these disorders. Left untreated, major depression usually last eight or nine months. With treatment, patients usually begin to feel better and rid themselves of suicidal thoughts within one to three weeks. Approximately 60% of those who suffer from bipolar disorder notice improvements when psychotherapy and medication are used jointly for treatment.

**Election Health Debate in Australia to Ignore Oral Health Crisis**

The Australian Dental Association (ADA) has accused the government coalition and the opposition Labour party for ignoring the nationwide oral health crisis in Australia in their federal election health debate. In a recent press release, ADA President Dr. David Houghton, says Australians are the second worst of all OECD countries when it comes to measures for adult oral health. “Oral health is of very low concern to the government, when one considers the increased number of people suffering from oral disease,” he said, “but investment in dental care will have the flow-on effect of reducing later general health expenditure.”

Combined State and Territory expenditure on public dental care in 2002/03 was about $270 million AUD. The Commonwealth claims to have allowed the States to keep an additional $2.5 billion from the growth in the number of private health insurance contributors, and that it puts billions into the health systems of the States and Territories. However, there is no actual requirement for the States or Territories to spend any of this Commonwealth money on dental treatment.

“Federal, State and Territory governments must improve coordination of care and funding to address the delivery of efficient, economical oral care. They must use their funding to ensure that any Commonwealth money on dental treatment goes to dental care and not diverted to other activities,” Dr. Houghton said. “Waiting lists for public dental treatment in most, if not all, States and Territories are unacceptably long.”


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**Short Cuts**

**Practice Matters**

What Do They Expect? Opinion polls confirm that the public generally regards dentists as being honest and ethical. Given today's service-oriented world, Dr. Fredman asks what dentists need to know in order to maintain their image in the eyes of patients. page 6

**Science & Research**

What Is Beauty? Which mechanisms work together when we judge someone as being beautiful, plain or ugly? Which characteristic features of a face are important? Find the answers to these questions in this special feature. page 14

**Trends & Application**

What's the Difference? If you've ever wondered about the different generations of adhesives, this article by Dr. Friedman will be helpful. Here you'll learn about the chemistry involved in heretofore bond strengths and common problems. page 18

**Meetings & More**

Welcome to Yokohama! Take advantage of our special today Show Preview for the Japan Dental Show, which will be held from 29–31 October 2004. Get a taste of the latest products that will be featured and figure out how to incorporate our traveler’s tips into your schedule. page 34