

From the President...

In the 'From the President' article penned this time last year, Francis Collier stated that he was entering his final year in the role and he would be 'passing the presidential baton' onwards. Goodness, how quickly has the year flown by!

On behalf of SAAD members we offer many thanks to Francis for his dignified, inclusive and conscientious style of leadership throughout his three years' office; through his example he was able to harness goodwill and motivate those about him so that the myriad of tasks that drove the Society onwards and upwards were tasked and finished.

Further to the recent Annual General Meeting, there have been changes in the Board membership; it is with pleasure that we welcome Manni Deol and Kellie Downie who take up the responsibilities of Honorary Secretary and Honorary Treasurer respectively. These are demanding roles and SAAD is fortunate to have such capable Trustees stepping up from their year as assistants, where the ropes were learned from the previous incumbents. This forward planning was designed to facilitate a seamless hand-over, so hopefully an early transition from 'Norming' to 'Storming' as per Tuckman's Team Development Model, will occur!

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Our thanks are also due to Sadie Hughes who has stepped down as Honorary Secretary, however, she was elected to the Board of Trustees for a three-year term at the AGM. When she took over the secretarial position in 2015 it was to a baptism of fire, as it coincided with the publication of the IACSD Report. Confronting a tsunami of concerns, requests for advice and questions from members regarding the implications of the report's contents, Sadie dealt with all this in her own inimitable way for which we are grateful – fortunately that storm has now abated from its initial level.

The reputation of SAAD Digest has grown exponentially under the Editorship of Nigel Robb, a role he assumed in 2005, and it is now able to hold its own internationally against other peer-reviewed scientific journals. We are extremely grateful to Nigel and the Editorial Board for their commitment, enthusiasm and hard work, contributing so much to the received accolades. Nigel who was also our President from 2009 to 2012, has now left these shores to take up a post as Professor of Restorative Dentistry at the University of Griffith, Western Australia, we wish him well. The expression, 'their gain, our loss' comes to mind, however, for the time being he will continue his Editorship from the antipodes, whilst Yi Loo, SAAD Trustee, will liaise closely with Nigel to ensure that the production of the Digest keeps on track.

SAAD is increasingly involved in the assessment of sedation providers, through the SAAD Safe Sedation Practice Scheme; the work of our dedicated panel of assessors is often unnoticed but nevertheless much appreciated.

A message that came over from the SAAD Diamond Jubilee Survey was the request to vary the location of the Annual Symposium. 'You said – We did!' The venue for next year's Symposium will be Bridgewater Hall in Manchester, please keep your eyes peeled on the SAAD website for more detailed information as



Steve Jones
SAAD President

it is posted. Our hard-working Executive Secretary, Fiona Trimmingham, will I am sure, keep us all fully informed.

Following the very successful study days that were initiated and organised by Carole Boyle, Assistant Course Director, the series continues with the focus on Paediatric Dental Sedation, 'Getting More Giggles. Paediatric Sedation and Anxiety Management Study Day'. Yi Loo has been busy organising this event in conjunction with the British Society of Paediatric Dentistry (South East Branch) to be held on Saturday 23 March 2019 at New Hunt's House, Guy's Hospital, London. The speakers are all respected experts in the field of paediatric dentistry and the event is recommended for all those with an interest in this particular area of dentistry.

What of the next twelve months? The 'unseen' but essential business and development tasks will carry on ensuring our continued progress, whilst innovations will be debated, and where relevant, introduced to ensure SAAD's forward momentum.

SAAD continues to support valued projects related to sedation; the Board of Trustees has recently agreed to support the updating of the CBT handbook, 'Cognitive Behavioural Therapy for Adults with Dental Anxiety: A Toolkit' -edited by Jen Hare, Editorial Board, and Professor Tim Newton of KCL which, in due course, will be available at a discounted rate to all SAAD members.

Please carry on the good work of delivering care using sedation techniques, and we send our best wishes for the December and New Year activities.

SAAD Annual Symposium

Challenges for the Future

Saturday 22 September 2018
The Royal Society of Medicine, London

Shreenal Jagsi

Following the splendour of last year's Diamond Jubilee celebrations, this year's Symposium was attended by one of the largest number ever of General Dental Practitioners and Dental Auxiliaries (an impressive total of over 230 delegates) all interested in developing their knowledge in the field of dental anxiety and its management.

The morning was opened by SAAD President Francis Collier who welcomed the delegates and gave a special congratulation to David Craig, (SAAD's Course Director, and a Past President) on being awarded an MBE in the Queen's Birthday Honours List, for services to dental patients. This hard-earned recognition of his enormous longstanding commitment and contribution to the clinical development, teaching and regulation of dental sedation, is well deserved.



Sadie Hughes

Sadie Hughes chaired the morning's programme and invited David Craig to present his Lecture.

Breathing Matters

David Craig

Dr Craig is heavily involved in teaching conscious sedation techniques to both dental and medical professionals. He highlighted the importance of undertaking a thorough airway and breathing examination during the initial (pre-operative) patient assessment. His epifocal insight gained during teaching was that dentists assessed airways almost automatically. Medical workers, however, concentrated on specific areas of operation rather than patients' airways,

presumably due to their greater use of systemic analgesia rather than the local anaesthesia widely administered by dentists, potentiating the risk of respiratory complications. We are fortunate in dentistry to subconsciously routinely assess the airways pre-operatively.



David Craig

David highlighted the importance of a health assessment, taking into consideration respiratory diseases, obesity and kinetics of drugs that prove to be an ever-increasing concern for the dental profession. The 1941 ASA classification is used as a rule of thumb for assessing a person's pre-operative fitness status, however, it can be subjective, as migration can occur from one classification to the other. Alongside the Mallampati classification in airway assessment, the most current National Early Warning Score (NEWS) 2014 is now recommended as part of any airway assessment scheme. The LEMON Law in airway assessment is now being introduced as part of the sedation curriculum for both dental and medical professions. Other assessment measures have been used and are all 'work in progress', however, airway assessment and management is a necessity in any medical and dental training pathway.

The use of capnography as an auxiliary to the pulse oximeter, to monitor breathing and its risks and rewards, was also discussed. Capnography monitoring allows immediate management of any change in a patient's ventilation i.e. warns of hypoxaemia up to 240 seconds

earlier than use of pulse oximetry, and should be considered in the sedationist's armamentarium. However, due to economic constraints it is not so widely used...a possible challenge and change for the future?

David ended his talk by stressing that the dental and medical professional should be able to demonstrate their competencies in deployable airway rescue skills and how to audit their work as highlighted in the 2015 IACSD standards. The recognition and management of complications, as discussed in the 2015 standards, cannot be over-emphasised.

Sedation for the Diabetic Patient

Lucy Wray

This talk could not be more fitting with the theme of the symposium, as managing the diabetic patient will certainly be a future challenge. There has been a 65% increase in the last 10 years in patients being diagnosed with diabetes, with 1 million undiagnosed diabetics in 2016. Diabetes is described by a past President of IDF Professor Martin Slink, as a disease that is 'understood by a few and ignored by many'.



Lucy Wray

Lucy talked about the causes, treatment and monitoring of the diabetic patient with hypo- and hyper-glycaemia. She emphasised that at the sedation appointment the diabetic patient should check their pre-sedation blood glucose (BG) level, with a level of 7-10 mmol/l being preferable. Temporarily raised

blood glucose may well prevent a hypoglycaemic attack, when the patient has a decreased ability to appreciate the symptoms. During recovery the dentist must check that the patient is able to take their own BG and interpret their results, and to confirm that their escort is aware of the need for food, insulin and testing at appropriate times over the following 8 hours.

Blood glucose tests are limited, as they measure BG levels at a single point in time, however, there have been new developments in monitoring the diabetic patient. For Type 1 diabetics, insulin pumps and glucose sensors, stem cells and silicone chips have been tried, and for Type 2, hormone injections and enzyme tablets have been mentioned. In the latest generation of technology there has been talk of apps being created for monitoring the diabetic patient. NICE guidelines state that these should be available to all diabetic patients. It has, however, been estimated that by 2020, treatment of diabetes and its complications will consume 20% of the NHS budget. Unfortunately, after all this investment into the management of the diabetic patient, the benefit to quality of life for the diabetic patient remains undetermined.

Two case reports were then presented; one described the most memorable patient named Dennis who overcame his diabetic complications through the help of very supportive NHS staff and by self-motivation. The heartwarming take home message was 'Do a Dennis and monitor with knowledge'.

Conscious Sedation & Implant Dentistry

Vikram Kavi

Vikram stressed that conscious sedation could be a key adjunct to implant dentistry acting as a useful tool to provide the anxious patient with a route to the result they required. He emphasised the importance of involving the dental team in enhancing the experience of a patient undergoing dental implant treatment, and the need to standardise the ways in which the dental team can work when employing dental sedation.

Vikram presented 4 cases which took us through a patient journey from referral, consultation, patient assessment, consent signing, liaising, implant surgery with sedation, and final review. Sedation with midazolam was the key element



Vikram Kavi

linking all the cases by permitting successful care for patients undergoing implant procedures; results which would otherwise have been unachievable without its use. He emphasised the importance of implant coordinators to familiarise patients in building trust and rapport, as they are the patients' first point of contact in the dental environment. He also highlighted that implant dentistry and conscious sedation have a symbiotic relationship.

Modern dilemmas for the surgeon in implant dentistry with sedation involve the consent process, timing, dose of sedative agent, milling of prostheses and loading of the implants. Breaking this down, the consent process is one of the most important factors to consider. Implant treatment plans can change at any point in time, even after careful planning with use of CBCT and planning software. Also, due to the unpredictability of surgery, even in the most experienced hands obtaining valid informed consent is even more of a challenge in the sedated patient, where treatment outcomes can change during the surgical procedure. Shade selection and costs also offer their own challenges in the consent making process. The dilemma of who administers the sedation during the surgical procedure can be debated. Is there a need for a separate operator/sedationist? Can an experienced implantologist trained in conscious sedation be competent administering, treating and monitoring the sedated patient during such a complex procedure? Vikram highlighted the need for highly trained auxiliary staff to facilitate the surgeon whilst undertaking such complex implant protocols and procedures.

Vikram ended the talk by quoting Winston Churchill "Success is not final, failure is not fatal. It is the courage to continue that counts". An inspiring take-home message for us enthusiastic professionals!

Virtual Reality for Dental Phobia

Jennifer Hare & Bryan Kerr

Jennifer and Bryan gave us an awe-inspiring follow up from last year's seminar on virtual reality and its role within cognitive behavioural therapy (CBT) in treating dental phobia. They summarised the plethora of approaches used in the management of the anxious patient and stressed that sedation alone does not treat or cure the underlying anxiety of a patient. Jennifer proudly informed us that dental psychology services have been growing over the last 10 years since she started at Guy's Hospital, with ever-increasing numbers of referrals from primary and secondary care. She explained that CBT started in the late 1920s and was very goal-focused dealing primarily with anxiety and depression. CBT is described as a combination of two theoretically-driven therapeutic approaches

- Cognitive therapy (changing thoughts/beliefs)
- Behavioural therapy (changing behaviour) through graded exposure

Graded exposure is the most studied and effective therapy for specific phobia. It demonstrates that the worst event is not going to happen over a period of time until habituation occurs. Meta-analyses concluded that CBT reduced self-reported dental anxiety and increased the likelihood of attending a dentist at a 6-month follow up. Systematic reviews reported that CBT significantly reduced self-reported dental anxiety at 1-year follow-up compared to sedation interventions.

There are of course barriers to increasing CBT access, which include commissioning structures, cost-effectiveness and accessibility/mode of delivery. However, in the modern era, it would not be prudent to ignore the use of technology to increase exposure-based therapy in CBT to overcome these challenges. Computerised CBT has been tried, although problems have arisen in frame rate, resolution and costs. Brian went on to describe virtual reality exposure therapy (VRET), which provides a virtual environment, fully immersed 360-degree perspective using a head-monitoring display device. The benefits of this technique are that the patient is in control of the exposure process, cost/time with the therapist is reduced and more excitingly it could soon be available using mobile phone

technology. It has proven to be successful in those with phobias about heights, flying and spiders. The evidence for dental phobias is nearly there, with Jennifer and Brian presenting positive results of their study; most recently from earlier that week! We were then all invited to have a demonstration employing the virtual reality video during our lunch break.

The second prize was won by **Geraldine McDermott** for: Quality Improvement Project Looking at Paediatric Patient Safety in a Community Setting

Dental Student to **Daniel Watson** for: An audit to assess the Escort's knowledge of patient safety following intravenous sedation at Manchester Dental Hospital.

SAAD Prize Presentations & Announcements

The following Prizes were awarded by Francis Collier, huge congratulations to all the winners and to those that entered.

Best Poster

The first prize was won by **Thea Dickens** for: An audit to assess outcome of inhalation sedation appointments and an analysis of appointments with poor outcomes within Locala Dental Care.



Francis Collier awarding Geraldine McDermott her prize



Daniel Watson accepting his prize from Francis Collier



Megan Chard & Geraldine McDermott

Drummond Jackson Essay Prize to **Ashish Patel** for: The Gag Reflex: Aetiology and Management.



Ashish Patel accepting his prize from Francis Collier



Francis Collier awarding Thea Dickens her prize

Essay Prizes

The DCP Essay prize was won by **Stephanie Reilly** for: Audit to establish that escorts of sedation patients are receiving verbal instructions or written information leaflets prior to the sedation appointment.

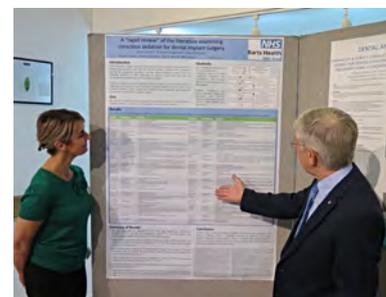
The Annual General Meeting then commenced during the lunch break. *(Report on page 7).*



Thea Dickens and Poster



Stephanie Reilly accepting her essay prize from Francis Collier



Sadie Hughes & David Craig looking at the poster presentations

Save the date....

Saturday 28th September 2019

SAAD Annual Symposium & AGM

**The Bridgewater Hall
Manchester**

RAF100 - Dental Sedation in the Royal Air Force

Marguerite Reith

In the year of the centenary celebrations of the Royal Air Force (RAF) Marguerite started off the afternoon session by giving us a fascinating insight into dentistry and dental sedation in the RAF. Captivating pictures of her career to date, along with views of army camp-sites and fighter planes were shown to the audience.



Marguerite Reith

The Royal Air Force Dental Branch was formed on 1st July 1930 and it is now in its 90th year! She highlighted what sedation when first introduced in the RAF was like, initially uncontrolled, and including 'Gas'-scale D2 dental anaesthetic equipment and Brietal, and stressed the basic and sometimes hazardous working conditions experienced at the time!

Setting up sedation services proved to be a challenge in the RAF, as it was a task to educate referring dentists in the range of services that were available, and many were sceptical whether the service would prove to work.

Sedation training in the RAF early on involved 1 day of training in Relative Analgesia, and 2 days of training in intravenous sedation, with subsequent mentoring. More formalised training, which involved the sedation diploma, was set up in 2004/05. Competition for a diploma place was high, since there was provision for only 1 diploma student. Marguerite, however, was fortunate enough to be one of 2 diploma students to be offered a diploma place whilst in the RAF, and they both conducted diploma projects relevant to their proposed military service and training. There was also in-house training of 'second-appropriate' dental nurses.

Positives of sedation in the military included: caring for a fit and healthy population, accessible patients, low failure to attend rates and less time

pressure when treating patients. Challenges involved: different mindsets of senior officers, turbulence, provision of suitable escorts and more importantly, the psychological consequences of post-traumatic stress disorders. The choice of sedation technique and long term management of these patients was also be reflected upon. Overall, Marguerite summarised her experiences during her time as a dentist in the RAF as a positive. She highlighted the importance of mentorship, persistence, attention to detail, and to find the positives in everything that you do, and most importantly always to have fun!

A Way With Words - Patient Information in Practice

Kate Rivett

An unexpected surprise alerted the audience to Kate's talk since only those fluent in French could understand the opening lines! The inexpert few were thus left confused yet appreciative of the message that Kate successfully portrayed, the importance of effective communication.



Kate Rivett

Kate's expertise helped to create the patient information leaflets with the IACSD, which are readily available within the IACSD document. Kate indicated how difficult it is for dental professionals to address members of the public, as the elite language of dental terminology, assumed knowledge for us dental professionals, is usually foreign to the general public. The unfamiliarity of the elite language used by dental and medical professionals could be considered an attempt to deliberately confuse a patient, leaving them feeling vulnerable and/or confused. If trying to obtain valid consent this would be unacceptable, as the patient has clearly not understood the information given to them. Provision of written information is central to the consent process. It should include clear and comprehensive age-appropriate information regarding the proposed treatment. The overriding aim of IACSD was to provide clear patient

information via age groups, to obtain valid consent, that was peer reviewed. Kate stressed the importance of tailored information for patients requiring conscious sedation, even those with poor literacy skills. Written information to the patient and their escort is an essential requirement and examples of these are available to download from the IACSD report.

Self-help Cognitive Behavioural Therapy for Dentally Anxious Children

Fiona Noble & Jen Kirby

Fiona and Jen, who work in the Paediatric Department at the University of Sheffield, aimed to outline various approaches to managing and assessing child dental anxiety, the use of CBT and the use of the Sheffield self-help CBT guides and the evidence relating to these. Over 60% of all young people in the UK report moderate or extreme dental anxiety, and this has obvious impact on the child, dentist and the dental services. Conscious sedation or general anaesthesia have clear benefits in the management of dental anxiety, however, their disadvantages include cost, and reliance on pharmacological methods, its employment can be a high-risk procedure and usually represents the 'management' rather than 'treatment' of any dental anxiety.



Jen Kirby & Fiona Noble

Psychological approaches via CBT help to identify the problem and find positive management strategies. There has been sufficient evidence of the effectiveness of this resource in reducing child dental anxiety. The department in Sheffield has designed a self-help CBT guide which has been implemented in the teaching of dental students. Subsequently this will be available to all dentists with the aim of offering another method of communication for a dentist's armamentarium in managing patient anxiety. The self-help guide is available to download at www.lltlf.com/dental

The Bradford CDS Anxiety Management Pathway: An Evolution

Nadiya Suida & Edwina D'Souza

Nadiya and Edwina aimed to explain the background to Bradford Dental Care NHS Foundation Trust's sedation services. They described the development of their current anxiety management pathway (see below) and the alternative options for anxiety management, together with plans for future expansion and development of their service. They opened our eyes to the surprisingly scenic, (and not-so-scenic!) areas of Bradford and highlighted the challenges they faced in treating the general population. This included the socially deprived areas, inequalities in health, and language barriers, all leading to high levels of dental disease and dental anxiety. The community dental service in Bradford where medically complex patients are treated, is an accredited training centre for inhalation sedation, where inhalation and intravenous sedation services are available and staff are trained in alternative techniques (behaviour management, CBT, hypnosis and acupuncture).

The development of their anxiety management pathway started in 2003 when the first IV sedation service was set up in Bradford and aimed to

accommodate challenging patients, improve patient quality of life as well as reducing costs, and which has been recognised by an "Outstanding" commendation from CQC in 2018. A great achievement indeed!



Nadia Suida & Edwina D'Souza

Nadiya and Edwina then presented two case studies showing how successful their pathway has been in treating medically complex patients. They found patient compliance to be excellent with supportive staff, avoiding the risk and stress of GA, improved patient confidence in the chair and major reduction in treatment costs! The future of Bradford dental community services is bright. This includes the development of a patient pathway including IV sedation for younger patients, sedation for special care patients, developing staff to increase skill mix and incorporating new and innovative techniques for anxiety management. We wish them all the best.

The SAAD Board of Trustees would like to thank Francis Collier for his work in preparing this year's SAAD Symposium

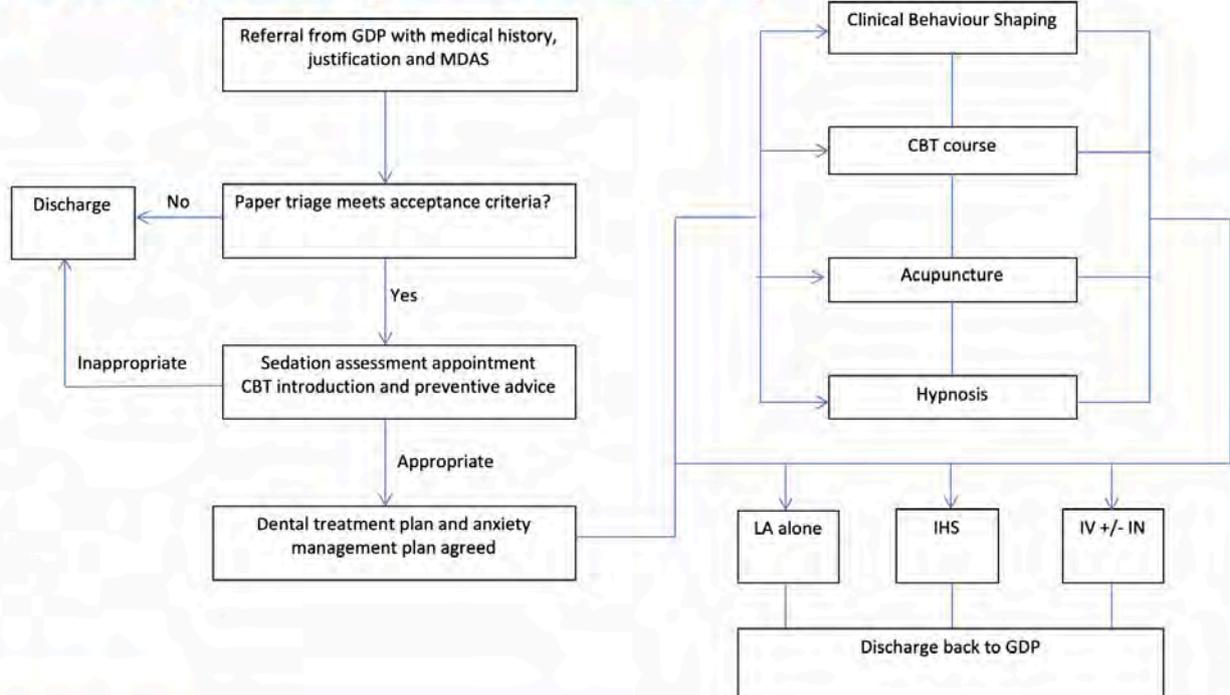
Save the date....

**Saturday
28th September 2019**

SAAD Annual Symposium & AGM

**The Bridgewater Hall,
Manchester**

Anxiety Management Pathway



SAAD AGM 2018

Saturday 22 September

Manni Deol
SAAD Honorary Secretary



Manni Deol
SAAD Honorary Secretary

The AGM was held on Saturday 22nd September 2018 at the Royal Society of Medicine, London, following an interesting morning of lectures at SAAD's annual symposium. The AGM related papers were emailed to the membership prior to the meeting. 52 members of SAAD attended the meeting, including nine trustees. 236 delegates attended the symposium, in comparison to 197 last year.

SAAD's President Francis Collier opened the Annual General Meeting with the minutes of the last meeting being approved.

In the President's report, Dr Collier reflected that the celebratory atmosphere of the SAAD Diamond Jubilee has continued into 2018 with the award of an MBE to Dr David Craig (SAAD Course Director and past President of SAAD). Dr Milli Doshi, a SAAD member was also similarly honoured. Both were congratulated. Nigel Robb has been appointed Professor of Restorative Dentistry at Griffith University on the Gold Coast in Australia. Dr Collier extended good wishes to Professor Robb and informed the delegates that Professor Robb would still be closely associated with SAAD.

The numbers of dentists and dental nurses undertaking the SAAD Assessed Sedationist and SAAD assessed Sedation Nurse training pathways continue to rise.



Steve Jones, Sadie Hughes & Francis Collier
at the AGM

A second volume of The History of SAAD, from 2000 – 2017 (Diamond Jubilee of SAAD) has been completed and is in the process of illustration, hopefully being available by the end of 2018. Dr Collier extended thanks to the writer Stephanie Cross and all the SAAD Board members, past and present that had been involved in the production of the book.

Again, SAAD is supporting a PhD project as part of its charitable aims and status. The project is titled The Short and Longterm Effects of the Use of Nitrous Oxide and Oxygen Compared with GA on Childrens' Future Level of Dental Anxiety and the Acceptance of Dental Treatment. The project will be carried out over 3 years with regular reports on progression, by scholars in Leeds.

Communication with the society is through the Annual SAAD Digest, two newsletters via email and the ever-expanding website. Facebook, Twitter and Instagram are the social media forums where SAAD can be found. Dr Collier thanked the SAAD board, Editorial Board, Training Board and Teaching Faculty for their ongoing efforts throughout the year. The President communicated his gratification on the involvement and sense of responsibility of younger people within the society noting their enthusiasm and capabilities. Dr Collier sent his personal thanks to Fiona Trimmingham for her ongoing support. Speaking as President for the last time Dr Collier wished the society well and thanked SAAD members for their support in the activities of the society. The President's report was accepted.

Dr Sadie Hughes, Honorary Secretary SAAD thanked members for attending the AGM. She noted SAAD currently has 1500 members, comprising 1376 dentist and 124 DCPs. Dr Hughes reported that the society is still receiving a healthy number of enquiries relating to sedation practice and will be adding a FAQs section to the website. The subject of enquiries included inhalation sedation, safe exposure levels to nitrous oxide for staff, inhalation sedation in pregnancy,

signage for cylinders, case load of sedation practice in order to maintain competency and in relation to CPD.

Reporting on the Board structure, this year there was one vacancy and two nominees, Sadie Hughes and Vikram Kavi. Vikram Kavi had presented a lecture earlier in the day. Sadie Hughes was the SAAD honorary secretary stepping down from this role after the AGM. A short biography for each candidate was made available on the SAAD website prior to the meeting. An election was held using the electronic voting system and thankfully it worked more successfully than the previous year. Sadie Hughes was elected as the new board member. Sadie thanked the Board of trustees and Fiona Trimmingham, before concluding her role as Honorary Secretary. The Secretary's report was accepted.

Dr Stephen Jones, SAAD Treasurer, presented the accounts for the period to 31/12/2017 for acceptance. The Treasurer noted that this was a healthy set of accounts, and gave credit to the dedicated team behind the scenes, allowing financial robustness to be possible.

Educational courses continued to be the main source of income, for this the Treasurer extended his gratitude to the Course Director, David Craig, Assistant Course Director, Carole Boyle and all the Faculty. The Treasurer thanked the Communications Secretary, Paul Howlett and Executive Secretary, Fiona Trimmingham for keeping the membership lists accurate and up to date, enabling a healthy membership. During 2017, income and expenditure had increased but there was still a healthy surplus of over £80,000. Investments equal over £106,000 and SAAD net worth at the end of 2017 was £670,000.

The Treasurer reported SAAD has been supporting a three-year PhD research project and other sedation related

activity. Four inhalation machines have been purchased to support the Inhalation Sedation Loan Scheme.

Dr Jones praised Tony Beale, our accountant with Silver Levene, as helpful, having common sense and proving easy to work with. SAAD has moved away from Excel spreadsheets for financial recordings and analysis, and is now using a financial software package. The Treasurer thanked Fiona Trimmingham for compiling a list of all monies received electronically. In concluding the Treasurer's report, he informed delegates that the financial position was satisfactory and that the role of treasurer was to pass to Kellie Downie, the current Assistant Treasurer. Kellie has supported the Treasurer's role for 12 months to help aid a seamless transition. Questions were invited and the Treasurer's report was accepted.

A vote of support was given to continue to use Silver Levene as the Society's accountants.

Dr Stephen Jones was ratified as the new President. He had been Honorary Treasurer and President Elect for the last year. The ceremony was completed by passing on the President's Medallion.

The new President, Dr Jones, awarded Dr Francis Collier a Past President's medal and expressed his gratitude for leading the organisation as President.

Dr Jones, addressed the audience, thanking the Society for bestowing the honour of Presidency upon him and paying respect to past Presidents. He is looking forward to serving and working with the team and related organisations for the benefit of SAAD and patients.

Kellie Downie was accepted as Honorary Treasurer, as was Manni Deol into the role of Honorary Secretary.

There was no other business and the meeting was closed by the President thanking all attendees. The next Annual General Meeting will be held on Saturday 28th September 2019 and members are warmly invited to attend.



Francis Collier awarding the SAAD President's Medallion to Steve Jones



Steve Jones and Francis Collier



SAAD's new president
Steve Jones



SAAD Essay Prizes

SAAD awards three annual prizes for essays on any subject related to Conscious Sedation, Anxiety Control, General Anaesthesia or Analgesia in dentistry.

Drummond-Jackson Prize
£500

Dental Student Prize
£300

DGP Prize
£300

Each year the prizes are presented at the SAAD Symposium to which the prize winning authors will receive a complimentary registration. The prize winning essays may be published in the SAAD Digest, or on the SAAD website.

Submission deadline
31st March 2019
Further details are at
www.saad.org.uk

Keeping Up to Date with Social Media Facebook, Twitter & Instagram

SAAD has a Facebook page, Twitter feed
and now an Instagram page!



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Letter from the Treasurer

Kellie Downie
SAAD Honorary Treasurer



Kellie Downie
SAAD Honorary Treasurer

My experience with SAAD began in 2013 when I compiled a business case application for the SAAD inhalation sedation equipment loan scheme, and here I am now as Honorary Treasurer.

Following successful integration of inhalation sedation in my own dental practice, Dr Francis Collier our immediate past President contacted me, requesting a short presentation regarding the loan scheme and my experience. From there I have not looked back on my involvement with SAAD, the trustees, its members and its activities.

I felt the need to continue my involvement with this group of professionals who all passionately care about ensuring the provision of best standards and safety of treatment for the public. I became a trustee the same year and joined my first board meetings. Like a lot of these experiences initially I listened and learned, I honestly was in admiration of the more experienced members who passionately advocate their opinions and encourage others to do so also. Because if we don't who will do this for us? My involvement with the society has been up until now a light labour of love, I count the trustees as friends and colleagues; as a younger member of the Board I have always felt encouraged to voice my own opinion. I greatly respect my colleagues and what they have done for SAAD, its legacy, its members and their patients. The work that is done to develop this charity and for the betterment of sedation can never be recognised enough. Those in Honorary roles and trustees give their time freely but never begrudgingly as they know the importance of SAAD's involvement in sedation in the UK

So now..I have big shoes to fillReally big shoesNo honestly ... not only does our previous Honorary Treasurer have 11 successful financial years under his belt, he also uses his boots to save members of the public from the mountain sides in Cumbria!

It has been a huge honour to learn from, and work alongside Steve, who, I have no doubt in his new role as SAAD President will be a resounding success. SAAD is in a healthy financial position following Steve's reign as Treasurer and my plan is to continue in his light.

At this year's AGM in September the Annual report and Unaudited Financial Accounts were unanimously accepted and have since been filed with the HMRC.

SAAD is an ever developing charity which more recently has meant moving away from recording financial information on excel spreadsheets, to utilising accountancy software. This has streamlined the Treasurer's work and will ensure that the Society is ready for HMRC's 'real time' accounting. SAAD continues to utilise the services of Silver Levene accountancy services as it has for many years. Our accountant Tony Beale has encouraged us, provided there is a reserve of funds required to run the charities events in the event of an emergency, to free some funds to support our activities. SAAD has therefore set out plans to purchase capital equipment to be utilised on its courses for dentists and nurses therefore maintaining and exceeding the usual exceptional standards. We have also invested in two further inhalation sedation machines for the loan scheme to utilise improving access to this scheme for our members.

Recently the SAAD Board voted to support a PhD study entitled 'The short and long term effects of use of nitrous oxide/oxygen sedation as compared

with GA on children's future level of dental anxiety and acceptance of dental treatment'. This is a three year investment in the study and the results will be presented at a future annual symposium. The proposal for this PhD study was submitted by Dr Jinous Tahmassebi of Leeds Dental Institute.

SAAD has also funded the update of the cognitive behavioural toolkit which on completing will be available at a discounted rate to our membership. Progress reports from the team involved with the update will be submitted for the SAAD Board meetings.

Next year our annual symposium will be presented and held at the Bridgewater Hall in Manchester, a change in location encouraged by our membership, thus hopefully allowing more access to our events.

I would like to thank our immediate past president Dr Francis Collier without whom it would be doubtful I would have had so much continued involvement in sedation. Thank you and congratulations to Dr Stephen Jones our new president in the period of time I have worked with him. To Dr David Craig MBE and Dr Carole Boyle and all of the teaching faculty whose work continues to be the lifeline of SAAD and its development and activities. Finally thank you to Fiona Trimmingham for your, always expert advice.

SAAD Membership

Membership of SAAD is open to any registered dental or medical practitioner or DCP whether based in the UK or abroad.

Undergraduate student membership of SAAD is free for dental and medical undergraduates registered at a university in the UK or Ireland.

Annual subscription rates:

- £40 - UK dental and medical professionals
- £25 - UK dental care professionals
- £43 - non UK resident dental and medical professionals
- £28 - non UK resident dental care professionals

Report from the DSTG Symposium



'Intravenous Sedation for the Adolescent Treatment, Teaching and Research - What are the Challenges?'

15 May 2018

International Centre for Life, Newcastle

Kara Scally & Leah Jameson

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The 2018 DSTG Symposium was held at the International Centre for Life, a science village in the heart of Newcastle upon Tyne, on an unseasonably warm day in the North East of England. The aim of the symposium was to provide an overview of treatment, teaching and research issues relating to intravenous sedation for the adolescent patient.

The symposium was organised and introduced by Dr Kathy Wilson, who works as an Associate Specialist/ Clinical lecturer in sedation and is involved in undergraduate/ postgraduate teaching at Newcastle upon Tyne School of Dental Sciences. She also participates in research, national sedation working groups and lectures both nationally and internationally in conscious sedation.

Dr Wilson welcomed delegates and introduced the topic of Intravenous Sedation in the Adolescent patient, which is an aspect of conscious sedation that has minimal robust evidence and guidance regarding appropriate patient management. To set the scene and allow delegates to ponder the themes of the day, it was apt that a video of Harry Enfield's Kevin transitioning to the 'classic' teenager was played!

Adolescence - the joy of the nightmare

Prof. Maurice Place
Professor of Child and Family Psychiatry, Northumbria University

The first speaker of the day was Prof. Maurice Place, who has worked for 28 years as a Consultant child and adolescent psychiatrist, with research interests including dental phobia in children. His engaging and

enthusiastic presentation discussed the significant period of emotional upheaval and turmoil associated with adolescence, which is often characterised by variable moods and impulsive behaviour. The audience was educated that the teenage entity, despite preconceptions, actually has an increased capacity for rational thought, faster responses, alertness and ability to think abstractly. All were warned that negotiation with a teenager will often be futile!

The great variability of responses that a teenager can demonstrate to stress and fear mean that practitioners managing dental care are often presented with unique challenges. He discussed the potential link of recent research into epigenetics that may be associated with adolescent anxiety and fearfulness. He also explained the multi-factorial elements that can influence dental anxiety in teenagers, including the parent-teenager relationship, dentist-patient relationship, visual, auditory and olfactory cues and how these may be modified to gain patient trust. It was suggested that behaviour modification and CBT may erode fear, challenge belief systems and can result in a physical change in the body's response to stress and fear.

Consent and Medico-legal Issues - who is in charge?

Mike Hill
Barrister, Trinity Chambers
Newcastle upon Tyne

The next speaker, Mike Hill practised dentistry for 15 years before coming to the Bar in 2004 and now currently works solely in clinical negligence. His clear and punchy presentation explored the myths and implications of

the Montgomery case, 2015 on the consent process. He emphasised that to fully understand the implications of Montgomery a thorough knowledge of Bolam is essential. He reassured delegates that Montgomery provides the legal test that the GDC Maintaining Standards principles had already introduced to the dental profession in 1999. He reinforced the importance of knowing our patients, their expectations and the significance of risk to each individual. With regard to the consent process in adolescents and minors he discussed Gillick competence and its implications for the dental practitioner.

From his work in clinical negligence he reinforced the importance of the two stage consent process and that patients must be given time to consider treatment options. In conscious sedation practitioners should always try to ensure separate assessment appointments are arranged prior to treatment. He empowered delegates to be bold in their discussion of risks, to avoid negating warnings and to be cautious placing numerical value on risk.

Research Issues with the Adolescent Patient - working alongside young people to plan dental research

Ashleigh Stamp
Academic Clinical Fellow
Newcastle School of Dental Sciences

Greig Taylor
NIHR Academic Clinical Fellow/
Specialist Trainee in Paediatric Dentistry
Newcastle School of Dental Sciences

The dynamic duo of Ashleigh Stamp and Greig Taylor took to the stand next to discuss dental research involving young

people. They had both involved adolescents as research 'partners' rather than 'participants', to ensure that their studies were constructed with methods more acceptable to young people. Ashleigh's PhD project focused on the provision of conscious sedation in adolescents requiring canine exposures (SUMMIT) and Greig's was on patient pathways for first permanent molars with poor prognosis (FPMpp). They reflected on their experiences of working alongside adolescents in research design through the North East England Young Patients Advisory Group (YPAG).

This collaborative approach reinforced the importance of involving adolescents and that their honest feedback can improve the quality of research design, with a patient centred approach. Adolescents have experienced the least improvement in health care of any age group and involving a YPAG may enable a unique opportunity to address potential barriers. In keeping with the theme of the symposium the importance of listening to the adolescent patients' voice is paramount, not only for research, but also for the provision of direct dental care.

Running an Intravenous Sedation Service for Adolescents - what are the challenges?

Carly Dixon
Clinical Lecturer in Paediatric Dentistry/
Honorary Paediatric Dentistry StR
University of Manchester

Carly Dixon, who graduated from Newcastle University in 2012, introduced her presentation aims as the advantages and disadvantages of using propofol sedation for adolescents and the running of an adolescent intravenous sedation service at Manchester Dental Hospital. She discussed the patient need for this service and demographics of the patient base. The practicalities of setting up a sedation service were detailed, with emphasis on the equipment and team skill set required. She reflected that during a 12 month period the patient treatment success rate with propofol sedation was 93% and no significant patient complications had been reported; 98% of patients would recommend the

service. The challenges of running this service were highlighted and aspirations for future service development were alluded to. To conclude she discussed the importance of the patient journey and the delivery of an adolescent specific service.

Lunch was held in the mezzanine area of the Centre for Life and provided the opportunity for delegates to network with colleagues and browse the excellent collection of posters.

What can Sinatra Teach us about Coaching and Mentoring?

Alasdair Miller
Non Executive Chairman Lloyd & White
Group Ltd
Associate with Entrusted Consulting Ltd
and Synergy Global Inc
Faculty Member of HEE South

Alasdair Miller commenced the afternoon session of the Symposium with his interesting presentation on how mentoring and coaching can be used not only within learning/teaching of dental sedation, but in other areas of your professional and personal life. Alasdair has a long association with teaching and mentoring from being a VT trainer in the mid 1980s to Postgraduate Dental Dean of South West England. He has a lifelong passion for promoting learning and development and in the last 10 years has trained as an executive coach.

Alasdair described the role of mentorship and coaching and explained coaching is helping an individual to do things differently and raise their own awareness. A mentor focuses in being present in the moment and offering your perspectives to guide a student. Mentoring and coaching can be incorporated into any stage of your career, but understanding the importance of an individual's motivation and mind-set will ensure the development of a personalised 'learning contract'. He highlighted the importance of agreeing with students their achievement aims in advance of coaching/mentoring was particularly beneficial. In the words of Sinatra he helped the audience remember that in reality working with people one may coach (Do) and mentor (Be), coach (Do), mentor (Be)

during a given session. Do-Be-Do-Be-Do.....!!

From Transition to Beyond

Brooke Zaidman
StR in Special Care Dentistry, Somerset
Partnership NHS Trust

To continue the afternoon session a series of free papers were presented by delegates. Brooke Zaidman, who graduated from the University of Birmingham in 2013 and is currently in her second year of StR training in Special Care Dentistry in Dorset, presented a patient case study. Her case study of a 16 year old patient with moderate learning disability and autism demonstrated the potential challenges of treating adolescent patients with dental anxiety. She discussed the use of oral and intravenous sedation with midazolam as a modality that can be considered. Her presentation reinforced the importance of careful treatment planning for patients transitioning between paediatric and adult dental care services and she discussed four different transition models of care. This case study highlighted the importance of seamless patient centred transition.

Balanced Sedation in Adolescents: An Anaesthetist's View

Rex Yetton
Anaesthetist/Dental Sedationist

Rex Yetton is a Fellow of the Royal College of Anaesthetists and although he has now retired from hospital work, he continues to provide dental sedation at several practices across Sussex.

Rex discussed the development of conscious sedation in dentistry since the Poswillo Report and how drug combinations used by anaesthetists can create a 'balanced sedation'. He illustrated the site of action and basic neurophysiology to explain his preferred combination of midazolam and opioids to provide conscious sedation for his patients. He discussed that in adolescent patients midazolam is metabolised more slowly than in adults and that caution should be taken with doses administered. He also advocated that in his experience adolescents often respond well to opioids.

A Cross Sectional Analysis of Escort Knowledge

Kara Scally
Specialist in Special Care Dentistry,
County Durham & Darlington
Foundation Trust

Kara Scally presented this project on behalf of Nicola Parten, a General Professional Trainee at Newcastle School of Dental Sciences. The study reported the results of a two-cycle questionnaire on the level of escort knowledge of their duties to patients undergoing dental IV sedation. Following the first cycle of questionnaires a poster was introduced in the waiting room, displaying key information for escorts. This intervention demonstrated improved escort knowledge in the second cycle of questionnaires; 91% of escorts were aware that the patient should be cared for during the 24 hour period post treatment, compared to 76% in the first cycle. There was also a greater awareness by escorts regarding what activities patients may undertake following treatment under sedation. Although there were improvements in escort knowledge, in some areas there was still limited awareness, indicating the need for continued improvement in information dissemination.

DSTG Guide for Clinical Supervisors

Bryan Kerr
Consultant in Department Sedation &
Special Care Dentistry
Guy's Hospital, London

To conclude the day, the final speaker was the current Honorary Secretary of DSTG, Bryan Kerr. He is a consultant at Guy's Hospital, London and provides training in conscious sedation at undergraduate/postgraduate level at KCL and is involved in the SAAD teaching faculty. Bryan gave delegates a preview of the new 'DSTG Guide for Clinical Supervisors' which is soon to be published. With DSTG's extensive experience in sedation training and educational background a working group was formed to advise on best practice in teaching the skills and knowledge required to provide clinical supervision of sedation learners. This

guidance is specifically for dentists offering approved local clinical supervision for IACSD accredited sedation training courses. Bryan outlined the current standards and guidelines in relation to sedation teaching, the national framework for educators and gave an overview of work based assessments and log books. He reminded us of the increasingly high expectations of students in relation to training and that the environment and providers of training must meet these standards.

The Symposium was a great success with thought provoking and inspiring presentations covering a broad range of topics relevant to the provision of IV sedation for the adolescent patient. It reflected the strong interest amongst sedation practitioners to further develop care for this patient cohort. A special thanks must be given to all the presenters and organisers of this very successful day and we look forward to Paul Brady hosting the next Symposium in Cork, Ireland.

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**DSTG Annual
Symposium**

**14 May 2019
Sedation
Continuum
Cork, Ireland**

**Registration is
opening soon**

www.DSTGsymposium.co.uk

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News from the International Federation of Dental Anaesthesiology Societies (IFDAS)

IFDAS 2018 5 -7th October 2018, Nara Japan

Nigel Robb

The International Federation of Dental Anesthesiology societies Fifteenth International Dental Congress on Anesthesia, Sedation and Pain Control was held in Nara Kasugano International Forum Iraka, Nara, Japan on the 5th to 7th October 2018. This was the third time that the Japanese Dental Society of Anaesthesia had hosted the meeting. The previous events were in Tokyo in 1982 and Yokohama in 2006. The meeting was also shared with the 11th Federation of Asian Dental Anesthesiology Societies meeting



The Nara Kasugano International Forum was constructed in 1987 in commemoration of the 100th anniversary of the establishment of Nara Prefecture. It is located in the centre of Nara National Park, which is famous for its beauty and 1,200 tame deer.

Nara was the capital of Japan from 710 to 784, and has many historical shrines and temples containing national treasures. Famous tourist spots such as Kofukuji Temple, Todaiji Temple, Kasuga Shrine are within walking distance from the hall.



The Hall has an impressive Noh theatre. Noh, derived from the Sino-Japanese word for "skill" or "talent", is a major form of classical Japanese musical drama that has been performed since the 14th century. It is the oldest major theatre art that is still regularly performed today. One of the cultural highlights of the conference was the Saturday afternoon performance of one of the Noh dramas.



The theme of the scientific meeting was "Dental Anesthesiology: Devotion to Patients' Welfare". There were over 1 000 individuals from all over the world registered for the meeting which had 19 lectures, 9 symposia and 4 hands on seminars. The delegates came from all over the world – Northern and Southern Hemispheres, East and West. The common ground was that all had an interest in Pain and Anxiety Control in Dentistry.

As with many conferences, much of the networking took place outside the formal sessions. There were interesting discussions around the scope of practice for dentists across the world. The range goes from Japan and the USA where there are still training programmes leading to certification in General Anaesthesia and one end of the spectrum to Russia where dentists are not allowed to prescribe or administer any anxiolytic or sedative medications.

The range of local anaesthetics are different across the world, both in terms of the availability of the individual local anaesthetic agents (for example Lidocaine is not available in dental cartridges in Russia), the vasoconstrictors (felypressin containing local anaesthetics are not available in the USA) and the cartridge size.

Patient safety is a recurring issue around the world. Many countries are looking at introducing guidance, if it is not already present. There is scope for IFDAS to be a conduit to allow those countries which are most advanced in terms of guidance development to share experience with those with less well established guidance. There is also the potential for IFDAS to play a role in advancing the cause dentistry by helping to reduce the variation in scope of practice across nations.



The programme was varied and provided sessions for a wide spectrum of interests.

The next meeting will be in Moscow in September 2021. Further details will be available nearer the date.



How to contact SAAD

Course enquiries...

Course registration, payments, deferrals & cancellations.
Hygienist & therapist logbooks
SAS and SASN schemes

Fiona Trimmingham
fiona@saad.org.uk
01302 846 149

Course content and course weekend logistics

Toni Richman
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07583 039 309 (text)

General enquiries...

info@saad.org.uk

Executive Secretary & Website...

fiona@saad.org.uk



SAAD Notice Board



SAAD Training

SAAD has been running courses for over forty years. The courses are hugely successful due to the combination of skills and knowledge of a faculty of medical and dental disciplines. Above all SAAD teaches safe and sensible procedures based on science independent of the emotional politics so often associated with these subjects. SAAD courses are practical, rewarding, and fun!

- * *National Course in Conscious Sedation for Dentists, Dental Nurses, Hygienists and Therapists*
- * *SAAD Assessed Sedationist (SAS) scheme*
- * *SAAD Assessed Sedation Nurse (SASN) scheme*
- * *SAAD Assessed Sedation Therapist (SAST) scheme*

Course dates:

2 & 3 March 2019
15 & 16 June 2019
2 & 3 November 2019

[Online registration](#)

Subscriptions

For many members their subscription will be due for renewal in January. It is possible to renew online by setting up a direct debit. This is the most cost effective method for the Society to collect subscriptions. To renew please go to www.saad.org.uk and log on using your email address as your username.

Online CPD

There are 4 hours of sedation CPD available online from the SAAD website. This is complimentary to members and costs £10 for non members. Simply log on as a member, set yourself a username and password for the CPD section, answer the multiple choice questions relating to the latest volume of the Digest and download your certificate!

Research Grants

Grants are available to aid research in pain and anxiety control in dentistry. [Further details.](#)

Online Advert Board

SAAD members are able to post adverts relating to sedation on the SAAD website free of charge. Adverts for situations vacant, equipment etc will be acceptable. Either log on and place the advert or contact [Fiona](#).

IHS Machine Loan Scheme

A scheme for practitioners to trial inhalational sedation in the practice setting is facilitated by SAAD. A six-month loan (at no charge) of an inhalational sedation machine is available to members who have attended a recent SAAD Course.

There will be the option to purchase at a discounted rate at the end of the trial. [Application form.](#)

SAAD Essay Prizes

SAAD offers three essay prizes. The closing date for submissions is 31 March 2019. [Further details](#) are at www.saad.org.uk.

Dental Students - £300

DCPs - £300

Drummond-Jackson Prize - £500

2019					Further events are listed on the SAAD website
January					
	9-11	AAGBI	Winter Scientific Meeting	London	http://www.wsmlondon.org
February					
	15-16	ADSA	Las Vegas Meetings	Las Vegas	http://www.adsahome.org/las-vegas-ga
March					
	2-3	SAAD	National Course in Conscious Sedation for Dentistry	London	http://www.saad.org.uk/index.php/coursesbyrole/view-all-courses
	18	SEA (UK)	Annual Scientific Meeting	Edinburgh	https://www.seauk.org
	23	SAAD	Study Day - Paediatric Dentistry	London	http://www.saad.org.uk/index.php/coursesbyrole/view-all-courses
April					
	5 - 6	ASDA	Annual session	Santa Fe	http://www.adsahome.org/annual-session
	11-12	BSDH	BSDH Spring Conference	York	http://www.bsdh.org
May					
	1-3	British Pain Society	ASM	London	https://www.britishpainsociety.org/mediacentre/events/annual-scientific-meeting-1-3-may-2019-london/
	14	DSTG	DSTG Annual Symposium	Cork	http://www.DSTGsymposium.co.uk
June					
	1-3	ESA	Euroanaesthesia 2019	Vienna	https://euroanaesthesia2019.org
	15-16	SAAD	National Course in Conscious Sedation for Dentistry	London	http://www.saad.org.uk/index.php/coursesbyrole/view-all-courses
	28	University of Portsmouth	Conscious Sedation Update	Portsmouth	https://www.port.ac.uk/study/courses/conscious-sedation-update
July					
	3-5	GAT	Trainee Conference	Telford	http://www.gatasm.org/
September					
	11-13	AAGBI	Annual Congress	Glasgow	http://www.annualcongress.org
	11-14	ESRA	38th Annual Congress	Bilbao	https://esra-congress.com/
	19 -21	ESPA/IAPA	Congress	Rotterdam	http://www.euroespa.com/congress/2019-rotterdam
	19 -21	ERC	Congress	Ljubljana	http://www.resuscitation2019.eu/en/home/
	28	SAAD	SAAD Annual Symposium	Manchester	http://www.saad.org.uk
October					
	19-23	ASA	Annual Congress	Orlando	https://www.asahq.org/annualmeeting
November					
	2-3	SAAD	National Course in Conscious Sedation for Dentistry	London	http://www.saad.org.uk/index.php/coursesbyrole/view-all-courses

If you would like to receive email notifications of new, and upcoming events please [join the mailing list](#).

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