



Mount Munroe

**Journal of Sheffield University's
School of Clinical Dentistry**
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Editorial

It's been a really tough year for everyone involved in dentistry – students, dentists, dental nurses, dental technicians... the list goes on. Hopefully we're starting to see some light at the end of the tunnel, but there's no denying there are still difficulties with all of the restrictions still in place for dentistry. I didn't think when writing my editorial last year that the 2021 edition of Mouthpiece would also be dominated by COVID, but here we are.



This year's edition contains the usual unit reports, many of which focus on the sterling efforts of staff and students to continue education and research over the last year. We also have some student insight into life during COVID from one of our H&T students, Dominika Jaslikowska, and a report on using social media to connect with other students from Megan McLeod. Raina Palit then covers both of these topics in one article!

Unfortunately, the BDS students haven't been able to undertake a 'normal' elective project this year due to the travel restrictions, so each student researched a particular topic. Ellie Hill decided she loved endodontics so much (who doesn't!) that she undertook her project on obturation techniques. She wrote this up for Mouthpiece, which you can find on page 19. I also wrote an article about my experiences as clinical lead during the COVID pandemic and the ways we have adapted to maintain a service to our patients. We also have the usual SUDSS roundup from the previous president, James Smith and a look to the future from the new SUDSS president Connie Yan.

Mouthpiece now goes out virtually to all of our current students and staff. If any graduating students would like to receive Mouthpiece in future, please email me at m.barber@sheffield.ac.uk and I'll put you on the mailing list. Any subscribers who currently receive a hard copy of the magazine can let me know their email address and I'll send you the e-copy in future and you can therefore cancel your subscription. All of this helps to keep the running costs of Mouthpiece down as much as possible and saves a few trees in the process!

As always, if anyone has any ideas for the next edition of Mouthpiece, please get in touch. It's great to include articles which have a dentistry/Sheffield association, so if you organise a reunion (even if they have had to be virtual recently) or other such activity, send me some details about it!

Mark Barber
Connie Yan

Editor
Assistant editor

News flash!

Professor Martin Thornhill has been awarded the IADR Distinguished Scientist Award in Pharmacology/Therapeutics/Toxicology Research. Martin is one of a very small number of people to have been awarded a distinguished scientist award twice by IADR in different subject areas. He previously received the IADR Distinguished Scientist Award in Oral Medicine and Pathology in 2015. Martin is pictured here on the left receiving his award from Professor Deery.



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Dean's Report



Well, it has been quite a year. The School was the first Department back on campus in the University in August 2020. This was a huge logistical exercise. The most obvious sign of this was the undergraduate students firstly in the Clinical Skills Learning Environment and subsequently on clinics. The research laboratories, which had virtually been shut, also re-opened in a staged and controlled manner. Since then, we have adapted to many new ways of working. This has included extended days, one-to-one supervision and the introduction of speed increasing handpieces, for example. Together with this, remote teaching and assessment continued. For the PGR students, remote supervision presented its own difficulties. The greatest challenge of all was the uncertainty and lack of a crystal ball, which meant that planning has been very difficult. Through all of this, staff and students have been remarkable in their understanding, resolve and “can do” attitude. It is for these reasons that we have just graduated the 5th BDS and will graduate the 3rd DH&DT later in the year. You will also hear of the many PhD successes in individual Unit reports.



Professor Helen Rodd has been awarded an MBE for her services and lasting impact made to paediatric dentistry. Very much deserved and we are all proud to have her as a colleague and friend.

Our record of success continues with staff and students winning eight prizes or awards over the last 12 months.

I was sad to hear of the death of Anne Atkinson who retired as a Senior Lecturer in Dental Surgery and Honorary Consultant in 1989, after many years of service to the School. The alumni newsletter of its day said, “As a lecturer and senior lecturer in Restorative Dentistry she was a great asset to the education of generations of students and will be remembered for her dedication”.

We also lost Professor Mike Lennon OBE, who worked here for six years from 2003; he was instrumental in setting up our flagship primary care outreach programme. Mike’s knowledge and enthusiasm around Dental Public Health and water fluoridation, in particular, is a lasting legacy.

I also learned of the passing of David Sayliss, a graduate of 1952. He and his family donated the funds which allow us to display some of our history in the foyer. I had the pleasure of meeting him in 2019.

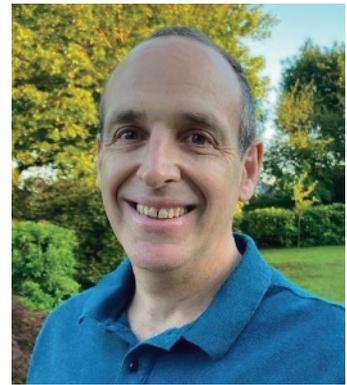
Five long-standing members of staff left, for pastures new, last summer. Dr Sandra Zijlstra-Shaw, Dr Jan Owens, Dr Keyvan Moharamzadeh, Dr Martin Parsons and Jill Rushforth. Keyvan is now a professor in Dubai, Jan had the pleasure of having one of her remaining PhD students pass in June and Sandra has retired to the East Coast of Scotland whilst Martin and Jill remain nearer home. We wish them all well.

As we look to hybrid working, I am sure we are all looking forward to talking face-to-face to colleagues we have only seen on a screen for the last year or so.

I say every year what an amazing group of people make up the School - the last 16 months have made that even more evident. Thank you everyone.

Professor Chris Deery

Report from the Academic Unit of Restorative Dentistry



Wow! What a year this has been. Talk about resilience, hard grind, perseverance, camaraderie, collegiality, and dogged determination! These are just some of the qualities that both our students and staff colleagues have demonstrated throughout this difficult year. The challenges that we have all faced, as we ploughed our way through this last academic year in the most difficult of circumstances are incredible by any measure. We can all hold our heads high for a job well done and done so to the best of our abilities – Nobody could have asked for more.

Through hard necessity, just about everything has been different this year. We have changed and learnt so much at every level. Incessant instruction emails (apologies!) with guidelines, SOPs, protocols, social distancing requirements, conduct, engagement rules, small groups, staggered start times...etc. are so characteristic of our operation throughout the academic year.

As a Unit, we have certainly become 'smarter' educators and I believe that our students have also learnt to be better learners. On-line lectures, AGPs in DPU, working from home, on-line meetings, red-ring handpieces, manikins on clinics, reduced clinical groups, learning summaries...we have tried them all! Some work really well, others need further tweaking. We have remained focused, but there is no doubt that the fun element has been noticeably absent. We have all missed the personal encounters and spontaneous chit-chat that is normal and the essential glue that keeps us all united – Hopefully this will return soon. There is no doubt that the future of L&T in restorative dentistry will be different from here on and I like to think better also.

Our hospital colleagues have been tremendous in the support to enable the clinical activities to continue throughout; with constant engagement and commitment at every level – Thank you to each and every one.

This year has been tricky for every BDS cohort in RD for different reasons; as you all persevered with your course work and all the new 'weird and wonderful' clinic arrangements on RD. The 5th BDS have been under the closest of scrutiny by the GDC and have had the big question mark of 'will we or won't we, be allowed to graduate?'. Well, you know the answer and it is to everybody's credit – Our 5th BDS have made it! Fought off all adversity and now moving on, leaving five hard years behind and onto the next stage of their careers as our colleagues in the profession. Heartfelt congratulations to you all! Our congratulations also to all our other BDS students that have been hugely accommodating and understanding and pressed on with their studies with an equal level of determination and focus – Time for a break now and we very much look forward to working with you all next year.

We say goodbye to our clinical tutor colleague Sue Headlong, who retires after five years of hard work and incredible commitment. We wish Sue a well-deserved and happy retirement.

As the saying goes...Onwards and upwards! We put the past difficulties behind us, take the positives and seek to improve and continue to be a fantastic restorative unit.

With my best wishes to you all for a relaxing summer break.

Professor Nicolas Martin

Academic Unit of Oral Health, Dentistry and Society

By Professor Sarah Baker, Head of Unit (@sarahRbakerDPH)

As in nearly all aspects of life, it has been a challenging 12 months since the last Mouthpiece report. I wanted to say a big thank you as always to the hard work and dedication of all of our administrative, research and academic staff. It is a real honour to be head of the unit, with such a fantastic team of people. We have continued to meet online during these difficult times and, despite the very many challenges that we have faced, we have strived to maintain our excellent teaching, research, and patient care.

We were very sad to see two of our much-valued staff members leave this year, Sandra Zilstra-Shaw and Jan Owens. Both were stalwarts of the unit and School of Clinical Dentistry for many years. They were both great colleagues, always ready to help, offer advice, and generally go above and beyond. They are both very dearly missed by me, colleagues and students alike.

Despite these challenges, we have had lots of good news. Andrew Rawlinson, Magdalena Uerlich, Maram Al Wadi, Helen Rogers and Mohammed Sarhan have all submitted their PhDs this year. Many congratulations to them for this wonderful achievement.

On a personal note, I was thrilled to be appointed Editor-in-Chief of the journal *Community Dentistry and Oral Epidemiology* recently. CDOE is the top journal in the fields of dental public health, oral epidemiology and social and behavioural sciences applied to Dentistry, and I am delighted to be the journal's first female Editor.

If you would like to keep in touch with news from the unit our Dental Public Health team have an active Twitter account (@DPHsheffield), as do many of our unit staff.

News from Primary Dental Care from Dr Adrian Jowett

Inevitably Outreach was impacted by Covid-19 when practices were required to close and so students' experience in primary care has been reduced. Even though non-emergency work recommenced, the student experience has changed as it now includes telephone triage and one-to-one AGP chairside supervision as part of the 'new normal'. The placements responded well to the challenge especially considering that their underlying business is curtailed and they have new UDA targets to attain. Unfortunately, the Community Dentistry Service at Chesterfield has been unable to re-join Outreach yet which is a pity in view of the excellent learning opportunities they gave. I hope they are able to re-join once they're back to 'business as usual'.

The working model for DPU has changed markedly, being one of the few areas in the School/CCDS with individual surgeries. Initially, CCDS provided emergency treatment in DPU for children and adults before the site becoming the focus for student AGP treatment. I'm very grateful to the nursing, academic and clerical teams for adapting so well to these sequential changes.



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Announcement

Wiley is pleased to announce that starting June 1 2021, Professor Sarah R. Baker, BSc, PhD, C.Psychol, AFBPsS will be the Editor-in-Chief of *Community Dentistry and Oral Epidemiology*.

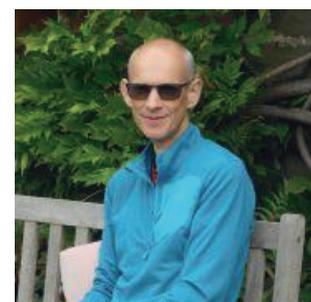


We would like to thank Professor W. Murray Thomson, outgoing Editor-in-Chief of CDOE, for his dedication to the journal and for the many hours and positive influence he has had on the journal throughout his 6.5-year tenure.

We are pleased to welcome Professor Baker as the new Editor-in-Chief of CDOE. She brings to us her experience as a Professor of Psychology as applied to Dentistry and a Chartered Health Psychologist registered with the British Psychological Society. She is a Past President and Executive Committee Member of the Behavioural, Epidemiologic Health Services Research Group of the International Association of Dental Research (IADR). In addition, she the recipient of the prestigious 2018 IADR Distinguished Scientist Award for Behavioural, Epidemiological and Health Services Research as well the recipient of the IADR Giddon Award for Distinguished Research in Behavioural Sciences in both 2013 and 2016. She is currently a council member and research lead for the British Association for the Study of Community Dentistry. Prior to her appointment as Editor-in-Chief, she served as Associate Editor of CDOE since 2011.

Professor Baker will be the first female Editor-in-Chief for *Community Dentistry Oral Epidemiology* and the first social scientist to become Editor-in-Chief of a Dentistry, Oral Surgery and Medicine journal.

Professor Baker will continue the tradition of editorial excellence for CDOE, building upon the success of Professor Thomson and the preceding editors since the journal's founding. Professor Baker looks forward to promoting the values of Diversity, Equity, and Inclusion on CDOE, as well as welcoming new editorial board members, championing interdisciplinarity in oral and dental research, and is dedicated to carrying on the traditions of author support, rapid time to decision, and promoting Open Science.



Our primary care ACFs, Adam and James, have contributed to the CCDS Covid clinical effort under the leadership of Restorative Dentistry consultants. They are also helping to develop new teaching on the BSc and building their research proposals with the input of researchers in the Unit.

Paediatric dentistry news 2021

Without a doubt, paediatric dentistry's mantra over this past 12 months has been: 'the show must go on!'. We have kept our service going, including treatment under sedation and GA, throughout the pandemic, albeit at a much-reduced capacity. An 'open' clinic and the use of AGPs are obviously not compatible, so we exercised squatters' rights at DPU for our AGP treatments and are currently in the midst of building work to convert four of our open units into two closed surgeries. On the plus side, our young patients are now so used to face masks and visors in normal life that they don't seem at all alarmed by all our PPE.

Since our report last year, there have been a number of staff departures and arrivals. We were sorry to see Helen Rogers leave for an academic post at Newcastle Dental School, but happy for her PhD success and new career opportunities. Faith Campbell, a past Sheffield graduate obtained a paediatric dentistry training post in Glasgow and Claire Warner, another past Sheffield graduate, took up a specialist post in Derbyshire Community Dental Service. Chris Donnell, a new Specialty Trainee, joined us in September and we have also had two new consultants: Jen Kirby (a joint appointment with Sheffield Community Dental Services) and Joana Monteiro (who was previously a consultant at Great Ormond St Children's Hospital). It is great to have them bringing their expertise to our team.

The specialist trainees have had a challenging time, with delays to their specialist and consultant exams and then new on-line formats. So it is all credit to them that they did so brilliantly: Fiona Noble and Claire Warner passed MPaed and Jen Kirby, Sophie Hughes and Jenny Lawson passed ISFE. Fiona Noble was also awarded a prestigious NIHR Doctoral Fellowship so will be starting her PhD (an intervention project to reduce needle fear in children) very soon. Our MClint Dent final examinations were held virtually, and all of our students (Mariam Hamouda, Sultan Attamimi, Claire Warner and Chloe Thakrar) passed with flying colours. Our international Masters students, Mariam and Sultan are now back in Sheffield to continue with further study and clinical training. We're really looking forward to welcoming three new international students to our new 3-year Doctorate in Clinical Dentistry programme in September.



Our Successful MClint Dent candidates (and Prof Deery!) post exam in Sheffield, Saudi Arabia and Bahrain.

We have continued to have amazing research success, including the recent award of a 1.7 million NIHR grant to carry out a trial of guided self-help CBT for dentally anxious children in primary care. We would love to hear from any of you who might be interested in participating in this research (see below for more details).

Dental Public Health news from Dr Alison Patrick

The Master's in Dental Public Health continues with its popularity this year. It's no surprise to note that this year has been especially challenging for students with a return to online teaching and difficulties with travel to and from the UK. The staff have been brilliantly adaptable, and we have been able to offer in person teaching wherever possible, supported by online content. This

has involved a great deal of change to content to suit the environment as well as quick thinking about appropriate assessment.



It would probably be no exaggeration to say that this academic year the staff have probably learnt as much as the students! The silver lining being that we have been able to step up to the challenge and use Blackboard to its full potential *as well as* cope with its idiosyncrasies.

Despite all the hurdles this year's students have been fantastically resilient. Many of our students have experienced isolation not just from staff but also their peer group. Despite this, they have all worked so positively with the staff and each other and have been a pleasure to get to know.

As one of our student's recently said:

"Though covid hit hard and we felt lonely initially, Sheffield became our home now!!"

A huge thank you to both the course reps and our overall PGT rep. All of whom have helped keep everyone, staff and students, going (and organised the photo to the left).

I think we would all agree that our 2020 students are now part of our Dental Public Health family, wherever they are, and we look forward to their coming success over the next few months.

Orthodontic News from Prof Philip Benson

It has been a rather strange year due to coronavirus pandemic. The Orthodontic Department of CCDH has been open and delivering orthodontic care continuously since the first national lockdown between March to June 2020. Clinical capacity has been reduced, but with the success of the national vaccination programme we are gradually settling into a new normal. We have continued to train our orthodontic postgraduates and specialty trainees and we were delighted that Hanieh Javidi passed her higher specialty examination. Hanieh is currently doing a locum consultant post in Manchester. We are wishing the best to our other two higher specialty trainees Tom Frawley and Paul O'Malley, who take their higher specialty examination in September. At the time of writing we are awaiting the outcome of the May Membership in Orthodontics examinations for our three third year specialty trainees.



Unfortunately, we have had to restrict the numbers of undergraduate students on the clinic at any one time, which has meant that their clinical experience has been severely affected. We have been delivering much of our postgraduate and undergraduate teaching and assessment remotely, through the university's online platform Blackboard, which has been quite successful. However, I think many are looking forward to more face-to-face teaching if the situation improves in the next academic year. One undoubted success has been our orthodontic journal club, which has been delivered online, with an excellent turnout most weeks. This will probably continue online, certainly as an option for people who travel long distances for teaching in Sheffield.

Regarding staffing in the department, I am delighted to report that our specialty dentist, Paula Murray has successfully obtained more teaching sessions. Paula has made a huge contribution to the orthodontic undergraduate teaching at Sheffield, particularly in response to the need to change how we teaching during the current pandemic. I am very pleased that she will be taking on the responsibility of developing and coordinating the orthodontic undergraduate teaching next year. One of the reasons for this is I shall be retiring at the end of August, after 21 years at Sheffield (so this is my last Mouthpiece article). I have very much enjoyed my time at the dental school and would like to thank all my colleagues and former students who have made it such a great place to work.

Reducing child dental anxiety the Sheffield way from Prof Zoe Marshman

Over the past seven years, a multidisciplinary team, led from Sheffield, have developed and evaluated self-help Cognitive Behavioural Therapy resources for children aged 9-16 years to reduce dental anxiety. The resources <https://www.sheffield.ac.uk/dentalschool/research/person-centred-population/child-dental-anxiety> have proved very popular so far and are being used across the UK by dental practices and CDS clinics. They have already been translated into nine languages and used in ten countries. The implementation of this research into clinical practice and child-centred patient care is being used in a national research excellence exercise as one of the examples of how the Dental School's research has had an impact on society.



Recently, we have received £1.6 million of funding to conduct a four-year study called the CALM trial. The CALM trial will investigate the clinical and cost-effectiveness of these resources to reduce child dental anxiety when used in primary dental care. The Sheffield team will collaborate with researchers from Sheffield Hallam, Cardiff, King's College London, Leeds, Newcastle and York, working closely with patient representatives. The CALM trial will involve 600 children from 30 dental practices across England and Wales. The trial will start in September 2021 and any dental professionals or practices interested in taking part should contact z.marshman@sheffield.ac.uk for more information. We'd love to have some alumni involved.

Getting involved in dental research

In addition to taking part in the CALM trial, described above, there are lots of other research opportunities coming up over the next few years for dental professionals working across South Yorkshire and indeed the UK as a whole. These projects, mainly in primary dental care, range from studies with children of needle fear and silver diamine fluoride to trials of selective caries removal and interventions to stop smoking in adult patients with periodontal diseases. The studies all have funding built in for those dental professionals who get involved. Again, please do contact z.marshman@sheffield.ac.uk to find out more.

Academic Unit of Dental Hygiene and Therapy

Well what a year it has been again! When the pandemic hit in March 2020 I don't think we could have imagined that we would still be working from home or donning and doffing our extensive PPE! The last 12 months have been challenging to say the least.

In August 2020, we welcomed back our students to the School of Clinical Dentistry. Even though we had numerous SOPs, it was still rather difficult to get into a new way of working. But it was so nice to see everyone face to face again. Over the first few weeks we gradually broke the students back in to clinical work and provided them with refresher training. In September we met our new first year students for the first time in the flesh! These students joined the programme in April 2020, at the height of the pandemic. They were so pleased to finally meet everyone and start some of the practical aspects of the course. During this time we have learnt how to run successful online assessments and Covid-secure OSCEs. Due to the amount of time missed by our third year students, we had to make the difficult decision to extend the programme, thereby giving them more opportunities for learning and enabling them to be fully prepared for finals and joining the GDC register. Everyone has pulled together during these unprecedented times and I am very grateful to all of the students for their patience and to the team for all of their continued hard work.



Matthew Sarstedt and Stephen Davies

In last year's Mouthpiece, we reported that two long serving members of staff were leaving, Jill and Martin. We have missed them both greatly over the last few months. We have been lucky to be joined by some new staff members though.

Matthew Sarstedt joined the team in November as a full time clinical teacher. You'll hear from Matthew a little later as he's written a short piece below.

Stephen Davies has been welcomed as a part time clinical tutor. You may remember that

Stephen has worked for the programme before covering maternity leave but he now joins the team permanently.

Throughout April and May, we were joined by six temporary clinical tutors. It has been great working with these new staff and they will be with us until November this year. Avril Ware, Charlotte Heneghan, Laura Marshall, Janette Piroli, Jude Moss, Roxanne Parkes-O'Connell.



Left to right:
Avril Ware,
Charlotte
Heneghan,
Laura
Marshall,
and Janette
Piroli

And now for some more arrivals! Very shortly after Kate Peysner started her maternity leave, along came Herbie. All the family are doing very well and we look forward to welcoming Kate back later this year.



Jude Moss and Roxanne Parkes-O'Connell

More recently, Esther Machon has welcomed the arrival of Elsie. Esther is settling in to her new role as first time mum and renovating a house at the same time! We look forward to welcoming Esther back next year. During the summer, we will also be wishing Ros all the best as she starts her maternity leave.



Herbie and Elsie

Well, now over to Matthew to give you a rundown of what it has been like joining the programme as a clinical teacher in the middle of a pandemic!

Dealing with the pandemic has indeed been a challenge but I am pleased to say the warm welcome I have felt has far outweighed this. Not much has changed in the Charles Clifford, so in some respects it has been like coming home! It really isn't all that long since I left as a newly qualified dentist (or that's what I like to think)! Returning to a place with so many familiar faces has been lovely; seeing so many staff still here reminds me that this place is a great place to work. I've got to be honest: Being on RD2 and RD3 again has been surreal, but visiting multiple bays in a session rather than staying at one has been a novel experience. I'm thoroughly enjoying teaching students on the clinics, alongside the staff that supported me so well through my degree. It's been remarkably rewarding to see student progression on and off the clinics, especially when explaining difficult concepts, or acknowledging achievements. Since starting in my role as the clinical coordinator, I have implemented a new referral pathway from BDS to DH&DT students and I wanted to take this opportunity to thank you all for embracing this change, as anecdotally it appears to be working very well. Additionally, I'd like to thank all students and staff for making me feel so welcome, it's been a delight to work alongside you all and I look forward to this continuing in the future.

Finally, staff from the Unit of Dental Hygiene and Dental Therapy would like to congratulate all graduates on their achievements and wish them a successful and prosperous career.

Emma Bingham

Head of Unit and Programme Director &

Matthew Sarstedt

Clinical Tutor and DH&DT Clinical Coordinator

Academic Unit of Oral and Maxillofacial Medicine and Pathology: 2020-21

It's a bit of an understatement that the past year has been a little different from usual. Last year we reported the effective closure of the School in March. We did not imagine that a whole year later, we would not be fully open, and that as members of academic staff, we have seen each other a handful of times in 15 months. The past year has seen the move of almost all our teaching online. This has been achieved through a massive effort in pre-recording sessions, running webinars and interactive seminars online. Massive adjustment and a proper dose of creativity was required to keep these engaging, and many thanks to all the staff who put in a massive effort to make this happen. Several our Unit staff lead areas of the BDS Curriculum, including Helen Colley, Joey Shepherd and Dan Brierley, with others were called to cover curriculum leadership roles. Simon Whawell has also led the 1st year of our new BSc course.



Olive and Paul at the day job

In each year we do welcome new staff and say goodbye to others. Paul Hankinson and Olive Allsobrook started Oral Pathology StR posts. There were also other additions to the Oral Pathology "family" – puppies Luna and Otto were added to Lorraine and Simon's household respectively.

We also said goodbye to Hayley Stanhope, our long serving (and long suffering) Histopathology technician. Hayley worked in the Unit for over 40 years and will be very much missed. She saw so many other staff come and go over the years, but

her commitment to the Unit and the clinical service have been unwavering.

Our PhD students have also been very much affected by the lockdowns with restricted access to the labs, and many of our overseas students having to return home for a time. Despite this, the work has gone on and we are very pleased to report successful thesis defence for Esra Amoura and Naeima Hendawi, amongst others. At the Annual School Postgraduate Research Symposium, two members of our Unit won first and second poster prizes for their second-year presentations. Well done to Rawan Alshalan and Hollie Shaw, both supervised by Dr Joey Shepherd and Prof Graham Stafford.



Luna -
Lorraine's
puppy

Several our senior staff have been externally recognised with Dan Brierley being appointed a Senior Fellow of the Higher Education Academy and has been selected by the University to be one of its National Teaching Fellowship nominees (outcome in July).

Ali Khurram has had a great year with research income, with major grants from CRUK and the British Council/Pakistan schemes, and we are looking forward to welcoming new staff on these grants - Neda Azarmehr has already started on the CRUK funded ANTICIPATE project. Ali also organised a Mouth Cancer fundraising virtuathon in November 2020. Details are here:

<https://www.sheffield.ac.uk/dentalschool/news/dental-school-raises-awareness-and-funds-mouth-cancer-action-month> or on the



Simon and Otto

Youtube link: <https://www.youtube.com/watch?reload=9&v=IEwqm6yNnGU>



Hayley Stanhope

In October, we will welcome Ren Kai to the Unit to begin his PhD with Dan Lambert and Graham Stafford. Ren is funded by a prestigious scholarship from the Chinese Scholarship Council (CSC), one of only a handful awarded across the University. Ren will be the second CSC-funded student to join the Unit, following in the footsteps of Anita Liu, who will shortly be completing her PhD with Stuart Hunt and Dan Lambert. Another new starter in Prof Lambert's group is Ben Raven, who will be commencing a PhD funded by the Engineering and Physical Sciences Research Council (EPSRC) as part of the new interdisciplinary Healthy Lifespan Institute.

In an exciting three-year project funded by the British Council Pakistan, Dr Joey Shepherd, in collaboration with Prof Sheila MacNeil and Dr Anthony Bullock from the Department of Engineering Materials, is working closely with colleagues from the Interdisciplinary Research Centre in Biomedical Materials at COMSATS University Islamabad, Lahore Campus, led by clinician Dr Muhammad Yar. In Pakistan, and globally, there is an urgent need for simple and affordable dressings for chronic wounds. We are developing a new wound dressing for burn wounds and other chronic wounds that contains a sugar, 2dDR, which has been shown to be pro-angiogenic. In association with the Pakistan company Cotton Craft, Lahore, we hope to have this wound dressing fully developed within three years. We have recently welcomed a new technician, Nicola Burns, to the microbiology lab who will be carrying out practical investigations on skin microflora response to this dressing.

In another international collaboration, Joey was awarded a Royal Society International Exchange Fellowship grant alongside colleague Dr Karishma Kaushik from Pune University, India. Joey and Karishma are working on putting together their biofilm models of infection to come up with something even bigger and better and are hoping to visit each other's labs when travel is allowed.

In March 2021, we co-hosted the Oral Microbiology and Immunology (OMIG) PGR Prize Symposium 2021. After a welcome from the OMIG Chair, our very own Prof. Graham Stafford, there was a fantastic day of talks and poster flash presentations from the OMIG PGR community. One advantage to holding the symposium online this year (Picture 5) was having delegates from 12 countries across the world. The OMIG website has also been relaunched (<https://omig.uk>) along with a series of lunchtime seminars hosted by Graham which have been very popular in the global oral microbiology community. We are also looking forward to hosting an OMIG symposium at BSODR in September and have launched a bursary scheme for early career oral microbiologists to attend meetings and conferences.



Enjoying the online OMIG symposium

Professor Keith Hunter

Dental Implant Structured Training Courses from The University of Sheffield

Our 2 day **introductory course** offers a unique opportunity to find out if implants are for you and your patients and is an educational experience that can be built upon. They are popular with dentists in training and hospital staff.



Intensive, residential, introduction to implant care



Treatment planning - case selection



Practical training model training with Nobel Replace/Active Implants



Radiology, Stents, Patient selection for success.



Getting started in practice, mentoring, marketing and post course support

Two-day courses are held at Ringwood Hall Hotel Chesterfield.

Upcoming Dates

15th-16th October 2021

Further Information and booking:

<https://www.sheffield.ac.uk/dentalschool/cpd/implantology-courses>

Or from Ms G Temprell g.temprell@sheffield.ac.uk

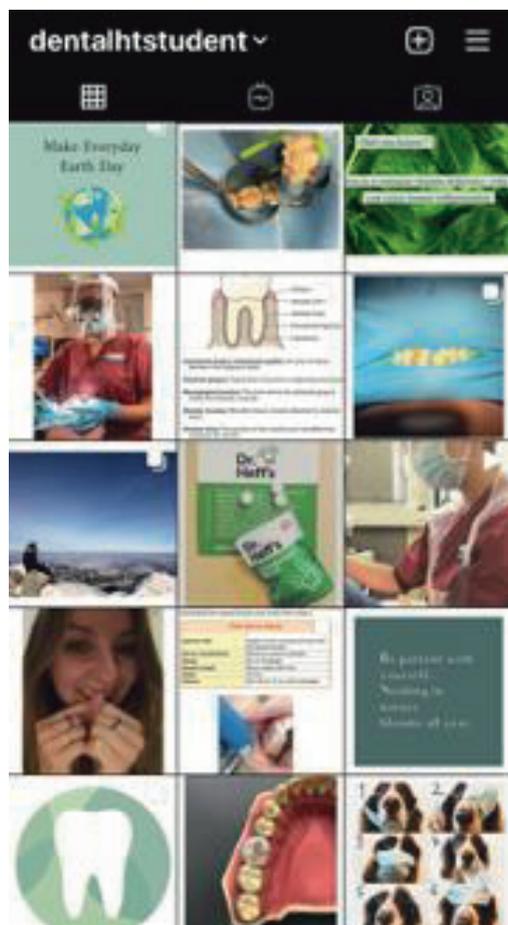
The Implant Course Co-ordinator, OMFS, School of Clinical Dentistry, Claremont Crescent, Sheffield S10 2TA.

Life as a student during the pandemic

When applying to study Dental Hygiene and Therapy at Sheffield, not in a million years did I think I would be studying during a pandemic. The fear was real, 'after all this hard work, time and effort we might not even be able to start the course' – my mind back in April 2020. A year on and we are here, 2nd year DHT's; maybe a little behind with clinical time but we are thriving!



When the pandemic hit and the whole world was on pause, I promised myself I will use the spare time to my advantage. Most days I would attend lectures online to learn the theory side of dentistry, to implement this I looked for apps and other resources online. I came across the Immersify app, they were just starting up; I became an ambassador for the company. Aside from being biased; I found it very useful especially for tooth morphology and quizzes! Do give it a go if you haven't already.



The first few months of what was meant to be a social life at university felt rather lonely, unable to meet anyone in the same boat was really daunting. I decided to set up a dental page on Instagram to virtually meet people and share experiences, it really helped me to stay sane - I feel we have a great dental community supporting each other on there. I even won a place on RW perio course!

I also decided to use the platform to share my passion for green dentistry. For some time now I have been searching and trying out sustainable dental products to help reduce enormous amounts of waste. I often post and share my findings there. I was also asked to take part in a live event to talk about 'Green Dentistry', it was something that was way out of my comfort zone but, I really enjoyed it. I was able to briefly talk about my research findings which I have undertaken during my previous biomedical science degree. While taking part in the live event I was in the middle of finalising a research paper that I was writing for the British Society of Dental Hygiene and Therapy journal; thinking back now, I realise I definitely was not bored during lockdown.

I enjoy writing about things I am passionate about, so I applied to become part of the BDJ Team reader panel – another opportunity I would not know about if I did not have my Instagram page. This role will allow me to share and promote sustainability in dentistry with our fellow colleagues and hopefully drive a change in the right direction.

During these times I also wanted to take the opportunity to do something different, before signing my life away to dentistry. I got a job and undertook training to become a Clinical Case Worker for the Test & Trace programme; it was an eye opener for me. I was naive to think that the public is aware of the need for isolation following a positive Covid-19 test result despite being asymptomatic. In general, most people I called were cooperative and appreciated our service however, not all went as smoothly. Some days people were shouting down the phone calling me stupid because they do not have symptoms, so they are not going to self-isolate, but others lost a family member and really appreciated the support. It was an emotional rollercoaster, but I soon realised it was similar to working in dentistry, simply dealing with the general public. At the time of writing this, my job is coming to an end which is good news, cases of Covid-19 are falling, and we are not needed, hopefully this for us students means some normality back and we can finally socialise. I also wanted to help with the vaccination roll out, so I have contacted the local medical practice, and a week later I was volunteering with the admin side of things, and now training to deliver the vaccinations. As I have not performed many local anaesthetics to date, I thought giving vaccines would provide me with more hands-on experience with needles and patient management.

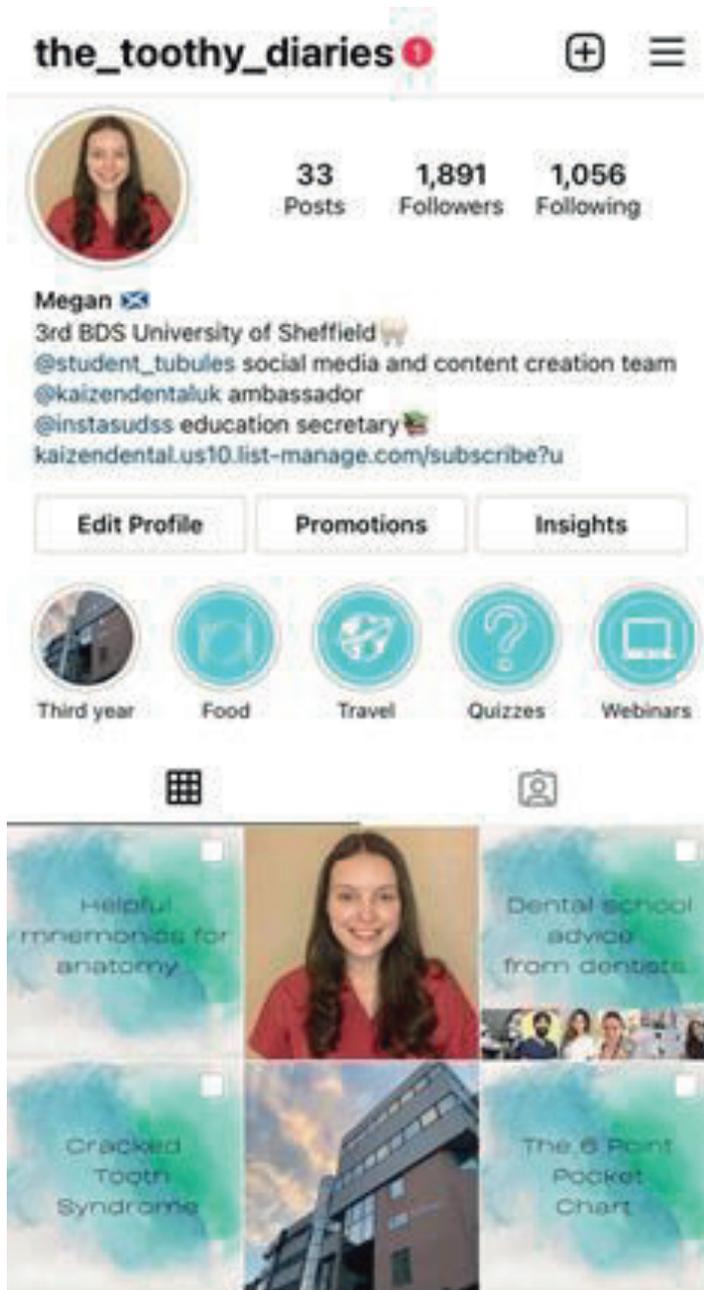
Although the pandemic has taken a lot from us, it has also given us an opportunity and time to try different things. Don't be afraid to get out of your comfort zone! At last, well done to all of us during these strange times and a warm welcome to all 1st years.

Dominika Jaslikowska, 2nd DH&T



Using Instagram to connect with other dental students and applicants

During the first lockdown, I started to discover the wealth of dental knowledge that was shared on Instagram and when my exams were over, I decided to take the leap and start my own dental page: [@the_toothy_diaries](#)

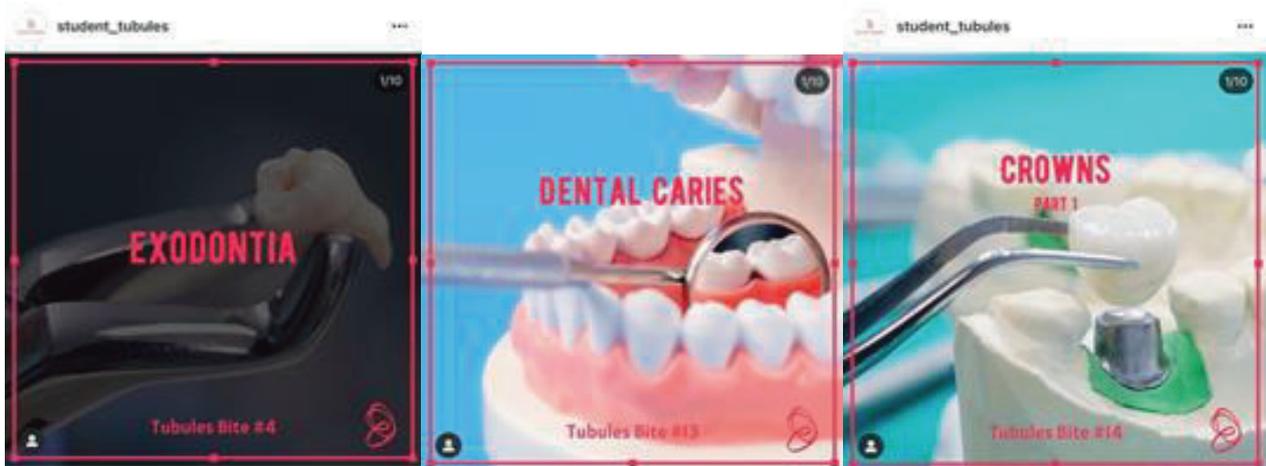


My aim with my page has always been to help as many people as I can including dental applicants and other dental students like myself. At first, I made posts aimed towards dental applicants including tips for interviews and why I chose Sheffield. As I got more confident in the formatting, I started to make revision posts such as a summary on each medical emergency and how to manage them and helpful mnemonics for anatomy. Creating these posts was a great way for me to refresh my knowledge of important topics from previous years and to stay up to date with the latest guidelines. Nearer to exam time I enjoy making quizzes on different topics to aid my own revision and to help others too.

My page has also allowed me to connect with dentists from around the world and learn from them which I find very beneficial for my learning. I even made a collaboration with some successful Instagram dentists about advice they wish they knew when they were in dental school. This was very successful, and I learned a lot from all of their wisdom!

Having my dental page has brought me a lot of opportunities that I do not think I would have otherwise known about or had the courage to apply for. I help

create revision posts and quizzes for Dental Tubules on various topics including exodontia and the different types of crowns. Again, this really helped me to reinforce my knowledge of the topics and it helped me to develop my teamwork skills by working with other dental students from across the country. [@student_tubules](#)



While making revision posts I began to realise how much I enjoyed teaching and helping other people and I decided to apply for the SUDSS education secretary along with Mohit Mistry. We got the role and held our first revision session recently for the first years. We ran an anatomy crash course with kahoots for each topic and received lots of excellent feedback from it! We are looking forward to running more sessions after our exams, particularly for the Integrated Human Diseases course for third years.

I recently became an ambassador for Kaizen Dental which is two young dentists who send clinical tips straight to your inbox! Their goal is to inspire and encourage you to carry out high quality dentistry by sharing tips, tricks and guides for free. I'm part of the poster team so I have used my experience of making posts on both my page and for Dental Tubules to convert the clinical tips into posters. You sign up to receive free clinical tips and PDFs of specific procedures using this link: <https://kaizendental.us10.list-manage.com/subscribe?u=f0d589857b89121f20b0245c3&id=5e01faf367> @kaizendentaluk

Megan McLeod 3rd BDS



Life as a 4th year dental student

Needless to say, this past year has been a whirlwind for us all. So much has changed, from lecture teaching and clinical experience to day-to-day activities with other people. Fortunately, dentistry, being such a hands-on profession, provided an opportunity for us all to still have some face to face teaching in 4th year, which I was extremely grateful for. September to December 2020 saw the return of weekly intermediate restorative skills which should have been completed at the end of third year, but we all quickly caught up on this. This led straight into advanced clinical skills which finished this January. All lectures have been online this year and whilst it's been difficult for others, I personally found this to be a welcome change to a more flexible schedule. It's been incredible to see all the staff and students adapt to the pandemic and learning and teaching in a new way, which will have made us all more resilient coming out of it.



Usually, this would be the year we all really started to feel more confident and more like 'proper' dentists, but this has definitely been delayed to some degree. However, I've found outreach incredibly helpful for getting back some of this lost experience. Outreach is a 6-week placement at a dental practice outside of the dental school in 4th and 5th year. Usually we would have many more weeks of this under normal circumstances but getting any amount of placement is very much appreciated right now. I have definitely found this to be one of my favourite parts of dental school so far, as I've got to learn how an actual dental practice runs. It's definitely a huge step up from seeing 1-2 patients in an afternoon at Charles Clifford to 4-5 on outreach!

Of course, with all this free time over the past year, I wanted to find a way to keep busy so I stepped out of my comfort zone to start my dental Instagram and YouTube channel 'RainaOnTheCusp'. This is something I wanted to start for a while, but lockdown was the push I needed. Social media can be a difficult field to navigate as we all know and it should always be carefully used, but personally I've had so many amazing opportunities to connect with other dental students and dentists using it. My content and videos are largely based around helping dental applicants and documenting my own journey through dental school to show what we actually get up to. It's been very rewarding to be able to give back to this community of applicants and also learn from the work of other dentists online. If anyone else is debating starting an online 'dental student presence', then my biggest tip would be to figure out your 'why' first and always be clear on rules and guidelines, especially confidentiality!

In terms of the future, it's been a comforting feeling seeing shops and businesses open back up, providing the much-needed work-life balance in dentistry. I look forward to a more 'normal' looking 5th year (hopefully) but regardless, we've all done a great job at getting used to this 'new normal'.

Raina Palit

An investigation of the commonly used obturation techniques, including clinicians' attitudes and clinical outcomes

Whilst the Elective scheme was unconventional this year, we were still provided with the opportunity to delve into a particular subject area of our choice, and explore topics of particular interest to us beyond the current curriculum. For my elective project, I decided to gain further insight into the different methods of obturation during a root canal treatment. As this is a very common procedure used daily in general practice, this felt an especially useful branch of knowledge to investigate and would hopefully provide a conclusion for effective technique selection. Initially I assumed choosing an obturation technique mainly involved time management and minimising the cost of treatment, which while still important issues for a clinician to deliberate, alone are generally not sufficient consideration to ensure successful treatment.

During conversations with multiple clinicians, it was suggested that the standard and most common technique is cold lateral condensation. This is because it can be used in most clinical situations, and provides good length control as the GP is solid so will extend to exactly where you place it. Unfortunately, this also means that it may not fill the canal as efficiently as with warm techniques because the GP can't flow into the canal irregularities, making this method less favourable (see fig. 1). Also, as this technique doesn't produce a homogenous mass of GP, space may exist between accessory and master cones, so voids remain as potential paths for bacterial leakage (see fig. 2).

I then gathered that the warm GP techniques are the preferred methods, as cold lateral is considered outdated and time consuming. Generally, the go-to method is warm vertical condensation as the length of placement is accurately controlled by pre fitting the master GP cone- verifying it will be placed where you want it. This technique provides very good adaptation to canal walls with mostly GP and very little sealer in the apical 3rd. However, there are situations when clinicians opt for a carrier-based technique,



Figure 3. In this example, a carrier-based technique (Thermafil) has been used to push molten GP around a curved canal. Radiograph courtesy of Mr M Barber

such as if the canal is very long and a plugger is unable to reach 5mm from the apex, which is required for effective warm vertical condensation, but a carrier can reach this. Or when a canal is very curved as this allows GP to be pushed around a bend (see fig.3), but also provides good adaptation to the canal walls as with warm vertical. The downside of this technique is they are difficult to remove when retreatment is required, and with carriers you can lose apical control due to the 2mm of molten GP ahead of the carrier potentially not reaching the apex, or flowing unpredictably and overextending.

In cases where there is an open apex or MAF around size 80, thermoplasticised GP is inappropriate as apical control is compromised once the GP is heated, so calcium silicates such as MTA are used to create an apical plug (see fig. 4).

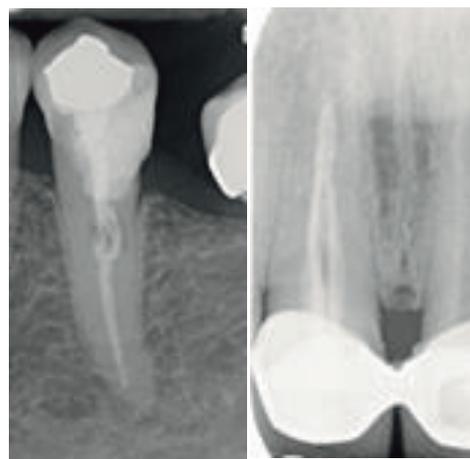


Figure 1&2. A case of internal resorption where cold GP is unable to fill the canal irregularities and an example where cold lateral condensation has resulted in voids as the GP is placed as a non-homogenous mass

From analysing a few studies surrounding successful vs unsuccessful root canal treatments, it can be inferred that inadequate filling of the canal, so a poor obturation technique, is one of the most important factors resulting in RCT failure. As explained in one of the highly regarded Y-L Ng studies, four conditions in particular were linked to significantly improved RCT outcomes. These consisted of: a lack of pre-operative periapical radiolucency, absence of voids in the root filling, extending the root filling to within 2mm of the radiographic apex, and a sufficient coronal restoration (Ng et al., 2007). Because of this it is fair to place a lot of importance on effective obturation technique, emphasised in a 2021 study which claimed poor obturation accounted for 36.85% of failures in their cohort (Mustafa et al., 2021), and agreed in a 2016 study which showed 65% of their failures were attributed to this also (Tabassum et al., 2016). Similarly, a poor coronal restoration was identified as a big risk factor for failure as this results in coronal leakage and ingress of microorganisms- however the 2016 study still suggested that the quality of the obturation was the main determining factor over the quality of the coronal restoration.

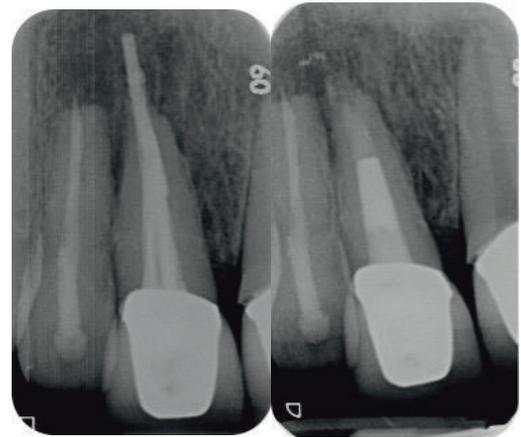


Figure 4. This case demonstrates how apical control was compromised with an MAF of size 140 therefore a Biodentine plug was used to create an apical seal. Radiographs courtesy of Mr J Hoare

While it is important to recognise that the driving force that results in RCT failure is the presence of bacteria in the canal, we must consider how obturation errors can be responsible for allowing this bacterial presence. For this reason, it's clear a good quality obturation is crucial for successful RCTs, and it is therefore important to assess the numerous different technique options critically. But, above all, we must only carry out techniques that we have adequate training in, and are confident will provide the best outcome for each specific case.

Ellie Hill 4th BDS

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Restorative Dentistry at the CCDH during the Pandemic

To paraphrase a certain Leslie Nielsen film from the eighties¹, I didn't choose a great time to be clinical lead in Restorative Dentistry. As clinical lead in Restorative Dentistry, I have responsibility for the smooth running of the specialist restorative services at the CCDH – this covers all the NHS activity in restorative dentistry, including endodontics, prosthodontics, periodontics and restorative implant treatment. By March 2020 I'd been in this role for almost exactly one year. It's a busy job – timetabling, sorting out issues with clinics, patients, staff etc., working with management to ensure we're seeing the correct groups of patients, managing waiting lists etc. etc...

Then COVID hit.

We'd had meetings to discuss the potential impact prior to March as COVID progressed in China and other countries, but we could never have predicted the impact it was going to have on our daily lives. As we all know, in late March 2020, we received word from the CDO that all dental activity was to cease except for emergencies, with even these being dealt with largely in a remote manner.

Crisis management kicked in. The Clinical Director, Professor Loescher and the clinical leads for each specialty were tasked with sorting out a plan for the safe management of patients under the care of the hospital. So began the generation of countless SOPs to cover all the potential eventualities of practicing dentistry in the COVID era.

The Restorative team's main role initially was to provide continued service to our urgent group of patients – those recently diagnosed with head and neck cancer who require a restorative assessment and treatment prior to undergoing radiotherapy, chemotherapy and/or surgery. We also needed to provide an emergency service to those patients currently under the care of the specialist restorative service and also the approximately 4000 patients currently registered with the undergraduate students. A rota was organized to cover these emergency patients, who were mainly dealt with using the 'advice, analgesics, antibiotics' approach, as recommended by the CDO. Patients with issues requiring face-to-face intervention were brought in and treated appropriately, following appropriate SOPs. During this period, all patient notes had to be reviewed and 'RAG' rated to assess the level of urgency regarding their treatment status. This was a huge task given the number of patients that we see in the department. This has been an ongoing requirement throughout the pandemic.

At this time, the CCDS was tasked with setting up a 'hot-hub' for treating patients requiring face-to-face emergency intervention who had symptoms of COVID. This was set up by the community dental service, led by Peter Bateman, and ran from the Dental Practice Unit and the sedation surgery in paediatrics, which was partitioned off from the rest of the hospital. As it transpired, this service mainly provided remote intervention and was not as busy with face-to-face appointments as first expected. It non-the-less provided an essential service during this early period.

For the first couple of months, during the period of emergency provision only, members of the Restorative team were sent out for redeployment – over the following months various members of the team went to help with the maxillofacial team, pharmacy at the NGH and even data analysis in the public health department! I should also very much mention the dental nursing team at this point who did an amazing job in being redeployed to undertake the COVID testing at the Trust and also other duties such as mask fit testing. Other members of the team, including the dental technicians were also redeployed to other essential areas of the Trust.



The fit testing team including dental nurses Sian and Serena and dental technicians Wayne and Helen

Following the initial period of emergency provision only, we received news in June that we could start to see patients again, provided this could be done safely, following all new guidance from PHE. We had obviously been planning this since the initial shutdown, but guidance was often late in being issued and there were difference in some of the opinions from other organisations, such as the specialist societies. This required careful handling, especially given many staff member's understandable concern regarding the virus. But ultimately, as an NHS establishment we had to follow PHE guidelines, in consultation with local advice from the microbiology team at the RHH, who were coordinating the local Trust policies.

Restorative dentistry was arguably the most challenging of the specialties to reestablish in the new COVID world due to the very high reliance on aerosol procedures. The initial requirement for 60 minute fallow time was very limiting in terms of productivity, especially considering the need to undertake a fifteen to twenty minute clean-down following completion of fallow time. Initially, we worked on the premise of using two surgeries per clinician, so clinicians would swap into the next surgery whilst fallow time and cleaning was occurring in the surgery they'd just used. This was fine in principle, but we had a limited number of 'side-surgeries' (approximately 13 in restorative) but a good number of available clinicians, including consultants, registrars, DCTs and specialty dentists. So this wasn't the best use of staff time. It was soon decided that the best use of time would be to use all surgeries, but mix in some non-AGP activities, such as new patient consultations and treatments not requiring aerosol generation, such as denture provision. These non-AGP activities were undertaken first, followed by an AGP treatment towards the end of the session, which meant fallow time could elapse over lunchtime or at the end of the day.



The operating microscope with modified visor and plastic cover

The individual mono-specialties each faced their own challenges. Endodontics was especially challenging due to the requirement for the specialist endodontic microscope and large amounts of specialist equipment. The need to undertake mid-treatment radiographs during an AGP session was also an obstacle. As lead for the NHS endodontic services, Ian Harris wrote an especially detailed SOP to manage endodontics in the CCDH, although initially the barriers meant we couldn't find a way forward for a couple of months. Ingenious solutions, such as using a modified visors to fit over the eyepiece of the microscope and using small flip-lid boxes to keep additional equipment ready during an appointment were used. Apex locators were used to verify working lengths, but the need to take master GP



Endodontic equipment set up and ready for use

radiographs during treatment was still a challenge. Ultimately, as guidelines relaxed, endodontics became easier to undertake. The SOP stated that the only aerosol generating aspect of the appointment would be during access cavity preparation. All subsequent stages were done without aerosol generation – achieved by avoiding the use of ultrasonics where possible and using a material for the temporary restoration which could be adjusted with a slow handpiece. With the reduction in fallow time to ten minutes, save for the cleaning time in between patient appointments, endodontics became more manageable.

Periodontics also posed a significant challenge due to the heavy reliance on ultrasonic devices which produce significant aerosol and the inability to use a rubber dam as mitigation during treatment (rubber dam does tend to impair periodontal treatment!). Patients were triaged and those who could be treated using hand instrumentation were. However, given the specialist and complex nature of the patients seen at the

CCDH, the majority of patients required the use of ultrasonics. Again, surgery usage and clinician time was maximized as much as possible, the periodontal team being led by Consultant Philippa Hoyle with a fantastic team of staff hygiene/therapists.

Prosthodontics also managed the challenges by modifying approaches and undertaking as much work as possible as non-aerosol generating. Prosthodontics often involves very long appointments at the CCDH, for example treatments such as composite build ups or multiple tooth preparations. These posed a challenge due to the need to wear full PPE, which was challenging when required for full sessions. Treatment appointments were therefore divided up into more manageable appointment times, which was more bearable for dentists, nurses and patients.

The new restrictions obviously limited the output from the department, meaning fewer patients could be treated in the same time frame as before. This was compounded by the large back-log of patients which had developed following a two month period of inactivity. The initial focus was to manage those patients who had experienced problems during the lockdown period, then to focus on those who were midway through treatment prior to lockdown. Following this, we had to concentrate on managing the patients who had been referred prior to COVID, but not yet seen for a consultation, then the patients who were referred following the initial lockdown. Whilst we did not change our acceptance criteria following COVID, we inevitably had to be stricter when assessing referrals into the department, to make sure we were only seeing the priority groups who we are commissioned to provide care for by the NHS. Even taking this approach, we're starting to see an increase in the waiting lists, especially in endodontics. We're currently running at about 80% of pre-COVID productivity, which is pretty impressive considering the challenges. But we were struggling to meet demand prior to COVID, so the current challenges with waiting lists are unlikely to ease anytime soon.

So, what for the future? Initially, 'air scrubbers' were used to increase ventilation and therefore reduce fallow time, but we've recently had external venting fans installed in all of the side-surgeries, giving us fallow times of ten minutes maximum, as per the SDCEP guidelines. As described earlier, our endodontic SOP means that fallow time has elapsed well before the procedure has finished, but the reduction in fallow time has significantly helped the turnaround for periodontal and prosthodontic appointments. Clinicians continue to innovate and adapt, always working safely within the guidelines, and it's hoped that as time goes by and new research comes out, guidelines may relax further. On the undergraduate clinics we have equipped most units with electric handpieces, which guidelines state can be used at 60,000 rpm without producing significant aerosol, so it's hoped that these can also be introduced to the side-surgeries to allow more procedures to be undertaken as non-AGP.

Overall, the last fifteen months have been extremely challenging, but the team – including dentists, nurses, admin staff, technicians and everyone else involved in patient care have worked incredibly hard to maintain a high level of patient care and continue to provide specialist level restorative dentistry to those most in need of it. I'm sure the coming months are going to be equally as challenging, but I have no doubt that the team will be up to the challenge.

Mark Barber

¹ For the younger readers, go and watch the 1980 movie Airplane!



One of the 'air scrubbers' used to increase ventilation

Luke Laing - 1st BDS #HUMANSOFSUDSS

Hi for those of you that don't know me, I'm Luke- I'm a first-year dental student here at the University of Sheffield. With this year and all the challenges that come with it, getting into dental school was something I was really pleased about. Being the first in my family to go to university was a huge achievement and to study a course like dentistry was an exciting but also scary feeling. I felt a lot of pressure as I had proven so many people wrong who doubted me and told me I wasn't good enough to get into a course like dentistry.

As imagined my mental health has always been swept under the rug as academia was the most important thing to me. Reaching out for help hasn't been the easiest thing. Getting a diagnosis alongside counselling/antidepressants was quite a big thing for me- and I most definitely should've asked for help sooner. The support network at Sheffield from the older students, tutors and even within a year group has been something I've been really grateful to have. Don't suffer in silence- getting support doesn't make you any less of a person- I wish someone had reminded me of this sooner.

With the majority of things being online this year, in September I didn't think twice about it. Being the "forgotten students of 2020" I had no expectations of what the year would pan out like. It was difficult adapting to dental school, never mind everything being online and it soon takes its toll. You eat, sleep, and do everything in between in your flat. Online learning has been as interesting as it can be. The lecturers have really tried to make it the best they can, even things that couldn't go ahead as they normally would- we had one lecturer that organised a salivary practical that we could do from our rooms- which wasn't the nicest, but it was a change from a pre-recorded lecture! We've been fortunate enough to be able to still go into the dental school occasionally for impression taking, clinical skills and the MTU every Friday. Dissection was a great way to get out and meet people within the course. It's been such a privilege to learn anatomy in this way.

Throw yourself into every opportunity and anything you can. I became an academic year rep and also an ADOPT ambassador- which allowed me to meet older years and give a little bit of knowledge back to younger students in the discoverUS days. Don't be afraid to reach out to older years and ask them for help- they've been in your shoes before and know what it's like.

Some of you may know I have an Instagram revision page- I've had this since A levels. I decided to carry on my study page through university to (a) be able to help like-minded people wanting to study/studying dentistry and (b) to look back and have a reflective journal where I can be honest- showing the highs and lows of not just dentistry but university life itself (with covid-19 too).

Nearly finishing my first year I can say you learn a lot about yourself. Your strengths, but most importantly your weaknesses.

If you had told me in sixth form that I would end up at Sheffield, I probably would've laughed... and then worried and overworked myself. But everything works out in the end.

"It is both a blessing and a curse to feel everything so very deeply". -David Jones



SUDSS 2020/21 Round-Up

What a year SUDSS has had! It was a year of lockdowns, but this didn't stop us. Despite never actually being able to hold a single in-person event this year, we had a very busy and packed year which saw us having to quickly adapt to new ways of running our usual activities. We really had to think outside the box for new initiatives and activities to keep members busy and to provide that signature, unparalleled SUDSS experience!



During the past year, we strove to raise as much money for charity as we could through entirely virtual means. Our nominated charity this year was the Sheffield Children's Hospital Charity which is a cause that is close to many of our hearts and does such amazing work in the city we are proud to call home. Our grand charity total was £3,112! Our charity initiatives through the year included:

- CHARITY MONTH – August is usually the quiet month for SUDSS, but instead, we held 4 events through the month! These events included a virtual bake off, a pub quiz, a cookery demonstration from Shiv, one of our education secretaries and a distance challenge against Manchester Dental Society. All in all, these events managed to raise £1342.50 and during our distance challenge, SUDSS managed to walk, cycle, run or swim a combined distance of 581km which was not only further than Manchester, but is the same distance as Sheffield to Paris.
- MCAW – in November 2020, we hosted our annual Mouth Cancer Awareness Week (MCAW). During this week, we posted vital information on our social media platforms about mouth cancer and also held 3 events to raise money for the Mouth Cancer Foundation. Firstly, we had a travel 5, donate 5 challenge to get us outdoors, we then held a MCAW quiz hosted by Jonny and Ryan, our social secretaries and then we ended with a dental bake off which was judged by Abbie and Ella, our ball secretaries. MCAW was yet another amazing success and it ultimately raised £502.75!
- REVUE – in March 2021, SUDSS hosted our annual revue which was a roundup for the year and to welcome the next committee into post. This was the first time this was held in a virtual setting and we had some great video submissions including a compilation of TikToks from staff! We also held a charity raffle during the Revue which had prizes kindly donated by local businesses. In the end, we raised £1,266.75!
- CLOTHES DRIVE – we held a clothes drive for Ben's Centre in Sheffield for the homeless which saw a huge amount of clothes being donated by students and staff!
- FOOD BANK – we were generously donated just under 400kg of porridge oats by Mornflake. These oats were split between the staff of the Children's Hospital and the Burngreave Foodbank to provide good meals to those most in need.

Education has always been a huge pillar of SUDSS and the support this year has been fantastic! During the year, we hosted 14 webinars with a variety of topics including paediatrics, periodontology, restorative dentistry, dental materials and even a talk on military dentistry from the Chief Dental Officer of the Armed Forces! We also hosted talks focusing on mental wellbeing and even a free yoga class! Our Peer Assisted Learning Sessions (PALS) were yet another success for SUDSS as well! Shiv and Mahsa, our education

secretaries, organised very informative and excellent PALS sessions, especially focusing on the IHD exams for our 3rd BDS Students. These were extremely well received and appreciated by all who attended!

A new initiative was set up by Nicole, our Secretary, this year called Humans of SUDSS. This celebrated the achievements of our large membership and also allowed members to share their experiences. These experiences were wide-ranging but allowed those who were going through a difficult time, to know that others have made it through and that there is always someone they can go to for support. This has been so well received that the 2021/22 committee has continued with this.

Wellbeing is always a big focus for SUDSS and this year, we have made it one of our main priorities. We led a nationwide consultation of dental students on how the national dental school system could be improved in order to best support students and to build the foundations for longer lasting careers. We produced recommendations which were delivered to the Dental Schools Council and are being implemented across the UK! This will begin to battle the stigma around mental health and hopefully allow meaningful conversations to take place around it.

SUDSS strives to be as inclusive as possible and this year was no exception. In the wake of George Floyd's murder, we led a consultation in Sheffield and produced recommendations to the Dental School executive on how to improve the environment for our staff and students of colour. This is all being implemented into school policy!

Volunteering is our way of giving back to our local community and we had to find a new way of hosting our volunteering activities so that our membership could get the experience they deserve. We launched a virtual volunteering initiative aimed at promoting oral health to youth groups in a fun and engaging way. We hosted a number of sessions which were all given great reviews to children of various ages!

SUDSS always endeavours to be as representative of our members as possible and so we recruited year representatives from all year groups to ensure that all members were being listened to. We also created the role of BSc representative for the 2021/22 committee to give BSc students the stronger voice that they deserve.

Despite not being able to host our annual events such as the Dental Ball and socials, we hope that we have left a positive impact on our community and dental school. SUDSS is an amazing society that can help students to push for and achieve vital change and the 2020/21 SUDSS Committee feel so privileged to have had this opportunity this year. On a personal note, I would like to thank the 2020/21 committee whom I feel privileged to have worked with in such a difficult year. I would also like to thank every single student and staff member for their unwavering support and encouragement. I know I speak for the entire 2020/21 committee when I wish the 2021/22 committee the best of luck for the next year. We know that you will be amazing and we can't wait to see what you do this year!



Best Wishes and Keep Smiling!

James Smith

SUDSS President 2020/21

Introduction to the new SUDSS committee 2021/22

Hello from the new SUDSS committee of 2021/22! And on behalf of the committee, I would like to thank James and the previous committee for all their hard work and perseverance over what was, undoubtedly, a difficult year.



And what a year it has been! It seems banal to talk of ‘unprecedented times’ but never have we experienced disruption on such a scale. However, as I am sure many will agree, both staff and students have done a fantastic job of adapting to the ever-changing climate, new clinical protocols and transition to online lectures and assessments (not to mention, the class of 2020 all passed their finals, making them the first ‘White Gloves Year’ in 12 years!). With the hard work of staff and perseverance of students as well as the thumbs up from Boris, we were able to return to university in September after half a year of no face-to-face clinics.

Following on, we would like to continue to build on the amazing work SUDSS has done and direct our efforts towards the pillars: diversity, inclusions, wellbeing, charity and sustainability.

With many students feeling isolated and overwhelmed over the past year, SUDSS has been more important than ever, providing support through various wellbeing initiatives. Last year, we held a national conference producing recommendations which were delivered nationwide to improve the experience of UK dental students. We recently held a series of events for **Mental Health Awareness Week** (10-16th May) with the aim of encouraging more conversation and breaking down the stigma surrounding mental illness. The week consisted of destressing activities, including a virtual Yoga class, “Come Dine With Me” cooking competition, and virtual talks on the importance of mental health. We were also thrilled by the positive response to our “Humans of SUDSS” posts on social media which consisted of some fantastic written accounts by students and staff sharing their thoughts on mental wellbeing. A big thank you to everyone who has taken part!

One of our top priorities this year is inclusions, especially for the first years who haven’t had the opportunity to experience university life and SUDSS as the rest of us have. In April, we welcomed the new H&Ts and have since held an intro talk, meet-and-greet, and produced a ‘Guide for Freshers’ booklet. We are looking forward to welcoming the incoming 1st BDS and 1st BSc students in September. One of the unique perks of being a dental student is the dental families’ support system, which provides non-academic support for students, who are assigned ‘dental parents’ in older years. Our new dental parents are beyond excited to get started and meet their dental kids.

This year has also seen the launching of ‘**Wellbeing Walks**’, a pairing system for students from different years and courses who then are encouraged to meet for a stroll, hike or picnic in the park. With credit to our wonderful Vice-President, Sammy, the walks have taken off to a storm and are getting more and more popular every rotation. The aim of this initiative was to help students, particularly the first years, to meet other years and feel more integrated within SUDSS and the dental school in general, as well as get the opportunity to chat about anything that may be worrying them. We are also planning our “End of Exams social” with dental family socialising beforehand. Our social secretaries are busy planning more socials, both daytime and evening outings, meanwhile our ball secretaries are planning the well-loved annual dental ball in November.

Diversity, which comes hand in hand with inclusions, is another pillar of SUDSS. Over the past few months, we have been working closely with Professor Gibson and the *EDIW Committee* and *Diversity in Dentistry Action Group*. We hosted a Q&A on Instagram featuring Dr Ali Khurram and several students answering questions about Ramadan, as well as a series of “**SUDSS x Diversity**” social media posts. We hope that through using SUDSS as a platform and raising awareness about different cultures and practices, we can better understand and support each other and make Sheffield dental school an even more inclusive and welcoming environment.

As a society, we are proud to support students both academically and non-academically. In April, our education secretaries organised a brilliant and well-received Anatomy Crash Course for 1st BDS students. They are looking forward to hosting our **Peer Assisted Learning (PALs)** programme, which has been extremely popular in past years. We are also excited to continue our “**Summer Webinar series**” which consists of topics ranging from paediatrics, restorative dentistry, periodontics and prosthodontics. We hope to introduce more hands-on sessions this year, to include suturing and anatomy drawing classes.

Sports is not only an important part of SUDSS but a great way to boost physical and mental wellbeing. With the relaxing of restrictions, we have been able to restart our training sessions; our sports secretaries have been working hard organising football teams and preparing for the Campus League. We are also restarting SUDSS hockey, netball and introducing, for the first time, rounders and badminton. Having been the proud winner of the BDSA Sports Day Trophy for the past few years, we look forward to defending our title in the next sports day weekend.

A really important part of SUDSS is our commitment to volunteering and serving the wider community. The chosen charity this year is the *Sheffield Children's Hospital Charity*, who we have the pleasure of working with again! We have some ambitious plans for the year, one of which is taking over Smile Squad, and with the help of the newly elected Charity and Year Reps, we cannot wait to organise more charity events and raise money for this amazing cause. With the move towards “green dentistry”, we thought that it would be a great opportunity for SUDSS to get involved with promotion of environmentally friendly practices. We have therefore added sustainability as one of our core pillars and together with the dental school, we are planning to introduce some sustainability initiatives.

Finally, a big thank you to all our lovely members who we have the pleasure of representing. The committee will be working hard to make SUDSS even more lit this year!

Connie Yan

SUDSS President 2021/2022



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