



University of
BRISTOL

*Newsletter of the
Bristol Dental Alumni Association*

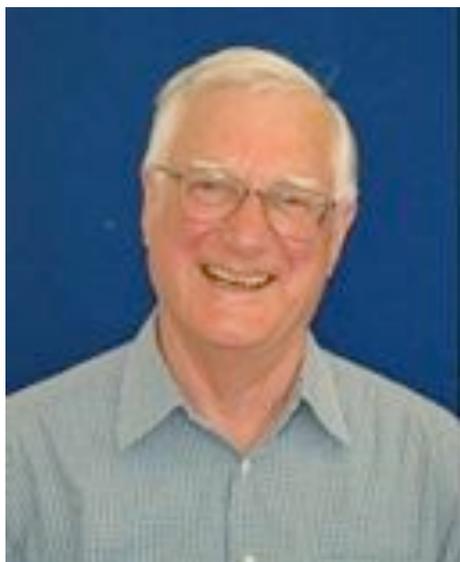
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From the Chairman/Editor



Another year, and another Newsletter – number 22 in fact, the first in 1990. But can it continue in its present form ? This is a question we must address. Printing costs have escalated over the last few years and Iain Hathorn, our watchful treasurer, is ringing alarm bells. We, and other University departments, have until recently enjoyed preferential rates with University of Bristol Print Services, but the University terminated this arrangement a couple of years ago as part of financial cut-backs and the effect on our printing costs has been dramatic. Our committee has been discussing the problem and suggestions to date range from retaining the current booklet format (but reducing the number of pages and raising funds from advertising or other sources) to producing an electronic version. These alternatives raise the question of whether members prefer to read from a 'hard' copy or from a computer screen (I won't say which I prefer – but you might guess). The Newsletter has been my 'baby' from the start and the feedback has been positive – I've even heard ladies say they take one to bed with them (though I have never been invited). We are going ahead as usual this year, but the future is uncertain. For this issue we are grateful for support from Wesleyan Medical Sickness, whose advertisement appears on the back cover.

The front cover displays what has become another Bristol icon, the *SS Great Britain*, following the Clifton Suspension Bridge and Wills Memorial Building that adorned the covers of our 2010 and 2011 issues. We are again indebted to Tony Cropper ('74). The old ship, hauled back as a rusty hulk from the Falkland Islands in 1970 to the dock where she was built in 1843, has been restored

to her former glory and is now an established part of the Bristol harbour scene. The *Matthew* moored beside her, a replica of John Cabot's ship, was also built in Bristol and was sailed across the Atlantic to Newfoundland in 1997 to commemorate the 500th anniversary of Cabot's epic voyage of discovery in 1497.

We welcomed two new members to our Committee last November: Tamara Khayatt and Lee Feinberg. Tamara has taken over from Hem Shah as Senior President of UBDSS and Lee is the new President of UBDSS. Tamara hails from Southampton and graduated in December 1993 in Bristol having been student president in 1992. She left Bristol for the heady heights of London for her VT year and subsequently pursued a hospital career working in Cardiff, Bristol, Plymouth and London – St George's and the Royal London hospitals. A highlight was spending a year working in the United Dental Hospital in Sydney sampling what oral surgery and life in Australia had to offer. She is now an Associate Specialist in Oral Surgery at BDH and divides her time between teaching students and providing care to patients. She has an interest in sedation (obtaining a diploma in dental sedation at Guy's in 2007) and providing oral surgery treatment for special care patients. Outside of work she enjoys meeting friends, travel and exploring Europe in a camper van. She aims to foster a closer relationship between current and past students through her involvement in the BDAA. Lee Feinberg is the new President of UBDSS. It was Bristol's turn to hold the annual conference of the British Dental Students Association this year, so Lee was hosting around 500 students from all over the country to the conference in March. In his spare time he enjoys the cinema and is planning to take up judo. He will be at the forefront of the drive to recruit 2013 graduates to the BDAA, as Shadi has been with those who will graduate this year.

2011 was another good year for reunions – five were held, and another two in January this year. Plans for another seven this year are currently in the pipeline. It certainly is a great reflection of the affection alumni hold for their dental school, and of the fond memories they have of their student days, that they continue to organise reunions, many at 5-year intervals (and a hard core of the '66Soc every year since graduation !). I feel we (the BDAA) can look back with great satisfaction at having promoted and encouraged year-group reunions over many years, but this would not have been successful without the enthusiasm of the organisers and the great response they have received from their colleagues. It is disappointing, however, to find that many alumni attending reunions have not joined our BDAA, some because they do not

know of our existence and others because they assume that, as University alumni, they are automatically members of our Association. I'm sure most of them would support our aims and be happy to join, so we should all do our best to inform and encourage them.

A meeting to celebrate the centenary of the first award of a Bristol BDS degree will be held on Saturday 17th November. All BDAA members should have received information about this along with an application form for attendance, but if any of you have not and would like to receive the information please contact Ken Marshall (his email address is on the inside front cover of this Newsletter, or postal at 65A Claverham Road, Yatton, N. Somerset BS49 4LD). There has already been considerable interest from alumni, including at least one group that will hold their planned reunion this year on the same weekend as the meeting. Chris Stephens gives more details of the meeting in his article on page 20.

Alumni who have joined tours of the Dental School in recent years have been amazed at the changes that have taken place, so much so that very little is recognisable as the place they once worked in. The same now applies to the library: bookshelves and books have disappeared and rows of benches with computers have taken their place. Jonathan Sandy and Gordon Gray in their articles in this Newsletter describe the new Computer-Assisted Learning and Study Centre. But the books have not been destroyed – they have been relocated within the Medical Library. Emma Place, the University's Subject Librarian for Dentistry, informs us that the demand for books is still high and that students are asking for more books and eBooks to be made available. We have donated another £1000 this year, adding to the nearly £12,000 we have donated since 1992. All this comes from the subscriptions of BDAA members, greatly appreciated by the Dental School and the University.

I look forward to meeting many of you at this year's reunions. Finally, as always, my thanks to all the contributors to this Newsletter, to Dominic Alder for putting it all together, to Nye Fathers for his patience in taking reunion group photographs, and Tony Cropper for the cover photograph.

Another Successful Year for Bristol

Gordon Gray, Dental Clinical Dean



Yet another year has passed at what would appear to be a record speed. This year, however, has been much quieter than we have experienced over the last five years or so during which time we have gradually acclimatised to our increased student numbers of 79 in each year.

One of the biggest changes this year has been the closure of the library in the Dental School. You may remember that last year I talked about how the National Student Survey of all final year students had highlighted that one area in which we could improve would be to increase access to library facilities. A committee was set up to canvas student opinion on this important matter and it transpired that our students were seldom able to visit the dental library during the normal working day and wanted to have greater access in the evening and at weekends. It also highlighted another important matter to the student body and that was to have greater access to high specification computers for learning.

Our alumni association (BDAA) has been a great supporter of the dental library over many years and will continue to be so. You will all be pleased to learn that the stock of dental books has been redistributed to a new section in the Medical School Library, while some other books have gone to the Education Building next door to the Dental School. A small selection of key texts has been retained for reference in the Dental School.

The Dean of the Faculty of Medicine and Dentistry – Professor Peter Mathieson – provided £100,000 to part-fund the transformation of our dental library into a contemporary study space equipped with 80 hi-tech computer terminals. The Computer

Assisted Learning (CAL) and Study Centre was officially opened on the 12th of January 2012 and was attended by Reg Andlaw, Chris Stephens and Iain Hathorn, representing the BDAA. This wonderful new facility allows students to study at their own pace and refer to e-lectures as many times as they wish until they are satisfied they have understood the topic thoroughly. The CAL Study Centre allows students access to a quiet study area during the day and for extended hours in the evening too. As this is adjacent to the two computer rooms, students now have access to over 100 computers for enhanced dental teaching in the undergraduate programme.

The new Dental Outreach facility at the South Bristol Community Hospital is now nearing completion and staff will move out there in April to prepare a patient base for our undergraduates attending in September. Currently, the dental units are being installed and all instrumentation has been purchased. This facility will be used for teaching the whole dental team, with hygienists and therapists being taught alongside the dental students and dental nurses. It is hoped that siting this new venture in Hengrove will attract school leavers to apply for future roles in the dental team. It is anticipated that a lot of the dental experience that our students will gain will come from working in this outreach facility where there is a lot of untreated dental disease. This may result in change in the way we teach in the Dental School itself but until the unit is operational we will not appreciate the changes that will be necessary.

The School of Oral and Dental Sciences has a strong research profile and we were considered fourth equal among dental schools following the 2008 Research Assessment Exercise (RAE). Another RAE is due to be conducted in 2014, but this time it will be known as REF (Research Excellence Framework) just to confuse the issue. Professor Howard Jenkinson will lead this exercise for us for the third time.

There is a strong link between clinical dentistry and basic scientific research that is fostered by the close proximity of the research laboratories and the clinics. This past year has been most successful in terms of attracting grants. Professor Jenkinson was awarded \$2.5 million from National Institute of Health Research (NIHR) Unit to continue his work in the Infection and Immunology Group, while Professor Andy Ness has attracted £4.5 million from Biomedical Research to continue his work in the Lifecourse Epidemiology and Population Oral Health Group. This latest grant is in addition to an NIHR programme grant worth £1.8 million and two 'Research for Patient Benefit' awards of £0.5 million each.

Not content with this, he has also recently signed a contract with The Healing Foundation worth £2.4 million.

Two of our recent graduates have been successful in attracting Fellowships worth £250,000 each: Holly Cole-Hawkins an NIHR Research Training Fellowship and Jennifer Haworth a Wellcome Trust Research Training Fellowship. Both graduated with honours and were targeted through the Academic Clinical Fellow (ACF) scheme. There are three further applications in place: from an undergraduate student, a lecturer and an ACF. This builds on a reputation and culture that we are establishing for developing young academics, and is unprecedented over the last 20 years.

We live in hard times in the world of academia. The General Dental Council has recently published its new 'Preparing for Practice' document in which they set out the learning outcomes that members of the dental team must achieve to gain full registration. These are now set out in the four domains of Clinical, Communication, Professionalism, Management and Leadership. There is a change in emphasis among the Learning Outcomes and the Education Committee has been busy re-arranging our BDS Programme to satisfy these changes as well as some imposed by a University-wide alteration to programmes. It will take five years for all of this to work its way through our curriculum, by which time we will be in need of a complete review of what we teach.

The applications for the BDS Programme this year continue to be as healthy as ever despite the introduction of the new £9,000 fees to students. Dentistry is still perceived as a career with excellent prospects for future employment and, therefore, still attracts a strong cohort of students. Dentistry will not be among the 6,000 additional students with achievements of A,A,B who will get places at University of Bristol next year – we are exempt from this as we have a finite amount of clinical space.

This year saw the introduction of Dental Foundation (DF) training for England and Wales in place of Vocational Training. For the first time ever there is a group of students at each dental school who have not secured a training place. The idea of a unified interview process taking place in only five centres across England is good, but the reality has not lived up to expectations. The dates of the interviews were known and this was to eliminate the need for students requesting time off to attend multiple interviews for individual schemes. However, they have still had to take time off at short notice to attend 'job shops' for their chosen schemes. This is at a time when Finals Exams are looming and their time would be better spent on their studies. For those students who have not

been accepted for a place on a DF1 training scheme, this is a depressing and demoralizing time.

The Dental School welcomes Dr Nigel Robb as a Reader in Restorative Dentistry. He has joined us from Glasgow Dental School where he was responsible for the teaching of sedation. He graduated from University of Edinburgh in 1982 and this was followed by a series of junior hospital jobs before he gained a post as a research assistant at Guys Hospital where he completed his PhD studies in toothwear. Thereafter, he held some lecture posts starting in Newcastle, where he set up the teaching of sedation in the undergraduate curriculum and established the first postgraduate Sedation Diploma in the UK. He is the current President of SAAD.

We look forward to the challenges of the next year and I am sure we will be able to face them with our usual vigour.

The Students' Year

Lee Feinberg, UBDSS President



It is almost a year ago now that our committee was elected to take over the running of the University of Bristol Dental Student Society (UBDSS) and we are also joined by a new Senior President Dr Tamara Khayatt. It was at the slave auction organised by the previous committee and held annually to raise money for various good causes that our committee was announced, and since then we have been very busy. In the excitement of the event a group of us bid a relatively large sum for a wine tasting hosted by Professor Jonathan Sandy. To give you an idea of how busy we have all been, we are yet to arrange a date for this, almost a year on. So the question is: what have we been up to over the last ten or so months?

Our fifth years have been kept very busy with a newly introduced national recruitment for Dental Foundation training and of course they are now working hard preparing for their finals. The rest of us have also had an abundance of exams but we have ensured there have been plenty of dental socials to help keep

everyone smiling. Whilst talking to Reg Andlaw and other members of the alumni committee it was interesting to hear that not much had changed in that the dental bar is still a hub for students to socialise. Most Tuesday and Friday evenings you will find several handfuls of students from all years sipping on a beer, but it is the 'late bars' that are held a couple of times a term that are most fun. Each late bar comes with a theme, the most recent inspired by American teen movies – the 'Spring Break' - themed night was full of Hawaiian shirts and swimwear. But in my opinion the Halloween late bar was the best of the year with some truly terrifying outfits and even more terrifying blood-coloured punch.

A new social this year was a charity bake-off. Students baked cakes which were then to be raffled off in order to raise money for Bridge2Aid, but first Dr Gray and Mrs Parrott kindly volunteered to taste a small sample from every single cake (there were over 30 entered) in order to decide upon a winner who would win a pair of Loupes. It was a tough task but a winner was decided upon by our expert judges.

The most glamorous event every year is the Dental Ball which took place in January. It was an excellent Ball and the fifth years did a great job in creating a convincing Narnia theme – there was even a wardrobe through which you had to pass to enter the ballroom. This was the first of two Balls that took place this year for students in Bristol. The second was to culminate the British Dental Students Association (BDSA) Conference which took place mid March. The Conference saw 500 students made up of literally every dental school in the UK come to Bristol for a three-day event including lectures, a trade fair, evening social and, as previously mentioned, the Ball. After over a year of planning, the weekend was a great success. It gave Bristol students a great opportunity not only to learn from the educational aspects of the conference but also to socialise with and form new friendships with like-minded students from dental schools up and down the country. At the AGM of the BDSA I was fortunate enough to be voted as President and Paul Davies, who is also a fourth year student, was voted in as the communications officer.

As our term for this UBDSS committee comes to an end we have one final event to organise: the dental review. This will take place in May and we hope to follow in tradition and give our fifth years a thoroughly memorable send-off.

I would finally like to say a very big thank you to the Bristol Dental Alumni Association who have generously continued to support us as students. Many thanks.

STUDENT ELECTIVES

Orofacial injuries in waterpolo – a study in Australia

Andrew Curren and Joel Thomas



Oro-facial injuries are sustained frequently by participants in contact sports and also in some sports that are considered non-contact. Knowledge regarding the frequency, character and cause of sporting injuries is important as it can aid prevention and help efficient management of injuries. Several articles have been published regarding injuries amongst waterpolo players but there is little information regarding the type and distribution of orofacial injuries sustained when playing the sport.

The objectives of our project were to determine the prevalence of oro-facial injuries among male waterpolo players competing in the British National League Division 1, and to determine the prevalence of the use of sports mouthguards among those players.

All men's teams in the British National League Division 1 were included in the study. The manager of each team was contacted via e-mail to request written consent to approach their team. Questionnaires were given to each team manager to distribute to all their players selected to compete in a National League competition weekend during the 2011 season. The questionnaire sought information about injuries sustained while playing waterpolo and about the use of protective sports mouthguards. Injuries sustained were categorised as 'facial', 'lip and tongue' or 'dental'.

One hundred and thirty-three questionnaires were distributed and 116 were returned (87% response). The results showed that 94% of respondents reported experiencing some form of oro-facial trauma whilst playing, 41% of which involved injuries to the teeth

and 35% fracture of at least one tooth. The majority (71%) of players believed mouthguards to be effective, and yet 90% reported never wearing them during play.

There was no statistical significance between the prevalence of oro-facial injuries in players using or not using mouthguards, probably because the very small sample size of players wearing mouthguards made statistical tests less valid. As a result of this, further investigation is indicated, ideally in a country such as Australia where mouthguard use in waterpolo is much more prevalent. It would also be very useful to investigate the reasons why players do not wear mouthguards despite knowledge of their effectiveness.

A review of prison dentistry in the UK

Jonathan Stenson and Jonathan Cochrane



Prison dentistry is seen by many dental students as an intimidating career path to follow. So when we were mulling over the focus of our elective project, we decided that the relatively unexplored field of prison dentistry in the UK offered us intriguing yet fascinating prospects.

After examining the current literature available regarding prison dentistry, it was clear to us that there is a lack of substantial and high-quality material written about this particular field of dentistry. The few studies available informed us that:

- Prisoners' dental needs are high
- There is an increased risk of litigation by prisoner patients against dentists
- The Department of Health (DoH) have set waiting list targets of less than 6 weeks
- Illicit substance use within prisons is higher than that in the wider domestic UK community with a 10 – 48% prevalence of use by male prisoners

- It is difficult to refer prisoners outside for specialist treatment

The aim of our project was to investigate and review the level of dental care offered to prison inmates in the UK. In order to achieve this we utilised three research arms:

- Attended the National Association of Prison Dentists in the United Kingdom (NAPDUK) Annual Conference, February 2011
- Visited Her Majesty's Prison (HMP) Eastwood Park, where we shadowed a prison dentist
- A questionnaire provided to all members of the NAPDUK

This year the NAPDUK conference was held in Birmingham's botanical gardens. The conference was a fantastic opportunity to speak to practising prison dentists and garner a better understanding of this niche profession and why they have chosen to work in it. Our networking allowed us to tailor our questionnaire based on the thoughts and concerns of practising prison dentists, providing us with a more valid set of results.

We were both fortunate enough to be able to visit a local prison which incorporated its own dental practice within the prison grounds: HMP Eastwood Park in Wotton-under-Edge, South Gloucestershire. This is an all-female prison which houses inmates who have been convicted and others who have not yet received their final sentencing. Therefore, there is a moderate turnover of prison inmates as it acts as a half-way house before they are moved on to more appropriate accommodations according to their sentences. HMP Eastwood Park has an operational capacity for 362 inmates and, due to the current situation with overcrowding in prisons in the UK, it normally operates at close to its maximum capability. We were both able to attend on independent visits and observe one afternoon of patients being treated by the resident prison dentist (Dr. Alan Canty) and his dental nurse (Carole). This proved to be an eye-opening experience and gave us both a much better idea when thinking about how the dental system operates within a prison compared to our own experiences so far at the Bristol Dental Hospital (BDH).

The patients' needs were a mixture of prosthetics and restorative. Where restorative work was indicated, there appeared to be extensive treatment required, whether it was for new or replacement of fillings, crown-work or even extractions (sometimes multiple!). The majority of patients had poor oral health and we noticed most already had quite heavily restored dentitions. The level of treatment each patient required seemed quite significant compared to our own previous personal

experiences in the BDH. However, we could see that the relationship between the inmates and the dentist was a healthy and mostly friendly one. In addition, one thing we noted was a concern for patients who did not attend their designated appointments. As inmates are based within the same grounds as the dental practice we did not expect there would be a problem for access; this seems to not be the case.

Our questionnaire was supported by the NAPDUK; this enabled us to reach their entire membership base of over 100 practising prison dentists in the UK. From this base we received 34 independent responses. We found that 86.2% of respondents were of the opinion that the medical histories for prisoners are different to those normally encountered outside of the prison environment. Prison dentists offering 5 or more clinical sessions per week had waiting lists of fewer than 6 weeks whilst those offering 4 or less clinical sessions per week had waiting lists in excess of 12 weeks. In general, prison dentists feel there is not enough time in clinical sessions because there are too many patients to treat.

When we asked whether they felt that prisoners' dental needs were being met, 48.3% replied 'yes', the other 51.7% replied 'no'. Interestingly, dentists who feel more at risk from litigation when working in a prison also feel more in need of greater dento-legal advice. However, all but one of the respondents would agree or strongly agree that their relationships with prisoners are in general pleasant. Some notable findings were that intra-venous sedation was not offered by any of the respondents or their prisons, and that private treatment was not available to any of the prison patients. Finally, we found that oral health instructions and smoking cessation advice were delivered on an individual basis.

In summary we believe that prison dentists do encounter significant challenges on a daily basis which they must overcome in their pursuit to provide optimum patient care. Our main findings were that the number of clinical sessions offered need to be increased to reduce waiting list times, and there was a split as to whether prison dentists believed that prisoners dental needs are being met. Finally, prison dentists are in need of more dento-legal support than dentists working outside the prison environment.

Obstructive sleep apnoea: a multidisciplinary approach to non-CPAP treatment

Shadi El-Basyuni



Obstructive sleep apnoea (OSA) is a common sleep disorder that causes interrupted breathing during rapid eye movement (REM) sleep. These interruptions in breathing cause the characteristic gasp for air as the sufferer awakens to regain a patent airway. The disruptions of sleep can occur over 30 times per hour and in extremely severe cases can occur more than 100 times per hour.

The effects of OSA on a patient occur on two levels. Firstly, and understandably, the patient generally does not feel well (morning headaches, low energy levels, loss of libido, deterioration of memory and depression are all very common) and, secondly, physiological effects, which would not be as appreciated by the patient (it has been shown to be a risk factor for diabetes and many cardiovascular sequelae). OSA does not only have negative effects on the patient; untreated cases have been estimated to cost the NHS £432 million pounds per year.

Sleep apnoea is an extremely difficult condition to manage. Diagnosis is difficult, and successful treatment is even more difficult. It has only gained public attention in the past couple of decades and unfortunately is now being stigmatized as a condition of overweight men who drink too much alcohol. This poor judgment of the disease is predominately caused by a lack of understanding of the condition; however it poses a big threat towards successful management. Having this light-hearted approach towards the condition not only reduces the cases that are diagnosed but can also interfere with providing meaningful and successful treatment.

The current 'gold-standard' treatment for OSA is the use of a continuous positive airway pressure (CPAP) machine. During sleep, the patient has to wear a mask that is connected to an air-pumping machine. CPAP is 99% successful in eradicating the

breathing disorder; however (and understandably) compliance can be as low as 50%.

My project aimed to combine a literature review with an observational study to try and clear up some of the grey areas surrounding the condition. Emphasis was placed on trying to understand the best clinical practice with regards to non-CPAP treatment, and to explore the potential role of the dental profession.

The observational element of the project saw me flying out to Washington D.C., USA to observe a specialist multi-disciplinary team who manage this condition. For a month I shadowed the team, which included an oral and maxillofacial surgeon, an ENT surgeon and dentists.

I stayed with my cousin and his wife in their lovely townhouse in McLean, Virginia – roughly 20 minutes from the centre of Washington D.C. Everything is a lot more spaced out in America; it was built for cars and it soon became evident that I needed one to get from A to B. After ordering a ‘mini car’ from the rental agency, I was surprised when they presented me with a 5-door saloon. I was assured that my car was considered a small car in the US and this was confirmed on my first highway journey, dodging in and out of cars that were double the size of my living room! Without a car my trip would have been very limited. It is impossible to walk to places unless you are in the centre of a city and the car allowed me to explore more of the surrounding areas. Parking was not an issue; it was normal to see shops the size of a Tesco Express with a bigger car park than at a UK shopping centre. Another shocking aspect was the number of services that were offered as ‘drive-through’; coffee shops, post offices and even ATMs did not require you to leave your car!

The working week was very busy, especially as both my cousin and his wife work long hours in the hospital, but the weekends were very relaxed. Walks and group BBQs around the Potomac River were very common and the food was incredible. However, my favourite weekend activity was our road trip to Jersey Shore. We spent one weekend in the family home in New Jersey and it was amazing – their garden was straight onto the sea!



Moving back to the elective project, I was able to see the full management of OSA in the Wahington Hospital Center and also

get a feel of what American health-care was like. The work and care I observed was top quality, but unfortunately a bitter taste was left in my mouth by a flawed insurance system. Nevertheless I managed to explore the two non-CPAP treatment options of OSA: oral appliances and surgery.

I started to appreciate why OSA is such a difficult disorder to manage. The different definitions of various aspects of the disorder create a huge problem. There is no universal agreement on diagnosis, severity or successful treatment criteria. This issue needs to be addressed, not only to improve the management of the condition but also to minimize unnecessary and unsuccessful treatment.

There are significant benefits associated with treating OSA, not only for the patient but also economically. From my observations and literature review I was able to formulate the following conclusions:

Oral appliances currently available are a heterogenous group of devices, which creates a situation that demands scientific analysis to assess the efficacy of the different-styled devices. Unfortunately definitions of success used by different studies also vary, creating difficulty when trying to carry out this analysis. A consensus must be reached on definitions of treatment success so that a meta-analysis can be carried out to guide best clinical practice.

- Overall, treating mild-to-moderate cases of OSA with oral appliances is considered successful. In fact the American Academy of Sleep Medicine recommends the use of oral appliances to treat these cases and also suggests their use for patients with severe OSA who cannot tolerate CPAP and refuse surgery.
- If oral appliances are not constructed by dentists they generally have disappointing long-term results (62%).
- Surgery can be divided into two groups: soft tissue surgery and orthognathic surgery. Soft tissue surgery is generally carried out by ENT surgeons. Many people feel that orthognathic surgery (carried out by oral and maxillofacial surgeons) should only be carried out if soft tissue surgery fails.
- Soft tissue surgery has success rates as low as 42%. Oral appliances have success rates of 50-60% (with significant improvements if no 'cure'), and orthognathic surgery has success rates of approximately 90%
- Many people are reluctant to have orthognathic surgery after

soft tissue surgery has failed due to financial and personal reasons.

I then went on to construct a flow chart for the management of sleep apnoea which takes into consideration my findings. I found that a lot of treatment was being carried out without strong scientific evidence, as if there was another incentive for the procedure to be carried out. I felt that it was wrong to put a patient through an irreversible procedure that has success rates as low as 42%, especially seeing as oral appliances are a non-invasive alternative with better success rates.

In summary I feel that CPAP should still be regarded as the 'gold-standard'; however, patients who cannot tolerate it must be offered an alternative. Initially oral appliances should be offered alongside life-style changes. If the condition is still not controlled, orthognathic surgery should be the only surgery that is considered, as soft tissue surgery is too experimental and has a very low success rate. Oral appliances can be made by dentists or orthodontists and the surgery can be carried out by oral and maxillofacial surgeons. The poor compliance to CPAP creates a huge demand for non-CPAP treatment, in which the dental profession can play a central role.

I thoroughly enjoyed my elective project. The travelling mixed with the work made it very enjoyable. I also loved the opportunity to combine observation with literature to formulate my own opinions on a complex issue. None of this would have been possible without all the help from the alumni. So from me, a big thank-you to all of you, not just for this project but for all your support to Bristol Dental School.

I will sign off this report by wishing you all many pleasant uninterrupted sleeps to come!

THE NEW COMPUTER ASSISTED LEARNING (CAL) AND STUDY CENTRE

Jonathan Sandy



The new Computer Assisted Learning (CAL) and Study Centre was officially opened on Thursday 12th January by the Dean of the Faculty, Professor Peter Mathieson. The Dean had funded this project with £100,000 – additional monies were needed but the majority came from the Faculty. On the site of the old Dental Library the CAL centre has 80 hi-spec PCs available for student use, and in addition will house e-assessments and interactive lectures. There will also be full projection/audio facilities in place this year. Both of the smaller CAL rooms still remain, meaning we now have almost 100 PCs available for use. This brilliant new facility will enhance our dental teaching enormously. Professor Mathieson referred to the NSS survey which had highlighted the wish of students throughout the Faculty for improved access to study and library space over extended hours. This will be possible in these new facilities.

The decision to re-configure was not taken lightly. A number of meetings had been called with the students, and some useful pointers as to how this might be configured were provided by the students. Most students said that they did not often use



the library during “working hours” because of clinical commitments. The consensus was that it would best be “somewhere quiet to work, with some common texts available”. Relatively few students used the library in its traditional sense. Students variously used the Arts and Social Sciences library, the Education Centre (NHS) Library, the Medical School library, the Computer Centre and the Wills Library. It seemed that most students recognised they used the library on only one session per week through the term with a greatly increased use at examination times. The development of e-books means that libraries in the future will be predominantly virtual.

We were pleased that three distinguished retired members of staff, Dr Reg Andlaw, Professor Chris Stephens and Mr Iain Hathorn, were able to attend the official opening, representing the BDAA which has provided generous support for BDS student teaching and learning for many years.

BRISTOL BDS CENTENARY CELEBRATIONS

Chris Stephens



Bookings for our Centenary Meeting on 17th November are proceeding well. A booking form has been sent out to all members of the BDAA but if you have mislaid yours it is downloadable from the news page on our website (www.bristoldentalalumni.co.uk).

The provisional programme is as follows:

10.00am Reception at the Dental School - an opportunity to mingle and to form tour groups.

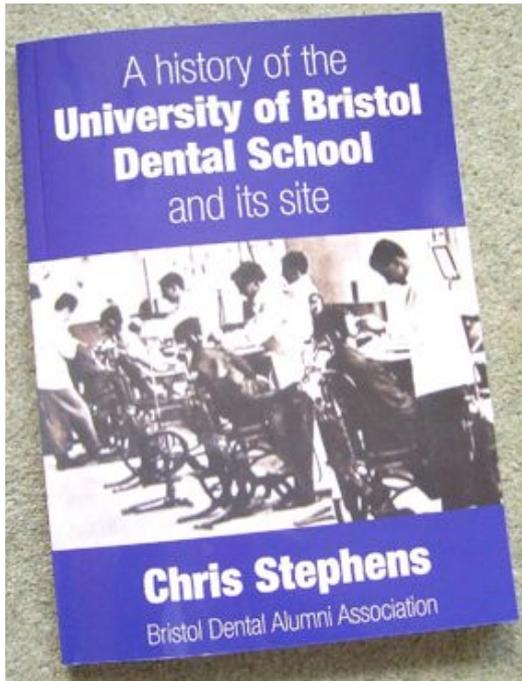
11.00am Tours of the School led by staff and students.

12.00pm Centenary Lecture - *Romans and Reamers, Friars and Forceps, Molars and Moravians - 2000 Years on Maudlin Street*

2.30pm Buffet lunch

The lecture and lunch will be at the Trust Teaching Centre, opposite the BRI.

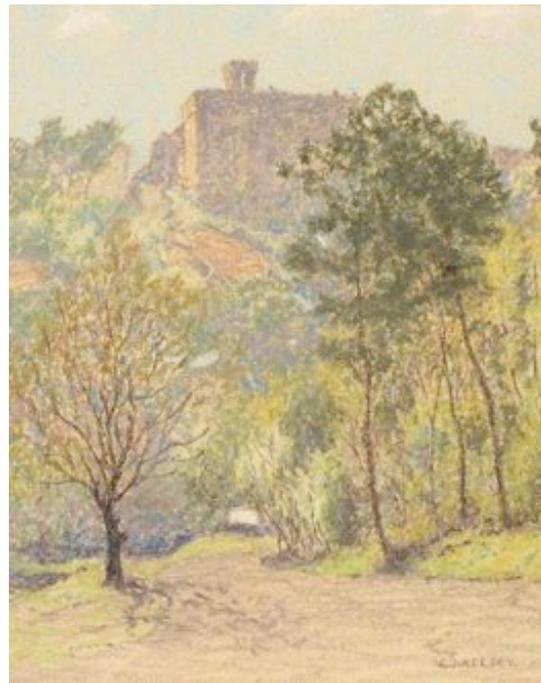
In addition, our 1886 dental chair with its 56 carved names of past resident house surgeons will be on display, as well as Mr Mattock's old foot engine and other historic items. We have recently purchased a painting by the first dentist to obtain the Bristol BDS in 1911, Charles Kelsey. This preceded the first Bristol student to qualify with the new degree one year later (George Fawn), as Charles J. Kelsey had already qualified LDSFPS Glasgow in 1898.



Lunch and a copy of the new Centenary book are included in the cost of the meeting and non-dental spouses are welcome to attend at a reduced rate which excludes the book. The afternoon has been deliberately left free for Christmas shopping. Despite the recession the new Bristol shopping centre at Cabot Circus in Broadmead is doing well (see www.cabotcircus.com) and we now have our own Bristol Eye!



The dental chair



The Kelsey painting



1976 reunion, 5-6 November 2011

Back Row: Hugh Devlin, Raman Bedi, Dave Reekie, Steve White, Paul Davies, Dave Hardy, Paul Baines, Pete Grime, Jackie Thackeray, Bill Falconer Hall, Neil McDonald, Carol Robinson, Geoff Van Beek, Peter Duke.

Front row: Jane Wood, Jude Fieldhouse, Anne Muirhead, Clare Foster, Louise Sowden, Sophie Rudge.



1981 reunion, 19 November 2011

Back Row: Andy Whimpany, Rhodri Bevan, Gordon Shovlin, Tim Davies, Dave Eley, Dave Lane, Kevin Hardwick, Andy Lems, Mike Wilcox, Abhaya Soneji, Kevin Allen, Pete Sedgewick, Stuart Lawson, Tidu Mankoo, Robin Lesley, Adrian Smith.

Front Row: Sue Battersby, Fiona Eley, Kay Shovlin, Penny Hedley Smith, Ann Millward, Diane Martin.



1996 reunion, 5-6 November 2011

Back Row: Chris Crook, Chris Davies, Alison Winham (Brokenshire), Dafydd Davies, Tom Hartridge, James Kingham, Ian Byford, Mark Eddleston, Liam Addy, Hooman Sanaty, Simon Watson.

Front row: Kate Starling (Betts), Suzanne Gamon (Hart), Fiona Leese (Bain), Catherine Matthews (Tothill), Carol Gough (Somerville Roberts), Ciara Scott, Mike Edwards.



2006 reunion, 12 November 2011

Back Row: Samantha Stewart, Georgina Cartwright, Rachel Windhaber, Oskar Mason, Kellie-Jo Hall, Lucy Jones (Farrant), Tim Jones, James Crossland, Simon Burgess, Ric Brown, Simon Madigan, Imran Nasser, Chris Chisholm, Tom McHugh, Rushin Patel, Harman Chahal.

Front Row: Claire Dunbar, Hannah Woolnough, Kali Patel (Ranshi), Katie Ernst (Noble), Simon Ernst, Sandeep Achar, Anni Bedford, Tina Lui.

ALUMNI REUNIONS

1966 (66Soc) REUNION, 21st January 2012

Bob Binnarsley

The 66 Society is drawn from those dentists who graduated, as the name implies, in 1966. A band of regulars with guests and partners have met every year since graduating, and celebrated their 45th anniversary this year with a dinner at Giuseppe's Restaurant, Baldwin Street, Bristol. Pre-dinner drinks were taken at the Llandoger Trow public house.

A gathering of 27 members attended, including Sister Davison (who still takes an active interest in all retired members of staff, dental alumni and dental nurses) and Reg Andlaw, who has organised the BDAA for many years. Notable members were Dr Martin Betts and his wife Jan who flew over from Richmond, Virginia, USA especially to attend. Others travelled from various parts of the country, even from as far as Redland, Bristol!

There was voluminous talk enhanced by fine wine and an excellent meal. It is a sad reflection of the aging membership that only two members present still practise the noble profession: Pete Easton and Bob Binnarsley. However, it was noted that the retirees seemed more than happy with their lot! Ian Smith, who seems to spend a lot of time travelling abroad, is being considered to be elected as overseas representative. There were fringe meetings on Friday evening and Saturday lunchtime for the true enthusiasts, where excess mirth was the order of the day.

If you are associated with the 1966 crowd and would like to catch up at a meeting, contact Bob Binnarsley at bobwbin@aol.com.

1976 (ROOT '76) REUNION, 5-6th NOVEMBER 2011

Louise Nash

It scarcely seemed possible that yet another five years had passed since our last reunion, but here we were again, the faithful band, if only to check out who had managed to retire before their pensions have disappeared altogether and who would be soldiering on for another few years.

Not wishing to break the mould, Paul Baines, Geoff van Beek and I decided to stage a repeat performance from previous gatherings, so the tried and tested Marriott Royal Hotel was again

the venue of choice. There were moments when it seemed it might not happen, but we kept optimistic and, as always at the last minute, we fielded a goodly number of Rooters.

The weekend got off to a splendid start with a fun evening at Guiseppe's Italian restaurant in Baldwin Street, with plenty of hugs



and conversation. We were delighted to see Graham Charlton and his partner who had travelled down to the West Country and kindly included us in their itinerary; he was looking on good form and seemed to enjoy the gathering.

Ken Marshall and Graham Charlton

Saturday morning was spent in a nostalgic tour around the Dental Hospital. For some it was their first visit since graduation and it tested the little grey cells to remember the lay-out from those halcyon days, with all the changes that have happened since. We were very grateful to Ken Marshall for his words of wisdom on the guided tour, as he had orchestrated many of these changes in his former role as Clinical Dean.

For old time's sake, a light luncheon was taken at the White Hart, and the afternoon was spent listening to several members of the year presenting their current activities and exploits. Carol Robinson was very enthusiastic about her new role as educational facilitator at Peninsula School, Hugh Devlin presented a very amusing Pathé news-style guide to full dentures (might use some of those tips, Hugh!), Raman told us of his role with the Global Child Dental Fund & Task Force, while Alan Canty gave us a fascinating insight into women's prison dentistry. Anne Muirhead showed us some lovely slides of her garden restructure and Neil McDonald brought us up to date on his activity as Clinical Director for the PCDS in Cornwall and the Isles of Scilly – sporting a 'shiner' acquired on the squash court! Louise Nash related the development of the new Outreach teaching department in South Bristol which will be opening in April to give final year students more experience of primary care dentistry before they embark on Foundation Training. Pete Grime's tales of his tour as attendant

medic for the Georgian rugby team at the World Cup were very entertaining and Bertie Jukes's forensic identification of a World War 2 fighter pilot showed his mastery of the wonders of digital photography. A 'match the offspring' quiz proved very easy in some cases and more difficult in others (Geoff van Beek had asked us all to send in photos in advance) but the audience seemed to think there were a disproportionate number of daughters attributable to Paul Baines!

The day was rounded off by a drinks reception and dinner where we all caught up on our news and experiences. Steve White entertained us with his usual wit and repartee and Chris Stephens stepped up to the plate to respond for the guests with very little notice (sorry Chris!). Reg Andlaw also attended, giving his usual support for our Dental Alumni Association.

We were sorry that Phil Key was unable to join us this time and hope he will be up for the next instalment, and we also wish Diana Ostick better health so she will be able to join us. Our thoughts go out to the families of Glen Buxey-Softley and John Simpson who very sadly are no longer with us.

Group photograph on centre page

1981 REUNION, 19th NOVEMBER 2011

Gordon Shovlin

To keep up with the latest technology and to save time, I will be dictating this review to 'Siri' my new iPhone personal assistant. So here goes.

The Class of 81 held their 30th reunion at the Marriott Royal Hotel Bristol on the 19th of November. "*19th November. Gordon, would you like to create an event?*" No thank you Siri, the event has happened, it was last year. We had a good turn out with 22 alumni, 16 partners and 2 staff. "*Calculating.... 22+16+2 result 40.*" Yes indeed, a total of 40 met at the Marriott although we nearly lost Kevin Hardwick who mistakenly joined the Occupy Bristol camp on College Green thinking we had arranged a more informal event this year. Old acquaintances were rekindled with pre-dinner drinks, followed by the obligatory souvenir group photo which will serve as a useful reminder to me as to who still owes money.

Dinner passed uneventfully. Then it was on to the highlight for some: the speeches. Kevin Allen opened proceedings. "*Searching the internet Gordon would you like to see images of*

Kevin Allen?” Not now thank you. Kevin gave a highly entertaining speech enhanced by a slideshow of old student photos and topped off with a tale about a night out involving Mike Wilcox, Kevin and a sausage. “*Searching the internet Gordon would you like to see images of Mike Wilcox, Kevin and a sausage?*” I don't think that would be appropriate, can we move on please?

Next up was Professor Chris Stephens. “*Searching Wikipedia – Professor Chris Stephens, one-time professor of Child Dental Health Bristol Dental Hospital, dental alumni webmaster, historical burial sites researcher, champion dry stone waller, collector of obscure dental student memorabilia.....*” Thank you Siri that's enough of that. As I was saying, Professor Chris Stephens, in return for a hot meal, kindly gave up his evening to talk about the work of the Bristol Dental Alumni Association and his forthcoming book. “*A History of the University of Bristol Dental School. www.amazon.co.uk low prices on a History of Bristol Dental School. Free UK delivery.*” The book will officially be launched at the centenary celebrations on 17th November (no doubt you will be able to read about this elsewhere in this Newsletter), but we were very fortunate to be given a taster of what is in store. If you have ever wondered what went on under the floorboards of the student common room, I would suggest this is a 'must buy' for all alumni members, especially as the proceeds will be going to the Association.

After the speeches the dance floor was abandoned to catch up on all the gossip, and before we knew it we were being ushered out of the function room to see in the wee small hours in the hotel bar. Special mention and congratulations go to Jude Gamblin for attending after having completed an ultra-marathon in the Brecon Beacons on the same day – that's 45 miles – and Jude finished in a very impressive 4th place. Thanks also to Warren Gamblin for admitting that our year group are a lot more fun and interesting than his (class of 80) – as if we didn't know that already! Stuart Lawson had his own drinking marathon going on that day but unfortunately couldn't take the pace and ended up turning a whiter shade of pale and falling asleep whilst waiting for his taxi home. “*Searching your music collection...now playing 'a whiter shade of pale' by Procol Harum*” . Siri, can you please just keep to the text dictated. “*Searching for 'ex dictator'..... Saddam Hussein, Kim Jong Il, Steve Jobs.....*”

I think we best leave it there. Suffice to say, a good time was had by all and we look forward to seeing many of you at the centenary celebrations.

The end. Now run along and make me a coffee Siri.
“Gordon, my end user licensing agreement does not cover making coffee. My apologies.”

Group photograph on centre page

1986 REUNION, 14th JANUARY 2012

Jon Moore

The class of 86 held their reunion, to mark 25 years since graduation, in the Avon Gorge Hotel on 14th January 2012. This iconic location was chosen for its spectacular view of Brunel's historic suspension bridge, for the memories of warm summer evenings spent on its terrace that it would inspire in the hearts and minds of those attending, and for the price of the cheapest bottle of house wine on the wine list!

The weekend started for some with a few drinks and a curry on Friday night in Clifton. So far, so very 1980s. The departure from old habits came on the Saturday morning when a few of the participants from the night before went for a mountain bike ride round Ashton Court and Leigh Woods for a couple of hours to work off the hangover instead of going back to the pub for a hair of the dog! A case of wisdom coming with maturity, or fully blown mid-life crisis? Whichever, the man or woman who invented Lycra has a lot to answer for!

Saturday night saw a return to tradition with a black tie dinner and 1980s disco. The last 25 years would appear to have been relatively kind to the thirty or so members of the year who met to catch up with old friends. Most appeared to have aged very little since the last reunion five years ago, and as far as I know all are still on original hips. Many of those present, it has to be said, looked considerably better than they did on their original mugshots from the dental school, and photos from the yearbook which had appeared to embarrass most of those present. Interesting to note how the vandal who ripped those photos from the wall has now become a valiant conservator of the Dental School archives.

The evening was enlivened by a demonstration of Celtic curtain dancing from a certain Welshman, which if it didn't actually bring the house down, certainly dislodged the fire exit sign from its moorings. The usual suspects ended up in the bar in the early hours of the morning, proclaiming, just like last time, that they wouldn't leave it five years before they all meet up again! In which case why not make the effort to come along to the Bristol

BDS Centenary celebrations this year? If anyone is coming along and would like to meet up then please let me know and I'll do what I can to help.

Many thanks to all who came along. It was a pleasure to welcome, in no particular order other than alphabetical, Dr Reg Andlaw, Iain Hathorn, and Professor Chris Stephens. Their continuing support for our alumni association is as enthusiastic and unflagging as their attempts to turn a motley bunch of raw recruits into fine upstanding members of the profession once was.

1996 REUNION, 5-6th NOVEMBER 2011
Daffyd Davies

It has been written that “the past is a foreign country”, and it felt as I'd been the one to cut up my passport. I had 'skipped' the last reunion in 2006, and was startled to find, firstly, that another 5 years had passed, and then how strong the desire to see so many of my colleagues, tracked down by Fiona (Leese/Bain) – round of applause – in her role as organiser for this reunion. Once the usual back and forth vis-à-vis dates had passed I was one of the first to sign up and pay my dues. I then waited for November with mounting curiosity about how I would find everybody, and, more narcissistically, how they would find me. Ten years is long time.

I travelled down to Bristol, for the first time since our graduation ceremony, on the Friday, in the belief that as the first item on the official itinerary was the 11 o'clock tour of the Dental Hospital, many would be like me and arrive the afternoon prior to this to save journeying unreasonably early on the Saturday morning. All was straightforward until it came to dealing with the Bristol's central one-way system. After only a handful of laps of honour I parked at the multi-storey car park, where, upon asking the guard how an NCP car park 'worked' (I come from the country), I swear one of the first things heard from a Bristolian was “Where's it to?” I was back.

I chose to stay at the hotel where the dinner would be undertaken the following night, the Hotel du Vin. This was rather a luxury for two nights but I thought it a legitimate indulgence. Were the reunion to go badly and I was to be ostracised to my room, it may as well be a good one. Which it was: flattering lighting (so much so that I wore my polo shirt inside out all of the Sunday), a wet room, free-standing bath and a coffee machine (by my bed!). Not a standard of living I (or many of our number, it was observed) took for granted! I drank all the free coffee to offset

the costs of the stay, later discovering some of our number stripped their rooms of all but the wallpaper to this same end. Emboldened by caffeine I headed for the communal lounge to meet with all those who had made the same decisions regarding travelling as I had. Every half hour. There were none. This was going to be the most expensive night of television ever.

I remembered that Fiona had alluded in one of her emails to a prospective gathering at the Dental Bar (smaller than it had been, stickier than ever). So I headed there to find myself in time to face an exodus of the (assumed) student body, leaving a paltry three people there including – could it be? – yes it was : Ciara Scott! So I hadn't come on the wrong date, or been purposely misled whilst everybody else partied up in, say, Edinburgh! All alone, your mind (troubled) will postulate these things.

Ciara and I were at this moment the only people we recognised in Bristol. Having flown over from Ireland, she was due to stay with Carol (Gough/Somerville Roberts). We decided to make the most of our mutual discovery and returned to the hotel bar for a glass of wine and to catch up. Midway through our wine we recognised another of our year: Lorna McCourt/Lavery. Thrilled that our number was further expanded we hailed her, and welcomed her back. Only it wasn't Lorna – she's in Australia ! After apologising to the very pleasant pseudo-Lorna we set off for Clifton village, noting how our old stomping grounds had held up, fascinated by the unexpected revelation of the once familiar: streets, houses (hostelries) having associated memories, long since suppressed, now dredged up. Before taking a taxi to Carol's, Ciara received a message that Fiona and Kate (Starling/Betts) were at Jamie Oliver's restaurant in Park Street. It transpired that this was in the old Blackwell's, which had been 'Amazon'-ed out of its old home to something more compact. They, and Jim (Kate's husband), had pretty much finished their meal, so we took off for a couple of drinks and a catch-up, after which I skipped down Park Row and Maudlin Street(s) to my hotel, and elated failed to sleep very much.

The following morning after a spree through Bristol (everything, and nothing has changed) a cluster of us met at 11am to take the tour of the Dental Hospital curated by Dr Gordon Gray. Coincident with our visit was another group of 'reunionistii' that preceded our time by 20 years. Dr Gray's tour was detailed without being overwhelming, and you found yourself correcting your own (faulty) memories of the topography of somewhere you felt you once knew fairly intimately, as well as experiencing the occasional moment when you unexpectedly found yourself somewhere so

familiar and potent that you had that sense of being the person walking on your own grave. That may have been the air conditioning. We had no air conditioning (or possibly civil rights during our time there) but now, powered by an awful lot of industrial metalwork dominating the flat roof, one can be assured that it is only your febrile anxiety causing you to sweat.

The Dental School is now book-less. There is no Dental Library. With access to the internet and online journals it appeared that, to create space to better cope with the expansion of the student intake, the library could be sacrificed. This provoked a vision of a *Fahrenheit 451*-style burning of these redundant texts attended by militant students bearing aloft the flaming effigies of Scully, Pickard et al, but we were reassured that they had been retired to the Medical Library (one day this alumni newsletter will be an 'App', unfolding into a pdf file, and a video from the head of the student body asking for donations, as some students struggling to cope with the latest generation of mobile telephone technology are actually being forced to memorise information).

The operative techniques lab is a thing of digitally integrated wonder, the phantom heads have had facelifts, and teaching is disseminated through the medium of a digital camera at a central station to screens at your bench. A thing of wonder was that the conservation ward was as it always had been, without looking obsolete, having transcended both time and function. Apparently if you want a surgery that's going to function, and look as good in 20 years time as it did initially, you want your interior design overseen by Ken Marshall (the same could be said of the man himself, who in a fleeting appearance seemed so unchanged as to be visiting direct from 1996. Only the golfing jumper changes). Something that disquieted was that despite the expansion in student number there hadn't been a concomitant increase in the overseeing staff, leading to a more diffuse tutor-to-student ratio, which must impact on the volume of patients and work that can be undertaken.

We finally ventured to the common room where we took our leave of Dr Gray, having established through query, paraphrasing and wholesale substitution of his words that we were THE BEST YEAR EVER! He headed home with a thank-you gift of chocolates, which he promised to eat in front of Taggart (a show focused on homicide, possibly for guidance with improving the staff/student ratios) that evening.

We headed for town, and luncheon at the Brasserie Blanc. Here, having caught up with each other, we proceeded in a manner halfway between a seance and the montage at the Academy Awards (where the faces of those no longer with us drift above a

nostalgic instrumental) to establish those who were unable to attend, and why. Some we knew, the rest were left to speculation (basic categories: mad, fat, bad, sad, Malaysian.... in the spirit of full disclosure I can claim three of the five for my 2006 no-show). After this, some went on to re-acquaint themselves with Bristol's taverns and some of us went to have a nice cup of tea and a sit down.

In the evening we gathered again, augmented by familiar faces: friends, acquaintances, my old irrational crush. We gathered for what I had assumed was a formal dinner in one of the private dining rooms. My assumption was wrong (why? – had I opened the email whilst watching *Downton Abbey*?), I looked like a compère amongst a sea of the great and the good. As ever, alcohol, the excitement and our encroaching senility/persistent immaturity rendered us unable to remember what we had ordered. Thankfully Kate and Fiona, used as they are to dealing with infants, had prepared an aide memoire for just such an event. An enjoyable evening followed with nothing untoward or contentious happening. There were no incriminating photographs.

The following morning found those of us who had stayed at the hotel gathered for breakfast trying to piece together a unity from many fragments of the previous night's stories, as well as trying our best to eat our stay's value in breakfasts. The house always wins but special mention must be given to Suzanne (Gamon/Hart) who saw off the threat of an enormous waffle. We undertook an offsetting constitutional as a consequence, happy just to be in each other's company a little longer, able to re-experience the once familiar social dynamics that as friends we had taken for granted so long ago. Of course, as the day progressed the siren call of the real world took us back to our individual lives.

If you missed the reunion through apathy, fear, or some other, please do try and join us for the 20th, by which time I am reassured by one of our number that something will have dried up, stopped working, or simply just fallen off every one of us. I'm delighted I took the leap. Until then, all the best.

Group photograph on centre page

2001 REUNION, 10th September 2011

Anna Dargue

Fifteen members of the 2001 year, along with five of their 'other halves', attended a reunion at the Clifton Lido. The stylishly updated Victorian baths provided a great backdrop to a convivial evening with lots to catch up on, it being five years since our last get-together. The food was magnificent (try the alcoholic ice-creams) and tasted all the better for the view of the swimmers doing their exercise whilst we ate. The night carried on for those who weren't pregnant – Nisha (Nathwani), Lizzie Jenson (Edwards) and I all bowing out – in the 'Brass Pig' on The Triangle.

The excitement of the night was too much for baby Edward who put in an appearance four days later, 3 weeks early – Nisha hadn't even finished work before her waters broke! Charlie (Buckle) and Richard (Woods) also went home early, Charlie's excuse being that he was running the Bristol half marathon the following day. Richard – how times have changed...

2006 REUNION, Saturday 12th November 2011
Katie Ernst (Noble)

On Saturday 12th November 2011, 28 members of the class of 2006 and 10 of their better halves gathered at Bordeaux Quay on the waterfront in Bristol to celebrate five years of freedom from the clutches of AC2 and undergraduate exams. The food was absolutely delicious and given the number of empty bottles behind the bar, I am guessing the wine and whiskey was too.



Tom McHugh and Imran Nasser

Despite it being five years since the last big catch-up and quite a few marriages and babies making their debut, it felt like very little time had passed. The room was filled with the same giggles, laughs and clinks of glasses and cutlery, confirming that a lovely evening had been had by all.



Simon Burgess, Tim Jones and Kellie-Jo Hall



Sarah Pegington (Davies) with husband David

Group photograph on centre page

FORTHCOMING REUNIONS

At the time of going to print we have been notified that the following reunions are being organised. Details of these, and of others announced later, will be added to the Forthcoming Reunions page on our website: www.bristoldentalalumni.co.uk

1972 – TBA

Richard Taylor email: richardtaylor635@hotmail.com

1977 – 13 October

John Smalley email: john.smalley2@btopenworld.com

1982 – 17 November

John Cantwell email: johnc6a@aol.com

1987– TBA

Caroline Drugan email: caroline.drugan@bristol.ac.uk

1997 – TBA

Olivia Alderson email: oliviaalderson@hotmail.com

2002 – TBA

Simon Khoury email: demon_dentist@yahoo.com

2007 – TBA

Jennifer Morecroft email: jenmadelaine@hotmail.co.uk

NOTES FOR REUNION ORGANISERS

Addresses

The Data Protection Act does not allow the University to release addresses of alumni – in any case they are not all up to date because changes of address often are not reported. You can help by checking and, if necessary, updating your address on their website www.bristol.ac.uk/alumni.

We (BDAA) can give reunion organisers the names of all those who graduated in their year. We would be happy to reimburse stationery and postage expenses.

Venues

Most reunions have been centred on hotels with whom a combined fee has been negotiated for dinner and accommodation.

For full details about Bristol hotels and information about what's on in Bristol during your reunion, contact the Bristol Tourist Information Office – telephone 0117 9260767, e-mail tiharbourside@bristol-city.gov.uk, website www.visitbristol.co.uk.

The Students' Common Room and Hathorn Bar

For those arriving on a Friday evening, the Hathorn Bar in the Students' Common Room is a convivial place to meet – students and staff meet there every Friday evening from 5:30pm to about 8pm in term time. It would be advisable to check that the common room and bar will be open by contacting the student bar manager via the Clinical Dean's office.

Group photographs

We can arrange for a group photograph to be taken (normally just before your dinner) which would be available for purchase at reasonable cost (Nye Fathers, of BDH, is the photographer). Please inform Reg Andlaw if you would like this to be arranged.

Dental Hospital tour

A Saturday tour can be arranged by contacting the Clinical Dean's office.

Contacts

Reg Andlaw	tel: 0117 9682653 e-mail: regandlaw@talktalk.net
Clinical Dean's office	tel: 0117 3424307 e-mail: geraldine.vines@bristol.ac.uk
BDAA website	www.bristoldentalalumni.co.uk

ALUMNI NEWS

News from alumni for inclusion in our Newsletter is always welcome. Please send to regandlaw@talktalk.net

1969

At the BDA Conference in Manchester last year **Frank Holloway** was elected to be the next President of the British Dental Association. He takes up the presidency this April.

1972

in the Queen's Birthday awards last year **Stephen Marsh-Smith** was honoured with the award of OBE for Services to the Environment.

1974

Charlie and Shirley Scola are looking forward to retirement this year but also to making the most of opportunities for travel and adventure, including a return trip to Fiji and Australia.

1975

Philip Ratcliffe did an Umpires Assessment at a Minor Counties cricket match in Trowbridge, Wiltshire, last summer but had an unpleasant experience on his way home, suffering chest and arm pain. Understandably this gave him quite a scare, but fortunately the cause was eventually diagnosed as being due only to acute stress (*due to the umpires assessment experience ? – Ed*). He enjoyed a visit from **Tim Hayward** who was over here from Australia.

1976

Richard Rycraft has lived in British Columbia, Canada, since 1980, practising first in Powell River, a small coastal town from 1982, and then in Victoria, B.C., since 1998. Their daughter married in the summer in Calgary, Alberta, where she works as a theatrical stage manager. He will be in the UK with his wife this autumn to visit family and tour around.

At last year's International Association for Dental Research **Hugh**

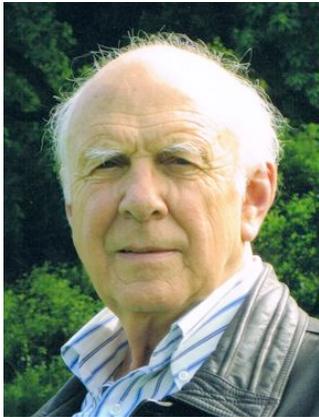
Devlin received the Distinguished Scientist Award for research in prosthodontics and implants. He joins a distinguished group of professors from the University of Manchester who have previously received this award.

1988

Frin Mills in her Christmas newsletter tells us about Leo, their new 6-year-old Irish Cob pony that she and her daughters Cara and Megan ride around local roads and on the beach, about her 6 years' 'career' as stage manager for the annual Benllech pantomimes, and much more – a full and busy life.

OBITUARIES

GORDON JAMES TUCKER



Gordon Tucker died suddenly at his home in Bristol on Thursday 22nd March 2012, at the age of 81.

Gordon graduated at Bristol University (BDS 1957), and after a period spent both in general practice and in the orthodontic practice of Peter Blyth, joined Bristol's School Dental Service in 1966. When in 1974 this was transferred into the NHS and renamed the Community Dental Service, he became Assistant District Dental Officer responsible for its day-to-day management, and also took the role of clinical teacher in the Department of Child Dental Health.

Following the closure of the clinic where he was previously based, he also carried out treatment sessions at the Hospital for patients of the Community Dental Service until his retirement in 1994, and so would have been a familiar figure to many former students now in the mid-years of their careers.

Gordon was the consummate professional. An expert clinician, he cared deeply for his patients and their well-being. He cared too for his colleagues in the staff of the Community Dental Services, while in the wider world of dentistry Gordon was a great supporter both of the British Society of Paediatric Dentistry and of the British Dental Association. For the BDA, he held a variety of positions both in its Bristol and District Section and the Western Counties Branch, including a period of seven years as Branch secretary and a year as its President, followed by three years as Chairman of its Council. He was also active in the CDS Group of the BDA, including a year's term as national President.

Outside dentistry, Gordon was a man of many parts who lived life to the full. Widely travelled and an inveterate walker, he had a keen eye for the places in which he found himself. This

same discernment was evident in his interest in architecture and the built environment generally. This manifested itself particularly in his long and active membership of Bristol Civic Society, for which he served as Secretary for a lengthy period; enjoyed a period of office as its Chairman; and was the long-term organiser of the group of its members that scrutinises and comments on behalf of the Society the planning applications registered in the city.

A very cultured man, he was a committed supporter of the arts. A regular supporter of the theatre and especially of cinema; deeply interested in music, and regular attender at many concerts and recitals; interested in the graphic arts, with a fine collection of artwork and sculpture; and widely read. He was also something of a bon vivant, with a lively appreciation of good food and good wines and beers, and had a fine dress sense, particularly manifested in his splendid choice of ties.

Most of all, he was a man who, having chosen his friends wisely, cherished their friendship. They will be glad that he kept his faculties and vigour to the end. Though they will miss him, they will certainly not forget him.

Glyn Duggan

JANE FIELDER (SPARK)



Jane died unexpectedly on 10th January 2012. She had a chest infection for a couple of months that did not clear, which was followed by cardiac arrest and death two days later.

She was one of my closest friends and a great supporter of the reunions. She kept all the 1977 year photographs, which she would produce to great embarrassment. Five years ago she drove miles along very dodgy lanes to verify the address of one of our year who had moved to deepest Devon. She also tracked down every Mark Davies in the UK and Australia before she found the right one. She will be much missed.

Gill Smalley

MELANIE GOULD (WILLIAMS)



It is with great sadness that we have to report the death of Melanie on Friday 21st October 2011 at the age of 51. From the moment of meeting, Melanie became a stalwart of the year, distinctive with her auburn hair, beautiful eyes and megawatt smile. I had the privilege of sitting next to Melanie from our first week in histology to our last radiology session. I am eternally grateful for her support, guidance and the occasional exasperated “Oh Dave” which always kept me in line when carrying out tasks in the lab and on clinic. She had such a gentle way about her, which overlay a steely determination. From an ex-patriot background Melanie entered into student life with enthusiasm, attending student balls and other social events.

Within the first few weeks at Bristol she met Tim, a medical student and fellow resident at Badock Hall. They became inseparable, with Tim almost becoming an honorary dental student, having spent so many lunchtimes in the student common room.

Melanie qualified in 1983 and started in general dental practice in Bristol. Tim’s training as an intensive care consultant took them to Cardiff, Plymouth and Australia, but such was Melanie’s love for Bristol that they returned to the area. They moved to a beautiful old house near Nailsea and settled into the community with their daughters Laura and Emily. The family unit was finally completed with the addition of various pets. The tranquil setting of their home allowed Melanie to nurture her other love, gardening, and she was very much at one with nature. Melanie shone with the fullness of her family life and was especially proud of the achievements of Laura and Emily.

Melanie continued part-time in general practice and put her excellent organising skills into helping organise our reunions every 5 years; her charm made sure we had plenty of sponsors for the evening. In the last few years she returned to the dental hospital as

a tutor, spending time working in the primary care unit, radiology and restorative departments. She was always generous with her time when students needed it and had a listening ear for fellow members of staff. Melanie had that rare ability to reach out to all.

At her funeral, the church was packed and this testified to what a kind, generous and thoughtful person Melanie was. She was loved by all of us and our lives are better off for knowing her.

Donations, for the refurbishment of the visitors' room in the Intensive Care Unit at the BRI, can be made to Arthur E. Davey & Sons, 82 Silver Street, Nailsea, BS48 4DS.

David Wood
Gillian Boswell

LEGACY SUPPORT FOR BRISTOL DENTAL SCHOOL

Ella Searle, University Legacy Manager

Being part of the Bristol Dental School community, as a student, member of staff or alumnus, is something to be extremely proud of. As you look forward to celebrating the BDS (Bristol) centenary, your thoughts will inevitably turn to the great history of the School, and the part you have personally played in making it to this milestone.

As a contributor to the Dental School's great history, have you ever considered how you might play a role in its future? By including a gift in your Will for the Bristol Dental School you can help ensure that the School continues to thrive. Several alumni and former staff have already pledged their support in their Wills and are proud to have done so. Their gifts are an expression of their gratitude to the Bristol Dental School and an act of belief in its great future: "I owe so much to my time at Bristol studying dentistry, and it is with great satisfaction and pleasure that I have put a Gift in my Will to honour that debt of gratitude. It is wonderful to feel that I can give something back to help future generations benefit from a Bristol dental education and to support the Dental School in its teaching and research" (Alumnus & Legacy pledger, BDS 1961)

This support plays a pivotal role in ensuring that Bristol will continue to be one of the leading institutions of dental education and clinical practice with an excellent international reputation. Now, more than ever, philanthropic funding is essential for recruiting the best students through scholarships and bursaries; for attracting and retaining our leading clinicians, researchers, and academics; and for offering state-of-the-art technology and

equipment.

But it's not just about what we need. It is also very much about you. It's about your educational and professional experience and the passing of the torch to future generations of students – it's about your legacy.

You can specify a Gift in your Will to simply support the Dental School, so that it can be used for priorities of the day, or you can choose to direct it to specifically support dental students or for research – either broadly or dedicated for a specific area of specialism.

We do recommend that you get in touch to discuss your Legacy plans in confidence. My name is Ella Searle and I am the University's Legacy Manager, and I will be delighted to hear from you by telephone +44 (0)117 331 7971 or email ella.searle@bristol.ac.uk. I can send you a legacy pack and I am always on hand to discuss how any potential gift in your Will could benefit the Dental School in years to come.

