

**UNIVERSITY OF BRISTOL**



**Newsletter  
of the  
Bristol Dental Alumni  
Association**

**No. 19    May 2009**

# BDAA

## BRISTOL DENTAL ALUMNI ASSOCIATION

The aims of the BDAA are:

- to promote continued contact between graduates and the Dental School
- to support worthy causes within the Dental School

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## *From the Chairman/Editor*



The time has come once again to put together another issue of our Newsletter – number 19. All contributions are now in – except mine. I'd better get down to it.

I'll start by introducing the two new members of our committee – Sarah Buckley and Iain Hathorn. Sarah was installed as the new President of UBDSS in November and as such automatically became a member of our committee – Iain, on the other hand, needed some persuading ! Sarah was born and grew up in Poole, Dorset. Here in Bristol, in addition to onerous duties associated with her presidency, she is a girl guide leader of a pack of 30 10-14-year-olds, and enjoys ballroom and Latin-American dancing – she obviously is pretty good at it because she and her dancing partner came third in last year's national university competition. Iain Hathorn needs no introduction to many alumni – he was a consultant orthodontist in Bristol from 1979 until his retirement in July 2007. He remained busy as Chairman of Council of the British Orthodontic Society and now, as his 3-year term of office ended in January this year, he continues to keep busy playing golf and working on his allotment – so busy, in fact, that he needed to be primed with a few beers before he could be persuaded to join our committee. He was the driving force in persuading the University to approve the establishment of a bar in the 1985 students' common room, the bar that, quite rightly, bore his name and is now perpetuated in the new common room bar.

Our major project over the last year has been the setting up of our own website ([www.bristoldentalalumni.co.uk](http://www.bristoldentalalumni.co.uk)). Before that, our website was part of, and administered by, the Dental School. Unfortunately, the support we needed to keep it up to date was inadequate, so we decided to create our own. This was established in October, Chris Stephens volunteered to act as webmaster, information now is quickly updated when necessary and we are pleased to be in control. The site retains a link to the Dental School site – and vice versa.

No less than nine reunions have been held since last April: 1958, 1966, 1973, 1978, 1982, 1983, 1987, 1988 and 2003. Reports have been received from most of them, and also from the 1971 year who held theirs in April 2007. This show of solidarity with their Alma Mater is most impressive – I very much doubt if any Bristol University department, or any other dental school, can match that ! Several group photographs were taken, adding to our collection from previous years. For this we must thank Nye Fathers – not only has he found his way to venues all over Bristol but has then shown commendable patience organising unruly mobs into some sort of order for his photographs. Our original plan was to hang the photographs on the walls of the students' common room – but that was the old common room, which had plenty of wall space; unfortunately the new one does not. We're working on the problem !

As usual, the elective reports describe interesting projects and exciting experiences in far-away places. In addition to our regular support we have this year established a Dental Alumni Elective Prize. Projects are selected by Dental School staff to compete for a number of prizes, and the students present their projects orally before a panel of judges, in which Chris Stephens officiated on our behalf. Our prize will be awarded to Joe Williams during the annual Prizegiving Ceremony in July.

Who could not be hugely impressed by Ian Callaghan's Tour de France ? Covering the full distance of Le Tour and riding the same distance each day as the professionals do – that was a real *tour de force*. Reading his story evoked memories of my own, much more modest, cycling challenge through Spain a few years ago: the way their plan emerged “over a beer or two” with a friend, their “pain and exhaustion” along the way, and their “sheer unadulterated joy” at the end. A fantastic challenge and a *fantastique* achievement, for which Ian and his friend Matt deserve many congratulations. The full account of their trip is in their blog – [www.ianandmatt.blogspot.com](http://www.ianandmatt.blogspot.com).

Our annual donations to the Dental School library have continued – the total since we started donating in 2002 now stands at £9,613 (which includes funds kindly donated by individual members). The new library was officially opened on 23rd July. Professor Jonathan Sandy, Head of School, cut the ribbon and Peter King, Director of Library Services, made a short speech thanking everyone who had contributed to the successful outcome. As well as much improved décor and lighting, the library now offers an additional small computer suite and a well-equipped group study room. We also continued our regular support to the dental students' society (UBDSS), sponsoring champagne receptions at their Final Year Dinner and Dental Ball last year, and purchasing a powerful stereo music system for their new common room.

We hope that a good number of dental alumni will come to Bristol to enjoy the University Centenary celebrations from Friday 3rd to Sunday 5th July. Chris Stephens has provided information relevant to dental alumni on page 10. Those wishing to join a tour of the Dental Hospital on the Saturday are asked to inform the Clinical Dean's office (0117 342 4308; email [Theresa.Munns@bristol.ac.uk](mailto:Theresa.Munns@bristol.ac.uk)).

I end on a sad note – to report the tragic death of Gary Porter, 2000 UBDSS President, 2001 graduate, and all-round good guy. He was a member of our BDAA Committee 2000-2001, and it was always a pleasure to meet him. Having spent Christmas 2008 with his family in Ballymena, he and his wife Natalie (Bakheit) flew for a holiday in Marrakesh, Morocco. The bus taking them from the airport to their hotel crashed – Gary and five others died, Natalie was injured but luckily survived. His good friend Matthew Garrett has written an obituary, which is on page 47. On behalf of all alumni I offer sincere condolences to Natalie and their families.

My thanks to all who have contributed articles for this Newsletter, and to Dominic Alder who has put it all together.



## *A Sign of Age*

Gordon Gray, Dental Clinical Dean



It is said to be a sign of getting older when time appears to pass quickly. I could not believe that it had been a year since I had last sat down to put fingers to keyboard to write an annual review of what had been happening in the Dental School. Even more alarming, though, was the fact that I could not recall immediately any new things to share with you. Could this be another sign of ageing, with some senile dementia setting in? Fortunately for me though, I am pleased to report that after a hot cup of chocolate my neurones began to work again and some memories from the past year filtered back into conscious memory.

It has been a busy year with reunion tours and it has been great to meet so many of you in person. The refurbishment of the Dental School has attracted a lot of attention and none more so than from previous graduates who wanted to take a trip down memory lane and see the changes at first hand. Many found the changes so dramatic that they could not identify exactly where in the building they were or what had occupied the site previously. During the Christmas student vacation, the refurbishment of the Restorative Clinic was completed with the replacement of the remaining older chairs to provide us with 61 new dental units in total for this clinic. The refurbishment now provides the entire clinical establishment with new dental equipment that makes us the envy of all other dental schools. It only remains now for some decorating to complete the package. After the stairs in

the University extension are painted, we (the BDAA) intend to group together graduation pictures with those of the same years taken at reunions. These will adorn the walls for all to see.

Last year, I mentioned that the School had appointed its first joint NHS/University Dental Services Manager. Our head of School – Professor Jonathan Sandy – has recently taken on another joint role and will be the Lead Doctor for the Dental Hospital. This 'joined-up' thinking is thought to be good practice so that both stakeholders will be considered at meetings at all levels. We wish him well for this new joint role. Emily Villis has also joined the team as the new Finance Manager. It is hoped that this management team will approach new opportunities eagerly. This year has seen two examples of this joined-up thinking that has benefited both School and Hospital: a new Masters Programme in Implantology has been developed and is being led by Dr Dominic O'Sullivan, and a new training programme for Orthodontic therapists has had its first cohort of students. The latter course is being led by Christian Day who is an NHS Consultant in Orthodontics. Dominic and Christian are both previous graduates from Bristol University.

The student expansion programme continues and we now have four years with the increased student numbers. Despite the 46% increase in student numbers, our current academic staffing levels are lower than they were before the expansion. However, we carry on valiantly in the face of adversity. We were disappointed to lose another of our own graduates, Rahat Ali, from his post as Lecturer in Restorative Dentistry. We wish him well in his new appointment as a Specialist Registrar at the Leeds Dental Institute. Last year, I reported that Helen Peterson had been appointed to a new Walport Lecturer post in Oral Medicine. This year I am delighted to inform everyone that our Academic Clinical Fellow has been successful in obtaining a Wellcome Trust Research Training Fellowship and will complete her PhD studies in microbiology under the supervision of Professor Howard Jenkinson.

During the past year we have been subjected to a Departmental Review by academics from other dental schools and from other departments within our own university. I am pleased to say that the results of this review were favourable. We were informed of some matters that we should consider for improvement and we have done this by assembling a scanning group from amongst the staff. One of the major changes is about to be instigated and that is the removal of the four Teaching Divisions. Their replacement will allow us to focus



clearly on Department issues rather than the more fragmented approach that has been taken previously. This new management structure will include a smaller Executive Committee that will meet more frequently and should benefit everyone by focusing attention on teaching, research and clinical service issues.

We have been fortunate in securing funding for a new Educational Support Team who will work closely with the academic Unit Leads. They are looking carefully at the new curriculum and advising on assessments, learning technologies and learning methods. Many Unit Leads are embracing these new technologies and developing different methods of assessing student learning using e-assessments. It requires a lot of time to build banks of suitable new questions but has the advantage that marking is completed on line. Students are finding this change a challenge as the questions do not rely solely on regurgitation of information learned but require some application and analysis. It is exciting times indeed.

The School was delighted to attract two teaching awards over the past year. Angela Hague won the Faculty of Medicine and Dentistry Teaching and Learning Award, and the Faculty e-Learning Award was presented to Dominic O'Sullivan. Our congratulations go to both for these excellent achievements.

It was with great sadness that the staff learned of the death of Gary Porter, who graduated in 2001. Gary met his future wife Natalie Bakheit when they were both dental students and they went on to work in dental practice in Warwick after their marriage. The tragedy occurred on a Christmas holiday when they were travelling by bus from the airport to their holiday destination in Marrakesh. My long-lasting memory of Gary is as a conscientious student with quite a wry sense of humour. He was never found without that Irish glint in his eye. He will be sadly missed by all who knew him, including his patients and his peers. Our thoughts are with his family and with Natalie who was also injured in the crash.

I look forward to producing another report in a year's time and highlighting the successes that have come Bristol's way. I would like to wish everyone good fortune in this difficult economic climate. The only sure thing is that people will always need dentists.

## SWANSONG

Scott Deacon, Senior President, UBDSS



This is my final report as the Senior President; I pass the baton onto another, who I am sure will be equally committed in supporting the student society. Over the last three and a half years I have greatly enjoyed the role with all the re-developments, fundraising and liaison with the students themselves. With the re-development of the students' common room, I'm glad that we've managed to achieve a modern setting with good facilities for the current and also for future

students in the years to come. It's great to see (particularly as an ex-bar manager myself !) that the long-standing traditions of the dental bar will continue. We are planning to acknowledge the contribution of alumni members and institutions to the project at an official re-opening of the bar on the evening of Friday July 3rd 2009, with Mr Iain Hathorn, whose name still hangs above the bar, unveiling a commemorative plaque. This seems an ideal time to hold such an event, with the University Centenary celebrations being held over the weekend. We have invited donors and ex-bar managers to the event. Anybody wishing to attend please contact me so that we can get an accurate idea of numbers ([scott.deacon@bristol.ac.uk](mailto:scott.deacon@bristol.ac.uk)).

These changes have not stopped the student body recently gaining extra sponsorship to add further facilities to their common room and bar. This will increase not only the level of comfort but also technology available to the students. I would also like to thank the BDAA for purchasing a new in-built stereo system for the bar area for the student body – a long overdue upgrade, as the system was still the same one from my days as a student.

During the time of the upheaval at the Dental Hospital, I've been extremely proud of the way the students have conducted themselves and continued to study hard and organise their social events despite the problems associated with the re-development. I would also like to thank Julia Winstone and the rest of the organising committee for inviting me to speak at this year's very successful Hollywood-themed Ball. I hope I did not bore you too much in my swansong year... My best wishes to all the graduating students.

## *The Students' Year*

Sarah Buckley, UBDSS President



The student dentists' year is a funny one: a rollercoaster of revision, lab work totals, vivas, battling with face bows, exams, patients (with their dentures or lack thereof) and partying, all of which I say we do rather well at Bristol and this year has been no exception.

A busy year started with the annual BDSA sports day, which has now morphed into a weekend of sports and other 'extra-curricular' activities, this year hosted by Leeds. After the rugby, netball and football competitions (and the classic A&E rush after a hockey ball to the face) the weekend culminated in a Noah's Ark party – with pairs of dental animals marching two by two through the northern streets!

Friday nights are officially back on the map with the opening of the newly refurbished Hathorn Bar. Summer nights played host to barbecues and now, with winter table football and pool tournaments, the old Bristol traditions are really kicking off again, aided obviously by the cheapest drinks in town. This year the bar is being excellently run by Luke Mirza and Beth Archard who are doing a splendid job keeping the punters happy!

The Dental Ball committee this year needed a standing ovation for their efforts in organising one of the most fantastic balls I've ever been to. With life size cut-outs of Hollywood stars and theatrical music playing during the meal, you really did feel like you had just walked off the red carpet.

Once again the ski trip this year was a resounding success, bringing together dental students from across the 5 years on the slopes. Although the coach journey was just as long, the snow this year was amazing and everyone returned exhausted but elated. Thanks and congratulations go to Adam Crosby Jones and Fiona Welborn for their organisation.

The Dental School expansion is now practically complete - with the junior years bringing 70 students on to clinic! With the sparkly

new chairs I can't tell the fine line between lucky and spoilt. Both patients and students are equally impressed by the swanky new surroundings!

Having only taken over from Christoph Harper and his committee in November, I'm excited to say I think there is a lot more to come from Bristol this year. My personal thanks go to Christoph and the 2008 committee for their dedication to all the students in 2008 ... let's see what 2009 brings. Still proud to be Bristol!

## UNIVERSITY OF BRISTOL CENTENARY

Chris Stephens



The University is celebrating its Centenary on the weekend of 3-5th July and the Dental School is taking part in what will be a large number of University functions. If you are already on the University's alumni list you should have received a brochure and booking form from the University inviting you to attend. If not please see [www.bristol.ac.uk/alumni](http://www.bristol.ac.uk/alumni) and [www.bristol.ac.uk/centenary](http://www.bristol.ac.uk/centenary).

For the Bristol dental fraternity this year also sees several other anniversaries: it is the 125th year of dental teaching at the BRI site, 75 years since the first full-time dental lecturer was appointed and 70 years since the completion of the dental school in Lower Maudlin Street. It is also 135 years since the Western Counties Branch of the BDA was formed and the 40th year of our dental school's BDA Medal.

So your dental alumni committee, as well as past and present staff, would like to see as many of you as possible here on Saturday 4th July, when you could take in a tour of our much rebuilt and enlarged School (undergraduate entry currently 78 !). Some years are already planning to hold a reunion during the weekend, and we have already circulated organisers of those who graduated 5,10,15, etc years ago to encourage them to schedule theirs for this weekend. Further details are to be found at our own website [www.bristoldentalalumni.co.uk](http://www.bristoldentalalumni.co.uk).

## *STUDENT ELECTIVES*

### **Dental Health Care in Cambodia**

Mei-An Hoe and Maynaha Indrakumar



For our elective we visited Cambodia! Our project was to get a broad look at the dental health care available in the country. This involved a series of interviews with the 'big cheeses' in dentistry in Cambodia as well as visits to the country's two dental schools. We also spent two weeks as dental volunteers at Angkor Hospital for Children, a hospital funded by a non-government organisation (NGO).

We met up in the capital, Phnom Penh, after three weeks of travelling separately in other parts of South East Asia, so we were already quite mozzie-bitten and tanned! While we had both read about the horrors of the civil war and its effects on the country, our visit to Phnom Penh brought home the extent of what had happened. We visited the 'Killing Fields' where thousands of men, women and children had met their end in the most brutal fashion. We also visited Tuol Sleng, a security prison where many were detained and imprisoned before being sent to the killing fields. This was a sobering experience and gave us some understanding and insight into how much the country has had to redevelop since the war, and made us appreciate why the country is currently in the position it is in.

Our next stop was a meeting with Dr Hak Sithan, Head of Dentistry of the Department of Health. The scale of the problem facing Cambodia's DoH makes the problems of our NHS look relatively trivial! Most of their public health problems are easily preventable diseases. Fourteen percent of children do not make it to their fifth birthday, the top three causes of death being HIV/AIDS, tuberculosis and diarrhoeal diseases. The vast contrast between

Cambodia and England was brought home by the fact that plans for water fluoridation were low on the agenda as much of the country does not even have a sanitised water supply.

Siem Reap is the closest city to Cambodia's most famous temple complex. Before what was to be a gruelling two weeks of dentistry we took the opportunity to do the touristy thing and were treated to the majestic view of Angkor Wat at sunrise.



*The spectacular Angkor Wat at 6am!*

Angkor Hospital for Children is a paediatric hospital funded by the Japanese-American NGO 'Friends Without a Border'. The hospital is relatively small but provides a crucial service to the city and the neighbouring provinces. The hospital offers outpatient, inpatient, emergency, surgical, dental and ophthalmologic care to more than 300 boys and girls each day. The dental department has three chairs, but as only one had working handpieces the other two were dedicated extraction chairs. This reflected the workload — the vast majority of patients were emergency extractions. The patient list was entirely dependent on how many patients turned up in pain on the day. A lot of patients travelled a long way to get to the hospital, so it



was a priority to see as many of them as possible. This workload necessitated a treatment style that was, in dental terms, quite a serious culture shock. Most of the children had never visited a dentist before and were quite apprehensive. In spite of our attempts of ‘tell, show, do’ in broken Khmer, many children began screaming well before the



*Mei-An, Maynaha, and the rest of the dental team at Angkor Hospital for Children.*

introduction of local anaesthetic. In the majority of cases this meant physical restraint was necessary in order to complete treatment, including the use of a Papousse board.

Although initially quite depressing, we rapidly began to appreciate the necessity of extraction over restoration of salvageable adult teeth. Root canal treatment was unaffordable for most patients and was not possible at the hospital due to time constraints. However the majority of patients presented with decay so far advanced that the teeth were



*Restraining a patient using a Papousse board*



unrestorable. During our two-week stay we even encountered two cases of maxillary cellulitis, which were immediately referred to the theatre for surgical drainage of the infected site.

Although we knew that the dental services available were well below the needs of the population we were still frustrated with how little opportunity there was to provide more long-term solutions to patients' oral health problems. In spite of having the materials available for oral hygiene instruction and Atraumatic Restorative Treatment (ART) they were not carried out at every available opportunity. Daily tooth brushing is a relatively uncommon practice in Cambodia and the dental staff had come to accept poor patient motivation as the norm. Subsequently they themselves were poorly motivated to try to change this and we were disappointed to find this was the case.

Cambodia was an eye-opening experience all round. Although there is no doubt that the dental services at the hospital were vital to the community, as volunteers we felt that long-term improvement in health needs to come from preventative interventions. Whilst our time in Cambodia has not put us off volunteering again, next time we would like our efforts to have a more lasting effect, with a greater focus on prevention.

## Streets of London

Nisha Sanghrajka



‘Streets of London’, my elective project, stemmed from my passion to help and serve communities all over the world as a dentist in the future. After attending and volunteering in a medical camp in India, I realised that thousands of people all over the world are in great need of medical and dental treatment, yet access and affordability of treatment for these people meant that dental care was not available. From this, the questions arise: ‘Why are dental practitioners unable or unwilling to help these people who need the most help?’ and ‘Are occupational stresses with working with these people so high that dentists do not wish to treat them?’

Dr Jay Grossman, the founder of Homeless not Toothless, an innovative volunteer network of dentists in California willing to donate their services to homeless people, inspired me look into why more dentists are not helping the homeless. Dr Grossman stated: “I wanted to do something more proactive than just giving money. I felt if we could provide the homeless and unemployed with quality dental care, maybe it would raise their dignity and help them gain employment.” Furthermore, Dr Grossman stated that “if every dentist would give just one hour a month, the homeless would have no more dental needs.”

The British Dental Association has reported that the healthcare needs of homeless people in terms of dentistry can be addressed by acknowledging their special needs, ensuring services are flexible, drawing on appropriate clinical expertise and enabling them wherever possible to use mainstream dental services. Research has proven that homeless people experience poorer health due to lifestyle, environment, hygiene, income, mental health problems and substance

misuse. The main clinical conditions encountered are caries, periodontal disease, trauma, missing teeth and soft tissue conditions.

‘Streets of London’ researched occupational stress amongst dentists working with homeless people compared with those working in general dental practice. The aims of the project were to observe dental services provided for homeless people in London and focus on occupational health issues surrounding ‘stresses’ and ‘burnout’ amongst clinicians working with the homeless. Raw data were obtained by two means: a posted questionnaire and personal interviews. One hundred and two general dental practitioners in the London area were sent questionnaires regarding the stresses they feel in the workplace, and two dentists working with the homeless were thoroughly interviewed. Both qualitative and quantitative data were reviewed and the latter were analysed using the Statistical Package for Social Sciences (SPSS).

The first of the two practices visited was located in Kings Cross and the second was in Soho, just off Oxford Street. I observed the running of the practices as well as the stresses experienced by the dentists and all those working alongside them.

I found that both dentists were very good at handling the patients, and stress levels seemed much lower than in general dental practice. On interviewing these dentists, I found that they particularly enjoy working with this group of people and, although there are times of stress, they have specifically chosen to work with them.

As the prevalence of HIV positive and hepatitis B/C patients is higher in this homeless patient group, it was thought that they may pose a higher risk to these dentists, therefore being a major cause of stress. However, both dentists confirmed that this was not a cause of stress because cross infection control is universal no matter what diseases the patient may present with.

Statistical analysis found that there was no significant difference in the stress levels of dentists working with the homeless compared with those working in general dental practice. However, analysis from the qualitative data suggests that the dentists who worked with the homeless were under less stress than those who did not. From this study we can conclude that dentists who work with the homeless are not necessarily more stressed, and this was quite apparent during my time observing at the two practices.

My elective experience was invaluable and taught me a lot about real-life dentistry. A lot of treatment carried out in these clinics was emergency treatment, and most patients just wanted their pain

alleviated. From this project, it can be seen that occupational stress is not a significant factor influencing why more dentists are not serving homeless and socially excluded individuals. However, more research will need to be carried out in this area, with more subjects and looking into more variables.

## **Outreach Dentistry in Ghana**

Joanna Thompson



I found a company called Work the World who offered a range of elective projects for different medical professions, including dentistry, in many countries across the world. One of their projects was dental outreach in Ghana, which really interested me as it would allow me to help out in a developing country but in a non-hospital or practice setting. I went away in July 2008, joining four dental students from Newcastle University to participate in the three-week outreach programme. During the programme I also completed my elective research project which was an audit to assess compliance with the WHO (World Health Organisation) guidelines on ART (Atraumatic Restorative Treatment).

At the start of our programme we were shown around Ghana Dental Hospital, as the outreach project was a partnership between Work the World and the dental hospital. The University of Ghana Dental School is very similar in facilities to what is available in the UK but on a much smaller scale. It is the only dental school in Ghana and up until recently an average of 10 students qualified each year – the number has now risen to 30.

In 2006 there were 120 dentists for 19 million people in Ghana – one dentist per 150,000 population. I worked with the team to open a new dental clinic in the town of Akwatia in the eastern region of Ghana which in 2000 had a population of 20,723. The project team consisted of us five students, a Ghanaian dentist (Dr Okaine), two dental nurses, many training dental nurses, a technician, a driver and a programme manager from Work the World. A new dental clinic had



*The whole team – dentist, nurses, technician, receptionist, driver and five dental students*

been built which had one dental chair with electrical equipment, an autoclave and a radiograph machine. The clinic would remain open after our visit, but we were opening it by providing three weeks of free treatment to anyone that came. We only used basic equipment and carried out extractions, scaling and GIC restorations. We used ordinary office chairs and all worked together in the one room. There was also a mobile dental van which was used for scaling. Each day two students screened people in local schools and villages, whilst the rest of the team treated patients in the clinic. Any screened patients requiring treatment were referred to the clinic. English is recognised as the official language of Ghana but for many inhabitants their first language is their local language, such as Twi. This did mean



communication was difficult with patients but the team was very helpful in translating and we did learn a few useful phrases such as 'bower num', which means 'open wide'!

During the project we visited many schools, screening 6221 people (mostly children) of which 1291 were referred in. In the newly opened dental clinic at St. Dominic's hospital we carried out 750 treatments, of which over 400 were extractions and over 150 temporary restorations. The project generated much interest and attracted a national television crew who interviewed us and filmed the clinic.



*Treating a patient in the clinic*



*Children's response to a talk on oral hygiene*

The aim of my research project was to determine whether ART performed in Ghana complies with the WHO manual. This was achieved by creating an audit form focusing on the main principles of the WHO manual. One hundred and fifty quick-response audit forms were completed, and the results showed that oral hygiene advice was rarely given, probably due to the communication issues we had with patients, as well as the high patient turnover only allowing us time to give treatment. In 46% of cases ART was placed in multi-surface cavities, which is not ideal; however this was because many of the teeth treated were deciduous, so would exfoliate, and also because the only alternative was extraction. Moisture control was achieved the majority of the time using gauze or cotton wool rolls. Monitoring was only recommended in 47.3% of cases – this again was due to communication difficulties and the nature of the clinic. My conclusion is that the WHO manual on ART is never followed completely in Ghana but it is adapted to suit the conditions of dental practice in the country.

During my stay in Ghana I also visited sights such as Kakum National Park, West Africa's largest tree, Cape Coast, Accra (the capital) and its surrounding beach resorts including Kokrobite beach,



*Kokrobite beach*



which is famous for reggae nights. I ate a Ghanaian diet which consists of many starch-based products such as cassava and yam. The famous dishes were redred, a spicy dish involving either chicken or fish and beans with fried plantain, fufu and banku which were similar involving a starch base covered in a spicy soup with chicken or goat.

Everywhere we went, we had lots of attention with people shouting ‘obruni’ which means ‘white person’! I found the project very enjoyable and I gained considerable clinical experience in treating patients who do not have access to regular dental care. The Ghanaian people were very welcoming and I really enjoyed experiencing the local culture.

## **A Project in Ulaanbaatar, Mongolia**

Sarah Addington-Hall



Choosing where to spend my elective was somewhat done on a whim. “Now where is the most unusual and obscure place I could go?” I thought to myself. Answer : Mongolia. After lots of time spent sending emails to as many contacts I could find on the internet I finally stumbled upon a Mongolia charity, New Choice, who placed me in a children’s dental clinic in Ulaanbaatar.

Flying to Moscow and then on to Mongolia in the most cramped plane I have ever been in (and I’ve travelled on many budget airlines), I arrived in Mongolia and found it very different to how I had pictured it. All the guide books tell of wide expanses of steppes and desert and nomadic people but don’t focus so much on the fact that Ulaanbaatar, Mongolia’s capital city, is very much a city, rapidly growing with strong influences from both eastern and western cultures. From its communist past it is very swiftly taking on a

predominantly capitalist and materialist way of life. The day I arrived a big riot about the governmental election took place, with several people dying, many injured, and the communist party building and an art museum being burnt down. My parents were not best pleased as I had assured them nothing dangerous ever happened in Mongolia!

My elective project was a questionnaire for children and adolescents attending the dental clinic at the Children and Maternity Hospital in Ulaanbaatar. The questionnaire comprised of 14 questions about the children's basic data, dental attendance, attitudes, knowledge and behaviour. Seventy questionnaires were completed with patients aged 3- 20 years who came from 14 out of the 21 provinces. The answers showed that 69% attended for treatment or were in pain; 62% attended yearly or more; 66% were 'very scared' or 'a little scared' of the dentist; 91% used a toothbrush and 89% used toothpaste to clean their teeth; 56% brushed less than twice a day but 80% stated they felt keeping their mouth and teeth clean to be very important to them. Further studies are needed to make any decisive conclusions regarding the knowledge, attitudes and behaviour of the children and adolescents in Mongolia due to the few participants in this survey but this study could be a basis for further research.

I also assisted and observed two dentists who worked at the clinic as well as undertaking some extractions and restorations. My Mongolian was non-existent and their English not so great but we somehow managed to communicate with only a few misunderstandings along the way. I only managed to master about three phrases as Mongolia sounds like a mixture between Russian, Chinese and Welsh, so unsurprising it was difficult to pick up! Dental practice there was very different from practice in the UK. It was mainly based on Russian dentistry, but slowly other influences are coming in and the dentists are eager to learn more but have difficulty accessing new information. The Christiana Noble Foundation ([www.cncf.org](http://www.cncf.org)), an Irish charity, refurbished and supports the clinic financially and is doing sterling work not only in helping treat many children who are in pain and have dental infections but also provides check-ups and preventative advice. However, the use of arsenic trioxide in pulpotomies, pulpectomies on deciduous teeth, and the use of restraint, were very new to me. There were not enough resources for GA extractions so even very young children would have extractions under LA. I was told they could not afford x-ray films so root canal therapy and extractions were undertaken 'blind'.

I was staying with the family of a doctor called Dr Chuka who worked at the Children and Maternity Hospital where the dental clinic was located. They showed me many aspects of Mongolian culture, traditions and everyday life, such as Naadam Festival (a sports festival consisting of archery, ankle bone shooting, horse racing and wrestling), eating most parts of a sheep (including the stomach wall and blood vessels) and other traditional foods, drinking fermented (and mildly alcoholic) horse milk called arag, Buddhism, horse riding and life in a *ger* (or *yurt*), as well as spending a lot of time with Chuka's daughter Tsendmaa who translated for me and whom I taught English. I was even taken clubbing!



*Dr Duka and  
Dr Chuka*



*Outside a  
'ger'*

At the end of my stay I hired a guide, a driver and a Russian jeep and headed south towards the Gobi desert. I quickly discovered the other side of Mongolia, deserted, beautiful and remote, just as the guide books had described. Spending three days wild camping, I saw wild camels and goats, visited nomads, spent lots of time bouncing about on unpaved roads in the middle of nowhere, clambered about on amazing rock formations and had our tents washed away in a night storm – what an adventure!

I spent four weeks in Mongolia. Sadly, my visa was running out so I took the Trans-Mongolian train from Ulaanbaatar to Siberia and, 36 hours later, after battling with Russian customs and a spot of food poisoning, I arrived in Irkutsk from which I started my three weeks of sightseeing across Russia, Estonia and Latvia, taking in Lake Baikal and Olkhon Island, the Kremlin, Lenin, Red Square and St Basil's, the Hermitage and St Peter and Paul's Fortress. I met people from all over the world along the way and had some experiences I will never forget, such as having a banya (sauna) at three in the morning, cramped travel in marshrutka (Russian minivans), songs around campfires, watching ballet in St Petersburg, wonderful Russian markets, a near-total solar eclipse and getting lost on the amazing Moscow underground.

I would like to thank Dr Chuka and her family who looked after me so well, Dr Duka and Dr Undrakh for helping me with my project and letting me observe their practice, Dr Adams for her supervision of my project and all the children who participated in my study. Thanks also to the Bristol Dental Alumni Association for their generous donation.

## Denture Cleansers Down Under

Christoph Harper and Colin McGrath



During the gruelling 24-hour flight to Sydney, Australia, we had much time to contemplate on what would occur during our 6-week elective period. Many important things crossed our minds: would the beer really taste as bad and cost as much as fellow travellers had reported, and would we become labelled infamous POMS as soon as we landed, and what did that even mean? Whilst lying back and (trying to) relax in our economy seats after a tough 4th year at the dental school, we consumed our first complementary alcoholic beverage of the flight and decided that it was probably best just to wait and see.

Due to the sad loss of our friend the Concorde, flights these days have to stop in southeast Asia so, as well as seeing various amazing temples and statues of gold Buddhas, our stop in Thailand was a great opportunity to brush up on one's Siamese (naturally).

The sharp readers amongst you (and obviously all Bristol dental graduates fall into this category) may already have guessed that our elective project was about denture cleansers in Australia. In fact the full title reads 'The cost and availability of denture cleansing products along the east coast of Australia'. The study involved us visiting multiple pharmacies at various places along the east coast of Australia and documenting, with photographic images and on paper, the cost and availability of denture-cleansing products in stock. The pharmacies we visited were situated in Sydney, Brisbane, Cairns and various other smaller settlements up the east coast. This data were then compiled into tables and graphs and conclusions made.

Past studies have frequently focused on denture wearers' cleansing habits, and at the time research appeared to be very limited on the commercial availability and cost of different cleansing agents, a fact this study aimed to highlight. Published research has shown

that as few as 40% of dentures are properly cleaned and there is wide variation in the methods and products employed. Our study showed that the most available cleansers were alkaline peroxides and disinfectants such as chlorhexidine, and that costs varied, with hydrogen peroxide being the cheapest at \$4.02 Australian dollars, and one litre of Milton's solution the most expensive at \$9.89 Australian dollars. These at the time of the study would equate to £2.01 and £4.95, which are prices affordable to most. In short, this means that availability and cost are not factors in patients not maintaining their dentures adequately.

Some suspect route planning left us staying in a rather dubious area of Sydney, more akin to Soho than Times Square. Naturally this less-than-classy venue resulted in us bumping into some of our fellow Bristol 4th years, who also happened to have 'stumbled' upon the seedy delights of the Kings Cross area.

To catch a more real experience of the Australian way of life, we spent a week on a small vineyard in Queensland belonging to a family friend. This was amazingly peaceful and totally different from the tourist feel of the coastal towns. Maybe the free hand-picked Shiraz Viognier helped the tranquillity of the stay – who knows ?

Our travels took us to many islands off the east coast, including Magnetic Island. This, to our surprise for its size, had its own very well-stocked chemist, the staff of which were at first quite concerned with our photography of their merchandise; after much explanation of our innocent intentions weapons were lowered and we were allowed to continue our research.

Great fun was had by us both and it still amazes me that, after surfing, fishing, wave riding, chopper touring and bungee jumping our way up the golden coast, we never once lost that keen eye for a well-stocked chemist.

## **IN THE WHEELTRACKS OF THE TOUR DE FRANCE**

Ian Callaghan (2003)

The Tour de France has been taking place since 1903 and, although mired by controversy in recent years, it still holds a firm place in the hearts of the French public and is the most highly attended spectator event in the sporting calendar. The legendary nature of the Tour, coupled with an insane desire to take on a hefty challenge, led me and my old schoolfriend Matthew Ulyatt to follow in the wheeltracks of the Tour in 2008.

Our lofty ambitions were set in motion in September of 2007. Reminiscing over a beer or two about the days when we both used to race competitively, Matt mentioned a long-standing dream to ride the route of the Tour. This seemed a good idea at the time. People thought us mad and doubted that we could ride the same route as the professional tour in the same time frame but we quickly garnered some local media interest and support from companies such as Powerbar and SIS Nutrition, and riding the challenge in aid of two charities, CLIC Sargent and MacMillan Cancer Support made us even more determined.

We had previous form in this area, Matt having ridden the 'End to End' as a 17-year-old and I had ridden a number of long-distance events. This was somewhat of a larger undertaking, however, and we both set about training with considerable gusto. Living 370 miles apart meant solo training. Weekly phone calls kept us in touch and we almost challenged each other to see who had covered more miles. By Easter we determined that as we were going to be doing what the pros were doing, we should act like pros, so it was off to Majorca for a week for some warm weather mountain training together.

We broke bikes and crashed spectacularly during our training. We drove miles all over Britain to ride organised events and test our growing fitness. We got up at ridiculous times in the morning and cycled in all weather conditions. We were supported throughout by family and friends, and for the trip we would have three support teams each doing a week of the three-week Tour: Matt's parents Paula and Chris, my girlfriend and her friend (both named Kate, so they came to be known as Team Kate), and my parents Liz and Peter. By the beginning of July we had everything (route, accommodation, support, food, drink, etc) prepared. Now all we needed to do was turn up and do it!



Easier said than done – Le Tour is arguably one of the toughest sporting events in the world and attracts spectators from all over the world. In 2008 there were 180 riders from 18 teams supported by a myriad of team doctors, masseurs, mechanics, managers, vehicles carrying spare bikes and so on. The police operate rolling road closures to ensure clear roads for the riders – no need to observe the rules of the road for them! There is even a 'caravan' which precedes the Tour, a curious and baffling mix of vehicles advertising sponsors of the Tour – the sight of a giant mobile Camembert rolling along the road with someone throwing smaller versions at/to the fans at the side of the road is not unusual. However, we didn't get to see any of this as we were following two days behind the race – without the closed roads, the masseurs or the giant Camembert – more's the pity! We had the published route description and the maps we had plotted. We had one spare bike and a support car-cum-picnic site-cum mobile bike shop-cum-energy bar/gel/drink dispenser!



*We're off!*

Our ride started near Brest on a damp Monday morning, waved off by Matt's parents and a bin lorry – not perhaps as romantic as the start which the pros would have encountered, but this was the beginning of the realisation of a dream: we were riding the Tour de France ! We had imagined glorious sunshine and waving crowds – what we got was tyre-deep standing water, tropical rainfall and the occasional Frenchman eager to point out that the Tour had already passed and we were a little behind schedule. Still – the first day passed without incident and what a feeling that was. We had ridden a

whole stage of the Tour de France. And then the realisation hits you – that's 195km down, 3300km to go!

And so into a soon-to-be-familiar routine of downing energy replenishing drinks, driving to overnight accommodation, washing off water bottles, showering, changing, massaging of legs, eating, updating of blog, night-time recovery drink, sleeping, waking, eating and then back on to the bikes. This is a very basic summation of the time from the end of one day to the beginning of the next. It had to become routine because there is so much to fit in. When you are on the bikes for an average of 7 hours per day, riding an average 105 miles, we were using at least 5,000 calories per day on the bike. It's hard to eat that much, and without it you simply can't go on from day to day.

After only 370km, Matt had to climb off with an excruciating pain in his left knee. He thought that it was all over. But we knew the pros put up with phenomenal amounts of pain – there is a story of one rider arriving at the finish of a stage having worn the enamel of some of his teeth from grinding them to distract him from the pain he was in following a fall – and so Matt thought, “if they can do it, so can I”. And it worked – after a few very slow and painful kilometres, the pain had gone. I also was in the wars with a tendon-related pain in my right shin which I got over by applying an anti-inflammatory spray and a very tight bandage, which probably just cut off the blood supply and hence got rid of all pain!

We laboured on and a short Stage 4 allowed us a virtual rest day before we continued in towards the centre of France, including the longest (and what turned out to be the wettest) stage of the Tour at 232km to Chateauroux. A 90-degree shift south followed through the Massif Central and our first taste of 'proper' hills – they didn't really class as mountains yet!

Matt's Dad, Chris, celebrated his birthday on Stage 6 and decided to ride the stage from Aigurande to the ski resort of Super Besse. Unfortunately, with the stage being the best part of 200km including the two largest climbs so far at the end, we missed Paula in the support car who had gone back down the mountain to look for us as we were so late arriving! Thinking it couldn't get worse, we later learned that Team Kate had lost control of their hire van and crashed into the central reservation of the motorway on their way from Toulouse to meet us that night! Luckily unharmed, but shaken up, they found temporary accommodation and convened with Chris and Paula at the start of stage 8 from Figeac to Toulouse. With a

noticeably pleasant shift in both weather and architecture, we passed through Gaillac, a noted wine growing region (which we later sampled). We entered our first big city, Toulouse, after eight stages with the shadow of the Pyrenees looming ominously in the background.

Stage 9 was a mammoth 225km over seven categorised climbs including the famous Cols de Peyresourde and Aspin. We set off from the hotel at dawn, so that we could finish before dark, after saying our goodbyes to Chris and Paula as Team Kate took over for the next few stages. Three minor climbs, and a quick croissant in Carbonnes, and we were ready to take on our first proper climbs of the Tour. These were proper mountains!

Stage 10 from Pau to Hautacam was the stage chosen as the Etape du Tour this year (a stage which is ridden about a week before the Tour itself by about 8,000 foolhardy amateurs). It was 160km including two of the most famous climbs in the Tour, the Col de Tourmalet at 2,115m and Hautacam at 1,520m, our first mountain summit finish. These climbs are categorised as Hors Catégorie (out of category), which basically means: "I'd get off and sit in the car if I was you, you strange lycra-clad fool." The Hautacam and Tourmalet are sites of a number of historic Tour de France moments and it was a real feeling of pride to be riding over the painted names of past Tour greats such as Fignon, Virenque, Jalabert on the melting tarmac as we slowly ground our way up these long, punishing climbs.

After 10 days of riding we had travelled from the north of France to the very south and crossed the highest passes we had ever ridden, including some of the most iconic to the Tour de France (the names of Tourmalet, Hautacam, Aspin and Peyresourde are enough to put fear into many a cyclist), but we'd conquered them and had earned a well-deserved rest. We were still getting on famously off our bikes, but conversation when on them had slowly diminished from the hysterical frenzy of day one. We had both retreated into our own thoughts to try to find some way to deal with the creeping pain and exhaustion that was affecting us. We could still ride and were keeping up a good pace, but mental stamina as much as physical stamina was as important now. The rising roads of the Pyrenees brought this into sharp focus as we separated to each travel at our own pace and try to conserve energy for the next mountain, the next day, the next week. We had covered nearly 1100 miles with over 70 hours in the saddle and deserved our first of two rest days.

A number of long transition stages across the sweltering southlands of France followed. Here the temperature rises to over 40 degrees and the terrain offers no shade or respite from the beating sun. There are very few waymarks or notable sights to see and we still don't know how we made it across these stages – we simply battled, knowing that we had to get to cooler climes soon. The only problem was that with these cooler climes came big climbs – the Alps. It was in this region that my parents Peter and Liz took over from Team Kate.

The Alps are a different beast to the Pyrenees – the climbs are not as steep but they go on for miles, and miles, and miles. The average length of the big climbs in the Pyrenees had been about 14km, in the Alps this was about 21km. This meant going upwards for about 2 hours – sometimes 3 hours. I have never known such a mental challenge as this. To cycle along on the flat for three hours without stopping is no problem – you look about, you chat, you drink, you think. To grind uphill for three hours without stopping is a different prospect altogether. You struggle to breathe, your legs turn over so slowly that you can see the spokes rotating in your front wheel as your head drops downwards in putting in the effort to keep the bike moving forward. The kilometre markers pass by at such infrequent intervals you think someone has stolen them (sometimes they have!). All you want to do is stop, but pride won't let you – you haven't climbed a mountain unless you've done it non-stop!

We climbed out of France into Italy over the 2,744m Col d'Agnel. It was in Italy that we were treated to our second rest day, which was spent with Malcolm and Steph, a couple who had contacted me through the Bristol Evening Post and offered us accommodation. We had a thoroughly enjoyable time and it was with some reluctance that we set off again to climb back into France over the highest road pass in Europe, the Cime de Bonnette-Restfonde (2,802m). This is over twice the height of Ben Nevis and the air starts to get thin at that height! What a silly thing to do on your holiday, eh?

Stage 17 was the day of reckoning for us and would decide whether we could finish this mammoth undertaking: 210km from the town of Embrun in the heart of the Alpine valleys to the summit of Alpe d'Huez, one of the most feared climbs of the Tour. This is where the Tour is frequently won or lost for the professionals and the site of many famous Tour moments, including Lance Armstrong's 'look' at Jan Ullrich before destroying the field in 2001 to win the third of his seven consecutive Tours. Once again leaving before dawn, we

barely spoke as we suffered along the valley floor as the sun gradually crested the high mountains and began to warm the valleys. We were suffering emotionally and physically and we both wondered how we would cope. We had already cycled over 1600 miles with only two days off in 17. On we went, slowly climbing the Col de Lauteret and the famous Col de Galibier which tops out at 2,642m, getting steeper all the way to the top – this is the most evil way to build a mountain road! The only thing keeping us going at this point when our legs were feeling weak and powerless was the thought of those we were doing this for. It sounds like a cliché, but believe us when we say it. The sound of Matt shouting and grunting to himself to keep going was a vocalisation of this.

The highlight of the descent saw us overtake a Porsche (we are that quick!) before a lunch stop in the valley floor, and then the second climb of the day over the 31km-long Col de la Croix de Fer at 2,068m. The heat was horrendous and the climb went on for ever. I was overheating to such an extent I was pouring water over myself to keep cool. As we each found a 'comfortable' rhythm, the distance between us grew until we could no longer see each other. On and on it went, snaking along rock-walled hairpins until I dragged himself over the top to find Matt half dead at the side of the road! The gaggle of cyclists at the top was incredible – so many out to conquer one of the famous climbs of the Alps. We didn't meet anyone planning to ride three in a day though!

And so only one more climb to go. With almost nothing left in the tank at the bottom of Alpe d'Huez and following a descent involving some nasty short climbs, we stopped to refuel and replenish water supplies. Carlos Sastre climbed Alpe d'Huez in 39 minutes this year and won the Tour as a result of his efforts. Rounding the first corner and hitting the 11% gradient we knew we would not be challenging this time! On and on and on we struggled, barely being able to focus. Each of us was in our own little world, separated by a margin of several minutes, barely noticing Liz and Peter at the side of the road cheering us on. As I rode to the finish line I saw Matt and my parents waiting and was spurred on to sprint the last few metres. It really was a staggering feeling that words struggle to convey. We had completed the toughest day of cycling in our lives! We knew we could complete the Tour now!

The remaining four days passed by with me succumbing to some heatstroke from the efforts of the mammoth Stage 17. I couldn't eat anything, but this close to the end there was no way I was

stopping. So with barely any nutrition inside me I carried on going until my body decided: “OK, you win, I’ll let you eat something!” The power of mind over matter is quite phenomenal. At home, you’d stay in bed feeling sorry for yourself – but we had set out to do this, and do it we would!



*Celebrating  
at the Arc de  
Triomphe*

So to Paris and the denouement to our Tour de France. From cold dark winter nights spent on the turbo trainer in our respective flats, to the Brecon Beacons, the Southern Uplands of Scotland, the Cotswolds, the Campsies and Majorca; on to Brest, through the Massif Central, the Pyrenees and the Alps and now, after 2,200 miles (and another 3,300 miles in training) we were riding through the Forêt de Meudon and catching our first glimpse of the Eiffel Tower. Again, it was a feeling you can’t replicate in words – I constantly find myself coming up short – it was simply the most fantastic moment. Sheer unadulterated joy. And as we rode up the Champs Elysees we realised our dream. All our support teams were there – and some extra family friends! We cracked open champagne on the finish line in front of the Arc de Triomphe with people crowding round wanting to have their photos taken with us! The smiles in the photos don’t convey the pride, the sense of achievement and the incredulity of having achieved what we had achieved. I still can’t quite believe that we cycled the Tour de France.

We recorded all our times, speeds, distances for the ride – but really they are inconsequential. We had ridden the greatest bike race



in the world and raised money for two fantastic charities, CLIC Sargent and Macmillan Cancer Support.

And we realised a dream. The question now is: What next?



*Family congratulations*



## *ALUMNI REUNIONS*

1958 REUNION, July 2008

Brian Toms

Our reunion was held on the weekend of the University Convocation. The following attended: Ken Tyrrell, Ken Bevan, David Dowling, Frank Turner, Gerald Pillow, Tony Nowell, Mary Phillips (the wife of Tom who died 12 months ago) and myself. They all looked a touch older, but fairly healthy.

On the Saturday morning Gordon Gray very kindly showed us around the Dental Hospital, after which we partook of the lunch arranged by the University for 1958 graduates at the Victoria Rooms. In the evening we visited the old University refectory, now Brown's restaurant – a somewhat nostalgic experience.

We received several apologies from colleagues who could not attend – so much so that Ken Tyrrell and I think we will try another get-together before too long.

1966 ('66 Soc) REUNION, 25 January 2009

Bob Binnersley

The annual reunion, which has been held on the first Saturday in December for the last 41 years, has finally moved to a new date. It has succumbed to the invasion of pre-Christmas office parties which have made holding a discrete meeting difficult.

We have always tried to keep the general public sheltered from the reunion chit-chat and sing-song and the likes of Hawkesby-Mullins, Goldring and Smith as a gesture of public spiritedness.

A select gathering of 24 true and faithful reunionists met and discussed the meaning of life and other important personal matters. Tiffin was taken in Wetherspoon's Berkeley drinking establishment (opposite the Wills Memorial Building), followed by dinner at the Berkeley Square Hotel.

Sister Davison was in attendance together with alumni chairman Reg Andlaw. A selection of old faces from the 66 year (some very old) and friends agreed that the meeting was a success and that it would be held on a similar date next year, when any member

holding a bus-pass and living entirely dependent on a pension will be bought a welcoming drink by organiser, Bob Binnersley.

1971 REUNION, 20-22 April 2007

Johnny Ash

A smaller but more intimate group of class of '71 met up in April 2007 for a 35th anniversary reunion in Bristol. Stalwart David Brooker once again organised this event, having arranged the previous get-together (25th). His commitment to the task involved endless letters and e-mails to graduates from all over the globe; several trips back to Bristol to check out the hotel and restaurants and negotiating prices; sorting the dates (which were carefully picked to avoid conflict with important Six Nations Rugby matches); and getting deposits from those attending to make sure they turn up!

Finally, about half the class, with partners, made it: Toks Abiose, Bernard Aslett, Ian Burke, Denis Cahill, Eria Chen, Clive Fickling, Lance Hale, John Hoppins, Brian Joannidi, Peter Malin, Iain Moffat, Martin Morgan, Odd Nord, Gary Phillips, John Plumstead, Daan Rens, Bernie Speculand, Freddy Weel, David White and Roger Williams – as well as organiser David Brooker and reporter Johnny Ash. Toks Abiose had travelled from United Arab Emirates, Peter Malin from Australia, Freddy Weel from Barbados and Johnny Ash from Guernsey. As before it took no time at all to fall into the group's easy company. Some had retired and were enjoying their freedom whilst others seemed happy to continue working. Interesting discussions were aired on the pros and cons of early retirement. As usual the NHS took some body blows.

The weekend was mapped out with Friday arrival 'meet and greet' in the hotel bar followed by supper. Saturday was spent on the river in a hired launch which showed us parts of Bristol not normally seen. Luckily the weather held and we enjoyed lunch at The Chequers Pub at Hanham. It was gratifying to see Bristol looking so well preserved and lively. The redevelopments along the river are stunning and are a credit to the city planners. The evening was rounded off with a cosy dinner in a private room at the Bristol Hotel du Vin. The more sensible members went to bed whilst the bad lads continued to party until the bar closed. Some were very late for breakfast!

Normally these reunions are just older versions of student common room cliques but the reduced numbers allowed everyone to

intermix and create a sense of bonding not felt before at the previous occasion. We all agreed that this was most enjoyable and we hope to repeat the exercise in 5 years' time – perhaps in Guernsey!

*Photograph on centre page*

1973 REUNION, 1st November 2008

Sarah May

Someone had to draw the short straw and write an account of our 35th reunion. It looks like that someone is me. When Graham Hooper contacted me (you see what happens if you post on Friends Reunited) and suggested we organise a reunion I e-mailed back at once full of enthusiasm. As the date of the gathering drew nearer I realised the enormity of the task before me; how could I lose the ravages of those 35 years before the drill! I should have known better. As we gathered outside the Dental School for a tour kindly organised by Gordon Gray, the Clinical Dean, the years fell away and we were all quickly reminiscing and remembering our happy times together. See what 35 years of mercury vapour (Brian excepted) can do to the memory. Graham Charlton and Ken Marshall joined us for the tour of what to most of us was an unrecognisable building where we marvelled at the facilities today's students enjoy.

Twenty-four of the Year of 73 gathered with partners to enjoy a weekend in Bristol based at the Marriott Hotel. The dinner on Saturday night was a noisy, fun occasion helped by copious amounts of alcohol and the fact the Chris Stephens had brought along a copy of our Op-Techs exam results. We were delighted that Graham Charlton, Ken Marshall and Mike Cooksey were able to come to the pre-dinner reception and that Declan Anderson, Bruce Matthews, Abdul Adatia, Reg Andlaw, Matron (not looking any different!), Chris Stephens and Wendy Mehta were able to come to the dinner. Geir Johansen spoke very movingly about the sad death of Jon Myrvold. The evening drew to a close in the early hours after we had phoned Charles Lansley, who at the last minute was unable attend, to ask his advice about being on call! Better come to the next one Charles.

I implied at the start that Graham and I had arranged the reunion. I think I should come clean now. I did nothing except send encouraging e-mails. The whole of the organisation of an excellent and most enjoyable event was due to Graham's hard work and, in

spite of our efforts to drink the Marriott dry, he made a profit on the dinner which has been put towards a proposed reunion in two years' time, to be held in Norway. I, for one, can't wait and I am already applying copious amounts of anti-ageing products so that I will still be recognisable.

*Photograph on centre page*

1978 REUNION, 8 November 2008

Janet Scott

In December 2007, I was sitting in my office, idly gazing at my BDS certificate, when I realised that it was 29 years, almost to the day, that we had all looked at the notice board in the Dental Hospital to see if the University felt we had worked hard enough to call ourselves dentists. For some reason, the class of 1978 had not been able to reconvene and celebrate our 25th anniversary but I felt it would be a shame if we to let 30 years pass us by without a bit of reminiscing. I then tried to work out how to turn this dream into a reality, especially with Privacy Laws preventing us from finding the graduating class easily. However, with a little help from the Alumni Association and a lot of help from the 'local organising committee', mainly of Jane Rooney (Polge) and Caroline Baines (Wortelhock), we were able to find most people and relive the heady days of the 70s at the Bristol Marriot Hotel on 8th November 2008.

Jane and Caroline had done a fantastic job of finding a venue, choosing the menu and generally working so hard behind the scenes. The main dinner was on the Saturday, but many people started the party early by arriving on the Friday evening and doing what we seemed to do so well as students, propping the bar up and talking. This time the bar was in the hotel, and then we adjourned to a little restaurant in the city for dinner and a tale or three. Late night number one!

On the Saturday, Jane had arranged for us to have a tour of the Dental School and Hospital – the façade of the building was still the same and recognisable, but the inside was totally different. The Students' Common Room, the scene of so many parties and discos, was gone and in its place was a clinic. Gone too was the Cons clinic we knew in days of yore, replaced by modern open clinics with infection control being at the front of the designers' minds. The old

‘Op Tech’ lab was nowhere in sight – modern hi-tech facilities with cameras able to focus in on the teaching and beam it to the students’ TV monitors. Such is progress. Our thanks are extended to Dental Clinical Dean Gordon Gray who gave up his Saturday afternoon to show us round.

On Saturday evening, the clocks went back, not for the end of summertime, but 30 years – no-one seemed to have changed, although the boys’ hair styles were more in keeping with the 21st century than the wild heady days of the 70s. I had not been able to make our 20th reunion, so it had been 20 years since I had seen some of my classmates, and some I had not seen since graduation. The years just melted away – conversations started as if it were yesterday we had last seen each other. It was interesting to see that we tended to stick to the groups that we were in as students but conversation flowed freely in catching up with all the latest gossip, and who had done what. Most of us were still in the workforce, but not necessarily in dentistry. Some of us had children who were now themselves at university, some even doing dentistry.

Jane had not been able to contact one of our year, but of the others, we had 26 attend the dinner. Some of the others had sent apologies (Peter Maguire, for example, was in Edinburgh that weekend, at his wife’s 30th reunion – they had got in sooner than we had, excuse accepted, Peter). Jon Hicks was walking in Italy, having recently retired from British Airways, so was unable to attend. A very small minority said they did not wish to attend, but the rest of us had so much fun, I wish we could do it every year.

Duncan Lamond (our illustrious Student President) had not lost his sense of humour – he delivered an eloquent oration after dinner reminding us of our student days and some of those tutors, loved or hated and who shall remain nameless. He recalled Sarah Williams’ and Caroline Wortelhock’s imaginary interviews with the Dean on applying to the Dental School, and comparing them with his own interview, when he stated that his ambition was to drink his way through the course and enjoy life to the fullest whilst doing as little study as possible. Simon Blackburn, whose middle name must be Litchfield, brought tears of joy and laughter to our eyes with his DVD slide show of ‘Bristol in the 70s’. Andy Lane had set up a website to which we uploaded photos and Simon had used these in the show along with some considerable talent on his computer. Such is progress. I am sure the partners who were there were quite understanding to see their other half with someone else. Surprisingly,

or maybe not, a common theme in a lot of the photos was a glass of liquid in our hands! Niki Hawkins had found our final exam papers and brought them along. Rob Firth was given the job of giving every dentist present a door prize, and he did a superb job of this, remembering subtleties and nuances most of us had long forgotten.

After the speeches and photos, it was time to start partying in earnest – Christine Bentley's husband, Tom, is a DJ in his spare time and he had either volunteered or was volunteered to provide the music. Not the old vinyl 45s, manually putting each record on the turntable, but this time it was a computerised programme all ready to go. Oh, they just don't make the hits like they used to – all those 70's hits. Most people had a dance with everyone else, and before we knew it, it was time to stop disco-ing as we had only booked the dance floor till 1230, and it was 0130. So we adjourned to the hotel bar, to find a few of the 20-year reunion at the tail end of their 'do'. It seems that we were the survivors, though, outlasting the 1988 crew well into the night.

For those who stayed at the Marriott, there were tired faces at breakfast on the Sunday – perhaps we are not as young as we used to be, but we still know how to party in style. In a moment of madness, Andy Lane volunteered to organise the 35-year reunion and we now have a comprehensive database to keep in contact. For those of you who were able to attend – I hope you enjoyed the evening as much as I did. For those who couldn't make it – you missed a fantastic weekend, and I hope that we can all find the time to get together in 2013.

*Photograph on centre page*

1983 REUNION, 21-22 November 2008

Owen Jenkins

The class of '83 gathered together over the weekend starting November 21st 2008, for their 25-year reunion. A good turnout of 28 from the year plus partners made the effort, with people flying in from far-away places such as Canada (Abbas Tejani) and Singapore (Kathy Foster). Well done to them! Of course not everyone could be there and some apologies for absence were received. Dai Jones didn't think there would be enough food! Dave Brabner couldn't find a



crimpolene suit, and Paul Mac thought that the huge distance to travel from Westbury on Trym would be too much for him.

The weekend as always began on Friday night at the new student bar at the Dental Hospital. A small group of us got re-acquainted and finished off the evening with a curry in Clifton! A larger group gathered for the traditional Saturday lunchtime at the White Hart, which preceded the tour of the Dental Hospital. It was like we had never been away – 25 years disappeared and plenty of drinks were sunk.

Redwood Lodge Hotel was the venue for the main event that began at 7.30 with a champagne reception arranged by Jim Toms, who had managed to obtain sponsorship from Strauman. Thank you Jim for a good start to the evening. It was nice to see some distinguished former tutors that included Reg Andlaw, Dave Brown, Louise Foster and Clive Woodhead. Reg reminisced on a particularly fond memory of an afternoon at the brewery in Hanover (I won't expand further!).

Suffice to say the meal was excellent and the traditional 80's themed music was preceded by entertainment provided by Chris Crooks who set up a slide show that reminded us how young we looked 25 years ago, but brought back plenty of happy memories. This was followed by a not-so-successful reworking of Jeff Becks Hi ho Silver Lining, by Smillies 3 Degrees. This had to be seen to be believed!

Melanie arranged the Charity Raffle and Dave Wood gave a short speech and vote of thanks to Shilly and Tracey in particular. As always they had put in a great deal of hard work contacting people, organising the venue and overseeing a successful weekend. It's easy for me to say but I think they should do it every year!

Festivities continued through into the early hours and the 25 years began to catch up. Sunday was a write-off, but who cares, it was worth it. Here's to the next one – after all life begins at 50!

*Photograph on centre page*

2003 REUNION, 12th July 2008  
Philip Hannon

Quite where five years had gone was a bit of a mystery as the Class of 2003's first reunion loomed. A call to Theresa Munn's office (this time not pulling a sickie!) secured a couple of hours of GBG's Saturday afternoon for a tour of the new and improved dental hospital. The place was unrecognisable in parts and I think it's safe to say that Bristol can now boast one of the most hi-tech dental schools in the country. One of the only places left untouched was Adult Clinic 2, where much reminiscing took place. The same couldn't be said for the dental bar, which is much smaller and, despite its newer appearance and layout, doesn't quite lend itself to the same kind of carnage we got up to on those infamous Friday evenings! A few of Gregg's doughnuts for GBG as a thank you put a big smile on his face, and an even bigger one on ours when he hung the bag round his ears for the official 'Facebook' photograph.

The venue for the reunion itself was the stylish Hotel du Vin, and the turn-out was fantastic. It was great to see everyone after such a long time, and hear about what everyone's been getting up to. It felt like we'd never been away! The meal itself was great and enough wine flowed to ensure the patter didn't dry up! After lining our stomachs and catching up with everyone, the inevitable crawl up Park Street ensued, with a visit to 'The Lounge' a must for many!

Like all good nights, it was all over far too soon. We can console ourselves that the next reunion is only five years away, and I'm sure those who couldn't make it this time round will be keen to make the next one!

A big thanks must go to Karen Andrews for organising what was a fantastic night (Facebook is useful for something!) and to Dr Gray for giving up his spare time for the tour. See you all at the next one!

*Photograph on centre page*

## *FORTHCOMING REUNIONS*

*We have been notified that the following, whose contact details are given below, are planning reunions for later this year.*

1963	Alan Lawrence	email: alanla@ntworld.com tel: 0118 954 1332
	Janet Mayes	email: jan.mayes@btinternet.com tel: 01536 330 671
1968	Chris Barton	email: chris4polly@yahoo.co.uk
1969	Roger Hartley	email: hartley@enta.net
1974	Angela Cropper	email: ang@acropper.com
1984	Andrew & Lisa Sprod	email: andrew.sprod@somerset.nhs.net
1988	Darren Hills	email: darren@thesmilesuite.com

### 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/community/lost-alumni](http://www.bristol.ac.uk/alumni/community/lost-alumni).

The most reliable source of addresses for those who are still practising is the Dentists Register, which can be found on the General Dental Council website: [www.gdc-uk.org](http://www.gdc-uk.org) (click on GDC-Home and then on Search our Registers). 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. Information about

hotels that have been used in recent years may be obtained from Reg Andlaw.

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](mailto:tiharbourside@bristol-city.gov.uk), website [www.visitbristol.co.uk](http://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](mailto:regandlaw@talktalk.net)

Clinical Dean's office

tel: 0117 3424308

e-mail: [Theresa.Munns@bristol.ac.uk](mailto:Theresa.Munns@bristol.ac.uk)

BDAA website

[www.bristoldentalalumni.co.uk](http://www.bristoldentalalumni.co.uk)

## ALUMNI NEWS

1962



*Martin, Edward and Murray*

**Murray Walker** has sent news of a meeting with **Martin Bastick** and **Edward Shaw**, friends since their student days, in Dorset last June. **Martin** was over here from his home in Tasmania, where he practises in Kingston, near Hobart, enjoying wonderful views over

the ocean. He has a fine vineyard producing an excellent harvest of Pinot Noir (1500 bottles) and Reising (1250 bottles) which he hopes to export to China. He is very active in the Tasmania branch of the Australian Dental Association. **Edward** practised in Midsomer Norton, Somerset, and in retirement was a cross-infection adviser. **Murray** retired as Emeritus Professor of Oral Pathology and Oral Medicine at Sydney University, Australia, but after 13 years in Sydney is now back in England and is a part-time consultant pathologist at University College London Hospital.

1968

**Nicki Kitching (aka Veronica Spencer)** spent 30 years treating Berkshire special needs patients and retired in 2000 with MHO status. She has carried on part time and has recently finished her 14<sup>th</sup> year at Broadmoor (*no comment*!). **Chris Barton** has been working in Uganda for the past 7 years. He has organised the last three or four reunions of his year and is hoping to organise another this year.

1975

**Philip Ratcliffe**, that great lover of cricket, was out in Antigua in January watching the second test match when he found **Clare**

**Ledingham (Owens, 86)** sitting beside him. What a coincidence ! She and her family were also staying at the same resort hotel as the Ratcliffes – a small world !

### 1978

**Janet Scott** was awarded a Conspicuous Service Cross in the Australia Day Honours (January 26, 2009) for “outstanding achievement as a Commanding Officer of the 3<sup>rd</sup> Health Support Battalion and Senior Dental Officer, South Australia”. She is the first non-medical officer to command the Health Support Battalion (essentially a mobile field hospital), which is an Army Reserve unit in which she holds the rank of Colonel.

### 1986

**Clare Ledingham (formerly Ketley, née Owens)** confirms that she met Phil Ratcliffe in Antigua purely by chance – what a character, she says ! Phil obviously asked her lots of questions, because he informs us that Clare got an MSc at the Eastman, London, in 1991, a PhD in Liverpool in 2000, published 23 papers on fluoride excretion, been on the Specialist Paediatric Dentistry Register since 2000, and is now a Senior Dental Officer in Paediatric Dentistry for Liverpool PCT and an honorary tutor in paediatric dentistry. (*Was he not concentrating on the cricket ?*) She and **Janet Griffiths (83)** hosted the 2008 Conference of the British Society of Paediatric Dentistry in September

### 1988

**Frin Mills** continues to wear many hats: Community Dentist, Postgraduate Dental Tutor, NEBDN examiner, Emergency Dentist and occasional dental nurse course teacher.

### 1997

**Alistair Graham**, who lives in Australia, now has a daughter, Holly Josephine, born in December. **Andrew Bain** has signed a record deal with SonyBMG to fulfil a lifelong ambition to make singing his full-time career. **Peter Day** is off to Australia to work in paediatric dentistry for 3 months, following completion of his PhD.

### 2001

**Rosamunde Walker**, daughter of **Murray (62)** and **Susan (65)**, is a Specialist Registrar in Orthodontics at the Royal London Hospital.



## 2005

**Helen Petersen**, a Walport Academic Clinical Fellow in the Department of Oral and Dental Science, was last year awarded a Wellcome Trust Research Training Fellowship (RTF) worth £132,000 to fund her PhD studies. She is one of the first Academic Clinical Fellows to receive such an award.

## OBITUARY

Gary Porter (14 April 1977 - 27 December 2008)



Gary qualified from Bristol Dental School in 2001 and was tragically killed whilst on holiday with his wife Natalie in December last year.

Nobody could forget the fun-loving, ginger-bearded Irish chap who arrived in Bristol in 1996 with shoulder-length hair and a unique taste in shirts. Gary was immensely popular with the students in his year and was elected as the UBDSS President 2000-2001, a role

that he carried out with passion and his usual enthusiasm.

Gary married Natalie (Bakheit) who also qualified from Bristol in 2001. They were a perfect couple. Many friends from Bristol were at their wedding in Ballymena on 25 August 2003. It was a fantastic day, the sun shone and the air was full of fun, excitement and love.

Gary worked as a general dental practitioner in Warwickshire. He and Natalie loved travelling and spent their holidays in many far-flung corners of the earth. It is too difficult to believe that his life has ended so early. He was a fantastic friend to so many people.

A Service of Thanksgiving was organised by Natalie in Bristol on 4<sup>th</sup> April to which most of the class of 2001 attended together with family, other friends from Bristol and staff from the Dental Hospital. A dinner at Gary's favourite Lebanese restaurant was organised and followed by the old tradition of a late Dental Bar.

Everybody from the year of 2001 and all the staff at the Dental Hospital who knew Gary send their heartfelt sympathy to Natalie and to Gary and Natalie's families. He was a wonderful person and is sadly missed.

Matthew Garrett

## INCOME AND EXPENDITURE 15/11/2007 – 15/11/2008

## Income

Subscriptions	£ 4,185.00
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## Expenditure

# Newsletter

Preparation	£ 250.00
Printing	£ 438.00
Distribution	£ 381.18
New website – set-up	£ 300.00
Donations	
Dental School library	£ 1,000.00
UBDSS	
Music system for common room	£ 1,190.29
Final Year Dinner June 2008	£ 46.99
Miscellaneous	£ 250.00
Miscellaneous (stationery etc)	£ 66.28
Bank charges	£ 157.91

**Total expenditure** **£ 3,830.65**

**Excess expenditure over income** **£ 354.35**

<b>Bank balance</b>	<b>at 14 November 2007</b>	<b>£ 8,104.26</b>
	<b>at 15 November 2008</b>	<b>£ 8,458.41</b>

## WHERE ARE THEY NOW?

*The addresses we have of the following members are no longer valid. We would be pleased to be given their current addresses.*

Gordon Carey (01)	Maya Ringstall (01)
Simon Carlyle (79)	Richard Seaton (01)
Erica Davies (05)	Fiona Turner (91)
Carol Gough (96)	Nicola Waller (95)
Gregory Peake (92)	Helen Walters (95)
Sarah Richards (98)	