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IU School of Dentistry

NEWS- LETTER

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FOR THE 22ND CONSECUTIVE YEAR the Indiana University School of Dentistry has been awarded a clinical fellowship in pedodontics by the United Cerebral Palsy Research and Educational Foundation. This year's recipient of the award, which provides a \$12,500 grant for one year, is Dr. Theodore R. Lynch, a 1978 graduate of the School. His fellowship is one of 20 educational grants by the Foundation this year to support training for health care professionals working with disabled children and adults. Dr. James A. Weddell, who received the fellowship last year, recently joined the full-time faculty in the Department of Pedodontics.

Indiana University's participation in the fellowship program was initiated by Dr. Ralph E. McDonald, then Chairman of Pedodontics and now Dean of the School. Dr. David R. Avery, present Chairman of Pedodontics, has been notified that a similar clinical fellowship has already been approved for next year. The department's application received the highest rating of all applications for UCP clinical fellowships to begin in 1981 and has been designated the H. Houston Merritt Clinical Fellowship.

DR. RICHARD F. SMITH, Chief of the Dental Service at the Veterans Administration Medical Center in Indianapolis, reports that the V.A. Hospital has recently completed construction of a new dental clinic at its West Tenth Street facility. An open house will be held on October 1, 1980 from 1 pm to 4 pm to officially open the Clinic. The School of Dentistry's Faculty, staff and students are cordially invited to attend.

DEAN RALPH E. McDONALD has passed along to the Newsletter the following communication that he received from Christopher R. Brown, Third Year Dental Student, President of the I.U.S.D. Student Chapter of the American Society for Geriatric Dentistry:

Recently our student chapter of the A.S.G.D. had an experience I'd like to share with you. We were asked to come to Flanner House, an inner-city multiservice center to do an oral survey on the senior citizens that are involved there. I had a fairly hard time getting all the equipment together for the work but with some help we amassed enough. I work part-time at the Oral Health Research Institute. They were very generous in contributing portable dental chairs, lights, and the hand instruments needed to do the exams. Several of our student members donated their ultra-sounds for denture cleaning. We showed an instructional film on oral care for the elderly, entertained questions, and performed oral exams on about twenty-five people. The people

at Flanner House were very enthusiastic. The staff in charge of the elderly wish to have us come back on a regular basis. I feel it was very successful. All six students who participated feel we not only performed a community service but learned a lot also. We are all enthusiastic about this facet of dentistry.

As we discussed in your office several weeks ago there is definitely a growing interest in Geriatric Dentistry here at I.U.S.D. We are hoping to encourage this interest through meetings at school and community events.

When we talked several weeks ago, one of the subjects we discussed was the presentation of a table clinic on Geriatric Dentistry at the National Convention of the A.D.A. in October. I am pleased to say it was accepted for presentation at the convention. As of this moment we are one of only two active student chapters for Geriatric Dentistry in the United States. I feel my presenting this table clinic will not only be good for our chapter of the A.S.G.D. but will well represent the I.U.S.D. also. I hope we can discuss this in the near future.

Thanks for your time.

ANOTHER EXCELLENT ATTENDANCE of 160 faculty members, student representatives, and guests was recorded at the 16th Annual Teaching Conference of the School of Dentistry, September 3-5, at McCormick's Creek State Park. Participants in the programs included Dr. Thomas Schwen and his team from Learning Resources in Bloomington, and the keynote speaker was Dr. John Butler, of the Louisiana State University School of Dentistry. Teaching Committee Chairman is Dr. James L. McDonald and Dr. Michael Cochran and Dr. Jerry Nieten served as Co-Program Chairmen. The following student representatives from IUSD attended as guests of the Teaching Committee: Diane Buyer (Student Affairs Council President); Kevin Cross, Third Year Dental Student; Sherri Keehn, Second Year Dental Hygiene Student; John Moening, Second Year Dental Student; Earl Smith (representing the Teaching Committee); and Gregory Winteregg, Fourth Year Dental Student.

DR. ROBERT SHELLHAMER, Professor of Anatomy and Dr. James L. McDonald, Jr., Associate Professor of Preventive Dentistry, were recently honored by the First Year Dental Class with plaques recognizing them as outstanding instructors.

INDIANA UNIVERSITY WAS WELL REPRESENTED with a booth and a number of exhibits at the Annual Meeting of the National Dental Association in Dallas in August, Ms. Myra Mason, Minority Affairs Officer, reported. The booth was acquired with the help of Dr. Lehman Adams, Assistant Professor of Oral and Maxillofacial Surgery, who was Director of Exhibits. Representing I.U.S.D. students were Dr. Jeannette Sabir, Class of 1980, and Fourth Year Dental Student Gloria Williams, official representative to the meeting. Ms. Mason stated that comments at the meeting made it clear that our School is well respected and considered one of the best. She added that Indiana made a lot of new friends at the meeting, which in previous years has generally been dominated by the Meharry and Howard schools of dentistry.

I.U.S.D. also had a booth at Black Expo in Indianapolis July 12-13. Students working the booth, in addition to Jeannette Sabir and Gloria Williams, included Bernice Williams, Sidney Martin, and Mike Givens. Others involved were Ms. Mason, Dr. Leonard G. Koerber, and Yvette Williams, secretary.

MR. RICHARD C. SCOTT, Director of Illustrations, won a number of awards during the Senior Olympics competition in the city during the summer. The collection of awards included three first-place citations (pottery craft, leather craft, and overall excellence in crafts); two second-place rankings (two-man boating and the shot put); and two third places (basketball shooting and the softball throw).

DR. GARY A. CRIM, second year graduate student in the Department of Dental Materials, has received a National Research Service Award from the National Institute of Dental Research. The award will help support Dr. Crim's investigation of how the properties of composite materials, cavity design, and bonding agents affect the marginal seal of dental fillings, and thus their durability.

MS. LYNN COLLINS WISHES TO THANK members of the Dental School family for the cards and flowers she received during her recent hospitalization.

THE FOLLOWING MEMBERS OF THE DENTAL SCHOOL STAFF were honored by the University's Senior Recognition Program during the 1979-80 season: Five Years of Service -- Beth Bennett, Ortho; Cindy Boris, Bus. Affairs; Sue Crum, Compl Denture; Janet Duncan, OD/OM; Lana Duncan, Compl Denture; Joan Duvall, Endo; Christine Freeman, Dent Pract Admin; Sharon Gwinn, OHRI; Clifford Hall, Animal Rms; Carol Hany, Fort Wayne; Andrea Hoberty, Endo; Jean Kegeris, Pedo; Annabelle Koss, Pedo; Diana Kuebler, Fort Wayne; Melissa Mau, OHRI; Ada Miller, Dental Stores; Donald Nealy, Fixed & Rem Part Prost; Diana Ohrberg, Dental Hygiene; Veronica Pierson, Compl Denture; Pam Prather, Student Affairs; Peggy Smith, Library; Linda Wyland, Fixed & Rem Part Prost;

Ten Years -- Barbara Babbitt, OD/OM; Drew Beck, Library; Janet Cordova, Oral Path; Donna Dobbs, OD/OM; Vivian Haggard, Graduate Office; Michael Halloran, Illustrations; Nancy Hanse, Oral & Max Surgery; Rose Hazelrigg, Pedo; Sharon Heaster, Animal Rms; Arthur Johnson, Animal Rms; Jean Kernodle, Central Sterilization; Myrna Robertson, OD/OM; Jose Sangalang, Compl Denture; Madeline Sheely, Pedo; Nancy Stillabower, Faculty Development; Bernice Tumej, Ortho;

Fifteen Years -- Twila Chapman, Dent Asst (Retired); Ruth Eitnier, OD/OM; Isabelle Ezzell, Dental Mimeo; Ramona Lemme, Oral Path; and

Twenty Years -- Alana Fears, Illustrations.

DR. RALPH W. PHILLIPS, Associate Dean for Research and Research Professor of Dental Materials, has been reappointed as a Consultant to the National Institute of Dental Research.

DR. GLEN O. SAGRAVES, Director of Curriculum Development at the Indiana University School of Dentistry, has been reappointed to a four-year term as a member of the Advisory Committee for Medical Assistance (Medicaid). In the letter of reappointment, Wayne Stanton, Administrator of the Indiana Department of Public Welfare, praised Dr. Sagraves for his leadership in Committee activities, with special reference to his service as Chairman.

DR. THEODORE R. HUNLEY, Professor of Operative Dentistry, was awarded an honorary Doctor of Science degree by Oakland City College at 1980 commencement exercises. A 1938 graduate of the College, Dr. Hunley received his D.D.S. from St. Louis University in 1945. Upon his retirement in 1970 as a career officer in the U.S. Navy Dental Corps, he taught at Georgetown University School of Dentistry, where he was Chairman of Oral Diagnosis and Continuing Education. Now a resident of Spencer, Indiana, Dr. Hunley accepted a part-time appointment at the I.U. Dental School in 1979.

DR. DONALD NELSON, Assistant Professor of Fixed and Removable Partial Prosthodontics, received the Distinguished Alumni Award and addressed the faculty and students at Jamestown Community College, Jamestown, New York, in May of this year.

DR. GEORGE K. STOOKEY, Professor of Preventive Dentistry and Assistant Director of the Oral Health Research Institute, attended the Federation Dentaire Internationale meeting in Hamburg, Germany, September 1-5 (68th World Dental Congress) at the request (and expense) of the A.D.A. Health Foundation Research Institute. The primary purpose of the trip was to participate in committee meetings on toothbrushes and dentifrice function.

AMONG THOSE ATTENDING the 8th International Conference on Oral Biology and the 58th Annual Congress of the International Association for Dental Research this summer in Tokyo and Osaka, Japan, were Dr. David W. Allmann, Professor of Biochemistry; Dr. LaForrest D. Garner, Professor and Chairman of Orthodontics; Dr. Rosario Potter, Professor of Oral Facial Genetics; and Dr. Kichuel K. Park, Assistant Professor of Preventive Dentistry. In addition to presenting papers, the four participated in a variety of other activities while in the Orient. Dr. Allmann conducted seminars at the medical schools of the University of Nagoya and the University of Okayama. Dr. Garner visited the offices of orthodontists and general dentists in private practice. Dr. Potter was in a group of U.S. dental researchers who visited dental teaching hospitals in Peking and Shanghai, Peoples Republic of China. On the way to Japan, Dr. Park presented a continuing education course in Los Angeles for the Korean Dental Association of the United States. During his stay in the Orient he delivered eight lectures at Korean dental schools and for the Korean Academy of Dental Health.

DR. SAMUEL CAMPBELL, Chief, Oral Surgery Section of Dental Service, Veterans Administration Hospital, and an Assistant Professor of Oral and Maxillofacial Surgery at the School of Dentistry, spent two weeks in June at Jeremie, Haiti, performing oral surgery for United Global Ministry of the United Methodist Church.

A MEMORIAL DISPLAY HONORING Dr. John F. Johnston, chairman of the Department of Fixed and Removable Prosthodontics from 1951 till 1965, was dedicated in the Dental School recently. When Dr. Johnston died in 1977 a memorial scholarship program sponsored by the John F. Johnston Study Club was established in the I.U. Foundation and contributions may be sent to the Dental School. This Study Club has 128 members from 24 countries throughout the world.

DEAN McDONALD HAS RECEIVED the following memo from Mrs. Marjory H. Carr, Assistant Professor and Director of Dental Assisting: "We are happy to report to you that all of our 1980 dental assisting graduates who took the Certification Examination in June passed. The national average of scores was 195. Our school average was 208. The members of our faculty were pleased with the +13 points above the national average we received. There were 2,527 dental assistants

who took the examination this period. 56 schools out of 174 placed in the 0-10% failure category, of which we were one. Since we had 0 failures, we should be ranked high out of the 56 schools, but this ranking was not supplied to us."

DR. VIRGINIA WIESJAHN CROSE gave a most thoughtful and well received speech at graduation ceremonies for Dental Assisting students in the Class of 1980 last spring. Since her talk brought out a number of interesting points about the Dental Assistant's role in the modern office and about dentistry in general, we are reprinting it here:

You dental assistants have a really interesting field awaiting you. Do you realize that every dental office is a small hospital, equipped with examining rooms, a radiology department, a psychology department, surgical department and operating rooms, artificial prosthesis department, emergency room and trauma center, preventive medicine and pharmacology department, well baby clinic, along with pediatric, teenage, adult, and geriatric clinics, cancer detection clinic, plastic surgery and rehabilitation center, nutrition department, medical records, and of course the billing department? The only things our mini-hospitals lack that large hospitals have are overnight accommodations. And you are responsible for the entire nursing, housekeeping, medical records, inventory, and bookkeeping responsibilities of our hospitals. Sounds challenging, doesn't it!

It's the truth, every dental office is a mini-hospital; it performs the same procedures, has the same responsibilities including life and death decisions, whether it be the life or death of a tooth, or an emergency situation requiring C.P.R., as any hospital, and you make up the staff.

How nice that you don't have to specialize or be limited to one area of treatment as most nurses are, and that you are not limited to one type of treatment as speech therapists or physical therapists are. You have the advantage of versatility and variety if you choose. You can scrub for surgery at 8 a.m., prepare for and assist with cosmetic rehabilitation at 9 a.m., lecture on oral hygiene at 10 a.m., take radiographs at 11 a.m. and help with bookkeeping and inventory later in the day. On the other hand, you do have the latitude to specialize if you so desire by associating with a doctor who is a specialist, or at job interviews requesting front desk or chair side responsibilities, or becoming an oral hygiene therapist. Sounds great, doesn't it?

You have the prestige of working in a health field, helping people to become healthier and happier without changing bed pans.

And do you know what else? You're important! Not just because of all the work you do, but important because Dental Assistants have worked together as a team with the doctors

to make dentistry available and affordable to every income bracket, to all types of people, regardless of race, color, creed, or economic background. By expanding their duties, Dental Assistants have freed the doctor to utilize his time to do more of the treatment that he is so well trained in performing. The Dental Assistant has increased the number of patients that the doctor can treat per hour, thereby making the office run more efficiently, and enabling the doctor to charge lower fees because of the higher volume of treatment rendered. All of this has been done not by lowering the quality of treatment rendered, but actually increasing the quality. Why should I as the doctor develop radiographs and scrub instruments, when I can be suturing a lip wound. And believe me, I can do a better job if I don't have to reach for the instruments and have someone to cut the suture while I keep the tension on the knot.

Fifteen years ago the average fee for an extraction was \$10; now it's around \$15. Dental fees have increased about 50-60% in fifteen years or around 3-4% per year. However, the cost of all other commodities and services in the past fifteen has gone up anywhere from 300 to 600%. If Dentistry had done that, then an average extraction would cost around \$90, a check-up instead of \$25 would cost \$150. A crown would cost \$1200, a 3-unit bridge \$3000, and braces \$14,000. Who could afford it? Very few people. Twenty-five years ago dental treatment other than extraction was considered a luxury, not a health necessity. If we raised our fees as the cost of living has increased, dentistry could still be afforded by only a few. You have made the difference. Dental Assistants have made the difference. Instead of raising our fees, we have increased our productivity to override our increased cost. Consequently the D.A. has made dentistry available and affordable for the average family.

My challenge to you is to continue to keep it this way. Increase your knowledge and abilities; don't stop here. Continue your education; read; learn; be active in your field so you can help your doctor continue to increase the productivity and quality of Dental Health Care. Let's continue to keep dentistry affordable and may you do as much for our country's health as the D.A.'s have done in the past fifteen years.

WITH THE TRAVELERS ... In July Ms. Annette Reed of the Business Office left Indianapolis on a vacation that would take her thousands of miles from home. At the request of the Newsletter, Annette has written the following account of her trip, which began with a flight from Indy to Tampa, where she made connections to Miami for the last legs of her journey to South America:

After a final intermediate stop in Caracas, at last I was in Rio. I had been looking forward to visiting my girlfriend Rosalina Gonzales, who was completing a graduate pedodontic course at the University of Rio de Janeiro School of Dentistry. Rosalina and I had become friends when she stayed at my apartment while observing the graduate pedodontic course here two years ago.

Rosalina's apartment was a mere block from the famed Copacabana Beach, so this was one of the first places we visited. Even though it was winter in Brasil, the weather was perfect. All activities are centered around sunning, beach games and the mosaic sidewalks that border all beaches. The beach sidewalks are always crowded with joggers, bikers, walkers, vendors and people exercising children and dogs.

Rio's night life is just as active as the day. Traffic is always dense. Adding to the confusion is the fact that streets have no lane dividers, so at times cars are separated literally by only inches. I was never able to totally understand the rules of driving in Rio, but whatever they do works. Through all the craziness it seems to get you to your destination much faster and easier than here. At night if there is a red light and no other traffic is coming you go directly through the light (many also do this during the day). Cars are much smaller in Brasil than here; the largest is about the size of a Ford Maverick. They have some of the same car manufacturers but the models and names are different. Automatic transmissions, power steering and air conditioning are unheard of. Also, any car like a Mercedes is chauffeur driven.

Parking is a challenge, too. Rio's older streets are narrow, and it is a common practice to drive onto the mosaic sidewalks and park. Occasionally someone will parallel park behind the sidewalk parkers and leave his car in neutral and unlocked so that people who need to leave can push his car out of their way. Yes, Rio is definitely the city of the car. The pedestrian is literally a moving target as cars have the right of way. No street is crossed without looking in both directions, saying a prayer, and running for your life. Most city buses are Mercedes and the fare is about one dime. All taxis are yellow and there may be as many as 50 taxis within a city block, awaiting fares. Most are VW Bugs with the front passenger seat removed. It's also interesting to note that gasohol is \$2.00/litre and all gas stations are closed Saturday and Sunday.

Shopping is also challenging. There are no shopping centers as we know them but rather streets crowded with tiny boutiques, each with different merchandise. I was lucky that Rosalina was with me, as I could read prices but could not understand them when spoken. Money exchange is very much to U.S. advantage (\$1.00 US equals approximately 55 Brazilian cruzeiros. Bus fare was six cruzeiros and a Coke costs only 20 cruzeiros. Among the best buys were stones, including topaz, diamonds, aquamarines, and emeralds. All stones are available in jewelry stores already mounted or can be bought by the carat unmounted. Any jewelry with gold less than 18 carats is considered "junk jewelry," and 18 carat gold there costs the same or little more than U.S. 14 carat.

Rosalina and I also enjoyed visiting such sights as Sugar Loaf Mountain, Corcovado (statue of Christ on the top of the mountain overlooking Rio), crossing the Niteroi Bridge, Marachina Stadium (largest soccer stadium in the world), and watching the "deltas," brightly colored hang gliders descending from the mountains and landing on the beaches. We also sunbathed at Leblon, Flamingo and Ipanema beaches.

Apartments are much different in Rio from what Indianapolis offers. Most apartment dwellers have a maid at least once a week to do laundry, wash dishes and clean while most homes have full-time maids who live with them. Other noticeable differences include a "cold water only" faucet in the kitchen and before taking a hot shower you must light the gas water heater. I saw no bath tubs. There also is no central heating or air conditioning in apartments or homes. A telephone is not taken for granted as it is here --- many people are on telephone waiting lists for over a year before receiving a telephone. Open air telephones are located along most public streets and in order to use one you must purchase a telephone token at a newspaper stand. Different color coded telephones are also located outside for making long distance calls. Almost all long distance calls are "collect" calls not requiring the use of a telephone token.

Most people drink "aqua minerale" (mineral water) rather than tap water. Milk is also different as it comes in a small box resembling confectioner's sugar lined with plasticized foil. Imported liquor is also expensive (US Chivas Regal \$18.00/Brasil \$90). Even though I was unable to understand Portuguese, I could still enjoy television as many shows are American even though dubbed into Portuguese. American songs are popular on both television and radios. I also was able to see "The Empire Strikes Back" at the Copacabana Cinema in English as the rest of the audience read the Portuguese subtitles.

After about 2½ weeks Rosalina and I left for Porto Alegre which is the southernmost state in Brasil. Both Rosalina's family and Dr. Elisabeth Vieira (IU Perio, 1980) live there, so again I was among friends. We visited with Drs. Rita and Gilberto Hanke (IU Crown & Bridge, 1968) and were able to visit other friends living in Erechim (five hours west of Porto Alegre). While there we enjoyed a "charasca" which is an indoor barbeque meal with 5-10 different kinds of meats roasted on a spit.

After about a week in Porto Alegre where the winter weather resembles our October-November weather, I was more than ready to go back to Rio for a few more days. I stayed with Drs. Sonia and Rogerio Gleiser (IU Pedo, 1978) and daughter Flavia. Both Rogerio and Dr. Roberto Vianna (IU Pedo, 1971) have been busy moving dental equipment from the old University of Rio de Janeiro Dental School to their new facilities at Rio's University Hospital. They are rightly proud of their new facility and equipment and are looking forward to beginning their first classes there.

After almost a month I was finally ready to come back to Indianapolis. I was sorry to be leaving my friends in Brasil, but I know they do come back to visit the US and IU periodically; it's never too long before we hear from them.

Is it time for another vacation yet?

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