

THE DENTAL Surgeon

JULY 2012



Inside:

- The Priceless Pearl of South Australia - Eyre Peninsula
- MOH Buzz - Community Health Assist Scheme

MICA (P) : 032/08/2012



“ In a world of evidence-based practice, this is the real deal. It delivers on the promise of reducing sensitivity ”¹

-David Hamlin,
Dentist, Principal Investigator, Clinical Research Facility

“ Instant relief and it lasts, unlike others ”
- Ki Ok Edward - Yu
Patient, Singapore

“ No more pain! I can now enjoy drinks without painful sensations ”
- Celine Tan
Patient, Malaysia

“ Instant relief from pain! I can see marked improvements before and after use ”
- Noorliza Harun
Patient, Malaysia

“ One minute, very quick. I will use it for long term ”
- Rebecca Wong
Patient, Hong Kong

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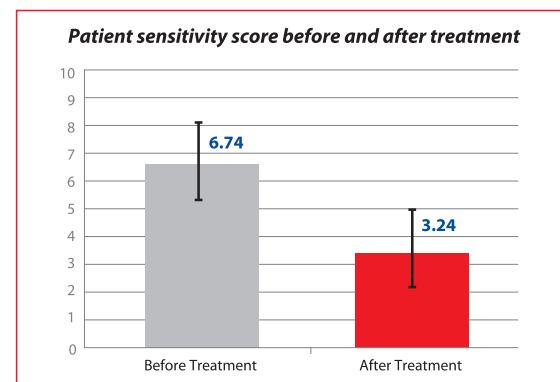
Your patients can now experience instant and long-lasting relief too, with Colgate® Sensitive Pro-Relief™. Prove it to yourself—and your patients.

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References

1. Actual quotes from market research data on file; Colgate-Palmolive, July 2009.
2. Chu CH, et al. Effects of 8% arginine desensitizing paste on teeth with hypersensitivity. J Dent Res 2010;89 (Spec Issue A). In press.

*Instant relief achieved with direct application of toothpaste massaged on sensitive tooth for 1 minute.



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President's Message

Dear Members

The new SDA Council 2012/14 was elected at the recent Annual General Meeting (AGM). Although our nomination forms were submitted at the last moment, the core team was formed long ago. This Council was carefully chosen for their capability and dedication. Even before our first official Council meeting, we have been discussing issues and making decisions via electronic communication.

As outlined in my address at the AGM, I will be proposing a \$50 increase in the SDA Ordinary Membership subscription. Though empowered by our Constitution without the need to seek mandate, this proposal will be subjected to approval at the next AGM. If approved, members will receive a \$100 IDEM voucher. (2-year membership increase will be \$100 & IDEM is a biannual event). More details will be announced gradually in the Dental Surgeon.

Our major projects like Oral Health Awareness Month, IDEM, Public Forum etc have been very successful. I am very grateful to our selfless volunteers who contributed their time and effort. I resolve to show more appreciation to our volunteers.

On 12th May, the Council met the Oral Health Therapists (OHT) at their Alumni AGM. We presented our 'Open Door' policy and invited them to join SDA as Associate Members. We are embracing rather than alienating our allied dental healthcare colleagues. I hope they can contribute positively to our Association.

We are indeed privileged to represent you in SDA as we approach a very special year 2013. It was 74 years ago, in 1938, that Professor E K Tratman formed the Malayan Dental Association which later became the SDA and the Malaysian Dental Association. (See side note for history of SDA).

Next year, the 75th Anniversary is a major milestone in SDA's history and it will be a shame not to celebrate it in a big way. We are seeking volunteers to help as well as ideas for the anniversary celebration. Please let us know!

Kuan Chee Keong
President
SDA 2012/14

DENTISTRY - THE FUTURE IS NOW



INTERNATIONAL DENTAL EXHIBITION AND MEETING APRIL 4 - 6, 2014

Suntec Singapore International Convention and Exhibition Centre

IDEM Singapore is a "must-attend" for dental practitioners and professionals in the Asia-Pacific looking for the latest cutting edge technology and innovations in dental solutions and services. Attracting top names from across the globe in the largest single networking and knowledge gathering platform, the IDEM Singapore 2014 Scientific Conference will focus on the theme of "**Dentistry - The Future Is Now**" where future challenges in various fields of dentistry will be addressed, including a seminar on the Business of Dentistry (practice management).

Planned topics include:

The Management of Periodontal Disease Today • Making A New Tooth • The Future of Implants • Vital Pulp Therapy
• Multi-disciplinary Approach to Dentistry • Management of Sleep Apnoea

Featured Speakers:

- **Mark Bartold**, Professor, University of Adelaide, Australia
(Periodontology; Stem cell research)
- **Dean Morton**, Professor, University of Louisville School of Dentistry, USA
(Prosthodontics; Implantology)
- **Will Martin**, Associate Professor, University of Florida's College of Dentistry, USA
(Prosthodontics; Implantology)
- **John O Burgess**, Professor, Asst. Dean of Clinical Research, University of Alabama at Birmingham, USA
(Restorative Dentistry; Vital Pulp Therapy)
- **Barry K. Freyberg**, Technology Director for the Scottsdale Center for Dentistry, and Consultant to the American Dental Association Council on Dental Practice, USA
(Technology for the Dental Practice; Management of Sleep Apnoea)

With these renowned speakers helping the conference, you can expect the 2014 program to be every bit as spectacular as the 2012 conference program. So **Save the Date** for the conference today!





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2013

SDA CONVENTION

In conjunction with



75th Anniversary Celebrations

20th-21st

April 2013

Ritz-Carlton Millenia Singapore

For enquiries, kindly email to cmc@sda.org.sg

Calling All Avid Photographers!



The Dental Surgeon Team is planning to put up a lifestyle/special interest page on photography and is looking for contributors to the article.

If you have a particular interest in photography (outside of taking photos of your patients), we invite you to write in/email/call the SDA office and join the Dental Surgeon as a columnist.

Here are the details!

Singapore Dental Association

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Singapore 169850

Tel : (+65) 6220 2588
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Email : admin@sda.org.sg



Visit to the Society of the Aged Sick

On 8th April 2012, the Singapore Dental Association paid a visit to the Society of the Aged Sick (SOAS). Every 2 years, SDA will elect a charitable organization to be the official beneficiary of the association as part of our corporate social responsibility project. This year, we are delighted to work with the Society of the Aged Sick.

The Society of the Aged Sick is a non-profit, charitable organization with a total of 244 beds, offering residential care for the destitute and aged sick. Their mission is to provide quality care and help their residents lead a meaningful and enriching life.

Generous donations from our dental community will be presented to the SOAS to help them with their daily operating expenses. Members of SDA are also highly encouraged to join our activities, which allow us to understand the problems these residents face as well as do our small part for the community. This year we are also very glad to have the support of the Dental Society from NUS, where the year 1

undergraduates volunteered their kind services in this meaningful event where about 100 residents turned up.

The enthusiastic year 1 undergraduates started the event with a sing-along session. Boasting a guitarist among their ranks, they belted out classic numbers like Auld Lang Syne and Peng You among other songs. After this great warm-up, one of the undergraduates decided to showcase his talents as he let out his rendition of Di Nu Hua, a popular Cantonese song, much to the delight of the residents.

The next item on the programme was 'Pass the Gift and Bingo!' With food prizes on the line, the buzz of excitement in the hall was evident. The residents participated actively and were ecstatic when they win the prizes.

After a whole afternoon of fun and games, the previous president of SDA, Dr Philip Goh, presented a cheque of \$5000 to the President of SOAS, Dr Tan Kong Chin.

And what better way to end the day with Singaporeans' favourite pastime as the residents and the volunteers sat down to a delicious buffet dinner sponsored by SDA. Over dinner, the residents related their life stories to our volunteers.

As the day drew to a close, the event also came to an end. The residents were escorted back to their rooms and the life experiences shared by them left a deep impression on the volunteers. Till the next visit SOAS!

† Dr Albert Lee

We would like to thank the members of the SDA Welfare Committee for their contributions so far in making social events and activities of SDA possible.
Dr Terence Jee

Chairperson: Dr Terence Jee
Convenor: Dr Wendy Wang

Members:
Dr Chua Khim Thai Xander
Dr Foo Chia Wei Tabitha
Dr Lee Ming Hsien Albert
Dr Lee Wei Zhi Alvin
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Totally type B

The intrepid Travelling Gourmet chats with Il Presidente...

Meeting Dr. Orlando Monteiro da Silva, the President of FDI World Dental Federation at IDEM 2012 was a great honour. Friendly and cheerful Dr. Orlando, as President of FDI headquartered in Geneva, Switzerland, federates over 200 national dental associations and specialist groups, representing some 1,000,000 members of the Dental profession worldwide. It views oral health as a fundamental part of general health and well being and, as the global voice of the Dental profession, pursues its vision of leading the world to optimal oral health! Dr. Orlando was the Guest of Honour at the premier Dental event in South East Asia, IDEM 2012 in sunny Singapore.

Dr. Michael Lim: What is the FDI doing to promote Dental Health in Singapore?

Dr. Orlando: Role of FDI is to act at international level, FDI not having a role directly in Singapore, but have an impact at national level. The latest WHO declaration on non-communicable diseases mentions oral health, shares the same impact as cancer, diabetes, respiratory diseases and others. The FDI opens doors to oral health as a fundamental right of health in general. Over 60 million people are killed all over the world from chronic diseases. At international level, FDI integrates oral health into general health policy and national health systems. We also assist national Dental associations to advocate for better oral health. We work also close with dental industry as we are inter-dependent.

Dr. Michael Lim: The H1N1 so-called “pandemic” turned out to be a ‘hoax’ as official reports from the European Commission have stated. Is FDI addressing such issues to prevent over-reaction in future?

Dr. Orlando: Regarding the H1N1 “pandemic”, approaches adopted may not always be the best one. Our big pandemic is actually tooth decay and periodontal disease, more debility than morbidity. We want to address this in the Vision 2020 in Hong Kong in September’s 2012 FDI. The challenge of prevention is to address this role of patient education. We want to promote different models of oral care. Implantology is having achievements but we need to address the cost issue in delivery and more importantly, the affordability to patients.

Dr. Michael Lim: Is FDI promoting artificial sweeteners and sugar substitutes?

Dr. Orlando: We are following very close with IADR in the field of artificial sweeteners and alternatives, also the saliva issue in Dental Medicine. I prefer to call it Dental Medicine instead of Dentistry. We need a wider role for the profession. Saliva is very important; the link between oral health and general health is very important. We need to promote a wider role for Dentists and NOT just a myopic view!

Dr Michael Lim: On something close to my heart, I asked Dr. Orlando, “What wines do you like?”

Dr. Orlando: Port, Vinho Verde...I am from Porto in Portugal where Port is produced so I love Port! With all the respect for all the wines in the world...I have tried many. I still prefer the Portuguese wines.

Dr. Michael Lim: What food do you like?

Dr. Orlando: My favourite food is fish, Bacalau (dried cod)...the cod is fished in Canada and Labrador, and in the North Atlantic but it is our national dish. I like it simple...grilled fish with extra virgin olive oil. My wife is a Nutritionist so she makes sure I eat right at home! I like all types of food, I love the Cantonese cuisine and Indian tastes and flavors.

I could not agree more. As The Travelling Gourmet, I always say Gastronomy is the best thing to appreciate and connect with different cultures. I also learned something fascinating, Arigato” the Japanese word for ‘thank you’, actually comes from the Portuguese word that means the same, namely “Obrigado”.

✦ Dr Michael Lim



▲ Immediately after the Opening Ceremony, Guest of Honour Dr Jerip Susil toured the Trade Exhibition and visited the SDA Booth and Dr Kuan presented a gift to him.

SDA Visit to Cat City

The Commonwealth Dental Association/Malaysian Dental Association Joint Scientific Convention & Trade Exhibition cum 69th MDA AGM 2012 was recently held at the Borneo Convention Centre Kuching (BCKK) from 24th till 28th May 2012.

Dr Tang Panmei and I flew to Kuching, the capital of East Malaysian state of Sarawak on an AirAsia flight. Our tasks included representing SDA as well as manning the SDA Booth to promote our upcoming events such as the joint scientific event of Singapore Endodontics Society & Malaysia Endodontics Society as well as IDEM 2014.

East Malaysia is famed for their diverse cultural heritage and this was featured extensively at the Opening Ceremony as well as at the Gala Dinner. There were also booths by the local vendors selling indigenous handicrafts, souvenirs, food and clothing at the exhibition hall.

The Congress was graced by their Guest Of Honour, Dr Jerip Susil, Public Health Assistant Minister, who represented YAB Pehin Sri Haji Abdul Taib Mahmud, Chief Minister of Sarawak.

SDA sponsored one FDI speaker at this Congress and it was none other than our very own Dr Marlene Teo. We met many Singapore dentists as well as old friends, including Professor Toh Chooi Kiat, the Dean of the Dental School, International Medical University and have extended our invitation to our 75th Anniversary Gala Dinner next year.

We met the members of the newly elected MDA Council and both the MDA President, Dr Haja, and I were in agreement for more collaboration between our two Associations. We decided to have a joint Council meeting during the Asia Pacific Dental Congress (APDC) in Taipei. One main proposal to be tabled for discussion would be the resurrection of the Joint MDA-SDA Scientific Congress.

Even innocently sharing a taxi ride to the airport with Dr Shalini Kanagas-ingam, the MDA's Publication Secretary turned out very well as we discussed ways of collaboration like the exchange of articles for publication. This warm and mutually beneficial relationship bodes well for all.

Commonwealth Dental Association (CDA)

The Commonwealth Dental Association meeting was chaired by its president, Dr Hilary Cooray. The keynote speaker for this meeting, Dr Bill O'Reilly, who is also the President-elect, could not attend due to recent demise of his wife. Delegates for this meeting were mainly from Sri Lanka in support of Dr Hilary Cooray, who is a Sri Lankan.

There was also knowledge sharing on the use of communication technologies such as web seminars with the Commonwealth countries involved. Some

delegates have also requested the formation of a panel of specialists/trainers for exchange programs. The CDA will also explore on the possibility of research collaboration to facilitate exchange of statistics between member countries.

Past SDA Councils have deliberated on the relevance of our membership with CDA and we wrote in to withdraw ourselves in 2008 when I was the Acting Honorary General Secretary. In return, CDA offered to waive our membership fee as they were considering the dissolution of CDA then. To seek feedback, CDA sent out survey forms to all member countries but only a handful responded; SDA being one of them. During the CDA meeting in FDI Singapore 2009, the turnout was poor but the delegates were still arguing passionately for the continuation of CDA.

CDA derived its funding from members' subscription and these fees were based on the member countries' GDP per capita; countries like Australia, UK and Singapore ended up as the main contributors. Dr Cooray reported that he received many negative feedbacks from National Dental Associations (NDAs) ranging from complaints of poor communication, poor response to no value for fund contribution and no benefits filtering down to patients.

The CDA Triennial Meeting will be held in South Africa at the end of this year and one item on the agenda will be the continuity of CDA. Dato Dr A. Ratnanesan from Malaysia spoke about the history of CDA which started in London in 1989-90, and he pleaded for delegates to support CDA's continuation.

✦ Dr Kuan Chee Keong

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Community Health Assist Scheme

Introduction

The Community Health Assist Scheme (CHAS) was rolled out by the Ministry of Health with effect from 15th January 2012. CHAS is an enhancement of its predecessor, the Primary Care Partnership Scheme (PCPS), and aims to provide accessible and affordable primary healthcare for needy elderly and disabled Singaporeans. Under this expanded scheme, more Singaporeans would be eligible to receive subsidized basic and simple tertiary dental services, such as crowns, bridges, dentures and root canal treatment, at participating private dental clinics near their homes. This is in addition to the subsidized dental treatment that is already offered by the public sector.

Eligibility Criteria for Patients

The eligibility criteria were revised to extend CHAS to more Singaporeans. This is to ensure that Singaporeans from all walks of life, especially those who are less privileged, the needy, and the elderly will not be denied access to good dental healthcare.

The eligibility criteria for CHAS are as follows:

1. The qualifying age has been lowered from 65 to 40 years old.
 2. The qualifying income ceiling has been raised from \$800 to \$1500 per capita monthly household income.
- Dental Treatment Covered by CHAS and Subsidy Rates

The types of dental treatment covered by CHAS and their respective subsidy rates are presented in the table in page 16.

CHAS and PCPS patients are expected to co-pay part of their dental treatment. Under the PCPS, there was a table that stated the fixed treatment fees that the dentist could charge. The fixed treatment fees comprised a component that was subsidized under PCPS and the patient had to co-pay the remainder. However, unlike PCPS, CHAS only defines the subsidy rates covered by CHAS and does not fix the treatment fees. This means that the participating dentist can charge the standard treatment fees applicable to their clinics, of which the patient will have to co-pay the balance of the treatment fees less the CHAS subsidy.

For example, if a clinic charges \$300 for an upper full denture, the clinic will receive \$256.50 from CHAS while the patient will have to pay the balance of \$43.50 (\$300 - \$256.50) for a patient eligible for the blue tier subsidy. A patient who is eligible for the orange tier subsidy will have to pay \$129.50 if he visits the same clinic for an upper full denture while the clinic will receive the balance of \$170.50 from CHAS.

As with the previous PCPS, there is a limit to the number of claims that a CHAS patient is eligible for with respect to certain dental procedures. For example, a CHAS patient may claim subsidy for up to 2 scaling and polishing procedures within a calendar year; and he will have to foot the full bill without any subsidy if he attends for more scaling and polishing visits within the same year. Participating dental clinics can readily determine if the patient is still eligible for the subsidy via the claim report generated through the CHAS online portal (CHAS Online: <https://pcps.gpcare.sg/>)

In addition, for each patient, only one dental claim is allowed per day. For example, if a patient attends a clinic for multiple fillings and scaling in the morning and reverts back due to pain from a tooth that received a filling in the evening, only the claim for the morning visit is subsidized.

COMMUNITY HEALTH ASSIST SCHEME (CHAS)#			
Dental Subsidy Rates (from 15 Jan 2012)			
Type of Dental Treatment		Subsidy Rates (\$)	
		Blue Tier*	Orange Tier
Cementation		35	NA
Consultation (without treatment)		20.50	
Curettage		20.50	
Crown (Metal, Porcelain)		127.50	84.50
Complete Denture, Acrylic [∞] (Upper or Lower)		256.50	170.50
Partial Denture [∞] (Upper or Lower)	Replacing less than 6 teeth	98	65.50
	Replacing 6 teeth and above	210	140
Denture Reline		98	65.50
Denture Repair		43	NA
Extraction (per tooth)	simple	28.50	
	complex	68.50	
Filling, Amalgam	simple	20.50	
	complex	43	
Filling, Tooth-coloured	simple	35	
	complex	68.50	
Polishing [^]		20.50	
Root Canal Treatment (RCT)	Anterior	164	109.50
	Premolar	210	140
	Molar	256.50	170.50
Scaling [^]	simple	20.50	NA
	complex	43	
Topical Fluoride [^]		20.50	
X-ray		11	
# Previously known as Primary Care Partnership Scheme (PCPS)			
[^] Limited to 2 procedures per patient per calendar year.			
[∞] Limited to one set (upper and lower) per patient per calendar year.			
* Existing PA (Public Assistance) and CMB (Community Medical Benefits) cardholders enjoy the same subsidy as Blue Tier cardholders.			
<i>Correct as at 22 May 2012</i>			

How can Dental Clinics Participate under CHAS?

Signing up for CHAS is easy and all private dental clinics are strongly encouraged to participate in CHAS.

Dental clinics and dentists are not required to be CDMP accredited unlike their medical counterparts. As such, dental clinics can sign up for CHAS whenever they are ready.

Application is done online via:

<https://pcps.gpcare.sg/NewSignMgmt/NewDentalSignUp.aspx>

An email acknowledging application for CHAS will be sent upon completion of the application form. A polyclinic administrator (from either SingHealth Polyclinics or National Healthcare Group Polyclinics) will be assigned and arrangements will be made to sign the CHAS contract upon approval of the clinic's application. Following which, the dental clinic will then be able to offer CHAS subsidies to their eligible patients.

Why should Dental Clinics Participate under CHAS?

With the revised eligibility criteria, more Singaporeans can now benefit from this scheme. Under CHAS, participating dental practitioners will also have the flexibility to determine the reasonable treatment fees to charge their patients, and can take into account their individual circumstances.

Perhaps, you have always wanted to volunteer your time and services to help needy and elderly Singaporeans but have not been able to do so due to time constraints. CHAS allows you to do that from the comfort of your own clinic and allows you to build up a steady pool of referring patients who live nearby.

Documentation Required by MOH for Audit Purposes

The CHAS consent form (Dental) must be completed and signed by the patient and the dental practitioner at the patient's first visit. This consent is required to facilitate the release of financial and clinical data collected from the patient's visit to MOH for administrative purposes. These consent forms must be filed properly as part of the patient's records. Existing CMB and PA cardholders, who have signed the PCPS Patient Consent Forms during their earlier visits and are still continuing treatment at the same clinic, are not required to sign the new CHAS Patient Consent Forms.

The CHAS consent forms are available in English, Malay, Chinese and Tamil. They can be downloaded online from <http://www.chas.sg/eformgpdental.aspx>.

Audits will be arranged and conducted by MOH or the polyclinic administrators to assess compliance with CHAS guidelines. The following table summarizes the areas of compliance that may be audited.

Reimbursement of Claim and Datelines

Claims are submitted online via the CHAS portal (CHAS Online: <https://pcps.gpcare.sg/>). Upon receipt of the claims, reimbursement to the dental clinics will be made within a month. If there are any queries regarding the claim(s), payment will be disbursed within seven days after successful resolution of all such queries.

Type of audit	Aspects of compliance that the Auditors will check for
Operational	<ul style="list-style-type: none"> • Was the clinical data submitted? • Was the CHAS (Dental) subsidy applied in accordance with the CHAS guidelines and specifications as stated in the CHAS contract? • Is there an itemized breakdown of the bills submitted for CHAS claims, including a record of the amount paid by the patient?
Clinical	<ul style="list-style-type: none"> □ Has the patient's consent been obtained and properly filed together with patient's clinical notes?

Helping Needy patients who have not applied for CHAS

These patients can be referred to the nearest Community Development Council (CDC), Community Centre/Club (CC), polyclinic or restructured hospital for an application.

Alternatively, the CHAS brochures and application forms may be downloaded via the CHAS resource webpage: http://www.chas.sg/page_patients.aspx?id=161.

Dental practitioners may also contact AIC for copies of these brochures and application forms via email gp@chas.sg or phone 6632 1199.

Referrals to Specialist Outpatient Clinics at National Dental Centre (NDC)

For complicated cases requiring specialist intervention, CHAS patients may be referred to Specialist Outpatient Clinics and still enjoy CHAS subsidy rates. However, the referral must be unnamed (ie, the referring dentist cannot specify the exact specialist to be referred to). Currently, only the National Dental Centre (NDC) is enrolled in the CHAS subsidy network. The eventual Involvement of more tertiary specialist institutions is still under planning.

The dental referral must be accompanied by a CHAS cover note. The referring dental practitioner must inform the Specialist Outpatient Clinic that the patient is referred under the CHAS subsidy system while arranging for appointment at the Specialist Outpatient Clinic. The patient has to produce these documents, his Health Assist/ CMB/ PA card and NRIC upon registration at the specialist outpatient clinic.

The CHAS cover note is available via the CHAS eForms webpage: <http://www.chas.sg/eformgpdental.aspx>



Online Resources

CHAS website: <http://www.chas.sg/indexpatients.aspx>

eForms for CHAS: <http://www.chas.sg/eformgpdental.aspx>

Resource page for CHAS: http://www.chas.sg/page_patients.aspx?id=161

Online application for CHAS: <https://pcps.gpcare.sg/NewSignMgmt/NewDentalSignUp.aspx>

CHAS Online: <https://pcps.gpcare.sg/>

† Dr Tay Chong Meng, Dr Gabriel Chong

IDEM 2012

The International Dental Exhibition Meeting which is held in Suntec Singapore biennially is one of the renowned international dental conferences. It was held this year from the 20th to the 23rd April and proved to be a great event. A total of 7243 dental professionals congregated at Suntec Singapore, a marked 20 percent increase from 2010. International delegates across Asia, America, Australasia, and Europe showed the close ties the profession of dentistry has become.

Our invited speakers shared their knowledge in a variety of dental topics from prosthodontics to ‘one- file’ endodontic concept to Invisalign technology.

Especially from the trade exhibition booths, the vast array of dental materials, instruments and technology has brought improved ways for the dental health professionals to provide treatment to the patients.

IDEM is jointly organized by the Singapore Dental Association and Koelnmesse. The trade fair and conference provides an excellent opportunity for interaction between established leaders in the dental community, new entrants in the arena, industry experts and dental trade professionals.

IDEM Singapore 2014 will be held in Singapore from 4 – 6 April 2014 at Suntec Singapore International Convention and Exhibition Centre. For more information on IDEM Singapore, please visit <http://www.idem-singapore.com/>.

✦ Dr Christine Lee Hyun Jin

Safari Dentistry in Zambia

“Where the hell is the landing strip?” I thought to myself as the pilot searched frantically over the wild terrain of Zambia. After some frantic searching, we finally managed to spot the air-strip camouflaged in the low light of dusk. What a great relief I felt when the planes landed safely on the bumpy dried mud “tarmac”. This “airport” had the barest air-strip I ever seen, literally just a strip of cleared forest with no building around it. The only flight related equipment was an old air-sock to tell the direction of the wind. Hordes of people were already there to welcome us.

Our team of 6 dentists, 5 doctors and an anthropologist led by Dr Myra Elliot were there for a 4 days dental & medical mission to assist a German-based NGO group (Conservation & Communities Societies of Cologne) that manages the Luambe National Park. Talking about living life on the wild side, it cannot get any wilder!





The medical doctors set up their consultation rooms in the rural clinic while the dentists set up an alfresco dental clinical area under the shady mango trees behind the clinic premises. The O&G doctor set up her clinic in a tiny room beside the dental section for privacy. Water supply for washing of instruments is carried from the well by helpers from the lodge and electricity is provided by a diesel powered generator to run the dental equipment. Sterilisation of instruments is done with a portable autoclave on burning fire wood picked from the nearby bush.

Our initial plan was to treat half the patients with restorative work and the other half for extraction, however the demand of the crowd told us otherwise. The dental team was overwhelmed by endless stream of patients needing extraction. The concept of fillings is unheard of and some of the patients needed a little persuasion before accepting restorations. Majority of the dental treatment were extraction due to caries, retained roots and some mobile teeth of acute & chronic nature.

Dr Myra, our charismatic team leader, had a long line-up of patients with various lumps and bumps from literally head to toe that needed to be removed. She worked non-stop removing these growths under local anaesthesia. But it was her energetic influence on everybody around her which helped cheer up the locals and team members alike. What an inspirational leader!



The highlight of this trip was the reunion of the fisherman who was attacked by crocodile when we were there for a similar trip 4 years ago. He is a family man with 5 children and was attacked by a crocodile in the Luangwa river while fishing. Dr Myra and I had to stitch up the multiple deep lacerations around the arms, chest, back, groin and legs under local anaesthesia on our knees for over 4 hours! We were very glad to have saved him that day or he would surely have died from the wounds caused by the crocodile's contaminated teeth. He showed us his scars which have healed very well. He is now a farmer, coming back to us asking for analgesics for body-ache!



As I left the wilderness of this harsh yet beautiful land for modern Singapore, I felt a deep sense of fulfillment and pride to have had the opportunity to work as a member of an efficient team of like-minded healthcare professionals and to serve the wonderful people of Zambia.

✚ Dr Au Eong Kah Chuan



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ABOUT THE RACDS

The College provides an opportunity for new graduates or experienced dentists to improve their skills, knowledge and understanding.

Participation in College programs is suited to all career paths in Dentistry including private practice, government health service, academia, armed service and university postgraduate study.

Recognition of the College is widening as closer links and alliances are developed with agencies and institutions within Australia, New Zealand, Asia, the U.K, and the Middle East.

GENERAL STREAM FELLOWSHIP

The examination pathway in the General Stream comprises a Primary and a Final Examination.

The Primary program covers six areas of study and examination including areas of Anatomy, Biochemistry, Histology, Microbiology, Pathology and Physiology. Pharmacology is also covered. The aim of the program is to enable candidates to demonstrate an understanding of the fundamental principles of the basic sciences and their relationship to clinical practice.

The Final Examination is clinically oriented and requires demonstration of broad experience in the general practice of dentistry, maturity of clinical judgment, familiarity with the current literature, and clinical application of that knowledge.

MRACDS

The Membership program in the general stream leads to the award of MRACDS. It is

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a two to three year structured, educational learning program for qualified General Dental Practitioners which is based on the successful completion of appropriate CPD courses and related RACDS assessment components. Assessment throughout the program is conducted via web and email. Candidates present for a *viva voce* examination at the conclusion of the program. Candidates from all regions are welcome to apply. Holders of the award of MRACDS may present directly for the Final Examination.

SPECIAL FIELD STREAM

The Special Field Stream provides a pathway to Membership and Fellowship in the specialist fields of Dental Public Health, Endodontics, Oral Medicine, Orthodontics, Paediatric Dentistry, Periodontics, Prosthodontics and Special Needs Dentistry.

Membership is a pre-requisite to Fellowship in the above fields. Membership can be achieved through examination by the College, or conjointly with institutions with which the College has an MoU. It can also be awarded to specialists who completed postgraduate programs prior to 30 June 2009 (31 December 2010 for Dental Public Health) and satisfy the criteria. Following a period of independent specialist practice a member can apply for assessment of eligibility to present for Final Examination for Fellowship in that field.

The College training program in Oral and Maxillofacial Surgery is accredited by the Australian Medical and Dental Council and is the registerable qualification in that Special Field.

LOCATION OF ACTIVITIES

It is possible to sit written paper components of some examinations at a number of centres including Hong Kong, Malaysia, Perth, Sydney, Melbourne, Brisbane and Auckland. Clinical examinations are held in Sydney or rotated through other regional centres.

CURRENT CALENDAR FOR CANDIDATES

January

- Final Examination General Stream

April

- Registrations close for MRACDS *viva voce* examination
- Registrations close for Assessment of Eligibility for Examination in a Special Field (except OMS and under MoU).

May

- Registrations close for Final Exam Workshop
- Registrations close for Assessment of eligibility for Final Examination in OMS.

June

- Final Examination Workshop
- Registrations close for Special Field Examinations (except MoU and OMS)
- Registrations close for Primary Examination Orientation Course

July

- Orientation Course for Primary Examination
- Registrations close for Web Based Education Program

August

- Registrations close for overseas Primary Exam venues (*viva voce* – HK, Malaysia)
- Applications close for Assessment of Eligibility for Special Field Exams held conjointly.
- Registrations close for Web Based Education Program for Final Exam preparation.

August/September

- Web Based Education Program Part I
- Special Field Examinations

September

- Special Field Examinations OMS - SST & Final
- Registrations close for Assessment of Eligibility and Examination in Special Fields where held conjointly with another institution under MoU

October

- Web Based Education Program Part II
- Registrations close for Primary Examination
- Registrations close for MRACDS General Stream *viva voce* examination.

November

- Special Field conjoint examinations
- Registrations close for Final Examination

November/December

- Primary Examination

Broken Leg, Unbroken Spirit

SDA team took part in the annual Soccer Tournament organized by SMA on 1st May 2012, which was held at Jalan Besar Stadium. This was a yearly event that the soccer enthusiasts amongst us were looking forward to, as it is a fun and competitive event that pits SDA against other hospital institutions such as SGH, NUS, and TTSH.

On the warm and sunny morning, SDA found out that it was drawn into a group with NUH, Singapore National Eye Centre (SNEC) and TTSH. We began our first game in earnest against NUH and came away with a credible 0-0 draw.

In the second match against SNEC, our top striker Boon Hui found his scoring touch and was in red-hot form as he scored 2 goals to put SDA in the driving seat. Soon after however, he was chasing a long ball when the oppo-

nent launched a two-footed tackle on him in an attempt to win the ball. In that split second, a loud sickening crack split the air and Boon Hui was writhing in pain on the pitch. A look at the broken right leg was enough for all to shout for an ambulance. The fortunate thing in this unfortunate event is that it is a soccer event for medical personnel, and before we know it, 20 doctors were onto Boon Hui to provide medical assistance. There was even an orthopedic surgeon on



hand, where he did an innovative splint comprising of shin guards and cardboard in an attempt to reduce the fracture.

Boon Hui was then sent to Tan Tock

Seng Hospital A&E department, where he found out that he had a closed fracture involving both his tibia and fibula. A surgery was done to reduce the fracture and a metal rod was also placed along the length of his shin.

A few of us visited him the following day and found him to be in good spirits. Everything that happened was a blur to him and the incident was recounted and he was also informed that the team finished a credible 3rd in the tournament. Lots of family members and friends visited him during this period and it was clear that care and concern for Boon Hui was in



abundance. SDA President and some of the Council members paid Boon Hui a visit and enquired about the incident. SDA suggested to investigate the matter further but Boon Hui made a magnanimous decision to let the matter rest and to just concentrate on his recuperation.

Dr Michael Mah & Dr Ng Yong Kheng informed the SDA Council of this unfortunate incident the next day on 2nd May. The Council deliberated on the course of action and informed the Chief Dental Officer (CDO) A/Prof Patrick Tseng.

The next morning, SDA President Dr Kuan Chee Keong personally visited Boon Hui and presented him a hamper on behalf of SDA. Chee Keong expressed that the Council as well as the CDO wished him a speedy recovery.

Though Boon Hui will have to undergo months of rehabilitation, to his credit, he was not angry. Although he & his parents were unsurprisingly upset, they accepted it as

an accident. The medical colleague who landed Boon Hui in hospital visited with a hamper of flowers and profuse apologies, which Boon Hui accepted magnanimously.

Chee Keong then discussed his medical bills and offered to assist Boon Hui in pursuing claims for medical expenses from the organizer, the Singapore Medical Association. He assured Boon Hui that SDA will help to bear the medical fees if SMA declined. Chee Keong wrote to the SMA President to officially request that SMA assume responsibility for Boon Hui's medical expenses. Subsequently, an executive from SNEC also visited Boon Hui and offered to help in the medical bills.

To our friend Boon Hui, hope you have a speedy recovery and our hearts go out to you!

✦ Dr Low Liyong



Date	Topic	Venue	Contact
1-2 Sept 2012	SES MES Joint Scientific Meeting	Grand Copthorne Waterfront Hotel Singapore	Dr Benny Goh, 67347790 singaporeendodontists@gmail.com
20, 22, 27 Sept 2012 2 Oct 2012 15 Nov 2012	Risk Management Courses by Dental Protection, London	Concorde Hotel Singapore	Lyn Greenfield, 61735115055 lyn.greenfield@mps.org.uk
2, 23 Sept 2012 7, 14 Oct 2012	Basic Cardiac Life Support (Refresher) Course	Red Cross House, 15, Penang Lane, Level 3 RCTC, Singapore 238486	CDE Administrator 62202588 cde@sda.org.sg
15 Oct 2012	Correction of Advanced Crowding Cases with Invisalign	Orchard Scotts Dental	Stephanie, 64594901 stephanie@depacific.com
9 Nov 2012	Light Activated Disinfection (LAD) in Everyday Dentistry	National Dental Centre	Dr Benny Goh, 67347790 benngoh@yahoo.com
10 - 11 Oct 2012	4th Advance CEREC training (in Singapore)	Fondaco Training Office 7 Kaki Bukit Road 1, #03-06 Eunos Technolink Singapore 415937	Sharilyn Chi, 63112127 chi_sharilyn@rafflesmedical.com Esther Lin, 67870093 lin_esther@rafflesmedical.com
12 - 13 Oct 2012	9th Basic CEREC Course (in Singapore)	Fondaco Training Office 7 Kaki Bukit Road 1, #03-06 Eunos Technolink Singapore 415937	Sharilyn Chi, 63112127 chi_sharilyn@rafflesmedical.com Esther Lin, 67870093 lin_esther@rafflesmedical.com
9 Oct 2012	Management of non vital immature permanent teeth	Seminar Room, Level 2, Mount Elizabeth Medical Centre	Hwi Ling, Shahirah, 67312021 hl_woo@parkway.sg shahirah_niza@parkway.sg

The above is a Continuing Dental Education (CDE) Calendar, for September to November 2012. Before attending any of these CDE activities, please confirm event details with the respective course organisers.
Information is correct at the time of printing.

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Dr Ang Kok Yang 3y in University of Melbourne

Name: Ang Kok Yang
Specialty Course: Special Needs Dentistry
Degree Conferred: Doctorate of Clinical Dentistry
University: University of Melbourne, Melbourne, Australia
Length of Course: 3 years
Length of stay: 6 months

Describe the course in your university

The University of Melbourne Dental School is one of the earliest dental schools to be founded in Australia, with a history that goes back to 1897. Since then, it has been maintaining its position as amongst the best dental schools in Australia, with regular contributions to dental research. The current dean of the dental school, Prof EC Reynolds, is recognised as one of the inventors of CPP-ACP (Recaldent™) that we all know so well by now.

Postgraduate dental education offered at the Melbourne Dental School include: Endodontics, Oral Medicine, Periodontics, Prosthodontics, Oral Pathology, Orthodontics, Paedodontics, and last but not least, Special Needs Dentistry. Special Needs Dentistry is a relatively new field, with the program first offered in 2006.

As defined by the Royal Australasian College of Dental Surgeons, Special Needs Dentistry is the branch of dentistry that is concerned with the oral health of people with an intellectual disability, medical, physical or psychiatric conditions that require special methods or techniques to prevent or treat oral health problems or where such conditions necessitate special dental treatment plans. The RACDS has recognised the specialty since 2002, where it first held Fellowship examinations for Special Needs Dentistry as a specialty.



The Special Needs Dentistry (SND) course at the Melbourne Dental School is a three year full-time course. The program comprises of didactic, clinical and research components delivered over the three years, with approximately 50% clinical experience, 20% didactics and 30% research. Postgraduate students are expected to learn and demonstrate special skills in the provision of clinical services applicable to special needs dentistry, while at the same time conduct an original scientific research topic in this field culminating in the formation of a publishable scientific thesis.

Clinical experience is gained from rotations to various dental clinics in Melbourne, such as Royal Dental Hospital for dental treatment in a clinical setting, under general anaesthesia and domiciliary care; Royal Children's Hospital where we work with the paediatric dentists to ease teenaged special needs patients into a new clinical setting; Peter MacCallum Cancer Centre where the focus is on patients about to undergo or undergoing cancer treatment (chemotherapy and radiotherapy); Royal Melbourne Hospital with its focus on medically compromised patients such as transplant patients; etc.

In addition, the Melbourne Dental School is in the process of building a new private dental clinic, the Melbourne Oral Health Training and Education Centre (MOHTEC), where postgraduates will be extending our training and expertise to private paying patients, in addition to supervising undergraduate clinics in Special Needs Dentistry. This clinic is expected to be up and running in the last quarter of 2012.



Getting around the place

Melbourne is a relatively easy place to get around. The city is planned in square grids, so if you are lost, you just have to turn right/left 4 times to get back to where you started out from. The city has an extensive network of trams, buses and trains all coordinated by Public Transport Victoria (Melbourne is a city in the state of Victoria, one of seven states of Australia). Passengers have to buy a contactless card, called Myki (similar to our EZ-Link), to be able to ride on public transport. The city is also well serviced by taxis that run on meters, so there is no need to worry about being stranded. Car rental is relatively affordable, with daily rental rates around AUD\$35-100 depending on the model of car that you rent. Melbournians are a cycling lot, so there are dedicated cycling lanes alongside car lanes. However, if you wish to cycle, do note that it is mandatory by law to ride with a bicycle helmet, which can be purchased at most 7-11 convenience stores for AUD\$5.00.

Melbourne is a city of immigrants, so different suburbs offer different styles of food. One thing which you can find almost anywhere, will be coffee. Melbournians love their coffee, be it espressos, lattes, cappuccinos, or the essential local favourite, the flat white. Good coffee can be found in most places, and so strong is the coffee culture here that you will be hard pressed to find Starbucks outlets here. Local cult cafes such as Seven Seeds (www.sevenseds.com.au) or the famous Italian café Brunetti (www.brunetti.com.au) roast their own coffee beans, and will easily satisfy our caffeine needs.

Do not leave the place without trying.....

The other love that Melbournians have is for their football, lovingly termed “Footie”. This is not the round-ed ball that we are so familiar with in Singapore, but football here refers to Australian Rules Football, a game which originated in Melbourne. Games between local rivals are huge, and stadiums will be packed during finals. The game is a full contact sport, played with a rugby-looking like ball, and fans call it a fast and furious sport. You’ll probably want to catch a live match when you’re here, as you won’t be able to see it anywhere else in the world. Football season usually starts in late March.



Your advice to interested applicants to the course

Special Needs Dentistry is a very new field, so it offers an uncharted path for dentists who wish to undergo this field of training. More countries all over the world are beginning to realise that this is a necessary field, with the UK General Dental Council recognising it as a specialty in 2008. Other European countries may follow suit. In the USA, there is as yet no program involved in training in this field, though the Special Care Dentistry Association

(www.scdonline.org) regularly champions for the need for special treatment of affected patients. Thus far, the more developed training programs are located in Australia and New Zealand, with a few Universities offering Special Needs Dentistry as a postgraduate program. There is currently only 1 dentist in Singapore trained in this field (Dr Tay Chong Ming, NUH dental clinic), and it is a field that could do with more interest from dentists! MOH is kindly offering scholarships to dentists who are keen to pursue training in this field, so dentists who are interested should try to apply while the offer is still on-going. My advice to fellow dentists who are interested though, would be that this is a field that is different to what dental school has taught you. Be prepared to deal with patients who are different from the normal patient pool, be prepared to have a lot of patience in dealing with patients with special needs. It is often not so much about the dental work you are performing but more so about the way you are able to understand their problems and difficulties, such as extreme phobia or autism. The work may be tough, but the experience will be rewarding.

✦ Dr Ang Kok Yang



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Bayerische Motoren Werke (BMW) 640i Coupe



When BMW decided to release the new 6-series Convertible before the Coupe version, it shows that they know their buyers' profiles very well. Most customers buy the 6-series as a lifestyle choice, less for actual performance of the car. So you will definitely see more of the car going to the golf course than a race track, and the marketing focus is also shifted towards the same direction.

Of course, the engineers at BMW still do what they do best- to make the ultimate driving machine. The 640i coupe is no exception; the 3-litre straight six engine is fitted with a

twin-scroll turbocharger producing 320bhp and 450Nm of torque. It has enough force to hurl the 1660kg car to 100km/h in just 5.4 seconds, which I must say is pretty impressive.

The 8 speed sport automatic gearbox works seamlessly with the engine and if you use the paddle shift it will give a slight jerk to give a more authentic manual feel (seems like a new trend nowadays but still feels artificial).

The 50:50 weight distribution plus the standard rear wheel drive and double wish bone front layout makes the handling fantastic

and the amount of grip is something to behold. The truth is that although the car scores full marks for safety, it is a bit boring and lacks character because it is too predictable. However, from a dental standpoint, predictability is as good as gold!

The fuel consumption is improved due to the brake energy regeneration technology and auto start stop function (which I prefer to disable as the constant restarting of the engine gets on my nerves after a while).

The interior is well built with clean German style, so do not expect any flamboyance. The rear seats are bigger than the previous model but it is still going to be a squeeze for anyone above 1.7metre. The boot is huge, 460 liters to be exact, so it could fit in three golf bags! That explains the size of the rear seats.

I really like head-up display especially with the built-in navigation system, it's a good feature that prevents you from taking your eyes off the road when you use GPS.

The design of the new car is elegant and luxurious, with smooth flowing lines. I am just glad it did not look like the old model.

The 640i presents a better value than the 4.4liter V8 650i. If power is what you are looking for, go all the way and buy the M6.

With the four-door version of the 6-series Gran Coupe also set to be launched, it will be interesting to see if the Mercedes CLS and Audi A7 buyers will be tempted.

For more information, please visit: <http://www.pml-bmw.com.sg>

✚ Dr Kevin Co



A Tale of Two Golfs

The Volkswagen Golf has been around for a long time, since 1974 to be exact. It is sold worldwide in many different variants and spans over six generations. Golf is the best selling model for Volkswagen and the well loved by the British, even Prince William's first car is a Golf.

of torque.

Like the Golf-based A3 Cabriolet and TT Roadster from VW luxury brand, the new Golf cabriolet comes with a fully automatic electro-hydraulic convertible fabric roof that does away with the need for a separate cover when stowed.



The name "Golf" is actually a German word for Gulf Stream, not the sport that we commonly know.

The most iconic variants are the GTI and the Cabriolet.

The Cabriolet is reintroduced in 2011 after an 8-year absence, much to the delight of fans around the world. The only engine variant available in Singapore is the 1.4 TSI, which churns out 160bhp and 240Nm

The soft top opens in a reasonably quick time of 9 seconds.

The new Cabriolet lost the classic fixed roll bar seen in the older models but instead replaced by the same "active rollover protection system" comprising pop-up rollover hoops as seen on the Eos.

The rear seats actually offer enough room to fit adults comfortably as well as a boot that offers 250 liters of luggage

space even when the roof is stowed. The great thing about a Cabriolet is that you have lots of room to get your child into the back seats with the top down, especially when compared to the backbreaking maneuver in a coupe.

The 1.4 TSI twincharger engine (fitted with both turbocharger and supercharger) and the 7-speed DSG gearbox is really a perfect match. The car feels light and easy to drive with more than enough power for overtaking and cruising.

With the price difference of about 60k from the Audi A3 Cabriolet which is essentially based on the same car body, it may be much more prudent to get a VW which attract less road tax, has fantastic fuel economy (15km/litre) and still get the same wind in the hair..

Switch to the E35 GTI, you seriously feel that this car is from another planet. While the Cabriolet is like an easy going and playful Shih Tzu, the GTI is a powerful and purposefully trained Rottweiler.

What better way to celebrate the Golf GTI 35th birthday by having a more aggressive edition of the car. The exterior is as usual quite understated apart from the new LED DRLs; the interior comes with the classic golf ball gearshift that

I really like and with the red 35-edition logo stitched onto the front seats.

The moment you start the engine, the naughtier sound at idle is a giveaway that a car is made for driving enjoyment. The detuned Golf R 2 litre turbo-charged engine in the GTI puts out 235bhp and 300Nm, which is plenty for a hatch back. I am not sure how VW is going to market the Golf R as a simple ECU tweak can easily bring the GTI's horsepower higher than the R.



The acceleration of the E35 GTI is amazing, it goes like a rocket if you floor the pedal and the high revving engine is a joy for petrol heads. The 0-100kmh sprint is 6.6sec, which is 0.3 seconds less than the standard GTI. But figures do not tell the whole story as the car is much more lively and enthusiastic than before. There is negligible turbo lag and the 6-speed DSG gearbox is still superb to use especially with the play of the shift paddles. The handling is great due to the tight suspension with all the different electronic aids VW has thrown in. The comfort over uneven surface has suffered slightly, although I do welcome the improved feedback from the wheels.

With enough room to accommodate five adults and a decent boot, the E35 GTI is lovely amalgamation of performance, drivability and practicality. Even as we know that the new Mk7 Golf GTI is probably coming out in 2013, it has to be something extra special to beat the current model.

For more information, please visit: <http://www.vw.com.sg>

✚ Dr Kevin Co



Exhilarating EYRE Peninsula!

The intrepid Travelling Gourmet explores Australia's Seafood Frontier...

My titanium Breitling watch showed 07:41.

A quick dash to Adelaide Airport and I was airborne on the Regional Express Saab propjet. Just 50 minutes later I was at Port Lincoln Airport, 645km southwest of Adelaide. My first stop was at 4-star Port Lincoln hotel, a grenade's toss from Boston Bay. An energizing cappuccino in Sarin's Bar with their General Manager, Andrew Case, and I zoomed off to Port Lincoln Fresh Fish Co. at 20, Proper Bay Road.

Finding NEMO!

I felt like I was in the movie "Finding Nemo" as there was 'fruits de mer' galore or super quality sustainable seafood from Australia's Seafood Frontier! Garfish, King George Whiting, Spencer Gulf Bugs (little lobsters), Southern Spiny Red Lobster (called crayfish by the locals), Spencer Gulf King Prawns, Bluefin Tuna, Nannygai, Bronze Whaler Shark, Vongole, Calamari, and more! Dynamic Craig McCathie, the Managing Director revealed, "Ninety nine percent of the lobsters are exported to China and ninety nine percent of the tuna to Japan." Selected fish, squid, oysters & mussels are also smoked in the factory with Maldon Sea Salt, Pine and other secret ingredients.



At home with Chef Kris

Creative Chef Kris Bunder, Owner of Del Giorno's Café Restaurant, 3 time winner of South Australia Leading Seafood Restaurant kindly hosted lunch at his house with superb views of the Marina. Delacoline Estate Sauvignon Blanc Semillon 2010 was fresh, crisp and clean and perfect with Coffin Bay Casanova Oysters 'au naturel' with a squeeze of lemon, and sweet & tender Kingfish Sashimi, plus Kingfish in soy with tomatoes & onions brunoise. I also liked the Minniribbie Yabbie Farm Marrons & Yabbies with Chilli, Lime & Coriander paired with De-

lacoline 2010 Riesling. Relishing outstanding King George Whiting in a light but ultra crispy Coopers Pale Ale batter, I conversed in German with jolly Hagen Stehr, ex-French Foreign Legionnaire & Founding Director of Cleanseas, which produces premium Tuna and Kingfish, "Seafood has come a long way since the early days... jetzt Port Lincoln is der Meeresfrüchte Zentrum von Australien! (Port Lincoln is now the Seafood Capital of Australia)"



Swim with ...the TUNA!

From the jetty of Chef Kris' house I boarded "Adventure Lady" of Adventure Bay Charters, winner of the 2011 South Australian Tourism Awards for Adventure Tourism. We headed out to sea on a bearing of 075 degrees and speed of 14 Knots. The fresh salt air was invigorating. Four nautical miles out we arrived to see the Cleanseas Kingfish farm and Trent D'Antignana demonstrated how they were fed with scoops of fish meal. Our next stop was the Kinkawooka Mussel Farm, also in the ocean miles from land. It was fascinating! Amiable Andrew Puglisi showed the baby mussels grown

on black ropes which they stick to in bunches like grapes. At first the Australian Blue Mussels (*Mytilus galloprovincialis*) are only the size of a 20 cent coin but when they grow to their delectable serving sizes as big as a 'Madeleine'. The meat to shell ratio of these gourmet shellfish is very high. Andrew boiled up some fresh mussels in sea water for tasting. They were absolutely fabulous on the palate!

Matt, the Captain of the boat said, "Let's go see the tuna!" The boat cast off and we were off to see the Bluefin Tuna...

Rick Kolega of Kolega Fisheries & Sekol Farmed Tuna shared with us about tuna farming. The sun shone happily in a cloudless, azure blue sky as I donned a wetsuit, face mask and snorkel. Without hesitation, I jumped in like a Navy SEAL to swim with the sleek Bluefin tuna. It was exciting! The big fat torpedo shaped tuna as long as your body are very powerful & swim very fast! I was surrounded by dozens of the streamlined fishes and sometimes they knock in to you as they glide past. Their speed and amazing grace astounded me. When you feed them with sardines dangling them just in the water, the tuna gobble it up in a flash almost knocking the tongs out of your hand! You must try this most exhilarating escapade!

Back at Port Lincoln Jetty, I strolled over to see the life sized bronze statue of the famous racehorse called "Makybe Diva" who won the Melbourne Cup THREE times in 2003, 2004 and 2005!

Night at the Museum...

Dinner was very unique. It was in the historic Axel Stenross Maritime Museum where after a VIP tour conducted by the mild mannered Curator, George Wiseman, the Ship's Bell rang & the gourmet Dinner commenced. Del Giorgio's Cafe Restaurant is arguably Port Lincoln's finest restaurant, served up a fabulous feast of the freshest local seafood cooked in the ModOz style with Thai influences. Starters of Coffin Bay Oysters comprising Valentine, Cupid and Casanova...plus the KING OYSTER which costs AUD\$100 a piece!

I was very privileged to savour the succulent KING OYSTER which was absolutely the BEST oyster I have tasted so far! I have tasted oysters in the world's finest restaurants from 3 Michelin Starred Guy Savoy to 3 Michelin starred La Pergola in Roma so I know. Entree was a declinaison of Kinkawooka Black Mussels cooked in 3 styles. I loved the Thai 'a la Green Curry' style with aromatic Kaffir Lime (Daun Limau Purut) leaves, Ginger and Coconut Broth as well as more traditional 'Tomato & Chilli' as well as 'Garlic & White Wine' combos. Classic 'Pacific Rim' cuisine!



Cheerful Brian Turvey of Lincoln Estate supplied the wines with the gourmet fare. They were rich, ripe wines showing the unique maritime meso-climate of the Eyre Peninsula. It was sooo...good, especially the oak aged, BUT not over-oaked fruit forward Cabernet Sauvignon. A match made in heaven with the Eyre Peninsula Beef Fillet roasted with Fresh Garlic and dusted with aromatic Szechuan Pepper! Another impressive main course included Eyre Peninsula Lobster spiked with zesty lemon grass, coriander & Thai sweet basil. It was absolutely fabulous!

The inspiring Travelling Gourmet sails to Coffin Bay to savour...



MOUTHWATERING Oysters!

06:00 As dawn broke over the pristine waters of Bostin Bay, I jogged along the Parnkalla Trail after a gym workout. Then it was off to Coffin Bay on the Eyre Peninsula.

The serene and tranquil bay framed by blue skies looked like the Cayman Islands. The sea was like a piece of turquoise glass. Sailing out in the early morning in the 'Coffin Bay Explorer' ship powered by two Honda 200 outboard motors was a most relaxing & enjoyable affair. This is Coffin Bay's only fully accredited Marine Tour operator. Along the way as we cruised along, I saw a plump seal cavorting happily on starboard,

a family of parading pelicans and an armada of orange and white jelly fish floating like 'double L' parachutes in the clear greenish blue water.

Casanova's favourite...OYSTERS!



▲ Oysters GALORE!

Darian Gale is not only an affable oyster farmer but also a marine tour operator. I saw many sacks of oysters in black plastic netting on wooden rails. This is termed the 'rack & rail' method of oyster farming. One was hauled up and I savoured freshly shucked oysters full of the flavours of the sea and that unmistakable "umami" taste... I tried my hand at shucking the oysters and did very well. After all I have been trained by CIA (Culinary Institute of America). Actually, the Culinary Institute of America was founded in 1946. The Central Intelligence Agency was founded in 1947, but that is another story. ENJOY!

✚ Dr Michael Lim



▲ How mussels are grown

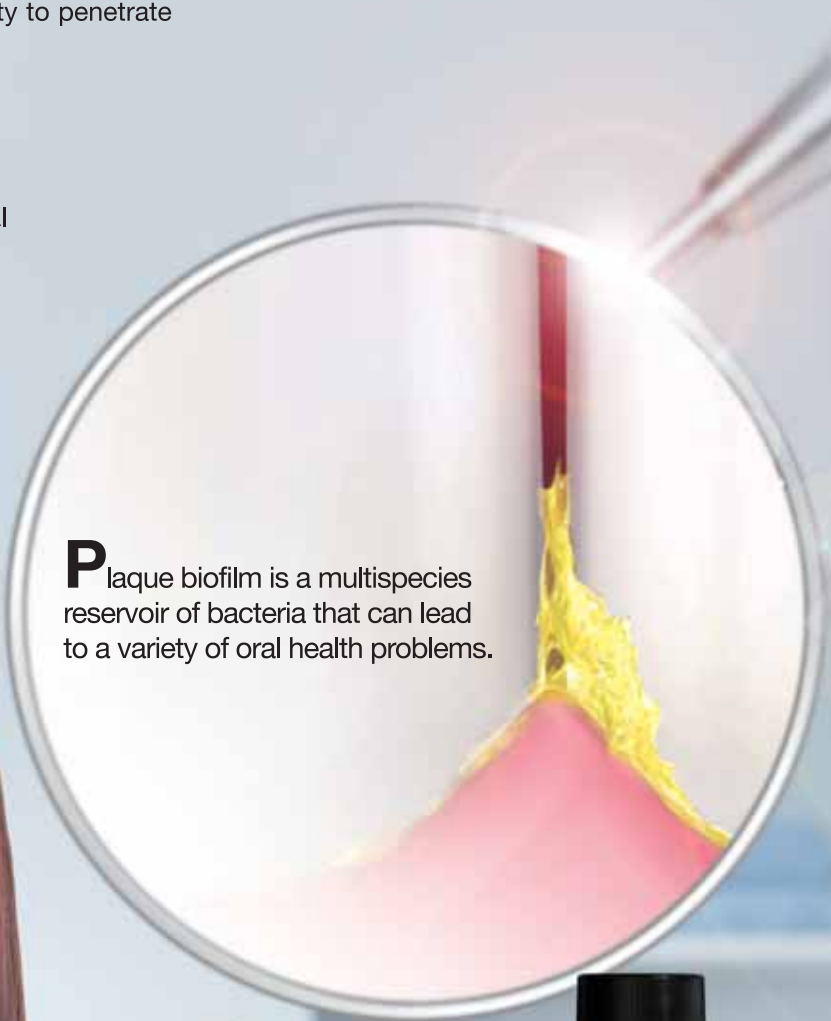
LISTERINE® PENETRATES BIOFILM TO REDUCE PLAQUE AND GINGIVITIS.

Bacteria in biofilm are more resistant to antimicrobial agents than free floating bacteria. Therefore, a mouthwash's ability to penetrate biofilm is an important part of its clinical efficacy^{1,2}

LISTERINE® reduces plaque and gingivitis by

- Penetrating plaque biofilm³
- Nonselective killing bacteria by disrupting bacterial cell walls and inhibiting their enzyme activity⁴
- Preventing bacterial aggregation, slowing multiplication and extracting endotoxins⁴

Recommend LISTERINE® after brushing and flossing - A powerful addition to any patient's routine



Plaque biofilm is a multispecies reservoir of bacteria that can lead to a variety of oral health problems.



References:

1. Ouhayoun JP. *J Clin Periodontol.* 2003;30: 10-12.
2. Pan P, et al. *J Clin Periodontol.* 2000;27: 256-261.
3. Foster JS, Pan PC, Kolenbrander PE. *Biofilms.* 2004;2:5-12.
4. Ouhayoun J-P. *J Clin Periodontol.* 2003;30:10-12.

THE PROOF
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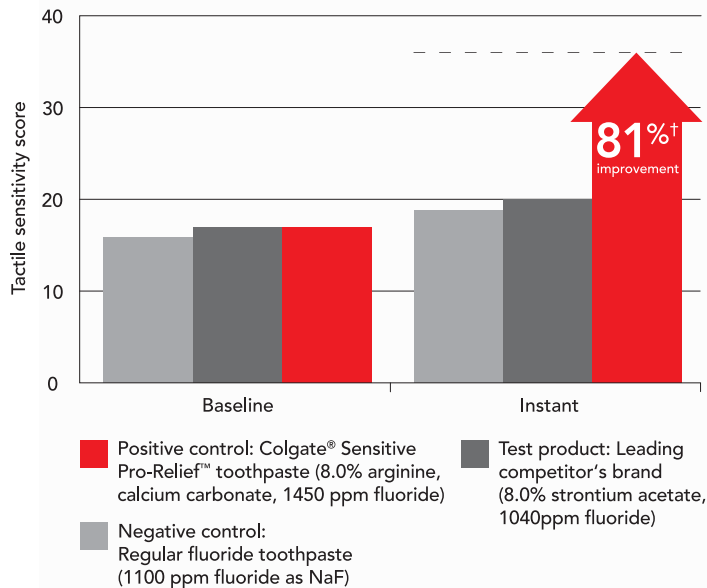
Colgate® Sensitive Pro-Relief™

Clinically proven to provide instant* sensitivity relief

IN A RANDOMIZED, DOUBLE-BLIND, PARALLEL-GROUP STUDY (n=150)

Colgate® Sensitive Pro-Relief™ provided instant relief vs leading competitor's brand¹

- There was no statistically significant difference between leading competitor's brand and regular fluoride toothpaste



*Instant relief achieved with direct application of toothpaste massaged on sensitive tooth for 1 minute.

[†]In a direct-application study, Colgate® Sensitive Pro-Relief™ significantly ($p < 0.05$) reduced dentin hypersensitivity vs leading competitor's brand by 81%.

Scientific works cited: 1. Li Y et al. Data on file, Colgate-Palmolive Company 2010. 2. Nathoo S et al. *J Clin Dent.* 2009;20(Spec Iss):123-130.

IN A RANDOMIZED, DOUBLE-BLIND, PARALLEL-GROUP STUDY (n=125)

Colgate® Sensitive Pro-Relief™ provided instant relief vs 2% potassium ion toothpaste²

- Significant ($p < 0.05$) reduction in dentin hypersensitivity was achieved instantly after direct application

161%

improved instant relief in tactile sensitivity test

60%

improved instant relief in air blast sensitivity test

**Prove it to yourself—
and your patients**



Colgate®

YOUR PARTNER IN ORAL HEALTH