

Expressions

Newsletter of the HKU Faculty of Dentistry
2016, Issue 1



2016 QS World Universities Rankings:
HKU Dentistry as No. 1

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Reference: 1. Baysan A, Lynch E, Ellwood R et al. Caries Res 2001;35:41-46.

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Professor Thomas F Flemmig

Editorial Board

Professor Edward Lo

Professor HS Jung

Professor Cynthia Yiu

Professor May Wong

Dr CH Chu

Dr James Tsoi



Faculty of Dentistry

The University of Hong Kong

Faculty of Dentistry, The University of Hong Kong

The Prince Philip Dental Hospital, 34 Hospital Road, Hong Kong

<http://facdent.hku.hk>

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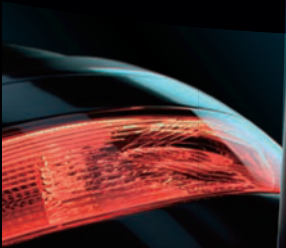
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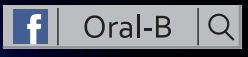


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Exploring New Frontiers in Oral Health

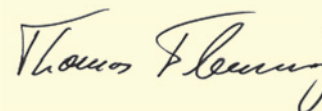
The year 2015-16 has been particularly meaningful to me as I was working in my second year as the Dean of the Faculty of Dentistry. Our dental school was ranked the best in the QS World Universities Rankings by Subject 2016, occupying the stratosphere with University of Michigan and Karolinska Institutet.

Our undergraduate programme was also among the most sought-after by top scorers in Hong Kong and around the world. I was thrilled when I learned three students who attained perfect scores, one in HKDSE, one in IB and one in GCE had chosen Dentistry for their undergraduate studies, and that it would most possibly remain as their choice of this respectable career. Having an excellent teaching and research team at the Faculty, and with the best students who are among the tops worldwide, we should turn our strengths into a driving force that advances the health of humankind, and copes with the increasing needs of society at large.

In this issue of Expressions, on "health" I would like to share with you how our team of dentists, scientists and researchers explore and advance the field of oral health on different fronts. Topics ranging from oral diseases as common as tooth decay to subjects as miniscule as the tools for irrigating the tooth canals, from the laboratory to the clinic, and from Hong Kong to Uganda.

Whatever the focus of the research or study, health remains our ultimate goal. Oral health is often overlooked, sometimes because of lack of understanding and knowledge, sometimes due to factors like economics

or environment. Still many more are oblivious to the fact that oral health is closely linked to one's general health. Any signs of oral or dental maladies can be a harbinger of serious systemic diseases, and infections inside the cavity can spread to other parts and organs of the body. Having said that, most oral diseases are preventable. If oral diseases can be forestalled by communication of knowledge, we hope that in sharing the latest in skills, technology, research findings and information in dentistry, we can help improve industry's standards as well as promote oral health among the public in Hong Kong and around the world. I also hope that by this newsletter, we can help to foster better understanding of what dentistry is about, how it is related to people's everyday lives and in what ways dentistry can help to improve quality of life.



Professor Thomas F. Flemmig
Dean, The Faculty of Dentistry
The University of Hong Kong

2016 QS World Universities Rankings: HKU Dentistry as No. 1

HKU Faculty of Dentistry has made significant progress this year. It was included in the QS rankings in 2015 as the second dental school globally and now its current ranking in 2016 is that of the number one dental school.

The Faculty has presented an outstanding score of 91.5 based on ratings of academic reputation, employer reputation, citations and research impact of each research paper belonging to the Faculty. This has allowed the Faculty to surpass the Karolinska Intitutet of Sweden, last year's top dental school, as well as many other leading schools, such as the University of Michigan and King's College London.

Dean of the Faculty, Professor Thomas Flemmig, has spoken of the Faculty staff's excitement in learning about the newest rankings. He states, "It is a wonderful recognition of the hard work and academic contributions of both our staff and students. They have done a fabulous job."

To address the growing shortage of dentists in Hong Kong and the issue of its ageing population, the Faculty has decided to expand the number of undergraduate students admitted each year into the Bachelor of Dental Surgery programme by 40% (approximately 70 students per year).

Professor Flemmig said the Faculty is actively recruiting the most talented academics from around the world to provide the best education for its students and to cope with the rising demand in capacity for effective teaching and mentoring. The Faculty has also committed itself to



providing an advanced teaching environment for students. An instance of this is the recent setting up of Hong Kong's first Infection Control Teaching Suite that provides hands-on training for future dentists and dental hygienists.

Moreover, Professor Flemmig cited that the Hospital's need to undergo significant reconfiguration within the existing resources and spaces provided by the Faculty in order to accommodate the greater student cohort. For example,



combining four smaller clinics into two clinics will create a space large enough to accommodate the increased class size. Seminar rooms, research laboratories and staff offices all have to be reconfigured. He has also said that he is looking forward to seeing collaboration between the dental profession, the government and other stakeholders to further advance the delivery of comprehensive oral healthcare for the people of Hong Kong.

Established in 1982, the Faculty of Dentistry is the sole educational institution for dental practitioners and specialists in the territory, offering undergraduate and postgraduate programmes in dental specialty areas such as community dentistry, endodontics, orthodontics, oral and maxillofacial surgery, pediatric dentistry, periodontology and prosthodontics.

Its internationally acclaimed staff and talented students from around the world; its academic and research achievements, as well as its vibrant and innovative spirit continuously attract world-wide recognition and interest. The Faculty has also conducted territory-wide surveys and studies on oral and dental health among the population. Both the teaching staff and students are actively engaged in community projects, translational and basic research, and comprehensive patient care.

As one of the pioneers in oral health care research, the Faculty of Dentistry will not only continue to contribute to international research achievements, but continue to lead outstanding undergraduate and postgraduate education programmes as 2016's top dental school in the world.



Dental Caries and Use of Silver Diamine Fluoride

Recent findings showed a high prevalence of dental caries in Hong Kong, and HKU researchers found that topical application of SDF solution could be a no-drill approach to treating the disease.



Tooth decay is one of the most common oral diseases in the world. In Hong Kong, dental caries are highly prevalent among pre-school children.

According to the findings of a HKU dental outreach programme, 2 out of 5, or nearly 40% of the 23,000 kindergarten children surveyed, were found to have tooth decay, with approximately 1.5 decayed teeth per children on average.

Worldwide studies on dental caries tend to associate the oral disease with socio-economic factors like educational background. Findings from the study showed that the prevalence of dental caries among children seemed to be correlated to geographic factors.

Children living in districts like Sham Shui Po, Wong Tai Sin and North District, were found to have higher incidence of dental decay. The kids in these districts also had the highest mean number of decayed teeth, with 1.9 to 2 decayed teeth on average.

Professor Edward Lo, Chair of Dental Public Health of the Faculty of Dentistry, said the high prevalence of dental caries in kindergarten children reflects, to a certain extent, negligence on the part of parents.

“It shows that many parents did not pay sufficient attention to the dental condition of their kids, and small children are rarely taken to dentists for dental checks or treatments,” Professor Lo said.

Dr Chun-hung Chu, Clinical Associate Professor in Community and Family Dentistry, advised that children should brush twice a day and parents should help their kids maintain a healthy diet with a lower intake of sugar and snacks, and they should also take their children to a dentist for regular checks.

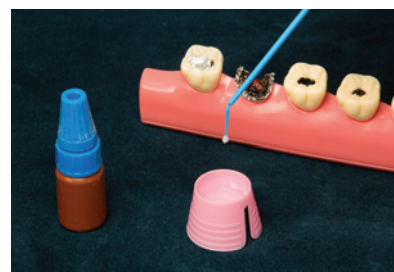
Efficacy of SDF In Arresting Dental Caries Put On Trial

Topical application of silver diamine fluoride (SDF) has attracted attention due to its “non-invasive, simple and affordable” treatment in the arrest of dental caries. (Ito et. al. 2015)



The overall prevalence of dental caries in preschool children in Hong Kong – nearly 40% - is relatively high by international standards. In the United States, 23% of the 2-5 age group were

found to have caries; in UK, the prevalence was 28% for 5-year-olds; and in Japan, it was 18% for 3-year-olds.



Containing fluoride ions, ammonia and silver ions in a stable and alkaline solution, SDF solutions are available in the market with

concentrations ranging between 3.8% and 38%. The 3.8% concentration is most commonly used for root canal treatment; while the higher concentrations are used for caries management.



The colourless solution can be easily applied with a microbrush on the caries lesions.

Both laboratory studies and clinical trials suggest SDF is more effective than other fluoride agents in suspending the dental caries process. From in vitro analysis of mineral content, SDF is shown to be able to “re-harden and re-mineralise decayed dentine and reduce mineral loss in dentine caries” (Ito et. al. 2015)

In the study entitled “Randomized clinical trial on arresting dentine caries in preschool children by topical fluorides – 18 months result”, which compared the use of 30% SDF solution with 5% sodium fluoride (NaF) varnish in different frequencies, the results showed dentine caries that had been applied with SDF solution had a significantly higher tooth decay inactivation rate compared to those that had been applied with NaF varnish. (Duangthip et. al. 2015)

Dr Chun-hung Chu, Clinical Associate Professor in Community and Family Dentistry, one of the team members who conducted the studies, said the findings showed that the effects of SDF were promising, and he suggested that either of the two SDF application protocols (SDF once a year or 3 applications at weekly intervals) could be adopted as a non-restorative treatment approach for managing cavities in primary teeth.

Dr Lei Mei, Postdoctoral fellow in Biomedical and Tissue Engineering, considered SDF as both user- and patient-friendly.

“SDF is simple to use. The solution can be applied to children, patients with special needs or even elderly people where dental services or clinic facilities are not available. As it is non-invasive and requires no drilling, it can be applied to those who have dental phobia or are uncooperative,” she said.

Notwithstanding all the advantages, Dr Mei said SDF had a metallic taste and its application could result in staining of the carious tissue. She said patients should be informed of the potential risks of tooth staining prior to starting the treatment.

SDF solution has been cleared by the US Food and Drug Administration in 2014 for off-label use as a fluoride to desensitize teeth roots.

Reference

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Marcus HT Fung, May CM Wong, Edward CM Lo, CH Chu. Arresting Early Childhood Caries with Silver Diamine Fluoride – A Literature Review. *Oral Hygiene & Health* 2013;1:3.

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Breastfeeding Benefits Dental Occlusal Development in Young Children



A study by the Faculty of Dentistry researchers has found that breastfeeding may benefit dental occlusal development in young children and result in less dental

abnormalities and disorders.

The cross-sectional study on more than 850 kindergarten children aged 2-5 years old showed that infants who were breastfed are less likely to have increased overjet or Class II incisal relationship.

Data were collected on the children's duration of full-time breastfeeding, history of non-nutritive sucking habits (eg. thumb sucking and pacifier use) by means of questionnaires completed by their parents. Oral examination was performed on the children to assess their dental arch relationship in three dimensions.

Sagittally, infants who were purely breastfed for more than 6 months were less likely to have increased overjet (horizontal distance between upper and lower anterior teeth more than 3.5mm). For those who were exclusively breastfed for more than 6 months, the prevalence of increased overjet was 12%, compared to 14.8% for those who were breastfed for equal or less than 6 months. For those who were never breastfed, the prevalence was 20.8%. There is a difference of more than 8% between those who were breastfed for over 6 months and those had never been breastfed.

In terms of Class II incisal relationship (lower anterior teeth bite behind the cingulum plateau of upper anterior teeth), only 18.8% of those who were breastfed for more than 6 months developed Class II relationship, compared to 25.4% for those who were breastfed for equal or less than 6 months; and nearly one third (32.9%) of those who had never breastfed had such malocclusion.

Transversely, the study showed that children who received more than 6 months of pure breastfeeding had greater intercanine and intermolar widths than those who were purely breastfed for less than or equal to 6 months. A wider dental arch is deemed more favourable for dental development as the chances of dental crowding are reduced.

The findings had reinforced some other studies conducted worldwide that associated breastfeeding with the development of a normal occlusion.

Dr Yangqi Yang, Clinical Assistant Professor in Orthodontics, advised parents to breastfeed the baby for at least 6 months, which is recommended by WHO.

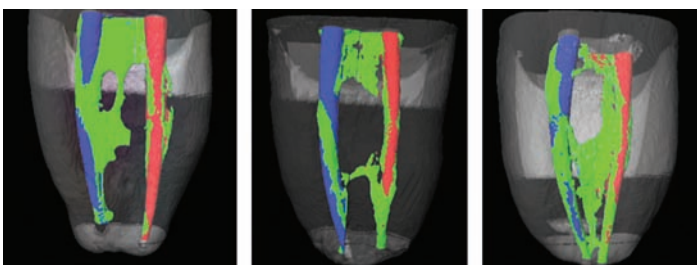
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Sum FHKMH, Zhang L, Ling HTB, Yeung CPW, Li KY, Wong HM & Yang Y. Association of breastfeeding and three-dimensional dental arch relationships in primary dentition. *BMC Oral Health* 2015;15:30. doi: 10.1186/s12903-015-0010-1.

Which Irrigation Technique Works Better for Removing Calcium Hydroxide?

Calcium hydroxide has been widely used as an intracanal medicament between visits in endodontic therapy for its antimicrobial activity and biocompatibility. Prior to final root canal obturation, the calcium hydroxide within the canal root must be completely removed, or the residues can affect the outcome of the obturation by reducing the sealing ability of endodontic sealers, increasing apical leakage and forming calcium eugenolate, hampering penetration of endodontic sealer into the canal wall dentin tubules. Contaminated isthmus areas, which harbor bacteria and serve as an intracanal medicaments reservoir, have led to many endodontic treatment failures.

HKU Faculty of Dentistry researchers conducted the first ever in vitro study to compare the efficacy of four irrigation techniques, namely, needle, ultrasonic, EndoActivator and photon-induced photoacoustic streaming (PIPS) in removing calcium hydroxide from the root canal and isthmus of maxillary premolars.



The findings revealed no difference in volume reduction of calcium hydroxide among the four irrigation groups in the coronal and middle thirds of the root canal. However, ultrasonic and PIPS irrigation were superior to EndoActivator and needle irrigation in removing calcium

hydroxide from the isthmus regions of the root canal of maxillary premolars. A possible explanation for this difference in the case of PIPS is that the system generates a strong and significant photoacoustic shock wave, which would enhance three-dimensional spreading of irrigants into the apical third.

In contrast, the needle delivers irrigants no further than 1mm beyond the needle tip, and therefore the apical third is inaccessible for flushing. EndoActivator, delivering insufficient volume of irrigants to the apical area and lacking cavitation, resulted in low efficiency of calcium hydroxide removal.

As a whole, the study showed that no irrigation technique completely eliminated calcium hydroxide from the entire canal system. Therefore, more effective methods of completely cleaning the apical portion need to be developed.

Reference

D Li, SM Jiang, X Yin, Jeffrey WW Chang, J Ke, C Zhang. Efficacy of Needle, Ultrasonic, and EndoActivator Irrigation and Photon-Induced Photoacoustic Streaming in Removing Calcium Hydroxide from the Main Canal and Isthmus: An In Vitro Micro-Computed Tomography and Scanning Electron Microscopy Study. *Photomedicine and Laser Surgery* 2015;33:330-337.

Making a Difference in Uganda

Alumnus Dr Abraham Chan (BDS 1994) tells the story of his journey to provide dental care to the underprivileged in Uganda.



"On arrival in Uganda after more than a 10 hour flight, though tired, we were all excited at the prospect of setting up the first ever dental clinic in Suubi, Uganda. It took us another few hours

to get to the village, where we unpacked the loads and baggage of dental supplies and donated items at the multi-purpose hall. When the surgery coats, the gloves, the dental equipment, the disinfectants, the toothpastes, and all items necessary for the operation of a dental clinic were ready, the Watoto Dental Clinic was open for business!

It is a modern and well-equipped clinic, with 2 new dental units, compressors, suction units and autoclave, all provided by the generous donors from Hong Kong. They were shipped to Uganda and installed by local technicians

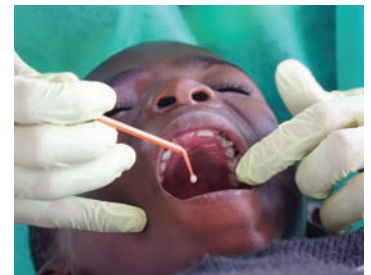


before our arrival, waiting for operation by the Watoto Dental Team. Formed in Hong Kong, this Watoto Dental Team comprised seven of us - Professor Gary Cheung, Dr Dennis Chan, Dr Trevor Yuen, Dr Raymond Ho, Dr Gary CY Cheung and Dr Vicky Szeto and me – all alumni of HKU Faculty of Dentistry.

Teaming up with 2 dental students, a local dentist and with the support of mobile dental units provided by Dentaids,

we examined and treated about 800 patients from Suubi and Bbira villages in five days – what a record!

We also conducted oral checks for people in the church hall of Suubi village. Some of them were given preventive treatment such as fluoride varnish and silver diamine



fluoride application. While we performed dental checks and treatments, the students provided oral hygiene instruction and education to the local people, with a view to enhancing their knowledge of proper plaque control. Patients who required follow up were scheduled for further treatment in our new dental clinic.

In the clinic at Suubi, we provided a range of treatments, including restorative treatment such as ART and composite restoration; endodontic treatment and extractions as well as scaling; all the kinds of treatment that would be provided by a professional clinic – but at no cost!

After the service in Suubi, we moved the mobile dental units and equipment to the Laminadera Village in Gulu which is situated



in the northern part of Uganda, There, we served about 200 patients in a medical centre.

This was a memorable trip as we were the first group of Hong Kong dentists to have provided dental service for more than 1000 patients in Uganda. Team work was

carried out by dentists across generation; HKU dental graduates of the 80's, the 90's and the 2000's.

More importantly, after our departure, the Suubi dental clinic will continue to enable visiting dentists, both locally and from other countries, to serve and provide treatment to those in need, share their experience and train the local dental service providers in Uganda. The joy we experienced in Uganda is beyond expression, and our team looks forward to returning to Uganda in the summer of 2016."



Dr Abraham Chan (far left) and the Watoto Dental Team.

Outreach not Over-Reach

Dr Justin Curtin, Clinical Assistant Professor in Oral and Maxillofacial Surgery, writes about the challenges one needs to cope with in the delivery of cleft services while on a humanitarian mission.

Cleft lip and palate surgery is a life changing event. In many regards the surgery itself is relatively straightforward without major physiological consequences and the opportunity of making an impact for little risk is highly attractive. Medical missions offer the framework for medical personnel to deliver their skills in a location where need outstrips supply, and it all seems a perfect fit. However, despite good intentions, visit by medical teams to foreign lands to provide services can end in disappointment or even disaster for all concerned. This article aims to provide some background, and 'food for thought' to increase the likelihood that the experience will be enjoyable and beneficial for all concerned – a 'stay out of trouble guide'.



Outreach surgical care can be delivered either by fitting into an existing hospital framework or by temporary

platforms of variable independence. The latter essentially creates a field hospital that is able to deliver care to areas of need that are beyond access to local services. Such an environment is by its nature limited in the services it can safely provide, a fact that can impact upon the outcome quality despite the capabilities of the surgeon – this is an important issue to accept. Temporary surgical facilities are by far the most common in the delivery of cleft services in low income countries.

We need to accept the fact that temporary surgical facilities are by far the most common in the delivery of cleft services in low income countries. One of the questions most commonly asked is "What shall I bring?" The answer to this question is both simple and complex: bring the essentials as well as bring all you have, including those tangible items needed to handle unexpected complications, such as in cases of bleeding and airway issues. Other intangible essentials include factors that impact quality of care, ethics and respect for the local culture and expertise.

Screening assessment looms large in determining safe delivery of care, given that places where humanitarian aid is required are also areas where poor living standards, underlying cardiac and respiratory diseases as well as nutritional deficiencies may be prevalent, factors which play an important part in making prudent decisions in the selection of patients.

As a surgeon, focus is almost habitually on delivery of care. However a significant



amount of this preparation is undertaken months prior to the mission. It can be a deflating experience to turn up, full of enthusiasm and willingness to help (after all that is the nature of most healthcare providers) to find oneself almost impotent because of lack of planning and consideration of facilities, things that most of us take for granted in our daily lives and our working lives yet without which we cannot move into action.

For healthcare to be sustainable teaching and learning must be continual and part of the framework that includes local and visiting team members. At the same time, it is essential to acknowledge local expertise, which is often of high calibre despite it having little public recognition. One should be reminded to avoid committing the Seven Sins of Humanitarian Medicine pointed out by David R Welling: Leaving a mess behind/Failing to match services to local needs and facilities/Failing to co-operate with other organisations, including local colleagues and authorities/Failing to have plans for patient transfer in case of an unforeseen medical emergency, and failure to have a follow-up plan/Being distracted by politics, training or other issues in the delivery of medical care/Going where the services are not needed, not wanted or being poor guests/Doing the right thing for the wrong reason.

Challenging case – Expect the Unexpected

In one case, having spent the best part of an hour battling ongoing ooze from a routine cleft lip repair, while



wondering what the anaesthetist was doing to make my life so hard, I was relieved to be finished. Midway through the next case, the recovering room nurse came to inform us that our last patient was breathing strangely, and there was a lot of blood coming from the wounds. Upon review, the patient had stridor and was covered in blood. The lip was inordinately swollen, and even the needle marks from the nerve blocks were purpuric. It turned out that the child had been declined surgery by other surgical teams on the basis of her proclivity to bleeding and bruising. Realising this was an issue, the parents withheld that information. The diagnosis? Vocal cord haematoma due to an unknown bleeding diathesis. It could have been a disaster, and probably would have been if the surgery had been palatoplasty.

Article first appeared in PMFA News 2015;3(1):6-10. Reprinted with kind permission of Pinpoint Scotland Ltd – www.pmfanews.com

Meet the Mentor

In this issue, Expressions (EXP) has a date with Dr Arthur Sham, who has been joining the Mentorship Programme as a Mentor for the past four consecutive years. Dr Sham works as a full time dentist and serves as a voluntary dental officer in an NGO in his spare time.



EXP: When did you graduate from HKU Dentistry?

Sham: Class 2005

EXP: Apart from Dentistry, did you acquire qualifications in other fields?

Sham: Due to my interests in science and health-related fields, I obtained a BSc (Biological Science), MSc (Human Nutrition), Professional Certificates in Food Safety, MSc (Management)(Health Services Management), St John First-Aid and some paramedic training from St John Ambulance & Hospital Authority A & E Training Centre.

EXP: Why did you choose Dentistry as your career?

Sham: I am interested in clinical science. Dentistry is a rewarding profession and get satisfaction whenever you see people coming in with dental pain then leaving your clinic with a change of facial expression and mood after dental treatments.

EXP: Why did you become a mentor? In what ways have you benefited from the programme?

Sham: Mentoring not only helps someone else in a

powerful and rewarding way. Mentoring improves my awareness of learning gaps. It develops my capacity to give and take criticism. I also update my organisational and professional knowledge. It offers me an opportunity to pass on knowledge and experience, and it keeps driving me to learn.

EXP: What do you hope for the mentorship programme?

Sham: I would like to help instill interests in Dentistry among the students, and I am willing to share my learning and work experiences with the next generation which lectures and textbooks may not have taught them.

EXP: What are you currently working on?

Sham: I am currently serving special needs patients regardless of their age and background. I also served as a voluntary dental officer in an NGO in my spare time.

EXP: Have you encountered any challenging cases in your career?

Sham: I have encountered many difficult and challenging



cases especially those medically compromised patients with intellectual and developmental disabilities. They are prone to poor oral health and they have higher rates of cavities, periodontal diseases and tooth loss.

EXP: Any special or memorable incident that you would like share with us?

Sham: I was bitten till I bled on my left index finger by a severely intellectually disabled patient while performing a scaling in late 2012, and I needed to attend the A & E Department at a public hospital for immediate treatment. Despite the injury, I had to perform dental treatments as usual the next day.

EXP: What do you do in your free time?

Sham: I love watching movies, drama, playing ping-pong, chess, and war games and doing charity work.

EXP: Did you have any plans for the future?

Sham: I intend to pursue a doctorate degree in Dentistry in the near future. I plan to focus on three areas: contributing to the profession through meaningful and

practical research, striving for clinical excellence, and giving back to the community whenever I can.

EXP: Would you like to share some words of wisdom with the mentees?

Sham: Although we share the same undergraduate qualification, we all have different interests, skills, experiences and expectations. There is no single ideal career path for everyone. Choosing the wrong path may lead to dissatisfaction and disillusionment. They need to know their own interests and understand their own capacity. If dental students intend to practise general dentistry, they should be aware of the varieties and pathways that can be followed within a general dental practice setting. If they want to become a specialist, they need to know the possible routes for undertaking specialist training locally or overseas. They must understand the pathways involved in applying for specialist training and what may be expected from their resume. All in all, be a fit and healthy dentist with a work-life balance.

Dental Researcher Embarks On Mycology Research at Institut Pasteur

Dr Sarah Wong, postdoctoral fellow in Microbiomics at the Faculty of Dentistry, has started a new life in Paris to become a full-time researcher with the prestigious Institut Pasteur, a French non-profit private foundation dedicated to the study of biology, micro-organisms, diseases and vaccines.



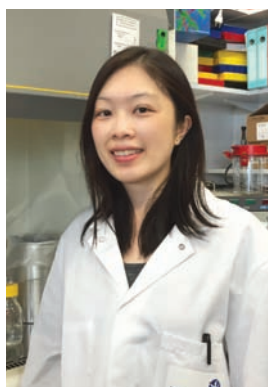
On the eve of heading to work at the Institut Pasteur in France, Dr Sarah Wong said she felt excited at becoming a member of the Institut: “It is a great honour for me to be able to learn

from the renowned scientists working there, who are the most brilliant minds from around the world”, she said.

Dr Wong said her main interest lies in oral microbiomics. Her research team has conducted studies on oral microbiota of various cohorts among the population, for example patients with voice-disorder and nasopharyngeal cancer.

Mycology study on fungal pathogen is another area that Dr Wong would like to explore: “*Aspergillus fumigatus* and *Candida* are the two most common fungal pathogens in humans. These are air-borne and could pose immediate threats to the millions of immune compromised patients like those affected with HIV or those who received organ transplants.”

“Understanding the host-fungal interaction is essential in the development of new antifungal agents, which could help expand the currently limited arsenal of antifungals. It could be a challenge as the two pathogens share a similar pathologic mechanism and have a cell structure resembling that of humans,” she said.



About to begin her new life in France, Dr Wong said she was grateful for the support of the Faculty in providing both the environment and knowledge which cultivated her to be a genuine scientist.

“The dental faculty values the importance of all kinds of research, including clinical and basic science research. Our Oral Biosciences laboratory is one of the leading laboratories in Asia. I also appreciate the constant encouragement and support from the Faculty, especially my supervisors, Dr. CJ Senevirate, Prof. LP Samaranayake and Prof. LJ Jin, who encouraged me to participate in research activities and in overseas courses and exchange activities. The experience helped me to grow as a competent scientist,” she said.

Talking about the future, Dr Wong said it was likely that her research path would diverge from dentistry into other areas, but she had full confidence that everything she learned here would provide the skills to tackle the challenges ahead of her.

Dr Wong had a Bachelor degree in Science (Bioinformatics) from the University of Hong Kong in 2009, and she completed a PhD, also from HKU, in 2015.



Speech by Dean Professor Flemmig at the HKU 194th Congregation

Mr. President, Faculty Staff, Graduates, Students, Parents, Ladies and Gentleman:

Welcome to the 194th Congregation of The University of Hong Kong. I am delighted and honoured to be here with you to witness the formal graduation of the outgoing undergraduates and postgraduates of the Class of 2015!

You graduates are a product of this fine University and conferring the degrees that you so well deserved is the highlight of the academic year. It signifies what we have achieved together. It was your determination and the countless hours of studying and clinical sessions, your teachers' instructions, and the support of our dedicated staff that made you what you are today. You all have worked very hard to reach this successful point in your lives and you can be proud to call yourselves Alumni of HKU and members of our growing global family of Faculty alumni. Well done! You deserve a big round of applause.

At the same time, here at this ceremony, sharing the happiness with you are your teachers, friends, and families who have provided their support and guidance along the way. Please join me in giving them a round of applause, too.

When preparing for this speech, two things came to my mind. First, what advice I would have liked to receive at my graduation and second, what I can do so that you may remember my advice. Having gone through a problem based curriculum, you already know that more than 90%



of the information presented in a lecture or speech, like this one, will be forgotten. This is why I will keep my message concise and repeat it three times. First I tell you what I will tell you, then I tell it to you, and at the end, I tell you what I have just told you.

My advice for you is the following:

Get out of the cavity

Stop doing something

Respect others

You have spent the better part of your studies in cavities

- oral cavities, tooth cavities, osseous cavities, and even smaller spaces such as periodontal pockets and root canals, which you have often successfully and sometime desperately negotiated to reach the tiny apex of a root. The ability to focus on minute details and operate in a confined space is an important



skill in dentistry, which you have learned to master. This razor-sharp focus distinguishes us dentists so decisively from our medical colleagues. While we know everything about a little bit our medical colleagues just know a little bit about everything.

When I was a dental student, a good friend of mine who was an architect entrusted me with his dental care. At one of the many long clinical session, in order to keep him engaged and his mouth open while I was preparing a cavity, I tried to keep him abreast of the progress I was making. I explained to him the intricacies of the cavity preparation I was performing and the challenges I was encountering in the distal box while gesticulated with my hands to explain the anatomy of the tooth, which looked something like “here are the two cusps and in-between is the distal box that I am preparing”. This is when he removed from his mouth the saliva suction and the cotton rolls that I had so carefully positioned under his tongue and



instead of admiring my intimate knowledge of the tooth anatomy, he mumbled slightly impaired by the anaesthesia of his lip “when we in architecture talk about structures that way, we mean something big, I mean really big, such as buildings and not tiny teeth”. That made me realise that our focus on detail sometimes makes us loose perspective of the greater things in life.

So, my message to you is to get out of your cavity. Step out of your familiar environment and comfort zone in order to continue to grow as a professional and a person. Outside of that you will learn the unexpected, meet new people you wouldn't have met otherwise, make new friends, and broaden your horizon. The dental profession is a tightly knit community and it is all too easy to get stuck inside. Step out of that cavity of yours and explore what the world has to offer. The colourful fabric of Hong Kong's society provides many opportunities for that and if that is not enough for you, there is always the rest of the world.

My second message for you is to stop doing something. This may be particularly important in a fast-paced city like Hong Kong where everybody seems to be rushing to go somewhere. For me, nothing signifies the fast-pace of Hong Kong's lifestyle more than the way people push elevator buttons here. You may find this surprising, but in most parts of the world, it is

sufficient to push the button once in order to be transported to the floor of your destination. In Hong Kong, passengers tap on the elevator button multiple times and then push the close door bottom to override the automatic door closing mechanism. Elevators that don't have a close door bottom, like the ones at the Prince Philip Dental Hospital, cause discernible distress to passengers who often seek to ease their tension by pushing a few



more time some of the buttons that are already lit.

Now, there is nothing wrong about moving fast as long as you know where you want to go and why it is the best place for you, in particular when it comes to the journey of your life. Sometimes, you need to slow down and reflect to identify your true north and define your purpose in life. Don't settle for something that is just good enough. Set yourself stretch goals and strive for the best that you can do. To quote Steven Covey, "good is the enemy of best".

Unfortunately, I cannot promise you that it will be easy all the time. Because life happens. You

may face challenges in your personal and professional life and experience setbacks. Do not let any of those alter your conviction and determination. There also will be many wonderful moments in your life. Create as many of them as you can and savour each and every one of these moments. Just do not take them for granted.

My last advice for you is to always and I mean always respect others. You have been extremely successful and lucky in your life. You have been admitted to one of the most competitive programs at the most competitive university in Hong Kong and have completed an extremely rigorous curriculum. Continuous success can make you

believe that you deserve more than others because you are smarter and work harder. Don't forget that success only happens in the right environment. A genius placed in the middle of a desert will not be able to achieve much, whereas a fairly talented person in a fertile environment can accomplish a whole lot. Always be thankful to the people around you and acknowledge their support. As a healthcare professional you have the ability to give back to your community and make a meaningful contribution to society. For me, this is one of the most fulfilling aspects of our profession.

As you leave the University and start the next chapter of your life, I hope that every now and then when you are focussed on your work, push the elevator button multiple times, or enjoy the fruits of your achievements, you may remember to get out of the cavity, stop doing something and always respect others. As members of our HKU family, I hope you will stay connected and continue to engage with your Alma Mater. With that I am wishing you a fulfilling professional career and above all, a happy life!

Faculty Retreat Works on Blueprints for Teaching and Learning

The Faculty retreat, a platform for the staff of Faculty of Dentistry to share and discuss their ideas, was held on the Mar 10. The retreat's objectives were to revise Clinical Skills Assessments of the 6-year Bachelor of Dental Surgery programme in accordance with The Board of Education of Hong Kong, to redesign the mode of clinical teaching by incorporation of specialty-driven care and to reformat Problem Based Learning by greater integration of the inquiry-based learning approach. The retreat demonstrated HKU as a striver for excellence in the dental profession and provider of world-class dental education.

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First Encounter with Mentors

More than 70 mentors and students participated in the Student Mentorship Programme 2015-16 Inauguration Ceremony held at Best Western Hotel Harbour View on Nov 30. The mentors – all alumni of the Faculty of Dentistry – shared knowledge and information on dental practices with the future generation of dentists.



Dental Society Works Like A Splint

The newly formed Executive Committee of the Dental Society, HKUSU has adopted the name "Splint" for the Session 2015-2016. The Committee Chairperson, Florence Lau, hopes the new committee will act like a splint, fostering unity and promoting the welfare of the members. She quoted what the renowned political activist Helen Keller once said: "Alone we can do so little, together we can do so much."



The Apollonian 2015 is out NOW!

The Apollonian Committee (HKUSU Session 2015-16) has been set up! The Committee has adopted the name "Novo" and the logo of an eagle spreading its wings as its group representation. The Committee Chair, Kong Yu, said the name "Novo" denotes innovation, in the spirit of which the Committee hopes to enlighten the readers with fresh ideas and inspiration. The Committee Vice-Chair, Wong Hoi Shuen, said the Journal will delve into how the dental industry had coped with the rapid changes in Hong Kong society. "We hope by means of this, the journal will be able to bombard our readers with fresh new perspectives!", she said.



Awards and Achievements



Dr CH Chu (Clinical Associate Professor in Community and Family Dentistry) earned the prestigious Academy of General Dentistry (AGD) Lifelong Learning and Service Recognition in San Francisco, where the AGD annual meeting took place between Jun 18 to 21, 2015. To receive this recognition, recipients must complete at least 1,600 hours of continuing education and perform at least 100 hours of dental-related community or volunteer service.



Dr Michael Botelho (Clinical Associate Professor in Oral Rehabilitation) received the ADEE (Association for Dental Education in Europe) Excellence in Dental Education Award for 2015 in Szeged, Hungary. The ADEE Dental Educators Awards programme encourages good practice in the provision of high quality dental learning and teaching in Europe.

Dr Botelho was also honoured with The University Grants Committee (UGC) Teaching Award 2015. The Award was launched in 2011 to honour academics in the UGC-funded institutions for their outstanding performance and achievements, as well as their leadership in and scholarly contributions to teaching and learning within and across institutions.



Professor Jukka Matinlinna (Professor in Dental Materials Science) was awarded fellowship by the Academy of Dental Materials (ADM) at the annual meeting held on Maui, Hawaii in October 2015. Founded in 1941, ADM is a consortium of dental professionals who are interested in the development and application of raw materials to dental care.



Dr Lei Mei (Postdoctoral Fellow in Biomedical and Tissue Engineering) has won the Merit Award in the Scientific Imaging Competition organized by the Centre for Reproduction, Development and Growth (CRDG) under the category of Electron Microscopy, for the entry entitled "Gold Particles Stained Human Dentine Collagen". **Dr CH Chu** (Clinical Associate Professor in Community and Family Dentistry), is the Principal Investigator.



Qiao Wei (PhD candidate) has won the Best Student Award for his poster presentation entitled "Fluoride and carbonate co-incorporated porcine bone derived biological apatite stimulates osteogenesis in vitro via WNT/beta-catenin pathway" at the 15th Asian BioCeramics Symposium held in Tokyo from Dec 9 to 11, 2015.



Dr Mike Leung (Clinical Assistant Professor in Oral and Maxillofacial Surgery) won the Best Presentation Award (Staff) at the 2015 Faculty Annual Scientific Meeting held on Dec 11, 2015.



Dr LI Peng and **Dr TSUI Wai Kin** (PhD candidates) won the Best Presentation Award (Student) at the 2015 Faculty Annual Scientific Meeting held on Dec 11, 2015.

HK\$1 Million Gift from Pun U District Association of Hong Kong



The Pun U District Association of Hong Kong gave HK\$1 million to the Faculty of Dentistry to set up a scholarship for postgraduate students enrolled in the Master of Dental Surgery in Prosthodontics. The donation was initiated by former Honorary Clinical Assistant Professor Dr Peter Wat. The Faculty has organized a cheque presentation ceremony on Nov 23, 2015 where Faculty

Dean Professor Thomas Flemmig received the cheque from the Association's Chairman Mr Kai-chuen Sat. The 2000-member strong Pun U District Association has supported education and social welfare in Hong Kong and in mainland China by means of charitable donations and philanthropic activities.

HK\$1 Million Donation from Dr Richard Lee



The Faculty of Dentistry has received a HK\$1 million donation from dentist and philanthropist Dr Richard Shing-kwong Lee. The donation will be used for educating and research in digital dentistry. In recognition of the

donor's generosity, the Faculty has organized a cheque presentation ceremony on Feb 16 where Faculty Dean Professor Thomas Flemmig and Honorary Professor Tak-wah Chow received the cheque from Dr Richard Lee.

First Dental Infection Control Teaching Suite in Hong Kong



The Faculty of Dentistry has set up the first Infection Control Teaching Suite in Hong Kong with the objective of promoting awareness about the prevention of infection in dentistry. To thank the donors and sponsors for making such a high-tech teaching suite a reality, a plaque unveiling ceremony was held on Feb 22. Present at the officiating

ceremony were Sir Gordon Wu Ying-sheung, GBS, KCMG, FICE, Honorary University Fellow Lady Ivy Wu Kwok Sau-ping, JP, Under Secretary for Food and Health Professor Sophia Chan, JP, Faculty Dean Professor Thomas Flemmig and Professor Gary Cheung.

BDS Class 1985 Marks 30th Anniversary



The first batch of HKU dental students celebrated their 30th Anniversary of graduation on Nov 8. The day brought back memories of good old times at the Prince Philip Dental Hospital, where they received education and training in dentistry.

Wedding of Adrian & Heesook



Alumnus Dr Adrian Ho tied the knot with Ms Heesook Byun on Nov 11, 2015. We would like to wish the couple a happy married life!



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GlaxoSmithKline Consumer Healthcare (Hong Kong) Limited

23/F, Tower 6, The Gateway, 9 Canton Road, Tsim Sha Tsui, Kowloon, Hong Kong. Tel: (852) 3189 8989 Fax: (852) 3189 8931 www.gsk.com.hk

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The University of Hong Kong**

The Prince Philip Dental Hospital
34 Hospital Road, Hong Kong

<http://facdent.hku.hk>