

Letter to the Editor

Dear Sir

Undergraduate orthodontic and paediatric dentistry education in Europe: Hazer, Oliver, Chadwick and Paganelli

Projects such as the DentEd one reported in the March issue of the *Journal* (Harzer *et al.*) are to be welcomed, as they highlight anomalies in undergraduate dental curricula and make one aware of mainstream opinion. Whilst most of the suggestions are uncontroversial, the recommendation that 'there should be no laboratory skills course' was somewhat surprising, as no case was presented to support this assertion. I assume that by 'laboratory skills course' they mean courses in the design, construction, adjustment, and use of fixed, removable, and functional appliances, either on laboratory models or for patients. This type of activity currently occupies about 25 per cent of the undergraduate course in Glasgow. This not only improves the students' understanding of the mode of action and management of such appliances, but also ensures that the students 'have skills in recognising good and poor quality technical work', which was a further recommendation of the DentEd Project. In the real world, lack of specialist technical support may require the dental surgeon to instruct technicians in orthodontic appliance construction and without skills of the type described above this could prove difficult.

On the other hand, I would commend the suggestion that postgraduate students be afforded the opportunity to assist teaching staff (previously mentioned in the Erasmus report; van der Linden 1992). The focus of postgraduate

orthodontic training in the UK on two-arch fixed appliance treatment means that many trainees see a highly selected group of patients for treatment, generally with established malocclusions. Assistance on undergraduate clinics would not only allow participation in chair side teaching but also expose trainees to a wider variety of orthodontic situations including interceptive treatments, compromise, and partial treatments, as well as the diagnosis and treatment of developmental anomalies. Despite discussion on this topic for many years, it is to be regretted that the Specialist Advisory Committee in Orthodontics apparently still considers that such experience can make no measurable contribution to postgraduate clinical training.

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Reference

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Journal of Orthodontics, **28**, 97–102.