

national repute who themselves were on the appropriate specialist list. Such supporters would state their complete confidence in the abilities and character of the appellant, and recommend that they be recognized as a specialist on the basis of personal knowledge that they had of their work.

To ensure absolute probity, the GDC engaged the services of a senior judge of great experience. Consequently, the appeal process has been handled with the fairness and impartiality for which British Justice is renowned, free from sectarian interests and with the public interest firmly in mind.

The argument has been put forward that no appeals should have been entertained. I believe that with greater forethought and common sense in drafting the regulations many would have been avoided. What is clear to me is that those who have appealed successfully have survived a process of peer review more searching than any postgraduate examination. All specialist practitioners are, by whatever route, there by right and deserve to be recognized as equals by everyone else on the list. Surely it is now time to welcome them as specialist colleagues and to move forward. Bitterness rarely does much good.

W. P. ROCK

Dear Sir,

We would like to support the views expressed in your journal's Editorial of June 2002 (Vol 29, p. 81) concerning the lack of training numbers restricting the number of training places available. In conjunction with colleagues in local district general hospitals we would be prepared to train more orthodontists, but we cannot do so because we have insufficient National Training Numbers (NTN). It is not possible to accept dentists for training without an NTN as they would not be able to obtain a CCST and get on the specialist list at the completion of training.

We appreciate the need to restrict the number of FTNs, because these are linked to the projected number of consultant posts available. However, we do not understand the restriction on the number of NTN, particularly for training in areas where there is a shortage of orthodontists. The UK has one of the highest ratios of orthodontist to 12-year-old children in the world. This has arisen over the years because of the mis-application of the medical model to our specialty.

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