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Dear Colleague:

Be one of the first to visit **ADA CE Online** (www.ada.org/goto/ceonline), our new distance-learning program designed to give dental professionals easy access to high-quality CE content. Recognizing that attending CE courses often requires travel and hotel expenses, in addition to time away from your office, the ADA is bringing CE directly to you. ADA CE Online is the perfect solution to access CE at your pace and your convenience. We encourage you to explore this new addition to ADA educational content. Click your way to a new learning experience—try the demo and get two units of CE credit.

In addition to traditional health history questions, the newly updated **ADA Health History Form** (S500) asks questions related to use of newer medications. Those medications include diet drugs (such as phen-fen), intravenous bisphosphonates (such as Zometa®) for treatment of skeletal complications resulting from metastatic cancer and other disorders, and alendronates (such as Fosamax®). The revised Health History Form also is user-friendly. It asks easy-to-understand questions and offers sufficient space for answers. To order visit the **ADA Catalog** (www.adacatalog.org). Packs of 100 are \$6.50 for members and \$9.75 for others.

Although the dental marketplace doesn't move as quickly or as precipitously as the equity market, it's important for dentists and dental societies to have some general measures of the economic state of the dental marketplace. So we've developed an **ADA Dental Market Index** we'll publish quarterly that will be computed from financial data supplied by a panel of general dentists nationwide. We hope economic trends may be detectable from observations of this Index, much as the Dow Jones Industrial Average does for the equity markets. The panel will report four simple financial statistics each quarter to be used to compute the Index. The Index's value will be determined by the size and distribution of the reporting Panel. We hope to have this project under way during the first quarter of 2007.

Working with the ADA Council on Communications, we launched a series of [podcasts](#) last month. The ADA Podcasts are in all major podcast directories, including iTunes, Odeo, Podfeed.net and others. The ADA's podcast feed is managed by Feedburner, the world's largest feed management provider. Feedburner helps us promote and deliver the ADA Podcast Network, as well as provide statistics on subscriptions, reach and hits. We'll monitor visits to the site to help us decide whether to continue the program next year.

See the August *JADA* for newly developed guidelines for managing patients on oral **bisphosphonate therapy**. The relationship between bisphosphonates and osteonecrosis of the jaw has drawn recent media interest. See [ADA.org](#) for a full array of resources on this issue.

The EPA issued its long-awaited "**Roadmap for Mercury**" last month. The Roadmap outlines in general terms EPA's proposed approaches to assess and act on mercury in the environment. Most of the Roadmap deals with air and other non-dental sources of mercury, but contributions of mercury in dental office wastewater are mentioned, as are separators as an example of an available control technology. The Roadmap doesn't present new information or outline new approaches that could affect dentistry but does illustrate the continuing focus on all things mercury-related by environmental regulators. A copy of the Roadmap is on EPA's [Web site](#).

I'm pleased to report that a recent ADA **video news release** on dental grills has reached more than 8.2 million viewers through major outlets such as *CNN Headline News* and *MSNBC* in markets including New York, Los Angeles, Chicago, Philadelphia, San Francisco, Washington, D.C., and Atlanta. Information from the accompanying news release also appeared in major dailies, including *USA TODAY*, and was picked up by Reuters.

Dental "grillz" were in the news recently for other reasons as well. Recent news clips documented a Lake Worth, FL, jewelry shop being shut down by sheriff's deputies after an undercover sting. Detectives said merchants were acting as dentists and using unsterilized tools to make and adjust grills and gold caps. See [ADA.org](#) for more information on grills.

Since the launch of the **En Español** section on [ADA.org](#), we've had 28,562 visits, 75% from outside the United States. Visits are on the rise each month since its launch. Eighteen percent of visits are from Canada and Mexico, 32% from South America and 17% from Western Europe.

We're asking House members to cosponsor the **Child Nutrition Promotion and School Lunch Protection Act**. Introduced in April by Rep. Lynn Woolsey (D-CA), the bill would amend the Child Nutrition Act of 1966 by revising the definition of "food of minimal nutritional value," taking into

account new nutritional research. As a condition for federal funding of school lunch and breakfast programs, schools can't sell foods of minimal nutritional value where school meals are sold or eaten. The bill would extend federal standards to all foods sold on school campuses, including items sold through vending machines. Further, the bill would require HHS to "consider the recommendations of authoritative scientific organizations and evidence concerning the relationship between diet and health." The ADA endorses the House bill and its Senate counterpart. There currently are 24 cosponsors of the House version, but only four Republicans.

The ADA and Colgate are again co-sponsoring "**Save the World from Cavities**," a consumer campaign to raise awareness about the importance of cavity prevention and to encourage dental visits by children. From October 2006 through June 2007, children will be able to get a special "Save the World from Cavities" form from retail outlets, the Internet or participating dental offices, which they can get stamped at their next visit. The form goes to Colgate (with a proof of purchase from any Colgate toothpaste or toothbrush), and the child gets a free battery-powered toothbrush. Colgate will make a "Save the World from Cavities" Kit available online (www.colgateprofessional.com). The free kit includes an easel with tear pad containing 50 "Save the World from Cavities" forms for office display. A bilingual version of these materials will be provided to members of the Hispanic Dental Association. A free-standing insert will be placed in newspapers in late August, and a bilingual version will run in selected markets.

ADA staff recently met with CMS officials to discuss concerns and points of interest about the agency's desire to expand the role of "**pay for performance**." Pay for performance, or P4P, is a generic term for provider payment methodologies that provide financial incentives to those who meet evidence-based performance criteria in clinical care. The federal government is actively investigating implementation of P4P programs for Medicare and Medicaid. This was strictly a preliminary meeting to ensure the ADA has input before the agency develops its position. The ADA has taken no official position on the issues affecting P4P but anticipates bringing proposed policy to the 2006 House.

The National Maternal and Child Oral Health Resource Center (OHRC) recently published a new policy brief to assist professionals working to improve oral health services for children and adolescents with **special health care needs**. "Promoting the Oral Health of Children with Special Health Care Needs—In Support of the National Agenda" provides suggestions for oral health promotion activities and addresses six critical indicators of a comprehensive system of care identified by the Maternal and Child Health Bureau. The brief is on [OHRC's Web site](#). OHRC also has posted an online curriculum to help health professionals deliver dental care to children with special needs. The web-based curriculum also is on [OHRC's Web site](#).

The ADA is working with organizers of the **National Bone Health Campaign** to implement a national, multi-year effort promoting bone health in girls 9 to 12 years old. The project's goal is to teach girls the importance of healthy habits that can reduce the risk of developing osteoporosis later in life. The campaign itself will target both young girls and adults who influence them, including parents, teachers, coaches, youth group leaders and health care professionals. The campaign is funded by the CDC, HHS's Office of Women's Health and the National Osteoporosis Foundation.

As expected, the governor of Rhode Island signed **amalgam separator** legislation, making the state the seventh to require separators. In California, a carry-over bill from last year that originally called for amalgam separators was substantially rewritten in June, and all provisions related to dentistry were removed.

A new Louisiana **mercury-reduction** law explicitly states that amalgam isn't subject to phase-out requirements. Amended legislation includes the exemption after the Louisiana Dental Assn. raised concerns. Another provision of the new law requires state dental insurance contracts to grant equal coverage for non-amalgam and amalgam fillings at no additional cost to state employees. In other Louisiana news, state law now allows hygienists to work under general supervision of a dentist in dental offices. General supervision had been permitted only in public facilities.

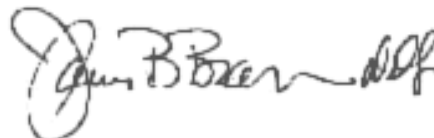
The Indianapolis Star recently reported that the city will be the test market for Taboka, a new spitless, smokeless **tobacco product** from Philip Morris. Indiana ranks second to Kentucky in smoking frequency but has a smoking ban in most restaurants and public places. Small packets of Taboka are placed in the mouth, where chemicals that satisfy nicotine cravings are absorbed. The product's supporters say it reduces tobacco-related disease associated with cigarettes 98%, but the American Lung Assn. says smokeless tobacco causes oral cancers, gingivitis and gum disease. Nancy Turner, ALA head in Indiana, said she fears the product could "replace one deadly habit with another." The Indiana Dental Assn. will use the opportunity to communicate the dangers of oral cancer.

Finally, don't miss the 2006 ADA **Annual Session**. Registration continues to exceed all prior meetings, already at 20,000 with 11 weeks to go. Our quick and easy online registration system features several helpful planning tools, including an online CE search by speaker, topic and day, and an exhibitor search. We're also implementing new planning tools to make your Annual Session experience even more valuable. Member dentists and dental students attending the meeting are invited to participate in the launch of the online ADA Community Network, a great way to contact old friends, make an associateship connection, meet a new mentor or network with others who have similar interests. Also, by the end of September we'll post highlights from the 2006 Official Guide, including program room assignments, program information and helpful maps. All attendees are encouraged to lock into CE programs before the Sept. 22 deadline. We look forward to a fantastic event!

Sincerely,



Robert M. Brandjord, DDS, president



James B. Bramson, DDS, executive director

ADA. Update

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