

Enough SAID

President's Message

By Carolyn Fetter

What will a SAID Virtual Meeting Look Like?

By now, most of you have heard that due to COVID-19 concerns, SAID's annual session will be a virtual one. It's fair to ask, "what will the SAID version of this look like"?

Well, most of us now have had some experience with Zoom (or other video conferencing) to see the grandkids, attend a virtual birthday party, or to participate in a meeting. When the number of attendees is small enough, it can feel like an in-person event. But once the number of attendees starts to rise, the potential for chaos increases, too. That's why many conferences have a format where you can see what is being presented, and you can ask questions via a chat box (attendees type in questions that a moderator, often off-screen, reads to the presenter who answers when it is convenient). But the presenter cannot see the attendees, and attendees cannot see each other. It can feel a bit sterile.



For SAID members who treasure the time spent together, this may be less than satisfactory. Not to worry! Your Executive Committee has plans for a different concept of virtual meeting that will provide a taste of the camaraderie SAID is known for.

Here's the plan: Before our meeting, we will pre-record our speakers presenting their material. That recording is what will become the content of our later presentations in November. At the later meeting, there will be breakout "rooms" where randomly-assigned attendees in manageable group sizes will see the pre-recorded material and have the opportunity to discuss the presentation with each other and to develop a list of questions. The attendees will be able to see each other and speak directly to the group (no chat box!). The speakers will either be available to answer the questions in the Zoom breakouts, and/or (depending on speaker availability and preference) will answer the lists of questions when all attendees are back in a single session. We think this will give us the opportunity to be with each other and to exchange ideas, as well as to gain valuable insights from the experts on each topic in an engaging and unique way. Just what you expect of SAID!

The Scientific Program is going to be "spot on", with excellent speakers who have graciously agreed to transition with us to this new COVID-appropriate way of presenting. We have crafted the agenda to speak to the topics you have requested, with a focus on the special populations that you treat. Stay tuned for details!

NEXT YEAR: Since many have asked about this, it is worth mentioning that the SAID Annual Session will be held at the Omni Hotel in Richmond, Virginia in 2021. We are working with the hotel to establish dates.

Carolyn Fetter
SAID President 2020

Be with us as we learn from each other in a virtual format, from Wednesday November 4th through Friday November 6th, 2020.

(With gratitude to the hardworking 2020 Executive Committee: Mary Tepper, Immediate Past President; Maria Lubak, President-Elect; Frances McClure, Treasurer; Ellen Anderson, Secretary and our Members At Large: Betsy White, George Johnson, and David Itzkoff)



Might be fun to select a background from your home state or city and use it when you are visible to others on Zoom; instructions to follow!



Good Tip for any Virtual Meeting!!



From your PEARLS Moderator, Dr. David Itzkoff:

As you know, I have had the honor for the last few years of moderating the PEARLS session. I am asking each of you to please consider doing a Pearl session. They are usually less than 5 minutes and involve a product, an issue, a concern, a dilemma (clinical or otherwise), etc. that you think the group will benefit from, or that you would like to discuss with our wonderful SAID members to gain their input.

These individual sessions will be recorded and discussed as part of our virtual meeting. Pearls will not succeed without your participation. Please contact me at any of the ways listed below to volunteer or if you have any questions. I will be in touch later to work out the details.

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“Good Thoughts, Good Words, Good Deeds” as SAID Convened in Charleston, South Carolina - 2019

By Bob Leonetti



SAID arrived in Charleston, SC on Wednesday October 23rd for its 54th Annual Session. The Executive Board strategic planning meeting kicked off the proceedings on Wednesday evening. President Mary Tepper of South Carolina welcomed everyone to her home state with a lively meeting which included reports on the state of the organization, discussion of next year's session and the website. It also incorporated for the first time, CE credit for an experiential presentation on communication & listening skills. It was a hit and it is hoped that similar presentations will be included in future meetings. Informal gatherings followed as members became reacquainted and began to experience Charleston Hospitality. Thursday morning, the plenary session was called to order by Dr. Tepper. Her theme for the meeting was a quote featured in the movie Bohemian Rhapsody. “Good thoughts, good words, good deeds” are the guiding principles of Zoroastrianism, and very appropriate for our organization and our times. Dr. Tepper warmly welcomed SAID members from all over the country as we gathered to discuss dental care for vulnerable populations.



First up was an excellent presentation by Brad Neville, DDS, Director of the Oral Pathology Division at MUSC. It was brimming with information regarding pathologic oral lesions along with new diagnostic and treatment modalities. After a short break where attendees got a chance to visit with our exhibitors, Barbie Vartanian spoke to the group about Project Accessible Oral Health (PAOH) where she serves as Director.



Lunch followed and with it a chance to rekindle old friendships and make new ones; also a chance to speak with exhibitors.



Following the lunch break, the group had to endure a lecture on “Opioid Use and Addiction” presented by my wife & me. Seriously, we enjoyed putting the presentation together along with the give and take we received from the meeting’s attendees. First Dr. Joyce Leonetti gave a fascinating look into the neurobiology of addiction and what motivates, guides, and controls the choices we as human beings make. Dr. Joyce is double board certified in Occupational & Preventive Medicine along with Family Practice and a member of the volunteer faculty at Rowan University’s School of Osteopathic Medicine. I followed with a discussion of Dentistry’s role in the history of the ongoing Opioid Epidemic in the United States along with the ways we as a profession can help end this crisis.



A break followed to allow time to meet with the sponsors without whom the meeting would be impossible. This year's sponsors were especially generous and supportive. Please see the next page, and please patronize these organizations who support us!

We were pleased to welcome students from Medical University of South Carolina, who joined us courtesy of a WITH grant, and SAID members who generously sponsored them. We hope to do more of this in the future.



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After a break, Dr. David Itzkoff took the podium to moderate SAID's annual group forum entitled "Pearls, Perils and Parables". A staple of SAID meetings, "Pearls" allows members to present products, techniques, stories, cases, etc. that have made an impact on their practice. These are short mini-presentations where SAID members do what they do best and enjoy most-interact regarding the things that make a difference in their lives and practices. Dr. Itzkoff, a two-time president of SAID has taken over this annual tradition and made it his own, keeping the proceedings lively & relevant.



The meeting then adjourned to prepare for the President's Reception. Dr. Tepper hosted a reception in a private area of the historic hotel's lobby. As always, it was enjoyable to gather in a social setting to exchange ideas, laughs and door prizes from the attendees' home states. Dr. Tepper has been long been associated with the President's Reception, making food, serving drinks, and making sure everyone left with a suitable door prize. This was Mary's second time as President, it was her second opportunity to serve as official hostess.

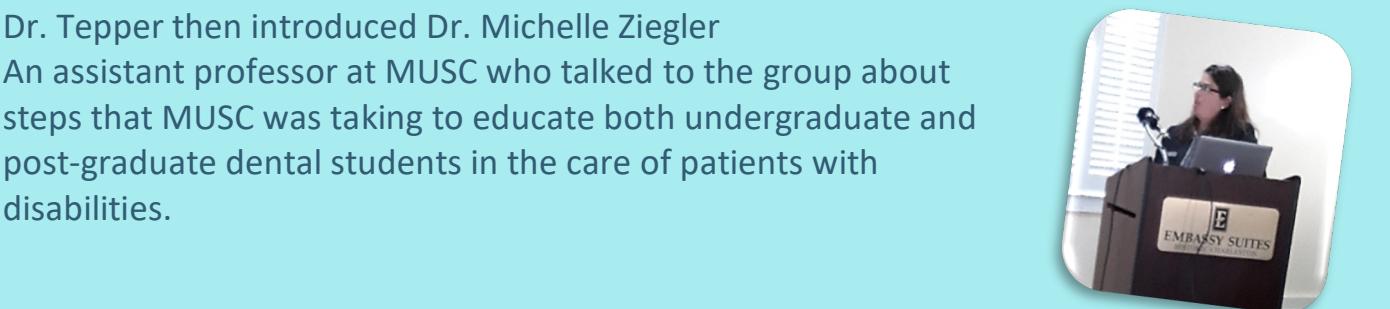


Morning came too rapidly and with it, the Friday scientific session. The day began with the SAID business meeting. The slate of officers for 2020-2021 was approved along with the site for next year's meeting. The SAID officers for 2020-2021 are Carolyn Fetter, President; Maria Lubak, Vice-President; Ellen Anderson, Secretary and Frances McClure returning as Treasurer. Incoming President Carolyn Fetter thanked current President Mary Tepper for her hard work this year. Richmond, VA was to be the site of the 55th Annual Session. Unfortunately, Covid19 had other plans. President Carolyn Fetter and her executive committee have wisely decided on a virtual plan for 2020. Richmond will have to wait until 2021.

This year's meeting featured a first for SAID as Dr. Sarandeep S. Huja, Dean of the James B. Edwards College of Dental Medicine at MUSC addressed the group, and spoke of the challenges of treating patients with disabilities. He praised SAID for its dedication to meeting those challenges. This recognition of SAID's involvement in care for special needs patients from such a distinguished member of the dental community was greatly appreciated.

Dr. Tepper presented Dr. Huja with a platter inscribed with the words, "Good Thoughts, Good Words, Good Deeds" as she thanked him for taking the time to speak with the group.

Dr. Tepper then introduced Dr. Michelle Ziegler An assistant professor at MUSC who talked to the group about steps that MUSC was taking to educate both undergraduate and post-graduate dental students in the care of patients with disabilities.



Next up was the team of Dr. Elizabeth Pilcher & Joan McLaren who spoke to the group about an advanced directory of dentists involved in care for patients with disabilities. It is an MUSC project known as SANDS which stands for Special Adult Network of Dentists. It was thought that this network could increase access to care for vulnerable patients in South Carolina – and possibly in a wider sphere.



Dr. Tepper then introduced Dr. Chris Veschusio & Dr. Mary Kenyon Jones who shared a variety of topics designed to help participants care for vulnerable patients. Both are active in DHEC and revealed excellent sources for information valuable to SAID members.

Next came the cherished SAID tradition of Literature Review where our distinguished presenters scour all of the previous year's literature dealing with dental care for patients with disabilities, review it, catalogue it and choose the articles felt to be of most interest to SAID members. This difficult task has been handled by a variety of SAID members throughout the years but none more capable than Drs. Doug Veazy & Mannie Levi. Each year, members are amazed at how a mountain of literature can be distilled into manageable morsels by Doug & Mannie.



The final presentation was a fascinating look into the world of forensic dentistry given by SAID member and Forensic Dentist Dr. Paul Kovalski. He took the members on a journey through his interesting and high-profile cases, cautioning them about the importance of scrupulous record keeping especially with at-risk patients.



Dr Tepper then wrapped up the meeting by inviting SAID members to re-convene in 2020 & exhorting them to live the theme of the 2019 Annual Session-



"Good thoughts, good words, good deeds".



Dentistry in the Time of Corona

By Bob Leonetti



Part I

"Here I sit, confined for the most part to my house for the past 5 weeks, each day taking on a tranquil tedious sameness. It's difficult to even distinguish one day from the next. I have always worked long hours, even after my practice sold; two jobs; early mornings; responsibility; routine. And now abruptly sleeping-in has become the norm, mealtimes & activities flexible even optional. And why? Because of a virus, something not even technically alive, that is spreading faster than a forest fire on a dry August day. It is barely 100 microns in size and has changed the world."

Part II

As I penned these words in mid-April, I didn't honestly believe them. I thought that if the nation behaved itself, worked together & trusted in science, we would be able to return to practice & live somewhat as we had in the past. As anxious & depressed as I was, I believed that the "new normal" wouldn't look altogether different from the old. It is now mid-July and a lot has transpired. I now believe that the world and with it, Dentistry have changed forever. Shortly after I wrote those words, I immersed myself in a "back to work plan" for my free clinic. I tabled this article in favor of research about Covid19, a quest for PPE, and an examination of applicable guidelines for practicing in a not-so-brave new world. What I found was a vast amount of information much of it confusing and some of it unequivocally contradictory. As I delved deeper, a spectrum of strategies emerged. Some were extremely restrictive; some not so different from what we'd been doing for decades. What I came up with was somewhere in between but much closer to restrictive than status quo. Phrases like bi-polar ionization, N-95 respirators, extra-oral evacuation appeared in my plan, things that would never have entered my mind when I graduated from Dental School. I have never understood the phrase, "I didn't sign up for this" quite like I do now. When I started my career, I was a traditional "wet-fingered" dentist in the most literal sense using gloves only for Oral Surgery. Wearing gloves for routine operative dentistry was looked at somewhat suspiciously. Masks were for surgeons and sick people. How things have changed since 1978. No dentist since the late 80's works without wearing gloves and a mask. Long sleeve gowns over scrubs or street clothes are required by OSHA. Covid19 has introduced us to more changes. In the 70's "respirator" was another term for "ventilator" a machine that provides breathing assistance to those who cannot breathe for themselves. Today, the CDC guidelines include a recommendation that respirator style masks (N95 or KN95) be worn by all dental personnel in cases where an aerosol can be produced. So my plan included NIOSH approved

N95 respirators for dentists, dental assistants, and dental hygienists. It required ionization or UV light units to be placed in the HVAC lines along with individual HEPA filtration or UV light Air Purification units in each room where aerosols are produced (operatories & lab). Also included were many “work practice controls”; changes in the way we do business. Questioning patients about their recent travel & their current wellness had to precede each appointment along with thermal temperature screening when the patient arrived. A patient classified as “high risk” precipitated an evaluation of risk versus benefit & a conversation about possible postponement of “elective procedures”.

I put all of my thoughts and research together into one document; a plan for a two-phased opening; non-aerosol procedures as soon as the PPE came in but waiting until the HVAC work was complete and the air purifiers and extraoral evacuators were present, before returning to more regular operations. So the pursuit of PPE began. Hours and hours online and the telephone, many with vendors of whom I'd had no prior knowledge, often produced no results. It started to appear that the best laid plans would be dashed on the rocks of unavailability, exorbitant prices, and limited quantity deals. Slowly, however, supplies of PPE started to roll in. Unfortunately, the HVAC work was not yet even begun, and the air-purification equipment was being held up administratively on our end. The most serious issue, however, was that neither my hygienist nor my dental assistant felt comfortable returning at this time even if only non-aerosol producing procedures were being done. I contacted a foreign dental graduate who was volunteering for us as she applied to dental school in the US. She agreed to assist me until the other personnel were ready to return. And so, after 4 long months, back to work we went; it was just Removable Prosthodontics & triage of emergencies for the time being, but we were back. Piece of cake, right?? Not even close!



What I didn't fully grasp as I formulated my plan was the psychological and emotional toll that this Pandemic is inflicting and will most likely leave in its considerable wake. But exactly whom is being affected? A better question would be who isn't? A broad cross section of the general public are showing the strain of being “locked down”; of watching loved ones fall ill and die; of losing jobs; of being unable to afford life's necessities; of being forced into unfamiliar roles at work and at home; of seeing all of their familiar leisure activities diminished or cancelled; and many more. It should not then come as a surprise that health care workers are exhibiting similar or even greater emotional distress.

As I walked into our clinic for the first time in almost four months, I felt an odd sensation. As we prepared the clinic to receive patients, I didn't feel excited to be back; I didn't feel challenged as I did by a new procedure or technique. Nor did I feel that mild discontent I

sometimes do after a vacation. No, what I felt was dread! Would we be able to make all the planned changes? And would they be enough to keep us, the patients, and our families safe. Would I be up to the task? Would I get sick? How would I feel if a staff member or patient got sick? How would I feel if I brought Covid19 home to my wife? I was unprepared for these feelings. For forty plus years, I felt at-home and in-charge in a dental operatory. I knew whatever happened, I could handle it. Where was that feeling?

Changes complete, the following Wednesday we returned to action. I felt better once the first patient was in the chair. Other than some minor logistical problems the day went smoothly. It felt like dentistry. As we treated each new patient, my confidence returned & my anxiety lessened ever so slightly. The more patients I saw, the better I felt. I know that this is not the case with our frontline medical colleagues. With paramedics, EMT's, ER nurses & physicians, each new patient encounter increases the chances that they, too may become infected.

Dentistry, however, is a different animal. We have been on the frontlines of infection control since the 1980's. As different as we see things becoming, we can handle this if we apply the principles we have always employed. By doing what we already know how to do, we reduce the odds that we, our staff, our patients, or our loved ones will develop Covid19 as a result of something that happens on our watch.

THERE IS AN UNDERCURRENT OF ANXIETY THAT WILL ACCOMPANY OUR DAILY PRACTICE FOR A WHILE. IT'S A MUSHROOM CLOUD OF UNHAPPINESS THAT, WHILE NOT ALWAYS OBVIOUS IS THERE JUST UNDER THE RADAR – WAITING.

The psychological part will take more work & more time. There is an undercurrent of anxiety that will accompany our daily practice for a while. It's a mushroom cloud of unhappiness that, while not always obvious is there just under the radar waiting for us. This is what we have to battle as we return to full-time dental practice. And how we deal with it will determine the future of our profession. Do not despair, however. Things will improve. We have the tools. Most of us have partners/spouses to confide in. Let them in. Seek the company and support of colleagues and other non-dental friends. And don't be afraid to ask for professional help.

I'll close with a quote from our favorite TV show, "*Call the Midwife*", which tells the story of courageous nurse-midwives caring for the poorest section of London in the fifties and sixties.

"Welcome the darkness, embrace it as a canopy from which stars can hang. For there are always stars when we are where we ought to be, amongst the faces we love best. Each with our place, each with our purpose, as fixed and familiar as the constellations. The darkness is beautiful for how else can we shine?"



Dr. Bob Leonetti presented with McIver Award



The McIver Award is presented to Dentists who have distinguished themselves in the field of Dentistry for Patients with Disabilities while making significant contributions toward the advancement of the mission of SAID which is "to improve the oral health of people with disabilities through service, education, and advocacy.

Dr. Leonetti has been a member of SAID since 1994 & has served SAID as President, Scientific Program Coordinator, and web liaison. He has cared for special needs patients since 1983 as Chief of Dental Services at a NJ Psychiatric Hospital and as Acting Director of Dental services for the NJ Dept of Human Services. He is a DECOD Fellow & continues to care for vulnerable patients at a free clinic for the homeless in Camden NJ.

He is a part of the McIver award committee and after they had decided on someone else, the other two members of the committee secretly overruled him and surprised him with the award.