



European Regional Organisation of
the Fédération dentaire internationale



**EUROPEAN REGIONAL ORGANISATION
OF THE FDI (ERO)
Minutes of the plenary session held on
17th/18th April 2009
in Rome, Italy**

A Welcome

Patrick Hescot opens the session and thanks Mimmo Andreoni and his team for their efforts in organising this plenary session. Meetings like this should not only serve to deliver important speeches but to cultivate friendship and conviviality. A special welcome goes to the representatives from the FDI, President Burton Conrod, Treasurer T.C. Wong, Executive Director David Alexander, the former council member David Thomson and the two representatives from the European Association of Dental Students.

Giovanni Leonardi, General Director of the Health Ministry, addresses his greetings and welcome to all delegates from the European dental associations here in Rome.

It is always a highlight to attend an ERO plenary session, declares the FDI president Burton Conrod. He expresses his sincere condolences to the victims of the earthquake and all Italian citizens.

Burton Conrod then introduces the FDI, presents its visions and missions as a leader in global health promotion. The federation's different activities consist of global health and tobacco control advocacy, CE programs, various publications and the organisation of the annual world dental congress. Its projects and priorities include a Global Caries Initiative, the Rio Caries Conference, which is a joint project with ABO in collaboration with IADR and IFDEA, and the Live.Learn.Laugh project for oral health promotion all around the world. With its scientific programs, exhibition, and many other events, the FDI is advancing dentistry all over the world. A highlight will be the Singapore congress in September.

Burton Conrod also mentions the financial situation of the FDI. The correspondence between the ERO and the FDI is known to everybody. It has been a difficult year, but he is confident that with the help of the new manager, finances will stabilize and improve again. The FDI president reminds the members of their responsibilities, which consist (among other things) in appointing delegates to the General Assembly, providing the FDI with information, transferring information from the FDI to their members, and promoting the congress. He once again expresses his thanks for the hospitality received here in Rome and for sending the best members to the FDI.

B Presentation of ANDI/AIO

Patrick Hescot is very pleased that the two Italian dental associations united to organise this session.

Roberto Callioni, president of ANDI (Associazione nazionale dentisti italiani), offers a warm welcome to all participants, who are guests in Italy in sad times. He is grateful for all the expressions of sympathy for the victims of the earthquake that devastated parts of the "Abruzzi" only a couple of days ago. He asks for a minute of silence in memory of the dead.

The financial crisis has not spared dentists, continues Roberto Callioni. As long as the patient lives in a good economic situation he cares about oral health; if economics are going bad, he cares a lot less. It is

President: Dr. P. Hescot (France) • President-Elect: Dr. Gerhard Seeberger (Italy) • Secretary General: Dr. Ph. Rusca (Switzerland) •
Boardmembers: Dr. Bartolomeo Griffa (Italy) • Dr. Vladimir Sadovski (Russia)

ERO-Sekretariat, Monika Lang, P.O. Box 664, CH-3000 Bern 7, Tel. ++41 31 311 74 71/Fax ++41 311 74 70/mail: ero-sekretariat@sso.ch

Bank account: UBS AG, 3011 Bern, Switzerland - Account No. 0235-FJ146187.1, IBAN CH 98 0023 52 35 FJ1461871, in the name of Schweizerische Zahnärzte
Gesellschaft SSO, Postfach, CH-3000 Bern 7



our goal to ensure oral health even in times of economic crisis. We need development; we need models that are adapted to the present situation and meet the needs of the population, which finds itself in times of transition. We must make the right choices. Everybody is entitled to a smile. And we must be able to give more room to young people, to our colleagues, to women; not only in the professional sphere, but also outside. It cannot be denied that there is an increasing feminisation of our profession. Last but not least, we must also find new global ways of education.

Salvatore Rampulla, president of AIO (Associazione italiana odontoiatri), explains that the reason for Italy having two dental associations lies in history. 25 years ago, European directives were established and implemented, the first courses of dental studies started, and the first dental diplomas were issued. Before this you always had to earn a medical degree first. At the beginning the new diploma was not much valued. In 1985, this course of study was recognized by a new law. It became a success and the new association was founded at this time. We started to make people aware of the difference between a dentist and a dental technician. AIO has been standing up for this ever since. Salvatore Rampulla thanks the ERO and the FDI for their support. Both Italian associations have grown, there has been an opening and they have found ways of agreeing on common values.

AIO attaches much importance to communication with the public and with patients. People must get used to going to the dentist, always, here and not somewhere else. Communication starts in the dental practice. AIO is also dedicated to prevention. Prevention is not always obvious and is not obvious to everybody; not even to politicians. It is our objective to give the patient the best treatment possible.

C Standard agenda of the business meeting

C.1 Roll call

1.1 Establishment of the quorum

The secretary general, Philippe Rusca, greets all participants; it is a great pleasure to see many here in Rome. He calls all delegates and alternates by name. There are 54 out of 77 delegates present; this means we have the quorum.

1.2 New members - Nothing to report

C.2 Approval of the agenda

The agenda is approved.

C.3 Approval of the minutes of Stockholm

Everybody has received the minutes. There are no requests for amendments. The minutes are thus adopted.

C.4 Reports of the Board

4.1 President / FDI Councillor

Patrick Hescot remembers: 5 years ago at the plenary session in Bucharest, the ERO was suffering. Today the ERO has recovered and is doing well again. As Burton Conrod mentioned, the ERO has quite a bit of influence in the FDI. This is not the work of a couple of men; it is the work of everybody.



We still fight caries, but nevertheless things have changed. The dentist has a social task; he has to assume responsibility not only in his personal life but for the entire population. The oral health of elderly people is becoming more and more important since people are getting older. The mouth, the teeth play an important role in life. You need them to speak, to eat, to smile. The dentist is an important piece in the puzzle of general health. We have to be aware of that and to make the population and the authorities recognize it too. The ERO board supports every effort to strengthen and to pass on this conviction. But, of course, every dentist has to start doing this in his own practice.

Patrick Hescot thanks all chairpersons for their efforts and the good work they have accomplished.

He emphasizes the importance of being one team (ERO and FDI). He would like to continue this way. He expresses his thanks again for the large attendance and wishes everybody a successful meeting.

4.2 President-elect

Gerhard Seeberger is also very pleased to welcome so many delegates in Rome; there has never been such a significant presence. In order not to repeat what the president has already said he reports about his personal activities. He was glad to visit various countries and to see what is happening there regarding prevention. The global crisis has also brought us more activity; there have been several initiatives with different goals. In almost every country he has noticed great interest in continuing education; this is a very positive aspect. We probably need a little bit of time and also more efforts to determine quality standards for our profession. He is convinced that we will be able to establish some sort of quality "definition". Regarding the working groups he is supervising, he underlines some excellent results in the WG on prevention. Much has been done and there is still a lot to do.

4.3 Secretary general

Philippe Rusca thanks Monika Lang for her work. The secretariat is functioning well. Since all correspondence is sent out by e-mail, we need the information that the messages have been received. He once again invites the delegates and the national associations to inform the secretariat about changes of persons in charge and of e-mail addresses.

He refers to a problem that has come up in several member associations; it is about requests for the affiliation of new dental associations. Philippe Rusca points out that the ERO strictly follows the FDI rules that request the establishment of a national committee in countries where there are more than one dental association that wish to adhere to ERO/FDI. He further remarks that the ERO cannot interfere in internal conflicts. We are willing to give support and information, but we cannot take part in conflicts between dental associations.

Dan Grigorescu refers to the two files (blue and yellow) which he has distributed and which describe the problems that the Romanian Dental Association of Private Practitioners is facing at the moment. He is aware that the national association plays an important role; that is why he would like once again to point out that his association is the official representative in the ERO, the FDI and the CED. He appeals to all delegates present to decide on a resolution which will help to clarify the situation in his country.

Philippe Rusca promises to consider these files, to study and then to comment them.

4.4 Members of the Board

Nothing to report



C.5 Member countries

5.1 National reports

Gerhard Seeberger gives a summary of the 18 national reports that were sent to the secretariat. Every country has reported a strong request for continuing education and thus an increase in CE activities; there is an interest in public health actions as well. The global economic crisis has not spared the dental profession and the crisis has most probably not yet reached its lowest point. Therefore there must be plans to guarantee dental care for the socially weak. Another aspect that has been mentioned is that in many countries the increase of the population is much smaller than the increase of the number of dentists. Switzerland is reporting a considerable increase of foreign dental diplomas which were recognised by the health authority. This number is equal to more than 41% of all dentists working in Switzerland. Of course not all have opened their practices in Switzerland and, in regions where there were a lot of newcomers, some are already running into insolvency problems. Spain apparently has a very positive dentist-to-patient ratio, and Slovenia is the only country where the number of dental students has increased by 50% (from 40 to 60) in order to guarantee enough dentists in the future; they are also offering jobs to foreign dentists. Slovakia plans an obligatory membership for all registered dentists. Portugal is also reporting a very disturbing problem: the growing number of tooth-whitening treatments performed outside of dental surgeries and the effect which such treatments can have on general health. In Bulgaria, a National programme for the prevention of oral diseases in children aged 0-18 has been drafted. In Austria, apparently there are changes in the social insurance system. Gerhard Seeberger has picked out just a few things from the reports. All of them can be read on/downloaded from the ERO website.

Stefaan Hanson asks if there is an obligation of continuing education in the ERO countries. Belgium, Bulgaria, Denmark, Great Britain, France, Romania, Italy, Russia, Croatia, Germany, Bosnia and Herzegovina, Armenia and Switzerland answer in the affirmative. There is no obligation in Spain, Israel Greece, Turkey and Austria. Wolfgang Doneus at this point explains that the Austrian law states an obligation, but it is not defined by credits or hours.

Nico Diederich explains that the situation in Luxembourg is similar to Austria but on a voluntary basis. Bulgaria does not have credits, declares Nikolai Sharkov, but recognizes the attendance certificates from other countries. They are at the moment trying to find the right mechanism to handle the control of continuing education and to persuade dentists to receive credits.

Barbara Bergmann-Krauss refers to the speech of Roberto Callioni who mentioned the extension of the studies in dentistry. Bartolomeo Griffa confirms that Italy has extended the dental studies from 5 to 6 years; mostly in the part "training on the patient".

Francisco Rodriguez Lozano refers to the economic crisis which is affecting the dental profession as well. People who try to reduce dental care costs are tempted to turn to dental technicians. Even if they are considered a medical profession, they are still not allowed to work directly in the patient's mouth. That is why people should avoid going directly to the dental technician. Francisco Rodriguez Lozano wants to know the position of the FDI/ERO on the topic. Stefaan Hanson thinks that this is not really an effect of the crisis; this problem existed long before, as with prosthodontists.

There is no need to set up an ERO declaration regarding this problem, because such a declaration has already been presented and adopted in Dubai by the FDI. Since the ERO is part of the FDI, we might accept it as well as an ERO declaration. No one opposes.



C.6 Working groups

6.1 Liberal Dental Practice in Europe

Due to difficulties in Romania, Voicu David has - of his own free will - given up the position of chairman of this working group, explains Ernst-Jürgen Otterbach. The WG had to be restructured and it has been decided that he himself and Philippe Rusca will lead this group. The new theme “selective contracts with publicly funded or private insurance companies“ was already defined in Stockholm. This is a very important subject, because any kind of dependency may influence liberal practice and freedom of decision regarding therapy – including financial dependency. Lately, there have been attempts to centralize and put under state-control duties that until now have been taken care of by our profession. This worries us. Health is something that is altogether the government’s responsibility. The government should concentrate on providing a framework for a health care accessible to everybody. Personal responsibility should be given priority over national assistance; solidarity is not equal to social welfare. State-controlled systems impede competition, innovation and medical progress; instead it favours centralization over more effective regionalization, destroys liberal practice and draws off funds, which would be needed for treatments, to nurture an inflated bureaucracy. In many places social health systems have proven to be ineffective. They lead to a rationed standardized low-level medicine. We must be aware of this when we think about selective contracts. We must absolutely avoid becoming too dependent. Ernst-Jürgen Otterbach thinks that the ERO could do even more in the field of health care policy than in the past. If our health systems become increasingly based on state-ruled insurance companies, our liberal practice is in danger. There is a risk that these attempts to influence the health systems will sooner or later show effects in the non-EU countries as well. It is therefore very important to promote and support frameworks that allow the liberal practice of our profession and limit as much as possible the influence of the government and state- funded insurance companies. This is one of the tasks of this WG.

As announced in Stockholm, a questionnaire has been prepared and it will soon be distributed. Ernst-Jürgen Otterbach would be delighted if all could answer this questionnaire and so enable the WG to make an evaluation before the next meeting.

There are no questions regarding this point. Ernst-Jürgen Otterbach mentions that the WG discussed another problem which has arisen in several countries: the age-related limitation of the active working life of a dentist. We would like to find out in which countries of the ERO such a limitation exists.

This topic has been discussed in Luxembourg just as it has in Germany, explains Nico Diederich. There was not much talk about it for a while, but now - with the upcoming elections - the discussion has resurfaced.

6.2 ERO Parity

The working group “parity” was founded in 2004 with the mission to collect and compare information to analyse the situation of dental practices and to examine the expenditure and income of dentists in Europe. After 5 years of activity the WG parity has fulfilled its task, states Anna Lella. The first chairwoman of the WG was Simona Dianiskova and since 2007 Anna Lella has taken over this position. There were several meetings and the WG elaborated a number of questionnaires to compare dental practices in Europe. The analyses did not only concentrate on financial aspects. Difficulties namely occurred with the collection of data concerning dental income. The WG also analysed the structure of dental care in the different countries and the allocation of public funds. The results showed that the qualifications of European dentists are on the same level. Furthermore, the dental materials and



techniques used were found to be on a similar level, and the education of dental practitioners and the way the profession is practised are also more or less similar everywhere. The most significant differences are observed in relation to economic factors (differences in remuneration of dentists, in prices of dental services). Anna Lella is of the opinion that the situation of the dental profession in Central European countries has been well analysed recently. The migration of dentists from the new European countries is not as huge as had been expected; whereas the movement of patients (so called “dental tourism”) is more visible. Patients are quite mobile in search for dental care that is cheaper, but still of high quality. Anna Lella further refers to the “EU manual of dental practice”, where many details regarding the different countries are listed. It seems that the work of the WG parity will not lead to any further results. Anna Lella therefore proposes to dissolve it.

The members of the WG have considered establishing a new group that will concentrate on the relation between dental practitioners and university.

The Board has discussed this possibility, declares Patrick Hescot. Often there is quite a gap between university doctrine and professional reality. So it would be good to have a link between the two worlds and to have the current situation evaluated. The WG, with a modified composition of members, should tackle this task. Patrick Hescot asks for the opinion of the delegates on this matter.

Wolfgang Doneus has nothing to say against this proposal; he just suggests giving the WG an additional task which would be to analyse the situation in the different member countries regarding the one or two years of traineeship that are now required in many places after one has finished one’s studies and before starting one’s own practice or being employed in a clinic.

Edoardo Cavallé considers this is a fundamental task and proposes collaboration with the WG Dental Team.

This is certainly an interesting point, remarks Peter Engel. But he thinks that we are talking about two different subjects: Education and practice on the one hand and science and practice on the other hand. The WG should decide on which part they want to focus. Our request must be that the universities train qualified dentists. It is a moot point whether it makes sense to have a traineeship at university, when there is quite a lack of patients, even if this obligation exists in some countries. It is certainly important to watch the relation between science and practice closely. Science cannot be transferred one-to-one to the practice. As an example, a general practitioner cannot be forced to accomplish an endodontic treatment on one tooth in 4 hours as is requested by scientists. There must be some practical relevance.

Nikolai Sharkov mentions that the Bulgarian Dental Association has signed a contract with the medical universities in order to eliminate borderlines between the academic and the professional worlds.

In the UK, if a dentist, after graduation, wishes to work in a national health service, he has to work for one year on a training scheme, informs Stuart Johnston. This training is very useful, because it is a transition period where you learn to take over responsibility for your continuing and professional education.

Patrick Hescot proposes the creation of this new working group. All delegates agree.



6.3 ERO Enlargement

Bedros Yavru-Sakuk first expresses his feelings of sympathy to the Italian people and our colleagues. He also congratulates the organising committee for their united efforts to make this plenary successful. He refers to his report which is displayed on the website. His group succeeded in bringing 12 new countries into the ERO. They are very interested in the ERO activities and eager to get organized as modern dental associations. In order to facilitate relations and to have a better understanding of their conditions, it has been decided to visit the countries that are willing to receive an ERO delegation. For this purpose a schedule and a protocol have been established. The ERO delegation will meet with the representatives of the national dental associations, health ministries, dental universities and colleges. These visits will cause no financial burden to the ERO. Bedros Yavru-Sakuk expresses his thanks for the cooperation and support he has received.

Vladimir Sadovsky adds a small comment. Those countries, especially from Eastern Europe, which we put on our schedule for visiting, are very much in need of establishing a minimum safety standard. They do not need a minimum standard of quality. Many things such as infection control, filling materials, endodontics are still of very poor quality. It is important for us during our meetings with ministers and authorities to make them aware that dentistry in their countries is still quite below the European level of dentistry. Bedros Yavru-Sakuk's project is very important and Vladimir Sadovsky asks the delegates to help by volunteering visits from dentists from their countries.

Bedros Yavru-Sakuk underlines the need for more people in his working group and asks the delegates to provide him with names and contact details.

6.4 Prevention

Denis Bourgeois is here to present his WG, which consists of four members, to show what has been done so far, and to present future projects.

The 1st subject is the pursuit of the EGOHID project. It was started five years ago and has gone through three phases: the selection of indicators, their collection and, finally, the analysis and drawing up of an annual report regarding the health care system in the EU. Around 2.500 dentists, 40 university institutes and 10 health ministries as well as a majority of dental associations participated in the project. The documents are now at everyone's disposal on the internet. Now the feasibility of creating a European Oral Health Observatory must be examined. Denis Bourgeois quickly explains what this observatory would be about. Who could take care of it? Actually this observatory could stretch over all 6 regions of the FDI. The same study has already been conducted in Africa. We should now decide on how to proceed. If there are interested parties, a taskforce group would have to be created which would take care of the fundraising.

The 2nd subject is oral cancer. Denis Bourgeois reminds the delegates about the European conference on oral cancer, which will take place in Paris on 12th June. The preliminary program is now available. This conference will have a "double finality". Firstly, a protocol will be established which will provide the basis for the preparation of the world cancer day. Secondly, at the end of the conference, which will bring together a number of experts, recommendations will be formulated. These rather scientific recommendations shall be discussed in Singapore and transformed into political recommendations; we will have to decide on a resolution.



Perspectives – there are three topics; first, the scientific session of tomorrow on fluoride. It will enable us to work out a resolution within the WG, which will then be discussed in the plenary in Singapore. The working group will afterwards work on the theme of the year 2010 which is “systemic diseases and oral health” and then on a subject on “rare diseases and oral health”. The goal is to improve the oral health of the population. Denis Bourgeois reminds those who have not yet filled in the questionnaire on oral cancer to do so quickly.

Orlando Monteiro da Silva emphasizes the importance of this EGOHID project for our countries. He is convinced that some people can be found to do some lobby work and try to raise funds. It is important to support this project.

This project belongs to everybody and nobody, explains Patrick Hescot. It should be pushed forward as soon as possible. We will get back to it in Singapore. Anybody who is interested in contributing to this project should contact Denis Bourgeois. Patrick Hescot further informs the delegates that a sponsor for the European Oral cancer day has been found. The speakers' expenses will be covered by the French National Cancer Institute (INCa) and the French ministry of health. It has been said in this plenary that the positioning of our profession is important and this is a way of doing something. The first task regarding oral cancer is to explain, then comes secondary prevention and diagnosis, and third task is to care for those who suffer from cancer.

6.5 Quality Management

Gerhard Seeberger is a bit astonished about the new interest in this topic and invites everybody to join his WG. Quality is extremely important in the dental practice. He reports on a very good meeting that turned out to be an efficient brainstorming session.

“Going back to what has already been shown in Stockholm, after the evaluation of the questionnaire that we had sent out, I would like to focus again on how heterogeneous the approaches to quality are. There are four groups, including those where quality is a legal issue and those where it is in fact a topic of interest, but without activity. In our field, quality can make a difference in helping us to distinguish ourselves. Do we speak about the same thing when we speak about quality? Maybe there should be some definitions of terms such as quality management, quality assurance and - once we have reached quality - about its maintenance. Why does no one want to deal with this topic? And why have some groups spent so much time, effort and expenses to bring some light on the subject? There might be no evident reward. So it can only be considered as an investment in the long term. Once your patients recognize the quality that is offered in your practice, they might reward you and accept you as the real specialist.”

We have to go back to the results presented in Stockholm and talk about them and then try to make a proposal. Dealing with this subject might be voluntary, but in the end it is also a necessity and this is why Gerhard Seeberger needs more people working on this task. So what are the barriers, why does nobody want to deal with it? Or maybe they want to deal with it, but are afraid of the competition. As it was said earlier, the medical act does not know any competition, because the medical act does not consist in selling anything, but offers solutions for our patients and for ourselves.

Gerhard Seeberger proposes to organise round tables on quality, to make people talk about the topic and to work out arguments. We belong to an intellectual profession, but we are still human beings and we commit errors, so maybe we should work on an error list, proposes Gerhard Seeberger. What are the most common errors and how do we solve them? Once such a list is elaborated, we could contribute this information to other working groups.



Wolfgang Sprekels supports Gerhard Seeberger. Terms such as “quality”, “management” and “standard” are being more and more abused. Maybe we should first define quality. Some national associations already deal with interference by the government labelled “quality management”. The level of influence taken by the government goes from trying to interfere with the management of the dental practice to demanding proof of outcome quality. It has become a real threat to many professions. The financial reward is often linked to the question of quality. So, whoever has experience in this field should join Gerhard Seeberger’s WG. There is a lot to do.

Quality is a concept as well, and a continuous search for improvement, for new techniques, for new knowledge, declares Bedros Yavru-Sakuk. But still, the most important aspect of quality is the person behind it.

We all pretend to know what quality is, adds Orlando Monteiro da Silva. Maybe we cannot tell, but we know it, when we see it. Quality must be defined by the profession and not by someone from the outside.

Everybody has a different vision of quality, remarks Patrick Hescot. Nevertheless, dentistry has always been quality; no one can provide dental treatment without paying attention to quality.

Peter Engel shares Patrick Hescot’s opinion; we are forced to deliver high quality work, otherwise, we would soon have no more patients in our practices. But, nowadays quality is imposed on us by the politicians. It is extremely important to keep quality in our hands. Peter Engel warns against letting quality management be ruled by competition. This is exactly what outsiders want us to do, with the side effect of dividing our profession. A human being is not a piece of machinery and an important point that should not be neglected is that the patient’s compliance is very important for the success of a treatment.

Gerhard Seeberger would actually prefer to talk of “quality of behaviour”, as this in the end is what distinguishes us.

Wolfgang Sprekels agrees with the previous speakers. He thinks that the danger does not only come from outside the profession; we could harm ourselves from the inside too. There are growing numbers of specialists in the dental field and we must be very careful to avoid that treatments provided by non-specialists not be considered as “lege artis” treatments anymore.

6.6 Basic and continuing education

Alex Mersel thanks the Italian committee for the organisation of this event. He also thanks the members of his WG for their collaboration and support. He refers to the report which has been sent in due time and is displayed on the ERO website.

“We started by studying and analysing basic education in 2004. At this time a study was launched concerning continuing education. The results were presented at the plenary session in Athens in 2005 and have been published in the *International Dental Tribune* on continuing education under the title “Duty or Privilege”. Then we studied the continuing education guidelines for the general dental practitioner. The results were presented in Dubai in 2007. This study will also be published; it deals more specifically with abilities and competencies, symbolising the mission and targets of continuing education. Finally, there is another study: in cooperation with the FDI, a project on online continuing education activities was drafted. In 2008 a final project concerning national dental associations was presented and started. I would like to add a few essentials concerning our geographical area. We are witnessing two separate but complementary programs in the European region. With flexibility and goodwill, we will be able to set up a conference. I am convinced that all the delegates present here have high expectations in terms of harmonization in the field of continuing education. We will all be grateful if the FDI and the ERO authorities set up such a meeting as soon as possible.”



6.7 Women in Dentistry

Vesna Barac-Furtinger presents a short report about the work of her group over the last 4 years (see presentation on the website). 150 years after the first woman graduated at the Baltimore school, the FDI General assembly adopted a declaration about women in dentistry and established a section for women. The number of active dentists was then around 20%. The mission of this section was to establish and organize a cooperation network. Even though dentistry was a male profession, in Kuala Lumpur, for the first time a woman was elected as president of more than one million dentists all over the world. After that we tried to establish special WGs in all regional organizations. The ERO Board recognized the extremely high percentage of female dentists and established a WG in 2004. The program of the WG was to make the profession aware of the phenomenon of the feminisation of the dental profession, to gather information and data, and to look at the differences between men and women practitioners and their consequences. It showed some very interesting things such as the fact that dentistry is completely feminized. The number of women in dentistry has also grown in the Western countries and has reached a total of 70% in some places. There are no differences between men and women during their studies; differences appear only afterwards. Women very often work in preventive dentistry, only few specialize. If they do, orthodontics is mostly chosen; many work in pedodontics (although this is not a specialization) and oral surgery. Despite the large number of female dentists, only 24% are at decision-making levels. Women are better students, but then often family life starts and postgraduate education is given less importance. Both genders are equal in success and income, if they are on the same basis. Many women prefer having part-time jobs and being employed. Conclusion: the position of women dentists in Europe was satisfactory when they were a minority; since they are not a minority anymore the branch needs a strategy with full respect of workforces, which would include the support of women in postgraduate education, to coach them in leadership, practice management, etc. We want dentistry not only to satisfy the patients; we need also satisfied dentists. The WG is preparing some statements for Singapore.

Patrick Hescot thinks that it is important to continue this work. Wolfgang Sprekels joins him and compliments Vesna Barac-Furtinger and her team. It will take time until women grow into leadership positions. Women quotas won't help; it is quality once more that will help to achieve a better situation. What has been said is very important for the "old" European countries that are not used to such numbers of female dentists. Women have a shorter working life; they tend to be employed, often part-time. This could lead to a "supply shortfall"; the number of liberal practices will decrease. Our associations will have to get used to representing more and more employed women dentists. Wolfgang Sprekels thinks this WG is very fascinating, because here a structural change is taking place which is not easily visible, but will have considerable consequences after a couple of years. He thanks the WG again for its excellent work.

Vesna Barac-Furtinger is convinced that in the countries of the Eastern block, the growth of employed dentists is also steered by the governments. The workforce question is important for all working groups. They are conducting all these investigations to help each other.

Ralph Wagner questions the plausibility of the mentioned 69% women in dentistry. He suggests checking the calculation.

6.8 Dental Team

The team in a dental practice is not the same as it was a couple of years ago, states Edoardo Cavallé. The core problem though remains the same: providing dental care to the patients. The working group has made an overview of the professions in oral health care (see presentation on the website). Research on already existing studies (one reference was the EU Dental Manual) and the collection of new data has



shown that there are differences among the European countries. The task of the WG is very interesting and new members in the WG are always welcome. Edoardo Cavallé is quite enthusiastic. The WG has set up a work schedule; they will soon meet again and try to draw up a statement. Of course the collaboration of all ERO member associations is needed. There will be news from this group in Singapore.

6.9 Approval of the reports of the working groups and theme of the year 2010

All reports are adopted unanimously. Systemic diseases and oral health could be the theme of the year 2010, proposes Patrick Hescot.

Wolfgang Sprekels fears that the ERO is increasingly becoming some sort of post-university continuing education institution. It might not be wise to only stick to scientific topics. He would prefer to discuss the assignments given to auxiliary personnel, which is a serious problem for our profession. Furthermore he would very much like to have the reports in written form as well. Sometimes it is quite difficult to follow the translation. The discussions among the delegates and in the plenary would be easier. He begs to consider this as a suggestion and not as a criticism. Topics that are important for our profession should be distributed well before the meeting in written form to enable the participants to discuss them with the other delegates and to make up their minds. Wolfgang Sprekels adds that the form of the Saturday morning program (lectures or round-table discussion) does not really matter. It would be better anyway if there were a discussion in the plenary among the delegates, because we are the assembly and we have to make the decisions.

Topics such as “Fluoride”, which will be treated tomorrow, mostly have a political background too, answers Patrick Hescot. Political arguments should be scientifically proven. There is time to think about it before the next meeting in Singapore and to – maybe – prepare a resolution on fluoride. The WGs work hard and sometimes there is just not enough time to prepare a report, adds Patrick Hescot.

Regarding the theme of the year 2010 a decision can still be made in Singapore. This way we have enough time to think about Wolfgang Sprekel’s suggestions.

C.7 FDI

Patrick Hescot refers to a letter that has been addressed to the FDI president, which brought up some criticism about the “new” working methods. Why not take advantage of having a new executive director and make use of the upcoming elections to make some changes? Each year we elect new committee members. This is a process which just developed this way. Often these committees comprise more members brought in by FDI executives than members who were actually elected. This leads to an imbalance of the power of the general assembly and other forces. In the past the regional organisation automatically had a seat in the FDI Council. This changed when the new governance was adopted. But why not come back on this decision? It cannot be denied that the new governance has given proof of its efficiency. Furthermore, Patrick Hescot thinks that the FDI should keep up its meetings. Teleconferences have too many disadvantages. Since the ERO is part of the FDI, we want to be active and this is the reason to bring up these proposals.

Since no one wishes to comment Patrick Hescot’s speech, it is recorded that the delegates agree with it. There will be a Council meeting next week and the FDI president may accept these suggestions from the ERO.



European Regional Organisation of
the Fédération dentaire internationale



Burton Conrod does agree on the principles. He points out though that if the knowledge is not inside the committee it has to be brought in from the outside. He asks the delegates to send them the experts they need. He is grateful for all proposals. It is good to hear what the delegates from the different regions think. This is why taking part in such meetings is so important.

Now it is time to give the floor to the candidates for the post of FDI president-elect. First Orlando Monteiro da Silva presents his candidature, then David Thomson and T.C. Wong.

C.8 Pan European Congress

Patrick Hescot announces that the 2009 Pan-European Congress, with a consensus conference on pain management, will be held in Kiev (Ukraine). The PEC is organised by the national/local dental association under the aegis of the ERO and in close cooperation with Vladimir Sadovsky and Alex Mersel.

The scientific program of the 3rd PEC in Kiev will include 8 scientific symposia about conservative dentistry, endodontics, prosthodontics, implantology, orthodontics, aesthetic problems, prophylaxis, management and e-learning, and a consensus conference about pain management. Vladimir Sadovsky thanks the national dental associations which have already sent him addresses and contacts for magazines and internet sites. He will continue his promotion campaign. He thinks we should follow the tradition of the FDI and start to promote this conference two years before, which means that we are awaiting applications from Eastern and Central European countries that are interested in organising the 2011 PEC.

In 2010, the PEC will take place in Poland. Discussions with the Polish dentists have already taken place.

C.9 Finances

9.1 Settlement of accounts 2008

The Swiss financial community is not the only one being a bit in turmoil; nevertheless Philippe Rusca will show the delegates that it was not a bad idea to choose a Swiss as treasurer.

He is very pleased to present a positive closure of accounts. The income increased due to the re-affiliation of the UK. On the expenses side, Philippe Rusca has tried to administer the finances as carefully as possible.

The financial situation is good; we dispose of a solid fortune which does not need to be further augmented. It corresponds to more or less the amount of an annual budget, which is reasonable.

There is no request to speak, so the president starts the voting. The accounts for 2008 are adopted unanimously.

9.2 Outstanding fees

There is an amount of €2.060 of outstanding fees. Philippe Rusca is confident that all will be settled before the meeting in Singapore.

President: Dr. P. Hescot (France) • President-Elect: Dr. Gerhard Seeberger (Italy) • Secretary General: Dr. Ph. Rusca (Switzerland) •
Boardmembers: Dr. Bartolomeo Griffa (Italy) • Dr. Vladimir Sadovski (Russia)

ERO-Sekretariat, Monika Lang, P.O. Box 664, CH-3000 Bern 7, Tel. ++41 31 311 74 71/Fax ++41 311 74 70/mail: ero-sekretariat@sso.ch

Bank account: UBS AG, 3011 Bern, Switzerland - Account No. 0235-FJ146187.1, IBAN CH 98 0023 52 35 FJ1461871, in the name of Schweizerische Zahnärzte
Gesellschaft SSO, Postfach, CH-3000 Bern 7



9.3 Budget 2009

Philippe Rusca explains the budget for 2009. The expenses of the secretariat have been slightly increased and there is a new item at the disposal of the working groups. Philippe Rusca always promised to provide a certain amount for justified projects as soon as the financial situation would allow it. As for the income, there are two versions, one with the normal coefficient and one with a reduced coefficient. The Board suggests choosing the modified version.

Wolfgang Sprekels reminds the delegates that the FDI has changed its mode of calculation, and wants to know if this has been done with the ERO membership fees as well. Since the FDI has not yet implemented the new mode, this has not been applied for the ERO fees either, explains Philippe Rusca, who confirms that the ERO will follow the FDI as soon as the changes are effectively implemented.

Stuart Johnston wants to know when the GNI, which is the basis of these calculations, was collected, and if it goes back to before the economic crisis. Philippe Rusca declares that the calculation is based on the FDI figures and T.C. Wong confirms that they are from 2008.

There are no further questions. The delegates unanimously adopt the budget and vote for the reduced coefficient version.

C.10 Next meetings

The next plenary will be in September in Singapore.

For 2010 there is a candidature from Armenia. The president of the Armenian Dental Association proudly presents his country and its capital Yerevan, where the session would be held. He is convinced that Yerevan fulfills all the requirements to host such an event. Besides, they will be celebrating a jubilee in 2010. Weather conditions are beautiful in May; there would be the possibility of a free excursion on Saturday. This is not the first time Armenia is a candidate for hosting the ERO plenary session and Ashot Gevorgyan would be very happy if the assembly voted for his country.

Vladimer Margvelashvili presents the second candidate for 2010: Georgia. A short film praises the amenities of Georgia.

The delegates then vote: Armenia gets 29 votes, Georgia 18. Vladimer Margvelashvili congratulates his colleague.

Because we are short of time, Nikolai Sharkov will present Bulgaria as candidate for 2011 in Singapore.

For the year 2012, there is already the candidature of Prague.

C.11 Miscellaneous - There is no request to speak.

D Close of the meeting

Patrick Hescot thanks the interpreters for their excellent work and the participants for their cooperation, and adjourns the meeting at 17.10.

Dr. Patrick Hescot
President

Monika Lang
Minutes