Dr. Abbas Zaher offers his perspective on the recent events in Egypt

Al Tahrir Square and the Egyptian Revolution have been a centerpiece of the media since Jan. 25. The world stood in surprise as Egyptians managed, through peaceful demonstrations all over the country, to overthrow the regime that had ruled for more than 30 years. The Egyptians demanded their dignity, freedom and social equity. The police state of the fallen regime — a regime with no room for freedom of speech — robbed the people of Egypt of these basic human rights.

This momentous event began with the nation’s youth who found a new place to express themselves, their dreams and their hopes for this country. Through social networking websites, such as Facebook, groups of young people expressed their frustration with the regime’s prosecution of opposition, intolerance to diversity, oppression, unemployment, organized torture, and financial and administrative corruption. The previous regime and the Egyptian citizen had a contemptuous relationship. The youth called for change.

The young people elicited Egyptians to start rallies in every city on Jan. 25. The call was one of selnaya, selnaya (peaceful, peaceful). Faced with the violence of the state police, the demonstrators then called for another nationwide rally on Friday, Jan. 28, the Day of Rage. In every city, rallies occurred in central squares until the demands were met. In Cairo, Al Tahrir Square, also known as Liberation Square, became the center of the movement. While state violence was at its utmost with the use of tear gas, water jets, rubber bullets, fights and occasional live bullets, the people remained, and they conquered. The army was deployed to the streets, and the state police retreated. On this day, the youth that the Egyptians did not resist was destroyed.

For two weeks, Al Tahrir Square symbolized the revolution. There, you could see the full spectrum of the Egyptian political picture — from the extreme left to the extreme right. All the thoughts and feelings of the Egyptians fused into one demand: The people wanted to overthrow the regime. The citizens were also willing to protest indefinitely. The regime tried to contain the protests with trivial reformatations and violence. However, by this time, millions had gathered in Al Tahrir Square and other squares to show their solidarity. What started on Jan. 25 as a revolution of the youth had since transformed into a national revolution. On Feb. 11, the Friday of Persistence, the crowds celebrated as Vice-President Omar Suleiman announced that Egyptian President Hosni Mubarak had stepped down, ending a regime of dictatorship and tyranny. The next day, the same young people who protested for two weeks came back to clean up the square. This image reflected the new spirit of Egypt — the authentic spirit of Egypt that was mutilated by years and years of oppression and silencing.

Where do we go from here? As of mid-March, Egyptians now witness unprecedented dialogue among all parties. A new president, a new constitution and a parliamentary democracy are the heated topics these days. Every man, woman and child wants to rebuild, to reform and to evolve. I think, for the first time in many years, people feel that this land is their own, a land they are willing to live and die for.

Everyone has dreams for this country. We orthodontists hope the profession can benefit from this big leap in Egypt. We have been trying to pass laws to fight bad and illegal practice. We believe the present atmosphere will allow our voices to be heard and prompt actions to be taken. The main objective is to improve our teaching programs so they achieve accreditation. In addition, we expect a special nationwide interest in scientific research. This should benefit our professional research, which was hampered previously by lack of funding. We are now more willing than ever to assemble and discuss our views, plans and visions for the future. For, if we have learned anything from this revolution, we have learned to listen to each other.

Dr. Abbas Zaher, the immediate past vice-president of the WFO, participated in a celebration in Alexandria, Egypt, on Feb. 11, the day Egyptian President Hosni Mubarak stepped down.

As this issue of the WFO Gazette was going to press in March, Japan was struggling to cope with the devastating destruction caused by the 9.0-magnitude earthquake off its northeastern coast and the resulting tsunami that occurred March 11. As of March 25, the official death toll had surpassed 10,000 people, and more than 17,500 people were unaccounted for.

The Japanese Orthodontic Society (JOS), an affiliate organization of the WFO, has more than 6,000 members. Approximately 400 JOS members live in the Tohoku District, which was the hardest-hit area. This northeastern region of Japan includes the Iwate, Miyagi and Fukushima prefectures.

“They are safe, and both have strong determination to overcome all the hardships and to help the others who are affected by this disaster,” she said.

Dr. Montoya, who is the director of the School of Dentistry, the professor and chair of the Department of Maxillofacial Orthodontics, and the director of the Department of Orthodontics in the Dental School Hospital at the Tokyo Medical and Dental University, also reported that life was returning to normal in Tokyo. “I can come to my office by commuter train, I see my patients in the hospital, I can eat a hot meal, I can sleep on the bed with a warm blanket,” he said. “I feel as if nothing had hap -
pended at all, and I wish it would have been just a bad dream. But I am drawn back to reality when I watch TV. Can you imagine more than 10,000 people lost their lives suddenly by just one earthquake and tsunami? It is not easy to wipe out our sorrow, fear and reluctance. It is no doubt that Japan is experiencing one of the most difficult times in history.

Dr. Moriyama also expressed his growing concerns over the extensive damage to the six reactors at the Fukushima Daiichi nuclear power complex in the Fukushima prefecture. The Japanese government evacuated citizens up to 12 miles away due to rising radiation levels and, as of March 25, was encouraging voluntary evacuation of the area 12 to 19 miles away from the plant. On March 20, authorities confirmed finding radiation-tainted vegetables and tap water. “The concerns are not only with the Japanese but also everyone worldwide,” Dr. Moriyama said.

Orthodontist maintains practices in two countries to meet need for orthodontic care

Dr. Sunil Sachdeva, an orthodontist, has a unique situation when it comes to managing his two offices locations. For the past decade, he has maintained two orthodontic practices — one in Nairobi, Kenya, and one in Gaborone, Botswana. His love for orthodontics and his desire to provide a much-needed service fuels his dedication to managing a complicated practice arrangement.

Dr. Sachdeva, who recently became a fellow of the WFO, was born and raised in Kenya. In 1980, he graduated from the College of Dental Surgery, Manipal, University of Mysore in South India. Following his graduation, he settled in Nairobi and completed his compulsory two years of government service before establishing his private dental practice. In 1984, he married his wife, Dr. Pushpa Sachdeva, who is also a dental surgeon. After 12 years of practicing dentistry, Dr. Sachdeva returned to his alma mater in India to pursue his masters’ degree in orthodontics, which he accomplished in 1994. When he started his orthodontic practice in Nairobi in 1994, he was the second orthodontist in Eastern and Central Africa. Today, he and his wife have a seven-chair practice, The Smile Specialists, in Nairobi. Four of the chairs are devoted to Dr. Sachdeva’s orthodontic practice. Dr. Pushpa Sachdeva uses the other three chairs for her dental practice. Another dental surgeon will join them in practice in May. Dr. Sachdeva also maintains a three-chair orthodontic practice in Gaborone. He is now one of five orthodontists in Kenya and one of four orthodontists in Botswana.

History of the Japanese Orthodontic Society

• The Japanese Orthodontic Society (JOS) was established in 1926 as the first orthodontic society in Japan.
• The JOS became a component of the International Orthodontic Congress (IOC) for the first time in 1950.
• In 1951, Dr. Hisashi Saito attended the 2nd International Orthodontic Congress in London as the official delegate of the JOS.
• The 1st Annual Meeting of the JOS was held in 1942 in Tokyo. This year, the JOS founded the Journal of the Japanese Orthodontic Society. This journal has since been renamed Orthodontic Review.
• The JOS held its golden jubilee meeting in conjunction with the 1st International Orthodontic Conference in 1976 in Tokyo.
• The JOS held its 46th Annual Meeting in conjunction with the 3rd International Orthodontic Conference in 1998 in Yokohama, Japan.
• The 50th Annual Meeting of the JOS and the 1st Asian Pacific Orthodontic Conference (APOC) were held in 1991 in Osaka, Japan.
• The JOS became a charter member of the WFO on May 15, 1995.
• The JOS held its 75th Annual Meeting in conjunction with the 3rd International Orthodontic Conference in 2004 in Tokyo.
• Most recently, the JOS held its 69th Annual Meeting Sept. 17-29, 2010, at the Pacific Yokohama in Yokohama.
• The JOS held its joint meeting with the Korean Association of Orthodontists on Sept. 28, 2010, in conjunction with its 69th Annual Meeting. The theme was "Fostering Closer Friendship Between Japan and Korea Through Orthodontics.” The meeting featured lectures from the two organizations’ presidents, as well as a symposium on Class II treatment.

The Road to Two Practices in Two Countries

Eleven years ago, the Sachdeva family was vacationing in Botswana. While there, they met Dr. Kasi Majani, a dental surgeon who was originally from Kenya. He had been practicing in Botswana since 1994. After the vacation, Dr. Sachdeva began considering a new direction for his practice. “It was he (Dr. Majani) who got me thinking about opening a practice in Gaborone, as they needed an orthodontist urgently,” said Dr. Graber, who noted the AAO is raising funds to help with the recovery efforts and is collaborating with the Japan Dental Association to determine where the collected funds are needed most. Individuals may contribute to this effort at www.aauinc.org. “I am happy to report, though, that almost all I have contacted have responded positively that they are safe and have suffered primarily building damage, not loss of life. I was particularly heartened to hear the news that professors who live in northeastern Japan have responded favorably. We continue to keep them in our thoughts.”

Despite all the difficulties now facing the nation of Japan, Dr. Moriyama said he believes the JOS will continue with its plans to host its 70th Annual Meeting later this year. The organization will hold the 4th International Congress and 70th Annual Meeting Oct. 17-20 at the Nagoya Congress Center in Nagoya, which was largely unaffected by the earthquake and tsunami. Dr. Justus will attend this meeting as an official guest and speaker.
Thai Association of Orthodontists initiates effort to treat CLP patients in northeastern Thailand

Since 2005, the government of Thailand and the Thai Red Cross Society have made a concerted effort to register all newborn cleft lip and palate (CLP) patients in Thailand. Due to this effort, the government has identified many CLP patients in northeastern Thailand who are in need of orthodontic treatment.

Responding to this need, the Thai Association of Orthodontists (ThaAO) created a mobile orthodontic unit — a team of 19 volunteer orthodontists who travel to a hospital in Nakhon Ratchasima Province once a month. The ThaAO’s new volunteer program, the first of its kind for the organization, was launched in November 2010.

Through a mutual agreement, Thailand’s Ministry of Public Health, the Thai Red Cross Society and the National Health Security Office initiated the Smart Smile and Speech project in 2005 to commemorate the 50th birthday of HRH Princess Maha Chakri Sirindhorn. This five-year initiative registered all newborn CLP patients in Thailand. Due to discontinuing the project, the Thai government is still registering new borns focusing on primary care, including nasoalveolar molding.

“During this time, it was discovered that many of the CLP patients who were born before 2005 were not treated,” said Dr. Somsak Satravaha, president of the ThaAO and a member of the WHO Executive Committee. “The incidence of CLP is 1:800, so it is obvious that many of them were left without orthodontic treatment.”

While the Smart Smile and Speech project has been discontinued, the Thai government is still registering newborns with CLP, and the Thai Red Cross is paying for the patients’ travel expenses when they need to visit the hospital for treatment. In the meantime, the ThaAO learned that the Maharaj Hospital in Nakhon Ratchasima has approximately 50 CLP patients who are in need of orthodontic treatment. In this area of Thailand, only one orthodontist is available to treat the CLP patients, and she has a full case load with the new CLP patients, Dr. Satravaha said.

As a result, the ThaAO created its mobile orthodontic unit to assist the CLP patients. The ThaAO and the Maharaj Hospital, along with the support of the Ministry of Public Health, the Thai Red Cross Society and the National Security Office, are working together and have set up the CLP care center at the hospital. Once a month, the ThaAO team of volunteers makes the four-hour drive from Bangkok to the hospital. The team starts out at 6 a.m. and returns to Bangkok by 10:30 p.m.

At the CLP care center, “the patients get all the treatment they need, and all of the treatment is free of charge,” Dr. Satravaha said. “Their travel expenses are paid by the Thai Red Cross Society, and the families get free lunch boxes from the Thai Orthodontic Foundation.”

Nongovernmental medical and dental associations, including the ThaAO, offered their full support to the project. The ThaAO, for example, recruited volunteer orthodontists to treat the identified patients and organized workshops that mostly focused on primary care, including nasoalveolar molding.

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The WFO Committee on National and Regional Orthodontic Boards, with its representatives from the 15 recognized orthodontic certifying boards, strives to spark discussion and interest in the board-certification process among orthodontists worldwide.

Through the discussions thus far, the committee members agree the primary reason for promoting board certification in any country or region is to benefit the public. But the continuing question is this: Will a certifying program lead directly to an improved level of care received by the public? “If so, any organization can hold its head high while working, seemingly with no end in sight, toward accomplishing this goal. If not, then it’s time to reframe the motives of any group,” said Dr. David Turpin, chair of the WFO committee and a member of the WFO Executive Committee.

In addition, once a duly elected board is assembled to carry out the goals and objectives of its board-certification mandate, new board members may encounter many challenges as they seek to become effective. For example, the examination process of a new certifying board may appear to be highly selective at the beginning, but this should never be used as an end in itself, Dr. Turpin said. “The real target is one of improving the delivery of care to the populace. This is not likely to happen if only a handful of the membership qualifies for certification in an entire country or region. The goal should be to certify as many of the orthodontic specialists as possible without lowering the standards of qualification to an unacceptable level. Accomplishing this requires time, a level of cooperation among all factions, as well as an unselfish determination by all parties over time.”

Historically, the American Board of Orthodontics (ABO) struggled with this issue. Up until 2005, the ABO had yet to certify more than 25 percent of the American Association of Orthodontists’ membership. However, in 2005, the ABO began resuming its examination process, using the medical model of board certification and accreditation as a guide. Today, new U.S. and Canadian orthodontists who have passed their Written Examination may become board certified immediately following graduation from their postgraduate orthodontic program by successfully completing the Initial Certification Examination. For a limited time, the ABO also allowed orthodontists in practice to accept the Gateway Offer, a pathway to certification that ended in a limited time, the ABO also allowed orthodontists in practice to accept the Gateway Offer, a pathway to certification that ended in a limited time.

The European Board of Orthodontists (EBO), faced with slow growth since its inception in 1997, is also introducing changes to its certification process to encourage newly graduatedorthodontists to seek board certification. The changes are similar to those the ABO has enacted.

“For years, I have been discussing the importance of a board-examination process for the professional development of our colleagues with numerous chairpersons of departments of orthodontics in several European countries,” said Dr. Frank Welland, president of the EBO. “The results were not very encouraging. So we started at the other end of the ladder: We plan to install a new membership category — provisional member of the EBO — from 2012 on. This membership category is open to newly graduated orthodontists (within two years after graduation). These orthodontists must complete part of the examination at that time. This includes the case description of two cases treated during postgraduate training and the oral examination, i.e., diagnosis and treatment planning of two new cases. Within 5 to 7 years — this is still under discussion — the rest of the cases (six more), including retention records, will be requested.”

This approach to board certification, however, may or may not be replicable in every country or region. Dr. José Carlos Elgoibaren from Argentina serves on the WFO committee as a representative from the Argentinean Board of Orthodontists. He has observed the following: “There are indeed differences for the entrance and maintenance requirements in different regions, and, even within the same country, requirements have been changed to respond to local needs, such as governmental licensing requirements. So, as we advance in standardizing these requirements, we must be very careful not to impose them upon the local characteristics.”

Dr. Somchai Sattarana of Thailand notes that the Thai Board of Orthodontics has encountered a similar situation. “Our Board of Orthodontics was founded in 1997, and, since then, we have certified 99 orthodontists. The problem that we have been facing and will continue to face is that our board, together with the boards of other dental specialties, is under control of the Royal College of Dental Surgeons of Thailand (RCDT). Some of RCDT’s policies have caused problems as RCDT wants to have the same rules which can be executed by all dental specialties.”

Other countries and regions face different obstacles. Dr. Ermelinda Sabater-Galang, who represents the Philippine Board of Orthodontics on the WFO committee, said a lack of interest in board certification exists in the Philippines. “A great number of orthodontic practitioners do not want to undergo board certification because they do not want to limit their practice to orthodontics due to economic reasons,” she said. “Currently, we are still in the process of communicating with the heads of the orthodontic programs to make the certification examination an additional requirement prior to graduation.”

During the 2010 Symposium on Orthodontic Certifying Boards that was held in conjunction with the 71st International Orthodontic Congress, the committee representatives and presidents of WFO affiliate organizations discussed many of the issues that arise with board certification. Breakout groups discussed the WFO Guidelines on the Establishment of New National and Regional Orthodontic Certifying Boards, methods for increasing public awareness of board certification, the advantages of a College of Diplomates, methods to encourage board certification, and current statistics on the number of board-certified orthodontists in each country or region.

“This is the type of discussion we must continue to have, as we all struggle to improve the outcomes of orthodontic treatment worldwide through board certification,” Dr. Turpin said. The WFO committee will continue to share ideas and also welcomes feedback from WFO fellows. The WFO Committee on National and Regional Orthodontic Boards includes representatives from the following boards:

- American Board of Orthodontics: Dr. Jeryl English, Jeryl.D.English@uth.tmc.edu
- Argentinean Board of Orthodontists: Dr. José Carlos Elgoibaren, elgoibaren@fibertel.com.ar
- Australasian Orthodontic Board: Dr. Steve Langford, ortho@adam.com.au
- Brazilian Board of Orthodontics: Dr. Âlvaro Brunetto, ortobrunetto@terra.com.br
- European Board of Orthodontists: Dr. Frank Welland, frank.welland@intaut.dk
- French Board of Orthodontics: Dr. Claude Lemasson, claude.lemasson@radanois.fr or cl.lemasson@gmail.com
- German Board of Orthodontics: Dr. Bärbel Kahl-Nieke, lds@ruke.uni-hamburg.de
- Indian Board of Orthodontists: Dr. Mani K. Prakash, mkprakash@gmail.com
- Italian Board of Orthodontics: Dr. Sandro Cociani, bidisan@libero.it
- Japanese Orthodontic Board: Dr. Yushiko Asai, y_asai@56hpb.jp or info@asai-kousyu.com
- Korean Board of Orthodontics: Dr. Seung-Hak Baek, dwhunhe@umoul.co.kr and dwhunhe@umoul.co.kr
- Mexican Board of Orthodontics: Dr. Ricardo Treviño, ramiro@unt.edu.mx
- Philippine Board of Orthodontics: Dr. Ermelinda Sabater-Galang, indagalan@gmail.com
- Taiwanese Board of Orthodontics: Dr. Yeong-Chang Yen, yenchary@ms66.hinet.net
- Thai Board of Orthodontics: Dr. Somchai Sattarana, samusamth@56.yahoo.com.

Dr. Turpin of Federal Way, Washington, USA, may be reached at drtupin@aol.com. Dr. Thomas Ahman of Lima, Ohio, USA, is the chair of the committee and a member of the WFO Executive Committee. His e-mail address is tahm an@woh.rr.com.
WFO solicits affiliate organizations for proposals to host the 9th IOC in 2020

The WFO is now seeking a host organization(s) for the 9th International Orthodontic Congress (IOC) in 2020. All WFO affiliate organizations should have received a Request for Proposal (RFP) from the WFO earlier this year. All proposals must arrive at the WFO Secretariat no later than 4 p.m. (CST) December 16, 2011.

The RFP outlines meeting objectives, attendance numbers from the two previous IOCs, hotel accommodation requirements, the potential time frame of the 2020 meeting, space requirements, meeting requirements, and criteria for site selection, among other information. The WFO Executive Committee will review all submitted RFPs and determine the winning proposal. Dr. Roberto Justus, president of the WFO, will announce the Executive Committee’s decision after June 1, 2012.

Since the WFO’s formation in 1995, the IOC has been held in Chicago, Paris and Sydney. The British Orthodontic Society will host the 8th IOC in London in 2015. (Please see the related article on the 8th IOC on page 2.)

“The IOC gives orthodontists from every region of the world the opportunity to come together at the same time and to discuss clinical ideas, research progress and generally relate to each other,” said Dr. William DeKock, secretary-general of the WFO. “This opportunity, where everyone can come together at the same time in the same place, ultimately results in the development of new solutions when orthodontists get the chance to hear each other and talk with their colleagues who are working on similar aspects of the same problem or issue.”

Specifically, the IOC lends itself to the organization of symposia on orthodontic certifying boards, orthodontic postgraduate education and issues in clinical orthodontics, among other topics. “These symposia help orthodontists and orthodontic leaders to get to know each other and discuss various issues, all with the intent of elevating the standard of orthodontic care,” Dr. Justus said. “These get-togethers increase camaraderie.”

In addition, the WFO, the host organization and host country all benefit economically from the IOC as thousands of orthodontists have attended these meetings in the past. Dr. Justus said the WFO uses its percentage of the financial net gains from the IOC to finance projects that improve orthodontics worldwide. The host organization may also find that it increases its membership and strengthens its relationships with other nearby affiliate organizations, he added.

For additional information on the RFP, contact Dr. DeKock at the WFO Secretariat. The e-mail address is wfo@wfo.org; the telephone number is +314-993-1700; and the fax number is +314-993-5208.

WFO president to attend several 2011 orthodontic meetings on behalf of the WFO

Every year the WFO president and Executive Committee representatives attend WFO affiliate organization meetings and other orthodontic continuing-education events to foster support for the WFO.

For 2011, Dr. Roberto Justus, president of the WFO, has attended or will attend the following meetings:

• the Japanese Association of Orthodontists’ Annual Meeting, Feb. 2-13, in Sapporo, Japan;
• the Mexican Association of Orthodontists’ Annual Meeting, March 2-5, in Cancun, Mexico;
• a two-day course for graduating orthodontic residents at the Autonomous University of Guadalajara, March 18-19, in Guadalajara, Mexico;
• the Lebanese Orthodontic Society’s Annual Meeting, April 8-10, in Beirut, Lebanon;
• the American Association of Orthodontists’ Annual Session, May 13-17, in Chicago, Illinois, USA;
• the State of Tabasco Association of Orthodontists’ one-day course, May 21, in Villahermosa, Tabasco, Mexico;
• the Chinese Orthodontic Society’s Annual Meeting, May 27-28, in Chongqing, China;
• the European Orthodontic Society’s Annual Meeting, June 19-23, in Istanbul, Turkey*;
• the College of Diplomates of the American Board of Orthodontists’ Annual Meeting, July 15-19, in Torrey Pines, California, USA;
• the Sociedad Colombiana de Ortodoncia’s Annual Meeting, Sept. 8-10, in Medellin, Colombia, South America*;
• the FIH Annual Meeting, Sept. 14-17, in Mexico City, Mexico;
• the Japanese Orthodontic Society’s 70th Annual Meeting, Oct. 17-20, in Nagoya, Japan; and
• the American Board of Orthodontists’ Clinical Examination, Nov. 16-20, in St. Louis, Missouri, USA (Dr. Justus will serve as an examiner).

The WFO will also have an informational display at the 2011 Annual Session of the American Association of Orthodontists (AAO). During the AAO Annual Session, the WFO will hold a breakfast reception for WFO affiliate organization presidents on May 15. Look to the next issue of the WFO Gazette for highlights from this meeting.

*Attendance was tentative at time of publication

2010 WFO Financial Statement available online

The 2010 financial statement for the WFO is now available online at www.wfo.org. On the home page, select the “Information” link. On the following page, select the “Financials” link.
European Orthodontic Congress to convene in Istanbul, Turkey

The European Orthodontic Society (EOS) will host its 40th Congress June 19-23 in Istanbul, Turkey. Register online at www.ero2011.com.

The scientific program will include sessions on bone anchorage, adjunctive surgery in orthodontics and 3-D imaging. It will also provide new insight into temporomandibular joint disorders and contemporary dentofacial treatment. Dr. Randirra Nanda of the University of Connecticut in Farmington, Connecticut, USA, will deliver the 2011 Sheldon Friel Memorial Lecture and will provide a five-decade perspective on biomechanics and orthodontic concepts.

“Keynote lectures and pre- and post-symposium courses will be delivered by some of the most distinguished speakers in the orthodontic field,” said Dr. Nefat Erverdi, EOS president. “There will be plenty of opportunities to discuss and share research insights and to present original work.”

Dr. Erverdi, who practices in Istanbul, encourages WFO fellows to attend this meeting and explore the city.

“Istanbul, the capital of the Roman, Byzantine and Ottoman empires, is one of the world’s most magical and enchanting cities,” he said. “Walking on the streets of Istanbul, you can feel the splendor of the past, along with the cultural and commercial pulse of a modern city. The European Capital of Culture for 2010, Istanbul is hosting numerous cultural and artistic events, and exhibitions. The congress venue, Istanbul Convention & Exhibition Centre, is located in a central and beautiful area of the city, with close proximity to many hotels, museums and shopping areas.”

WFO seeks input from affiliate organizations as work on the redesign of the WFO website progresses

The WFO website, www.wfo.org, is undergoing major revisions. The WFO Executive Committee expects the new version of the website to debut by year-end. At this time, the WFO is seeking input from WFO affiliate organizations, as well as updated links to the organizations’ websites.

“Anyone who is currently working on a website for their affiliate organization is welcome to contact me to discuss how the WFO website might best serve them,” said Dr. Amanda Maplethorp, chair of the WFO Website Committee. “I am also seeking ideas as to how to begin the development of a global website network.”

Dr. Maplethorp, chair of the WFO Website Committee. “I am also seeking ideas as to how to begin the development of a global website network.”

Orthodontist Maintains Practices in Two Countries

Dr. Sachdeva, noting that Dr. Majani returned to Kenya to practice in 2007, “After a few more visits, I got a license to practice and started my practice in Gaborone in May 2001. I had Dr. Ieela Nasir, an orthodontist from India, practice with me full time from 2004 to 2009, while I traveled and returned to India. Since 2009, I have been alone and looking for someone to join me.”

And so, for 10 years, Dr. Sachdeva has managed a schedule that allows him to practice two weeks in each office each month. Both countries recognize the specialty of orthodontics.

“Managing two practices in two countries, with a flying time of 5-1/2 to 4 hours, requires a lot of planning, discipline, foresight, dedication and sacrifice,” he said. “I plan my visits up to 4 months in advance and, many a time, cannot change schedules to suit my circumstances, change as appointments have been given. So, I do miss out on some social engagements due to my schedule, but I have no regrets. My love for orthodontics sees me through. In Nairobi, Pushpa holds the fort for me, in spite of her extremely busy practice schedule, and her help is monumental. She is irreplaceable!”

Because of the unique nature of his practice, Dr. Sachdeva’s patients agree to undergo orthodontic treatment per his schedule. Dr. Sachdeva completed his postgraduate training and treatment planning. His trained staff members help place wires, but Dr. Sachdeva does all the bonding and wire bending. “Emergency protocols are in place in case any patient needs to be seen in my absence,” he said. “The assistants call me wherever I am and take instructions to relieve pain and or replace a broken wire, etc. Thankfully, these emergencies are few.”

His Nairobi office has 11 staff members and his Botswana practice has seven staff members. Both practices carry a full patient load, but Dr. Sachdeva notes the Gaborone office is busier due to the socioeconomic status of the patients and a greater awareness of the benefits of orthodontic treatment.

“In Nairobi, all patients pay cash as there is no local insurance that reimburses orthodontic costs,” he said. “Some patients have insurance from abroad that covers treatments with some kind of restrictions, usually. In Gaborone, they do have insurance that covers part of the fee for treatments, but I opted out and went fully private in 2009.”

One of the challenges, Dr. Sachdeva faces is utility-cut holidays. Frequent power cuts and water shortages can complicate his schedule. But, despite the challenges of his practice arrangement, Dr. Sachdeva derives pleasure from his work. “I enjoy every aspect of orthodontics, from a consult to diagnosis and treatment planning and the full range of treatments that I do in my office,” he said. “While the great pleasure and satisfaction are the results in Phase I treatments and affecting growth positively in the correctly diagnosed cases in such a short duration. Changing a Class II profile into a Class I profile with a functional appliance is very rewarding for me and a joy for mothers of those kids!”

Dr. Sachdeva also attends continuing education courses at least three times a year, despite his busy schedule. In early February, he attended the Damon Forum in Orlando, Florida, USA. Following the conference, he was able to spend time with a good friend and mentor, Dr. Prasama Kumar Shuvoopia. Dr. Shuvoopia, who practices in Detroit, Michigan, USA, was Dr. Sachdeva’s best friend in college and became an orthodontist 10 years before Dr. Sachdeva did. “I had the occasion to learn some new stuff from him,” Dr. Sachdeva said.

The Sachdevas look forward to the future and may soon welcome their sons into their practice. The couple’s sons, Suveer, 22, and Saurav, 20, are both in dental school at the University of the Western Cape in Cape Town, South Africa. “I do not force my sons into dentistry, as they decided on their own accord to pursue it,” he said. “I leave it up to them to do orthodontics or any other specialty they may like to pursue. Suveer is in his fourth year, and Saurav is in his third year of a five-year degree course. If either of them follows me into orthodontics, it will be really great! They both talk and tell me that they would like to specialize in the U.S. before returning to join us in practice in Nairobi. Secretly, this is a father’s wish come true, if it will happen.”
British orthodontists embrace the 8th IOC in 2015

Members of the British Orthodontic Society (BOS) have signed up en masse for the 8th International Orthodontic Congress (IOC) in London in 2015. The BOS, the host of the 8th IOC, has offered an innovative debenture package to its members to encourage their participation in the IOC. As a result of this offer, more than 1,400 BOS members have registered for the meeting. Due to this success, the BOS will offer the debenture package to all WFO fellows later this year.

Through the debenture package, orthodontists may register early for the 8th IOC at a reduced rate. The package allows delegates to spread the cost of the conference over five years. “By the time you get to 2015, debenture holders will hardly have to pay a thing and can save their money for enjoying their stay in London and the UK,” said Dr. Jonathan Sandler, chair of the 8th IOC and a member of the WFO Executive Committee. “This has been a great start to our build-up to 2015. I am delighted that the members of the British Orthodontic Society have taken the congress to their hearts. With their support and enthusiasm, I have no doubt we will deliver an extraordinary event. So I advise everyone to put the dates in their diary now as you wouldn’t want to miss it!”

The 8th IOC, which will be held September 27-30, 2015, will bring together the world of orthodontics for four days of education, entertainment and enjoyment. It will be held in London’s premier conference venue, Esthesis, which is located in the city’s historic docklands. This part of the city is currently undergoing massive renovations in preparation for the 2012 Summer Olympics. “With excellent conference facilities that can cater to over 10,000 delegates and exhibitors, and brand new transport links that can whisk you into the center of London in the blink of an eye, Esthesis is the ideal venue for the world’s greatest orthodontic meeting,” Dr. Sandler said.

For more information on the 8th IOC and the debenture package, go to www.wfo2015london.org.

WFO seeks bids for development of an online scientific journal from qualified publishers

The WFO is seeking a qualified publisher of scientific journals to publish an electronic scientific journal on behalf of the WFO. An online scientific journal would allow the WFO to further in its mission to advance the art and science of orthodontics worldwide.

The WFO released a Request For Proposal (RFP) to publishers in January. Proposal submissions are due May 1. The WFO Executive Committee will consider the submitted proposals in May, and will render a decision at that time.

From 2004 to 2011, the World Journal of Orthodontics (WJO) was the official scientific journal of the WFO. Quintessence Publishing, the publisher of the WJO, declined to extend its agreement with the WFO beyond 2010.

WFO Commissions Second Study

CONTINUED FROM PAGE 1

environment, and characteristics of the WFO affiliate organizations. Dr. Kessel and Dr. Hershey also consider the additional questions that will address aspects of the specialty that have evolved over the past 12 years.

Both Dr. Kessel and Dr. Hershey will attend the breakfast reception for WFO affiliate organization presidents that will be held Sunday, May 15 in conjunction with the 2011 Annual Session of the American Association of Orthodontists in Chicago, Illinois, USA. They will explain the study and will be available to answer questions.

Dr. Hershey and Dr. Kessel expect to e-mail many of the questionnaires, mailing the dissemination and return of the questionnaires much easier this time. The WFO had to mail the first study to the affiliate organizations because e-mail was not widely used at that time.

“We hope to get responses within hours to days rather than weeks to months,” said Dr. Hershey, who noted that Dr. Kessel will be able to issue reminders regarding the questionnaire via e-mail, too.

Even though communication methods may have been slower in the late 1990s, eighty-five percent of the 81 affiliate organizations returned the questionnaire for the first study. Dr. Hershey hopes the affiliate organizations demonstrate the same or an even greater level of participation this time around.

The growth of the WFO will also have an impact on this new study. In the past decade, the WFO has grown from 81 affiliate organizations to 109 organizations. The 8,000 plus WFO members now hail from 101 countries.

“It will be interesting to see how the specialty has evolved over the last 12 years,” said Dr. William DeKock, secretary-general of the WFO. Dr. DeKock, Dr. Ahanasios E. Ahanasio, past president of the WFO, and Dr. Takayuki Kuroda, a former member of the WFO Executive Committee, wrote the original questionnaire for the first study. “The first study provided an extensive evaluation on the status of orthodontics; it was one of the most comprehensive surveys on orthodontics ever completed. However, the WFO now has representatives from so many more organizations and countries. This new study should provide even more precise results on the status of care of orthodontic patients worldwide. We hope the affiliate organizations and WFO fellows will find the resulting information to be invaluable.”

Affiliate organizations should ensure the WFO has accurate contact information on file for their representatives. To update e-mail and mailing addresses, as well as telephone and fax numbers, WFO fellows should contact the WFO Secretariat at wfo@wfo.org. The phone number is +31-4-993-1700, and the fax number is +31-4-993-5208.