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Dear Ms Frew,

Rapid targeted review of the use of the title 'Oral Surgeon'

I am writing to provide my comments regarding the use of the title 'Oral Surgeon' in the UK, Europe, and more widely in the world in the hope that they may help inform Australian Health Ministers in their consideration of the use of the title 'Oral Surgeon' in Australia. I understand that a rapid targeted review of the use of the title 'Oral Surgeon' is being undertaken by the Dental Board of Australia working in partnership with Ahpra who have engaged Miller Blue Group to undertake the review on their behalf.

I am writing as recent President of the 'British Association of Oral Surgeons' and previous Dental School Dean at the University of Manchester and at Queen Mary University of London. I was also previous Head of the School of Medical Sciences at the University of Manchester, consisting of the Research Institutes of 'Cancer Sciences', 'Cardiovascular Sciences', 'Developmental Biology & Medicine', 'Diabetes, Endocrinology & Gastroenterology' and the 'Manchester Medical School' and 'Manchester Dental School'.

I am currently Professor of Oral and Maxillofacial Surgery at Queen Mary University of London. I was Honorary Consultant Oral Surgeon at Manchester University Hospitals NHS Foundation Trust from 2001, and I currently hold an Honorary Consultant Oral Surgeon with Barts Health NHS Trust. I have been Honorary Dental Consultant Advisor to the UK Government Office of the Chief Dental Officer NHS England and NHS Improvement since 2020.

The title 'Oral Surgeon' is not new or contentious and is well understood by the populations of the UK and Europe. The use of the title has been positively instrumental in the public's understanding of the role this surgical discipline in dentistry.

I was engaged by the UK Government 'NHS England and NHS Improvement' in 2012 to Chair a working group to deliver a Guide for Commissioners of Healthcare that would see a change in the landscape of 'Oral & Maxillofacial Surgery' and 'Oral Surgery' and 'Oral Medicine' care in England. This was intended to ensure improved access, reduce inefficiencies & inequalities and better-quality care and patient outcomes. We published in 2015. (*Attached*) I also led the further development of this work that was published in 2023 by NHS England. (*Attached*)

This work required a clear description of the role and scope of specialties of 'Oral & Maxillofacial Surgery' and 'Oral Surgery'. The working group committee had 38 members and included a wide range of stakeholders. There was a significant Patient Public representation and engagement. The latter was key to shaping our work and delivering a model that was sought by the general public. The following background and description of 'Oral Surgery' may be helpful to provide the context and understanding of why the title 'Oral Surgeon' is not new or contentious and is well understood by the populations of the UK and Europe.

Description of Specialty and Landscape

The specialty of Oral Surgery (OS) deals with the diagnosis and management of irregularities and pathology of the mouth and jaws that require surgical intervention. (1,2)

Historically, since the 1980's Oral Surgery as practiced both in General Hospitals and Dental Teaching Hospitals transformed into 'Oral & Maxillofacial Surgery' (OMFS) with a requirement for training to include undergraduate medical training in addition to undergraduate dental training and appropriate specialist training. A training programme was preserved without undergraduate medical training for academic surgeons that excluded the surgical management of oral malignancy. (3) This Academic Advisory Committee to Oral and Maxillofacial Surgery programme has now been superseded by Integrated Academic Training Programmes.(4)

Oral Surgery was re-introduced in the UK as a dental specialty regulated by the General Dental Council in 2009.(1) Oral surgery is an EU recognised dental specialty with EU provision for the mutual recognition of specialist training when considering applications from EU nationals for admission to the specialist dental register of each state.(5)

The related specialties of 'Oral & Maxillofacial Surgery', 'Maxillofacial Surgery' and 'Dental, Oral and Maxillofacial Surgery' are EU recognised medical specialties in the member states. Maxillofacial Surgery does not require dental training but the other two require a fully recognised five-year dental undergraduate training. The UK General Medical Council recognises 'Oral & Maxillofacial Surgery'.

The NHS White Paper, *Equity and excellence: Liberating the NHS*, proposed a health and social care system that is patient centric.(6) 'Patients do not belong to any one professional; they are the responsibility of all who take care of them.' (7) In the UK there is overlap in the scope of practice of OS and OMFS and so oral surgery care may be provided for a patient by a surgeon of either specialty, with NHS services structured around patient's needs. The scope of oral surgery spans the management of a wide range of conditions of varying complexity and so whilst much oral surgery may be undertaken in primary care, the complex surgery and care requiring general anaesthesia will continue to require a hospital setting.

The scope of Oral Surgery care undertaken by Specialists and Consultants is described by the General Dental Council training curriculum as follows. (1,8)

- 1.1 Extraction of teeth & retained roots/pathology and management of associated complications including oro-antral fistula
- 1.2 Management of odontogenic and all other oral infections
- 1.3 Management of impacted teeth; management of complications
- 1.4 Peri-radicular surgery
- 1.5 Dentoalveolar surgery in relation to orthodontic treatment
- 1.6 Intraoral and labial biopsy techniques
- 1.7 Treatment of intra-oral benign and cystic lesions of hard and soft tissues
- 1.8 Management of benign salivary gland disease by intra-oral techniques and familiarity with the diagnosis and treatment of other salivary gland diseases
- 1.9 Insertion of osseointegrated dental implants including bone augmentation and soft tissue management
- 1.10 Appropriate pain and anxiety control including the administration of standard conscious sedation techniques
- 1.11 Management of adults and children as in-patients, including the medically at risk patient
- 1.12 Management of dento-alveolar trauma and familiarity with the management and treatment of fractures of the jaws and facial skeleton
- 1.13 Management of oro-facial pain including temporomandibular joint disorders
- 1.14 Clinical diagnosis of oral cancer and potentially malignant diseases, familiarity with their management and appropriate referral
- 1.15 The diagnosis of dentofacial deformity and familiarity with its management and treatment
- 1.16 Diagnosis of oral mucosal diseases and familiarity with their management and appropriate referral.

The above have been described by levels of complexity 1, 2 and 3. Substantive and Honorary Consultants in Oral Surgery in the UK possess clinical competences that differentiate a Consultant from a Specialist and may include the following. (9,10)

- 1.1 Diagnosis and treatment of fractures of the jaws and facial skeleton
- 1.2 Diagnosis and treatment of congenital and acquired anomalies of the jaws
- 1.3 Advanced implantology and bone augmentation for oral rehabilitation
- 1.4 Diagnosis and treatment of anomalies and diseases of the TMJ
- 1.5 Diagnosis and treatment of salivary gland diseases

These conditions are also managed by Oral and Maxillofacial Surgeons alongside surgical care for head and neck cancers, major trauma and craniofacial deformity.

The GDC principal about clinical practice is that a professional provides care and treatment that is within their scope of practice and for which they are trained and competent. The NHS is developing such that the work force providing any specialist service will evolve based on patient needs and new evidence base for improved practice.

References

1. Oral Surgery Curriculum. General Dental Council. 2010.
2. European Union Directive 2001/19/EC. Official Journal of the European Communities. L206, 31.07.2001
3. The Specialty of Oral Surgery. The Board of the Faculty of Dental Surgery. 2009. The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London, WC2A 3PE
4. Modernising Medical Careers NHS. Report of the Academic Careers Sub-Committee of Modernising Medical Careers and the UK Clinical Research Collaboration March 2005. UK Clinical Research Collaboration, 20 Park Crescent, London W1B 1AL
5. European Union Directive 78/686/EEC, 1978.
6. Equity and excellence: Liberating the NHS. Department of Health. 2010.
7. Learning from Bristol: the report of the public inquiry into children's heart surgery at the Bristol Royal Infirmary 1984-1995 . Department of Health. 2002.
8. Specialist Training Committee. Oral Surgery. 2010 Specialty Advisory Committee in Oral Surgery The Faculty of Dental Surgery. The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London, WC2A 3PE.
9. Career Development Framework for Consultant Appointments in Oral Surgery. 2010 Specialty Advisory Committee in Oral Surgery, The Faculty of Dental Surgery. The Royal College of Surgeons of England, 35-43 Lincoln's Inn Fields, London, WC2A 3PE.
10. European Union Directive XV/E/8385/3/95-EN by the Advisory Committee on the Training of Dental Practitioners (ACTDP)

I also have some understanding of how other regions of the world accept and use the title 'Oral Surgeon'. For example, I was previously a member of the Licensing Board, Centre for Healthcare Planning & Quality, Dubai Health Care City, responsible for review of applications for Licenses to function within DHCC from healthcare professionals.

In summary the use of the title 'Oral Surgeon' is understood by the general public. The title has also

been helpful to transforming care in England with clear referral pathways from general dentists and GPs for oral surgery care, along with direct access by patients. The dental specialty of Oral Surgery is relatively new with growing numbers of training places and specialist and consultant Oral Surgeons but responsible for the largest proportion by far of the NHS budget for specialist dentistry in England. It was set up as a dental speciality by the General Dental Council of the UK who are responsible for the protection of the public. The title 'oral Surgeon' is also legally recognised and commonly used throughout Europe.

I hope that the above is helpful,

Kind regards,



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