

HELPING DENTISTS COUNSEL AGAINST TOBACCO USE

CDM Primus Notes is a newsletter of Columbia University's College of Dental Medicine. It is the sister publication of the annual CDM alumni magazine *Primus*.

2006
SPRING

Every eight seconds, according to the World Health Organization, someone, somewhere on the globe, dies from smoking. Research from the Centers for Disease Control and Prevention shows that smoking causes more deaths than alcohol, AIDS, illegal drugs, car crashes, fires, murders, and suicides combined. In spite of these frightening statistics, one out of every five Americans is still smoking. Tobacco use is the single most preventable cause of death in the United States.

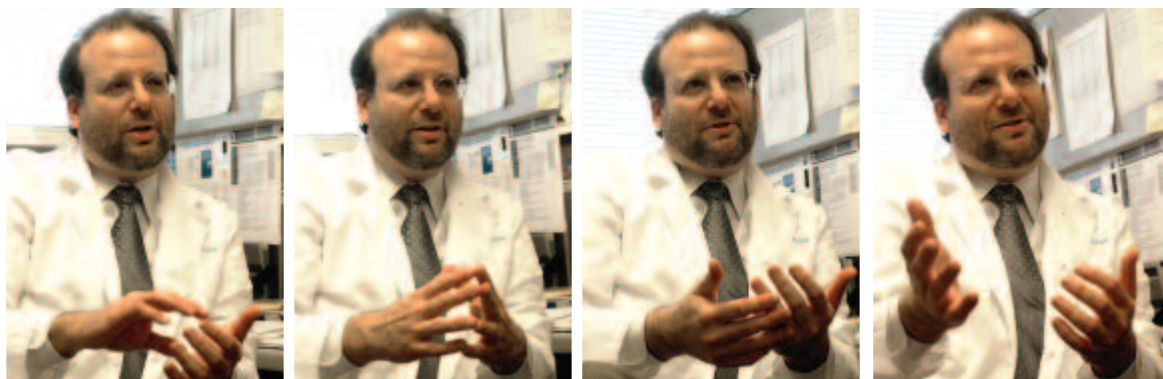
Some strategies for restricting tobacco use, such as the ban on smoking in restaurants and bars, have been effective. In New York, for instance, tobacco use fell below 20 percent in only a few years time. Raising taxes on tobacco products has also decreased use and encouraged some people to quit. And, although adolescents and college students are still attracted to the tobacco habit, anti-smoking campaigns such as The Truth, sponsored by the American Legacy Foundation, have had some positive effects as well. But, while smoking rates in the United States shrank by nearly 50 percent over the final three decades of

the last century, stopping the use of all tobacco products remains a major objective for health professionals, not only to save millions of lives, but for the additional benefit of saving the nation billions in health-related expenses.

To meet this enormous challenge, the US Public Health Service (USPHS) has developed evidence-based procedures as a guide for health professionals who are counseling their patients to quit smoking and other uses of tobacco. The USPHS approaches have received gen-

erous support from organized dentistry. The logic of asking dentists and dental hygienists to educate patients about the dangers of smoking is unarguable because of their opportunity to do so. No one else has the chance to examine the oral health status of dozens of patients every day, and on multiple visits! And, more than 50 percent of smokers see their dentists annually. The oral cavity is certainly the first place to look for evidence of tobacco use. Teeth discolored by nicotine are the most obvious evidence of a tobacco habit, but dentists and dental hygienists may also see an increase in periodontal disease, particularly periodontitis, in such patients, and could find signs of oral cancer during a dental examination.

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visits! And, more than 50 percent of smokers see their dentists annually. The oral cavity is certainly the first place to look for evidence of tobacco use. Teeth discolored by nicotine are the most obvious evidence of a tobacco habit, but dentists and dental hygienists may also see an increase in periodontal disease, particularly periodontitis, in such patients, and could find signs of oral cancer during a dental examination. The immediacy of feedback from a dental professional's observations could be a powerful motivator for dental patients to give up tobacco. Even so, tobacco-cessation activity does not play a prominent role in dental practice. An article published by Associate Professor of Clinical Dentistry David A. Albert, DDS, MPH (*above*), with colleagues from the College of Dental Medicine's (CDM)

from the DEAN'S DESK

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Dear Alumni and Friends,

I am pleased to announce that Dr. Jeremy Mao has joined the faculty of the College of Dental Medicine (CDM). Dr. Mao, who held appointments in both the dental and engineering schools at the University of Illinois at Chicago, was recruited to our campus through the combined efforts of CDM and the Department of Biomedical

Engineering (DBME) in the School of Engineering and Applied Science. His appointment as Associate Professor of Dentistry at CDM is in the Section Growth and Development, Division of Orthodontics.

Dr. Mao's research on mechanical modulation of bone and cartilage development, as well as his work with stem cells, has led to the engineering of a multi-tissue construct for the human temporomandibular joint. Additionally, his laboratory's engineering of adipose tissue from bone marrow mesenchymal stem cells suggests applications for reconstructive and plastic surgery.

One of the College's new scientific research areas — dental and craniofacial engineering — has been developed in close collaboration with the DBME, leading to several of that department's faculty receiving interdisciplinary appointments at CDM. As our faculty and students work with the engineering faculty, Dr. Mao's presence here will lend further emphasis to this field of investigation. Advances in materials research, both in restorative dentistry and implantology, are changing concepts in dental practice; the next vital breakthrough in our profession is likely to come from discoveries made in tissue engineering.

Please join me in welcoming Jeremy to the Columbia faculty.

Ira B. Lamster, DDS, MMSc
Dean

DENTAL SCHOOL CHANGES NAME to reflect educational doctrine

The Columbia University School of Dental and Oral Surgery has been renamed The College of Dental Medicine (CDM). The name change, which was approved by the University Trustees at their December 2005 meeting, represents the strong bio-scientific and academic direction set for the school by its founders in the early 20th century. Replacing "Dental and Oral Surgery" with "Dental Medicine" both simplifies and clarifies the central purpose of the dental school.

Ira B. Lamster, DDS, MMSc, dean of the College of Dental Medicine, believes that the new name represents a more accurate description of Columbia's approach to dental education. Dean Lamster explains that, "We prepare our students to help manage the total health of their patients..." CDM pursues this objective from the moment when entering students at CDM are enrolled for their first two years of dental school in basic science classes shared with their peers at Columbia's College of Physicians & Surgeons. Furthermore, both student and faculty at CDM are involved in cutting-edge research on oral health issues that correlate with medical and public health interests like diabetes, cardiovascular and cerebrovascular disease, problems resulting from pregnancy, and the adverse health effects of nicotine.



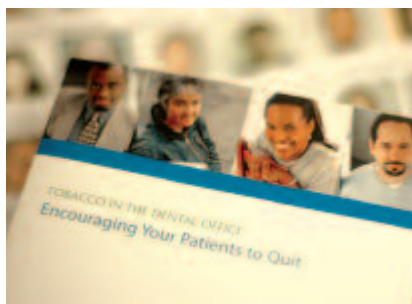
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from page 1, COUNSELING AGAINST TOBACCO

Section of Social and Behavioral Sciences: Kavita Ahluwalia, DDS, MPH; Angela Ward, RDH, MA; and Donald Sadowsky, DDS, PhD, in the December 2004 *Journal of the American Dental Association*, discusses several surveys that examine attitudes, knowledge, and behaviors among dentists as measures of their acceptance and assimilation of tobacco cessation counseling into everyday dental practice. Results from one study suggested that, compared to the tobacco-counseling behaviors of other health care clinicians, “dental providers ranked lowest in terms of both quantity and quality.” Specific research from similar studies showed that “only 30 to 50 percent of US dentists, and 25 percent of dental hygienists, asked patients about smoking... with less than 20 percent of dentists using an office-based, smoker-identification system, and less than five percent providing follow-up services to help patients quit.”

The usual methods of educating practitioners — conferences, group lectures, print materials — were shown to have little impact on improving professional practices, including that of dealing with the dangers of tobacco. Dr. Albert and his colleagues, therefore, decided to undertake a randomized clinical trial on educating dentists to establish a routine tobacco-cessation program for their patients. The research team chose a method known as “academic detailing,” a face-to-face method of training, reinforcing, and enabling positive changes in clinical behavior. Eighty-eight willing

participants, all eligible members of a large dental health maintenance organization (DHMO), were randomly assigned to an intervention (academic detailing) or control (practice as usual) group. For the first of four visits, dentist educators provided an hour-long, in-office lecture on introducing tobacco-use cessation in the dental office. Then, three short visits, averaging about nine minutes apiece and given by a dental hygienist detailer, were scheduled once a month for the next three months. Dentists were offered \$100 dollars to participate and were reimbursed by their DHMO for smoking-cessation encounters with patients. Continuing education credits were given to clinicians and staff who attended the introductory lecture.



Tobacco cessation counseling brochure for the dental office.

Initial resistance from dental office staff to tobacco-cessation counseling included concerns about patient confidentiality, too much paperwork, and the assumption that few patients used tobacco, or would not want to receive counseling on the benefits of giving up tobacco. But the credibility of the program’s educational objectives, the provi-

sion of concise, detailed materials highlighting the essential message, and follow-up visits for feedback and positive reinforcement of intervention techniques succeeded in modifying these initial barriers and resulted in modest but constructive changes in the clinicians’ practices. The outcome suggested that, in the future, academic detailing with reinforcement (additional visits) could increase both knowledge of tobacco-cessation counseling methods and improve the response of dentists and their staffs to the introduction of a tobacco-cessation program in their practice.

In the final analysis, the researchers’ careful records showed that the expenditure of both time and money for academic detailing on an office-by-office basis would probably be too costly to implement in a large dental network. They nevertheless noted that we can expect major changes in the attitude of dentists toward tobacco-cessation counseling. Compulsory courses on tobacco-use cessation for licensure, like one recently implemented in New York State, and an increase in didactic information on tobacco and tobacco counseling in the pre- and postdoctoral dental school curriculum should bring about positive changes. As succeeding generations of dentists graduate from dental school, it seems likely that their new knowledge will translate into more anti-tobacco counseling as part of the dental office routine, helping to maintain a healthier patient population.

FORMICOLA FUND to support NEW LEADERS IN ORAL HEALTH

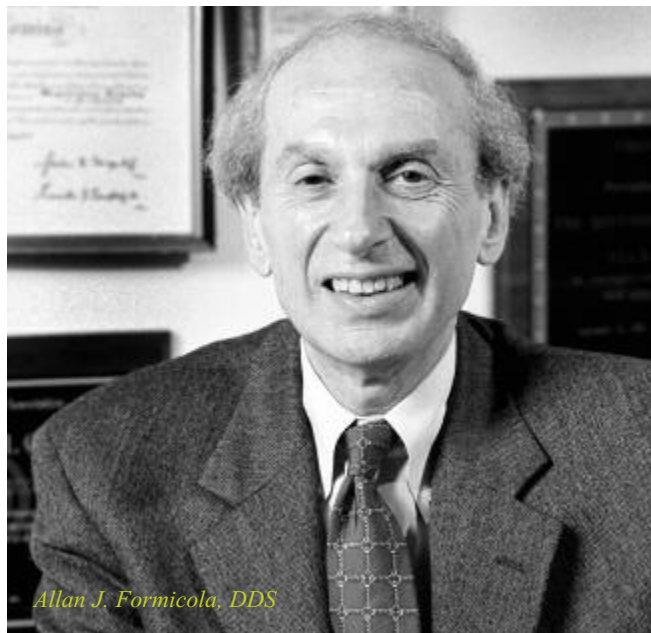
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Dr. Allan J. Formicola, for 23 years dean of Columbia's dental school and now Vice Dean of Columbia University's Center for Community Health Partnerships (CCHP), as well as co-director of the Robert Wood Johnson national program, "Pipeline, Profession, and Practice: Community-Based Dental Education," has always placed the health and well-being of people in medically underserved communities at the top of his agenda. He has used his experience in practice, in academia, and with policy makers to move dentistry and dentists from standard, conventional practice toward the elimination of disparities in oral health between different population groups. While groundbreaking work has been accomplished in the areas of community-based dental services and diversification of the oral health workforce, as Dean Formicola points out, "The safety net to obtain regular oral health care is [still] very limited."

A fund bearing Dr. Formicola's name has been established by the University, to help in developing the kind of leadership needed to solve the problem of oral health disparities in America. Friends and colleagues who share Dr. Formicola's concerns in this area have made initial contributions toward a \$1 million endowment for The Formicola Fellowship Fund, and Dr. Formicola has placed a \$100,000 bequest in his estate to provide further support.

The Fund, says Dean Formicola, will be dedicated to enhancing the training and preparation of dental professionals "willing to devote their energy to some aspect of this multifactorial problem." He suggests that it could be used for "a stipend, salary, and/or expenses for special training opportunities here at Columbia or at another institution; for such activities as a summer program for dental students at Columbia or at another school; for support of a DDS or post-doctoral student to take a special course in the Mailman School of Public Health or at another institution; or for partial salary support for a junior faculty member to pursue research in oral health disparity problems."

Gifts to the Formicola Fund should be directed to Melissa Welsh at the CDM Alumni Office, 212-305-6881.



Allan J. Formicola, DDS

Well
GIVING

to build a LEGACY

A gift to Columbia University can honor you and your loved ones for generations. Today there are many options for planning your gift, including:

- gifts through your will, or any aspect of your estate plan
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- gifts of appreciated property, such as stocks or real estate

Ask us how a tax-advantaged gift can benefit both you and CDM. Contact: Michelle T. Cass, Senior Director of Development, 212-326-5728 or mc2634@columbia.edu

CHARLES SOLOMON CC'55, SDOS'58

“rooting” for columbia

Dr. Charles Solomon is a well-known endodontist in Manhattan, but he might just as easily have become a successful periodontist. In fact, that was where he was headed when he enrolled in the four-year training program for periodontics at SDOS in the late 50's. Trainees then spent half their time on advanced courses in a subspecialty and used the other half to practice dentistry in an outside setting. The arrangement made it possible to keep learning while earning.

But when the young doctor found a part-time position with an endodontist, he soon gained enough knowledge of endodontics — and liked it so well — that he decided to take his boards in that specialty rather than the one he was training for in school. While attending to his busy practice over the past 35 years, Dr. Solomon has also enjoyed teaching endodontics at Columbia's dental school.

Like many of his fellow dental school graduates, Dr. Solomon entered dentistry because his father enjoyed the profession. As a young boy, Dr. Solomon loved going to his father's office on weekends to help with sterilization procedures and to learn about developing X-rays. Like other Columbians, he is also a born and

bred New Yorker, who grew up in Manhattan Beach, Brooklyn, before the Dodgers left town. He has never lived far from the water, which he loves, residing in Roslyn, Long Island, before recently moving to the upper Eastside of Manhattan, while also keeping a small summer cottage toehold on the beach at Southampton.

Columbia and New York mean a great deal to Dr. Solomon. He and his wife, Brenda, who is in real estate, have raised three children in their favorite environment, with outstanding results: one son is a cardiologist; another is an interventional radiologist; and their daughter is a consultant in the contemporary art market.

The Solomons' desire to express their appreciation for Columbia was recently manifested through the gift of a \$25,000 annuity to the College of Dental Medicine. Dr. Solomon chose the annuity form as a way of doing good, while also gaining the value of lifetime income for him and his wife. They have left their contribution with “no strings” attached, so that the College may use the funds where they are most needed. The Solomons' generosity will certainly offer CDM most welcome and greatly appreciated support in the future.

Dr. Charles Solomon and his wife, Brenda, (fourth and fifth from left) with their family.



CDM salutes...

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IRA B. LAMSTER, DDS, MMSC, dean of the College of Dental Medicine, delivered three lectures during the first week of August 2005 to the Australian Society of Periodontology (ASP). Dean Lamster was invited to Cairns, where the meeting was held, by the president of ASP to speak on: Oral infection and systemic diseases; periodontal diagnosis and diagnostic testing; and controversies concerning periodontics. During his visit, the dean also met with his counterpart from the Dental School of the University of Sidney. (*right: Dean Lamster with his wife, Gail, in Australia.*)



First place award in the Table Clinic Competition at the November 2005 Greater New York Dental Meeting (GNYDM) went to CDM's KEITH DASILVA '07. The project, for which Keith received an award of \$500, dealt with the function of saliva in the defense against caries,

specifically the role of Agglutinin and IgA in bacteria binding. One of 19 projects in competition at the GNYDM, Keith's project had previously won first prize at CDM's Birnberg Day student competition in April 2005.



THOMAS J. BOYLE, DMD, assistant clinical professor in the Division of Operative Dentistry at the College of Dental Medicine, was named the first recipient of the Stanislaw Brzustowicz Award for Excellence in Teaching. The new award was created by the Association of Dental

Alumni in memory of Dr. Brzustowicz, an esteemed faculty member at Columbia's dental school for more than 60 years. It will be presented annually to a faculty member teaching at Columbia for less than five years, who has shown dedication and compassion to his or her students. Dr. Boyle was honored at the CDM Reception during the Greater New York Meeting in November 2005.



from Cuba to CDM

"A new beginning" is a cliché that can seem meaningless. Gilda Duarte and Yandresco Quintana, however, made a life choice that can be described in no other way. Duarte and Quintana, both second-year students at Columbia's College of Dental Medicine, had already spent nearly five years in dental school before entering CDM. That was in Cuba. So, when Yan was picked in the United States visa lottery, the couple decided to get married, leave Cuba, and start all over again.

A new beginning for Gilda and Yandresco meant not graduating from dental school in Cuba, even though they were seniors. Doing so would have made them accredited health professionals, not allowed to leave the country. Instead, Duarte and Quintana, who lacked college degrees because they entered dental school straight from high school, enrolled at Miami's Florida International University. After earning BAs in chemistry in only two and a half years by taking as many as 16 credits a semester, they headed north to see New York. On an informal visit to Columbia, the couple dropped in at the admissions office where "a very nice woman" made them feel welcome. It helped them decide on CDM, a choice that turned out to be right for everyone.

Neither has any regrets about starting again. The dental techniques they are learning at CDM are "very different" from those taught in Cuba and, says Gilda, "When we went to a museum of dental antiquities here, we saw instruments on exhibit just like those we used at school in Cuba!"



MARK YOUR CALENDAR for these UPCOMING EVENTS

Wednesday, April 19

**BOSTON ALUMNI
STUDY CLUB MEETING**

"Changing Concepts of Periodontal Therapy," Speaker: Dr. Paul Kamen '75.
6:30 to 9:00 pm, Maggiano's,
Boston, MA. 2 CE Credits.

Friday, April 21

SINUS ELEVATION SURGERY

9:00 am to 5:00 pm, Columbia University
Medical Center. 6 CE Credits.

Monday, April 24

ANNUAL OKU INDUCTION DINNER

6:00 to 8:30 pm, The Faculty Club,
Columbia University Medical Center.

Tuesday, April 25

**ALUMNI RECEPTION:
GREATER LONG ISLAND DENTAL MEETING**

5:30 to 7:30 pm, Hilton Hotel, Melville, NY.

Wednesday, April 26

**NEW JERSEY ALUMNI
STUDY CLUB MEETING**

"Interpretation of Periodontology in 2006,"
Speaker: Dr. James B. Fine.
6:30 to 9:00 pm, Nobel Biocare Training
Institute, Mahwah, NJ. 2 CE credits.

Friday, April 28

**ALUMNI RECEPTION: CALIFORNIA DENTAL
ASSOCIATION SPRING SCIENTIFIC SESSION**

6:00 to 8:00 pm, Anaheim Hilton,
Anaheim, CA.

Monday, May 1

**5TH ANNUAL HENRY CHANG JR. '74
MEMORIAL GOLF OUTING**

Golf tournament, lunch, reception, dinner.
12:00 to 8:00 pm, Rockland Country Club,
Sparkill, NY. \$195.

Friday, May 5

CLASS REUNION DAY

Five-year reunion classes: 1936 to 2006,
CE session, tours, cocktail reception, dinner.
9:30 am to 8:00 pm, Columbia University
Medical Center.

Saturday, May 6

**ALUMNI RECEPTION: AMERICAN
ASSOCIATION OF ORTHODONTISTS MEETING**

7:00 to 9:00 pm, Venetian Resort Hotel
Casino, Las Vegas, NV.

Wednesday, May 17

COLUMBIA UNIVERSITY COMMENCEMENT

10:30 am to 12:00 pm.

Thursday, May 18

**COLLEGE OF DENTAL MEDICINE
GRADUATION CEREMONY**

Reception to follow.
11:00 am to 12:30 pm,
Columbia University Medical Center Garden.

Monday, May 22

**LONG ISLAND ALUMNI
STUDY CLUB MEETING**

"Tobacco Cessation for the Dental
Practitioner," Speaker: Dr. David Albert.
6:30 to 9:00 pm, Queens County Dental
Society, Jamaica, NY. 2 CE credits.

Saturday, May 27

**ALUMNI RECEPTION: AMERICAN ACADEMY OF
PEDIATRIC DENTISTRY ANNUAL SESSION**

6:00 to 8:00 pm,
Westin Cincinnati, Cincinnati, OH.

Thursday, June 1

**12TH ANNUAL DENTAL ALUMNI
EVENING SEMINAR**

"Botox for Oromandibular Dystonia and
TMD," Speaker: Dr. Andrew Blitzer '70.
6:00 to 9:00 pm, Union Square Ballroom, NYC.

Friday, June 2

**BENJAMIN TENEBBAUM LECTURE IN
PERIODONTICS AND PERIODONTAL
ALUMNI LUNCHEON**

Speaker: Professor Niklaus P. Lang, University
of Berne, Switzerland. 12:00 to 4:00 pm,
Columbia University Medical Center.

Friday, June 16

**GERONTOLOGY AND GERIATRICS: DENTISTRY
FOR AN AGING POPULATION**

Speakers: Dr. Lynn Tepper,
Dr. Martha Baker, Dr. Paul Kamen '75.
8:00 to 11:00 am, Columbia University Club.
3 CE Credits, \$125.

top:

At the Alumni Reception held at the January 2006 Yankee Dental Congress: (left) Alumni Association President Sarina Reddy '93 talking to Adrienne Fang '03, (rear) Capital Campaign Chairman Thomas Connolly '77, Perio '80 speaking with Karam Ashoo '03, and (right) Arthur Ashman '61 in conversation with Gail Lamster.

bottom:

At the Alumni Reception held at the November 2005 Greater New York Dental Meeting: (left to right) President of the New York County Dental Society and Assistant Clinical Professor in Community Health Lawrence Bailey joins Associate Clinical Professor in Orthodontics Melvyn Leifert and Alumni Association Vice President and Assistant Clinical Professor in Pediatric Dentistry Lois Jackson '77, Peds '80.



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SHAILA GARASIA '95

Q. DR. GARASIA, YOU BECAME DIRECTOR OF DENTAL SERVICES AT THE WESTSIDE HEALTH CENTER IN ROCHESTER, NEW YORK, VERY SOON AFTER EARNING YOUR DDS AT COLUMBIA. HOW DID THAT HAPPEN?

A: After graduating from Columbia, I went to Westside, a National Health Service loan repayment site. Helping the diverse and underserved population there inspired me to seek a leadership role in community dental service, and in October 2001, I was offered the directorship.

Q. DID YOU ALWAYS WANT TO BE A DENTIST?

A: Oh, no. I intended to earn a PhD in biology, but worked part-time as a dental assistant while still at Hunter College, and discovered my passion. I took the DAT, did well, and received early admission at Columbia.

Q. THAT DECISION TURNED INTO A PRETTY BIG JOB. HOW MUCH WORK IS INVOLVED?

A: Well, we have three full-time dentists, including me, and two full-time hygienists. We see 3,000 patients and have about 10,000 visits every year.

We've just opened our second location and soon will hire a fourth dentist.

Q. WHAT ABOUT YOUR ADMINISTRATIVE WORK?

A: As director, I report to the CEO and Board of Directors, and am involved in daily operations and major decisions. I work in the practice four days a week and attend to administration on the fifth day — and sometimes on weekends, too, when I write grants.

Q. YOU HAVE TO RAISE MONEY, TOO?

A: I do. In 2004-5, I was able to attract \$92,000 in local funding to underwrite five dental chairs, a panoramic X-ray, hand equipment, and instruments for our new second location.

Q. DO YOU HAVE TIME FOR ANYTHING ELSE?

A: My husband and I are "wish granters" for the Make a Wish Foundation. Recently, we took a 19-year-old girl, who was in remission from cancer, on a shopping spree. She's poor but optimistic, and was so delighted with the computer and other equipment that MAW bought to help with her college work.

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College of Dental Medicine

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