global outreach
NOMA DISEASE IN AFRICA
You may notice that this issue of Mdental is larger than usual. Our theme—service and outreach—is at the core of the Dental School’s mission and warrants expanded coverage. In the pages that follow, you will see the breadth of our dedication to serving the needs of our local, state, and international neighbors.

From our urban Baltimore location, we are proud to be Maryland’s single largest provider of oral health care. This often-cited statistic translates into outreach across rural areas, county health departments, inner-city health centers, and visits to senior centers and schools. Each week, patients line up early in the morning, regardless of the weather, to receive care in our clinics.

But our faculty and students don’t draw the line at our Maryland border. Our cover story, and other articles in this issue, highlight the School’s commitment to our global family. Africa, Central America, Asia, and the Middle East are more than points on a globe. They represent areas where oral health care is desperately needed—and welcomed.

In addition to patient care, we continue to engage in meaningful collaborations with other institutions around the world. The exchange of knowledge, resources, and ideas is critical to ensure our continued ability to share and shape the future of dental education, oral health, and research.

We are fortunate to have outstanding faculty, students, staff, alumni, and friends who provide excellent patient care and community service. Many of these individuals donate countless volunteer hours to further the cause of improving society’s oral health. I am proud of the examples set by these role models.

After you read and learn more about what we do and why we do it, I urge you to make a commitment to help the Dental School continue our mission of providing exemplary service and care at home and abroad. Please review the information on page 50 to find out how you can support our cause. I welcome your comments on this special issue and your suggestions for creating more avenues to bring care to those who need it most.

Christian S. Stohler, DMD, DrMedDent
Dean
CONTENTS

SCHOOL NEWS 2

PROFESSIONAL NOTES 14

ALUMNI PROFILE 20

DEVELOPMENT 22

COVER STORY 28

GLOBAL MARYLAND 32

STUDENT NEWS 45

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Mdental is published twice a year for alumni, friends, faculty, staff, students, and parents of the Baltimore College of Dental Surgery, University of Maryland Dental School. It is produced with assistance from the University’s Office of External Affairs. We welcome your comments, news, and suggestions. The editorial staff reserves the right to revise materials received. Send your comments to: Regina Davis, editorial director, Dean’s Office, University of Maryland Dental School, 666 West Baltimore Street, Baltimore, MD 21201.
Dental School Reorganizes

As of Jan. 1, the Dental School has reorganized to better serve patients and educate students. A new Clinical Operations Board (COB) now oversees all facets of the School’s patient clinics. This new five-person board is creating a more “hospital-like” environment for patients, staff, and students alike.

“We are, in essence, creating a dental hospital,” says Dean Christian S. Stohler, DMD, DrMed Dent. Through these changes, patients will experience greater efficiency and even better customer service.

According to Stohler, this change marks a first for dental schools in the United States. “The new structure will help identify and address areas that will allow us to deliver optimal patient care, provide an exceptional framework for students, and facilitate an ideal work environment for clinic staff,” says Stohler.

This reorganization is a positive change, and is not designed to eliminate any positions, notes Stohler. It is more likely that the School will need to add more staff in the future, he adds.

The new board consists of Harry Goodman, DMD, chair and executive director of community programs; George Williams, DDS, executive director, clinical programs administration; David George, DDS, executive director, clinical affairs; Louis DePaola, DDS, executive director, biosafety and continuous quality improvement; and Roger Eldridge, DDS, executive director, special patient programs. Board members are meeting with consultants to fine-tune key areas of responsibility, all in an effort to ensure a smooth and effective transition.

“Patient care currently provided at the Dental School is excellent, and our student practitioners are provided with first-rate faculty coverage on the clinic floor,” says Goodman. “The goal of the COB,” he adds, “is to take full responsibility for the management of the Dental School clinics, but in a manner that enlists, incorporates, and values input and collaboration from the Dental School’s academic center.”

Goodman adds that patient care will be enhanced by the board’s ability to work in tandem with the School’s academic center to allow students as early as in their first year in dental school to immediately apply the didactic knowledge that they recently acquired in the classroom to a clinical setting.

“These procedures would be performed within a vertically integrated team structure, where there are upper-class student mentors and faculty oversight, much akin to a team of attending physicians in a hospital setting. The student practitioners benefit from such an approach because they are exposed much earlier to clinical procedures in tandem with what they recently learned in class and are exposed to the experiences and expertise of others in a team approach,” Goodman says.

As important, he stresses, is the benefit patients receive from a balance of the talents, skills, and knowledge of a multitude of oral health professionals. He says that this approach, along with other measures being instituted by the COB, will allow more patients to be treated for both routine and emergent care.

Goodman says that there also are plans to expand services to off-site facilities in other parts of Maryland to better accommodate patients who don’t live in the Baltimore metropolitan area.

“The COB also aims to institute, clarify, or expand policies and activities related to occupational exposure control, risk management, cost efficiencies, quality assurance, professional clinical conduct, patient flow and communication, and the overall decorum of the Dental School building,” he adds.

Academic, student-focused operations will continue to be administered by the appropriate associate deans and department chairs. Both the academic component and the clinic board will report to Stohler. Open forums with the dean were held in November for faculty, staff, and students to learn more about how this change would affect the School.
Norman Tinanoff, DDS, MS, chair of Health Promotion and Policy, gave a series of lectures and demonstrations to two dental schools in India in March. Tinanoff, along with Dr. T.P. Sivakumar, BDS, MS, a fellow in the department, arrived well-equipped to present advanced techniques to the Ragas Dental College and to the University of Manipal.

Besides bringing laptop, flash drives, etc., for PowerPoint presentations, they carried with them a complete dental nitrous oxide unit. The nitrous oxide unit is, perhaps, the only one in southern India. As well as lectures and demonstrations on nitrous oxide, dental trauma, and restorative dentistry, Tinanoff and Sivakumar performed a live videotaping of an oral rehabilitation of a 6-year-old in the OR setting at Ragas Dental Hospital. “The biggest problem,” says Tinanoff, “was that the cameraman was leaning on [either] my head or shoulder for 2 hours.”

Tinanoff traveled to the University of Manipal, on the west coast of India, where he gave lectures on caries diagnosis and early childhood caries. In addition to the professional aspects of the trip, Tinanoff saw areas of Madras that were affected by the tsunami.

The Department of Health Promotion and Policy Adds a New Division

As of Jan. 1, the Department of Health Promotion and Policy has added a new division to its existing divisions of Dental Hygiene, Health Services Research, and Pediatric Dentistry. The new division, General Dentistry, headed by D. Douglas Barnes, DDS, includes the General Practice Managers, the Advanced Education and General Dentistry (AEGD) Program, and Special Patient Care.

In the past year, the department has initiated several positive changes. The Division of Dental Hygiene will expand its entering class to 30 students, and it is placing greater emphasis on service learning, especially in underserved sites in Maryland. Dental Hygiene also is exploring collaborative arrangements with several community colleges, which could greatly expand the class size and the department’s influence across the state. Substantial curricular changes, led by Sheryl E. Syme, MS, RDH, will be necessary to teach dental hygiene students at these community colleges via distance learning.

The Health Services Research division continues to be active with grant applications and submissions, and is aligning its coursework to more fully emphasize critical thinking. The first-year course, Introduction to Dental Research, will now have a directed-literature search lab session at the Health Sciences and Human Services Library and several independent applied lab sessions. The new third-year course, Applied Scientific Evidence, emphasizes the critical appraisal of the literature and includes four faculty-directed group lab sessions. These two courses will help students to better understand evidence-based dentistry, as well as provide them the basis for a greater scientific rationale for treatment planning in the third and fourth years.

The Division of Pediatric Dentistry continues to foster significant efforts at community sites through its Fellowship Program. These seven Pediatric Dental Fellows work at community health centers throughout the state, supplying dental care to underserved children. The Externship Program has been shifting its emphasis over the past few years to have greater impact for Maryland’s underserved patients. The externship also now gives credit to those individuals who are providing care at international sites. It is hoped that next year the program will increase to three weeks.
Dental Meetings Provide Platforms for Enrichment

During the second week in March, Baltimore was the host city to two important dental meetings. The American Dental Education Association (ADEA) held its annual session and exhibition from March 5-9, and the International Association for Dental Research (IADR) held its general session and exhibition from March 9-12.

The convergence of these events allowed the Baltimore College of Dental Surgery, University of Maryland Dental School to meet with members of the dental education and research communities; expose students to a diversity of topics, presenters, and institutions; and provide an opportunity for visitors to tour the current dental facility and learn more about the new building.

Moreover, the Dental School reaffirmed existing international ties and established new relationships. Dean Christian S. Stohler, DMD, DrMedDent, met with representatives from Thailand, and signed a memorandum of understanding that established a formal collegial relationship between the University of Maryland Dental School and Chulalongkorn University, Bangkok, Thailand. The dean was presented with a Plaque of Appreciation from the School of Dentistry, Kyung Hee University, Seoul, Korea. Stohler also met with participants from Canada, Finland, Australia, Kuwait, and Japan.

“Part of our mission, particularly as the world’s first dental school, is to continue to foster our international ties with other dental institutions,” says Stohler. “Faculty, students, and staff members benefited from the exchanges that took place. The value of building and maintaining collegial relationships should not be underestimated.”

That sentiment was echoed by Associate Dean Margaret B. Wilson, DDS, MBA, who chaired ADEA’s predoctoral advisor’s workshop. “Having had these meetings in Baltimore gave many more of our students the opportunity to attend, as well as actively participate in many of the sessions and serve as ambassadors of our school,” she says, adding that, “I was pleased by the level of enthusiasm displayed by students and faculty before, during, and after the meetings.”

Many members of the Dental School and the University of Maryland were recognized during the meetings, including the following individuals:

Carol F. Anderson, DDS, MS, received the 2005 Harry W. Bruce, Jr. Legislative Fellowship Award during the ADEA meeting.

Jacquelyn L. Fried, RDH, MS, associate professor and director of the Division of Dental Hygiene, was elected chair of the ADEA’s Special Interest Group on Tobacco Free Initiatives.

M. Elaine Parker, RDH, MS, PhD, associate professor and graduate program director, Department of Dental Hygiene, served as delegate to the 82nd ADEA House of Delegates, representing graduate program directors, in the Council on Allied Program Directors. Parker is chair-elect of the Council of Allied Program Directors’ Conference Planning Committee, which will meet this June; she also convened the first formal Graduate Program Directors’ Meeting at ADEA, during which issues pertaining to graduate dental hygiene education were discussed.

Continued on page 5
Judith Porter, DDS, EdS, assistant professor, Restorative Dentistry, was elected secretary of the Dental Anatomy and Occlusion Section of ADEA.

University President David J. Ramsay, DM, DPhil, received an IADR Honorary Membership. The three most recent (living) IADR past presidents may select an honorary member who has made significant contributions to or supports dental research.

At the opening ceremony of the 2005 Annual Session of the ADEA, Professor and former Dean Richard Ranney, DDS, MS, was recognized with an ADEA Presidential Citation for contributions to dental education and dentistry, particularly work on licensure issues.

Werner Seibel, PhD, received the 2004 Faculty Advisor Award from the Student Clinicians-American Dental Association during the ADEA meeting.

For some faculty at the Dental School, meetings like these can be an important catalyst to inspire the next generation of dental researchers.

Chair of the Department of Biomedical Sciences, Ronald Dubner, DDS, PhD, was struck by that possibility. “The meeting was a wonderful opportunity for our students to see dental research in action,” he says. “I remember the first IADR meeting I attended, and the enthusiasm it generated in me to further my career in research—and this meeting was much larger and much more impressive!”

New Building Makes Cover

The new dental facility was the featured cover story for Mid-Atlantic Construction magazine in March. In their special section, “University Projects: Top of the Class,” the three-page article detailed the architectural design and key features.

Dean Stohler is quoted as saying, “This new facility reinforces our commitment to serve, heal, and educate. It’s not about building a new school, but building lives.”
In March, the Dental School named Drs. Ashraf Fouad and Mark Reynolds as new department chairs. Fouad will chair a department of the combined disciplines of endodontics, prosthodontics, and operative dentistry. Reynolds will chair a department focused on periodontics.

Concerning his new department, Fouad says, “I think the new department will build on existing unique strengths in the disciplines and establish more collaborations, cross teaching, and curricular development in the new parent department.” He adds that there are many areas of common interest among the disciplines, such as pulp biology, restoration of endodontically treated teeth, and treatment planning for compromised teeth.

Noting the importance of collaboration and the exchange of ideas among faculty, Fouad says, “Collaboration among the three disciplines will result in more effective service to patients and teaching of students,” adding that students need to learn how to plan and conduct treatment “with the whole oral health of the patient in mind, rather than perform specific, seemingly unrelated, procedures.”

In his new role, Fouad says that he hopes to be able to initiate discussions and collaborations to develop efficient and effective teaching methods. “We need to re-examine our curriculum and introduce material on novel concepts, contemporary practices, and state-of-the-art technologies.” His goal is to move the department more rapidly to embrace and use an electronic patient record system to provide more effective service and generate preliminary research hypotheses more easily. Fouad would also like to have more effective documentation and measurement of outcomes of patient experiences to assure quality and better serve patients. His plans also include stimulating more hypothesis-driven research initiatives in the department, generating preliminary data, and continuing to apply for grant support of research endeavors.

Reynolds plans to build on the excellent foundation established in the periodontics department. “The department has a history rich in achievement and contributions in education, service, and research,” he says. In the area of research, his goal is to “develop a focused emphasis on basic, applied, and translational research in tissue regeneration.”

This new emphasis will complement ongoing studies on dental implants and mucosal immunity. “The translation of basic knowledge into new, evidence-based clinical therapies is central to advancing oral health in the community,” says Reynolds.

Reynolds says that he would like to enrich the educational programs in periodontics by incorporating “technology-based” clinical experiences that develop skills and reinforce key elements of the curriculum. In addition, efforts are underway to incorporate interactive small-group, case-based discussions on evidence-based issues related to the classification, diagnosis, and treatment of periodontal diseases.

A clear educational challenge, he notes, will be “to develop a dynamic curriculum that is responsive to the increasingly rapid advances in diagnostics and therapeutics, such as tissue engineering.” In the postgraduate program,
he also foresees the addition of a fourth year for selected residents to complete both the certificate in periodontics as well as clinical training in fixed periodontal prosthesis. Discussions are underway to develop an implant fellowship program for periodontists and prosthodontists.

The primary objective for these changes, says Reynolds, is to ensure that students acquire the most advanced knowledge and skills in periodontics and implantology and are trained to the highest standards of patient-centered care to meet the changing needs of a diverse population.

The Dental School’s alumni are perceived by both chairs as important to the success of their respective departments. “I would like to foster and promote communication with the alumni to ensure that the School remains a valuable resource for them, and work with them to ensure the success and effectiveness in our future endeavors,” says Fouad.

In addition to these changes, the School is also conducting a nationwide search to find a permanent chair for the Department of Orthodontics. This position is expected to be filled in 12 to 14 months. The search committee is chaired by Ronald Dubner, DDS, PhD, and includes members who represent various interests: Fred Preis, DDS (American Association of Orthodontics); Edgar Sweren, DDS (alumni); Monica Schneider, DDS, MS (junior faculty); Norman Capra, PhD (basic sciences); and John F. Caccamese, MD, DMD (orthognathic surgery).

During that time, Stuart Josell, DMD, MDentSc, will continue to provide leadership as interim chair of the department and will work with the administration as it moves toward filling the post.

New Faculty from Sister School

Two new faculty members, Drs. Abraham and Monica Schneider, joined the Dental School this spring in the Department of Oral Pathology and the Department of Orthodontics, respectively. The husband and wife were formerly at the University of Michigan, where Abraham received his PhD and Monica taught in the Department of Orthodontics. In Peru, the Schneiders received their dental degrees from the Dental School’s sister institution, the Peruvian University Cayetano Heredia.

Aside from the relationship between the two schools, Abraham Schneider cites the Dental School’s “well-known reputation as an outstanding institution for dental education” and “its commitment to support novel venues in biomedical research, especially now, under the leadership and vision of Dean Stohler,” as reasons to join the Dental School.

His investigations are focused on cancer research, specifically, studies aimed at elucidating molecular mechanisms involved in the pathogenesis of head and neck cancer as it relates to microenvironmental changes in oxygen availability, also referred to as hypoxia.

The Dental School, says Monica Schneider, was attractive to them because, “We wanted a school with opportunities for clinicians and researchers.” She adds that, although she is a clinician and her husband is a researcher, they both enjoy teaching as well.

The new dental facility is another positive aspect of their decision. “I am looking forward to the new building,” she says. “The facilities are going to be great, and it’s a great opportunity to be a part of that. The building will be the best in the country.”

“Everybody’s been really welcoming,” she adds. “I think we will be very happy here.”
As chair of the Clinical Operations Board (COB), Harold Goodman, DMD, MPH, is in a prime position to oversee the optimal patient care provided by the Dental School and to create positive change in and out of the School.

Goodman has been at the forefront of creating better care for children, communicating the important role of oral health providers, and working to maintain and exceed the Dental School's high standards of clinical care.

A professor in the Department of Health Promotion and Policy, Program of Pediatric Dentistry, he directs the Pediatric Dental Fellowship Program, which provides care to underserved children throughout Maryland. Goodman previously served as the Maryland state dental director at the Maryland Department of Health and Mental Hygiene and received his dental degree from the University of Medicine and Dentistry of New Jersey.

Although the general public, as well as many policymakers, often do not grasp the significance of oral health, Goodman uses that lack of knowledge as an opportunity to fill the information chasm. His master’s degree in public health from the Johns Hopkins School of Hygiene and Public Health, along with his completion of a dental public health residency program at the University of Michigan, gives him a strong academic background to fortify his desire to increase awareness of oral health issues.

“The impact of oral health on systemic, psychological, and sociological health is often poorly understood, and what results is a public oral health care delivery system ill-equipped to address the needs of poor individuals,” he says.

To that end, he and colleagues from the University of Maryland and various professional dental organizations in Maryland are trying to improve the lot of disenfranchised populations through legislative actions aimed at facilitating their use and understanding of the oral health care system.

Goodman’s background makes him especially sensitive to the needs of the poor and disenfranchised. His family, he says, inspired him to help those in need. That inspiration was cemented by his environment. “I became interested in health care because I witnessed a lot of suffering from various health problems in the working-class neighborhood where I grew up, and was especially attracted to dentistry because it is so outcome oriented.”

His sensitivity to patients reaches beyond oral health and includes the overall well-being of his patients. Child abuse and neglect are important issues for Goodman, who says, “There is nothing more disturbing for me than to see vulnerable and dependent children physically and/or emotionally injured through abuse or neglect.”

The father of two healthy and happy sons, he sees it as an obligation to report suspected child abuse or neglect. During more than 10 years as a dentist in a community health center, Goodman says he witnessed various manifestations of abuse and neglect, including dental neglect.
“As dental providers, we can offer immediate benefits to our patients, even in the most basic primary care settings, and in return, receive lasting gratification.”

“As dentists, we are in an advantageous position to note subtle physical and/or emotional changes in our patients because we routinely see them on a periodic basis,” he says. “But we need to follow up on our observations and fulfill our legal obligation to report should child abuse or neglect be suspected; the ramifications could be too great if we fail to do so.”

Goodman’s experience and devotion to patient care gives him an excellent foundation as the chair of the School’s new Clinical Operations Board. The board is an opportunity for the School to leverage its resources to become an even greater patient-centered and user-friendly clinic that works completely in tandem with the Dental School’s academic center. The clinics will take on the look of a dental hospital in ensuring that patients’ specific interests and needs are as highly considered and incorporated into the fabric of the institution as the needs and interests of the dental students, he says.

“The goal of the COB is to take full responsibility for the management of the Dental School clinics, but in a manner that enlists, incorporates, and values input and collaboration from the Dental School’s academic center,” says Goodman.

Respect is another key element of the COB, he adds, stating, “The COB also wants to ensure that patients from all walks of life are treated with respect and dignity, and that their interaction with the Dental School—whether it be by telephone, electronic, or in-person—is a satisfying one.”

The changes that are now underway will have a seamless transition to the new building. Goodman compares the impending move to moving in general. “While moving to any new building can be exhausting, whether it be to a new apartment, house, or office building, it also generally provides us with an opportunity to throw out the old and bring in the new. I think the new building provides us with a similar opportunity. I view it both as a symbol and opportunity for systematic change, whereby we discard some of the methods and philosophies that are not working for us anymore, and then reorganize and try new ways to ensure that we remain a proficient and relevant oral health center for patient care.”

No matter which hat he wears—head of the COB, dentist, or agent for policy change—Goodman sees himself in a rewarding, satisfying career.

“As dental providers, we can offer immediate benefits to our patients, even in the most basic primary care settings, and in return, receive lasting gratification. That’s why I am so proud to be a dentist.”
Update on the Dean’s Faculty

As of Jan. 1, the Dean’s Faculty Enrichment Program has welcomed 50 additional Dean’s Faculty members to the Dental School’s volunteer faculty. These additions bring the total number of Dean’s Faculty to 145 individuals who volunteer their time at the Dental School. An additional 60 volunteers participate in local communities as Dean’s Faculty members, primarily as clinical preceptors in the Extramural Training Program. Although the Dean’s Faculty Program was initiated in January 2004, faculty recruitment did not begin until last April, after 3 months of program development.

Mission
The purpose of the Dean’s Faculty Program is to enrich the University of Maryland Dental School through a large cadre of dedicated volunteers who contribute significantly to the School by playing an active and important part in the School’s programs of education, research, service, and development.

Goals
Dean’s Faculty members will be enriched as a result of this program. They will receive tangible benefits in professional development, recognition within the School and community, as well as the intrinsic reward of making a difference.

Participating in the Dean’s Faculty Program is relatively simple. The School will ensure that parking, access to needed information, work space, and other needs are consistently met. As a result of the program, full-time faculty will be enriched by having the opportunity to spend more time and effort in research and scholarship. The program will also enrich the lives of students by providing quality instruction, mentorship, and early exposure to the “real world” of dentistry.

In addition to teaching, Dean’s Faculty members will enhance the Dental School by engaging in numerous additional activities such as: research, service, recruitment, and admissions and development.

The mutual benefits to both the members of the Dean’s Faculty and the School will be establishing a partnership that contributes to advancing the Dental School’s mission and goals while simultaneously providing an opportunity for the Dean’s Faculty members to address their own professional and personal development needs through service to the Dental School, its faculty, students, and patients.

Comments about the program by Dean’s Faculty members, other Dental School faculty and administrators and, most important, dental and dental hygiene students have been extremely favorable. These volunteers are playing an increasingly important role in the Dental School, and Dean Stohler envisions increased opportunities for students to be mentored by dental professionals. The School is continually looking for outstanding members of the dental community, including dentists, dental auxiliaries, family members, and other individuals who may be interested in becoming a member of the Dean’s Faculty. Please call Warren Morganstein, DDS, MPH, at 410-796-7146 or visit www.dental.umaryland.edu and click on Dean’s Faculty for more information.

Other benefits to Dean’s Faculty members include:

- In-service training
- Continuing education credit for teaching and attending classes
- Invitations to appropriate faculty events
- Study-club membership and presentations
- Special social activities
- Work space and use of computers in the School
- E-mail accounts
- Improved parking accommodations
“The Dean’s Faculty is an invaluable resource to the students here at the School. Since Drs. Stohler and Morganstein made this program a reality in January 2004, it has had 145 volunteers step forward to take advantage of the experience. Most of the Dean’s Faculty spend time on the clinic floor, advising students as they begin their young, impressionable clinical careers.

“My classmates have expressed time and time again how much they appreciate having this ‘real world’ influence in the School setting. I have had an incredibly positive experience with the Dean’s Faculty. They are so helpful, providing advice to students on different, proven techniques they have used on patients. It provides a very tangible link to the everyday practice of dentistry outside the walls of the School. These volunteers bring a fresh outlook, and their positive energy is contagious.”
— John Mohler, ’06

“Dr. Stohler has taken a novel approach to the faculty shortage that is affecting dental schools nationwide with his introduction of the Dean’s Faculty Program. This program is designed to give the students insight into ‘real world’ dentistry, which they can then apply to the basic skills they have been developing as part of a traditional dental education. I must say, the program has proven to be a wonderful success. The fresh ideas and enthusiasm the new members of the Dean’s Faculty bring to the School are greatly appreciated.

“I have yet to find a member who isn’t more than happy to stop and speak with any student about virtually anything involving the practice, business, and technology associated with the profession. These dentists take time out of their busy lifestyles to give something back to our institution, and the enthusiasm, knowledge, and expertise they bring is something we should all be grateful for.”
— Jeff Patrician, ’05
Faculty News


Enwonwu was also a featured speaker during the World Health Organization’s “Meeting on Oral Health in Ageing Societies” in Kobe, Japan, June 1-3.

Ashraf Fouad, DDS, MS, received funding for his R01 Grant for “Primary and Therapy-Resistant Endodontic Infections” from the National Institute of Dental and Craniofacial Research, National Institutes of Health.

Sharon Gordon, DDS, PhD, received Clinical Research Feasibility Funds (CReFF) from the General Clinical Research Center of the University of Maryland, Baltimore. The $15,000 award, for her research project, “Phase 1 Study of Topical Thalidomide,” is in effect from March 1, 2005, through Feb. 28, 2006. The review committee was especially impressed with the quality of the proposal and her plan to gather pilot data for a future National Institutes of Health grant submission.

Gary Hack, DDS, and Leonard Litkowski, DDS, received extensive media coverage (including the Daily Record and the Baltimore Business Journal) for their patented NovaMin product, a glass-like ceramic paste that can reduce teeth sensitivity, whiten teeth, combat gum disease, and prevent and repair tooth decay.

Norbert Myslinksi, PhD, associate professor of neuroscience in the Department of Biomedical Sciences, spearheaded another year of successful Brain Awareness Week activities, most notably, the International Brain Bee. This year’s Brain Bee included finalists representing Ohio, New York, Canada, India, and Connecticut.

Judith A. Porter, DDS, MA, EdD, was appointed to the National Board Test Construction Committee in Dental Anatomy and Occlusion for 2006.

Mark E. Shirtliff, PhD, presented “Detachment and Host Antibody Response to Staphylococcus Aureus Biofilm Infections” at the Center for Biofilm Engineering, Montana State University, Bozeman, Montana, on March 3. He also presented “The Clinical Impact of Biofilm Infections” at Winthrop University Hospital, Mineola, NY, on Feb. 3.


J. Anthony von Fraunhofer, PhD, MSc, professor, Department of Oral Maxillofacial Surgery, was the lead author of “Effects of Sports Drinks and Other Beverages on Dental Enamel” in the January/February issue of General Dentistry. The study revealed that the enamel damage caused by non-cola and sports beverages was 3 to 11 times greater than cola-based drinks, with energy drinks and bottled lemonades causing the most harm to dental enamel. Matthew M. Rogers, DDS, was his co-author.

Warren Tewes, DDS, and his partner Kylen Johnson, were interviewed in March by the Maryland State Department of Public Safety. Tewes provides his expertise in forensic dentistry to the Maryland Missing Persons Network (www.marylandmissing.com). The two talked about the Maryland Dental Database to identify missing and unidentified persons and the role of the Medical Examiners’ Office.
The Dental School recently acquired the Polycom video conferencing system. This device will give the Dental School the ability to collaborate with other campuses and colleagues using Internet2. A major network connection exclusive to universities and educational institutions, Internet2 provides high-speed connectivity for global video conferencing, data transfer, and research.

The Polycom System works much like a phone and a video camera in one. The device enables users to “dial” other compatible video conferencing systems and also to receive incoming “calls.” The system can support up to three or four conferences simultaneously.

Dental School faculty will be receiving information and instructions on how to use this new tool in the near future. Training sessions, including demonstrations of the system’s functionality, will be provided by the Center for Information Technology Services for all faculty members in the coming months. As the School moves forward with technology, the system will enhance its communication capabilities. Faculty, researchers, and students will discover new uses for this technology among fellow researchers and colleagues around the world.
On June 2, faculty from the Department of Periodontics attended the Annual Symposium of the Gerald M. Bowers Study Club in Periodontology. This year’s topic, Save the Tooth or Place a Dental Implant?, featured Dr. Myron Nevins, an internationally recognized periodontal researcher, educator, and clinician from Harvard University. The annual event is named for Dental School Professor Emeritus Gerald M. Bowers, DDS, MS, FACD, FICD, a pioneer in periodontal research at the University of Maryland. Bowers’ seminal work on periodontal regeneration in humans yielded unprecedented research findings.

“At Maryland, we were fortunate to be able to complete landmark human studies that will never again be possible,” recalls Bowers, who began his career at the Bethesda Naval Hospital (1968-1974) before embarking on a teaching career at the Dental School from 1974 to 1997.

The concept of periodontal regeneration fascinated Bowers. He initially tested his hypothesis that periodontal regeneration was possible in animals, then obtained significant National Institutes of Health (NIH) funding to move to the human model. He was able to obtain human allograft (same species/different donor) bone from what was, at that time, the only U.S. tissue bank, located at the Bethesda Naval Medical Research Institute. His Maryland team, which included graduate students, dental hygienists, and dental assistants, implanted this tissue in patients’ periodontal defects, later harvesting sections for microscopic study. “The field of dentistry helped pioneer the use of tissue-banked materials, now a central feature of routine practice in both medicine and dentistry,” says Bowers.

These studies spawned the concept of using patients’ own tissues (autographs) to augment allograft regeneration of their destroyed periodontal structures. “We also saw the opportunity to initiate field-test studies with consultants in the Navy, Army, Air Force, and civilian practice to increase interest in periodontal regeneration and demonstrate its feasibility in periodontics,” Bowers says, adding that, “Our studies have withstood the test of time—we are able to regenerate new tissue around teeth, and complete regeneration is in our future.”

Although these and other studies have firmly established his place in dental history, Bowers shares credit for his benchmark research with his team and with the groundwork laid by A. Hari Reddi, PhD, an early NIH colleague. Bowers says that one of his greatest satisfactions came from clinical application of his work. “There wasn’t anything that pleased me more than taking research and applying it to patients. “Patients have, are still, and will continue to benefit from the work we were able to complete at Maryland.”

A Healthy Teaching Base
Another area of his Maryland career that Bowers remembers with pride is that he was able to train a whole cadre of periodontists who are now accomplished professionally and in life. Many, such as Mark A. Reynolds, DDS, PhD, are department chairs, deans, or graduate program directors. “Looking back
on these friendships and relationships makes me realize that I did make a difference. You get a feeling from teaching that you can’t get elsewhere,” says Bowers. His former students are, in turn, producing a new generation of leaders in dental education and research. “If you’re going to keep a healthy profession, you need a healthy teaching base,” he says. Private practices, he adds, are dependent on the quality of the research and teaching that comes from university-based research centers.

Bowers says that the challenge ahead for the dental specialty of periodontics is to “keep track of our roots and remember why we are periodontists.” Although periodontists are adept at replacing teeth with implants, Bowers is mindful that, “Our basic concern is devoted to health, comfort, and function of the natural dentition. That’s what we’re all about.” He also sees the specialty evolving into a more medicine-based practice. Patients, as well as those involved in patient care, he observes, are increasingly becoming aware that teeth are attached to the body, and that there is a dynamic, systemic relationship between teeth and the body. Oral health can therefore be a barometer of patients’ health in general. Bowers says, that after periodontal therapy, when a patient says, “I have never felt this well,” it is an indication of overall health, often related to elimination of periodontal disease.

Bowers feels that ensuring patients continue to benefit in this way depends on the quality of students graduating from dental schools and specialty programs. The quality of periodontal graduates, says Bowers, is linked to the quality of their incoming students, as well as the quality of the graduate programs themselves.

“The challenge for deans is maintaining and attracting top-quality faculty. There are still people who love to teach, and when money cannot be an incentive, other benefits need to be offered. You need to keep top-notch educators happy and provide good morale. I realize that meeting that challenge is a top priority for Dean Stohler,” says Bowers. Speaking of the Dental School’s program, he adds, “Maryland has a long history of excellence, and under Dr. Reynolds’ leadership, it will certainly continue.”

Professional Values

Bowers continues to inform and influence the profession through his research and his primary role as the executive director of the American Board of Periodontology. He is a strong advocate for board certification for periodontists. “I would like to see every periodontist board-certified. Being evaluated by their peers and being required to stay current is a critical issue,” he says.

Although universal board-certification exists in medicine, Bowers says that it is not as common in dentistry. “Dentistry has to go in that direction—not just for periodontists to be trained, but to be re-certified and keep up with the latest techniques.”

Over the years Bowers has maintained a commitment to fostering more enthusiasm for certification. “We put a lot of emphasis on taking boards with our students.” That emphasis has had positive results, because periodontal graduates at BCDS are certified at a rate two times the national average. Bowers maintains that certification is an important part of the specialty, stating that, “Patients need to know that there are standards beyond the bar set by the state, that the specialty desires setting and maintaining a higher bar through continuing education and re-examination.”

More than a decade ago, the Gerald M. Bowers Study Club in Periodontology was organized by alumni of the postgraduate program. The study club was formed to advance the profession through continuing education programs. A second major objective is to raise funds to help periodontal graduate residents.

The study club hosts an annual national symposium to address contemporary topics in periodontics and implantology. The club, which has made a generous longstanding commitment to the School’s postgraduate program, also supports resident activities, aids their research, and provides much-needed resources to enrich their educational experience.

“Aside from certification and continuing education, periodontists can help themselves and the specialty remain healthy by staying focused on the basic reason for entering the profession,” says Bowers. “When you get into academics, often students become the focus, but students are the means by which you ensure optimum patient care. It’s easy to lose that perspective,” he continues. “My major reason for being a periodontist was not to be a Navy officer, a chair, a program director, or to receive personal gain. I wanted to do something instrumental to make a difference for patients.”
At nearly every major Dental School function or program, Nate Fletcher, DDS, is a likely fixture, whether it’s the White Coat Ceremony (where he addressed the students), the State of the School Address, or serving on the Dean’s Faculty. At this level of commitment, he has all of the characteristics of a proud alumnus. But, he’s not.

For years, Fletcher has been a valued friend and ally of the Dental School. Why, then, does this Howard University graduate play such an active role in the School?

“I am, indeed, committed to the School because of the leadership exhibited by Dean Christian Stohler and because I live and work in Baltimore,” he says.

Fletcher adds that through his involvement, he is able to have some “limited input into the future of the profession” by being a member of the Dean’s Faculty Enrichment Program and other School-sponsored programs. These activities allow Fletcher, the immediate past president of the Maryland Dental Society, to share the knowledge and experiences he has acquired during 18 years of practice to help stimulate, guide, and train dental students.

From his reservoir of experience, he says, “I get the opportunity to provide some semblance of my personal clinical experiences to provide something to students that they probably wouldn’t get from the academic world. It is important to have a global view of the profession, and every bit of information helps to make a well-rounded and better prepared student. I get satisfaction from being able to provide the impetus for considerations that may not be a part of the regular scenarios that students will be faced with when they leave school.”

His influence on students extends to those still deciding on their careers. Fletcher helped launch the Ascending to Eminence Program, which partners with the Dental School, Baltimore City Public Schools, the National Dental Association, the Student National Dental Association, the Maryland Dental Society, Morgan State University, and Kappa Alpha Psi Fraternity to motivate middle school, high school, and college students to consider careers in dentistry.

Third-year students Albert Quashie and Maria Wright and Drs. Tracy King, Keith Mays, and Kenny Hooper have helped in the planning and development of the program. John Hyson Jr., DDS, MS, MA, provided the initial session to students in April, with a presentation on the history of African-Americans in dentistry. The Dental School is also providing communications and public relations support.

Fletcher’s decision to pursue dentistry was influenced by a dentist who lived in his neighborhood, his father, and his high school counselor. His professional portfolio began with his work as a...
temporary dental hygienist, followed by a position as a diagnostic associate. He says he has experienced working in “high-end (monetary) practices and low-end practices.” He has also worked under contract and as a self-employed dentist. His services range from basic preventive and restorative care to molar endodontics, orthodontics, basic and surgical periodontics, and oral surgery.

When he’s not working in private practice or volunteering in the School, Fletcher is likely to be working in a correctional institution. In Maryland and Pennsylvania, he has played an active role in the oral care in correctional systems, having worked as a chief dentist in the Division of Corrections for the State of Maryland. He also served as vice president of operations for the Philadelphia Prison System. He has also been a consultant to the Pennsylvania Division of Corrections, evaluating the dental systems in the prisons. Currently, he works in a combination of private practice and correctional facilities.

Fletcher is currently serving as the vice speaker of the House of Delegates of the National Dental Association, chairman of the NDA Constitution and Bylaws Committee, and was recently appointed to the Board of Visitors of the Samuel D. Harris National Dental Museum.

His involvement in various facets of dentistry helps him stay tapped into the pulse of the profession. Fletcher says, “It is important to recognize that the changing face of the demographics of the population of the United States will necessitate addressing the demographics of the future of dentistry to fit the needs of that population. In that effort, it is critical that the dental institutions nationally recognize and prepare for the changes that will be required to advance the profession and address the health care needs of the future.”

The future will be shaped, in part, by programs such as Ascending to Eminence that will help increase the number of minorities in the profession, he says. Dean Stohler, he adds, “recognizes these factors and will address these issues proactively.”

The role of the School’s new building, which will facilitate advanced care, research, and education as an important part of the future is not lost on Fletcher. “I think that having a state-of-the-art facility is exciting, in that the opportunity to observe and participate in the training process of future dentists in that environment is cutting edge and unique. It is, indeed, an honor to be able to contribute to the profession in that way,” he says.

Fletcher finds that professional camaraderie is easy for him because his wife, Alison Riddle-Fletcher, DDS, is also a dentist. However, his ultimate satisfaction is making patients happy. “The ultimate goal is to make a living and change lives in a positive manner through the kind of service that I can provide,” he says.
From the Alumni Association President

Mel Kushner, DDS
President, Alumni Association

We’re back!
In case you haven’t already heard, the alumni association is in its third year of “reunification.” This is an extremely exciting and happy time for the alumni association and its relationship with the Dental School and the University.

After a number of years of strife, all is well! Our membership is at an all-time high. If you have not yet joined the alumni association, please call the Dental School office at 410-706-7146 for information on how to join.

In his third year as dean, Christian Stohler has shown his support of our association in many ways—not the least of which is assigning us prestigious space in the new building.

For those who might still harbor some ill feeling toward the School, it’s now time to set that aside and join us in an atmosphere of celebration and oneness with the School and University. We will soon open the new state-of-the-art Dental School. For a preview, visit www.dental.umaryland.edu to watch the actual construction in progress and also link to Alumni News.

Alumni News includes the full sponsorship by the alumni association of the freshman class White Coat Ceremony held last fall in Davidge Hall, which included a first-class reception at the Dental Museum. This was a very moving ceremony, which introduced the alumni association to the freshmen at this very early stage in their professional careers.

Alumni and students can take great pride in our School, as we have been recognized by the NIH as the No. 2 Dental School in the United States for research grants. As alumni, we can also take pride in the clinical performance of our graduates. In the most recent North East Regional Board Exams (NERBs), we finished first in the manikin exercise and second in the restorative patient exam.

The most important aspect of change at the Dental School is the positive feelings of the students toward the faculty and administration. Dean Stohler asked our alumni board to interview the presidents of the four classes and the student government in an environment in which they could openly express their concerns. Obviously, all is not perfect, but all of the class leaders related a positive experience when questioned about their relationships to faculty and the administration.

All alumni were invited to this year’s “All-Alumni” weekend, held on Thursday, June 2, through Saturday, June 4, which featured a highly successful golf tournament, a full day of world-class continuing education sessions, tours of the new building and the dental museum, and several social events, culminating in a casual “Lombard Street Party” on Saturday night.

I am privileged to be president of our association this year. I follow wonderful examples set by Steve Friedman and Harry Dressel. I am blessed with a dean who holds us very dear to his heart, and a great slate of officers and an executive board that has given more than the 100 percent asked of them.

As you can tell, I am very excited about the future of the School and our alumni association. Let me take this opportunity to wish you well and ask you to keep in mind the institution that has enabled us to be a part of a wonderful profession, and to enjoy the life that it provides.

Sincerely,

Mel Kushner, DDS
President, Alumni Association
Dr. W. Robert Biddington, West Virginia University (WVU) administrator and faculty member, died Dec. 15, 2004, at Ruby Memorial Hospital after a brief illness. He was 79. Biddington was a 1948 graduate of the Baltimore College of Dental Surgery (BCDS) and 1984 recipient of the Distinguished Alumnus Award.

After serving as a faculty member at BCDS, Biddington joined the faculty of the WVU School of Dentistry in 1959 as professor and chair of the Department of Endodontics. He later held several administrative posts, including dean of the School of Dentistry for 23 years (1968-1991) and vice president of the Robert C. Byrd Health Sciences Center for one year (1991-1992). At the time of his death, he was serving as part-time associate vice president for health sciences and was dean emeritus of the School of Dentistry.

“Dr. Biddington was one of WVU’s longer-serving administrators. He served with great dedication and affection for the institution and its employees. As dean of dentistry and vice president, and when often called upon to act as an interim administrator, he performed his duties with integrity and diligence,” says WVU President David C. Hardesty Jr.

“He was a member of our central leadership team for many years, and his smile and quiet advice will be missed by those with whom he worked. I considered him a valued friend.”

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**Calendar of Events**

- **June 16**  
  State of the School Address, Davidge Hall
- **July 8**  
  Florida Dental Alumni Reception, Orlando
- **July 25-29**  
  Annual Ocean City Summer Series of Continuing Education  
  For more information, visit [www.dental.umaryland.edu/dentalprograms/ce/index.html](http://www.dental.umaryland.edu/dentalprograms/ce/index.html).
- **August 1**  
  National Dental Association Reception, Las Vegas
- **September 7**  
  White Coat Ceremony, Davidge Hall
- **October 6-9**  
  American Dental Association Meeting, Philadelphia
- **October 7**  
  ADA Alumni Reception, Philadelphia

Please visit our Web site at [www.dental.umaryland.edu](http://www.dental.umaryland.edu) for information on fall and winter continuing education courses.
The dental profession is one that often yields many privileges. Roy L. Eskow, DDS, ’74, knows, that like the profession, there are many privileges to being a member of the Dental School’s Alumni Association, but those privileges also come with responsibilities.

For Eskow, dentistry is a family tradition. He and his brother (both periodontists) are directly related to 13 dentists and one hygienist. Those family ties definitely made an impression on him as he pursued a career in the family profession. It was Eskow’s father, the first dentist in the family, who urged him to choose the University of Maryland for his professional education.

“My dad’s memories of his time at Maryland were so positive that he felt if my experience was nearly as good as his, then I, too, would enter private practice with great enthusiasm and commitment,” he says. “At the time that I was applying, John Salley was dean. My father felt that Dean Salley was a very forward-looking educator who brought a modern approach to dental education.”

The approach that Eskow speaks of relates to comprehensive care, as opposed to a “block” system, which was being used at other schools. In comprehensive care, he says, “You treat the entire patient, instead of learning individual restorations or procedures.” To this day, that philosophy guides his approach to practice.

Becoming a Responsible Alumnus

The alumni association is extremely important, Eskow says, because it’s the main link that alumni have with the School. “What most people of any institution don’t realize is that the bond is there forever. Administrators, faculty, and staff come and go, and they have a passing allegiance to an institution. But as an alumnus, you are part of that family forever,” he says.

Eskow commends Dean Stohler for providing an environment for all alumni to flourish by re-acquainting themselves with the School. The responsibilities that each alumnus has can be realized in many individual ways, he notes.

The main responsibility of each alumnus, Eskow says, is to appreciate the high quality of education and the livelihood that their training through the Dental School has provided. Eskow concedes that, “Many times, students and graduates are sometimes unhappy about individual experiences they had during their education, which, unfortunately, causes people to lose sight of the great rewards that they have reaped from their education at our School.”

“Thanks to Dr. Stohler’s open-door policy, each of us can give back to the School in whatever way we feel most comfortable,” he says, citing volunteering for the Dean’s Faculty, supporting the School’s continuing education programs, endowing rooms in the new dental facility, encouraging the legislature to be as generous toward dental education as possible, and either mentoring students or even recruiting potential students to attend BCDS.

“I would encourage all alumni to re-evaluate their relationship with the School, and put into perspective the benefit that they’ve gained, and support the
“I would encourage all alumni to re-evaluate their relationship with the School, and put into perspective the benefit that they’ve gained, and support the School and its program in whatever manner they feel would be most constructive and satisfying,” adds Eskow.

From Open Door to Open House

It was after a personal tour of the new building when Eskow says he realized how aptly the word “vision” applies to Dean Stohler. “Webster defines vision as ‘unusual discernment or foresight’”—terms that became more concrete when describing the dean. “For a soft-spoken, low-key individual, he has an unbelievable ability to boost your desire and willingness to participate,” says Eskow.

Because he appreciates and endorses the dean’s approach, Eskow was glad to finally host a reception in April at his Montgomery County, Md., home, where about 40 Maryland graduates were able to meet the dean one-on-one, and as Eskow puts it, “glean some of the same admiration that I have for him. Many graduates have no direct contact with the School, and therefore, they have little chance of meeting the dean and expressing their views and opinions.” The positive feedback from the participants has been overwhelming, he says.

Dean Stohler, says Eskow, brings a fresh, new philosophy to alumni relations. “From his first day on the job, the dean expressed his desire to incorporate alumni in the “big tent” feeling that he wishes to create in the School.”

Eskow goes on to say that Stohler’s philosophy is “infectious. The dean wants alumni to be more than financial donors. They should feel free to use the School and its resources for the betterment of the School and the students. I believe that he is creating a synergy whereby the students, faculty, staff, and administrators will benefit from each other’s enthusiasm.”

“My hope is for the dean and the School to create the premier center for continuing education in the mid-Atlantic region. Hopefully, this will attract the highest-quality national and internationally known lecturers, as well as provide an operating center for hands-on continuing education courses,” he adds. Eskow’s objective was that this initial meeting would be “a seed event for numerous evening get-togethers, which would take place throughout Maryland and even in other areas of the country so that many alumni could meet informally with the dean.”

An Eye Toward the Future

The future of dental education will be linked to advances in dental medicine. Dentists, says Eskow, have always been at the forefront of advancing oral medicine, such as spearheading fluoridation studies and conducting research on dental caries, periodontal diseases, oral pathology, oral manifestations of drug use and interactions, and the effects of smoking and tobacco use.

“A golden opportunity is at hand,” he says, adding that, “Now is the time to use science for treating new maladies. The new dental facility will give the School greater opportunities to be at the forefront of scientific experimentation and research as we continue to address all aspects of oral diseases and their management.”

The need and demand for dental services is increasing on many different fronts, says Eskow. Geriatric care, pediatric and orthodontic therapy for children, tooth replacement via implants (as opposed to dentures), endodontics, and oral and surgical services, and dental cosmetics will keep dentists busy and point to a bright future for the profession.

Eskow says that, “Dentistry is one of the few occupations that allows an individual to have extremely close contact with another human being. We must take that trust, and, along with our education and abilities, strive to provide the highest level of care for the overall betterment of our patients.”
For William Schneider, DDS, and his wife Nancy, giving and reaching out to others is simply a way of life. Schneider says he subscribes wholeheartedly to the adage that “To people to whom much is given, much is expected.” The Schneiders routinely put into practice what they preach. The couple recently gave a large donation to support the new Dental School facility. William Schneider’s relationship with the School has become more visible in recent years, since he joined the Board of Visitors and became chair in 2003. The role of the board has evolved—from one of receiving School reports, interviewing students about their experiences in dental school, and providing feedback—to one that entails actively engaging members of the greater community, enlisting statewide support, and making a conscious effort to broadcast the School’s mission and partner in development efforts. Although Schneider is a graduate of Georgetown University, Dean Stohler tapped him for the position as chair to stimulate “out-of-the-box thinking” to help grow the School to become one of the top three in the country. This goal, says Schneider, is one that can be realized. An important challenge, he says, is “to get people to see it as a state school” and not just a Baltimore institution. Schneider and Stohler are responding to that challenge by trying to recruit a diverse group of professionals to the board: business people, communications professionals, lawyers, and members of the legislature. Most recently, the board has been engaged in helping the School raise much-needed funds for the new dental facility. The first step in building financial support, Schneider says, is to reach out and “get to somebody’s heart,” to get them to share the dean’s vision for the School. Stohler, he says, “has identified a quality that instills the way dental education ought to be. That’s why I want people to meet him, so they can see the changes he’s making.” Although Georgetown and Maryland enjoyed a friendly dental school rivalry, Schneider says that after coming to the School to teach an ethics course (at the urging of Associate Dean Maggie Wilson), he became more interested in the School’s mission. “Seeing the quality of the professors was wonderful. After the new dean came in and made changes, underscored by a focus on excellence in all areas, you can’t help but want to be a part of that. It re-invigorated my desire to be connected with the School.” Becoming a Complete Professional Schneider wants students to graduate from the Dental School with more than technical skills. Developing a stronger sense of business aptitude,
he says, should be emphasized more. As professionals and future leaders in the community, he says it’s important that students understand their role in society to change people’s lives through giving their time, money, and talent.

He sees a true commitment from the School to provide the best possible learning experience and preparation for the “real world,” and highly recommends BCDS to prospective dental students. He looks forward to increased opportunities for students to “learn outside the walls of the school,” such as completing externships headed by Dental School alumni.

With 37 years of experience in dentistry, a term as president of the Maryland State Dental Association, a father who was a dentist, and a son who joined his practice in 1998, Schneider can speak with authority on being a well-rounded dentist. He is also active in organized dentistry, which he says is important to protecting the dentist-patient relationship from “non-scientific challenges and efforts by government agencies to affect how dentists treat patients.” Organized dentistry, he maintains, helps the profession speak to the legislature and insurance companies and is critical to the future of dentistry in this country. His relationship with the Dental School has enabled him to express the role of organized dentistry to students.

Protecting and maintaining relationships with patients come from the Schneider family’s history of providing personal patient care. Some people in his practice (established by his father) have been patients in the practice for their entire lives, as far back as the 1940s. “It’s really fun to maintain a relationship with the patients, which go much deeper than asking which tooth hurts,” he says.

The new dental facility will underscore the philosophy of open communication and being actively engaged. Schneider credits deans Richard Ranney and Stohler for their determination to open a state-of-the-art dental education and care center and he congratulates the architect for creating a building that facilitates open interaction.

“Interacting with people, eliminating dark halls, and letting the light come in is tremendously important,” he says, adding that the new building will be an asset to help the School attract the best students. “It’s going to be nice—we have the faculty and the student body that will fit right in and will flourish there.”

A Philanthropic Way of Life
When he’s not treating patients, giving a talk to students, or representing the School, Schneider and his wife can often be found working on behalf of a philanthropic endeavor.

“Some of my happiest time is spent giving back to people who don’t have much,” he says.

Through their church, the Schneiders are active in a program to help homeless people in Washington, D.C. Called Community Family Life Services (CFLS), the program provides transitional housing, has an after-school study program, and is armed with a cadre of social workers and counselors.

CFLS has grown to one of the country’s most successful outreach programs with an annual budget of $4 million. Nancy Schneider sits on the board of directors for CFLS, which, on a monthly basis, serves more than 1,000 individuals, distributes more than 3,200 pounds of food, provides ongoing health and wellness counseling to more than 175 individuals, and annually helps about 300 clients find employment.

William Schneider would like all graduates to develop the same sense of community responsibility that he and his wife embrace, and for students to aspire to be examples for others.

“Dentists are some of the most giving people you will ever find,” he says. “There’s no better feeling than helping somebody else because you’re helping yourself as well.”

In addition to being involved at the community level, he urges alumni to get involved at the School level. He points to the Dean’s Faculty as a good starting point for people who want to give back.

“Students love it. Those of us who have time to give can connect, and it’s a terrific idea because we can expand educational opportunities without expanding the faculty. Students like getting perspectives from outside the School.”

Alumni associations are another avenue to become connected, he says. “A lot of alumni would be surprised that it truly is a different educational experience [today] than what they went through.”

Staying connected in community life and finding ways to give back is “certainly expected” of all professionals, says Schneider. “How can you call yourself a professional if you don’t?”
For more than 25 years, virtually every student accepted to the Dental School came to know Billie Garner-Brown, MEd. Although she was known by many different surnames—Haskins, Spruill, Brown, Garner, Garner-Brown—one thing always remained consistent: the important role that she has played in recruiting and retaining talented dental students.

Her career with UMB began in 1978, when, for personal reasons, she decided to stop commuting from Baltimore to the University of Maryland, College Park. At that time, Audrey Boone, director of health professions, had a grant to increase the recruitment and retention of minority students in the health professions. For 2 years, Garner-Brown worked as a retention coordinator with the schools of medicine, pharmacy, and dentistry, and became particularly attuned to the culture of the Dental School.

“I found that Drs. Ernest Moreland and Charles Leonard were extremely well-organized, committed to the goal, and the people in the School were empathetic, kind, generous, extremely organized and great to work with.”

In 1980, she joined the Dental School as the assistant to the dean for recruitment and retention, focusing mainly on minority students. As the first African-American to graduate from an independent (non-public) school in Maryland, Garner-Brown is sensitive to the needs of minority students in a majority environment.

“As an African-American, I felt a personal responsibility to recruit to this Dental School qualified young black people who wanted to be dentists. I found that some people were desensitized to what was needed for these students to be successful,” she says.

Derek Brown (no relation), is one former student who was influenced by her.

“I owe Billie a lot of credit for helping me to get to where I am in my professional career as an orthodontist,” he says, adding, “Where Billie was particularly invaluable was in the recruitment and retention of African-American dental students. She also played a vital role in terms of facilitating a student’s financial aid award with the financial aid department at the University of Maryland.”

Still, she felt the need to reach out to more students. “I had a master’s degree in education, and I felt that my skills should be applied to all students, not just minorities,” she says. Her role in the School then evolved into a position in recruitment and admissions.

Because most students are away from home, she often takes a protective, maternal approach, stating, “I made myself in loco parentis for them.”

Derek Brown concurs with that sentiment. “Ever since I met Billie,” he says, “she has been like a second mother to me—my Baltimore, Md., mother. Billie has always been there for me ever since I met her.”

Reaching out to university students probably
comes naturally to her because of her background in teaching. In the late 1960s, at the young age of 20, she was a faculty member at Fisk University in Nashville, Tenn. She later went on to teach junior high students in Tennessee and the District of Columbia. She has also been a member of the executive board of the Boy Scouts, a faculty advisor to the Student National Dental Association (SNDA), and a volunteer teacher in the Upward Bound Program.

During her tenure in the Dental School, she has worked under several administrations—deans Errol Reese, Warren Morganstein (acting), Richard Ranney, and Christian Stohler.

In her new role as Dean Stohler’s assistant, she is able to build on her years of experience, organizational skills, and institutional knowledge, which has given her even greater visibility and responsibilities in the School.

“I needed a change at this time in my life,” she says. “Dean Stohler asked me to take on all of the special events for the School, and although the number of events has tripled and quadrupled in the last 18 months, it’s all very exciting and refreshing. I look forward to all of the events.”

“Billie is a warm, intelligent person who brings enthusiasm and insight to this position,” says Dean Stohler.

Her addition to the dean’s administration is a decision that Dean Stohler never second-guessed.

“Billie is a warm, intelligent person who brings enthusiasm and insight to this position. People naturally gravitate to her, perhaps because they sense her genuine concern for all of the students and everyone associated with the Dental School. She is a very accomplished person who has done, and will continue to do, great things for the School,” he says.

Over the years she has been recognized for her various achievements. Her awards include: Martin Luther King Jr. Award for Meritorious Service (University of Maryland, College Park, 1976); Outstanding Young Woman of America (1981); Student National Dental Association Award for Outstanding Service, Creative Leadership, and Unselfish Dedication (1988). She was a 1997 nominee for the UMB Martin Luther King Jr. Diversity Award and received the award in 2002.

Although she has switched gears from admissions and student affairs, Garner-Brown is still concerned about the needs of the students and has worked to ensure a smooth transition in recruitment and retention. For 9 months, she has worked with Andrea Morgan, DDS, (alumna of the School), whom Garner-Brown describes as “willing, able, and extremely capable of replacing me. The alumni, faculty, and students adore her.”

Students adore Garner-Brown as well, so much that a group of alumni, headed by Derek Brown, are making a donation for a room in the new building to be named in her honor.

The decision to honor her makes perfect sense, says Derek Brown.

“If you were to speak to African-American students who have graduated from the University of Maryland Dental School over the past 25 years or more and asked them which faculty member stood out the most during their tenure at the Dental School, the most consistent name mentioned, I guarantee you, would be Billie,” he says.

“If you ask these same students if they would have attended the University of Maryland Dental School if it were not for the fact that Billie opened up her heart to all of us right before we were even students at Maryland, I promise you that a significant percentage of us would not have attended.”

Finally, if you asked these same students the main reason that we would be inspired to donate to the University of Maryland as alumni, a room in the new Dental School—dedicated in Billie’s honor—would undoubtedly be at the top of their list.”

This gesture moved the dedicated professional to tears. “It took me completely by surprise. I feel honored and grateful that the students thought of me and are thinking of me, and that what I wanted to accomplish for them here has been achieved,” she says, adding, “The students who have come and gone never really leave.”
The following list represents many of the school's outreach programs and involvement across the state:

- A Bridge to Academic Excellence
- Baltimore Brains Rule!
- Baltimore County Health Department
- Bioethics Debate Series
- Brain Art Competition
- Brain Lecture Competition
- Brotsman Facial Pain Center
- Community Service
- Education for Dental Hygienists
- Department for Health and Mental Hygiene Oral Health Demonstration Project
- Dominican Republic Dental Mission
- Eastern Shore Oral Health Outreach and Lower Eastern Shore Dental Education
- Fort George Meade Base - U.S. Army Dental Clinic J. Fort Meade, Maryland
- High School Biomedical Research Program
- High School Neuroscience Forum
- Howard County Health Department
- Maryland Work Opportunity and Health Care for the Homeless Treatment Program
- Maryland and International Brain Bee Competitions
- Neuroscience Teacher Workshop
- Pediatric Dental Fellowship Program
- Project Hearts (Humanitarian Efforts and Research of Tomorrow's Scientists)
- Quest for Care
- Referral of Complicated and Difficult Cases to Pediatric Dentistry Specialty Clinics
- South Baltimore Family Health Center
- Special Patient Program
- The Plus Program
- Treatment of Children in Underserved Rural and Urban Areas by Pediatric Dentistry Fellows
- University of Maryland, Baltimore College of Dental Surgery, Oral Health Care Services for Long-Term Care Facilities
- Veterans Administration Medical Center, Baltimore
- Western Maryland Area Health Education Center
- Year-two Service Projects
charity begins at home . . . and abroad

The dictionary defines outreach as "the provision of information or services to groups in society who might otherwise be neglected." Our Dental School mission statement clearly sets forth a mandate for service and outreach.

As a state institution, the School is committed to ensuring that all Marylanders have access to oral health care. We are achieving this goal through efforts by student organizations, fellowship programs, faculty- and staff-driven outreach and research, and curriculum-based programs.

We also have a proud tradition of delivering international care to underserved parts of the world. The talent, skill, and genuine concern demonstrated by our faculty and students are deeply appreciated and respected around the world by our peers and patients alike.

Our service not only benefits others, but also enriches our educational, professional, and personal experiences. From treating the youngest children in Africa suffering from facial gangrene to providing screenings for senior citizens in Baltimore, our presence makes a lasting difference.
Poverty, disease, and faces of starving children are images of parts of Africa that have become all-too familiar. Less familiar to the public are the faces of children who suffer from noma, a disease that steals their faces.

Oro-facial noma, often referred to simply as noma, is the disease known as *cancre oris*. Noma (from the Greek verb, which means ‘to devour’) is a facial gangrene that develops inside the mouth and spreads rapidly to the surface of the face. Victims appear as though their faces are literally being eaten from the inside out. Much of the research and international attention to the disease emanated from studies led by Cyril O. Enwonwu, ScD, PhD, MDS, a professor and researcher in the Dental School’s Department of Biomedical Sciences.

When the National Institute of Dental and Craniofacial Research initiated a 4-year grant to study the causes, treatment, and prevention of the disease, Enwonwu headed the investigation, collaborating with scientists from the World Health Organization (WHO), and the Nigerian Institute of Medical Research (in Lagos, Nigeria), as well as other international scientists. His University research collaborators include William A. Falkler Jr., MS, PhD; Christine Ferrell, DDS, ’05; and Reshma S. Phillips, PhD, ’04. Falkler, who lectures in the Department of Biomedical Sciences, has been working for nearly 30 years on oral microorganisms that are involved in fusospirochetal diseases such as noma.

**Stolen Childhoods**

Noma is a disease that strikes the very youngest, most vulnerable members of a population. According to Enwonwu, the disease progresses quickly from an intraoral inflammation to a “grotesque oro-facial gangrene.” Victims mainly range in age from infancy to 6 years, and most do not survive—the disease has a 70-90 percent mortality rate if not treated promptly with antibiotics and oral antiseptics.

Historically, noma was found in Europe and parts of the United States many generations ago; however, improved standards of hygiene and nutrition eradicated the disease. The last known cases in Europe were seen in concentration camps during World War II. Today, it is predominantly a disease of Sub-Saharan Africa, and annual infection rates for noma are estimated at 100,000 people. Noma is known as...
“a disease of poverty” because it is linked to areas marked by malnutrition, poor hygiene, and unsanitary environments—conditions that are prevalent in developing nations.

In 2002, Enwonwu and Falkler helped bring more attention to the disease when they testified for a congressional hearing, “Noma Disease of Children,” which was convened by the Congressional Human Rights Caucus. Their expert testimonies were based on Enwonwu’s role as principal investigator and global leader of the WHO-Noma project in developing countries and Falkler’s involvement as a co-investigator on the noma research project in sub-Saharan Africa.

Research by Enwonwu and others describe three phases of the disease etiology. The first is a “staging period” that is marked by lowered resistance and “an oral lesion or site of entrance for a trigger microorganism.” This stage is followed by an infection period that creates an environment that facilitates polymicrobial growth. The final phase is known as the “invasive-destruction” stage. In this last stage, the lesion spreads very quickly, and researchers conclude that this may be due to a necrotizing toxin or tissue-destroying enzymes and inflammatory mediators.

“It is possible,” says Falkler, “that the target organism in the disease may be Fusobacterium necrophorum, which may enter the children’s mouths via animal fecal contamination of their water and food.” The disease, he says, is comparable to necrobacillosis, a disease found in kangaroos that “is very similar to noma.” He has also isolated fusobacteria from those lesions.

For children who do survive, they face a bleak future. They are vulnerable to infections, which can lead to other serious diseases, even death. Moreover, child victims and their families often live as outcasts in their communities, which has led to instances of infanticide, reports Enwonwu, whose research is aimed at not only understanding the causes of the disease, but also creating greater awareness in rural villages and establishing methods to prevent noma.

Enwonwu has published a recent study that shows a relationship between noma and growth retardation. His research, with co-authors Phillips and Ferrell, published in the January 2005 Tropical Medicine and International Health, shows that low body weight, wasting, and stunting is more prevalent among children with noma.

“This disease has also provided us with an opportunity to study the complex, synergistic interactions between malnutrition, infections, and immunity,” notes Enwonwu. His research collaborator, Phillips, who completed her doctorate on noma research at the Continued on page 30
Dental School last year, is now continuing her research at the Johns Hopkins Bloomberg School of Public Health.

Ferrell, a graduating dental student, is able to understand relationships to other oral health disciplines by studying growth patterns in children. “This has given me much insight on the impact of malnutrition and infections on the growth and development of children, which in turn, has some relevance to the discipline of orthodontics,” she says.

A Veil of Secrecy, Shame
Enwonwu—dentist and biochemist with an interest in nutrition—led a team of researchers in Sokoto State, just south of the Sahara in northwest Nigeria. He describes the area as “one of the poorest rural communities in Nigeria, with no potable water. Our object was to study orofacial lesions.”

During his initial investigations into the disease, Enwonwu had to overcome the shroud of secrecy that covered the disease. Health policy workers, he says, claimed not to know it existed. In the local villages, 8 of 10 people queried also reported there was no problem, he adds.

“Villagers,” he explains, “don’t want to be accused of ‘telling on’ their neighbors. It’s an embarrassment, to the mother in particular,” adds Enwonwu. “The husband may make the mother take the blame.”

Children with the disease were generally not even treated in their homeland. Charitable health foundations went to Africa to find children with the disease to bring to Europe at a cost of $70,000 to $80,000 per child. The children, accompanied by guardians, spend months away from home for treatment and recuperation.

The focus, more recently, has been to work within the country to study and treat the disease.

Working from the Inside Out
Although he is Nigerian, Enwonwu relies on community insiders to facilitate his access to the villages and to help educate the population. Local public health nurses, and villagers hired by health care centers help medical professionals establish needed connections and assist in disseminating key messages.

He stresses the importance of involving the community in his research—from lay people, to nurses, to research graduates. “What we do is not just research. We are training the indigenous people to continue the research. That is the most important aspect—the idea that we can train an indigenous society in biomedical research.”

For example, nurses were trained about how to spread the message of good nutrition to the people in villages. Because the nutritional benefits that are taken for granted in more developed areas are lacking in these villages, Enwonwu says that it’s important to “identify foods that can be combined to give adequate nutrition.” Beans, for example, lack an essential amino acid, but adding leaves and other vegetables to the beans will introduce missing elements into the diet. Sometimes these changes in the diet mean asking families to eat foods that go against their cultural upbringing. For some people, even eating eggs would break a taboo.

After his first series of educational activities, health practitioners at regional centers became interested in his work. Some dentists and other public health practitioners now go into the rural communities to teach oral health.

To teach, Enwonwu stresses the need to “start where the people are. Don’t start by stressing toothbrushes, toothpaste, etc., because many people in villages cannot afford toothbrushes, and therefore use chewing sticks.” In using the sticks, one end is chewed, and the other end is used to scrub. The
practice, although basic and rudimentary, has value.

“Some sticks contain chemicals that can kill bacteria,” says Enwonwu, pointing out that the sticks do not simply perform mechanical functions. This shows that the villagers “use what they already know to be efficacious, and they use it very well,” he adds.

Enwonwu’s group also trains local researchers in African tertiary institutions who are looking to gain more experience, specialized training, and knowledge on a topic that is devastating their population.

“We get young, recent graduates who haven’t had experience designing studies, especially basic principles of research methodology, gathering data, and data interpretation.”

Throughout the years, Enwonwu estimated that at least 5,000 children have been physically examined, but he has helped a greater number of children through messages sent through the community and training provided to primary health care workers.

Building from the Ground Up

Enwonwu’s group lobbied Ministry of Health officials in Nigeria to build a small hospital devoted to pediatric problems, particularly noma.

“When we floated the idea, originally we were hoping for one or two rooms in the existing hospital,” says Enwonwu. “We showed pictures of noma victims to the wife of a military official. She was so moved that she convinced the government to release funds for a hospital.” In 1997, construction began on the Noma Children Hospital, which was completed and opened in Sokoto in northwest Nigeria in 1999.

“We approached the WHO-Africa region and asked for the hospital to be a designated subregional hospital,” adds Enwonwu. Subregional status means that children with noma in neighboring countries can travel to Nigeria for treatment. Enwonwu served as the honorary chairman of the hospital board from inception through 2004.

Falkler says that because the hospital serves as an educational and treatment center, there is now greater awareness that, “This is a disease caused by microorganisms and poor nutrition, and not a curse placed on villagers’ children. It is making local health care workers and villagers aware that early treatment and better nutrition and hygienic living conditions are important in disease prevention.”

The hospital progressed from a subregional category and is now a regional hospital that cares for children with noma in that part of the world.

“What gives me joy is to see the smiles on the faces of the young children. The children and their mothers realize that some people from as far away as the United States of America care,” says Enwonwu, who received the Gede Foundation Humanitarian Award in 2003 in recognition of his “commitment to help children suffering from noma.”

In addition, he was awarded the 2003 Officer of the Order of the Niger, which recognized his “pioneering role in the treatment and eradication of the noma disease in Nigeria.”

Despite these accolades, Enwonwu recognizes the need for more progress, stating, “There is still much work to be done to eradicate the health scourges of poverty from Africa and the rest of the world.”

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**Prevention of Noma Infections**

- Inculcating good nutritional practices in mothers
- Educating communities on the importance of drinking clean water
- Segregating livestock from human living areas
- Educating mothers and health care workers on early warning signs of noma
- Educating families on appropriate oral hygiene practices
- Immunizing against endemic communicable diseases

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“What gives me joy is to see the smiles on the faces of the young children. The children and their mothers realize that some people from as far away as the United States of America care.”
GLOBAL MARYLAND: dentistry beyond borders

By Michael M. Belenky, DDS, MPH
Director, International Relations

The Baltimore College of Dental Surgery was established in 1840 as the world’s first degree-granting institution of dentistry dedicated to the education of a new generation of oral health professionals to serve the needs of the citizens of Maryland. In the 21st century, institutions of higher education that wish to be “world-class” now must respond to a new and greater generation of challenges, opportunities, and responsibilities beyond those of past years. They must continue to provide their graduates with the highest level of scientific and technological preparation for success in their professional careers. In a world of diminishing barriers to communication and service, they must endow their faculty and students alike with an appreciation for:

- The unmet oral health needs of a diverse global community
- The dental profession’s responsibility to respond to this challenge, both at home and beyond national borders
- The benefits of association with academic and professional colleagues throughout the world
- The need to contribute to the advancement of dental education, dental practice, and oral health in the community of nations

Global Maryland
The Dental School is determined to remain a leader among its peers by undertaking new programs to fulfill the expectations of a “world-class” institution, and broaden the preparation of its graduates for their responsibilities as oral health professionals in a rapidly changing world. Global Maryland is a new program of extramural ventures for faculty and students designed to achieve this objective, adding a new and enriching dimension to dental education. Administered by Michael M. Belenky, DDS, MPH, the program offers global opportunities for:

- Faculty and student exchange
- Information transfer
- Collaborative teaching and research
- Continuing professional education
- Providing oral health care to patients of underserved communities
- Cultural enrichment in other environments

Such initiatives already are a matter of record and achievement at the Dental School. For several years, faculty and students have provided essential oral health services and education to underserved patient communities of the Dominican Republic and Vietnam. Senior-year externships and community outreach programs of the Department of Health Promotion and Policy, and various individual initiatives have introduced faculty and students to...
the needs of the underserved and provided essential care in rural areas of Maryland and the United States.

Postgraduate fellows from dental schools in Japan, Korea, and Thailand have conducted collaborative research in the Department of Biomedical Science and the Department of Diagnostic Science and Pathology. Since 1996, many faculty members annually present lectures and continuing education courses in a major regional dental meeting and at the Institute of Dentistry in Lodz, Poland. The Dental School also has hosted dental students from Ireland, the United Kingdom, France, Germany, Israel, and Poland.

Collegial Relationships with Foreign Dental Schools

Formal collegial relationships have been established with dental schools in several foreign countries and serve as the basis for many extramural ventures by faculty and students. These schools include:

- Institute of Dentistry, Medical University of Lodz, Lodz, Poland
- College of Dentistry, Kyung Hee University, Seoul, Korea
- Graduate School of Dentistry, Osaka University, Osaka, Japan
- School of Odonto-Stomatology, Medical University of Hanoi, Hanoi, Vietnam
- Faculty of Dentistry, University of Sydney, Sydney, Australia
- Faculty of Dentistry, University of British Columbia, Vancouver, Canada
- Faculty of Odontostomatologie, Intercontinental University, Mexico City, Mexico
- Faculty of Stomatologie, Cayetano Heredia Peruvian University, Lima, Peru

Extramural Ventures—2005

Global Maryland extramural ventures for faculty and students for 2005 include:

- Operation Smile—Team Maryland Dental Mission to Hanoi and Hue, Vietnam (March 2005)
- Intercontinental University, Mexico City, Mexico (March 2005)
- Kyung Hee University, Seoul, Korea (July 2005)
Operation Smile—Team Maryland returned from Hanoi and Hue, Vietnam, on March 28, 2005, knowing that they provided a much-needed and greatly appreciated improvement in the oral health of more than 2,000 children and adults in a developing country halfway around the world. “It was an extraordinary two-week educational and public service venture that provided professional challenge, cultural enrichment, and insight to rewarding opportunities for future contribution to oral health in the global community,” says Michael M. Belenky, DDS, MPH, the Dental School’s director of international relations and a member of Team Maryland.

This was the fifth Operation Smile—Team Maryland Dental Mission to Vietnam. This venture is the product of the generous sponsorship of Operation Smile International and the collaborative participation of the Dental School and regional volunteers, many of whom are also Dental School alumni. Based in Norfolk, Va., Operation Smile is a world-renowned philanthropic organization co-founded by William Magee, a dentist, a plastic surgeon, and an alumnus of the Dental School. Several fundraising activities aid in providing financial support for the Dental Mission.

The Dental Mission included 10 senior dental students, four postgraduate residents, eight faculty members, and an Operation Smile volunteer complement of general dentists and dental specialists from the practice community of the mid-Atlantic region, for a total of 30 persons. Half of the group members were stationed in the nation’s capital, Hanoi, working at the Hanoi Plastic Surgery Center, and the other half were in Hue, where they worked in both a city clinic and in mobile dental vans that went to area villages and schools.

The Dental Mission provided oral surgery, operative dentistry, pediatric dentistry, and preventive services appropriate to evident patient needs. In addition to direct patient care, the Dental Mission offered continuing professional education lectures to Vietnamese colleagues in Hanoi and Hue, and to faculty and students of the Faculty of Odonto-Stomatology of the Hanoi Medical University, a collegial partner of Maryland’s Dental School.
The Operation Smile—Team Maryland dental mission to Vietnam is one of the many opportunities now afforded by the Global Maryland initiative, and part of the collegial relationships established with dental schools in 10 foreign countries.

Students who participate in the mission have an opportunity for professional and cultural enrichment while engaging in charitable outreach.


“It is a very rewarding and educational experience,” says Armellini, who worked in Hue. “We are able to help people who do not have access to dental treatment; therefore, we are fulfilling our mission as dental professionals.”

A few days after the mission concluded, Viet Phuong Nguyen, the country director for Operation Smile-Vietnam, wrote:

“…thank you all for making this mission successful and probably my best mission to date. I know it is possible to say that to every team, but this group of people was certainly special to me. One cannot always explain what comprises a good team. If I had to venture a guess, I would say that good team members are simply good human beings—they are hard-working, caring, professional, flexible volunteers, and more important, they play hard. I can safely say that each and every one of you embodied those qualities on this mission.

Thank you.”
More than 20 years ago, at the age of 17, Alexander E. Pazoki, DDS, MD, fled Iran during the Iran-Iraq War. Last year, he returned home to aid individuals who still carry injuries from that war and to help victims of the 2003 earthquake that flattened the city of Bam. It was the war that stimulated his desire to become a doctor. During high school, Pazoki did a rotation in a Tehran hospital, where he saw many wounded soldiers.

“I saw the damage to their bodies, and I especially noticed the trauma to their faces,” he said. “I wished there was something more I could do to help them.”

After one failed attempt to escape the country, Pazoki was successful on his second try. Fast forward 20 years later, with medical and dental degrees and still possessing a desire to help, Pazoki returned home and began to consider ways to do charity work. “I started looking into it peripherally last spring when I went back to Tehran,” says the specialist in reconstructive microvascular surgery and cosmetic facial surgeries.

Pazoki’s plans came to fruition last October, when he traveled to Iran as the guest speaker at an international conference. “After 4 days of lecturing about oral and facial cancer, trauma, and reconstructive surgery, I was approached by a resident about some of the more difficult cases they had seen in the hospital.”

For the next 2 days, Pazoki, the residents, and other doctors from the hospital saw patients.

Hope for the Devastated

More than 50 patients came from various cities and gathered in a clinic hospital in Tehran. Pazoki saw a range of patients, including people with facial fractures, abnormal growth, and growth retardation.

“Mostly, we saw extensive facial deformities, which included skull and shrapnel injuries; orbital, nasal, and severe burn injuries; and the loss of entire nasal structures, which required prosthetics,” he says. “There was also extensive tissue loss and facial and ear damage.”

Over the years, the government in Iran often sent many of the injured to Europe for surgeries. “A few patients we saw had close to 40 surgeries, but were still deformed,” he says.

Because of the extent of their injuries, the patients are not willing to venture far from home. “They feel devastated, have lost their faith, and are embarrassed by the way they look,” Pazoki says. A Kurdish patient seen by Pazoki wore a turban around his face for many years to hide his injuries from the war.

Three of his patients were selected for operations. For the others, Pazoki helped to create treatment plans—their cases are being followed by faculty members and a resident in Iran. Through e-mail, Pazoki still participates in the follow-up care.
Making a Permanent Connection
Pazoki’s goal is to set up a program to bring U.S. surgeons to Iran.
“The goal is to establish a connection,” he says. “The University of Maryland is in a good position because we can facilitate the exchange of doctors and students. Among the Iranian student body, some are interested in returning to do charity work.”

He would also like to recruit doctors from other disciplines, including neurosurgeons, ocular surgeons, anesthesiologists, prosthodontists, and orthodontists, to form a team that could address overall patient needs: dental, oral, and facial, as well as reconstructive surgery.

“The government [in Iran] is very keen on doing this,” he says. “It saves money—patients don’t have to travel to other countries—and saves patients’ lives. Faculty and students can engage in rewarding charity work and bring medical equipment and products so that patients can be better provided for.”

His hope is to also reestablish a scientific and educational connection between the two countries that would include a “community of physicians and dentists.” This connection, he envisions, would include educating residents and training faculty, as well as treating patients.

Despite negative relations between the United States and Iran, Pazoki says that the timing is right: “The younger generation in Iran wants to reestablish cutting-edge technology, revitalize their city and their economy, and ultimately care for their victims and create a better standard of living. They are looking for the best trained professionals to assist them. Their perception is that American-based educational systems are among the best.”

His perception is that his dual degrees—medical and dental—work as a bridge between the physicians and dentists. He also believes that as an Iranian-American he can be a bridge between the two nations.

Moving to a Higher Level
Eventually, Pazoki would like to establish 1-month yearly visits. Under his plan, patients would be seen in 1 week, operations would be performed for 2 weeks, and residents and faculty would be trained for another week on how to continue the care.

As the Dental School’s oral maxillofacial residency program director and the director of the microvascular maxillofacial surgery unit, Pazoki has access to a range of qualified volunteers. He is now gathering the names of faculty and students to participate in the Iranian outreach for a follow-up trip this spring.

As he recruits participants for the next trip, Pazoki makes an analogy to sportsmanship—the team approach.

“The goal is to help, to educate, and to understand each other without trying to change them or imposing on them ideologically,” he says. “I see this as a team approach—to move to a higher level.”

“I escaped the war, I saw victims, I wanted to help them, but I couldn’t. I came to the United States, and after 20 years of education and work, I’m now ready to help my home country and its victims and help serve the United States, which provided the opportunity for me to become who I am through the training that I received. I want to take steps to show that this is a free country that provides a good education for everyone who wants to work hard and be the best they can be.”

Students, residents, and faculty, Pazoki says, should be encouraged to participate in outreach in similar situations around the world. Through communication, education, and good will, he says, we can create a safer world for everyone and provide care for those suffering from devastating manmade or environmental disasters.

“When people are in trouble,” Pazoki says, “people help each other.”

This Kurdish patient chose to cover up his injuries from the Iran-Iraq War.
For more than 14 years, Professor William H. Davidson, DMD, PhD, has served as a missionary, and an educator for Operation Smile International (OSI). For the past 5 years, he has served as co-chair of the Dental Council of OSI. According to Davidson, the organization sends out approximately 40 cleft palate missions to underserved parts of the world each year, which results in the correction of 100 to 200 cleft lips and palates, and includes both formal and informal education as well as service.

“The formal education component is being expanded to provide institutional development as well as individual mentoring,” he says. Davidson has worked, lectured, and mentored individuals in many countries, including China, Vietnam, India, Bolivia, Brazil, Panama, Kenya, Palestine, Russia, and Romania. His teaching responsibilities have included universities in Germany, Spain, and Singapore. This spring, he traveled with Operation Smile to Morocco on a mission that provided more than 190 surgical procedures.

In the 1990s, he was the faculty advisor to the dental missions. Davidson, who received his DMD from Harvard and wrote his PhD thesis at the University of Minnesota on developmental biology, was ideally suited for the role. “I was privileged to serve on the Dental Council, and to have the opportunity to help focus the dental program,” he says.

Davidson authored and is revising the training manual for the dental program, which is used worldwide and given to each person before they are accepted as a volunteer.

He has also written competencies for dentists who wish to join the missions. His objective is to start a dentists’ training program for any dentist who wants to volunteer. Another project is developing dental kits to take on missions. Currently, dentists are responsible for providing their own kits. These kits include surgical instruments and obturator supplies. Davidson has approached dental supply vendors to help in this effort, some of whom, he says, have been responsive.

The overall goal of the outreach, Davidson says, is to provide training to the countries so that they can become independent. Colombia, for example, has now developed its own training program and funds its own missions.

During his travels around the globe, Davidson has noticed a common factor: “People all over the world are driven by the same thing—they care about their children.” The families he has seen will go to any lengths to find care and treatment for their children, and they approach the doctors, he says, “with hope and absolute trust.”

The feeling that he gets from these experiences, Davidson says, is “amazing and overpowering. It keeps you going back.”
COMMUNITY OUTREACH

Providing needed oral health care to underserved populations in Maryland is a primary focus of the Dental School’s community outreach.

Each year, we provide service through more than 122,000 patient visits, and the Dental School is the largest provider of oral health care to Medicaid-eligible children in Maryland and persons living with HIV disease. The map below illustrates the span of our statewide efforts.

- University of Maryland Dental Clinics and Affiliates
- Loan Repayment Dentists (SB 519, 2000)
- Dental Hygiene Outreach
- Ryan White Off-Site Dental Clinics
SENIOR OUTREACH

Visits to senior centers and long-term care facilities help identify oral problems in older adults.

By Regina Lavette Davis

“I’m the dentist.”

“No, you’re not.”

“OK, I’m not.”

Janet Yellowitz, DMD, MPH, director of geriatric dentistry, knows better than to argue the point in a typical exchange at a long-term care facility. Many seniors she sees suffer from dementia, among other health issues, and her goal is to provide care, not to win an argument.

Geriatric oral health has been a particular interest of Yellowitz for many years. “Having a grandmother who was homebound and couldn’t get a dentist to see her,” she says, influenced her desire to help senior citizens. Her foundation in geriatric care began in Boston, when she was approached by a nurse practitioner who asked Yellowitz to provide oral health training for practitioners working with an older population.

In the Dental School, Yellowitz has developed an interdisciplinary geriatric curriculum. Students in years 1-3 have a didactic focus, and years 3-4 have an extramural emphasis.

“We have a nice, interdisciplinary program,” she says. “We bring in medicine, occupational therapy, pharmacy, law, and sometimes nursing, to train dental students. The program looks at people as a whole.”

With a growing geriatric population, health care practitioners will have to increase their knowledge of how to treat and interact with seniors. Yellowitz notes that people are living longer, they are often in poor health, and that a significant number of older patients are “cognitively impaired.”
“Part of my goal is to get students to learn what’s going on with these patients and learn what will happen in their practice or what they may encounter with patients at the Dental School, she says. “They will face patients with dementia, and as dentists, they should be viewed as a resource for caregivers and patients. We cannot diagnose, but we can spot early warning signs (of dementia) and can refer patients and caregivers to resources that can help them.”

Yellowitz is also the faculty advisor to the Korean American Student Dental Association (KASDA), and for the past 10 years, the group has organized an outreach trip to Korean senior centers in Baltimore. She finds that this type of outreach can provide an excellent learning experience for students, especially for those with limited experience with patients at the Dental School.

In addition to training students, Yellowitz has trained physician assistants (PAs) and nurse practitioners in oral health and oral cancer screening. Her hope is that knowledge of these screenings one day becomes part of the “usual and customary exam protocol for physicians, nurse practitioners, and PA licensure.” So far, her training sessions with these groups have been very successful.

“The training sessions have been well-received,” Yellowitz says. “They (health practitioners) know so much about the rest of the body, and they can go to your toenail and figure out what’s going on, but they can’t do the same when they look in your mouth.” Yellowitz is providing these health practitioners with the tools to screen for oral cancer and other oral health problems.

When she speaks about oral cancer with older patients, Yellowitz avoids the term “oral.” Although most people understand the terms “breast cancer” and “prostate cancer,” Yellowitz says that “oral cancer” doesn’t convey the same meaning. “Do you know where your ‘oral’ is?” she jokes. Therefore, she prefers to use terms such as “mouth cancer.”

Many older adults have very different perspectives about health care than younger patients, notes Yellowitz. Older adults won’t seek care unless they are in pain, she says, adding that today more older adults are keeping their teeth longer.

The challenge in working with seniors, especially those in long-term care facilities, is learning to be flexible, Yellowitz says. “You’re dealing with cognitive changes, with people who aren’t picking up external environmental cues and can’t always follow a conversation.”

Despite the challenges, Yellowitz enjoys what she’s doing: “I love working with little old ladies and men. They’re really appreciative. It’s fun, and it’s rewarding.”

“One thing I like about going to the senior center is that it’s a very laid-back environment. Just the whole experience of doing dentistry outside of the School environment was rewarding. We were accepted with open arms by the seniors, and now they know what they need to do to restore their oral health. It is something every student should do to get a glimpse of life in the real world.”

— Dan Kim, ’06
KASDA President

Photograph by Will Chung

Amos Chi, ’05 (providing the examination); Charlson Choi, DS alumnus ’99, currently in Prostodontic Program (in white jacket); and Ellen Lee, Class of ’06.
Cancer centers, museums, county health departments, and detention centers are likely places to find Dental School hygiene students providing patient care and oral health education services. Begun in 1996, the Dental Hygiene Department’s Community Service Learning Program places hygiene students in 20 such sites across the state.

According to Lisa Bress, RDH, MS, the program coordinator, each student has a 90-hour requirement to participate in one or more community sites between the summer of their junior year and the fall of their senior year. The stated goals for the course are to:

A. Expand the student’s awareness of dental hygiene career pathways in community health
B. Enhance the student’s understanding of and ability to participate in the delivery of oral health care in the community
C. Provide the opportunity for the student’s education to be enriched by the participation of interdisciplinary community health professionals
D. Render service to the community through the student’s contribution to the oral health care delivery system
E. Encourage continued interest in oral health needs of the community

Bress says that the externships provide a “win-win situation.” Public health administrators and patients benefit from the services provided by the students, and the students enhance their clinical skills while obtaining unique public health experiences, she adds.

Those sentiments were echoed by hygiene student Diane Cole ('05) and Susan Camardese, RDH, a site supervisor and coordinator at the Children’s National Medical Center (CNMC), a pediatric and orthodontic resident program in Washington, D.C. Camardese, who is also in the dental hygiene master’s program, says, “I think our residents appreciate the interaction with a dental hygiene student and what this student can offer.” CNMC is a 267-bed pediatric teaching facility for the George Washington University School of Medicine and Health Science.

Cole, who is looking forward to private practice after graduation, plans to continue to “give back by volunteering at a community site at least once to twice a month.” Her most recent assignment was at the juvenile detention center in Baltimore. Although
the thought of working in a correctional institution may be unnerving for some, Cole found it to be a rewarding experience.

“I got the chance to work with a population that I might not otherwise be seeing at the Dental School or in a private practice setting, she says.” “I felt that I helped to make a difference in their oral health since a lot of the youths at this institution had never before been seen by a dentist or dental hygienist.”

Camardese adds, “Our faculty feel that the students that we have been fortunate to have with us are an asset to dental hygiene—we hope that their enthusiasm continues. They have been conscientious and caring, which are great qualities for their careers.”

Through the program, the students have provided a considerable contribution to the community. A report prepared by hygiene students Christina Frazer and Michelle Smith shows that 1,509 hours were spent on patient care through the program in 2004.

Students in these externships are exposed to a range of patients and patient needs, clinical and research protocols, and comprehensive health teams. Through externships, there are opportunities to provide continuing education instruction, deliver preventive education sessions in schools, develop interdisciplinary projects, and present in-service training for hospital nursing staff.

“We are proud of our program and its great contribution to the citizens of Maryland,” says Jackie Fried, MS, RDH, director of the Department of Dental Hygiene. She is also proud of the program’s recent award. “The Commission on Accreditation gave us the highest honor it confers by giving us a commendation for our community service learning program.”

Cole urges her fellow hygiene students to stay involved in volunteering. “There are so many people out there that could benefit from our services if all graduates would volunteer just a little bit of time every single month,” she says. “We might help make a small dent in a very large underserved population.”

Data for the map provided by Michelle Smith (’05) and Christina Frazer (’05).
Since 1982, the Dominican Dental Project has been an annual event for students and faculty from the Dental School. For Jenny Pohlhaus, a second-year student, the project has meant more than performing charity work—it became an eye-opener to life in her homeland.

In 1993, during her second year in dental school in the Dominican Republic, she was invited to join the project. “Since then, I’ve never stopped,” she says. Even after she received her dental degree, she continued to volunteer.

“We would go to underprivileged areas and perform extractions and restorations,” she says. “I was doing whatever needed to be done, including surgeries and restorations.”

Pohlhaus, who grew up in the capital, Santo Domingo, says she knew that her country was poor, but participating in the project was an awakening to the level of poverty faced in many areas. “I had no idea how poor my country was until I went to the mountains to see how they live,” she says.

It was also through her involvement that she met her husband, Steve Pohlhaus, DDS, a graduate of the Dental School. Steve is now in charge of the project, and is busy preparing for this year’s trip in July.

“I first went on the Dominican Dental Project in 1988,” he says, recalling his experience as a rising senior dental student, working alongside his friend and mentor, Francis Serio, DMD.

During that time, the project was run by Serio, who taught periodontics at the Dental School. Steve Pohlhaus, now a part-time clinical instructor in the Department of Oral Diagnosis, remained in contact with Serio over the years and returned to the project in 1992. The next year, Serio left for a new position in Mississippi, and Steve continued to take students from Maryland along with students from Mississippi.

In 2001, says Steve, “Serio stepped down as the active leader of the project after 20 years of dedicated and energetic leadership. He asked if I would like to continue the project in some capacity.”

The following year the Pohlhauses took over a “leaner version” of the Dominican Dental Project, he says, “with Maryland students only. In a sense, we were returning to the project’s roots at UMB.”

A Profound Effect

El Cercado, the town served by the project in recent years, is close to Haiti, has no dentist in the town, and no public transportation. Residents look forward to the annual Dental School visit, with some patients traveling by mule or horse for treatment. Many are transported by trucks through efforts coordinated by a local priest. This is often the one time each year when patients get a new toothbrush, brought by the volunteers.

The Dental School faculty and students begin their days at 8:30 a.m. and sometimes work until 7 in the evening. Conditions are harsh, compared to modern standards, and treatments are conducted in
a metal-roofed room. Extractions are performed with patients seated in regular chairs, and portable dental units run by generators are used for restorations.

Jenny Pohlhaus says that the “most common problem we see is a lot of broken teeth.” This can be attributed to the lack of fluoridation in the water and untreated tooth decay. Seeing some of the cases, she says, “makes me wonder how much pain they have gone through.”

It is not uncommon, she says, to perform three or more extractions on a single patient. Some of the more extreme cases have brought tears to her eyes. “It’s hard to see 5-year-olds and have to extract two or three teeth. We see a lot of early childhood caries.”

She still vividly remembers one teenage patient in particular. “She was only 19, but she seemed like she was 40. I actually cried because I knew how much she suffered. It’s hard to believe how hard her life had been.”

Steve has also been moved by his experiences. Initially, he became involved for the clinical and cultural experiences. However, he says that the “project ended up affecting me more profoundly than I ever expected.”

Naturally, as a healthcare provider he found great satisfaction and personal rewards from providing care to those in great need. Deeper than that, the Dominican people had the greatest effect on him. “Their grace, kindness, and positive outlook in the face of difficult living conditions altered my own outlook on life,” he says.

The value of the project can be measured in terms other than human experiences. Last year, 600 patients were seen in 5 working days, with Dental School volunteers providing approximately $225,000 worth of fillings, extractions, and partials, Steve says.

He says that each student brings home with them “very personal experiences.” Over the years, he adds, “They have all shared in acquiring broadened clinical skills, greater independence, a sense of accomplishment, and having fun. It has been rewarding that even many years later, veterans of the project continue to generously support us and often say it was one of their favorite dental school experiences.”

After she receives her degree, Jenny plans to go into private practice but will continue to work with her husband on the Dominican Project. The need and the lack of education, access, nutrition, and basic dental supplies keep pulling her back.

“It’s eye opening,” she says. “I think that’s why I keep going. It’s better that I do something than if I don’t.”
Finding the Perfect Combination

By Regina Lavette Davis

Christine Ferrell, DDS ’05, developed an appreciation of dentistry at an early age. As a child, she wore a T-shirt that read, “I Love My Dentist: He’s My Daddy.” She credits her father for stimulating her interest in a career that she has grown to love.

During junior high school, she was encouraged by the school guidance counselor to begin thinking about future careers. “I had a keen interest in science and art, and dentistry has a great balance in both,” she says. Ferrell, who was active in community service, working with the Special Olympics and the American Red Cross, says she gained a lot of satisfaction from helping others.

A graduate of Penn State in State College, Pa., she earned a bachelor’s degree in general science, with a minor in nutrition. Her background in nutrition and science gave her an excellent foundation to work with Cyril Enwonwu, ScD, PhD, MDS, on his research on noma disease. Through the National Institutes of Health (NIH)-sponsored Short-Term Research Training Program, Ferrell began working with Enwonwu in 2002 and continued for three years after the NIH program ended.

“I participated in biochemical and immunological analyses of samples brought back from Nigeria,” she says. “The samples were from noma victims, their neighborhood village counterparts with Necrotizing Ulcerative Gingivitis (NUG), and healthy control children without noma or NUG.”

Part of her work in the laboratory was used for her abstract, “Serum Cytokine Cascade in Children With Acute Necrotizing Gingivitis,” as well as a poster presentation, “Serum Cytokines in Children With Acute Necrotizing Gingivitis” at the University of Maryland Table Clinic Program.

Starting this July, she will enter the postgraduate orthodontic residency program at the Dental School. She credits her noma work with providing the preparation she will need in her career. The experience she gained reviewing growth patterns of severely retarded noma victims versus the growth patterns of healthy children from the same ethnic communities gave her a better understanding of related health issues. “This has given me much insight on the impact of malnutrition and infections on the growth and development of children, which in turn has some relevance to the discipline of orthodontics,” says Ferrell.

“My research with Dr. Enwonwu has certainly sharpened my analytical skills. It has allowed me to better understand the inflammatory processes and the many factors that influence it, such as nutrition and disease. Even though noma is a rare occurrence in the United States, we as clinicians still deal with these [related] concepts every day—for example, periodontal disease.”

Fortunately, for Ferrell and her patients, her childhood led to a career that is both challenging and rewarding. “Dentistry is a perfect combination for me,” she says, “because it involves everything I enjoy: science, art, and the satisfaction that comes from making a positive impact on someone’s life.”
Those statements clearly outline the mandate for Quest for Care (QFC). Created by Drs. Michael Gaglio, Rudy Klima, Al Grzech, and Jody Waddell, the fund allows patients to receive care who otherwise could not afford it.

Associate Professor Werner Seibel, PhD, who has been a co-chair for the QFC committee since 1986, says that compromised patients can range from those with manic-depressive disorder to those with cancer. By its 20-year mark in 2004, more than $200,000 had been awarded to more than 400 patients.

Money to support the organization comes through donations and an endowment fund. In 1990, the Robert Fishman Memorial Fund was established in honor of the late Robert Alan Fishman, a 1989 graduate of the Dental School who died shortly after graduation. To date, more than $25,000 from the fund has gone toward oral health care services.

According to Deborah S. Rodriguez, DDS, faculty co-chair of the committee, most of the patients limited income is through Social Security support. “There is not a good mechanism to pay for care for these individuals,” she says. “Quest for Care attempts to help as many of these individuals as possible.”

With an excess of 50 students on the committee, Quest for Care is largely a student organization, with faculty and staff advisors. Students receive more than altruistic benefits from the program. “Students present cases to the committee, look at patients’ finances, and review treatment plans,” says Seibel.

Bryan Connolly (’05), dental student and committee co-chair, has very personal reasons for his participation. “I have a brother with a mental illness,” he says. “Growing up with someone who is struggling just to get through the day helped me to appreciate just how desperate and in need some people are.”

When Connolly came to the Dental School, he found that Quest for Care was a natural fit for him and provided a unique opportunity to get involved in patient care.

Rodriguez, likewise, has an interest in helping the disabled. “I want to be able to improve people’s lives,” she says. “Unfortunately, due to the constraints of finances, we aren’t always able to help those who need it most. This fulfills that need for me.”

Seibel says, “I am quite impressed and gratified by the commitment of time and energy from the students.”

Connolly’s philosophy on Quest for Care speaks to the heart of health care: “Every human being deserves the basic fundamental of health care, and dentistry is no exception. It is easy to get caught up in concerns about our own income, especially when we, as professionals, come out with so much debt. However, participating in Quest for Care has helped me to keep my focus on the original reason for join-
SNDA Launches First Impressions Program

On April 23, 2005, the Student National Dental Association (SNDA) held its first Impressions program. The Impressions program, which began at the University of North Carolina in 2002, is geared toward exposing college students to the dental profession. Twelve students attended, representing Hampton University, Longwood University, Morgan State University, and the University of Maryland, College Park.

The event started with breakfast, followed by a series of presentations that included an introduction to the University of Maryland Dental School and the SNDA; a motivational introduction into dentistry by alumna Tracy King, DDS; information on financial aid and the application process by Patricia Meehan, DDS; and research opportunities by Keith Mays, DDS.

Students received a tour of the School, followed by preparation for the Kaplan Dental Aptitude Test, designed to help improve the students’ ability to do well on the exam. Next, mock interviews were conducted, followed by taking and pouring dental impressions. The day ended with a panel discussion with local dentists.

The participants truly enjoyed our program, and very positive “impressions” were made on them.

—Albert Quashie, President, SNDA
Student Research Day in Annapolis

Two University of Maryland Dental School dental hygiene student abstracts were selected by the University System of Maryland (USM) Council of University System Faculty (CUSF) for presentation on March 2 at the Undergraduate Student Research Day in Annapolis at the House of Delegates Exhibit Hall. This is the second year that this event was sponsored by CUSF and the Office of the Chancellor. This also marks the second consecutive year that two dental hygiene student abstracts were selected from USM’s 12 universities for presentation to legislators.

Lynn Wilder, Erica Matthews, Monika Kaja, and Lili Gimma (DH ’05 graduates) presented their poster, “The Edmondson Community Center Health Improvement Program.” Their advisor was Sheryl Syme, RDH, MS, associate professor in the Division of Dental Hygiene and course director for Community Oral Health.

Monireh Hadi Sichani, Katherine Belangue, Evelyn Castillo, Haydeh Eradat, and Linda Tunmatip, all in the Dental Hygiene Class of ’05, presented their poster, “New Horizon Dental Clinic Health Promotion & Prevention Program.” Their advisors were Syme and Jacquelyn Fried, RDH, MS, associate professor and program director, Division of Dental Hygiene. These community health projects were completed in the students’ fall semester course, Community Oral Health, taught by Syme. This course integrates community service learning into the oral health didactic dental hygiene course.

CUSF organized Student Research Day to highlight undergraduate research, along with the value that USM brings to Maryland. The dental hygiene students were extremely well-received by the legislators as representatives of University of Maryland Dental School and the Division of Dental Hygiene.

Pictured (left to right): Haydeh Eradat, Katherine Belangue, and Monireh Hadi Sichani.

Your News is Our News

Please share your news with us. Send your updates to:

Regina L. Davis
Mdental Magazine
University of Maryland Dental School
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Please remember the University of Maryland Dental School in your will or estate plan.
On May 18, twelve Dental School students from the Class of ’05 were inducted into Omicron Kappa Upsilon (OKU), the National Dental Honor Society. Organized at Northwestern University in 1914, OKU was established “to encourage and develop a spirit of emulation among students in dentistry and to recognize in an appropriate manner those who shall distinguish themselves by a high grade of scholarship.”

Mark A. Reynolds, DDS, presided over the ceremony; Mark A. Macek, DDS, DrPH, delivered the invocation; Ashraf F. Fouad, DDS, read “The Charge”; and Mary Beth Aichelmann Reidy, DDS, delivered concluding remarks. There are 61 chapters of OKU, and Phi of Maryland was founded as the 21st chapter.

The new members are:
- T. Bryan Connolly
- R. Scott Edwards
- Christine Dora Ferrell
- Natasha Marie Flake
- Joseph J. Franzke
- Brian Gayle Holman
- Lauren Renee Keiser
- Heejung Kim
- Judy Melamed
- Troy Alan Smith
- Susie Nettelbeck Watkins
- Erin Kendra Zizak

Mark Reynolds presented Mary Beth Aichelmann Reidy with a plaque in recognition of her outstanding service as the immediate past president of OKU.
Congratulations, Class of 2005
DEAN
Christian Stohler

ASSOCIATE DEANS
Warren Morganstein
Enrichment Program and Dean’s Faculty
James Reynolds
Finance, Institutional Operations, and Planning
John Sauk
Research, Administration, and Training
Margaret Wilson
Professional Programs

EXECUTIVE ASSISTANT TO THE DEAN
Wilhelma Garner-Brown

DEPARTMENT CHAIRS
Ronald Dubner
Biomedical Sciences
Ashraf Fouad
Endodontics, Prosthodontics, and Operative Dentistry
Jacquelyn Fried
Dental Hygiene Director
Stuart Josell
Orthodontics
Robert Ord
Oral-Maxillofacial Surgery
Mark Reynolds
Periodontics
John Sauk
Diagnostic Sciences and Pathology
Norman Tinanoff
Health Promotion and Policy

DIRECTORS
Michael Belenki
International Programs
James Craig
Information Technology
Harold Crossley
Continuing Education
Regina Davis
Communications

MISSION
The Baltimore College of Dental Surgery, Dental School, University of Maryland, Baltimore, seeks to graduate exceptional oral health care professionals, contribute to the scientific basis of treatments for diseases of the orofacial complex, and deliver comprehensive dental care. These accomplishments will promote, maintain, and improve the overall health of the people within Maryland and have a national and international impact.

FUTURE VISION
As we strive to achieve our goals, we envision the future:
Reflecting on its heritage, the Baltimore College of Dental Surgery, Dental School, University of Maryland, Baltimore, will join in full partnership with other campus entities. The resulting multidisciplinary ventures will contribute to our prominence in scientific discovery, scholarly activity, and service to the community. Global outreach efforts of faculty, students, and staff will be mutually rewarding. An atmosphere of collegiality and intellectual stimulation will prevail, nurturing students, faculty, and alumni.

Administrative support will help foster creativity and responsiveness to a range of opportunities. The School will create and maintain an organizational structure that enhances our ability to achieve our goals. Students, faculty, and staff will provide the highest quality oral health care. The world’s first dental college, established in the 19th century, will take its place as the premier dental school of the 21st century.
In This Issue

- Fighting Noma in Africa
- Creating Smiles Worldwide
- Operation Smile: Vietnam
- Harry Goodman Profile
- Dominican Dental Project
- Dean’s Faculty

Baltimore College of Dental Surgery
Office of the Dean
666 West Baltimore Street
Baltimore, MD 21201

www.dental.umaryland.edu