

PD Essentials

Mouth cancer breakthrough

The National Institute for Health and Clinical Excellence (NICE) recommended the use of cetuximab (Erbix) in combination with radiotherapy for the treatment of locally advanced head and neck cancer last month.

Cetuximab in combination with radiotherapy can be used as an alternative in mouth cancer patients for whom chemoradiotherapy is inappropriate. The Appraisal Committee accepted that cetuximab plus radiotherapy caused less severe adverse effects than the platinum-based chemoradiotherapy regimens. Currently both carboplatin and cisplatin are used for chemoradiotherapy in the UK with horrific side effects.

This news follows the Mouth Cancer Foundation's successful appeal to the Appeal Panel of NICE to ask its Appraisal Committee to reverse its previous appraisal

decision not to recommend the drug for head and neck cancer patients in England and Wales in May 2007.

Dr Vinod Joshi of the Mouth Cancer Foundation said, 'This is a happy day for people living with locally advanced head and neck cancer in England and Wales and the Mouth Cancer Foundation is pleased to have played a role in ensuring that cetuximab will be available to them. For many years, the treatment options for this devastating disease have been limited. The availability of cetuximab is the first significant treatment advance since the 1950s for head and neck cancer. It offers the right patients significant improvements in local control of the disease and survival.'

The Mouth Cancer Foundation represents the views of its members constituting a wide population of patients with mouth cancer.



Top tips for the ultimate conversion

If you are one of the many hundreds of dentists across the UK considering a move towards private dentistry, there are some very important



Quentin Skinner's top tip: 'There should be an obvious change in the patient experience'

considerations to bear in mind. Over the coming months, Quentin Skinner, chairman of DPAS, a provider of practice-branded dental payment plans, will be offering some top tips on how to go private.

Some 20 years ago, the prospect of going private would have been a daunting prospect for most dentists. However, nowadays, conversion should not present too much of a problem to most dental practitioners given the change in patient expectations, especially to those who prepare for such a move. The change from NHS practice to private funding in itself necessitates a change of mindset, which dentists and their practice team (and indeed their patients) should find enlightening. The following thoughts, which will be outlined over the next few editions of *PD Essentials*, comprise a suggested

'top 10 tips to consider' when planning a conversion from the NHS to an independent practice.

Tip number one

The most important consideration when facing such a change is to understand that patients – many of whom still consider the NHS as being 'free' – if asked to pay for private dentistry will expect to see a change in the service they receive. Naturally, the fast-process treadmill that is created by the NHS Contract should be replaced by longer, less stressful appointment times, where the patient can appreciate the transformation in the way that they are treated. There should be an obvious change in 'the patient experience'.

If you would like more information on how to go private please contact DPAS on 01747 870910 or visit www.dpas.co.uk.