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Erratum: In the 2019 Winter/Spring issue, in “Where the Girls Are,” it was wrongly stated that the 2018-19 ODA president was a woman. We apologize for this error.

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In 1926, the Carnegie Foundation for the Advancement of Teaching published the Gies Report. Penned by author William J. Gies, the report examined the status of dental education and training in the United States and Canada.

Like its predecessor, the Flexner Report of 1910, Gies’ paper asserted that dentistry was a learned profession, and therefore belonged within the university system where students should be subject to education in both basic and clinical sciences and where research can and should be performed.

It’s been nearly a century since the Gies Report and much in professional education has changed. Women now make up half or more of our student cohorts, and female faculty and researchers add much-needed new perspectives. The rise of education theory means classroom learning is not just about memorization and lectures, and we appreciate the ways different learners learn.

But despite the passage of time, many of the basic principles that lie at the heart of the Gies Report endure. Over the past year, for instance, a number of dental educators from across North America came together to consider the future of dental education in the context of the Gies Report. These ongoing discussions keep coming back to the idea that to remain relevant and impactful, dental education needs to embrace both teaching and research.

Only in this way can we continually improve our ability to treat our patients effectively.

For the field of dentistry to keep advancing, it needs to have dental schools that align with our universities’ missions to both create knowledge and pass on knowledge. Teaching and research must be equally valued in order to keep our schools relevant. Strong dental schools mean a strong profession. As we lay the blueprints for the future of dental education, we’ll continue to reference the Gies Report as we link the past with the future.

DEAN DANIEL HAAS, 77B, 87B PHD
Dentists in Ontario find 10 per cent of all oral cancers in the province — so concluded a Faculty of Dentistry study looking at data spanning 11 years.

Assistant professor Marco Magalhaes oT9 PhD, iT5 MSc OP/OM found a steep rise in the overall number of carcinomas and dysplasias detected by dentists over that time period. He assessed 63,483 biopsies submitted to the Toronto Oral Pathology Service (TOPS), which is run by the Faculty.

TOPS aided in the diagnosis of 828 cases of oral cancer and 2,679 premalignant lesions during the study timeframe. In 2005, it found just 56 cases of cancer and 99 cases of oral epithelial dysplasia. By 2015, oral cancers nearly doubled while dysplasias more than tripled.

“The number of diagnosed cases outpaced both the rise in population in Ontario and the increased number of dentists licensed in Ontario,” says Magalhaes.

Ontario does not collect data on precancerous lesions, making this aspect of the study, which was published in the Journal of the American Dental Association, particularly valuable. “This supports the fact that early detection really is the most important step here,” Magalhaes adds.
A paradigm-shifting UofT Dentistry study links the formation of cavities and tooth-coloured filling failure to the body’s immune system.

“No one would believe that our immune system would play a part in creating cavities,” says lead author Yoav Finer OT3 MSc Prosth, who holds the George Zarb/Nobel Biocare chair in prosthodontics at the Faculty of Dentistry. “Now we have evidence.”

The study, which was published in Acta Biomaterialia, shows that the decay of dentin and fillings is caused by bacteria interacting with immune cells known as neutrophils. These cells combat inflammation and battle bacteria. Alone, they don’t harm the teeth. “They don’t have acid, so they can’t do much to mineralized tooth structures,” says Finer.

When neutrophils attack bacteria in the mouth, that process generates acid byproducts, which demineralizes teeth and harms tooth-coloured restorations. “It’s a collaboration of destruction,” says study author Michael Glogauer G73, G79 Dip Perio, G79 PhD, professor at the Faculty of Dentistry and chief dentist at the University Health Network.

The research helps explain why patients with tooth-coloured fillings face high rates of recurrence of caries, and could lead to novel approaches to preventing caries and the development of new filling materials.

Collagen before and after 24-hour incubation with neutrophils

IMMUNE SYSTEM TRIGGERS CAVITIES

Dean Haas and former dean Allison receiving award at ADEA

DEAN HONoured WITH AWARD

Faculty of Dentistry dean Daniel Haas has been given a 2019 Chair of the American Dental Education Association (ADEA) Board of Directors Citation.

Haas and McGill University former dean Paul Allison — who was also awarded — have been fostering collaboration with ADEA via their positions with the Association of Canadian Faculties of Dentistry.

All 10 Canadian faculties of dentistry have adopted a tailored ADEA national student exit survey.

GET INVOLVED

All our alumni are voting members of the Faculty of Dentistry Alumni Association. Become a board member or take part in the annual fall Alumni Association meeting. Become an instructor, a mentor, a volunteer or a donor. For more information: www.dentistry.utoronto.ca/alumni.
Not all neutrophils are the same. Researchers from UofT Dentistry have discovered two subsets of these white blood cells.

“We found two distinct neutrophil states in blood, and these populations vary depending on the health of the patient and if there are acute or chronic infections,” says Michael Glogauer, professor at the Faculty of Dentistry and chief dentist at the University Health Network.

Using a novel method of preserving and analyzing neutrophils in blood, the team looked at mice with acute infections and humans with chronic gingivitis, publishing their findings last spring in *Blood Advances*.

They found about 10 per cent of neutrophils are primed neutrophils, or pPMNs, which are in a state of constant readiness. These primed cells disappear from the bloodstream and enter inflamed tissues within 15 minutes.

More plentiful resting state neutrophils, or rsPMNs, become activated within one to three hours.

Further research on these two different types of neutrophils can produce models for diagnosing and tracking inflammatory diseases such as periodontitis, cancer and osteoarthritis.
Professor Chris McCulloch was honoured with the first-ever Canadian Association of Dental Research (CADR)/Association of Canadian Faculties of Dentistry (ACFD) National Dental Research Award in June. The award recognizes McCulloch’s remarkable contributions to oral health and also his mentorship, research innovation and leadership.

Assistant professor Annie Shrestha PhD, MSc Endo has won a Colgate CARE grant worth US$30,000 for her ongoing work on immune cells. Her project is entitled “Injectable, Thermosensitive Scaffolds Modulate Immune Cells and Regulates Healing.”

Shrestha is the second UofT Dentistry researcher to receive a grant from Colgate-Palmolive, which recognizes emerging academic researchers. In 2017, assistant professor Karina Carneiro was awarded a CARE grant for her work on nanomaterial organization.

Associate professor Laura Dempster Dip Bact, BSc D, PhD has been awarded the 2019 ADEA Gies Foundation Education Fellowship. As part of her award, she has been invited to spend three months doing research at the American Dental Association office in Washington, DC.

Her project looks at non-technical, non-academic attributes common to successful dental professionals. “The challenge is twofold,” she says. “Both in identifying and in how to measure those attributes.”

This is only the second time that a researcher from a Canadian school has been awarded the fellowship.

Associate professor Yoav Finer, who holds the George Zarb/Nobel Biocare chair in prosthodontics, has won a Connaught Innovation Award from the University of Toronto.

Twelve research groups at the university will share almost $600,000 for their research for technologies that have strong socioeconomic or commercial potential.

Finer, through start-up Mesosil, is developing a new biomaterial to prolong the life of tooth-coloured fillings.

Photos: Courtesy ADR, Jeff Comber, ADEA, Jeff Comber

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TEACHING the TOUCHY-FEELIES

How dental schools are prioritizing communication, ethics and professionalism

BY DIANE PETERS  ILLUSTRATION BY MATTHEW BILLINGTON
Cover Story

During her first week as an associate at a Toronto clinic, Michelle Huang IT8 performed a root canal on a somewhat disgruntled patient. It took two hours and when she was done, she realized the filling wasn’t quite right. It would fail in time.

She pondered whether to say something and thought back to her training at UofT. “All you’re trying to focus on is doing this prep properly or drill properly,” she says of her time as a dental student. “We’re so caught up in the technicality of things, we don’t focus on how to communicate properly or deal with things that are not just clear black and white.” She found additional guidance from the case studies she’d debated as a member of the Student Professionalism and Ethics Association. Huang took the patient aside and gently told him that he should come back, as she wanted to fix the filling.

He was angry. “I want to see another dentist,” she overheard him say at the front desk. That stung. And while Huang wondered if she should have offered a new filling on the spot, she knew she’d done the right thing. “If I’d just said goodbye, I knew I wouldn’t have been able to sleep that night.”

Every dentist has faced similar challenges and relied on skills that have nothing to do with working with teeth — dilemmas over treatment plans, bills, prescriptions and tough diagnoses.

Traditionally, during the four years of dental school, professors and clinical instructors only touch on communication, ethics, professionalism and practice management. “Dental school has been focused on these important technical skills and getting the clinical stuff down pat. But we’re realizing that’s not quite enough,” says associate professor Laura Dempster.

Schools want to find the time to teach more non-technical skills. “We’re trying to build a better clinician,” says Dempster. They’re looking for effective ways to teach this more abstract knowledge to students distracted by their next clinic rotation or biology exam. It may take more than careful curriculum development to convey that explaining a procedure to a patient is just as important as being able to execute it.

The Demand for Skills

At Nebula Dental in Edmonton, Amr Abou zeid IT4 often gains new patients complaining about their last dentist’s questionable treatment plans or fillings that sit high, then reveal what’s really bothering them. “He just walked in with a mask and never looked me in the eye and then walked away,” they’d say.

It wasn’t the professional’s technical skills, but their interpersonal ones. “We all make errors. But if someone trusts you and really likes you, they’re more likely to give you more chances, and keep coming back,” he says. He worries about the impact on the profession. “It’s causing problems. It’s creating mistrust. It’s affecting our public perception.”

Communication is the biggest reason why patients complain

Struggles with communication can be a barrier to a professional’s success. “Communication is the biggest reason why patients complain,” says Chris Swayze, who saw this during his tenure at the Royal College of Dental Surgeons of Ontario (RCDSO). “There’s always going to be complications as a dentist. It’s how you handle those complications,” says Swayze, who’s now director of Continuing Dental Education with the Faculty. Dempster says she’s heard that as many as 70 per cent of patient complaints lodged with Ontario’s
dental regulatory bodies are communication based.

The same issue arises with physicians: a 2018 report from the Canadian Medical Protective Association found most problems between these professionals and their patients relate to communication. A 2018 study of 1,342 ophthalmologists showed that younger physicians were more likely to draw complaints, while those over 70 had the fewest patient problems. Study authors concluded that these young doctors had problems that “may derive less from cognitive or technical deficits than from behavioral and confidence issues.”

“You need to know how to listen, how to ask the right questions and close the feedback loop. Know you understood what the patient wants you to understand,” says Larisa Naderiani, senior dental consultant and practice advisor with the RCDSO. “It’s about written communication as well,” she adds. Many complaints sent to the RCDSO hinge on poor record keeping, but also the ability to clearly convey the ethics of practice. “Communication and ethics are closely related. You can’t have one without the other,” says Naderiani. Strong ethics around treatment plans, disclosing mistakes and keeping information private can be the defining difference between running a successful practice or ending up in front of a disciplinary panel.

Even when and how to communicate can make for a quandary: Abou zeid loves talking to his patients, but one tends to get very chatty, which was a problem on a recent hectic day. He told her: “Sorry, I’m busy today, let’s catch up next time.” She was upset by his words, but he’s not sure how he could have resolved the issue better. “We can’t meet everyone’s expectations,” says Abou zeid.

Communications and ethics merge together around professionalism. “The topic of professionalism is a bit abstract,” says Greg Anderson, assistant professor at UofT Dentistry, who assists course director and registrar of the RCDSO, Irwin Fefergrad, with Ethics, Professionalism and Law. Professionalism relates to how you speak to clients, keep records, deal with insurance companies, present yourself, and make choices in your private life too. “It ties in with consent. It ties in with communication. It permeates everything,” he says.

Today’s healthcare professionals need to improve these skills across the board. The 2018 study of Canadian physicians found doctors looking for support regarding complaints from patients had risen 71 per cent over a decade. “Dentistry has moved away from clinician-centred care to more patient-centered care. There’s shared decision making, and the patient is seen as a person,” says Dempster. Today’s patients expect good technical care, and from a compassionate, professional, upstanding person who speaks to them as an equal.

**SCHOOLS GET NON-TECHNICAL**

Traditionally, dental schools have spent limited time on so-called soft skills. When Anderson went to school in the 1980s, he recalled being taught some practice management, and most of the interpersonal, legal and ethical content came via a single talk from the registrar of the RCDSO.

Dentists were expected to improve these skills on the job. Some dentists like Abou zeid learn their soft skills via other professional training. Before doing his DDS, he worked as an IT consultant for Deloitte Canada, where he received more than two months of intensive communications training and got constant feedback from his boss on this aspect of his work.

Now, dental schools are adding more of this type of content to the DDS curriculum, and via continuing education, too. “If what we keep hearing is communication skills are lacking, then we need more courses. More mandated courses and in more formats,” says Naderiani. Finding time is a challenge, but also these skills don’t have a cut-and-dried pedagogy. “I can’t put words in your mouth. It’s not like we can give you a script and you can read the script again in five years and you’re fine,” says Anderson.

Dempster, who was recently awarded a fellowship to study non-technical, non-academic attributes of successful dentists, has been assessing ways to help students master communications. She uses trained actors to role-play scenarios with students and the class discusses the videotaped interactions later. Huang recalls that for her scenario, a persistent and knowledgeable patient kept asking for an opioid script. “I thought the exercise was really helpful,” says Huang.

Dempster recently had students explain a dentistry-related issue to the actors, and then had the actors explain it back. “The students are very good at giving information, but you have to check back to make sure the patient understands.” She’s hopeful that addressing communications in some way during every year of the DDS will get students on the right path. “This is part
of lifelong learning. This isn’t a one shot deal,” she says. “I’m trying to thread it through the curriculum.”

Meanwhile, students get ethics content at UofT Dentistry in second, third and fourth year, with final year content now expanded into a longer, seminar course. Developed and executed in partnership with the RCDSO, this material is taught mainly through real-life case studies, which Naderiani says has been shown to be very effective.

Ethics poses a pedagogical challenge: you can’t change people’s values and personalities through a few university courses. “A lot of ethics and professionalism is about the person, and that’s something that’s hard to teach,” says Huang. Anderson thinks, however, that bringing ethical dilemmas to students, year after year, shows them there are outcomes to their decisions, and a bigger picture. “I tell students that when I turn out the lights and close the door, I want to be able to walk to my car with my head held high,” he says.

"You need to know how to listen, how to ask the right questions and close the feedback loop"

It’s also challenging to assess these non-technical skills: many of these courses at UofT Dentistry are graded as pass-fail, as they’re such a challenge to assess objectively. Dempster has been using reflective writing as a way for students to look back on communications exercises. Cynthia Gadbury-Amyot, professor and associate dean for instructional technology and faculty development at the University of Missouri – Kansas City, is a proponent of this approach too — using it at the dental school and other faculties right through the four years, culminating in a portfolio assessment at the end. “It really helps them connect the dots around what’s been going on during these four years,” she says. Reflective writing is a skill they must develop, but that helps them assess their knowledge gaps. Those who do well are honest and show they’ve improved.

Anderson thinks the problems with assessing soft skills connects to a lack of definitions. While many organizations have codes of ethics, few have defined acceptable levels of communication skills, or what professionalism actually is. “In order to develop some kind of rubric of evaluation, you have to do things like define the top 10 characteristics of a professional.” Dempster, meanwhile, is working to outline the soft skills dentists best need to thrive.

Students don’t always see the value of these skills. While he later appreciated his training in the corporate world, at the time Abou zeid shrugged it off. “I was only 23, 24 at the time, and I didn’t care about that stuff.”

While those designing curriculum try to gear the content to where students are in their learning journey, getting more practice-oriented closer to graduation, many seek out these skills in their early years of practice, in a professional development context. “We don’t know yet what is the sweet spot is for learning. It seems it’s never too early and never too late,” says Naderiani. But DDS students may miss opportunities in their non-technical classes while they focus on traditional dentistry skills. Traditionally, Dempster says, “This subject has been given a bad rap because it seems touchy-feely. It’s something you can’t measure.” She’s working on collecting more quantitative data to help prove her case.

Dental schools are finding ways to shift, to achieve real student and faculty engagement, plus align pedagogy. That’s already underway, with professionalism and collegiality taking on an important place in UofT Dentistry’s strategic plan. Swayze has seen a change in how the Faculty deals with admissions: students coming for interviews were given a video made by DDS students that highlighted the school’s friendliness. “The school environment has to be more warm and fuzzy if you want dentists to be more warm and fuzzy,” reasons Swayze.

Baking it right into schools’ cultures could make dental education fit better with the real lived experience of dentistry, which is a compassionate, collaborative profession. “Dentistry is all about competencies, you have to just think of this as one more: behavioural competency,” says Anderson. “And that’s where our focus is now. Bringing this to the forefront, not just letting it be in the periphery.”

LEARNING THE BIZ

The practice management course at UofT Dentistry has been transformed by assistant dean of clinics James Posluns 9T1, 9T8 Dip Ortho. It runs over DDS 3 and 4 and has become increasingly academic, covering finance, law, office software and risk management. The RCDSO also offers guest lectures on topics such as professional liability. “We try to cover the nuts and bolts of practice,” says Posluns. Still, he says it’s hard for students to take it all in. “They’re not ready to absorb it, they can’t relate to it.”

But the Dental Practice Management Program, a 10-week lecture offered by Continuing Dental Education, runs annually and always fills up. The Faculty’s continuing education online platform, uotooth.ca, also runs popular courses on IT and HR. Says Swayze, “When dentists actually get out into practice, they very quickly realize they don’t know how to run a practice.”
Konrad Binder is the epitome of a professional engaged at his job. In practice, he's committed to patients and looks forward to treating them. Since graduation, he's associated at a number of clinics and is now opening up a private practice to call his own in a rural area just outside Ottawa.

He has also been teaching and lecturing part-time in the dental hygiene program at the Canadian National Institute of Health. He's discovered he has a passion for teaching, and plans to integrate it into his schedule, even when his new practice is in full swing. “It’s definitely worth it, that rewarding feeling at the end of the day,” he says of working with students.

Binder links his commitment to work back to his time at UofT Dentistry, and he’s not alone. According to a 2014 Gallup-Purdue study, workplace engagement has firm roots in education. Via a survey of 30,000 graduates, the study found that the relationships formed and supports offered while at school mattered more for long-term outcomes than whether the institution was private versus public. Graduates who’d felt cared for, were taught by those who made them feel excited about what they were learning, and felt encouraged by their teachers were 2.3 times more engaged in their work years later. And those who had passion, enthusiasm and commitment to their jobs had five times better odds of thriving in all areas of physical and mental wellbeing.

Dentistry, with its clinical mentoring component, tends to be a profession built upon relationships. While smaller schools may find connections between teachers and students happen as a matter of course, bigger faculties like UofT Dentistry — with such a large student body and massive clinical operations — work to ensure this aspect of education is present. Dental
schools that understand the importance of connection are making extra efforts to make them happen, and for good reason: engaged students lead to engaged dentists. These healthier and happier people create a better profession, which benefits everyone.

TEACHERS TAKE THE LEAD

UofT Dentistry began looking earnestly at the student experience — and the critical role its mentors and teachers play — with the creation of the Faculty’s Strategic Plan 2014-19. That plan included the hiring of the Faculty’s first director of student life, Richard Rayman 7T0. “All I do is advocate for the students,” says Rayman, who started his position in May 2014. A clinical instructor since 1987, and the Faculty’s former Comprehensive Care Program director, Rayman knows the students, their interests and their fears, extremely well. “I listen to them.”

Two years later, Eszter Somogyi-Ganss 1T3 MSc Prosth was among the first teaching stream appointments made by the school — the second student-centric move inspired by the Strategic Plan. Created as part of a push to improve students’ learning experiences and outcomes, these teaching positions are proving to be highly effective.

“I want the students to understand that I’m not doing this course for myself, I’m doing it for them,” says assistant professor Somogyi-Ganss, who first began teaching at the Faculty in 2008. Somogyi-Ganss is part of a wave of dental educators updating classical dentistry training. She makes sure students have an active voice in their own education and puts a premium on dialogue. Every two months, as part of her prosthodontics course, she asks students for feedback in the form of anonymous course criticism. Her response rates – between 50 and 80 per cent – amply demonstrate that students enjoy the feedback loop. (In contrast, the average return for the University’s online course evaluations is somewhere between 20 and 30 per cent.) The evaluations give her “lots of ideas I can implement at once,” she says.

It’s not how many broken teeth there are.
Stories are what really capture peoples’ interest

But while teaching-stream professors have a mandate to prioritize close bonds, clinical instructors, who often give up lucrative days in practice to help students care for patients on the clinic floor, tend to come to teaching out of a desire to give back.

Andrea Jack is one of them. A clinical instructor in restorative dentistry at the Faculty since 2014, Jack sets herself goals for teaching. These include empowering students to be passionate about what they’re learning and encouraging critical thinking and problem-solving skills. “I want to instill in the students that you’re practicing for life. I’m still practicing, in my mid-fifties. I still have a lot to learn.”

For Joe Stokl 8T0, winning the Faculty’s Bruce Hord Master Teacher Award in 2018 meant he’d come full circle: he’d been a student of Hord’s in the last two years of his undergraduate degree. Between third and fourth year, Hord even helped Stokl get a summer job, doing maintenance. “How lucky can you
get? He was probably one of the best people I have ever met,” says Stokl.

Now, Stokl models his own teaching after mentors like Hord. While he started as a part-time instructor at the school in 1985, commuting from Stoney Creek, just outside Hamilton, he’s now up to four days a week. He’s also an active participant in the full cycle of student life: he’s there to interview them, and there when they graduate, and strives to ensure they feel cared for at every stage in between. “I consider myself more of a coach than a teacher. I’m there to build their self-confidence and self-esteem.”

In fact, many of the Faculty’s instructors treat their roles as mentors as seriously as they do their role as dentists. Like Stokl, Joel Rosenbloom, who has been teaching at the Faculty since 1990, believes in “levelling the playing field” between the teacher and the student.

He often sits in the Student Commons and offers an ear to whoever is looking to talk. He’ll go over clinic notes, offer advice to students on their career paths — like so many of his colleagues — and works with students planning out lunch-and-learn sessions on dentistry in Africa and mental health.

He’s also a big believer in storytelling. Whenever he can, Rosenbloom will pull out an anecdote to get his points across. “It’s not how many broken teeth there are. Stories are what really capture peoples’ interest.”

Failure is a part of the learning process, Rosenbloom says, and something every dentist needs to learn. So, often he’ll capitalize on those moments in his stories. It’s another form of removing the barriers between the students and the teachers, and he finds it comforts students along their steep learning curve.

What these teachers share in common is their emotional intelligence and connection with the students. And those emotional attachments — the human side to learning — play an important part in student’s post-grad success. According to the Gallup-Purdue study, having a professor who excited students about what they learned doubled the odds of those students’ engagement on the job post-graduation.
More than a century ago, you learned how to be a dentist from a family member or someone in your community, hands on. Early dentistry wasn’t pretty: cringeworthy early photographs and drawings from the Victorian era depict home tooth extractions with string or by travelling dentists with dental keys — tools inserted between tooth and gum to provide leverage for a good yank — on patients looking miserable but desperate to end the pain of infection. Assistants often hovered nearby, ready to hold patients still in an era where anesthetic beyond a swig of whisky was virtually unknown.

Once the profession aligned itself with higher education, practitioners made the leap from journeymen to medical professionals. The end of the 19th century saw the rise of dental schools in Canada and the development of more evidence-based care. And for the last several decades, universities’ approach to pedagogy has helped transform dentistry into a key healthcare profession. As Donald Gullet, secretary of the Canadian Dental Association from 1943 to 1965 and the author of *A History of Dentistry* once said, “Measurement of the stature of a profession can best be measured by three fundamentals: education, association and journalism.”

While formalization helped elevate the profession, dentistry’s grassroots history impacts education to this day. Today’s dental clinicians and researchers have more than ample proof that oral health care impacts whole-body health, yet its schools largely operate outside of medical education, and dentistry continues to set its standards of care independently of the medical regulatory system.

Canada’s 10 dental schools, often working in collaboration, keep pushing for an even higher level of excellence and stature. They’re working to keep pace with the demands of the profession by debating what to teach, how to prioritize research and how to integrate the latest technology. Their success on these fronts will continue to impact dentistry’s public perception, and its ability to stay innovative and current.

**DENTAL EDUCATION’S EARLY YEARS**

Canada’s early dentists learned their craft as apprentices and while they had important skills and knowledge, were not considered medical professionals on the same level as physicians. By the mid 19th century, the perceptions surrounding dentistry began to shift. Dentistry, its practitioners claimed, was a medical profession. But when professionals in the United States tried to regulate and educate themselves, they found little support from various medical schools, forcing the profession to develop independently. The first dental college in
the world opened in 1840 in Baltimore and began granting the Doctor of Dental Surgery degree.

Likewise, in Canada, the push to create a formally recognized profession was integrally bound up with the question of education. It was 1867 — in fact, on July 2, the day after Confederation — when a group of dentists led by Barnabus Day gathered to create the Ontario Dental Association. In 1868, the Act Respecting Dentistry passed in the Ontario Legislature. One of the world’s first pieces of dental legislation, it became a model for other provinces.

The Act would be key to founding Canada’s first dental school, which launched in Toronto in 1869. The Toronto School of Dentistry boasted a tuition of $100 and a six-month program. It graduated two students and folded. Six years later, in 1875, James Branston Willmott and Luke Teskey began running a second school on behalf of the Royal College of Dental Surgeons of Ontario. Their first cohort of 11 students were welcomed into a classroom above a cabinet shop at 46 Church Street in Toronto. Tuition was $100 and included lectures, plus training through a public infirmary, which treated 120 patients during the first session.

While the early schools aligned with the province’s dentistry organizations, it would be another 13 years before the school would reach an agreement with the University of Toronto to extend the degree of DDS. While Ontario led the pack, dental schools and associations sprang up across the country by the turn of the century, showing a keenness to formalize training by way of dental surgery curricula. By 1971, with the opening of Laval University’s school, the country had 10 schools.

A RISING SOPHISTICATION

From its inception as an organized profession, dentistry invested in setting regulated professional standards. By 1889, those standards became official, when the National Association of Dental Faculties began issuing resolutions regarding what should be taught, and for how long.

Dental curricula and the larger philosophies behind education became part of the zeitgeist in North America following the release of two major reports, both funded by the not-for-profit Carnegie Foundation. The 1910 Flexner Report, while focused heavily on medical training, deeply influenced dental schools. The report highlighted the importance of schools being non-profit, linking to established universities, adhering to high standards for admissions, having trained full-time faculty and integrating scientific thinking into curriculum.

Then, the 1926 report Dental Education in the United States and Canada, penned by William Gies of Columbia University, commended dentistry for progressiveness in technical procedures like restoration and replacement but called it backwards in terms of prevention and therapeutics. Gies
recommended schools increase their focus on research, bring in higher admission standards (at the time only high school was required) and increase scientific research so the field could continue to progress. He advocated for dentists and medical doctors to work together and to see oral health as integral to overall health.

James Gutmann, professor emeritus at the Texas A&M University College of Dentistry in Dallas, says the Gies Report proved crucial for bringing science into dentistry. “We didn’t have real dental scientists until the 1920s and 1930s. A major impact on the development of dentistry was the scientific basis integrated with the curriculum necessary to create a dental professional,” he says. Gutmann also points to the significance of the establishment of the International Association for Dental Research in 1920. Over the past 100 years, the IADR has influenced scientists from other disciplines to become interested in oral health research and has promoted knowledge sharing internationally.

In response to the Gies Report, research started to become a vital part of the mandate of Canadian dental schools — particularly in Toronto, where the school was located next to some of Canada’s most important research hospitals. Roy Ellis, 3T9, 1T7 BSc D, 4T2 MSc D, first a professor and then dean at the Faculty, was one of the voices urging the National Research Council to form an associate committee in dentistry and fund more research. By 1952, there were 27 dental research projects in the country with 15 of them getting NRC funding, sharing $35,000.

While Gutmann notes other countries have very different regulations for dentistry (many admit students directly from high school), the Canadian and American systems have developed in parallel. In the 1950s, the American Dental Association Council on Dental Education had a further legitimizing effect when it began to recognize Canadian schools. Embedded within the university framework, where it could remain free from monetary interests, dental education soon put itself on par with medicine in terms of professional medical careers. Coming together proved fruitful, too. The establishment of the Association of Canadian Faculties of Dentistry in 1967 gave dental faculties a unified voice at a critical time as many new colleges and universities were launching across the country.

TODAY’S EDUCATIONAL EVOLUTION

Fast forward to today’s four-year dental school curriculum and it becomes clear that the recent history of dental education is one of continuous re-examination and fine-tuning. As healthcare and university funding models shift, and technologies and standards of practice continue to evolve, faculties are under pressure to keep pace.

Increasingly, today’s schools look to medicine to solve one of dental school’s most emerging concerns: the DDS degree cram. “We expect students to come out as problem solvers, diagnosticians, technically competent, business people, and psychologists. All these things cannot happen in a four-year period,” says Gutmann. He and others are proponents of dental faculties adding an additional year to the DDS degree.

Two years ago, UofT lengthened the third year of the DDS and ended year four earlier, shortening the summer period that clinic patients go without care. The move was intended to improve both patient and student experience, and vice dean education Jim Yuan Lai, 0T0 MSc Perio says the change has been positive. “It’s been a lot less stressful for everyone,” he says, adding that having two months rather than two weeks between the end of clinic and graduation has the additional benefit of allowing professors to identify and intervene with students who might be struggling.

“As dental schools continue to mature, they’re becoming increasingly sophisticated about their approach to pedagogy

Natoosha Nargaski, 0T7, 1T4 MSc Ortho, an orthodontist and clinical instructor and lecturer at UofT who is also president of the alumni association, applauds these changes, which have also included shifting some course work from third year into second. “I think it has been huge, between when I went to school and now. I remember third year was hell for us,” she says, adding that she sees real change around how the faculty sees and responds to student mental health needs.

Suzette Guo, 1T6, 1T9 MSc Perio agrees. “If you’d asked me seven years ago when I started with the program, I would have said things should be changed, but I’ve seen change happening, distributing the courses to make each term a bit more even,” she says, adding that the first year is also a big transition from the comparatively relaxed schedule of an undergraduate degree to the 8 a.m. – 5 p.m. schedule of dentistry.

The addition of a fifth year to DDS degrees has been a
long running discussion among some North American dental faculties, while UofT Dentistry already offers an optional year-long hospital residency at affiliated Mount Sinai, Sick Kids or Sunnybrook hospitals. Nargaski recalls that the value of her residency at Sick Kids was immeasurable. “It allows you to gain a lot more experience in a setting that’s trial by fire, but still somewhat sheltered,” she says. Meanwhile, the extra year is an existing feature of many dental schools in the United States — New York State licensing, for example, now requires a year of postgraduate residency.

Dental schools also continue to wrestle with the cost and challenges of integrating new technologies. As the rate of change in innovation, equipment, materials and digital technologies continues to ramp up, schools struggle to decide what to invest in, and what to leave behind.

“We’re going to be able to take the genetic makeup of people who have lost teeth, take buds out of a tooth bank and engineer them into a tooth and implant them in the jaw instead of metal and implants. It’s moving in that direction,” says Gutmann. Lai says that UofT Dentistry has been working to define digital dentistry and how it is used in clinical, simulation and pedagogical environments. He wants to develop guidelines on how to incorporate digital dentistry into the curriculum. But every new innovation undergoes careful scrutiny before the Faculty invests. “We’re very careful because we recognize that technology can get outdated quickly,” says Lai.

As dental schools mature, they’re becoming increasingly sophisticated about their approach to pedagogy. That includes teaching more non-technical skills. For associate professor Laura Dempster, who focuses on communication for dental students, this is about keeping pace with real-world challenges for new dentists. “There has been a serious shift from clinician-centered care to more patient-centered care where the patient now is part of shared decision making,” she says.

Meanwhile, Lai heads a strategic plan working group that examines the curriculum and streamlines learning outcomes with core competencies expected of students upon graduation. UofT Dentistry is also expanding its assessment styles to include more than testing and memorization. Similar initiatives are underway at other dental and medical schools, and this has become an emerging topic of conversation at faculty association conferences.

The evidence keeps pointing to the value of hands-on learning — harking back to the profession’s earliest days — in a wide range of environments. UofT has embraced this philosophy through expanding its service learning programs, where students treat patients in low-income communities like Haliburton and Moose Factory, as well as internationally — in Ethiopia, Uganda and Honduras.

While today’s challenges seem so different than those of a century ago, echoes remain. Dental education needs to continue to carve out its own path to keep up with what we know about the ever-evolving practice of dentistry — and what it takes to teach every new generation of dentists to put the patient first.
In May 2019, director of student life Richard Rayman gave the school a $25,000 gift. The donation will support students through the Office of Student Life through things such as planned lunches and T-shirts for the student’s charity run each October.

We spoke to Rayman about his gift and his commitment to supporting students.
What is your history with U of T Dentistry?
I graduated with my DDS in 1970 and set up my own practice. In 1987, a friend suggested I start teaching. I came down in a little grey suit and met with the director of oral diagnosis. He said, “What day do you want to teach?” And I said, “Fridays.” That was it.

When the school put out a search for a new director of clinics and assistant director, I applied and got the assistant director position. One of dean Daniel Haas’ first priorities in the Faculty’s strategic plan was to hire a director of student life. He came to see me, and I took the job.

How do you feel about teaching?
I love the students. They say I make the school a better place. When I hear anything like that, it makes me work harder. But it’s not really work when you do something you love. Corny as it sounds, I still love walking into the school every day.

How important was it for the Faculty to develop the student life office?
I was told to be an advocate for students. I don’t know how the students managed without a role like this. Being a student is stressful. Every Sunday night my wife makes cookies for the students. When someone is stressed or hasn’t had time for lunch, they’ll come by.

What benefits does the student life office extend to students?
The students and I have lunch meetings and we talk. I get to know them. I help the grad formal organizers find venues. More than anything, the office offers students an opportunity to talk to someone. All I do is listen. It’s having a person — somebody — for them to talk to, cry to.

What made you decide to make this gift?
I’m giving in honour of dean Dan Haas. I think Dan is an amazing leader. He’s probably done more for this school than anyone else. The changes have been massive. This is the time to do it, and I’d never donated before. I think we’re all in the position to give in some way. I hope others will follow my example and give back to the school in ways that are meaningful for them.

How many weddings of former students have you been invited to?
Over the years? Four this year. Probably more than a dozen over the years. No, more.

What would you like to see for the future of this office?
I’d like to keep on in this role as long as I have the same love and energy for it. Eventually, I’d like to see that the person who replaces me feels the same way I do about the students and puts them before everything else.
THE SCION

How Arthur Zwingenberger’s business gamble transformed dentistry
In 1989, Arthur Zwingenberger, CEO and president of medical supply company SciCan, handed a talented young engineer and one of the company’s senior dental experts a mandate. “Come up with something new in sterilization.”

That decision led to the advent of a new sterilization system — the STATIM quick autoclave — that would revolutionize the dental and medical device landscape. Like many must-have products, it all germinated from a pressing business problem.

Zwingenberger had inherited SciCan after the death of his father, Arno, in 1975, when he was 35. The family-owned business started back in the 1950s as a collection of agencies that imported materials from Europe for Canadian distribution. Zwingenberger had been helping his father build the company, taking on the dental supply side of the business while his father concentrated on medical devices and supplies.

Around the time Zwingenberger the younger took over, affordable long distance and fax machines came along, and then the Internet and email. New communications technology made international trade increasingly easier. That began to squeeze out companies such as SciCan.

Zwingenberger “saw the writing on the wall,” he says. The University of Toronto economics grad knew he’d need to pivot to keep the business viable and his employees working. So, from the agency model he moved the business into manufacturing and design.

“I needed to have my own technology to secure the future of my team and the company,” Zwingenberger says.

SciCan’s cutting-edge sterilization system could not have come at a more important time. With the emergence of AIDS in the late 1980s and early ‘90s, sterilization of each piece of equipment after use became a vital necessity.

With SciCan’s flash process, previously laborious one-and-a-half-hour sterilization cycles were cut down to a lean six minutes.

It was a game changer for the health industry.

With its new product on the market, SciCan prospered.

“It was quite wonderful to see it happen,” says Zwingenberger, who soon invested in other European-based dental supply companies that manufactured products such as root canal instruments, hand pieces, chairs and motors, and impression materials.

Now, with the recent merger between SciCan and Coltene, the retirement-age Zwingenberger feels he’s leaving the company he and his father built in good hands. Each of his 1,000-plus employees are like his extended family, so he chose his merger partner with care.

“I needed to have my own technology to secure the future of my team and the company.”

“…and the company.”

“I wanted to make sure that the company would continue to be a safe haven for all the employees,” he says.

That kind of focused compassion and altruism, standing behind so many of Zwingenberger’s business decisions, has also made its way to UofT Dentistry.

In 1997, Zwingenberger and SciCan generously donated a gift to establish the naming of the Arthur Zwingenberger Decanal Chair. “We wanted to give back to the University,” Zwingenberger says now of the gift, which developed out of the company’s strong business relationship with the Faculty — its clinics were fitted with SciCan chairs.

The Faculty recognized Zwingenberger with its highest honour, the Award of Distinction, in 2003-04. This year, Zwingenberger joins the newly-formed Dean’s Advisory Council, who will advise and support the Faculty to help the school meet its goals.
Graduation 2019 saw Dentistry’s largest cohort of military dentists in decades
When she was ten years old, Ming Hao (Mary) Li moved to Edmonton from one of China’s northernmost — and poorest — provinces. For a while, Li and her parents lived in a basement apartment in the home of her mother’s former English teacher, who helped the small family with the transition to life in Canada.

They didn’t know English well. They didn’t know Canada at all. But, having heard from a family friend that it would be a good experience, Li’s mother dragged the young girl to Air Cadets.

“I hated it at first,” says Li. “I wanted to quit. But I guess I just never did.”

Cadets gave the young newcomer a sense of belonging. And it was that formative experience, and the mentors she found there, that led Li to roll her other passion — dentistry — into a full military career.

The two professions blend well together, with the Canadian military employing approximately 140 dentists at its 26 bases across the country. (It also has hundreds of physicians.) There’s also a big financial incentive, as the military pays students’ tuition, as long as they serve for at least four years after graduation.

This spring, Li is one of 120 DDS students to graduate with the class of ’19. She and six of her classmates will add a military rank to their DDS credentials: captain in the Canada Armed Forces, as military dentists who will provide care for their armed forces colleagues.

It’s the largest Faculty of Dentistry cohort to graduate in service to the military since the World Wars. (Currently, there are 18 enlisted service people in total at the Faculty, including two majors.) And while rising world tensions may have contributed to the large cohort, that doesn’t tell the whole story. Canada’s Armed Forces offer dental students a major advantage.

Students often join the military during the first or second year of their dental degree and are free to concentrate on their studies throughout the school year. During the summer break, though, students are assigned to bases across Canada, where they are mentored by licensed dentists, earning valuable on-the-job training.

Like her fellow second lieutenants — the students’ rank prior to graduation — Taya McGillivary has excelled under the army structure. For three years she played for the Canadian National Women’s Military soccer program, making it to the semi-finals for Ontario last year.

But the Port Williams, Nova Scotia, native chose military dentistry for its unique learning opportunities. With the financing of her degree taken care of, she could focus on her studies. In particular, she loved the on-the-job training she received at the military clinics. “Being able to spend summers doing dentistry was really appealing to me,” says McGillivary.

She worked at the Dennison Armouries in Toronto and CFB Edmonton during her summer breaks. There, “with an oral surgeon six inches away from me,” she extracted over 100 impacted wisdom teeth and performed gingival grafts with a periodontist.

Thanks to this abundance of clinical experiences, McGillivary got better, and faster. She finished all of her clinical credits in early November last year, well ahead of convocation. And thanks to a “lightbulb moment” working for a mentor in the CFB Edmonton clinic, she’s decided to pursue a specialization in oral surgery.

While the military might not pay as much as private practice, it allows budding dentists the chance to practice without the usual worries of finances, competition, or student loans.

“I have the opportunity to practice ideal dentistry when starting out. I just want to be good at what I do. I just want to do dentistry,” says Li.

For Marshall Kurniawan, who enlisted during his second year of dental school, the army also offers a way to give back to the country that embraced him as a child. He and his family moved from Indonesia to Brampton when he was seven years old. Like Li, Kurniawan and his family learned the language once they arrived. He learned the importance of communication, so vital to patient care, and how to adapt to different environments — a skill necessary in military life.

Once he gets to his post-graduation posting in Petawawa, Kurniawan will work alongside three-to-four senior dentists as well as classmate Hwabin Lee. He likes working in groups this way, and having the feeling that everyone in his platoon is accountable to one other.

“There’s built-in mentorship in the army,” so important to fledgling dentists, says Kurniawan. If you need help with a third molar extraction, for instance, “there’s usually an oral surgeon on base. You either shadow them or assist them.”

Li agrees. “Especially in your first year after graduation, you won’t be comfortable doing certain procedures without supervision. But because the supervision is there, it opens up more doors to collaborate with the specialists and GPs on base.”

While a military dentist will typically give Canada four years of service post graduation, some, like McGillivary, will leave early to follow specializations. Kurniawan and others will build entire military careers. “Hopefully I’ll be there for the long run, though I might like to work in a private clinic on weekends,” says Kurniawan. “I really want to stay in the army.”
CONGRATULATIONS
CLASS OF 2019!

DDS
Ali Abbas-Tehrani
Mojgan Ansari
Golnoush Ariafar
Gaurav Atreja
Pallavi Pravin Badle
Vafa Baghaei-Amreem
Maryam Bahrani
Julie Bai
Domenico Barranca
Rija Tariq Bhatti
Alexandra Blake
Rachel Bressler
Myra Nina Caballero
Lauren Jamie Campbell
Wei Jie Ron Cao
Tiago Joaquim Carvalho
Yi-An Chen
Adrian Ho Yin Cheung
Amanda Vincci Chiu
Mary Rebecca Cobb
Chanakya Dave
Miriam Dick-Cohen
Chantal Symone Diniz
Alexander Enaya
Blair Hanna Ray Farbstein
Luis Fei
Zoey Friedman
Matthew Galli
Ashifa Gilani
Simran Singh Gill
Boris Alexander
Godoy-Galvez
Cameron Glenn-Franklin
Goertzen

Max Xiaotian Li
Ming Hao Li
William Lien
Kevin Wen-Yang Lim
Hao Lin
Justin Zhixuan Lin
Min Hui Lin
Jing Lu
Nayef Maarouf
Mohammad
Mahjoorighasrodashti
Dzheikhuna Mamedova
Shince Mathew
Taya Lynn McGillivary
Sarah Michelsons
Parniansadat
Mirzasoleimanbarzi
Nafisa Marium Molla
Oh Su Nam
Neetasha Naphray
Ryan Noh
Saira Consuelo Paredes
Richard An-Hung
Huu Pham
Phuong-Thu Thanh Phi
Nour Qa’aty

Hao Yang Guo
Elham Habibi
Hussein Haji
Rabee Hassan
Emily Victoria
Hazell
Yi He
Heena Kauser
Patty Chun-Ping Hsu
Hai Yan Huang
Mina Ibrahim
Sepehr Jamali
Hamsaveni James
Anqi Jiang
Ahmad Reza
Kamran-Disfani
Ukjin Kang
Madiha Alam Khan
Sina Khanbabakhani
Neda Khebreh
Ruchi Khindria
Jongwook John Kim
Judy Rayeon Kim
Su Jung Kim
Maria Alexandra Klimento
Jamie Ko
Priya Krishnamurthy
Tineke Solvej Kruytbosch
Marshell Kurniawan
Anderson Lai
Harriet Law
Rosalind Law
Alice Yooin Lee
Dogyeong Lee
Hwabin Lee

Photo: Jeff Comber & Marissa Durm
Every effort was made to ensure the accuracy of this list as of press time.
1 ROOM, 65 YEARS OF AWESOME

There’s nothing like old friends. Just ask the alumni and honoured guests who gathered this past May 10 at Steam Whistle Brewing for the second annual Great Alumni Event.

This year, there were even more reasons to celebrate. Over 350 alumni and guests arrived at the distinctive brewery, representing grad years spanning the decades. From Ivan Hrabowsky 5T4 and Anne Bosy 5T6 Dip DH, 9T4 MSc (who recognized each other on sight); to 2015 Award of Distinction winner and adjunct professor Jack Gerrow 7T9; to Alumni Association president Natoosha Nargaski, grads and soon-to-be grads gathered to meet up with former instructors and mingle with classmates of all generations at the event of the year.

SAVE THE DATE!

The next Great Alumni Event will take place on
May 8, 2020
during the ODA Annual Spring Meeting
at Steam Whistle Brewing
ET-TOGETHER

WITH SPECIAL THANKS TO OUR GREAT ALUMNI EVENT SPONSORS

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CALLING ALL INFLUENCERS

Introducing the Faculty of Dentistry ALUMNI OF INFLUENCE AWARD

The Faculty of Dentistry is very proud to introduce an exciting new era of alumni recognition with the all-new ALUMNI OF INFLUENCE AWARD.

We’re reinventing the Alumni of Distinction Award to create opportunities to recognize more of our diverse alumni and the exceptional ways our alumni serve our patients, our school and our communities.

Consider nominating your fellow alumni for the premier ALUMNI OF INFLUENCE AWARD.

Online nominations will be available as of October 1 at: dentistry.utoronto.ca/alumni-of-influence-award or, get in touch with Rachel Castellano rachel.castellano@dentistry.utoronto.ca.

Submission form available October 1, 2019. Nominations are due November 1, 2019. For more information, please visit: dentistry.utoronto.ca/alumni-of-influence-award.
Former dean Gordon Nikiforuk passed away in July at age 96. He was raised in Redfield, Saskatchewan, and graduated with a DDS from the University of Toronto in 1947. He then went on to obtain a master’s of science degree from the University of Illinois Urbana in 1954, with a specialization in paediatric dentistry. As the specialization was only recognized in the United States in 1947, Nikiforuk was one of the first to obtain this specialization degree in North America.

In the 1960s, he was involved in the debate about adding fluoride to Toronto’s drinking water and championed the creation of UofT’s paediatric dentistry specialization program, the first of its kind in Canada. He was hired by the Faculty in January 1970 as a professor and assistant director of the post-graduate division, biological sciences. In July 1970, Nikiforuk was named dean of the Faculty, a post he held until 1977. He continued to teach until his retirement in 1989 and returned as an associate in dentistry until 1993. Over the years, Nikiforuk had an enormous impact on the school and generations of students. Outside the school, he served as senior dentist at the Hospital for Sick Children and wrote the seminal 1985 book *Understanding Dental Caries*.

In 1990, Nikiforuk received the Faculty of Dentistry’s highest honour, the Award of Distinction.

Ross Fisk, professor emeritus for the Faculty, graduated from UofT Dentistry in 1953. In 1955 he earned a master’s of science degree from the University of Michigan Ann Arbor with a specialization in orthodontics. He returned to north Toronto to practice orthodontics and began working at the Faculty as a demonstrator in 1955. He was named an assistant professor of orthodontics in 1962 and associate professor in 1969. Fisk served as a full professor from 1977 until his retirement in 1991, when he became a professor emeritus.

Pasquale Anthony Romano was a graduate from the class of 1979. Known as “Pat” to his friends since his time as a student, Romano was a long-time instructor of oral diagnosis and emergency at the Faculty’s clinic.

A graduate from the DDS class of 1956, Edward Sonley later returned to the Faculty as an associate professor in restorative dentistry. He was named patient manager of the UofT Dentistry clinics in 1981, and later director of clinics. Upon his retirement in 1997, the Dr. Edward G. Sonley Book Award in Clinical Restorative Dentistry was established in his name.

Alfred Vaughan, known as Alf, died last spring in Toronto at the age of 84. He graduated with a DDS in 1958, and practiced for over 30 years. A devoted alumnus, he helped plan 5T8 class reunions for over 60 years.

Aaron Weisblatt graduated from the DDS program in 1969, earning a specialty diploma in orthodontics in 1972. As well as working in private practice in north Toronto, Weisblatt was an instructor of orthodontics at the Faculty’s clinics for many years.

**WE MOURN THE LOSS**

Robert Boyko 5T2, 5T8 MSc D
Chester Gedanski 5T7
John Gilmour 6T0
John MacPherson 4T5
Joseph Mathieson 7T7
Lorne McMorran 5T5
James Mucklow 5T6
Daniel Nolan 6T5
Alexandra St. Rose 5T6 Dip Bacteriology
Gillian Rosemary Snow 9T2
Alexander Tucker 7T0
Stewart Wilson 9T4
William Witchel 5T7
George Zeleney 6T9

Listings are as accurate as possible as of press time.
UPCOMING EVENTS

OCTOBER 1
NOMINATIONS WELCOME FOR THE INAUGURAL ALUMNI OF INFLUENCE AWARD
Starting October 1, nominations will be accepted for the new Alumni of Influence Award! Check the alumni website for more details: dentistry.utoronto.ca/alumni-of-influence-award. Submissions due by November 1, 2019.

OCTOBER 24
FACULTY OF DENTISTRY ALUMNI ASSOCIATION RECEPTION AND LECTURE: CANNABIS AND ITS IMPLICATIONS FOR CLINICAL DENTAL PRACTICE BY JOSE LANÇA
6 p.m. – 8 p.m.
Reception to follow lecture
Rm 170, 124 Edward St. Toronto

All Dentistry alumni are members of the Dentistry Alumni Association. In partnership with the Faculty, the Alumni Association invites you to attend an all alumni reception. The reception will be preceded by an informational lecture by Jose Lança. Network with fellow classmates, colleagues and students, and hear about how the new cannabis laws are impacting dentistry.

NOVEMBER 19
DR. GEORGE ZARB CLINICAL RESEARCH LECTURE
Guest speaker Regina Mericske-Stern
5 p.m. – 7 p.m.
Rm 170, 124 Edward St. Toronto

We are delighted to announce a lecture by Regina Mericske-Stern. A reception will follow the lecture.

FEBRUARY 11, 2020
RESEARCH DAY
124 Edward St., Toronto
Join us for this annual symposium to highlight the Faculty’s innovative research. Connect with fellow students, faculty, staff and alumni as we feature student posters, lectures, a keynote address followed by a reception. Keep current on the latest in research and what is happening with your classmates and classmates. All are welcome.

MARCH 5
VANCOUVER ALUMNI RECEPTION
PACIFIC DENTAL CONFERENCE
5 p.m. – 7 p.m.
Pan Pacific Hotel, Vancouver

Dean Daniel Haas will be hosting an event for UofT alumni. Whether you live on the West Coast or you’re in town for the Pacific Dental Conference, we hope to see you.

MARCH 12, 13
DENTANTICS
Isabelle Bader Theatre, Toronto

Celebrate the 100th anniversary of Dentantics with classmates. Proceeds from the production support the Access to Care Fund.

MARCH 31
WORD OF MOUTH NETWORKING COCKTAIL
6 p.m. – 8 p.m.
Student Commons, 124 Edward St. Toronto

Connecting our graduating DDS students with UofT alumni, instructors and key student partners to help prepare them to launch their careers as health care professionals.

MAY 7 – 9
ODA ANNUAL SPRING MEETING
Metro Toronto Convention Centre
South Building, Toronto

Come see us and the dean in our booth on the convention floor.

MAY 8
GREAT ALUMNI EVENT
5:30 p.m. – 9 p.m.
Steam Whistle Brewing
255 Bremner Blvd, Toronto

Don’t miss the all-alumni reunion for UofT Dentistry. Located just across the road from the ODA ASM on the Friday night. Get your class together to celebrate your friendships from your time in dental school. More information visit: dentistry.utoronto.ca/the-great-alumni-event

MAY
DDS CLASS REUNIONS
If you graduated in a year ending with a 5 or a 0, don’t miss your class reunion! For information, or if you are interested in organizing your reunion, please contact alumni@dentistry.utoronto.ca