NEW SATELLITE CLINIC
TRACKING COVID-19 IMMUNITY
ALUMNI OF INFLUENCE WINNERS

CELEBRATING IMPACT

Dentistry transforms people’s health and lives ➤ PAGE 10
MESSAGE FROM THE DEAN

RECOGNIZING DENTISTRY’S IMPACT

This issue of U of T Dentistry magazine focuses on the positive impact dentistry has on people’s lives: their mental and physical health, their socioeconomic status and their relationships. The need to recognize dentistry’s importance is more urgent than ever. The profession and patients are still experiencing the aftereffects of the disruption to patient care and dental education that occurred at the onset of COVID-19.

The Faculty plays a key role in demonstrating that dentistry is essential for society. We will soon be able to show this in an evidence-based framework. Last fall, the Faculty of Dentistry opened a living lab clinic funded by Green Shield Canada that seeks to measure the wide-ranging effects of cost-free dental care for those who otherwise could not access it. The clinic and its studies will create much-needed, data-backed conclusions about the importance of dentistry when there are no barriers to receiving dental care. This five-year project is the result of the largest philanthropic donation to dental public health research in Canadian history, and is being led by associate professor Carlos Quiñonez oT9 PhD.

Through its teaching clinics, the Faculty provides world-class care to thousands of patients a year. COVID-19 has changed the way we deliver dental treatment; even after this pandemic ends, we are unlikely to go back completely to the way we did things in 2019. The Faculty is planning for the renovation of our clinics, taking into account that the profession is moving toward clinics with enclosed operatories. Our decision to open a satellite clinic this fall will allow us to better serve our patients and students and provide valuable swing space to enable future renovations. Behind the scenes, teams at the Faculty have been working hard to get this new clinic designed and built, ready for patients, students and instructors in mere months.

Now more than ever, the impact of the Faculty of Dentistry and the importance of the dental profession have been felt in our community. Moving forward, the Faculty will continue to enhance the lives of all those we serve. The evidence of our impact will be felt through the care we deliver, the education we provide and the research discoveries we unearth. 

DEAN DANIEL HAAS 779, 8T8 PhD
Excitement and anticipation are growing for the Faculty of Dentistry’s new, off-campus satellite clinic, slated to open this fall.

Located at 777 Bay St., within walking distance of the dental school, the clinic will be easily accessible to students and patients. It will feature 41 enclosed operatories with glass walls and sliding doors that will meet current standards for aerosol-generating procedures while allowing instructors to observe students and patients.

“The satellite clinic is the culmination of great efforts paid to ensuring the sustainability and enhancement of the Faculty’s robust educational program and the provision of exceptional patient care,” says assistant dean of administration Mary Choi.

Additional clinical renewal is also underway at the Faculty. Clinic 2 and the pre-clinical simulation lab at 124 Edward St. are in the early planning stages for renovation. Construction has already begun on the auditorium and on a new medical device reprocessing facility, which will provide state-of-the-art sterilization.

Each year, thousands of patients depend on the Faculty to provide them with pain alleviation,
The satellite clinic is a marker of the importance of how we serve the community and provide our students with the education they expect. Better jaw function, treatment of infection and more. Over 500 students conduct clinical training and research at Faculty clinics.

“The satellite clinic is more than just a new physical space. It’s a marker of the importance of how we serve the community and provide our students with the education they expect. It will be great,” says assistant professor James Posluns 9T1, 9T8 Dip Ortho, director of clinical affairs for the Faculty.

The Faculty of Dentistry has won the prestigious 2021 William J. Gies Award for Achievement — Academic Dental Institution from the American Dental Education Association ADEAGies Foundation.

“This award recognizes the immense contributions that our faculty members have made over the years to improving the health of so many,” says dean Daniel Haas. The Gies Awards recognize individuals and organizations that advance oral health and dental education.

Stay in touch
Stay connected with what’s happening at the Faculty and what your fellow alumni and friends are doing in the community. Update your contact info at: dentistry.utoronto.ca/alumni

FACULTY EARNS GIES AWARD
A team led by Faculty researchers has earned $12 million in funding to better understand fibrosis. “Fibrosis is involved in about 45 per cent of deaths in the Western world. If you have heart disease or lung disease, it’s all about fibrosis,” says principal investigator Chris McCulloch 7T6, 8T2 PhD, professor at the Faculty.

Fibrosis, which is excessive connective tissue that develops mainly in organs, is a defining feature of periodontal disease. This project will look at fibrosis in the mouth, heart, kidneys and skin.

“Fibrosis is an underappreciated silent and slow killer,” says distinguished professor of tissue repair and regeneration Boris Hinz. A member of the research team, Hinz is cross-appointed to the Institute of Biomedical Engineering and the Faculty of Medicine.

Other collaborators are associate professor Laurent Bozec, a specialist in atomic force microscopy, U of T professor Andras Kapus and Igor Jurisica from the University Health Network.

The team received a $4-million operations grant from the Ontario Research Fund (ORF). The remainder was matched by industry and institutional partners. This follows a grant earned in 2017 from the Canadian Foundation for Innovation and the ORF of $6.5 million to purchase equipment, which also led to the creation of The Fibrosis Network research hub.

McCulloch says that the goal of this research is to understand the fundamental mechanism of action of fibrosis and to identify drug targets.

“Fibrosis is involved in about 45 per cent of deaths in the Western world”

Last November, assistant professor Ryan Schure 6T0, 7T3 MSc Perio, along with assistant professor and director of student life Richard Rayman 7To, began beta testing the House Initiative. DDS students were assigned to a house — 20 in total — that would include a faculty mentor. Students can reach out to that mentor and to each other.

“There are some students who may never speak to a faculty member outside of a classroom setting,” says Schure. Remote learning has led to students feeling increasingly isolated. “With this program, I want to break down some of those barriers.”

The new program integrates the Faculty’s existing mentorship programs, Big Sibs/Little Sibs and the Peer Mentor program.
Faculty study shows how bacteria and the immune system break down the bond adhesives used in tooth-coloured restorations.

Published in *Acta Biomaterialia*, the study shows how quickly bacteria stimulate the innate immune system’s neutrophils to destroy total-etch and self-etch adhesives.

“This research adds another layer to our understanding of the complexity of dental caries,” says the study’s lead author, Russel Gitalis 2T0 MSc.

Researchers applied the two adhesive types onto extracted teeth and exposed them to neutrophils and bacterial stimulants for 30 days.

Total-etch adhesive took considerable damage quickly, says the senior author of the study, professor Yoav Finer oTo PhD, oT3 MSc Prosth. “You can see a huge impact on the bond between the restoration and the tooth in as little as two days,” he says.

The self-etch system adhesive fared better but still sustained damage in the neutrophil-induced environment.

Finer, who holds the George Zarb/Nobel Biocare Chair in Prosthodontics, says the research team found several factors that could contribute to damage in restorations and teeth. “Now we need to work with the individual factors to understand the underlying mechanisms.”

Bacteria are behind this process, explains Finer. They stimulate the neutrophil immune cells.

The researchers hope to understand how the neutrophil–bacteria connection can lead to innovations. “Better knowledge of caries will allow us to develop interventions,” Gitalis says.
PERIODONTITIS’S INFLAMMATORY LINK

U of T Dentistry researchers have discovered the mechanism behind periodontal disease’s connection to other inflammatory conditions, such as heart disease and diabetes.

“We believe this is the mechanism by which oral hygiene can impact vulnerability to unrelated secondary health challenges,” says Noah Fine, a postdoctoral fellow and lead author on a study published in the *Journal of Dental Research*.

The link comes through neutrophils, which are cells of the innate immune system. Through in vitro models, and then through a controlled clinical experiment, researchers found that the immune system releases an abundance of neutrophils to attack the bacteria causing periodontitis. These attacking neutrophils then circulate throughout the body.

“It’s almost as if these white blood cells are in second gear when they should be in first,” says the study’s senior author, professor Michael Glogauer 9T3, 9T9 Dip Perio, 9T9 PhD.

That is when the body becomes susceptible to damage from secondary inflammatory conditions.

“The [neutrophils] are much more likely to release cytokines quickly, leading to negative outcomes,” adds Glogauer, who is also dentist-in-chief at the University Health Network and head of dental oncology at Toronto’s Princess Margaret Cancer Centre. “Neutrophils are the cells that are at prime risk of causing cytokine storms. That’s the exact cell we show is primed in people with periodontal disease.”

This research also suggests that patients with periodontitis could be more at risk for COVID-19 complications, says Glogauer.
Over the past few months, our profession has faced unprecedented challenges during the global pandemic. As alumni, many of you have had to rapidly adapt by closing private practices while making plans to safely reopen with a healthy environment for your patients, your communities and yourselves.

Here at the University of Toronto dentistry clinics, we have experienced similar challenges. Early in the pandemic, we had to close our clinics and begin thinking about how to reopen safely for our students, trainees and community. Even before the pandemic, our clinics were in critical need of upgrades. Today’s challenges make these renovations even more urgent. Like many of your practices, our clinics need critical space, equipment and facility upgrades to give future dentists the opportunity to hone their skills while providing high-quality, affordable dental care for more than 15,000 patients each year.

By making a gift to the Clinic Fund, you’re supporting tomorrow’s dental professionals and the communities they serve. With your help, we can ensure our facilities match the Faculty’s global reputation for excellence, innovation and patient care.

To make a gift, please contact:
Selina Esteves
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Oral health doesn’t just stop at the mouth. Here’s what the profession knows about its impact and the challenges of proving it.

BY DIANE PETERS  ILLUSTRATION BY JEANNIE PHAN
But a healthy mouth also affects physical health and mental well-being. And it has an economic and social impact in both the short and long term.

But what dentists observe professionally and what’s been proven in the medical literature differ. “We actually know very little in formal terms. There’s a lot of associational data,” says Faculty of Dentistry associate professor Carlos Quiñonez, who is also director of the graduate specialty program in dental public health at the Faculty. “Do we know that improving people’s oral health will result in improvements in systemic health or overall health? We have an army of dentists out there living it. But we don’t have the causation data.”

Having the evidence on impacts matters. Data influence the advice other healthcare professionals offer, the terms of public and private coverage, funding for dental research and how the public views dental care. A true understanding of dentistry’s role shines a light on the fact that one in three people in Canada lacks dental coverage and that six million people in this country avoid going to the dentist every year for financial reasons. Yet caries is the most widespread non-communicable disease in the world and periodontitis is also extremely common, impacting 10 per cent of the world’s population.

“The government doesn’t always understand the importance of dental care,” says professor Michael Glogauer. After all, dental offices across Canada — and in many other countries — were forced to close for everything but emergency care when COVID-19 began spreading in March 2020.

It’s a situation that’s perplexing for those working in the profession. “Why does dentistry have to constantly prove its worth?” associate professor Michael Casas, 8T$ Dip Paedo, 9T2 MSc asks rhetorically. “No one is interested in dentistry until they have a toothache, and then they want to see a dentist right away.”

A new living lab clinic at the Faculty of Dentistry should contribute to a more sophisticated understanding of dentistry’s effects. It will seek evidence about the value of providing pro bono dental care to those who cannot afford it and, ideally, offer evidence-based guidance for healthcare stakeholders. (See the Understanding Impact sidebar on page 15.) In the meantime, those working in the profession continue to promote dentistry’s deep and wide-ranging value.

**ORAL HEALTH MATTERS**

Fundamentally, regular dental care leads to better oral health. Healthy, pain-free mouths allow people to live with a basic level of wellness. “Our mouth is what we use to eat every day. Where we talk every day,” says Aimee Dawson, professor in the Faculty of Dental Medicine at Laval University. She treats patients at Clinique Spot, an interprofessional clinic offering no-charge care to people with barriers to accessing health care; plus, she runs a no-charge dentistry clinic at Laval every summer.

Dawson notes that people without access to dental care
often present in emergency settings with pain or tooth problems affecting their ability to function. “When people are suffering from pain or they don’t feel like they look okay, that’s a primary care issue.” Cutting one’s tongue on a jagged tooth, dealing with injured teeth that impact chewing or coping with missing front teeth translates to a very real disability.

“Missing teeth limit a person’s speaking abilities, which are required for job interviews and customer service opportunities,” says Melvin Hsu, director of Dental and Oral Health Services for the City of Toronto. The challenge can be worse for people speaking in their non-native language.

Oral pain can stop people from functioning entirely. “Pain from a toothache is the worst kind of pain,” says Glogauer. “Ironically, until you have this kind of pain, you don’t understand why dental care is so important.” Everything from sleep and eating is impacted when your teeth are in pain or are not functioning optimally.

Glogauer also contends that while cancers often come with debilitating side effects, oral cancers are among the worst. “You can be disfigured. You can’t talk, you can’t eat, you can’t do the normal things you do with your face like smiling or having intimate relations.”

Crooked, discoloured or missing front teeth don’t always affect function but they alter how someone looks. “There’s a very strong image in Western society of the way our teeth should look,” says professor Paul Allison, former dean of the Faculty of Dentistry at McGill University. Those who can afford it will spend thousands on orthodontics to improve their appearance not out of mere vanity: being attractive influences everything in a person’s life from their success in education and job interviews to how well they marry.

When someone’s oral appearance strays far from our beauty ideal, it can become a barrier to the basics such as getting treated with respect in public, being able to rent an apartment or landing a job. “It’s hard to get a position working with the public when you don’t have teeth,” says Hsu.

SOCIOECONOMIC VALUE
When people get dental care that helps with pain and their appearance, that in turn can positively impact their overall health.

Having robust social supports bolsters overall health, and dentistry’s contribution to this can be seen readily in seniors, notably those accessing the new Ontario Seniors Dental Care Program. This program provides basic dental care, surgery and partial coverage for dentures to low-income people over 65. While the new program has been onerous for many people to access, Hsu says community teams have already seen coverage change lives. “What we find is seniors increase their socializing, interacting more with their family and friends,” says Hsu. “We find that once they have healthy teeth, they go out more and are able to eat and sleep better.”

For working-age adults grappling with precarious employment or housing, a healthy smile has tangible value. “They’re able to gain more self confidence when they interview for jobs. They have more success when they seek housing,” says Hsu.

Counterproductively, our complex dental care system requires vulnerable patients to invest considerable time into figuring out if and how they might qualify for services. “We deal with a lot of newcomers in the city, and language and cultural barriers are a huge thing,” says Hsu, whose staff frequently assist people in navigating the system.

For those with the means to pay for regular and comprehensive dental care, oral health can act as an early warning system for mental health concerns. “Just look at the rise of broken teeth because of stress and people grinding their teeth during the pandemic,” says Glogauer.

A SYSTEMIC CONNECTION
The mouth is connected to the rest of the body, so what happens to the teeth and gums affects general health,
It’s clear that infection in the mouth is a sign of overall systemic health issues,” says Glogauer. “When you look at large studies, there’s links between gum disease and almost every inflammatory disease known to humans.” That list includes some cancers, preterm birth, diabetes, cardiovascular disease, strokes and more.

In seniors, periodontitis, caries and other oral-health conditions can have a life-or-death impact. One 2017 study linked so-called oral frailty — trouble chewing, poor tongue pressure, lacking natural teeth and other factors — with more than double the risk of physical frailty, disability and even mortality. The study concluded that oral problems were a predictor of greater ill health. Meanwhile, a 2016 review study showed that when dental professionals offered oral interventions to elderly people in hospitals and nursing homes with pneumonia, it lowered their mortality rate.

In children, numerous studies — including one conducted in Toronto — show a connection between caries and stunted growth and malnourishment, including iron deficiency leading to anemia. Casas, who is also dentist-in-chief at the Hospital for Sick Children, says it’s likely that kids with painful teeth avoid nutritional foods that are tough to chew, while a starch-heavy diet further make caries worse. “After they get their teeth fixed, they catch up,” he says.

Some healthcare teams see dental health as an imperative. “Those who have a medical condition sometimes can’t have their treatment or operation until we fix their teeth,” says Casas about the protocol at SickKids. “If they get a dental infection, there’s a risk of those bacteria seeding out and getting to the heart,” says Casas of kids going into cardiovascular surgery. For those with cancer, a dental infection can lead to sepsis or affect their immune system. “The most common source of infection for a child is dental,” he adds.

While research and clinical practice acknowledge the link between oral and systemic health, the precise pathways remain a mystery. “All you can do is show the relationships. We can’t prove the cause,” says Glogauer. His own animal studies show that oral disease primes the immune system to trigger inflammation in the rest of the body — a line of research he and others hope will help clarify cause and effect.

DIAGNOSTIC VALUE

People with the means to pay for dental care tend to visit their dentist more regularly than any other healthcare provider, which benefits their overall health. A 2012 study out of Brown University in the U.S. showed that people who visited their dentists annually were more likely to be diagnosed with earlier-stage oral and pharyngeal cancers. “Receipt of regular dental examinations at least annually may reduce the public health burden of oral and pharyngeal cancer by facilitating earlier detection of the disease,” the study’s authors concluded.

Dramatically, a Faculty of Dentistry study tracked the diagnosis of oral cancer in Ontario over 11 years and found that dentists caught 10 per cent of carcinomas and dysplasias in that time period. “Regarding oral cancer, it's quite clear we are at the forefront of cancer diagnosis,” says assistant professor Marco Magalhaes oT9 PhD, rT5 MSc OP/OM, who was lead author on the study.

Magalhaes notes that, despite dentistry’s life-saving role in catching early cancers, patients who get a diagnosis in a dentist’s chair must pay out of pocket for the biopsy — the same isn’t true if that biopsy is performed elsewhere in the healthcare system.

Since oral health is a predictor of overall health, Allison thinks the healthcare system is missing an opportunity: if dentists and family doctors were in regular contact as part of someone’s primary care team, key pieces of information such as someone’s propensity toward caries or a tendency to inflammation via gum disease could inform their care. “It’s another helpful screening tool,” he says.
THE ROLE OF RESEARCH

Dentistry research helps establish best practices for controlling oral bacteria and developing new filling materials. But many projects have an interdisciplinary component that affects our understanding of a range of health conditions.

The mouth offers straightforward access to tissues for biopsy and observation, speeding up the research process. One of Magalhaes’s projects involves tracking early-stage cancerous lesions to understand the factors that cause some to become aggressive cancers and others not. “I’m finding ways to characterize the factors that can promote cancers to progress,” he says. This understanding could be extrapolated to other types of cancers, too.

However, dental research earns fewer grants than other biomedical disciplines, while the interdisciplinary work of dentistry can be misunderstood by grant committees. “When I applied for my very first grant, the first comment I got from a reviewer was, ‘Why is this researcher from dentistry looking at breast cancer?’” Magalhaes says. Being cross-appointed to Laboratory Medicine & Pathobiology at U of T helps him with funders now; plus, he has started calling himself a cancer researcher to avoid confusion.

CHANGING THE CONVERSATION

More research may help build a stronger understanding of dentistry’s impact on the body, mind and society, and assign dollar figures to dental care’s return on investment. COVID-19 may provide a new opportunity to examine how this public health crisis has impacted oral health among the already vulnerable.

As the evidence mounts about dentistry’s ability to change health from a myriad of perspectives, the challenge becomes translating that into change — and proposing what that change could look like.

Even dental public health researchers such as Quiñonez admit they don’t know which approach to public care would work best. An entirely public model may not make sense or be economically feasible. Successful programs in other countries, such as Germany, offer a mixed system of public and private care that’s able to provide near-universal coverage to their population. Allison says that children in Quebec benefit from a program that offers fully covered dental care that includes cleaning, extractions, endodontics and fillings for everyone under 10. “It’s very simple, it’s just part of the system,” says Allison.

Negotiating a new social contract that’s more equitable, straightforward and still affordable could arise partly from more evidence but also from the dental profession better conveying the message about their work’s value. “We need to highlight how important oral health is in the grand scheme of things,” says Glogauer. “This is an opportunity for a rallying cry.”

UNDERSTANDING IMPACT

A two-chair clinic housed inside the University of Toronto’s Faculty of Dentistry could transform our understanding of dentistry’s impact and contribute to policy development in Canada.

The Green Shield Canada Clinic, which launched last November, offers no-cost dental care to low-income patients and serves as a living lab for a groundbreaking dental public health research project. “No one has done this before,” says Faculty of Dentistry associate professor Carlos Quiñonez.

The clinic is the result of a $6.15-million gift made by Green Shield Canada (GSC), the largest single donation to dental public health research in Canadian history.

Donated through GSC’s Green Door Project, whose mission is to help Canadians secure access to health care, the gift will fund the clinic and studies under the One Smile Research Program. This five-year project, the largest dental public health research program in Canadian history, will be led by Quiñonez.

“Up to 30 per cent of our population doesn’t have access to dental benefits,” says David Willows, executive vice president of innovation and marketing at GSC.

“We thought that we should have a movement to close that gap and get people covered. But we have to ask the question, Why? What’s in it for society? What’s in it for other groups to take an interest in this?” says Willows.

“Oral health and access to oral health care are significant public health issues, not just dentistry-related issues, and need to be treated as such,” says Quiñonez, who has assembled a research team of experts in healthcare delivery, health economics, dental public health, public policy, immunology and periodontology.

People admitted into the Green Shield Canada Clinic — an estimated 1,500–2,000 patients will be referred to the Faculty from public health and community clinics — will take part in a multi-layered study that will continuously assess their oral health, overall health and pain levels, as well as social factors such as life satisfaction and employability, over five years.

“The Green Door Project and the Green Shield Canada Clinic will benefit so many disadvantaged individuals and communities,” says Meric Gertler, president of the University of Toronto.

“This wonderful gift will also significantly advance U of T’s mission of national and global leadership in health care and public health policy.”
When patients visit 101 Elm St., they expect to get their teeth fixed at a price they can afford.

Many find a whole lot more, though. Time with a DDS or graduate student eager to engage with patients and perfect their skills. Access to students and instructors who work as a team to develop treatment plans, assess underlying health conditions and help people get well. Compassion and assistance for the cost of dental care.

With their pain gone and their smile restored, they truly feel the impact of a whole-person approach to dental care.

All dental care impacts lives. Here are some stories about how the Faculty of Dentistry’s clinics go even further to make a meaningful difference in people’s lives.
As a young child, Joshua Jackman’s two front teeth stuck out. Kids at his elementary school taunted him about it, calling him “beaver.”

“He started talking about committing suicide because he was being bullied. Even in the summer when he went to overnight camp, he’d come home and say he was being bullied there too,” says his great-aunt and guardian, Desiree Trotman.

It wasn’t just the boy’s appearance that was a problem. He couldn’t completely close his mouth either.

Jackman, now 13, had already been through so much. He came to Canada from Guyana in 2014. His mother had suffered a horrific acid attack back home that left her visually impaired. On arrival, the six-year-old was malnourished and had pneumonia, leading to an extended hospitalization. With his mother no longer able to care for him, and Jackman about to be put into foster care, Trotman agreed to step in.

After he enrolled in school, a visiting dentist told Trotman that Jackman’s teeth needed urgent treatment.

“I looked around for a dentist but it was quite costly,” says Trotman. She runs her own hairstyling business (the pandemic has dramatically affected her income over the last year) and has no dental coverage for herself and Jackman.

A customer told her about the U of T Dentistry clinics, so she took the boy in for an assessment. They found out that Jackman was going to need extensive treatment, including four premolars extracted, a headgear, a temporary anchorage device, full fixed braces and, eventually, bonded and removable retainers.

“They told me how much treatment would cost and I knew this would be hard for me,” says Trotman. She paid for some of the extractions out of pocket but couldn’t afford to pay for everything. David Makar, a first-year orthodontic resident at the time, presented Jackman’s case to the committee that grants funds from the Faculty’s Access to Care Fund in fall 2018. He was able to secure $4,500 for the rest of the boy’s care.

“He is patient and so nice,” says Trotman of Makar. “One time, they had to put a screw in Joshua’s palate and I was so scared about it. Dr. Makar patiently and kindly explained the procedure to me.”

Now, with his treatment plan well underway, things have changed for Jackman. The bullying has stopped. He’s now just a young teen who loves spending time on his phone and is building friendships — including with girls. “His whole facial structure has changed. He has a lot of confidence now,” says Trotman. “It’s a real transformation.”
Alicia Pentz wanted to leave a difficult past behind her. But as she moved on with her life, she realized that the state of her smile was still holding her back.

“I had severely damaged teeth,” says Pentz, who is now 27.

For many years, she lived in an abusive and neglectful situation while dealing with physical limitations, too. She didn’t visit the dentist and didn’t have easy access to regular brushing and flossing.

As she began rebuilding her life a few years ago, she remembered being treated at the Faculty as a child. “I was and still am trying to get on my feet. I knew I couldn’t afford a regular dentist and that the dental school did really great work and was much more affordable.”

Pentz also knew that her teeth were in bad shape and would hold back her health and future plans. “I had a lot of work that needed to be done because of damage to my mouth. It was important that I got it done.”

In the summer and fall of 2019, and then again early in 2020, the team at the Faculty of Dentistry did in-depth cleanings and filled 12 cavities for Pentz. The treatment went so well that many of her teeth were saved from what the team originally thought would have to be root canals.

As well, DDS student Samantha Stahn 2T0 secured coverage for Pentz through the Access to Care Fund. “If I didn’t have Access to Care or had to go to a regular dentist it would have been close to $50,000 worth of work,” she says.

While Pentz is thrilled with the dental work, she is equally grateful for Stahn’s approach to care.

“She didn’t judge me. That was something I had experienced a lot then, where people would look at my mouth and think badly of me. They didn’t understand that it wasn’t my fault my teeth were this way. Samantha was compassionate toward me, my anxiety and my post-traumatic stress. She made sure I was comfortable. She even helped me get an electric toothbrush.”

Pentz still needs more work done and plans to go back to the clinic to have her wisdom teeth extracted. With her oral health back on track, her future looks bright. She is taking a funeral pre-planning course online and living with her boyfriend.

Importantly, the look of her mouth and teeth no longer hold her back. “It definitely made quite the change in me because I was so depressed about my mouth and I didn’t smile and didn’t want people staring at me,” she says. “Now I’m smiling all the time and not ashamed to show my teeth off.”
I t’s 2014. Scott Fraser is in terrible pain. Although he’s just 23, a team at the Faculty is about to extract all of his teeth.

“I was on the operating table and when I looked up, just before I went out, I realized there were about 30 students around me,” says Fraser, who’s now 29.

Fraser was born in Toronto and was living with his mother, Laura Rojas, in her native Chile when he first started having issues with his teeth at around age 12. “He had pain from eating. His teeth were starting to rot, cavities everywhere,” Rojas recalls. A student dentist at the University of Chile told them, “If Scott doesn’t get treatment soon, he will lose his teeth by the age of 20.” Other dentists confirmed that he would eventually need dentures. They treated his regularly occurring cavities but the fillings kept falling out. The teen started needing pain medication.

“I was bullied because of my teeth being yellow,” says Fraser. “People could see the cavities and they just assumed I was using drugs. I didn’t even drink alcohol or smoke.” Rojas faced judgment from dental professionals and others who assumed she was a neglectful parent.

In 2012, Rojas, Fraser and his sister moved back to Toronto. “Scott was in so much pain that every day he wanted to put his head through the wall,” his mother recalls.

Rojas took him to U of T Dentistry, where the team confirmed that Fraser had some kind of underlying oral condition. They’d never extracted all the teeth of someone so young, but it was the only way forward.

While Rojas was able to afford some of her son’s treatment, his implants and dentures would run about $50,000. Prosthodontics master’s student Hooman Mohandesan got a good portion covered through the Faculty’s Access to Care Fund.

“Dr. Mohandesan was amazing. He was caring and kind, always calling us to tell us what was happening,” says Rojas.

After getting his dentures, everything changed for Fraser. “Smiling came easier and I felt like I could finally start living my life.”

Rojas is just as effusive. “After Scott’s new teeth were put in, he brushed away his past. His face changed, his attitude changed, his mental health became so much better. He has more confidence and self-esteem.”

Today, Fraser has a college diploma and is a published comic book artist. “My life has significantly improved. I’m thankful to everyone who did this work, the people who believed in me and the dentists who kept telling me that everything was going to be fine.”
In September 2020, Wendy MacLellan had her first appointment at the Faculty. DDS3 student Yonit Levin immediately saw that things were not quite right with her patient’s oral health.

“I noticed this nodular appearance in her mouth, on her palette, tongue, gums and the insides of her cheeks,” says Levin. Concerned, she scheduled a consult with oral and maxillofacial pathology and oral medicine resident Justin Bubola.

He diagnosed MacLellan, now 71, with the genetic disorder Cowden syndrome, which causes tumor-like growths called hamartomas that usually appear in the mouth and on the skin. The disorder is also associated with an increased risk of developing several kinds of cancer, including breast, thyroid and uterine.

The diagnosis made sense: MacLellan was diagnosed and treated for uterine cancer in 1997 and has had breast cancer twice since.

“I wish I had known this in 1988. If I had known I was at risk for cancer, I’d have gone to the doctor more. Cancer treatment isn’t for wimps,” says MacLellan.

MacLellan, who is doing well now, was impressed that Levin noticed the growths, secured her a quick diagnosis and then referred her to a specialist. Now, her care team at Princess Margaret Hospital is doing genetic testing and researching MacLellan and her family — she has three living sisters, and their mother will turn 90 this year.

It was financial challenges that led MacLellan to visit the Faculty. Now retired, she’d worked at a hotel call centre and a timeshare exchange company, but doesn’t currently have a dental benefits plan.

“I’m retired and trying to live on an old-age pension. I knew I needed to keep having dental work but I decided I couldn’t afford $250 every six months if I’m living on $18,000 a year.”

MacLellan is impressed with Levin and Mary Shehata, the DDS4 student paired with Levin in the clinic this year.

“When Yonit didn’t know something, she wanted to know more. She’s diligent and capable,” says MacLellan. She notes that sometimes procedures take longer at the Faculty clinics, as student dentists confer with instructors. “But she kept up a running commentary, explaining what was happening, and that made it a lot easier.”

Levin says aiding in MacLellan’s diagnosis and treatment has been a special learning opportunity. “I thought it was fascinating to see a direct connection between the mouth and someone’s overall health,” she says. “We learn a lot about that in school, how oral health is total health.”
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Inquiries? alumni@dentistry.utoronto.ca
DENTISTRY GRADS
LEVEL UP

Clinical and research excellence inspires these three fall 2020 graduates of U of T Dentistry’s advanced degree programs

RUSSEL GITALIS
Master of Science in Dentistry

Russel Gitalis has something of a leg up on his McGill University classmates as he wraps up his first year in the DMD program.

“He’s already completed an MSc in Dentistry from U of T. “People entering [dentistry] programs usually don’t know much about dentistry,” says Gitalis. “They may have shadowed a dentist, but they don’t know much of the scientific concepts.”

During his graduate degree, Gitalis focused on learning foundational ideas and furthered them through research. He helped identify the role of neutrophils in damaging tooth-coloured restorations.

“Being able to search my name on a journal database is very rewarding,” says Gitalis, who won a Canadian Association for Dental Research (CADR)–Network for Canadian Oral Health Research (NCOHR) student travel award, which secured him a ticket to the International Association for Dental Research (IADR) meeting in 2020 (the in-person event was cancelled). He also earned the Canadian Graduate Scholarship (Master’s) from the Natural Sciences and Engineering Research Council.

He hopes research will be a part of his future. “A goal of mine is to be a research clinician like my supervisors, Dr. Yoav Finer and Dr. Michael Glogauer,” he says. “I see myself continuing in both research and clinical work. The connections I made while in the program — the research, presentations, awards and papers — are all contributing toward my journey.”

Gitalis was also active outside of academia: he took on the roles of treasurer of the Graduate and Postgraduate Dental Students’ Society and finance director for the Student Alzheimer’s Alliance University of Toronto. “Participating in student groups is very rewarding,” says Gitalis. “You get to meet other people and see other points of view within the university.”

CONGRATULATIONS TO FALL 2020 GRADS!

Mohamed Nur Abdallah, MSc Ortho
Yasser Saad Alali, MSc OMFS
Richard Andrews, MSc Paedo
Doreh Behzadpoor, MSc Paedo
Patricia Joyce Brooks, PhD OP/OM
Malini Chari, MSc DPH
Oscar Dalmao, MSc OMFS
Kanan Dave, MSc OP/OM
Janick Decoste, MSc Ortho
Jessica A. Ebrahimi, MSc Ortho
Nadir Elias, MSc OMFS
Rolland Christian Gillies, MSc OR
GILLIAN LANDZBERG
Master of Science in Endodontics

Gillian Landzberg 1T5, 2To MSc Endo loved her time in the DDS program at U of T. She was very involved as a student and “felt confident in the knowledge and foundation I gained.”

But after graduation in 2015, Landzberg wanted more experience. She relocated to Los Angeles for a general practice residency at Cedars Sinai Medical Center.

With just four dentistry residents in the hospital, Landzberg had ample opportunity to sharpen her skills. She returned to Toronto in 2017 with her sights set on the graduate specialty program in endodontics, a subject she enjoyed throughout her DDS degree and her residency.

“I thought really highly of the endodontics program. If they took me, that was my first choice,” says Landzberg.

Working under professor Anil Kishen, Landzberg honed her clinical skills and conducted research in support of a novel biocompatible nanoparticle varnish for sealing microcracks during endodontic microsurgeries. That research landed Landzberg a CADR–NCOHR award and an award from the American Association of Endodontists. Her research was also supported by a Canadian Association of Endodontics award.

For Landzberg, the research component of the degree is integral to becoming a great clinician. “As specialists, we rely so much on research for our decision making, to determine how we’re going to treat our patients,” she says. “The opportunity to be involved in research as an investigator is really an asset. It allows me to critically evaluate research.”

Landzberg is now an associate in private practice in the Toronto area but stays involved in the school as an instructor. “I really valued the education I got at U of T. I have a lot of faith in it,” says Landzberg, adding that mentors have been critical to her success. “There’s no better way to learn.”

ROLLAND GILLIES
Master of Science in Oral and Maxillofacial Radiology

General dentistry was not quite the right fit for Rolland Gillies 2To MSc OR. “I enjoyed the diagnostics and the treatment planning,” says the University of Manitoba DMD graduate. After finishing his degree in 2014, he practised for three years in Manitoba and then looked for a specialty that suited his interests. Radiology resonated.

With U of T Dentistry offering the only master’s in oral and maxillofacial radiology in the country, plus, as he notes, it being one of the most prestigious programs in the world, Gillies applied. He and his wife — a paediatric dentist — moved to Toronto in 2017.

He enjoyed the program’s mix of working directly with patients, teaching and doing research. “It was very diverse and very interesting,” he recalls.

Gillies’s research yielded two published papers. The first included results of a survey of 1,300 Ontario dentists, revealing their uses of digital intraoral technology, panoramic imaging and cone beam computed tomography.

The second, published in early 2021 in the prestigious Journal of the American Dental Association, compares the survey data to guidelines. The research team found that 57.2 per cent of dentists make decisions to use imaging that does not conform to published guidelines. “Scans tend to be overused,” says Gillies. “They take X-rays because they want to make sure they don’t miss anything. However, you should only do an X-ray if there’s a reason.”

While Gillies is interested in pursuing research, right now he plans to return to Manitoba. He and two other radiologists have begun work on a new imaging centre practice in Winnipeg. “Manitoba is not an overly big overly big market for oral radiology,” he admits. “We plan to push it forward.”

Russel Gitalis, MSc
Laura Greig, MSc Ortho
Harpinder Kaur, MSc DPH
Gillian Landzberg, MSc Endo
Ahmad Mansouri, MSc Perio
Muna Qasim Mustafa Marashdeh, MSc Endo
Kimberly Ngai, MSc Ortho
Tyler Phaneuf, MSc Endo
Charles Tremblay, MSc Perio
Vaishnavee Vassandacoumara, MSc OR

Every effort was made to ensure the accuracy of this list.
The Faculty of Dentistry is proud to announce this year’s recipients of the Alumni of Influence awards. This program recognizes outstanding alumni and celebrates the profound impact of their contributions.

Previously called the Award of Distinction, the Faculty updated these awards last year to better acknowledge dental professionals who influence care in a wider range of ways.

Through their leadership, compassion and tireless commitment, these alumni are championing improved access to care, serving communities in need and building a brighter future — for their patients, the profession and society as a whole.

BY SARAH MACFARLANE
At 12 years old, Farel Anderson had two goals: help others and become a dentist. “I’ve always wanted to help people,” he says. It was a value he learned growing up in St. James, Jamaica. Despite having limited means, his parents gave as much as they could to others.

When he moved to Canada, Anderson put himself through school, studying agriculture at the University of Guelph before entering the DDS program. “I got inspiration from my professors at U of T,” he says. “They were fantastic operators and, at the same time, very people oriented.”

After graduation, Anderson received an invitation to practise in Collingwood. “It was a white community, and I was fearful about the effects of racism,” he says. “In Guelph, Black students stayed in their rooms. We didn’t go anywhere because there were no places where you would be received. But I thought, ‘Why should I be held back?’”

When he arrived, the community welcomed him. “I didn’t feel any sense of difference. They were very receptive, their arms outstretched.” It’s been home ever since. He’s volunteered for numerous organizations, including E3 Community Living, which supports vulnerable citizens. In the 1970s, Anderson was the first Black candidate elected to Collingwood Town Council — he oversaw the police and fire departments.

His true passion, however, has always been dentistry. Committed to educating children and alleviating their fear of the dentist, Anderson spearheaded the Brush-a-mania program in local schools.

Anderson has visited Jamaica annually for 20 years to provide care to people living in poverty. “I felt blessed to be in a position to give back some of what I’d gained in life.”

“Throughout his 47-year career, he’s regularly offered dental services at reduced rates or free of charge. He’s never turned a patient away. “Whatever I’ve done was meant to be an improvement to the person’s dental health, but it’s not just dentistry. It’s talking with patients, encouraging them and being empathetic. It’s important to satisfy their dental needs, but it’s equally important not to lose focus on the humanistic element.”
LouAnn Visconti believes that orthodontics is about more than straightening teeth — it’s about positive psychological impact. “You can’t put a price on building confidence and self-esteem. They’re key factors in success in life and work,” she says.

Visconti’s work with underserved communities in north-eastern Ontario spans three decades. When she moved to Timmins in 1992, she was the only dental specialist for hundreds of kilometres. Treatment plans involving different specialties depended on a patient’s ability to travel up to four hours.

“They also needed to take time off work and school and pay for hotels and food,” she says, adding that specialists, including periodontists and endodontists, now provide services to Timmins on a locum basis. “That has benefited people here because they no longer have to travel to receive comprehensive treatment.”

Access to care has been a cornerstone of Visconti’s career. During her 2017–18 Ontario Dental Association (ODA) presidency, a priority was lobbying the province to invest in public dental health programs, specifically Healthy Smiles Ontario, which provides access to dental care for children up to age 17. Another priority was the overhaul of the infection prevention guidelines, which laid the foundation for current COVID-19 safety protocols in dental offices.

Now the ODA’s representative on the Canadian Dental Association (CDA) board of directors, Visconti continues to prioritize dental care for all. The economic fallout of the pandemic could see more Canadians without access to dental care, so the CDA is urging the federal government to allocate funding for provincial oral health programs.

Among the many highlights of her career, Visconti says one stands out: learning that through the positive experience of their orthodontic treatment, a patient had realized that life was worth living.

“That’s what makes it all worth it,” she says. “Dental care does not start and end with the oral cavity; it’s the interactions we have daily. It costs nothing to be kind, and it could change someone’s life.”
SNEHA ABHYANKAR 8T1 DIP DPH, 8T5 MSC, 8T9

Sneha Abhyankar turns challenges into opportunities to improve her own life, plus the lives of others.

A three-time graduate of the Faculty, Abhyankar earned her diploma in Dental Public Health in 1981 and her master’s in 1985. After completing her DDS in 1989, she moved to Newfoundland, where she was one of few dentists of colour at the time. She has practised as a general dentist in Corner Brook for the last 31 years.

Abhyankar has been providing care in the remote communities of Burgeo and Port Saunders since 1994 and 2011, respectively. “People in these small communities are genuine and helpful,” she says. “The dental service provided there is much appreciated.”

One winter, her car got stuck in the snow and strangers stopped to assist her and her children. “That’s what I like about the people in Newfoundland.”

Abhyankar has been active in organized dentistry through the Newfoundland and Labrador Dental Association (NLDA), serving as president in 2008. During her tenure in the top job, she successfully advocated for a government-funded dental plan for low-income seniors. “My aim was to get something to curtail their suffering, infections and pain, to serve these seniors who needed help for medical reasons.”

She continues to advocate for dental services at hospitals and long-term care facilities. As a staff dentist at the Western Memorial Regional Hospital, Abhyankar treats children with special needs. She was a member of the Newfoundland and Labrador Dental Board from 2010 to 2016 and serves on multiple NLDA committees. She’s also on the executive of the National Dental Examining Board of Canada.

Abhyankar mentors new graduates returning to Newfoundland and encourages them to serve rural and underserviced areas.

Ever since she moved from India as a young woman to pursue an education and career, Abhyankar’s tireless efforts to reinforce dentistry’s position as an essential part of health care have been her legacy.
Think back to your years at the Faculty and remember the look of the auditorium, Clinic 2 and Lab 4. Today, those spaces still resemble how they looked when first built in 1959. These important teaching and clinical spaces have kept pace with modern technology to ensure exceptional patient care and a comprehensive educational experience. However, a revitalization of these essential spaces is on the horizon as the Faculty readies itself for significant building renewal.

The Faculty of Dentistry boasts top-notch faculty and instructors working with the brightest DDS and graduate students. Working together, they provide much-needed dental care through the Faculty’s teaching clinics, which offer more than 90,000 patient visits in a typical year.

“Providing an educational and patient experience that is second to none depends on many factors, including an environment that will enhance patient care and support the practitioners of the future,” says dean Daniel Haas.

In 2018, a revitalization of the Faculty’s research spaces helped to bolster its research enterprise. Faculty and graduate students have already seen how these upgraded areas aid efficiency and collaboration in their work.

“It’s time to focus our efforts on renewing the Faculty’s teaching and clinical areas for the benefit of the students, the patients and all those who use our spaces,” says Haas.

In the coming months, the Faculty will launch an ambitious campaign to help fund these exciting and transformative projects. The auditorium renovation is already underway. Renovations of Lab 4 — the simulation lab — and Clinic 2 at 124 Edward St. are set to begin as early as 2023.

These renewed spaces will deepen and expand the Faculty’s impact in the community through an enhanced capacity to deliver excellence in innovation, education and patient care.
Late last year, Henry Schein Canada donated a generous $100,000 to the Faculty of Dentistry. The money will go toward the Faculty’s student service learning and outreach programs.

Upper-year DDS and graduate students offer dental services through outreach programs, which operate in parts of Africa, Central America and rural Ontario.

According to Prashant Ohri, vice president and general manager of Henry Schein Canada, one of the largest dental and medical supply companies in Canada, U of T’s dental outreach programs align well with the company’s values. “It advances our mission to help enhance access to health and education for those who need it most,” he says.

Henry Schein Cares, the company’s corporate social responsibility program, focuses on prevention, wellness, treatment and disaster relief, says Ohri. To achieve those goals, the company partners with organizations such as universities to work on projects that fulfill that mandate. The company gives money but also gifts in kind in the form of equipment.

The company has worked with U of T Dentistry in the past. Ohri says this new donation, which will come in the form of a fund grown over five years called the Henry Schein Student Outreach Fund, targets the company’s concerns regarding access to care in certain local and international communities.

“Advancing access to oral care for those who don’t have it based on where they live and their life situation, as well as supporting the student learning experience, is why we made this donation,” he says.

Ohri, who has worked with dental device companies for decades, says he has been out in the field witnessing these kinds of student rotations in action. “I’ve seen it. It’s tiring. It’s a lot of hard work but it’s transformative work,” he says. He hopes this new donation — and future projects with U of T — will help keep this approach to education going to benefit students and patients.

**PARTNERSHIP EXPANDS OUTREACH**

A gift from Henry Schein bolsters student service learning

It advances our mission to help enhance access to health and education for those who need it most.
Gifts to support students, patients, research and building renewal make a meaningful impact no matter the amount. “Every penny counts, and every donor is appreciated and essential to our future sustainability and success,” says director of advancement Selina Esteves. “I am inspired by the generosity of the U of T Dentistry community and their recognition of the need that exists here.” While major gifts are vital, equally important are smaller annual gifts, gifts in kind, planned gifts and sponsorships that provide a huge level of support as well. For a conversation about providing support, please contact alumni@dentistry.utoronto.ca.

1. CHALLENGE COLLEAGUES

Last winter, a graduate of the oral and maxillofacial radiology graduate program asked colleagues to make a game out of giving. The anonymous benefactor would match donations to the program up to $10,000.

It worked! Trish Lukat 1T3 MSc OR, president of the Canadian Academy of Oral and Maxillofacial Radiology, made a donation along with program director Ernest Lam.

Overall, more than 10 donors got involved. Their gifts surpassed the initial goal. In total, nearly $35,000 went to support this world-class graduate program.

2. GIFTS OF GOODS

Some organizations offer gifts in kind, which are donated items such as chairs, surgical guides, orthodontic appliances, bone materials and implants.

Everyone benefits from these gifts. The Faculty saves on the purchase of these items and students gain access to state-of-the-art tools and equipment. Givers, meanwhile, know that students are potential future clients and that their use of their materials and products in school can translate into greater comfort in practice.

As the largest and most comprehensive dental school in Canada, the Faculty has cultivated many generous and long-time donors who help keep the Faculty’s simulation lab, clinics and research labs stocked with quality goods and tools. The Faculty is grateful to companies such as Nobel Biocare Canada, Strauman, Zimmer Biomet, Dentsply Sirona Canada, Consult-PRO and American Orthodontics for their annual, major gift-in-kind support.

3. GIVING A LITTLE, OFTEN

Some of the Faculty’s most loyal donors give on a regular basis, often in smaller amounts that add up over time. Some use their credit card or direct withdrawal to give on a monthly basis or annually. Those who give every month say they hardly notice the amount, but for the Faculty, this kind of giving creates an essential base of funding that helps ensure the sustainability of buildings, programs and research.

Employees of the University of Toronto can give through automatic payroll deductions. Many faculty members and staff donate this way, inspired by the difference their giving can make to dental students, research and the community members who rely on clinics for dental care.
WE REMEMBER...

JOHN SPECK 4T9, 5T2 DIP PERIO

Professor emeritus John Speck, who led the periodontics program at the Faculty for many years, died in February at age 95. Speck graduated with his DDS in 1949 and went into private practice. He studied periodontics at U of T and joined the Faculty as a professor in 1967 and later headed up periodontics for nearly 20 years. Speck was active in organized dentistry, serving as registrar of the Royal College of Dentists of Canada for 27 years. He was given the Arbor Award by U of T in 2011.

KEITH DAVEY 5T3

Professor emeritus Keith Davey passed away in January. In the 1960s, he served as head of the paediatric program at SickKids and the department at U of T Dentistry from 1966 to 1969. In the 1970s, he led the National School of Dental Therapy in Fort Smith, NWT. In 2015, he set up two awards at the Faculty, one of which was in the name of his father, Keith H. Davey 2T4.

H. JAMES SANDHAM

Former professor Jim Sandham died in January. He completed his DDS at the University of Alberta and his PhD at the University of Manitoba. He joined the Faculty in the 1970s as an experienced researcher in cariology, preventive dentistry and oral microbiology: he became head of microbiology in 1978 and worked at the Faculty for 25 years. During his tenure he developed an innovative anti-microbial varnish. Sandham also served as president of the Canadian Association of Dental Research.

MARGARET HATTON 5T2 PHD

Margaret Hatton died last October. Born Margaret Brown, she emigrated from Jamaica to attend U of T. She worked as a senior research fellow at the Burlington Orthodontic Research Centre, which was run by the Faculty. After a decade doing research, she became a lecturer at U of T in the zoology department and retired in 1989.

WESLEY DUNN 4T7

Wesley Dunn died last November at age 96. After graduating from the Faculty, he became assistant editor of the Journal of the Ontario Dental Association, then editor of Oral Health and later editor of the Journal of the Canadian Dental Association. Dunn is the only dentist to have held an editorial position at three out of Canada’s four major dental journals. In 1965, he helped launched the dentistry program at the University of Western Ontario (now Western University), serving as dean for 17 years. Dunn served as both registrar and president of the Royal College of Dental Surgeons of Ontario. The Ontario Dental Association awarded him the Barnabas W. Day Award in 1988.

JOSEPH FOSTER 8T1

Joseph Foster passed away in November at age 65. He was born and raised in Toronto and graduated with his DDS from U of T in 1981. He set up a practice in Etobicoke, which he ran for nearly 40 years. He returned to the Faculty as a part-time instructor, a position he held for more than a decade.

WE MOURN THE LOSS

Ronald Anco 6T5
Robert Borris 6T5
Peter Collins 8T0 Dip Perio
Harvey Freedman 5T9, 6T5 Dip Perio
Walter Godsoe 5T9
Arnold Heisler 5T8
Richard Jennings 6T7
Bruno Jurmalietis 5T8
Kenneth Pallett 5T4
Harold Pepper 5T7
Lorraine Raymond 5T5 CDNU
Edward Reiter 7T9
Mark Stevens 8T2
Miriam Webb 5T0 Dip DN
Frank Wilson 7T1, 8T4 Dip DPH
Michael Barry Young 6T4

Listings are as accurate as possible as of press time.
FOR RYAN, DENTISTRY IS MORE THAN A PROFESSION
IT’S A CALLING.

For Ryan Noh (DDS 2019), pursuing dentistry was more than about honing practical skills. He saw it as a journey to understand the difficulties associated with the provision of health-care services to diverse populations in Canada. Thanks to the Robert and Madeleine Echlin Memorial Scholarship in Outreach Dentistry, Ryan could pursue this journey working at the Weeneebayko General Hospital in Moose Factory, Ontario where he provided dental services to patients with varying health and dental needs.

The scholarship, created through a bequest from Dr. Robert Echlin’s estate, gives students opportunities to practice in northern communities.

By leaving a bequest to the Faculty of Dentistry, you too can give students unique learning experiences, help with clinic and equipment renewal and more.

For more information on creating a legacy at the Faculty of Dentistry, contact Selina Esteves at selina.esteves@utoronto.ca

FOR RYAN, DENTISTRY IS MORE THAN A PROFESSION
IT’S A CALLING.

FOLLOW US AND SHARE YOUR STORY

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