

The

**ROYAL CANADIAN
DENTAL CORPS**

Quarterly



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Cover Photograph

Bellapais Abbey - Cyprus

CANADIAN DENTAL DETACHMENT
(UNFICYP) CYPRUS

Captain G.R. Nye, BA, BSc, DDS



Maintaining a Tradition

As a member of the United Nations Organization, Canada has taken an active part in every UN peace-keeping operation since the Korean conflict. Hence, it was not surprising that when the crisis in Cyprus arose in late 1963, although many members of the UN were either uninterested or hesitant about becoming involved, Canada expressed willingness to play its full part in establishing an effective UN force to keep the peace.

When the Security Council adopted a resolution creating the United Nations Force in Cyprus (UNFICYP), five member governments agreed to provide contingents and ten agreed to make contributions to the voluntary fund for financing the operation. Canada was the first country to commit itself to provide troops. Seven countries now contribute military contingents to the Force - Britain, Canada, Denmark, Sweden, Finland, Ireland and Austria. In addition, the Force includes a civilian police detachment consisting of police officers sent by Australia, Austria, Denmark, New Zealand and Sweden.

Historical Background

The Island of Cyprus has had a turbulent history, having been occupied prior to the pre-Christian era by Egyptians, Phoenicians, Assyrians, Persians and Greeks. Later the Romans ruled Cyprus for several hundred years. The Arabs conquered the Island in the Seventh Century and in 1191, during the Third Crusade, King Richard I of England (The Lion Hearted) took possession of it. It came under the influence of the Republics of Genoa and Venice until it was occupied by the Turks in 1571. The Turks remained in Cyprus for three centuries and it was at least nominally a part of the Ottoman Empire until 1914 when Turkey entered into war against Britain. Cyprus was then annexed to the British Crown and it was given the status of Crown Colony.

For many years prior to World War II a movement for union with Greece (enosis) developed among the Greek Cypriots. After the War the movement became increasingly active and turbulent. The British government and the Turkish minority opposed union with Greece, the latter group favouring partition of the Island. A new constitution proposed by Britain in 1954 was rejected. A campaign of terrorism was carried out against British soldiers and civilians by the E.O.K.A. (National Organization of Cypriot Struggle), a secret military organization. Independence was obtained in 1960 and Cyprus became a republic, a member of the United Nations and a member of the British Commonwealth of Nations. Under the terms of the treaty granting independence, Britain, Greece and Turkey agreed to safe-guard the new constitution of Cyprus and to intervene, together or singly, in the event of threats of annexation or partition. Under a separate treaty Britain was granted the right to maintain troops and military installations in two Sovereign Base Areas (SBA) on the Island which were excluded from the territory of the Republic of Cyprus.

Contemporary Political Problem

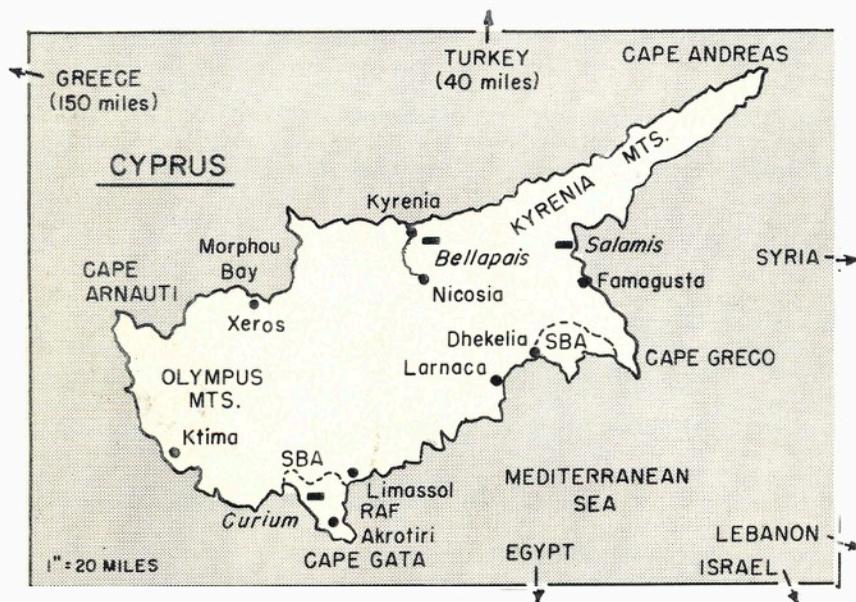
The population of Cyprus is 620,000 of whom approximately 80% are Greek Cypriots and 20% Turkish Cypriots. In general, the Greek and Turkish ethnic groups remain culturally isolated by language, religion and municipal politics. The two communities on

the Island are sharply divided and have inherited a legacy of tragic violence. By religion the Turkish Cypriots are Moslem and the Greek Cypriots are Eastern Orthodox.

Independence did not bring with it a resolution of Greek-Turkish unrest in Cyprus. Greek and Turkish Cypriots had not been consulted formally when the constitution of 1960 was drawn up and their leaders did not consider that their positions had been properly presented. The new system of government proved unsatisfactory as a means of assuring harmonious relations between the Greek-Cypriot and Turkish Cypriot communities.

The Emergency

In late 1963, President Archbishop Makarios tendered 13 proposals to amend the constitution. The main points were: unification of state, government, and municipal councils; centralization of taxation; and abolition of the Turkish Cypriots' veto privileges. The Vice-President Dr Fazil Kutchuk, leader of the Turkish Cypriot minority, rejected these proposals. Relations progressively deteriorated and on 21 Dec 63 civil war broke out. British troops from the Sovereign Base Areas stopped the fighting after seven days, but it became evident that in order to continue the truce a much larger force would be required.



This civil war was not only regrettable in itself, but also constituted a threat to international peace, since both Greece and Turkey would, if the situation had been allowed to deteriorate, have felt it increasingly necessary to intervene unilaterally on behalf of one or other of the two communities. This would have carried a serious risk that more general hostilities might break out in the Eastern Mediterranean. It was for this reason that the Cyprus problem was brought before the Security Council of UN. Further complicating the situation, both Greece and Turkey were members of NATO. On 4 Mar 64 the Security Council adopted a resolution creating the United Nations Force in Cyprus setting forth the terms of its mandate as follows: "In the interest of preserving international peace and security, to use its best efforts to prevent a recurrence of fighting and, as necessary, to contribute to the maintenance and restoration of law and order and a return to normal conditions."

Canadian Participation

The Canadian Government responded promptly and was deeply concerned about the delays which occurred even after the Security Council had adopted the resolution

calling for the establishment of the force. Canada was able to respond quickly to the Secretary-General's request because she had maintained on stand-by duty a battalion for possible service under the UN, specially trained for peace-keeping duties. The first Canadian Contingent left for Cyprus on 13 Mar 64 and consisted of the 1st Battalion Royal 22nd Regiment with a Reconnaissance Squadron of the Royal Canadian Dragoons.

A dental processing team at Camp Valcartier worked overtime to provide last-minute treatment and documentation for the stand-by battalion. On 19 Mar 64 the RCDC Detachment consisting of Capt JML Rochefort, Sgt Crockett MD and Cpl Giroux JE departed for Cyprus.

Since March 1964, the Canadian Contingent has been responsible for control of the Kyrenia district in the north central sector of the Island, an area of about 550 square miles. The tasks of the Canadian Contingent have included patrolling, reconnaissance, maintaining outposts, supplying the Force reserve, and providing a twice-daily convoy for Greek Cypriots through the Turkish Cypriot enclave from Nicosia to the Fort of Kyrenia.

UN CLIFFSIDE OUTPOST
in the KYRENIA PASS
manned by Canadian
troops of UNFICYP



Troodos Camp

The Canadian administrative support group set up a supply base in an area two and one half miles west of Nicosia which became known as Troodos Camp. Most of the personnel were quartered under canvas which had been hastily obtained from the British.

A hut formerly occupied by a Cypriot trader became the Canadian dental clinic. It can be well imagined that it required several changes and modifications before it could become functional. The building was thoroughly cleaned and disinfected. Approval was granted for the installation of a wash basin and a stepdown transformer (220V to 110V). Sgt Crockett built a cabinet and shelves and paint was scrounged to make the building more presentable. Bulk supplies were off-loaded from the Bonaventure at Famagusta and on 13 April the clinic, complete with x-ray machine, was officially opened.

RCDC Clinic
Troodos Camp
Cyprus 1964



For a period of a month after the Force arrived in Cyprus, members of the Finnish Battalion were treated in the RCDC clinic. When the Austrian field hospital and dental clinic became operational the health service for the Finnish contingent became its responsibility.

The Island is constantly swept by winds which have a clear throughway across the Messaoria Plain. The Plain is bounded on the North by the Kyrenia Range and on the South by the larger Troodos Range. The rivers do not flow throughout the year, being dry during the summer and torrential in winter. The temperature usually hovers around 95°F during the summer. With little whirlwinds darting across the Camp area daily and the occasional dust storm which might last for several hours, the clinic was constantly dusty. During the summer, tropical routine was instituted with working hours from 0700 to 1300.

In October 1964 the first rotation took place with Capt RM MacDonald and Cpls O'Mara TR and Rutledge EJ as members of the new detachment. By this time the UNFICYP operation had ceased to be an emergency action and had become a prolonged, tedious, policing task. Consequently, more permanent equipment for the static clinic was requested. The clinic staff were particularly indebted to WO2 Ferguson of the RCCEM detachment who used an electrical pump to provide a rudimentary evacuation system. During November the following equipment was installed: an SS White airtor, air compressor, Kerr electrotorque, mobile engine and lab equipment.



(1 to r) Sgt Shields JAR
Cpl Hughes DC and Capt
PS Wade in Cyprus

From the beginning, Canadian participation was a tri-service effort, with HMCS bonaventure transporting bulk base supplies and the weekly maintenance and mail run being provided by RCAF Yukon Service.

On 25 Mar 65 Capt PS Wade took charge of the clinic and a week later was joined by Sgt Shields JAR and Cpl Hughes DC. When they arrived the weather was moderate but after a few weeks the heat, particularly in the clinic, became unbearable. In the lab the temperature soared to 120°F. A request for an air conditioner was not received favourably. However the Commander agreed to inspect the clinic on 18 June. Legend has it that the temperature in the clinic stood at 135°F that morning, as the clinic staff used every conceivable method to make it reach that point. The air conditioner was installed on 25 June. Succeeding dental personnel and patients alike have been grateful for the effort and persistence used to achieve the aim.

CAMP TROODOS

1964



In July that year facilities were further augmented with the arrival of an operating chair, a vacudent, and the installation of a cuspidor.

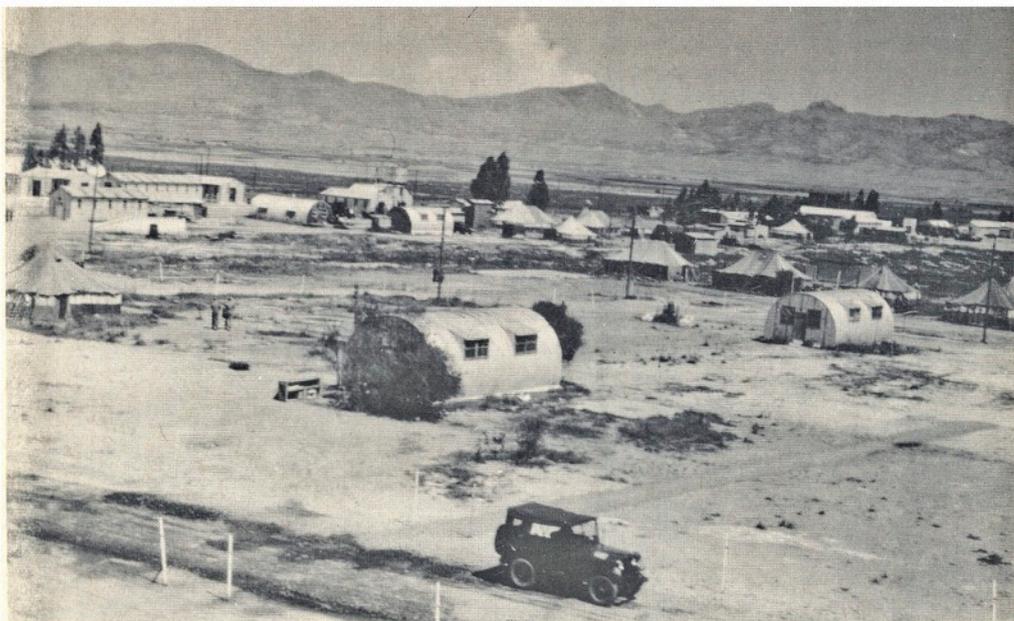
Capt H Griesbach replaced Capt Wade as OIC in September 1965. On October 9 the RAF at Nicosia, with whom Sgt Shields had established a personal liaison, learned of his impending departure and sent an informal committee to make sure he got aboard the aircraft. They were successful and as he left Cpls Forward RJ and Mandrusiak OW arrived.

Camp Maple Leaf

After a year and a half under weather-beaten canvas which had been set up temporarily in March 64, the administrative support group moved into more permanent quarters. This was facilitated by the take-over of the adjacent Camps Ubique and Elizabeth. The consolidated camp complex became known as Camp Maple Leaf.

It is doubtful if the tents would have lasted through another rainy season. Cpls Forward and Mandrusiak shared the end room of a tin-roofed dormitory. Their quarters were occasionally flooded. The clinic always received a generous portion of rain through the roof and it was during this period that "Griesbach Bridge" was constructed over the mud puddles between the clinic and the dental officer's hut.

In April 1966 Capt GR Nye, Cpl Pink A and Cpl O'Dell RG experienced the challenge of Cypriot drivers as they proceeded on the left hand side of the road to Camp Maple Leaf. The handover period was a brief five minutes. However, Capt Griesbach left Capt Nye a unique handpiece called the "puppy pounder". Puppy pounders are elaborate sticks carried by new comers to Cyprus on their evening walks to ward off wild dogs, which are seldom seen! Most of the stray dogs are infected with Hyatid Cyst disease. Canadian drivers always carry their "puppy pounders".



Dental officer's "houchie" in the foreground

During the next few months the clinic was improved by painting, screening and the installation of fluorescent lights. A trap awning was erected over the waiting room area outside the clinic to protect the patients from direct sunlight. Arrival of the Encore field dental Unit greatly facilitated an increased range and ease in rendering dental treatment.

When Capt JO Strom replaced Capt Nye in October 1966, a handover period had been arranged so that ample time was allocated to discuss clinic facilities, policy and treatment possibilities in Cyprus. Capt Strom went on introductory tours of the British Military Hospital and the Austrian Field Hospital. Cpl Black RS and Cpl Timmers PA were the other members of the detachment with Capt Strom.

Dental Treatment

Treatment in Camp Maple Leaf was limited to what could be done with local anesthesia. Patients requiring operating room procedures were referred to the Austrian Field Hospital (AFH) and the Canadian dental officer was permitted to use their facilities. In fact the Canadians did the first dental general at AFH.

More advanced oral surgery cases involving fractures were routed through AFH to BMH Dhekelia. Pte Kayne JE was one of the patients treated by Maj Kessel RADC at DMH. No doubt this patient was suitably impressed with the treatment because he later transferred to the RADC.

Liaison Visits and Meetings

Capt Nye and Cpl Pink visited the Dhekelia Army Dental Center. Col French, the SDO, invited them to an informal gathering of all dental personnel at the center. Cpl Pink toured the dental laboratory at BMH and had an opportunity to discuss some of the techniques used in surgical splinting by the RADC.

In December 1966 Capt Strom held an impromptu clinic at the Austrian Field Hospital in order to demonstrate the use of the new UNITEK Pin Kit. Dr. Wiesler, the Austrian dentist, reciprocated by demonstrating his endodontic technique.

Recreation and Leave

Camp Maple Leaf was a rather dismal, dry, dusty home, but the social life was the envy of the other national contingents. Among other diversions in the Officer's Mess, lizard races proved to be very popular during the author's tour of duty. Track officials were appointed and ingenious starting gates designed which were automated by the dynamo from a field telephone set. Occasionally too much spark was delivered and the lizards failed to leave the starting line!

The daily "rec" run left Camp Maple Leaf for the beaches near Kyrenia. For beginners scuba courses were conducted in the pool at the Dome Hotel. Upon qualification groups rented a boat and went on fishing excursions along the corals. Fish dinners were speared and on one occasion a three foot octopus provided a gourmet's delight!

On Sundays, trips with tour guides were arranged and many historic sites visited. The Temple of Zeus and the amphitheatre at Salamis near Famagusta is a favourite 2nd century Roman ruin. At the Curium Amphitheatre the production of Shakespeare's tragedy "Othello" was performed. In fact, Othello's Tower still stands in Famagusta. Near Ktima, the Stone of Rominos on the coast marks the traditional foamy birthplace of Aphrodite, the Goddess of Love and Beauty.

Several of the Detachment personnel became involved in sports. Cpl Forward played basketball for the Canadian Guards, their chief competitors being the "Dhekelia All-Stars". Capt Strom joined the UN Headquarters rugby team which was truly an international group with players from Austria, New Zealand, United Kingdom, South Africa, Ireland and Canada.

ECDC personnel have taken full advantage of the two, one week leave periods during their six month tour. Ten days were subsidized for room and board. In Cyprus, Canadian leave centers were established at Famagusta in the Troodos Mountains and at Limassol. A UN aircraft flew to Beirut Lebanon Saturday and from Beirut a subsidized tour to the Holy Land was available. Also leave can be taken in European NATO countries and Israel. Finally, arrangements can be made to tour Europe on annual leave before returning to Canada.

Conclusion

A tour of duty in Cyprus offers many opportunities for ECDC personnel, both as far as field experience is concerned and also a chance to travel in the Middle East and Europe. It is hoped that a return to "normal conditions" will occur on that troubled Island in the not too distant future and that UNFICYP's mission of peace will be blessed with success.



LEAVE CENTER
FLORIDA HOTEL
FAMAGUSTA - CYPRUS

MIXED DENTITION ANALYSIS

Major HW Brogan, DDS



One of the most important steps in the examination of a child's occlusion is the "Mixed Dentition Analysis" which enables prediction of the eventual amount of spacing or crowding of the permanent teeth. It is not easy to predict with accuracy the ultimate relationship of tooth size to space available, however it can be done if care is exercised and proper procedures employed.

In order to complete an analysis of the mixed dentition, three things must be known:

- a. the size of all the teeth;
- b. the perimeter of each arch; and
- c. changes in arch perimeter which will occur because of growth or treatment.

Some of the teeth can be measured directly in the mouth, but when the procedure is usually desired, the cuspids and premolars have not yet erupted and therefore the prediction of their size is a necessary step. Arch circumference may be measured by several methods but the estimate of changes in arch perimeter requires a thorough knowledge of the dynamics of the mixed dentition stage of development.

Method

Many methods of mixed dentition analysis have been suggested. The method outlined in this article is advocated for the following reasons:

- a. error is minimal and the range of possible error is known;
- b. it can be done with equal reliability by the inexperienced and the specialist;
- c. it is not time consuming;
- d. no special equipment is required;
- e. it can be done either directly in the mouth or with casts;
- f. it may be used for both arches.

The size of the teeth in an individual's mouth is usually harmonious with the possible exception of the maxillary incisors. So precise is this correlation that the measurement of a tooth or group of teeth permits forecasting within close limits other tooth sizes in the same mouth. Indeed, this is the rationale of Mixed Dentition Analysis. The mandibular incisors are the teeth of choice for measuring since they erupt early in the mixed dentition and are easily measured accurately. The maxillary incisors are not used in any of the predictive procedures since they may not harmonize with the rest of the dentition. Therefore lower incisor measurements are used to predict the size of both upper and lower posterior teeth.

Procedure for the mandibular arch

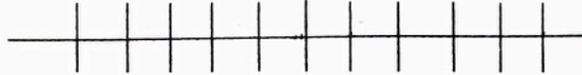
- a. With a tooth-measuring gauge or pointed Boley gauge the greatest mesio-distal width of each of the four mandibular incisors is measured and these values recorded (Plate I).

MIXED DENTITION ANALYSIS

Patient _____ Age _____ Sex _____

Date _____ Address _____ Parent _____

TOOTH SIZE



Upper

	Right	Left
Space left after alignment of 2 and 1		
Predicted size of 3 + 4 + 5		
Space left for molar adjustment		

PLATE I

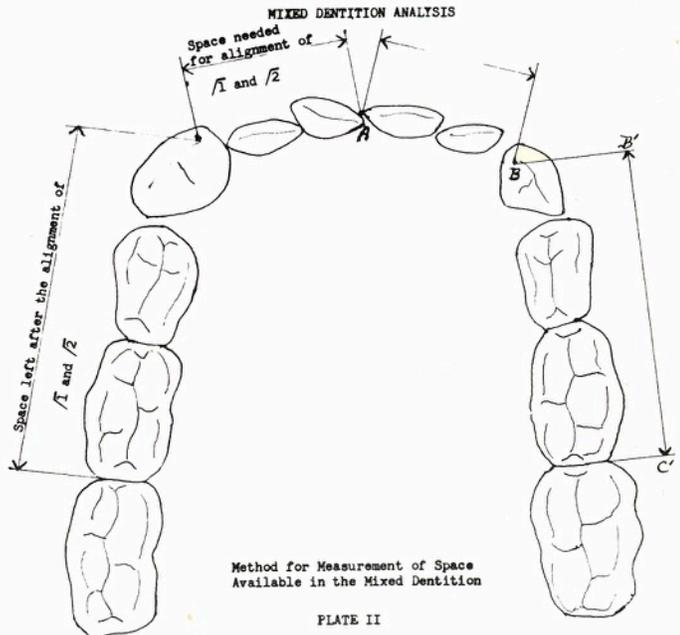
Lower

	Right	Left
Space left after alignment of 2 and 1		
Predicted size of 3 + 4 + 5		
Space left for molar adjustment		

Remarks: Overjet = _____ Overbite = _____

Molar relationship = _____

b. The amount of space needed for alignment of the incisors is determined. This is accomplished as follows. The Boley gauge is set to a value equal to the sum of the widths of the left central incisor and left lateral incisor. One point of the gauge is placed at the mid-line between the central incisors and the other point is permitted to lie along the line of the dental arch on the left side. The precise point where the distal tip of the Boley gauge has touched the tooth of cast is marked. This point is where the distal surface of the lateral incisor must be when alignment has been completed. This procedure is repeated for the right side of the arch.



c. The amount of space available, after incisor alignment, is computed. To do this, the distance from the point marked in the line of the arch to the mesial surface of the first permanent molar is measured (i.e. B' ← C' in Plate II). This distance is the space available for the cuspid and two premolars as well as for molar adjustment

after the incisors have been aligned. This value is recorded on the mixed dentition analysis form and the procedure repeated for the other side of the arch.

d. Using the probability charts shown on Plate III the sum of the combined widths of the mandibular cuspid and premolars can be determined. Selecting at the top of the mandibular chart the value which most nearly approximates the sum of the widths of the four mandibular incisors, the column below this figure lists the range of values for the sum of all cuspid and premolar sizes. For example, it can be noted

PROBABILITY CHART FOR PREDICTING THE SUM OF THE WIDTHS OF 345 FROM 21/12

21/12	19.5	20.0	20.5	21.0	21.5	22.0	22.5	23.0	23.5	24.0	24.5	25.0	25.5	26.0	26.5	27.0	27.5	28.0	28.5	29.0
95%	21.6	21.8	22.1	22.4	22.7	22.9	23.2	23.5	23.8	24.0	24.3	24.6	24.9	25.1	25.4	25.7	26.0	26.2	26.5	26.7
85%	21.0	21.3	21.5	21.8	22.1	22.4	22.6	22.9	23.2	23.5	23.7	24.0	24.3	24.6	24.8	25.1	25.4	25.7	25.9	26.2
75%	20.6	20.9	21.2	21.5	21.8	22.0	22.3	22.6	22.9	23.1	23.4	23.7	24.0	24.2	24.5	24.8	25.0	25.3	25.6	25.9
65%	20.4	20.6	20.9	21.2	21.5	21.8	22.0	22.3	22.6	22.8	23.1	23.4	23.7	24.0	24.2	24.5	24.8	25.1	25.3	25.6
50%	20.0	20.3	20.6	20.8	21.1	21.4	21.7	21.9	22.2	22.5	22.8	23.0	23.3	23.6	23.9	24.1	24.4	24.7	25.0	25.3
35%	19.6	19.9	20.2	20.5	20.8	21.0	21.3	21.6	21.9	22.1	22.4	22.7	23.0	23.2	23.5	23.8	24.1	24.3	24.6	24.9
25%	19.4	19.7	19.9	20.2	20.5	20.8	21.0	21.3	21.6	21.9	22.1	22.4	22.7	23.0	23.2	23.5	23.8	24.1	24.3	24.6
15%	19.0	19.3	19.6	19.9	20.2	20.4	20.7	21.0	21.3	21.5	21.8	22.1	22.4	22.6	22.9	23.2	23.4	23.7	24.0	24.3
5%	18.5	18.8	19.0	19.3	19.6	19.9	20.1	20.4	20.7	21.0	21.2	21.5	21.8	22.1	22.3	22.6	22.9	23.2	23.4	23.7

PROBABILITY CHART FOR PREDICTING THE SUM OF THE WIDTHS OF 345 FROM 21/12

21/12	19.5	20.0	20.5	21.0	21.5	22.0	22.5	23.0	23.5	24.0	24.5	25.0	25.5	26.0	26.5	27.0	27.5	28.0	28.5	29.0
95%	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8	24.1	24.4	24.7	25.0	25.3	25.6	25.8	26.1	26.4	26.7
85%	20.5	20.8	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8	24.0	24.3	24.6	24.9	25.2	25.5	25.8	26.1
75%	20.1	20.4	20.7	21.0	21.3	21.6	21.9	22.2	22.5	22.8	23.1	23.4	23.7	24.0	24.3	24.6	24.8	25.1	25.4	25.7
65%	19.8	20.1	20.4	20.7	21.0	21.3	21.6	21.9	22.2	22.5	22.8	23.1	23.4	23.7	24.0	24.3	24.6	24.8	25.1	25.4
50%	19.4	19.7	20.0	20.3	20.6	20.9	21.2	21.5	21.8	22.1	22.4	22.7	23.0	23.3	23.6	23.9	24.2	24.5	24.7	25.0
35%	19.0	19.3	19.6	19.9	20.2	20.5	20.8	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8	24.0	24.3	24.6
25%	18.7	19.0	19.3	19.6	19.9	20.2	20.5	20.8	21.1	21.4	21.7	22.0	22.3	22.6	22.9	23.2	23.5	23.8	24.1	24.4
15%	18.4	18.7	19.0	19.3	19.6	19.8	20.1	20.4	20.7	21.0	21.3	21.6	21.9	22.2	22.5	22.8	23.1	23.4	23.7	24.0
5%	17.7	18.0	18.3	18.6	18.9	19.2	19.5	19.8	20.1	20.4	20.7	21.0	21.3	21.6	21.9	22.2	22.5	22.8	23.1	23.4

PLATE III

that when the sum of the mandibular incisor widths (21/12) is 22.0 mm, 95% of the individuals with incisors of this size have cuspid and premolar tooth widths (345) totalling 22.9 mm or less. No one figure can represent the precise cuspid premolar sum for all people since a range of posterior tooth widths exists even when the incisors are identical. The figure at the 75% level is generally used in making an estimate since it has been found to be the most practical from a clinical stand-point. In this instance it is 22.0 mm. Theoretically, the 50% level of probability value should be used since it is the average. Using the 50% value would distribute the error equally both ways. Clinically, however, more concern should be given to the prevention of crowding than to creating excessive spacing, hence the use of the figure at the 75% level. The value selected is the same for both sides of the arch and is recorded on the mixed dentition analysis chart.

e. The amounts of space left in the arch for molar adjustment is now computed. This is done by subtracting the estimated cuspid and premolar size values from the measured space in the arch after the alignment of the incisors. These values for each side are recorded on the analysis chart and a complete assessment of the space situation in the mandible is now possible. If it is a negative value, crowding is indicated even without molar adjustment.

Comment

When the first permanent molars are end-to-end (i.e. flush terminal plane at the

distal of the primary second molars), approximately 3.5 mm of space is required for a late mesial shift into a Class I molar relationship. This amount can only be reduced if the mandible grows anteriorly more than the maxilla. When there is already a Class I molar relationship in the mixed dentition, no additional space in the arch is needed for molar adjustment. Since it cannot be predicted during mixed dentition how the mandible will grow, the mixed dentition analysis must be based on dental adjustment factors alone; and if the molar relationship changes during the mixed dentition due to bony growth the analysis will alter accordingly.

A commonly accepted assumption is that each child will require precisely 1.7 mm of late mesial shift and that this will occur in every mouth, simply because this has been reported as the average value. Not only is such reasoning fallacious, but also dangerous. The primary purpose of the analysis is to determine the space requirements for each individual mouth. Average tooth size values cannot be assumed. As stated previously, approximately 3.5 mm of mesial shift is required when there is an end-to-end first permanent molar relationship and more is needed when the molars are already in a Class II relationship. In order to be of use clinically the mixed dentition analysis must be a custom analysis for each child's mouth.

Procedure for the Maxillary Arch

This procedure is similar to that for the mandibular arch with two exceptions:

- (1) a different probability chart is used for predicting the upper cuspid and premolar sum, and;
- (2) allowance must be made for overjet.

Value of Radiographs

It is good practice to have periapical radiographs available when doing the fixed dentition analysis since the absence of teeth and abnormal crown forms can then be noted. For example, when the mandibular premolars have two lingual cusps the crowns are larger than normal and it is wise to use a higher predictive value on the probability chart. The crown sizes of unerupted cuspids and premolars may be measured in the radiographs. This may be done to obtain supplementary information or to corroborate the mixed dentition analysis, but if used as the sole basis for the predictive procedure it is NOT accurate. The inaccuracy is unavoidable because there is no way of insuring that the central ray of the x-ray machine is lined up at exactly 90° to the unerupted teeth. The x-ray image of the teeth is usually significantly larger than their actual size.

Summary

A method for Mixed Dentition Analysis which can be executed with equal facility by both the orthodontist and the general practitioner has been described. The rationale for the method has been outlined and the importance of including this procedure in the examination of a child's occlusion emphasized.

* Maj HW Brogan attended a course in "Interceptive Orthodontics" earlier this year at University of Michigan, Ann Arbor, Michigan, USA.

.....

For every report casting doubt on fluoridation, there are innumerable ones concerning its safety and effectiveness. In fact, many authorities now regard fluoride as a dietary essential which not only renders the tooth less susceptible to decay but is necessary for proper development of the teeth, improving the quality and appearance of the enamel and reducing the incidence of idiopathic enamel surface defects.

- British Dental Journal - 21 Jun 66

* MOTIVATION IN THE CHOICE OF A CAREER

Lt-Col DH Hillier, CD, DDS, MPH



Introduction

Civilian employment is normally undertaken with a background and training which enables the new employee to contribute towards the workload immediately or following a brief period of familiarization. A career in the Armed Forces, on the other hand, is most frequently begun with the understanding that lengthy periods of training will be necessary before the Services can expect any worthwhile labour from the enrollee. The subsidization of dental students is in accordance with such an understanding and the Government's investment in them represents a calculated risk against their future work. A corollary risk is taken by the student who commits himself to nine years of a manner of life and endeavour about which he probably knows very little and with which he will not become fully involved until after he graduates. Despite the largely academic and civilian atmosphere in which he spends the first four years of service, the young officer will, during that time, form a lasting assessment of the virtues and shortcomings of a career in the RCDC. It is to the Corps' advantage, therefore, to provide for him as broad a military experience and to furnish as complete information as possible concerning a career as a dental officer in order that the assessment may be both knowledgeable and thoughtful.

The following comments concern those basic human needs which must be met for a satisfying career in any field and relate these needs to service in the RCDC. Although primarily directed towards young dental officers, the thoughts expressed have application to all Corps personnel.

Employment to Fit Your Needs

The choice of a man's occupation is governed largely by his family background, ability and opportunity. A career may evolve from a combination of experiences, pressures and decisions which occur over a long period and of which there may or may not be cognizance. As a result of to-day's specialization, the general pattern of a career is determined at an early age and in the professions and highly skilled trades the specific type of work must be chosen at the Secondary School level. Hence, only after one has devoted several years of study directed towards a particular field is he sufficiently mature to evaluate the field in an enlightened manner and in terms of his own needs and aspirations.

Obviously, the great expenditure of time and money required by an education in the trades or professions cannot be cast aside lightly. Normally by the time a person whose life has been directed along these lines achieves the senior undergraduate level, the only decision he can then make in regard to his career must be based on the conditions under which he will practise his profession or trade. These conditions should be chosen in terms which he believes will bring him happiness, or at least contentment, and should be based on the degree to which proffered employment of his talents and knowledge fulfil five basic needs which are common to all men.

Conditions of employment, professional or otherwise, will be satisfactory only

* This article was given as an oral presentation during the Officers' Clinical Course
13 Feb-17 Mar 65.

insofar as they fulfil what has been termed the Psychic Income, which is the total of each man's need:

1. to belong,
2. to have status,
3. to advance,
4. to exert influence and be respected, and;
5. to feel secure.

This Psychic Income - these Basic Needs, it will be noticed, do not include financial return. Money is, after all, merely a convenient method through which we can buy what is needful to live, and additional expression or fulfilment of these basic needs which tend to distinguish us as human beings.

The degree to which each of these needs must be fulfilled to achieve contentment differs with each person and, indeed, with respect to the same person at various times. For example, to one person the need to feel that he "belongs" in his working group and the opportunity for social interaction may be of paramount importance. Any position in which these opportunities are limited would be distasteful to him. He might prefer to accept a position which offered less money or chance of promotion but allowed him to be an integral part of a group. Someone else might take the completely opposite viewpoint. Furthermore, a young person is more likely to be influenced in his choice of work by the opportunity for advancement in salary and status, whereas, as he gets older the degree of security offered assumes greater importance.

Although the fulfilment of specific and immediate needs is of great importance, a proffered position should be examined in terms of future as well as immediate needs. Admittedly, an offer may be so attractive in one aspect that one would be willing to ignore all other considerations. To cite a most improbable example a college graduate might accept a job as garbage collector at \$75,000 a year. Obviously this job would fail to fulfil any of his BASIC NEEDS; these he would have to meet outside of his work and with \$75,000 he has the capacity to fulfil them. He probably would not be happy at his work but such financial rewards would provide the opportunity to create happiness every hour he is not at work.

Psychic Income need not necessarily be met in full by his profession. Indeed, it should be served as fully as possible by all experiences throughout life. A large proportion of that life is spent in the working situation, however, and during this period one should attempt to attain a high degree of satisfaction of his **Five Basic Needs**.

Five Basic Needs

1. To Belong

That man is essentially a gregarious animal and not "an island unto himself" has been recorded since Biblical times and this trait is particularly evident in his drive to be part of a group. To be associated with a team that is doing something worthwhile is of great importance and it is of even greater consequence that he be recognized as a part of that group, and not just an employee. The effectiveness of putting a fellow worker "in Coventry" and neither speaking to him nor including him in any group activity indicates the **power** of man's need to belong.

This need is further demonstrated by the person who will push himself into situations where he is obviously not welcome, - who will suffer countless rebuffs, only to return again, inviting further rebuffs. Such persons we deem to be "thick skinned" or speak of in even more uncomplimentary terms. Despite evidence of antagonism he is still able to associate himself with that group and, hence, he belongs. Similarly, solitary workers such as travelling salesmen associate themselves with and project a strong association with "The Company" as a substitute for active and physical association with their fellow workers.

2. Status

Everyone requires a precise status in his job and that level must be readily recognized by his co-workers and confreres. The importance of a recognized, defined and satisfying level within the work-group is exemplified by non-meaningful titles for those in positions of minor authority. Precise levels of hierarchy facilitate the exact placement of each individual within the organization and enable each member not only to recognize the stratum which he occupies but also to be assured that his exact position is known and appreciated by his fellows. Of equal importance to such vertical stratification is the lateral division between factory labour and office positions, and between the lesser white-collar jobs and the management or directorial staff.

3. Advancement

To stand still is to slide back. Hence comes man's need to advance his position. Proffered employment might involve two companies. In one, the pattern of progression may be set and inviolate, while in the other the opportunities to progress may be less certain but, through rapid expansion of the company, are potentially greater. Such a choice might arise between similar starting positions in banking and electronics. Although the risk one is willing to assume may vary, the potential to improve one's position must be present.

4. Influence and Respect

These needs involve man's drive to mould the ideas and action of others; to be well thought of by those beneath him in the structure and by those over him. The potential to exercise these needs may not be readily available in a relatively unstratified environment. In such instances a satisfactory measure of them can be obtained only if there is wholehearted and consistent backing and respect between the worker and his employers, particularly his immediate supervisor.

5. Security

To be secure within oneself is to be without fear; to be able to count on one life continuing along the general pattern that has been established. As a person grows older this need becomes of increasing importance in that the pattern has become firm and familiar. The adventure in major changes in a way of life has less appeal and the responsibilities of a family assume great proportions. For them and for himself man resists upheaval of the familiar and set manner of his life.

Making the Choice

From the answer to these drives man derives his Psychic Income. Happiness is attained from a satisfactory amount and proportion of each, - amounts and proportions which vary with each personality. How fully are these needs met in the somewhat divergent situations of practising dentistry in the military atmosphere and as a civilian practitioner?

As career officers of the RCDC and hence members of two professions, there is an abundant fulfilment of the need to belong. Active and meaningful participation in the day-to-day clinical situation is augmented by the Mess and all the less structured involvements with the Base, the Corps and the various other facets of military life. Membership is automatic and intimate. Involvement is governed largely by the individual. He may become strongly identified with any or all of these groups or, apart from the clinic, only a nominal relationship may be attained. It is of importance, however, that membership itself involves no overt action on his part.

The civilian counterpart enjoys parallel membership with the clinical group. Indeed, as its senior member he is assured a degree of identification that is not necessarily accorded a young officer. Any intimate participation with other professional groups, however, requires overt action and is of such intermittent character that it

cannot be constituted as an integral part of his life. On the other hand, by virtue of remaining in one location he is able to form a more lasting relationship with non-professional groups such as the church, fraternal orders, clubs, and with personal friends.

The status of an officer in the Dental Corps is precise and easily recognizable both by himself and all other military personnel. The high degree of stratification, both vertical and horizontal, ensures such definition. His position as a commissioned officer places him in the highest lateral division and his potential rise within this division is sufficient to obtain satisfaction in most instances.

In civilian life a dentist assumes the highest status within the clinic the moment he opens his practice. His level outside these confines is less well defined and entails a great deal of effort to establish and maintain.

Advancement within the profession, the power to influence and the attainment of respect overlap in the practice of dentistry. Through advancement in rank within the Corps the Dental Officer gains the opportunity to mould the ideas and actions of others and to gain their respect. Such advancement, although slow, is precise and normally entails added responsibilities.

The civilian practitioner, as the employer, begins at the highest level in his clinic and is able to exert influence over the entire staff and his patients. If he does so in a manner satisfactory to them and conducts himself generally in a manner which has their approval, he gains their respect. These three drives are much more difficult for him to attain among his peers and superiors within the profession. Indeed it is difficult for him to define who are his superiors. His rank and responsibilities remain constant and the influence and respect he engenders within the profession are nebulous and difficult to evaluate.

In speaking of security there is a tendency to think in financial terms. Security, as part of the Psychic Income, involves a relative absence of fear that a major disturbance will occur in one's manner of life - being assured that one can continue to work under certain circumstances and be able to foresee what will be the final outcome of his life's work.

The application of the need for security in civilian practice and a career in the RCDC is obvious. A young dental officer leaving the Corps to engage in civilian practice theoretically relinquishes the high degree of security offered in the Corps. He enters a situation wherein his only security is his own health and the fact that dentists can, if they really wish to, make a satisfactory living. The Corps provides a high degree of security within a narrow financial band. The officer who leaves relinquishes this security but exhibits his strong drive for advancement. To him the potential offered by civilian practice is of far greater importance. The gain in security for him lies in continuity of his practice and, generally, living his life in one location.

These few comments serve only to open the door on an important subject and are offered only to elicit serious consideration of the various elements which operate in this major decision. An officer of the RCDC who is reaching the end of his obligatory service should be aware of the great upheaval caused by termination of association with a life to which he has devoted a major part of his life. The decision is not an easy one but it is of prime importance to him that it not be made in a precipitous manner nor based on superficial considerations. In fulfilment of his Psychic Income he both gains and suffers loss by a decision to leave the Corps. He should endeavour to recognize these changes and make whatever decision he then feels is best for him and his family.

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The United States has worked long and hard to attain affluence, but it is now faced with one of the consequences of the easy life - the increase of dental disease.

- JADA Jan 67

Austrian Ski Holiday - 1967

Capt A.N. Swanzey, BA, DDS

The mountains of Austria and Switzerland are renowned for ski slopes which attract thousands of skiers annually. Early this year, Maj Peter Morin, Capt Gary Hill and the author, dental officers stationed in West Germany with 4 Fd Dent Coy, decided to take advantage of their proximity to these ski-meccas and travelled to Austria for a week-long ski holiday.

The area visited was the well-known ski center of St Anton am Arlberg in the Tyrolean Alps. The group was composed of 26 Canadian and American service personnel and their wives.

This was not an organized tour, but rather a casual arrangement whereby an entire Pension-Hotel was reserved just outside St Anton. Everyone provided their own transportation and made their own skiing arrangements. This plan worked out exceedingly well.

As is often the case, "getting there is half the fun". Those who arrived during daylight hours had a pleasant and relatively uneventful trip. But the "stragglers" were overtaken by snow and fog as they entered the six thousand foot Arlberg Pass. On entering the Pass, our world became two high banks of snow and a steep, winding pair of snow-filled ruts. Chains notwithstanding, it took two tries before the welcome lights of St Christoph were glimpsed, marking the descent down from the Pass to St Anton.

St Anton am Arlberg

Austria



All arrived intact, although the late-coming Morins shocked everyone when it was learned that Mrs Morin had just rallied from the mumps to make it for skiing. Fortunately, there were enough doctors and nurses in the group to handle everything from mumps to the anticipated aches, sprains and broken ankles that so often accompany skiing.

The next morning, the keen skiers were off to the slopes as early as possible, while others took advantage of the fine weather to do some sightseeing.

A well-known guide book describes this area of the Tyrol as "a pearl of mountain provinces, the best winter sports area in Austria, and one of the best skiing centers in the world". The description is not an exaggeration. In this area there are slopes to ease the way for beginners, and slopes to test the most experienced skiers. For those who like to ski from one area to another there are tows and trails

that lead from the slopes above St. Anton to St Christoph, the training area for the famous Austrian ski-school instructors. From St. Christoph, guides may take the expert skier along unbroken trails to another skiing area on "the other side of the mountain" - the Vorarlberg, and its resorts at Zurs and Lech. A bus trip will bring the traveller back to St. Christoph, and a half-hour run will return him to St Anton.

After browsing through the shops of St Anton for a while, our group ascended Valluga Mountain by cable-car. At 7000 feet the last ski run was passed, starting only 700 feet from the tip of Valluga. The view from this point is spectacular with the towering Zugspitze marking the border of Germany to the north, while to the south the Dolomite Mountains outlined the northern border of Italy. The brilliant sunshine highlighted peak after peak in a sea of mountains in all directions, a sight that was almost unworldly.

The next day ski lessons were started in earnest. Maj Morin and a few of the "pros" moved up the slopes with the more advanced classes, while most of the group remained below with the beginners. Our instructress was a dedicated, no-nonsense teacher, who didn't hesitate to use the butt-end of her ski pole on the "student" to reinforce her instructions. Screams of - "keep your hip forward", "weight on the downhill ski", and "skiing is kneeling" were reminiscent of parade square commands. For the next six days four hours a day, we struggled, slipped, rolled and sometimes managed to ski down the slopes to the accompaniment of shouts of encouragement from our teacher.

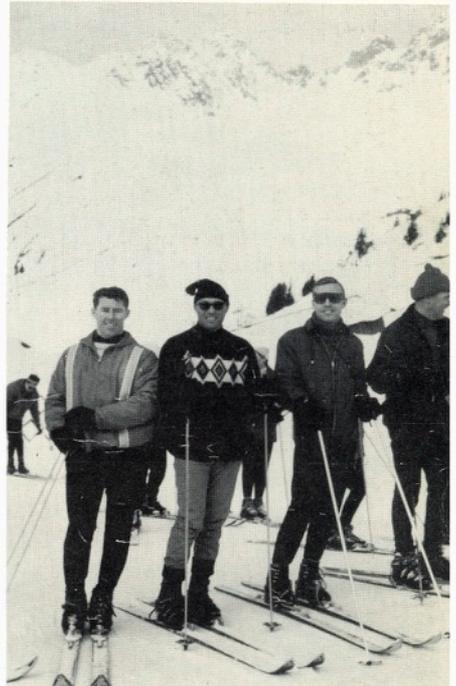
A two-hour lunch break highlighted the day. From noon until two o'clock, the group gathered at the mid-slope restaurant to relax on the sun deck, compare notes, soak up the everpresent sunshine, and to gather strength for the afternoon's assault on the slopes.

Five o'clock usually saw the lounge of our hotel slowly fill with weary skiers looking for a hot buttered rum, or the host's delicious and relaxing "glu-wein". For the enlightenment of the uninformed, this concoction consists of hot red wine mulled with spices, cloves, nutmeg, cinnamon, etc. - guaranteed to erase the strain of the day's activities and start one's evening off in a mellow mood.

Four to five hours of nearly non-stop skiing kept the lid on "après-ski activity". Early to bed and early to rise proved to be the rule. However, occasionally the group sallied forth into town for some nightlife. The highlight was the "Tiroler-Abend" (Tyrolean Night) featuring local folk dances and folk songs, complete with yodelling and zither-playing.

One evening, the three dental couples stumbled into a Carnival or "Fasching" masquerade party in one of the local hotels. Witnessing the Austrians and Germans celebrating their "Carnival time" is quite an experience. The costumes are outlandish, the fun is boisterous, and normal patterns of social behaviour give way to all sorts of hi-jinks.

The final evening saw the group gather in the main lounge of our hotel for a



Skiing at St Anton am Arlberg
(1 to r) Capt Swanzey,
Maj Morin, Capt Hill

sing-song that lasted well into the night, concluding with a couple of rounds of Slivovitz, compliments of our benevolent host.

The next day we were homeward bound with no little regret, after a week of skiing in brilliant sunshine and surrounded by views ranging from spectacular to breathtaking. Aches and pains were forgotten in the afterglow and plans already afoot for a repetition of this experience next year.

The RCDC News

Fifth Annual RCDC Bonspiel

The already high esprit de corps in the RCDC was bolstered on 17-18 Feb 67 when 128 curlers from all RCDC units in Canada gathered in CFB Borden to participate in the Fifth Annual RCDC Bonspiel. Competition was keen for the three trophies offered.

A presentation dinner was held at the RCAC Sergeants' Mess after the bonspiel. 170 members of the RCDC enjoyed an excellent meal and later witnessed the presentation of trophies and prizes.

The success of an event such as this is dependent on the planning and organization that goes into it. Credit and congratulations are due this year to Lt Col Paul Sills and his committee comprised of Capt Dave Cartwright, Capt Ray Peebles, WO2 Earle Mazerall, Sgt Don Gardner and Sgt Dick Walker.

"A Event"

WO2 Jack Fraser's rink from CFB Petawawa was undefeated in the spiel and were winners of the Wansbrough Trophy.

Brig EM Wansbrough (Ret'd) presents the trophy to WO2 Fraser JA and the members of his rink (l to r) Ssgt Goodwin RJ, Cpl Whynott PD, and Capt JPA Legendre



Lt Col PS Sills, RCDC School presents prize to the rink from CFB Cornwallis skipped by Sgt Clarke - runners-up in "A Event". From l to r Sgt Clarke JE, Sgt Hill DF, WO1 Shiner JE and Sgt MacDonald JG.



"B Event"

Lt Col 'Baq' Protheroe's rink from the RCDC School successfully defended the RCDC(R) Officers' Trophy against a strong rink from CFB Petawawa skipped by Ssgt Red' Palmer.

Brig Kearney, DGDS, presents the trophy to the members (l to r) Maj JM Donely, Lt Col DH Protheroe (skip), Col GR Covey and Capt DD Robertson.



"C Event"

The rink from CFB Downsview skippered by Maj IA MacDonald were the winners of "C Event" for the WOs and Sr NCOs Trophy. WO1 Batten TL (l) makes the presentation to the members (l to r) Maj IA MacDonald, Capt VO Bergland, 2 Lt HJ Percival and Maj SW Muller.



Division News

Inspections and Visits

During the period 18-22 Mar 67 Brig Kearney and Lt Col Brusso visited the RCDC detachments at CCUNCYP Cyprus and CBU(UNMF) Egypt. RCDC personnel were interviewed and dental facilities inspected during this visit.

Brig Kearney and Lt Col Thompson attended the Chicago Dental Society meeting 6-8 Feb 67.

Clinic Accommodation

A new dental clinic was opened in March 1967 in No 8 Temporary Building adjacent to the Dental Division. It will be staffed by Division officers and will be designated as No 6 Clinic within No 1 Dent Det. This new facility will help to relieve the work load at No 1 Clinic, provide an excellent opportunity for dental officers of the Division to practise their profession at least on a limited basis, and a chance to test some of the new dental supplies and equipment first hand.

Temporary Duty

Sgt Vandervaat B had the good fortune to be selected as a member of the rotation staff and spent seven weeks on duty at Dusseldorf International Airport. He was joined by his wife for two week's annual leave in Holland.

11 Dent Coy

Retirements

Three Sr NCOs from No 11 Coy with long service in the Corps recently retired from the Forces.

Sgt MacDougall WD joined the Army in 1942 and has been with the Corps continuously since that time. Unfortunately, Bill has not enjoyed the best of health during recent years. It is understood that he will be retiring to the West Coast.

Sgt Gilbert WB joined the Armed Forces in 1940 and apart from two years of broken service following World War II has served with the Corps since that time. Since rejoining in 1948 he has served in Korea and with 35 PDU in France as well as in various postings across Canada. He will be living in Vancouver following his retirement from the Forces.

Sgt Dean MG, apart from a break in service for approximately two years following the War, has served in the Armed Forces since 1940. During the War he was in the RCASC and it wasn't until he rejoined that he "saw the light" and became a member of the Corps. Max has served in Korea and in the Middle East since the War and has concluded his service career on the West Coast where he will resume civilian life.

Best wishes from the Corps and in particular from members of No 11 Coy are passed on to these men in their civilian endeavours.

Sports

Personnel from No 3 and No 8 Clinics combined to form a rink that captured "B" Event in the Pacific Military Bonspiel held 8-10 Mar at Esquimalt. The rink consisted of Maj Pafard skip, Lt-Col Kettlys (third), Sgt Kerr (second) and Capt Berezon (lead).

Sgt Shand, Cpl Hardy, WO1 Daw and Pte Vasek formed the rink which captured "B" Event in the Cold Lake Base Curling Championship.

Capt WH Dunnigan and Sgt Marckwort H were entered in the Zone Two Ski Meet at Banff from 12-18 Feb 67 and later attended the Canadian Forces Ski Competition at Valcartier.

Capt Budzinski's aspirations for capturing a place on the Cold Lake team scheduled to compete in the Canadian Ski Championships were shattered when he broke his leg in the trial runs held in Jasper.

Capt Hif Amos was a member of the CFB Esquimalt Volleyball Team which represented BC Area in the Canadian Forces Play-offs held in Edmonton commencing 20 Mar 67.

Sgt Fox of No 4 Clinic was a member of the Calgary team competing in the Zone Bowling Championships rolled off in Edmonton from 21-25 Feb 67. Sgt Fox's season average is 237.

Major Quinn and Sgt Gilbert recently won the BC District Championship. - The name of the game - cribbage. In another sphere of effort, Sgt Bruce Gilbert entered the local "hall of fame" by scoring a hole-in-one on the 6th at University Golf Course in Vancouver.

Centennial Project

No 11 Coy's Centennial Project, "Getting the Commanding Officer on Just One Winning Rink" was finally realized when the HQ rink skipped by Sgt Ken Shergold won Third Event in the Recreational Curling League Bonspiel. Ken had the CO throwing third stones. It may be another hundred years before it happens again!"

12 Dent Coy

Laboratory Refresher Training

A refresher training program conducted by rotating laboratory personnel in the Halifax area through the central casting laboratory in Stadacona was started in Jan 1967.

Duty Trips

The supply ship HMCS Cape Scott sailed for Puerto Rico on 3 Jan 67 with Capt Ivor Hamilton and Cpl Butson as the dental detachment. While there, due to the heat and humidity, personnel worked half days only.

During the weekend 20-21 Jan, Capt Hamilton accompanied by LCDR Lynch of the USN DC attended the Puerto Rico Dental Association Convention.

Capt Hamilton also visited the Government Dental Office in Montserrat B.W.I. He had an opportunity to see a clinic in a remote area where until recently no dental treatment was available and many normally accepted facilities are non-existent.

Sports

Capt JR Robertson was a member of the PEI Ski Team representing the province at the Quebec Winter Games 11-18 Feb.

Social Events

On 16 Mar all 17 DOTP undergraduates from Dalhousie were hosted for a social evening by the RCDC officers in the Halifax area at RA Park Officers' Mess. Attendance was excellent and this was a successful gathering even though the worst snow storm of the season occurred that night. That is "esprit de corps"!

13 Dent Coy

Retirement

Maj Ed Small has retired from the RCDC. After joining the Services in 1939 he transferred to the Dental Corps in 1940 and served as a dental assistant and laboratory technician until taking his release in 1945. Ed completed his education and graduated in dentistry from McGill University in 1951, re-enrolling in the RCDC at that time. Since then, besides various postings in Canada, he has served in Europe and the Middle East. During the past year Ed has spent considerable time in hospital and it is understood he is again recuperating on sick leave. He is wished a fast and complete recovery.

Col RHG Cunningham, on behalf of the personnel of No 13 Dent Coy, presents Maj Small with an engraved silver tray and extends best wishes for a happy and successful future.



14 Dent Coy

Meetings and Conferences

Lt Col Anglin, Capt Cowan and Capt Steadman attended the annual two-day meeting of the Manitoba Dental Association 20-21 Jan 67. An excellent presentation on Crown and Bridge was given by Dr Henry M Tanner of Los Angeles, California. Special speakers included Mr Paul Cherniak who spoke on dental affairs as viewed by the provincial legislature; and Dr JP Coupland, President of the Canadian Dental Association, who discussed current issues of concern to the National Organization.

Special Events

Officers and Senior NCOs alike of Fort Osborne Barracks CFB Winnipeg could not but feel somewhat nostalgic with the cessation of mess activities on 31 Mar 67, the close-out date for all units in La Verendrye Lines except medical and dental facilities.

15 Dent Coy

Dental Health Week - CFB St Hubert

A stimulating Dental Public Health Program was conducted at CFB St Hubert during January 1967.

The main aims of the program were to inform the Service population of the availability of dental services and to impress upon them the advantages of positive dental health.

During the week an "Open House" was held in the clinic. This did not merely consist of turning the clinic into a "show place", but actively involved a large portion of those who attended. 860 servicemen were given dental examinations. After being shown a film on dental health they were directed to a well-planned exhibit which contained pictures, models, table clinics on laboratory procedures, and training aids depicting the services performed by the dental team. A self-serve slide projector was used and the new Encore field operating unit was on display. The exhibit is portable and it will be used on other bases.



Maj JC Roy (left) and WO2 Franzgrote HEG (dental therapist) discuss the exhibit with interested bystanders.



WO2 Fortin RG (clinical technician) awaits his turn to impress his audience with the importance of good oral hygiene.

In the DND Schools, lectures, films and home-care demonstrations as well as dental examinations for 401 children were carried out. Pamphlets and dental home-care kits were provided to Grade III classes.

Lectures were given to other groups such as air cadets and nursing sisters.

* Editor's note - Evaluation of a Dental Public Health Program is difficult. How-

ever, considering that 60% of the base personnel were examined and given oral hygiene instruction and many others favourably influenced, this program must be considered highly successful. Success is seldom achieved without effort. Every member of the clinic staff entered whole-heartedly into the program and spent many over-time hours in planning, preparing displays and generating interest by their enthusiasm. They are to be commended and it is hoped that others will follow their example.

Retirement

WO2 Cross AG is retiring from the Corps after almost 28 years of continuous service. Art was in the militia (artillery) prior to World War II and went active in 1939. While serving in Italy during the war, even though in the Dental Corps, on more than one occasion he made use of his militia training and took his turn on a gun crew ("filling the breach", one might say). Since the war, besides many postings in Canada, he has served with 35 FDU in France and aboard ship with the RCN. Recently, a retirement party was held in his honour at the CPOs' Mess, HMCS Hochelaga and the best wishes of the Corps were suitably expressed on that occasion.

Presentation

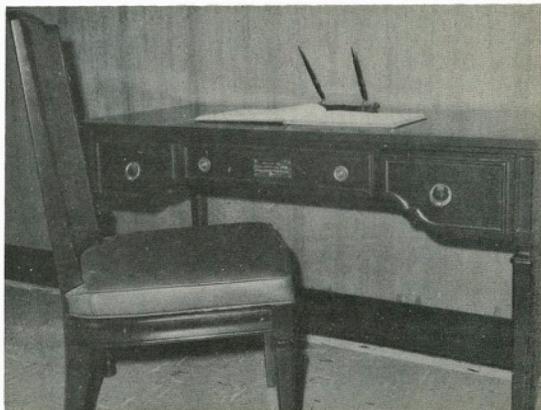
In appreciation for dental treatment received in 15 Dent Coy, Capt NE Demitre kindly donated \$250.00 for the purchase of this handsome desk and chair which is now used in the library of the RCDC School. The inscription on the plaque reads as follows:

Presented by

Capt NE Demitre, CWAC

In appreciation for Dental Services

- 1967 -



RCDC School

Training

Casualty Care and Clinical Course

Six senior officers attended the Officers' Casualty Care and Clinical Course commencing 13 Feb 67.



Left to right:
Maj DH Skinner, Maj WR
Collier, Maj TD Cobb, Maj
DJ Carmichael, Lt Col DH
Hillier, Lt Col GE Windsor
Demonstrator: Maj WH Murray

Dental Clinical Technician Course

Five Sr NCOs are attending this course. It was started on 9 Jan and will be completed on 30 Jun 67.



Front row L to R - Maj JN Wright, Lt Col DH Protheroe, Col GR Covey, Ssgt HD Wagstaff
Back row L to R - Sgt RK Jones, Sgt RJ Rutledge, Sgt DE Fraser, Sgt NJ Cable, Sgt LG
Peverill

Cpl LR Hatcher completed the First Aid Instructors Course at CFMTC on 17 Feb. He stood first in a class of 21 and was granted a Distinguished Pass. He is now qualified as a St John Ambulance Instructor as well as a First Aid Service Instructor.

Guest Lecturer

Both staff and candidates appreciated the opportunity to hear Dean JW Neilson lecture on Periodontal Diagnosis and Prognosis on 16 Feb.

Visits

On 31 Mar 67 Maj SW Muller and his confreres on the 1966-67 Dental Public Health Course accompanied by their instructors Dr Murray Hunt and Dr D Lewis visited the ECDC School.

Sports

The ECDC School Challenge Trophy for curling competition between the ECDC School staff and candidates on the Officers Clinical Course was won again this year by the course officers.

This trophy was donated in 1960 by the members of the Senior Officers Clinical Course: Maj TD Cobb, Maj WK Dickie, Maj RA Fell, Maj JCE MacDonald and Maj MP Quinn.

On the plus side, however, the Garth C Evans Trophy for competition between Medical and Dental Officers in Base Borden was retained by the RCDC School on 22 Mar 67.

Retirement

Ssgt VH "Bingo" Shaw is retiring from the Forces after 25 years of service. He is a well known member of the Corps and his wide range of postings since World War II has included: the North West Highway System, Korea, 35 FDU France (two tours), 4 Fd Dent Coy Germany, and CBUME Egypt. Best wishes are extended from members of the Corps on his retirement.

Commissioned from the Ranks

Lt JP Carrier is congratulated on his recent promotion from Ssgt. He joined the CA(R) in 1949 and served with the RCASC until 1952 when he transferred to the RCDC. With training in the clerk and storeman fields he has had service in 25 CFDU, 13 and 15 Dental Coys and 1 DED, as well as the Directorate. He is presently employed at the RCDC(S).

1 Dent Det

Meetings and Conferences

On 23 Jan 67 Ottawa area dental officers attended a most worthwhile and interesting series of lectures at NDMC presented by Col SN Bhaskar DDS MS PhD, Chief of Department of Dental and Oral Pathology, US Army Institute of Dental Research, Walter Reed Army Medical Centre, Washington, DC.

Retirement

Major JL Craig has retired from the RCDC but will continue his association with the Corps as a Part V Civilian operator in Ottawa. He has served in many parts of Canada since World War II and had a tour of duty with 35 Field Dental Unit in Germany. Major Craig was well known as a member of the teaching staff at the RCDC School where he served for several years as an instructor in Periodontics and also as one of the pioneer instructors for Dental Clinical Technicians.

Maj Craig (1) is shown receiving the RCDC Crest (framed) presented by Brig Kearney on behalf of all officers of the Corps at a retirement party held at the Headquarters Officers' Mess, Ottawa, 13 Apr 67.



Maj Craig was also honoured on his retirement by the ORs at a gathering held at CFB Rockcliffe on 20 Mar 67. WO2 Fediuk presented him with a pen on behalf of the NCOs of No 1 Dent Det.

1 Dent Eqpt Dep

Training

A Special Conversion Course was held from 9 Jan - 31 Mar for training in the

equipment repair functions of the Dental Equipment Maintenance Trade.



Special
Conversion
Course

(1 to r)

Ssgt Sullivan TW

Sgt Parker WJ

WO1 EC Carpenter

Ssgt McDonald RW

Sgt Kennedy JF

Sports

No 1 Dent Eqpt Dep emerged victorious in the annual curling challenge match for the 1 CMED - 1 DED Trophy. This match creates a great deal of interest between the two units.

A rink composed of Ssgt Palmer, Cpl McKinnon, Lt Lobb and Sgt Strub won the HQ and Services Recreational Curling League Trophy. This is the third straight year a dental rink has won this trophy.

4 Fd Dent Coy

Conferences and Meetings

Dental professional meetings were held on 25 Jan 67 and 8 Mar 67 with lectures given by Capt Hill on "Oral Biopsy - An Important Aid to Early Diagnosis", Maj WK Lervy RADC on "The Effect of Soft Tissues on the Dental Arches", and Capt V Rausch on "Hypnosis in Dentistry".

On the same dates the NCO Study Group met and heard addresses by Cpl Audet on "Maintenance Phase I", Ssgt Tait on "Maintenance Phase II", Cpl Tweed on "Dental Documentation" and Sgt Christiansen on "Know Your Benefits".

Special Events

The CBC Centennial Concert Tour "Canada Entertains" visited 4 CIBG 18-22 Mar and entertained servicemen, their dependents and selected guests. All performances were well attended and the consensus was that the show was excellent.

35 Fd Dent Unit

Headquarters Re-located

Headquarters 35 Field Dental Unit moved to its new location in Menard Kaserne, Lahr, Germany on 28 Mar 67.

A flag-lowering ceremony was held at Metz on 31 Mar 67. The base was formally handed back to the military governor of Metz. The Canadian Flag was removed from

the staff as a squadron of CF 104s flew over in a final salute and a bronze plaque was unveiled to the effect that - "the RCAF was here".

Sports

The Zweibrucken clinic curling team comprised of Maj Dickie, Cpl McMillan, Cpl Pringle and skipped by Capt Weeks won the Air Division Medical Bonspiel in Feb. The Air Div Trophy will be prominently displayed in the clinic for the next year.

Maj Kamachi and Cpl Wesley were members of the winning team in the No 1 Wing volleyball league.

FS Torrens and Cpl Schmaltz while on leave at a ski resort in Austria were isolated at the resort for three days due to an avalanche.

CBU (UNEF)

Visits

Brig Kearney and Lt Col Brusso visited the Detachment on 22 Mar after having to wait out a sandstorm before flying from Beirut to El Arish. On that account their visit was cut short, much to the disappointment of all concerned.

The Canadian Ambassador to the UAR, His Excellency Mr. JK Starnes and Mrs. Starnes visited the Gaza Strip for a three-day period during March.

Special Events

On 8 Mar 67 a special church service was held to honour the late Governor General Georges Vanier and also RC service personnel deceased while in the Middle East. Maj Bisailon presented a commemorative plaque at this service.

CCUNCYP

Accommodation

During Mar 67 the Canadian Contingent Administrative Support Group moved from the battered and rusted tin huts of Troodos Camp to new quarters in the former RAF Station Nicosia. The Dent Det received the best building in camp for the new clinic. The quarters are spacious, well lighted, cool, and altogether a welcome change from those occupied previously.

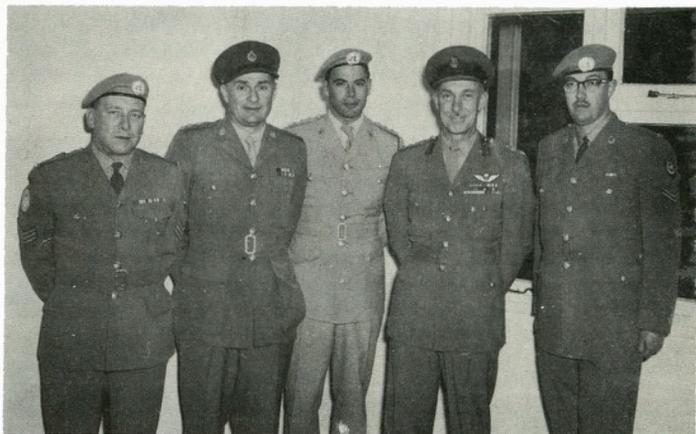
Visit

Brig Kearney and Lt Col Brusso visited the Detachment during the period 18-19 Mar.

Photo taken in new clinic

Left to Right

Sgt Wilkinson
Lt Col Brusso
Capt Strom
Brig Kearney
Cpl Timmers



Professional Training

US Naval Dental School - Bethesda, Maryland, USA

Major HK Meisner - Complete Dentures - 6 -10 Feb 67

ENT Air Forces Base - Colorado Springs, Colorado, USA

Major L Dombowsky - Short Specialty Course in Dentistry - 3-14 Apr 67

University of Michigan - Ann Arbor, Michigan, USA

Major JCRR Roy - Periodontics - 27 Mar -7 Apr 67

Doctors Hospital - Toronto, Ontario

Major RJ Bryant - Oral Surgery - 6 Mar-28 Apr 67

Training

RCDC School - Canadian Forces Base Borden

Officers Casualty Care - 13-17 Feb 67

Officers Clinical - 20 Feb -17 Mar 67

Lt Cols DH Hillier, GE Windsor; Majors DH Carmichael, TD Cobb, WR Collier, DH Skinner

Dental Clinical Technician Course - 9 Jan-30 Jun 67

Sgts Cable NJ, Fraser DE, Jones RK, Peverill LG, Rutledge RJ

Dental Technician Laboratory Course - 16 Jan-10 Mar 67

Sgts Roberts HW, Roy JRR, Schuh A; Cpls Mandrusiak OW, O'Mara TR

Dental Assistant Course - 20 Mar-19 May 67

Ptes Chenail BJ, Coss PR, Desgroseilliers JRAR, Hurding WA, Jones NJ, Kayne JE, Lambert LA, Michiels MJC, Williams MGE; Cpls Alkenbrack AM, Bowser GG, Haiplik FM, Heintz A, Hewitt DG, Hildebrandt GG, Hughes JG, Likins JA, Mackie BL, Mason DW, Proud IG, Riel JAG, Thomson JE, Timleck LJ, Wilson AM

RCAC School - Canadian Forces Base Borden - Jr NCO Course 11 Jan-28 Feb 67
Jr NCO Course 8 Mar-25 Apr 67

Cpl O'Dell RG; Ptes Arbour JMM, Bowman GW, Brophy GL, Burt GR, Gallagher GJ, Hurley AD, Lamontagne GRR, Morin EAJ, Vasek JJM

RCSME School - Canadian Forces Base Chilliwack - Sr NCO Course 3 Jan-17 Feb 67

Cpl MacLean LI

Training with Industry - Ritter Equipment Company, Rochester, NY 17-28 Apr 67

WO 2 Morris WD

Welcome to the Corps

A cordial welcome is extended to the following personnel who have recently joined the Corps:

Ptes - Calnen RD, Cooper TJM, Dale JE, Eden DM, Morphett DJ, Muir JA; Cpls Alkenbrack AM, Armstrong PJ; Pt V Miss D Mooney, Mrs I Pollock

Promotions

To Major - NH Andrews, CL Gullekson
To Capt - VO Bergland, RG Peebles
To Lt - JP Carrier
To WO 1 - EB Morse
To WO 2 - Hopkins RG, Matheson RF
To Ssgt - McDonald MO, Shields JAR, Strub AL
To Sgt - Dumas PJ, Shore JW, Wadden GM

Retirements and Releases

Majors JL Craig, EJC Small
Capts LTFB Archambault, RH Crowson, N Goldberg, JA Nattress, TC Tervit
WO 2 Cross AG
Ssgts MacDougall WD, Shaw VH
Sgts Dean MG, Gilbert WB, Playford DB
Cpls Girouard A, McEwen JB

Vital Statistics

Marriages

Cpl Tweed WE to Miss Virginia Christine Gonyea; Pte Evans RV to Miss Susan Ruth Nason.

Birth

Son Major & Mrs JFA Marcil, Capt & Mrs JR Cowan, Sgt & Mrs DT Murley, Cpl & Mrs A Jack, Cpl & Mrs LI MacLean, Cpl & Mrs EJ Schultz, Cpl & Mrs JE Thomson.

Daughter Capt & Mrs JD McCallum, Ssgt & Mrs JAR Shields, Sgt & Mrs DC Hughes, Cpl & Mrs JRY Gratton, Cpl & Mrs DH Hardy, Cpl & Mrs WH Renwick, Pte & Mrs MJC Michiels.

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