

New AAP Classifications

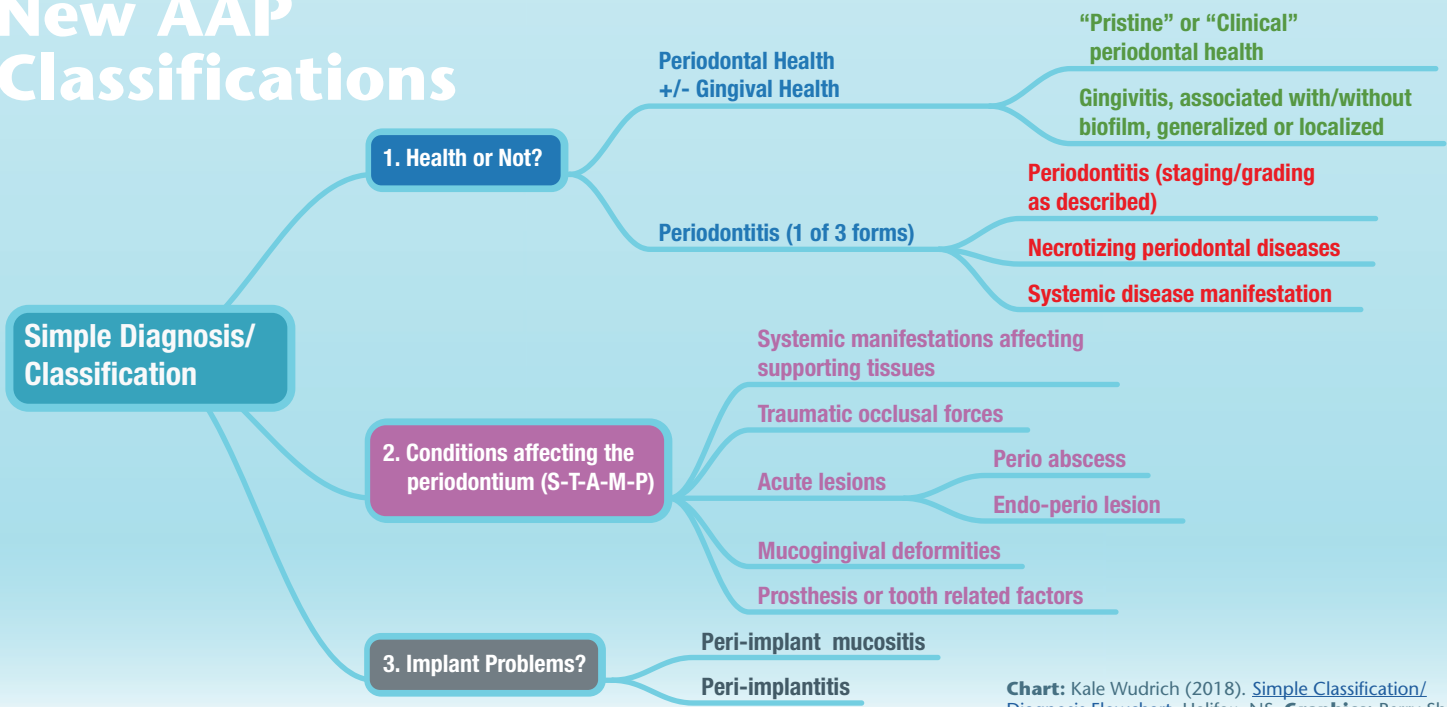


Chart: Kale Wudrich (2018). Simple Classification/ Diagnosis Flowchart. Halifax, NS Graphics: Perry Shulak

In 2017, a World Workshop on the Classification of Periodontal and Peri-Implant Diseases and Conditions was co-sponsored by the American Academy of Periodontology (AAP) and the European Federation of Periodontology. This workshop included expert participants from all over the world. The intent was to align and update the classifications to reflect the current understanding of these conditions. The “2017 [Workshop] proceedings include a recategorization of various forms of periodontitis, the development of a novel staging and grading system for periodontitis, and the inaugural classification for peri-implant diseases and conditions (American Academy of Periodontology, 2018).”

This new classification framework is noticeably different from the AAP classification system most dental hygienists have used since 1999. You are strongly encouraged to do a thorough review of

the new system, either on your own or with your dental hygiene colleagues. If you access the full AAP article online, you will have easy access to the full background information shared during the workshop and the consensus reports from each sub group. Go to <https://doi.org/10.1002/JPER.18-0157>

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the UNISON

is the official newsletter of the
College of Dental Hygienists of
Nova Scotia

Editor-In-Chief: **Kelly Hurlburt**
Contributing Editor: **Rosemary Bourque**

CDHNS Council

Jennifer Clark - Chair
Shannon ONeill - Vice Chair
Allison Craig - Exec. Member
Carrie Morrison - Exec. Member
Michele Brennan - Public Member
Greg Glynn - Public Member (awaiting
appointment by Government)
Mallory Brent
Teanne MacCallum
Lindsay Macdonald
Danielle Newell
Nicole Stevens

CDHA NS Director: **Wendy Stewart**
Registrar: **Stacy Bryan**

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We welcome your ideas, articles and
letters. Submit to the Editor at
members@cdhns.ca

CDHNS Council Chair's Message



Jennifer Clark *Council Chair*

It's my pleasure to serve as Chair of the Council again this year. I'm pleased to announce that the Council recently passed new bylaws. They are now posted on the [website](#). I encourage you to take the opportunity to review them.

In the summer of 2018, a request was submitted to CRA for a change to CDHNS's fiscal year end, for the purpose of aligning our fiscal year end with the CDHNS renewal year. In mid-September, we received notice that our request was approved effective October 31, 2018. In the spring of 2019, when you review our Annual Report for the past fiscal year, the activities being reported and the financial audit, will be based on the 9-month period of Feb 1, 2018 to October 31, 2018.

In October, along with the Registrar and Vice Chair, I attended the CDHA Leadership Summit with the theme being healthy and respectful workplace. I hope many of you took the opportunity recently to complete CDHA's survey on healthy and respectful workplaces. A disrespectful workplace can create an unsafe and unhealthy environment that puts people (employees and clients) at risk.

As 2018 draws to a close, it's important to take the time to express gratitude to all the people in our lives and to reflect on what we are truly thankful for. In that spirit, I want to thank Stacy, the staff, and Committee volunteers— for all your time, effort, and contributions to the College.

Every year at this time, I find myself reading back through the year's Unison, remembering and reflecting on how the year at the CDHNS went. The CDHNS is a truly blessed organization in so many ways. Right from its beginning, almost 10 years ago, straight through to the present day — blessed with people who had the passion to get it launched and those who have the creativity, patience, persuasion and perseverance needed to keep it thriving and growing.

*CDHNS's fiscal year end
has changed from Jan 31
to October 31, effective
October 31, 2018.*

This May we will be celebrating 10 years of self-regulation in conjunction with the AGM. In 10 years, we went from humble beginnings of an office space in Patricia Grant's home, to a redesigned leased space on Joseph Howe Dr, from 563 members to 750 members, from very small reserve fund to funds at an appropriate level for a governing body. These funds allow the CDHNS to keep up-to-date (e.g., computer and database systems) and to evolve and grow based on the legislated requirements, government mandates, changes in technology/innovation, the changes in our knowledge base regarding health and overall health, the education/scope of practice of dental hygiene, and the changing needs of Nova Scotians. There have been many contributions of the CDHNS during our first decade, including the White Paper on Prevent More Treat Less (2014) and the Next Steps Project (to June 2017). The CDHNS is busy planning a 10-year celebration for May 24th and I hope to see many of you attend.

From the desk of the Registrar



Stacy Bryan Registrar

During this year's renewal, we were fortunate to have two competent Administrative Assistants, assisting members through the process — Jennifer Dicks and Anna Gonsalves. During that time, they processed over 700 renewals, over 600 CPR uploads were reviewed, and 30 transfer requests from one class to another. Plus, they helped members navigate through the online renewal portal. We received some good feedback for potential ways to improve the online process for next year.

We were also joined by the newest member of our staff, Kelly Hurlburt. She joined CDHNS mid-September, in the role of part-time Member Services Coordinator. Jenn recently completed her term position, covering Anna's maternity leave. I thank Jenn for her dedication to the CDHNS. We wish her all the best in her new endeavours. Page 15 has further details on the incoming and outgoing staff members.

I'm excited to participate in celebrating 10 years of self-regulation for dental hygienists in Nova Scotia. As a dental hygienist for almost 30 years, I have had ample time to reflect on the profession and our impact on other professions and the communities we serve. I had the honour of attending Dalhousie's 'White Coat Ceremony' this fall, for the dental and dental hygiene students. It is clear that the culture of professional responsibility and a sense of service is being integrated at the beginning of their education. The code these students recite and sign, underscores the importance of our professional values.

Below is the information regarding this year's renewal:

CDHNS Members on November 1, 2018	
704	Practising Members
46	Non-Practising Members
750	Total Members

Notice of Removal from the CDHNS Register on Request (Individuals held a Practising Licence)

In accordance with the Dental Hygienists Act and Regulations, the following individuals have been approved by the Registrar to be removed from the CDHNS Register following their submitted request. These individuals held a practising licence with CDHNS until October 31, 2018. These individuals are no longer authorized to practice dental hygiene in the Province of Nova Scotia.

Mary Armstrong	Mary Hanchard	Katelyn Moore
Katelyn Cole	Morgan Hanrahan	Denise Tompkins
Emilie Devost	Julie Laroche	Tetyana Yakymchuk

Notice of Practising Licence Expiry, Member Submitted Intention to CDHNS

In accordance with the Dental Hygienists Act and Regulations, the following individuals have notified the CDHNS of their intention to remain on the CDHNS Register, but let their practising licence with CDHNS lapse as of November 1, 2018. These individuals held a practising licence with CDHNS until October 31, 2018. These individuals are no longer authorized to practice dental hygiene in the Province of Nova Scotia.

Roxanne Beland	Crystal Herbin	Denise Saulnier
Burglind Blei	Erin Hingley	Chelsie Skeete
Joanne Clovis	Deanna Martell	Shelby Spencer
McKayla Day	Nancy Neish	Lauren Steeves
Patricia Grant	Victoria Parsons	Sherry Watson
Lauren Green		

Did You Know? The flu season peaks mid-January. Protect yourselves, your clients, and your family and friends by getting the seasonal influenza vaccine. It is the most effective way of preventing the spread of influenza. [Know the difference between a cold and the flu and treat your symptoms appropriately.](#)

Notice of Practising Licence Expiry, Member Did Not Submit Intention to CDHNS

The following individuals did not notify the CDHNS of their intention to let their CDHNS practising licence lapse as of November 1, 2018. In accordance with the Section 23 (2) of the Regulations, these individuals and their last known employer were notified. These individuals remain on the CDHNS Register, but are no longer authorized to practice dental hygiene in the Province of Nova Scotia.

Beverly Dunlop	Erin McLeod
Gisele Edwards	Hugh (Brent) Murray

Notice of Removal from the CDHNS Register on Request (Individuals held Membership in the Non-Practising Class)

In accordance with the Dental Hygienists Act and Regulations, the following individuals have been approved by the Registrar to be removed from the CDHNS Register following their submitted request. Their names have been removed from the CDHNS Register and membership in the non-practising class expired on October 31, 2018. As a non-practising member, these individuals were not and are not authorized to practice dental hygiene in the Province of Nova Scotia.

Lina Burt	Allyson Moore
Vanessa Macleod	Darlene Paturel

Notice of Non-Practising Membership Expiry, Member Submitted Intention to CDHNS

The following individuals notified the CDHNS of their intention to let their CDHNS non-practising membership lapse as of November 1, 2018. These individuals remain on the CDHNS Register and are not authorized to practice dental hygiene in the Province of Nova Scotia. As a non-practising member, these individuals were not and are not authorized to practice dental hygiene in the Province of Nova Scotia.

Elaine Giffen	Kimberley Leslie	Michelle Moore
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Notice of Non-Practising Membership Expiry, Member Did Not Submit Intention to CDHNS

The following individuals did not notify the CDHNS of their intention to let their CDHNS non-practising membership lapse as of November 1, 2018. These individuals remain on the CDHNS Register and are not authorized to practice dental hygiene in the Province of Nova Scotia. As a non-practising member, these individuals were not and are not authorized to practice dental hygiene in the Province of Nova Scotia.

Fontana Cleveland	Laura Leger	Allison Roach (Trottier)
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What constitutes dental hygiene practice in Nova Scotia?

Section 22 of the Act provides details regarding dental hygiene scope of practice. In conjunction with the Regulations (including Sections 25 and 26: Scope of Practice), the practice of dental hygiene is defined. Only CDHNS members who hold a practising licence may engage in the practice of dental hygiene in Nova Scotia, whether as a volunteer or for remuneration. The practice of dental hygiene includes members who act as clinicians, educators, researchers, administrators, health promoters, and/or consultants. When asked to report your practice hours, do not just calculate the hours you spent providing clinical care, include hours where you provided dental hygiene care in any of the areas noted above — as an educator, researcher, administrator, health promoter, or consultant. This may include positions like dental supply company sales rep, infection prevention and control consultant, and hygiene department manager. **All positions count towards accumulation of practice hours and all positions require a CDHNS practising licence.**



For those members who listed “retirement” as the reason for their change in their registration or licensing status, the CDHNS would like to take this opportunity to thank you for your significant contribution to the oral health of Nova Scotians. Your service as health care providers and support for the dental hygiene profession has been appreciated. We wish you well in your retirement.

Dental Hygiene Student Professional Presentations for the Public

Event: Dalhousie University: Dental Hygiene Students' Presentation/ Table Clinic Evening — Second year dental hygiene students will be giving 15-20-minute presentations. The topics have been researched to focus on best practice standards for dental hygiene care.

Date: Friday January 25, 2019

Time: Registration: 4:45-6:00 pm
Presentations: 5:00-8:00 pm

Location: *Dalhousie University: Student Union Building
6136 University Avenue. Halifax, NS

*Please note new location this year

Credits: 2 hours, category 1 (To receive CE credits you must sign-in at the registration desk by 6pm)

Description: Second year dental hygiene students, in groups of 4 students, will be giving 15-20-minute presentations that have been researched to focus on best practice standards for dental hygiene care. Topics: Final titles will be determined at a later date. Look for your email in January from CDHNS.

Dalhousie's Faculty of Dentistry Continuing Professional Education

The following sessions may be particular interest to dental hygienists. Unless noted otherwise, all courses listed are held in Halifax. For a full listing of the courses offered, go to <https://www.dal.ca/faculty/dentistry/continuing-education.html>:

Sat March 23, 2019: **Photons to voxels - The new role of 3D imaging in dentistry** Presenter: Dr Bruno Azevedo

Sat April 6, 2019: **Staying ahead of the ultrasonic curve** (lecture and hands on) Presenter: Dani Botbyl Limited enrolment: 14 participants (hands-on)

Sat April 6, 2019: **Applying biological and mechanical fundamentals in mechanical instrumentation in clinical practice (lecture and hands-on)**

Presenters: Dr. Marcelo dos Santos, Dr Isabel Mello, Limited enrolment: 24 participants (hands-on)

Fri April 26, 2019: **Medical Emergencies for the dental office (lecture and hands-on):** Presenters: Dr. Laurel Murphy, Dr. Chris Lee, Darryl Chickness, Sue Murphy Limited Enrolment: 40 participants

May 24 & 25, 2019: **Update on advanced periodontal instrumentation (lecture and hands-on)** Presenter: Anna Pattison (Limited enrolment for hands-on – 50 participants) *Please note:* Next year's CDHNS AGM will be held on **Friday evening May 24, 2019** in conjunction with Dalhousie's CE event. The AGM is a separate event and requires registration directly through CDHNS. Registration for the AGM will open in **spring 2019** through CDHNS.

Request For Judges

Date: Friday January 25, 2019

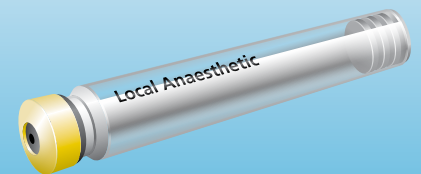
Time: 4:00-8:30 pm

Location: *Dalhousie University:
Student Union Building
6136 University
Avenue. Halifax, NS

*Please note new location this year

A brief overview of expectations will take place at 4:00 pm followed by refreshments. Judging will take place between 5:00 pm and 8:00 pm. The students will be presenting in 2 rooms. Two-three judges are needed for each room and will be expected to stay in the assigned room during the 7 presentations. After the final presentation, each group of judges will decide on the first, second and third place presentations. Then, upon calibration between both teams, the final placements will be decided.

Please contact Kim Haslam, khaslam@dal.ca, for further information.



Interested in taking the local anaesthetic course for Dental Hygienists through Dalhousie's Continuing Dental Education?

If there is enough interest, a course may be offered this Spring 2019. Contact CDE at cde.dentistry@dal.ca to have your name entered on the list of interested individuals.

Celebrations

Congratulations to Outstanding Dalhousie Alumni and Staff Award Winners

Joyce MacDonald, Administrative Assistant, for the School of Dental Hygiene, received the 2018 Gladys Littler Award for outstanding service to the Faculty of Dentistry. Congratulations to Joyce on receiving this award, in recognition of her dedicated years of service to faculty members, staff and students. For full information go to https://www.dal.ca/faculty/dentistry/news-events/news/2018/07/12/joyce_macdonald_2018_gladys_littler_award_winner.html

Susan Keating-Bekkers, Volunteer instructor and outreach supporter, received one of four 2018 Outstanding Alumni Awards for having made “special or distinctive contributions to their community, profession, society at large, or the Faculty”.

For full information on all of this year’s outstanding alumni recipients, please go to: https://www.dal.ca/faculty/dentistry/news-events/news/2018/11/14/celebrating_our_outstanding_alumni.html

Would you like to recognize a colleague for their achievements? Dalhousie University’s Faculty of Dentistry is requesting nominations for its Outstanding Alumni Award. This prestigious distinction is bestowed upon a biannual basis to Dalhousie dentistry and dental hygiene graduates deserving of special recognition for their distinctive contributions to their community, profession, society at large, and/or to the Faculty of Dentistry/School of Dental Hygiene. Who will be next? Nominations can come from any source, and individuals/groups are requested to submit completed nominations in advance of the April 1, 2019 deadline. The criteria, nomination process and nomination forms are available at www.dal.ca/faculty/dentistry/alumni-friends/alumni-committee/awards.html or by contacting alumni.dentistry@dal.ca



Help Us Celebrate 10 years of Self-Regulation

We, at the CDHNS, look forward to celebrating the upcoming ten-year anniversary, along with all of our fellow dental hygienists and other colleagues. There will be a reception to commemorate this milestone following the CDHNS AGM on Friday evening (May 24th). More details will be provided as we get closer to the date. We encourage anyone with any stories or pictures that they may have, to submit them to us at members@cdhns.ca so that we can share them with our fellow colleagues!

Assigning Credit Hours for Online Courses

Completing online professional education is a convenient way for CDHNS members to identify their learning needs and seek out appropriate courses that meet those needs. You can learn at your own pace, anywhere.

To support CDHNS members, at their November 2018 meeting, the CDHNS Quality Assurance (QA) Committee evaluated a number of courses offered by online continuing oral health education providers to determine if the courses met the CCP Requirements and if the hours stated by the providers were appropriate. Following their review, the QA Committee determined that the number of credit hours allocated by some course providers is not always consistent with the content of the courses. The Committee has reviewed the course providers identified in the table and determined the following.

Please note: CDHA Online Course allocations are reviewed consistently. Go to the [CDHNS website](#) for the most recent information.

Courses from the providers below are eligible for 50% of the credit hours indicated by the provider

Crest and Oral B (Proctor and Gamble)	www.dentalcare.com www.dentalcare.ca
RDHU: Does not meet CDHNS criteria unless it is one that includes a post-test.	If a post test is included, these courses will be eligible for 50% of the credit hours.

Courses from the providers below are eligible for the credit hours indicated by the provider

Colgate Oral Health Network	https://www.colgateoralhealthnetwork.com/
Hygienetown	https://www.hygienetown.com/onlinece
Waterpik Oral Health for Professionals	https://www.waterpik.com/oral-health/pro/education/

Member Services Committee — Meet Your Colleague...revised!

It seems we are a shy bunch and as such we have revised the Meet Your Colleague initiative, ever so slightly. In an attempt to increase participation, we are asking that you nominate a colleague to be featured in the Unison. Members can still submit their own name, if interested.

In the event that we do not receive any nominations, we will randomly select a member to feature. If that member agrees to participate, we will proceed, as before. Each edition of Unison will feature a colleague from a different region of the province. Also, as an added incentive we are offering a small gift, as a token of appreciation, to the featured member.

- 1) To nominate a colleague, or volunteer yourself to be featured, email members@cdhns.ca
 - a) Put Meet your Colleague in the subject line.
 - b) Give us the name and contact info of the potential featured colleague or yourself.

- 2) You/they will be provided with a list of 40 questions.
 - a) Choose 10 questions from the 40 provided. In your response, include the question as well as the answer.
 - i) Just a sentence or two will do, and remember, this is meant to be FUN!!
 - b) Include a clear headshot of yourself, preferably against a white background, if possible.
 - c) Provide the following information: Where you are currently working and how long you have been practicing dental hygiene.

This newsletter, we are pleased to introduce you to Denise Babin, one of your colleagues from the South Shore.

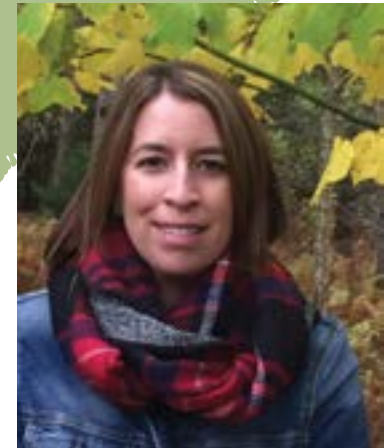
It will be fun. C'mon, get to know your colleagues!

Sincerely,
Angie Nowe, Chair, Member Services Committee

Meet your Colleague - Denise Babin

Denise graduated in 1999 and currently works in Public Health, in Yarmouth

1. **At which store would you like to max-out your credit card?** Frenchies, my favorite place to shop!
2. **What was your favorite toy as a kid?** A Cabbage Patch doll. I used to pretend I was a Dental Hygienist, cleaning her imaginary teeth.
3. **What is the strangest talent you have?** I can count to 10 in Flemish. My grandmother was Belgian and I'm proud of that talent, but I need to work on learning more words!
4. **If you could have any one superpower, which would you choose and why?** Printing and organizing all my pictures from all the different sources they are on because the task is overwhelming to even think about!
5. **Who is your hero and why?** Terry Fox or Gord Downie. Their legacy will live on for many years to come; both heroes in my eyes.
6. **What is the best perk that you have had at a job?** The dentist I worked for, for many years, let me cut back my hours, for a few years. I was always thankful for that extra time I was able to spend with my children.
7. **Share a personal fact no one would ever guess about you.** I've been a member of the Royal Canadian Legion for over 14 years. I enjoy the meetings and chatting with real life heroes-the veterans.
8. **Share a funny incident in your life.** I met two of my favorite Coronation Street actors in Halifax. I told one that I would tell my patients about meeting them, to which he replied, "I'll think of you when I floss". I still think of that when I see him on the show.
9. **What is one of the things on your bucket list?** A combined bus tour with stops to Belgium and Holland, during tulip season, and to the sets of Downton Abbey and Corrie in England.
10. **What is your favorite outdoor activity?** Summer- collecting beach glass and camping trips with family to Keji/ Winter months- snowshoeing!



Continuing Competency Program (CCP) Review

Thank you to all CDHNS practising and non-practising members who took the time to complete the Continuing Competency Program (CCP) Requirements survey that was circulated to all CDHNS members in Oct 2018. A total of 183 members completed the survey (**24.4%**).

Approximately **28.5%** of respondents practiced in rural Nova Scotia, **~64%** practiced in urban centers, **6%** practiced in both, and **~1.5%** were not currently practising dental hygiene.

Respondents also had a variety of years of experience and types of practice settings. The tables below provide a snapshot.

Years of Experience

Answer Choices	Responses
0 – 5 years	14.75%
6 – 10 years	17.49%
11 – 15 years	16.39%
16 – 20 years	12.57%
21 – 25 years	10.93%
more than 25 years	27.87%

Types of Practice Settings (selected all that apply to current practice, if practising)

Answer Choices	Responses
Administration	3.28%
Community and/or Public Health	7.10%
Consulting	2.73%
DND	1.64%
Employment in private dental/ dental hygiene practice	86.34%
Hospital	0.00%
Independent DH Practice Owner	4.37%
Research	0.00%
Teaching	9.29%
Other (please specify)	6.01%

Here are a few other highlights:

“In general, the level of requirements outlined in the CCP Requirements document is appropriate to achieve the CDHNS’s responsibility to protect the public, by ensuring Nova Scotia dental hygienists provide safe and effective dental hygiene care.”	70.9%: agreed or strongly agreed with the statement 15.2% remaining neutral (neither agree nor disagree)
Category 2 should be deleted and the remaining sub-categories should be integrated into the current Categories 1 and 3.	Yes: 64.6% (Yes/No response only)
Requirement to submit a certificate of attendance to obtain full credits for CPR should be removed.	60.3% requirement should be removed 8.3% neutral (neither agree nor disagree)

The general statement rating responses and open-ended question responses, along with feedback obtained through other communications (study club meetings, AGM/CC Event survey, and the in-person feedback), were important factors that assisted the Committee in furthering our goals. As you may recall, the purpose of the review was to ensure compliance with legislation and to make the requirements more streamlined with a goal of improving clarity and making the CCP requirements easier to understand.

In addressing the CDHNS’s responsibility to protect the public, quality assurance is one element that CDHNS uses to meet this responsibility of ensuring dental hygienists provide safe and effective dental hygiene care.

The CCP revisions are being introduced in phases. The first phase of revisions will be in effect as of **January 1, 2019**. These changes are being integrated in this phase because they are required to ensure we are in line with legislation, or they are simple to institute and will positively affect you, the CDHNS member, immediately. Other changes are more complicated. They will require more reflection, potentially more consultation, education and/or advance notice before they will take effect. The tables, starting on page 13 have a summary of the changes in this phase and others that you can anticipate in the next phase(s).

Please take the time to review the revised CCP document and ensure that you are familiar with it. It will be posted for you on **January 1, 2019**.

You will also note that the Continuing Competency Committee has changed its name so that it more accurately reflects our purpose. We are now the **Quality Assurance (QA) Committee**.

Sincerely,
Sonya Bishop, Chair, Quality Assurance (QA) Committee

2018 CDHNS Council Call for Nominations

Notice: CDHNS Nominations and Election Information

Six positions on the CDHNS Council will become vacant in June 2019. This is a call for nominations to elect members to fill the vacant positions on the College Council.

General Information

The Council consists of 9 elected members of the CDHNS and 3 public representatives appointed by Governor in Council. The Council elects annually, from amongst its members, an Executive Committee. The Council meets a minimum of three weekends per year to conduct business and other conference calls and special meetings as needed. Council deliberations are guided by Vision and Mission statements. (Available on our website under *About*).

The College has adopted Policy Governance® as their governance model. Policy Governance is meant to enhance role clarity, operational transparency and guard the right of an organization to be faithfully served according to the organization's goals or end statements.

Orientation, ongoing education and reimbursement:

The CDHNS is committed to ongoing education of Council members and an orientation will be provided for all new members of Council. Council members are reimbursed their expenses for meetings and are provided honorariums according to the CDHNS expense policy. Creating a positive future for the profession is rewarding work. If you, or someone you know, would like to contribute through an elected position on the Council, please submit a nomination.

Under Policy Governance® the roles of Council include:

Specific job outputs of the Council are those that ensure appropriate organizational performance. Accordingly, the Council has direct responsibility to create and sustain:

1. The link between the ownership and the operational organization.
2. Written governing policies which address the broadest levels of all organizational decisions and situations.
 - A. Ends: Organizational products, impacts, benefits, outcomes, recipients, and their relative worth (what good for which recipients at what relative cost or relative worth).
 - B. Executive Limitations: Constraints on executive authority which establish the prudence and ethics boundaries within which all executive activity and decisions must take place.
 - C. Governance Process: Specification of how the Council conceives, carries out, and monitors its own task.
 - D. Council-Management Relationship: How power is delegated and its proper use monitored; the Registrar role, authority and accountability.
3. Assurance of successful organizational performance on Ends and Executive Limitations.
4. Scope of practice decisions and related policy position statements that are in the best interest of protecting the public.
5. Decisions that are in the best interest of protecting the public relative to eligibility of dental hygiene programs.
6. Appointment of Credentials Committee as required by the Act. The Council may specify its terms but this committee is not accountable to Council. Council may hear appeals by members on licensing issues as determined by the legislation.
7. Appointment of the Hearing and Investigation Committees as per the Act.
8. Appeals from persons denied by the Hearing Committee (as per Section #63 of the Act).
9. Other products required by the Act, Regulations, and Bylaws including:
 - a. Regular Bylaw review
 - b. Annual General Meeting

Nominations

Dear Colleagues –

Wishing you all a joyous and relaxing holiday season! With the advent of a new year, we are now accepting nomination submissions for CDHNS Council members.

As a College, our duty is to regulate members, promote excellence in care, and advance the profession, all in the best interest of the public. In addition to our overarching goal (“Mega-End”), the three goals (Ends) this Council has developed to achieve government’s mandate are (1) [Nova Scotia] dental hygienists will provide increasingly safe, competent, ethical and compassionate care, (2) the public will have improved oral health, and (3) a wide-range of the public recognizes dental hygienists as primary health care providers. As a member of Council, you will have the opportunity to lend your voice and have a direct impact on the important decisions that guide us in this responsibility, while being an active participant in your profession’s regulatory body.

We strongly encourage members from all areas of the province, to consider serving on Council, as diversity in experience and opinion can only strengthen our College’s commitment to its members and the public.

The CDHNS Council meets three times a year on Fridays and Saturdays and members are compensated for any expenses incurred for required travel/accommodation. Additionally, an honorarium is paid to each member and Category 3 points are earned for attending meetings.

Serving on Council is extremely rewarding and is a wonderful way to continue to expand your knowledge and understanding of your profession’s innermost workings and the larger roles we play.

As dental hygienists, we all have the same goal — to improve the oral health of Nova Scotians. As healthcare in our province becomes increasingly interprofessional and collaborative, it is more important than ever to consider a role on CDHNS Council in order to help shape the future of our profession.

Lindsay Macdonald

Nomination Committee Chair

Any member who is considering running for Council is invited to sit as an observer at the January 2019 Council Meeting. Please RSVP through the CDHNS at info@cdhns.ca

Members should consider candidates who have:

- ✓ An interest in serving the professional regulatory body
- ✓ Integrity and good personal judgment
- ✓ The ability to put the public interest first and only subject to that, the interest of the profession
- ✓ Effective interpersonal and communication skills
- ✓ A willingness to share opinions and ask questions
- ✓ The ability to listen to all perspectives without bias
- ✓ The willingness to commit time and energy

CDHNS Council Nomination Form

Part I

For Members of the College of Dental Hygienists of Nova Scotia

- While it is not mandated, in so far as possible, the slate should represent diversity with respect to geography, practice setting, and experience.
- All nominees must be registered and licensed members (practising and non-practising) of CDHNS in good standing.
- Nominations must be endorsed by two CDHNS members along with the consent of the nominee.
- Nominees must submit a biography form (included).
- Deadline for completed nominations to be received at the CDHNS office is midnight February 28, 2019. Nominations may remain open following this date if insufficient nominations are received to fill all vacant Council positions.

We, being members of CDHNS in good standing, nominate _____
(Print Name) (CDHNS Lic #)

For the position of:

CDHNS Councillor: Two Year Term (Starts July 2019 – Ends June 2021)

Nominated By _____ RDH Signature _____
(Please Print) (CDHNS Lic #)

Nominated By _____ RDH Signature _____
(Please Print) (CDHNS Lic #)

CONSENT:

I, _____ accept this nomination. _____
(Print Name) (Signature)

This form is available for reprint on the CDHNS website (www.cdhns.ca) under Members Tab. Nominations to be announced in the March/April issue of Unison and posted on our website.

Return this completed form to: CDHNS 11 – 2625 Joseph Howe Dr., Halifax NS B3L 4G4 , fax at (902) 444-7242, or email at info@cdhns.ca



Complete Part II on the next page

Biography of Nominee for CDHNS Council Positions

Part II

Name: _____ Address: _____

Telephone: Home _____ Work _____

Email: _____

Dental Hygiene Education Program/Institution: _____ Year of graduation: _____

Other Relevant Post-Secondary Education: _____

Dental Hygiene Professional Experience(s): *Please include practice settings and areas of responsibility.*

Volunteer and/or Professional Activities:

Please include past or present volunteer experiences on Board(s), Council(s), or Committee(s)

Statement of Intent: Please write a brief statement on why you are standing for election to the Council. Consider including why you are interested in serving and what you hope to accomplish.

Timing of Changes to CCP Requirements: What You Need to Know for 2019

In this section are two tables that summarize the major changes to the CCP Requirements Document. The first table includes **the revisions that are in effect January 1, 2019**. The second table provides information about revisions that are targeted for later phases. **Revisions**

that are targeted for later phases will not occur until further research/consultation and/or CDHNS Member education is provided, as appropriate. Timelines for implementation of revisions for later phases and further clarification will be provided prior to these changes coming into effect.

Table 1: Changes in effect for January 1, 2019

Section	Description of Major Change
General	<ul style="list-style-type: none"> • Renumbering of sections has occurred based on deletions of sections and additions of new ones.
Definitions	<ul style="list-style-type: none"> • Continuing Competency Committee changed to Quality Assurance Committee. • Replaced 'program credits' with 'hours of credit'. More in line with legislation terms. • Wording changes are made throughout document to reflect these changes.
Section 3: Continuing Competency Program Requirements	<ul style="list-style-type: none"> • 3.2.2: Wording changed for clarity • <i>New</i> 3.2.3: Clarifies credit hours that first time registrants can obtain for their first cycle. • <i>Old</i> 3.2.3 and 3.2.4: Deleted to ensure alignment with legislation. Individuals who wish to hold a practising licence must obtain 45 hours within the 3-year period. Non-practising members will no longer keep a CC cycle. (New 3.3 provides more details.) Registrar maintains the ability to consider individual cases. • 3.3: CC Requirements for Transfer – new section included to provide clarity for transfer.
Section 6.1: Category 1	<ul style="list-style-type: none"> • 6.1.2 a: Revised to reflect Council's May 5, 2018 decision on CPR that came into effect as of November 1, 2018. • 6.1.2 g: Deleted – there is no longer the requirement to submit a certificate of attendance to obtain full credit for CPR hours submitted. • The 9-hour maximum for CPR per three-year cycle remains in place. • 6.1.3: Mental health first aid is no longer limited to 5 credits. • <i>New</i> 6.1.3.1: The 2-day Mental Health First Aid course offered through the Mental Health Commission of Canada qualifies for 12 credits per cycle (5 credits for the first aid training and an additional 7 credits in category 1 for the mental health component.)
Section 6.2: Category 2	No changes for Phase 1 besides reference to QA Committee, rather than CC Committee.

Members whose reporting period ends on **December 31, 2018** must have completed a **minimum of 45 eligible credit hours** from **January 1 2016 to December 31, 2018**. Each year, ~20% of the members whose reporting period is ending is randomly selected by a third party for an audit to confirm they have met the requirements. ***The randomly selected members will be notified early January 2019 that they have been selected and will be provided with the audit requirements.*** Please ensure that your professional development is entered online.

Individuals whose cycle ends as of Dec 31, 2018, and are selected for audit, must ensure they comply with the requirements that were in place at that time. For example, CPR credit hour requests must include a certificate of attendance for full credits. CPR submissions with the permanent CPR card only will be eligible for 1 credit hour.

Timing of Changes to CCP Requirements *continued...*

Table 2: Changes to be implemented in later phases

Section	Description of Major Change
Definitions	<ul style="list-style-type: none"> Category definitions will be revisited with the potential merging of new categories. Category names may also change, to accurately reflect the new content and to minimize confusion between the previous categories.
Section 6.1: Category 1	<ul style="list-style-type: none"> 6.1.8: Fluoride Mouthrinse training participation – will be reconsidered. Merging of sections of Category 2 into this category will be considered.
Section 6.2: Category 2	<ul style="list-style-type: none"> Deletion of Category 2. Remaining sections of Category 2 will be merged into current existing Categories 1 and 3.
Section 6.3: Category 3	<ul style="list-style-type: none"> Merging of sections of current Category 2 into this category will be considered.
Section 7.1: Full-time Study	Further review of this section and 3.1.5 will be completed.
Section 7.2: Study Club	Potential revisions to this section may occur to provide clarity and align with the principles of “right touch regulation”.

New AAP Classifications *continued from cover page...*

A summary of some of the more notable changes and consensus agreements from the Workshop are included here. All changes and consensus agreements were based on the current understanding of the pathophysiology and primary etiology of the diseases and conditions. *We are only able to provide a few of the changes here. Ensure you go to the AAP articles for comprehensive information.*

- Bleeding on probing is the primary parameter to set thresholds for gingivitis.
- There is no longer a distinction between chronic and aggressive periodontitis.
- There was a reorganization of the broad spectrum of non-plaque induced gingival diseases and conditions.
- Three forms of periodontitis were identified — periodontitis (formerly aggressive and chronic) necrotizing periodontitis, and periodontitis as a manifestation of systemic diseases.
- New classifications have been developed for peri-implant conditions and diseases.
- Overall, the new classification is based on the oncology system of ‘staging’ and ‘grading’ of disease; ‘extent and distribution’ are also integrated into the ‘staging’ system as descriptors.
 - Staging** classifies the disease severity¹ (including tooth loss due to periodontitis) and complexity of management² (function and esthetics). There are four stages:

Stage 1:	Initial Periodontitis
Stage 2:	Moderate Periodontitis
Stage 3:	Severe Periodontitis with potential for additional tooth loss
Stage 4:	Severe Periodontitis with potential for loss of dentition

¹Severity: Interdental clinical attachment level (CAL) at site with greatest loss; radiographic bone loss and tooth loss

²Complexity of management: Probing depths, pattern of bone loss, furcation lesions, number of remaining teeth, tooth mobility, ridge defects, masticatory dysfunction

- Extent and Distribution:** Localized (less than 30% of teeth), generalized (greater than 30%), molar-incisor distribution. Add these descriptors to the Stage selected.
- Grading:** consider a client’s overall health status and risk factors such as smoking and metabolic control of diabetes and incorporates the following four biological dimensions: (a) history-based periodontitis progression, (b) risk for further periodontitis progression, (c) anticipated inferior treatment outcomes; and (d) risk that the disease or its treatment may negatively impact the client’s general health.

Grade A	Slow rate of progression
Grade B	Moderate rate of progression
Grade C	Rapid rate of progression

New AAP Classifications *continued...*

This new classification system more closely aligns itself with the principles of individualized client care – focusing on multifactorial etiology. This revised system assists RDHs in more effectively categorizing their clients into the appropriate classifications which may enhance provision of optimal care and improve our prognosis of periodontal conditions for clients. The new approach also identified the risk of potential for overtreatment, therefore, the workshop participants created case definitions for each of the new periodontal and peri-implant diseases and conditions.

They recommend a 4-step approach to implementing the new periodontal classification system:

Step 1: Prepare an initial overview of the case – based on radiographs, full mouth probing depths, and missing teeth, to determine the severity of the condition, as defined in the Stages.

Step 2: Determine case complexity component of the Stages – based on consideration of maximum clinical attachment loss (CAL) or bone loss; confirmation of bone loss patterns (horizontal or vertical) and tooth loss due to periodontitis.

Step 3: Determine and refine the Grade (A, B, or C) – based on history/risk of progression/age; risk factors, medical status and systemic inflammatory considerations; response to scaling and root planing and plaque control;

and detailed assessments. *Confirm your stage and grade classification. Refer to the case definitions for each of the periodontal and peri-implant diseases and conditions.*

Step 4: Establish the treatment plan – based on stage and grade.

References

1. American Academy of Periodontology. (2018, June 21). *American Academy of Periodontology Releases Proceedings from the 2017 World Workshop on the Classification of Periodontal and Peri-Implant Diseases and Conditions*. Retrieved from Perio.org: <https://perio.org/consumer-2017-world-workshop-proceedings>
2. Caton, J. E., Armitage, G., Berglundh, T., Chapple, I. L., Jepsen, S., Kornman, K. S., . . . Tonetti, M. S. (2018, June 21). A new classification scheme for periodontal and peri-implant diseases and conditions – Introduction and key changes from the 1999 classification. *Journal of Periodontology*, 89(51), S1-S8. doi: <https://doi.org/10.1002/JPER.18-0157>
3. Wudrich, K. (2018). Simple Classification/Diagnosis Flowchart. Halifax, NS.

We are fortunate in Nova Scotia to have an additional tool to assist us with decision-making using this new system. The flowchart on the cover page has been designed by Kale Wudrich, DMD, Grad Perio Resident, Dalhousie University, to assist oral health professionals in determining the perio classification/diagnosis. The CDHNS wishes to thank Kale Wudrich for sharing this excellent resource.

Staffing Updates



Kelly Hurlburt

Kelly graduated with a Diploma in Dental Hygiene from Dalhousie University in 1992. She has been working in her hometown of Yarmouth, clinically, in private practice for over 25 years. She also holds a Bachelor of Arts degree in English.

To assist her in her role as Member Services Coordinator, Kelly brings with her a variety of volunteer experiences. This includes acting as manager of several sports teams over the years, organizing some major events such as provincial minor hockey tournaments and working on different fundraising events. She is very active in her local dental hygiene study club and welcomes any opportunity to reach out professionally within her community. She is excited to take on this new position and all the new challenges it brings with it. She also looks forward to personally meeting as many of her dental hygiene colleagues as she can!

We are pleased to welcome Anna Gonsalves, Administrative Assistant, back from her maternity leave as of September 2018. Anna and Jordan's son, Xavier Grayson was born on January 31, 2018. Anna initially started with the CDHNS in August 2017 and remained until she left on her maternity leave in mid-January, 2018.



Anna Gonsalves and family

Farewell and Best Wishes to Jennifer Dicks

It is with both sadness and best wishes that we announce the completion of Jennifer Dicks' term position. Jennifer served in the role of Administrative Assistant during Anna Gonsalves' maternity leave. Both Anna and Jennifer served CDHNS members this fall during the renewal period. The CDHNS Council and staff wishes Jennifer all the best in her new opportunities.



THE CANADIAN DENTAL
HYGIENISTS ASSOCIATION
L'ASSOCIATION CANADIENNE
DES HYGIÉNISTES DENTAIRE

CDHA CORNER

Dear friends and colleagues,

In October, I attended CDHA's Leadership Summit and annual general meeting in Charlottetown, PEI. The theme for this year's summit was "healthy and respectful workplace." I enjoyed connecting with several CDHNS members while there.



One topic that I found especially interesting was bullying. Did you know that as many as 75% of employees report being affected by bullying, and that 65% of targets are women bullied by other women? Given these high numbers, there is a great likelihood that we have either experienced bullying, or witnessed bullying, in our own workplaces.

A bully is a person whose deliberate behaviour is persistent, offensive, abusive, intimidating, degrading or insulting. Bullying can be subtle; it is not always verbal or aggressive. It can include spreading malicious rumours, gossip or innuendo; excluding or isolating someone socially; undermining or impeding a person's work; removing areas of responsibilities without cause; and assigning unreasonable duties to one person.

The result can be lower levels of job satisfaction, physical illness (including stress, fatigue, frequent colds, coughs, and headaches) and, in extreme situations, post-traumatic stress, depression, and suicide. Bullying also has an impact on those who witness these behaviours. For colleagues, fear of facing a similar fate is stressful, which can lead to low morale in the workplace.

If you are in a situation where you feel threatened, please reach out. Free with your CDHA membership is the new Homewood Health member and family assistance program, which offers counselling services in several areas including workplace, stress, and family issues. Details are available at www.cdha.ca/homewood.

Wendy Stewart, RDH
CDHA board director, Nova Scotia
directors@cdha.ca

AWARD NOMINATIONS OPEN

Do you know a CDHA member who has made outstanding contributions to the dental hygiene profession? Consider nominating them for CDHA's Award of Merit, Distinguished Service or Life Membership Award. The deadline for nominations is January 31, 2019. www.cdha.ca/awards

WHAT'S NEW AT CDHA?

PROFESSIONAL DEVELOPMENT

CDHA is committed to supporting your ongoing professional development with **webinars that are now available to members for FREE**, saving you hundreds of dollars.

NEW webinars now on demand:

Homewood Health: Member & Family Assistance Program

Polish Up on Rubber Cup Procedures, *sponsored by Dentsply Sirona Academy*

Fundamentals of Educational Assessment

Identifying Product Hazards in the Dental Setting,
sponsored by Johnson & Johnson

Webinars coming soon:

Cannabis, January 30, 2019, *sponsored by Philips*

How to Put Your Purple On! for NDHW™, February 20, 2019

Understanding Cardiovascular Conditions,
March 20, 2019, *sponsored by Crest + Oral-B*

Noise Levels in the Workplace, April 17, 2019

www.cdha.ca/webinars

2019 Conference:

Save the date! CDHA will host its next national conference, **October 3-5, 2019**, in St. John's, Newfoundland & Labrador. Make plans now to join us on the rock! Registration will open in early 2019. www.cdha.ca/conference

NEW MEMBERSHIP BENEFIT

In response to your feedback, we have added a new member and family assistance program to our suite of premium member benefits! You and your family can now receive confidential counselling for any challenge including workplace, stress, and family issues.

Details at www.cdha.ca/homewood

POSITION PAPER AND STATEMENT ON SILVER DIAMINE FLUORIDE

CDHA's position paper on silver diamine fluoride (SDF) was published in the October 2018 issue of the *Canadian Journal of Dental Hygiene*. To learn more about the short- and long-term effectiveness, safety, and acceptance of SDF therapy for children and adults with carious lesions and/or dentinal hypersensitivity as it applies to dental hygiene practice, download the position paper and statement at www.cdha.ca/positionstatement

2017-2018 ANNUAL REPORT

View and download CDHA's 2017-2018 annual report, which summarizes our progress over the past year in meeting the organizational ends (or goals) established by the board of directors. The annual report is also available in French. www.cdha.ca/annualreport



www.cdha.ca



info@cdha.ca



[@thecdha](https://twitter.com/thecdha)



www.facebook.com/theCDHA

Cardiopulmonary Resuscitation (CPR)
performed within 2 minutes can
DOUBLE or TRIPLE
a victim's chance of survival.¹



¹ Image reference: Laerdal®:
https://cdn0.laerdal.com/cdn-4ad4d8/globalassets/documents/17-16235/little_anne_infographic_hor_ver.pdf

CPR Requirements Effective on or after November 1, 2018

For all new registrants applying for registration or a practising licence on or after November 1, 2018, and all CDHNS members who are renewing for their licence for the November 1, 2019 to October 31, 2020 renewal year, the level of CPR certification must include, at a minimum, classroom instruction and practicum experience related to:

- one and two-person rescuer chest compressions for adults, children and infants;
- one and two-person rescuer adult, child and infant bag-valve mask technique and rescue breathing;
- relief of choking in adults, children and infants; and
- use of an automated external defibrillator (AED).

A hands-on component is required. Please ensure that the CPR course you take has a hands-on component. Online CPR courses are not acceptable. CPR course must include classroom instruction and practicum experience.

What CPR does this requirement equate to for different organizations?

The following information will be updated closer to the actual renewal period next year (November 1, 2019 to October 31, 2020). However, to assist you in understanding which CPR meets the list of requirements set by Council, a summary is provided below based on the organization's current offerings and levels.

St. John Ambulance

Based on the current course offerings and levels, the accepted course from St. John Ambulance would be Health Care Provider (HCP) CPR.

Heart and Stroke Foundation

Based on the current course offerings and levels, the accepted course from the Heart and Stroke Foundation is Basic Life Support (BLS). The Lifesaving Society courses are consistent with the standards established by the Heart and Stroke Foundation.

Red Cross CPR

Based on the current course offerings and levels, the accepted course from the Red Cross would be CPR/AED Level Health Care Provider (HCP).

Three Year Notice: Requirements for Practice Hours

(effective in the three-year period starting November 1, 2017)

Three-year notice is hereby given that Council has approved a requirement for licencing or licence renewal that for registrants who have graduated more than three years prior to their application for a licence or licence renewal the registrant must provide evidence of 600 hours of practice as a dental hygienist within the 3 years immediately preceding the date the Registrar receives a complete application.

Hours of practice are tracked as of November 1, 2017 and the 600 hours requirement will take effect on November 1, 2020. For more information and background on this subject see [Unison, Vol 43, Issue 3 Quality Assurance - Practice Hours](#).

To provide feedback on this requirement, please contact the Registrar at registrar@cdhns.ca

How Long Do I Have to Retain My CC Records?

All members are reminded to retain relevant records/documents for your current cycle and your previous cycle (as noted in Section 4.5 of the CCP Requirements document). Even if you are not selected for audit, you must ensure that you keep all relevant documents for these time periods.

Dental Hygienists Community Outreach: Putting the “Special” in the Special Olympics

Submitted by Cheryl Bell, Faculty of Dentistry,
Communications Advisor

Playing host to the National Special Olympics (SO) in Antigonish, July 31-August 4, 2018 was a first for Nova Scotia. It was also a “transformative” and “life-changing” new experience for a volunteer team from Dalhousie University’s Faculty of Dentistry who were there as part of the Special Olympics Healthy Athletes program.

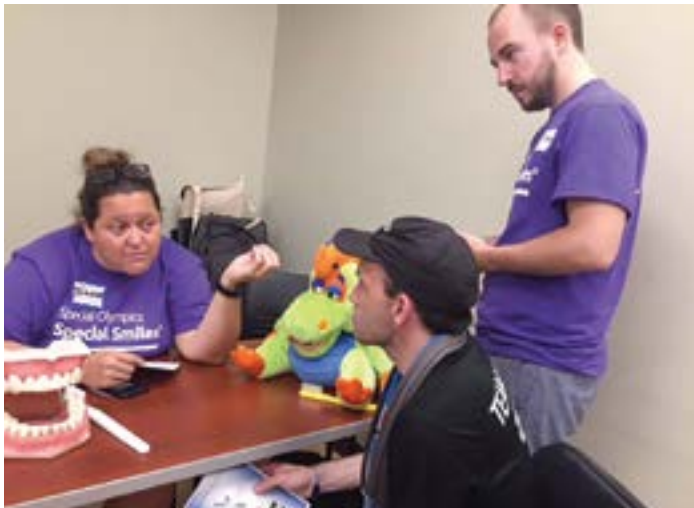


Photo credit: **Special Olympics Volunteer**
In this image, Teanne MacCallum, RDH

Paediatric dentistry professor and Healthy Smiles clinical director Dr. Tracy Doyle recruited over 40 dentistry and dental hygiene faculty, staff, alumni, and students to spend some of the hottest days of the summer in a room at the Schwartz School of Business at St. Francis Xavier University.

During the games, more than 1000 athletes passed through the Healthy Smiles room.

Their job was to carry out oral health screenings, make mouthguards for the athletes who needed them, provide fluoride treatments, offer oral health care education, and send every athlete away with a goody bag of oral health supplies. Other Healthy Athletes teams from Dalhousie provided vision, audiology, and podiatry checks. “Individuals with intellectual and physical challenges have a lot of unmet health needs,” says Dr. Doyle.



Photo credit: **Laughing Lobster Antigonish**
In this image, Shauna Hachey, RDH

Seeing the impact of dental care across the country

Over the course of the games, more than 1000 athletes with autism, Down syndrome, and other intellectual disabilities passed through the Healthy Smiles room.

The volunteer team found that the athletes were generally well looked after in terms of cavities and decay, but the level of hygiene was concerning. “What we are seeing are some dietary concerns,” says dental hygiene professor Shauna Hachey, “particularly the consumption of pop, juice, and sports drinks.”

The difficulty of access to care was a common refrain. “Some parents don’t acknowledge that there is a problem with their children’s teeth,” says assistant dean of academics Dr. Debora Matthews. “The coaches told us stories of some athletes who have never seen a dentist.”

The Nova Scotia winter Special Olympics will take place in Aldershot in February 2019 and there are many volunteers from this summer’s games who are inspired and keen to do it all again.

For the full article, please go to: <https://www.dal.ca/faculty/dentistry/news-events/news/2018/12/04/putting-the-special-in-the-special-olympics.html>

Special Olympics



Recreational Cannabis Use: Implications for Dental Hygiene Practice?

Submitted by **Robert Gilbert**, PhD, Associate Professor, School of Health Sciences, Dalhousie University

Long before its legalization, the recreational use of cannabis was well ingrained in our society. For decades, cannabis has been the most frequently used recreational drug in Canada. The 2017 Canadian Tobacco Alcohol and Drugs Use Survey shows that 15% (4.4 million) of Canadians, and 19% of Nova Scotians (~179,000), used cannabis last year. Young adults, ages 20-24 were among the highest users at 33%.¹ Surveys of secondary and post-secondary education students show the past month use to be 19% and 31% respectively.^{2,3}

Now that legalization has occurred, health care professionals must consider the potential changes in usage rates and the potential health and social consequences that could stem from a greater number of Canadians using more cannabis more frequently. What might Canadian usage rates, and patterns of use, become? The answer is we don't know, but if we consider that last year 78% of Canadians used alcohol, our other legal and readily available recreational substance, one might imagine that the rate of cannabis use will one day far exceed the current 15%.¹ This hypothesis is supported by three decades of epidemiological research which clearly shows that in periods when Canadians' perception of cannabis use risks declined, its rate of use increased.⁴ Now that cannabis is legal and readily available at your local NSLC store, it is not unreasonable to expect that stigma and fear will be reduced and recreational use will become substantial.

Health care providers should be concerned about these potential changes in cannabis use for the following reasons:

1. Cannabis has been the leading cause of addiction worldwide for many years, 3rd only to alcohol and tobacco. Current estimates suggest that 30% of people who use cannabis have some degree of cannabis use disorder and up to 17% will become addicted.⁵ If the rate of use increases dramatically, so will the actual number of persons with addiction and all its inherent consequences.
2. While we know there are certain health and social risks associated with long-term cannabis use, we don't know what else will emerge once it becomes a norm and the frequency and duration of use increases across our broader populations.

Realistically, health care professionals may soon face new challenges and dental hygienists will not be the exception. At this point however, for dental hygienists, what those challenges might be is still unclear. This is due in large part to the paucity of research that has been conducted on this topic by the dental profession. *How do we provide care in the absence of a solid evidence base?* We work with the little we have while advocating that more research be done. In the next column is a list of some of things that have relevance to dental hygiene practice.

1. **Panic Attacks:** Persons with cannabis use disorders may be more susceptible to panic attacks.⁷
2. **Head and Neck Cancer Risk:** Cannabis, like tobacco, contains an array of carcinogens. However, unlike tobacco, the relationship between cannabis use and the development of cancers of the head and neck remains unclear. Studies that have been conducted are mostly older and have drawn conflicting conclusions. Additional studies with greater rigor must be conducted before conclusions can be drawn.^{6,8}
3. **Periodontal Disease Association:** A limited body of evidence suggests an association between cannabis use and the development of periodontal disease. For example, a handful of studies have demonstrated associations between cannabis use and the development of gingivitis, periodontal bone loss, and gingival enlargement. One proposed contributing factor to the development of this disease is cannabis induced xerostomia. More work needs to be done before the association between cannabis and periodontal disease can be conclusively confirmed.⁹
4. **Local Anaesthesia Use:** The findings of several combined studies suggest that local anaesthesia with epinephrine may exacerbate cannabis related tachycardia, potentially resulting in cardiac ischemia. Although these studies are decades old and few, use caution when using a local anaesthesia containing epinephrine in persons you suspect may be under the influence of cannabis.¹⁰
5. **Ability to Make Evidence-Based Decisions:** Determine if your client is under the influence of cannabis during their visit. Cannabis use may have health consequences and these might affect treatment decisions. Determining a client's pattern of cannabis use and current level of intoxication is essential to making evidence-based decisions.
6. **Ability to Provide Informed Consent:** A client under the influence of cannabis may have difficulty comprehending treatment options being presented and be therefore unable to provide informed consent. Evaluate the client's capacity to provide informed consent.

References

1. Government of Canada. (2018) Canadian Alcohol and Drugs Survey for 2017. Available at: <https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2017-summary.html>
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4. Hart, C., Ksir, C., Hebb, A, Gilbert, R. 2015. *Drugs, Behaviour and Society*. 2nd Edition. McGraw Hill Ryerson.
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6. Feuerstein, J.B. et al. 2016 What every dentist should know about Cannabis. *Journal of the Massachusetts Dental Society*.
7. Silins E., et al. (2014) Young adult sequelae of adolescent cannabis use: an integrative analysis. *Lancet Psychiatry*. 1(4):286-93.
8. Carvakho, M.F.F. et al (2015) Head and neck cancer among marijuana users: A meta-analysis of matched case-control studies. *Archives Oral Biology*, 60, 1750-1755.
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10. Bridgeman, M.B., Abazia, D.T. (2017) Medicinal Cannabis: History, Pharmacology, And Implications for the Acute Care Setting. *P & T*. 42(3): 180-188.

UNISON

College of
Dental Hygienists
of Nova Scotia

Winter
2018

Official Newsletter of the College of Dental Hygienists of Nova Scotia

Volume 47 Issue 3

Our office will be closed from Monday
December 24, 2018, reopening on Wednesday
January 2, 2019.



*From all of us
here at CDHNS,
we wish you and
your family a
peaceful and
joyful time during
this season.*

Crystal Ball Icon created by RocketTheme

Important dates to remember

January 18 and 19, 2019: CDHNS Council Meeting

January 25, 2019: Dalhousie Student Dental Hygiene Presentations

February 28, 2019: Deadline for Council Nominations

March 28, 2019: NSCC Dental Assisting Table Clinic

April 1-30, 2019: National Oral Health Month

April 6-12, 2019: National Dental Hygienists Week™

May 24, 2019: AGM (held in conjunction with Dalhousie's
Continuing Dental Education 2-day course with Anna Pattison)

May 24, 2019: 10-year Celebration of CDHNS Self-Regulation

College of Dental Hygienists of Nova Scotia

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www.cdhns.ca

