

4 Craven Mews  
London SW11 5PW

14<sup>th</sup> Sept 2010

Dear [REDACTED]

Thank you very much for seeing me on the 16<sup>th</sup> July and subsequently for your mail saying that you have passed this matter onto [REDACTED] Parliamentary Under-Secretary of State for Quality with responsibility for Dentistry and Innovation, at the Department of Health.

As was predicted my correspondence with the General Dental Council has now run its course and I feel that I have exhausted all avenues of further enquiry except through yourself or a direct appeal to the public. A direct appeal to the public would mean approaching the media which would be my very last option, when all else had failed.

One point on your letter was that you mentioned that you "have asked him what may be done towards having your techniques debated". I was hoping very much to avoid this impression. It is not my aim to have my techniques debated at all, this would be a self serving approach that is easily refuted for a lack of evidence (neither side has much), and this is one of the reason that this problem has remained static for 30 years.

My concern is that the dental profession is treating 1/3 of the children in this country for crooked teeth without knowing the cause of the problem while avoiding a debate on this issue. The treatments prescribed consist of mechanical and surgical techniques and are based on the assumption that the cause of crooked teeth is genetic, there are no common treatments to my knowledge that try to affect the environment. However the evidence of existing good papers in quality referred journals can prove that malocclusion is caused by the environment. If given the chance I could easily prove this beyond any doubt.

If I am right then the orthodontics practiced in this country is not only not evidence based it may well be detrimental to the patients under treatment. The change to the profession would be fundamental and we would literally have to throw the text books out of the window. This would kill the golden egg of a very lucrative profession. Hence the opposition to change is enormous.

The dental profession have been granted a monopoly of practice by an act of parliament in which the General Dental Council (GDC) was set up to oversee the dental profession so that this monopoly is not abused. As it is my professional responsibility I have brought this to the attention of the GDC over the last year with 14 letters of correspondence or emails. To my dismay they did not even hear me out. They have painted the picture that this is a dispute between two groups of thought, which is what I have tried to avoid (hence my earlier comments). I quote below their final refusal, (this text is all present on the email forwarded to you):

"What you do not seem to understand is that, even if this is true (which the GDC does not accept) [although I could easily prove this if only given a chance] it is not the place of a regulator to become

involved in a disagreement between you and the orthodontic profession as to the scientific basis of their practice.”

“I am fully aware of the GDC’s responsibilities and obligations under the legislation. They do not include becoming involved in your dispute with the orthodontic profession about the scientific basis of orthodontics.”

I feel that the general public which the GDC are charged with protecting would not see things in the same way.

The GDC recruits members from within the dental profession and lay members from outside, however there is a natural tendency in complex matters for the lay members to defer to the dental members and the generalists to defer to the specialists. This arrangement leaves a wide scope for conflicts of interests. As a quango there is no right of reproach and their word is final.

This situation may not be as acute or pressing as the Bristol Babies but it affects far more people, with more than 30% of the population have orthodontic care, thousands each year have in-patient hospital admissions for extractions and major surgery, possibly all without a sound basis of evidence. The cost of which is spiralling, where effective prevention is possible. To date there are no long term studies showing an improvement in health or tooth alignment from orthodontic intervention, were the profession to appeal now for NICE funding it is unlikely that it would be granted. At present you have a unique position that you have been recently elected and all these problems have occurred under a previous administration, this will not last.

The GDC is not regulating or acting to protect patients. Parliament is the ultimate regulator and I request is to make sure that science happens and for you to support my request of a scientific debate. These have been fundamental thought the history of science and what have we to lose but our ignorance.

Please excuse the length of this correspondence but it is not easy to summaries this any shorter.

Best wishes,

Mike Mew

Attached; below is the 7 or so interactions either way with [REDACTED] the lawyer for the GDC and attached is the previous and first letter from [REDACTED] I can supply the previous mail which is not particularly relevant.