



## Editorial

# An invitation to the European Association of Dental Public Health 21<sup>st</sup> birthday!

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The 21<sup>st</sup> Congress of the European Association of Dental Public Health will be held in Budapest, Hungary, on the 29<sup>th</sup> September to the 1<sup>st</sup> October 2016. As you would expect, I recommend you submit your abstracts early as the closing date is 30<sup>th</sup> April 2016 ([http://eadph.org/abstract\\_submission/abstract\\_submission.html](http://eadph.org/abstract_submission/abstract_submission.html)). Early registration would also assist the conference organisers. The number and quality of abstracts received so far, has exceeded our planning expectations ([www.eadph2016.org](http://www.eadph2016.org)).

Register for the 21<sup>st</sup> Congress before 30<sup>th</sup> June 2016 and a reduced member rate applies. When registering for the congress you will also be asked to select which of the seven Special Interest Working Groups that you wish to attend and contribute. This is an excellent way to form international collaborations across Europe. The EADPH Special Interest Working Groups were established at the 13<sup>th</sup> congress in Heidelberg (2008) and the overall aims, reviewed at the 2015 Istanbul meeting are to:

- Bring together people with an interest in the topic concerned
- Explore and discuss the “current state of the art” in the topic or a part of the topic
- Identify work that needs to be done to improve the “current state of the art”
- Produce an appropriate communication (for example editorials, position papers, full research papers, reviews, declarations) that sets out the “current state of the art and science” and future work that needs to be carried out to improve it.
- Plan how to develop collaborations to improve some of the identified deficiencies.

The special interest groups and their chairs are:

- Caries Epidemiology and Prevention – Andreas Schulte, Klaus Pieper & Nigel Pitts
- Gerodontology - Jacques Vanobbergen & Luc DeVisshere
- Periodontal Epidemiology - Ken Eaton
- Prevention of Oral Cancer – Katrin Hertrampf & Colwyn Jones
- Tooth Surface Loss/Erosion – Vasileios Margaritis
- Oral Health Related Quality of Life – George Tsakos
- Dental Public Health education – Jenny Gallagher

Historically, one’s 21<sup>st</sup> birthday was the door to adulthood. It was recognised as the moment when an individual stops being a minor and assumes control and responsibility over their actions, and decisions. In modern western European countries this is now typically 18 years of age, sometimes younger, and it relates to a collection of laws bestowing the responsibilities and benefits of adulthood at different age thresholds. But EADPH had all of these responsibilities thrust on it at conception. As the Association’s 21<sup>st</sup> year approaches, what have we achieved? I want to concentrate on one of the original aims of the European Association of Dental Public Health which is, “*to work towards the development and recognition of the speciality of dental public health within Europe.*”

The first Scientific Congress of EADPH was held in the Scottish city of Dundee in March 1996 (see Table 1). This was a joint British Association for the Study of Community Dentistry (BASCD) Presidential Meeting and the inaugural EADPH Meeting from 26<sup>th</sup> to 28<sup>th</sup> March 1996. The then President of both BASCD and EADPH, Professor Cynthia Pine, hosted the event and shortly afterwards our journal, *Community Dental Health*, became the official periodical of both associations.

In 1996 Italy held the Presidency of the Council of the European Union for the first 6 months and Ireland for the second. Both countries have hosted the EADPH annual scientific meetings; Italy twice (Cittadella 1997 and Rome 2011) and Ireland in Cork in 2000. Germany has also held two meetings (Marburg 2001 and Heidelberg 2008) and The United Kingdom has held three; although the first one was in Scotland, which will not now become an independent country after the no vote in their referendum held shortly after the Gothenburg meeting of EADPH in June 2014!

In total 17 European countries have hosted EADPH meetings. Reaching above the Arctic Circle the furthest north was in Tromsø (2009) in Norway at a latitude of more than 69° north, 7° north of Jyväskylä (2003) in Finland. The Arctic Circle is the latitude where the sun remains continuously above the horizon for 24 hours at least one day each year.

**Table 1.** European Association of Dental Public Health conference venues across Europe over the last 21 years

<i>Event</i>	<i>Year</i>	<i>Location</i>	<i>Country</i>
1 <sup>st</sup>	1996	Dundee	Scotland
2 <sup>nd</sup>	1997	Cittadella	Italy
3 <sup>rd</sup>	1998	Santander	Spain
4 <sup>th</sup>	1999	Strasbourg	France
5 <sup>th</sup>	2000	Cork	Ireland
6 <sup>th</sup>	2001	Marburg	Germany
7 <sup>th</sup>	2002	Athens	Greece
8 <sup>th</sup>	2003	Jyväskylä	Finland
9 <sup>th</sup>	2004	Porto	Portugal
10 <sup>th</sup>	2005	Liverpool	England
11 <sup>th</sup>	2006	Prague	Czech Republic
12 <sup>th</sup>	2007	Ghent/Leuven	Belgium
13 <sup>th</sup>	2008	Heidelberg	Germany
14 <sup>th</sup>	2009	Tromsø	Norway
15 <sup>th</sup>	2010	Constanta	Romania
16 <sup>th</sup>	2011	Rome	Italy
17 <sup>th</sup>	2012	London	England
18 <sup>th</sup>	2013	St Julians	Malta
19 <sup>th</sup>	2014	Gothenburg	Sweden
20 <sup>th</sup>	2015	Istanbul	Turkey
21 <sup>st</sup>	2016	Budapest	Hungary

The most easterly Congress was in Istanbul at almost 29° East, Constanta (2010) was close at 28° East and Jyväskylä at 25° East. Both Porto and Cork are at 8° West, but Porto is just a few fractions of a degree (minutes) further west.

The most southerly meeting was St Julians in Malta (2013), at a pleasant 36° north, one degree of latitude south of Athens (2002) and about 5° south of the meetings held in both Istanbul (2015) and Porto (2004). These latitudes reflect the very wide geographic range of venues for our previous annual conferences and are clear evidence that Dental Public Health now spans Western Europe.

Researching the latitudes of previous conference venues on the internet, many on the northern shore of the Mediterranean Sea, focussed my attention on the southern border of Europe and the humanitarian tragedy caused by the unprecedented migration of people; refugees escaping from wars and famine.

EADPH has always been inclusive, welcoming members and congress delegates from across the globe. All of our home countries are currently experiencing large numbers of refugees either in transit or seeking - by definition - refuge. As good Europeans we must help to combat anything which works to the detriment of the health of all people in Europe, old or new; through both prevention and direct care. The collective actions of our European Union and individual countries will directly influence the quality of life of both these refugees, and the existing population. I hope that well before the start of the Budapest Congress in September 2016, no more lives will be needlessly lost on our southern European Border.

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