The History of the Irish Dental Association 1922-1972

John B Lee
It was with mixed feelings of pleasure and inadequacy that I accepted the invitation to record the history of the Irish Dental Association for presentation to participants at our 50th Anniversary Congress in April 1972.

So that events related to the formation of the Association may be more easily understood, the story of the Irish Branch of the British Dental Association is recorded. Also included are brief sketches of some of the major activities within the Association and of certain organisations that were formed through the initiative of members. It is not possible to mention all of those colleagues associated with these activities, but their efforts are appreciated and acknowledged in other places.

I am grateful for the help and advice I received. In particular I wish to thank RC Raymond for providing some records on activities during the earlier years of the century, and to thank JC Smith, H Hayden, S Thornton, C O’Sullivan and the Dublin Dental Hospital authorities for some of the photographs.

I also record my indebtedness to ES O’Brien-Moran, K Harrington, JC Delany, PJ Stoy, JF Holmes and RB Dockrell for details on some of the associated organisations and activities.

My thanks are also due to S Hickey and W Allwright for their help with proofreading and corrections, and to my secretary and typist, Miss Margaret Connolly, for her patience and perseverance.

JBL

December 1971
177 Upper Rathmines,
Dublin 6.
The Irish Branch of the British Dental Association was formed in 1887, that is, seven years after the parent organisation. Although it was the eighth branch to be formed, it very soon reached a position of prominence. The enthusiasm and interest shown by its members resulted in the Annual General Meeting of the British Dental Association being held in Dublin in 1888 under the Presidency of Daniel Corbett, also of Dublin.

Corbett, apparently, was a remarkable man. His father, a dentist, came from Cork and was a pioneer in the manufacture of porcelain teeth. It is said that it was from a member of this family that the great dental firm of Ash acquired its expertise in the manufacture of its porcelain products. At the time of the Dublin meeting, Daniel Corbett, in addition to being President of the Irish Branch, also held the distinction of being President of the Odontological Society of Great Britain. He qualified about 1838, taking both his MRCS and his LDS examinations in England. He practised in Dublin for about 60 years, and was over 90 years of age when he died. Practising also in Dublin was his son, Daniel junior, who followed closely in the footsteps of his illustrious father, and was one of the founders of the Dental Hospital in Dublin.

The Secretary of the Branch was one W Booth Persall, a man of many parts and who was also a Dublin man. He had an FRCSI in addition to his LDS. He was an accomplished artist and was an honorary member of the Royal Hibernian Society. He also published several books. It is hardly surprising that with these men at the helm the meeting was considered an outstanding success.

Social reform

During this decade, a second theme was also constantly in the minds of members. This related to how best social reform could be initiated, so that dental services could be provided for the less affluent sections of the community. In 1913, there were only 200 qualified dentists in the whole of Ireland. Of these, 100 practised in or about Dublin, 44 in Belfast and 14 in Cork. Large centres, such as Athlone, were left almost entirely to the mercy of unscrupulous charlatans. There were, therefore, large sections of the adult and child populations who were unable to obtain any form of dental treatment. The National Health Act of 1911 embraced dentistry only to the extent that it permitted approved societies to include it as an additional benefit, if their funds permitted. Successive Presidents referred to this theme in both their inaugural and valedictory addresses. The immediate implementation of a State scheme to help these people was advocated.
Meetings were held, and resolution after resolution was passed and
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much evidence was submitted and, judging by the reports, the Irish
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Agreed document emerged. The main points were as follows: that (1)
the Branch and the new Association, and in the autumn of 1917 an
new dental society called the Surgeon Dentists’ Association. Members
from the North of Ireland disapproved strongly of this development.
The Branch Council sought the views of members in debate at special
meetings. Eventually it was decided that a conciliatory approach should
be adopted. Consultations were arranged between representatives of
the Branch and the new Association, and in the autumn of 1917 an
agreed document emerged. The main points were as follows: that (1)
the profession should be united in opposing the application to Ireland
of dental legislation which might prove unsuitable; (2) dental education
and the ethics of dental practice should be under the control and
direction of a General Dental Council in Ireland; (3) there should be
some way of distinguishing between registered and un-registered
practitioners; and, (4) in the event of the general political situation
necessitating separate dental legislation, it was agreed that a new
dental society should be formed. The details of formation and control
of this society were, however, postponed indefinitely. Eventually the
Surgeon Dentists agreed, under certain conditions, to dissolve their
Society and to seek membership of the Irish Branch. This decision
resulted in an increase of 41 members, to a total of 155 Branch
members, by the end of the year.

In 1917, the President of the Privy Council appointed a Departmental
Committee to investigate the shortcomings of the 1878 Dentists’ Act.
Much evidence was submitted and, judging by the reports, the Irish
Branch took its duties in this respect very seriously. Special General
Meetings were held, and resolution after resolution was passed and
forwarded to the Departmental Committee. One such resolution read:
“That the Irish Branch of the British Dental Association would not
consider any new legislation satisfactory that did not include
administrative control of dental affairs and of dental education by the
dental profession”. Another was framed in this manner: “That the Irish
Branch does not approve of the admission of any of the unqualified to
the Dentists’ Register unless they first pass a prescribed examination”.
Other resolutions dealt with the questions of title and the form of a
proposed register.

A unanimous report from this Departmental Committee was
presented to Parliament in 1919, and radical amendments to the
existing Act were recommended. Its contents caused dismay in the
Irish camp, and Mr DL Rogers in his valedictory address is reported
as saying: “A year ago we were anxiously awaiting the report of the
Dentists’ Act Committee, a report which has caused great
disappointment, and perhaps I might say astonishment, at the feeble
effort that was made to solve the difficulty, to get rid of the evils of
unqualified practice. The solution suggested, as you all know, is that
persons who are responsible for the evils of unqualified practice
should be placed upon the Dentists’ Register, and be called ‘dentists’,
a suggestion unworthy of any committee appointed by the Lord
President of the Privy Council, and I have no hesitation in saying that
such a report should not have been signed by the members of the
medical and dental profession on that committee”. The debate
continued.

Efforts were made to obtain dental representation on the Medical Council,
and to have the Association registered as a trade union.

Historic times
At this time, other broader and more important issues were claiming
the attention of the members. A new Home Rule Bill was soon to be
introduced. This measure, the Government of Ireland Act, became law
in December 1920. It divided the country in two, ‘Northern Ireland’,
consisting of six Ulster counties, and ‘Saorstat Eireann’, consisting of
the remaining 26 counties. Each was to have its own parliament. The
majority of the profession seemed anxious that some instrument should
be fashioned that would enable dentists throughout Ireland to remain
united within one Association. Doubts were being expressed, however,
in some quarters as to the feasibility of this, or indeed of its desirability.
Political feelings at this time were running high, but still the Honorary
Secretary was able to report a successful meeting in Derry in June
1921, in spite of the riots that were in progress at that time. Three significant developments, as far as this narrative is concerned, occurred during that year:

1. The eagerly awaited reform on dental legislation resulted in the Dentists’ Act 1921. This Act restricted practice only to those whose name appeared on the Dentists’ Register. A new body, The Dental Board of the United Kingdom, was to be established to control the profession. Self-control of dental affairs had at last been achieved. Members of the Irish Branch were unhappy, however, to find that some thousands of those unqualified practitioners who had been in practice for the statutory period of time were now to be allowed to use the title ‘Dentist’ and to continue in practice.

2. The signing of the Treaty between Great Britain and Ireland on Tuesday, December 6, 1921. This was instrumental in nullifying the constitution of the Irish Branch.

3. The introduction of the much-delayed implementation of an ‘Additional Dental Benefit Scheme’ by some approved societies.

The year 1922 was a most confusing one in the political life of Irish dentistry. The Irish Branch and its Ulster Section were still in existence while, at the same time, initial efforts for the establishment of the Irish Dental Association and a North of Ireland Branch of the British Dental Association were being set in motion. At a General Meeting of the Branch on February 10, in Dublin, Mr Walby was elected President. This meeting endorsed the decision of Council, taken some weeks previously, that a new Society be formed. It was decided to call it ‘The Irish Dental Association’, and it was further decided that all present that evening should be enrolled as founder members. The Irish Branch met for the last time on December 15, 1922, when it passed a resolution formally dissolving itself. On January 19, 1923, a meeting was held in Belfast at which it was decided to request the Representative Board of the British Dental Association to sanction the formation of the Irish Dental Association. The Representative Board met on January 27, 1923. At this meeting, a letter was read from Mr Hogan, Honorary Secretary, conveying the decision to dissolve the Irish Branch. A letter was also read from Mr J Malone, Honorary Secretary of the Ulster Section of the Irish Branch, seeking permission to form a North of Ireland Branch of the British Dental Association. The dissolution of the Irish Branch was accepted with great regret, and hopes were expressed that relations with the new Association would be as happy as they had been previously.

New loyalties
It is interesting to dwell and ponder a little on some of the personalities involved in these discussions. There can be little doubt that immediately prior to 1922, those in charge of the Irish Branch had affiliations with and a great personal loyalty to Britain. Mr Walby was an Englishman who qualified in Scotland but practised in Belfast. Mr Cockburn was also English, but had been practising in Dublin for many years. Mr Rogers, who had been Secretary of the Branch for several years, President in 1919, and still an influential member of the committee, also came from England, while Mr W Stewart, then practising in Dublin, was from Belfast. The recent political legislation made the formation of a new Association essential. It was intended, however, that while this Association would be independent of the British Dental Association, it would be affiliated to it in some way, and retain with it the closest possible liaison. It was also anticipated that its jurisdiction would encompass the whole of Ireland. Of the 46 original or founder members, eight are recorded as being from Northern Ireland, and to Mr A Walby is attributed the distinction of being the first President of the Irish Dental Association.
At a meeting of the Council of the Irish Branch of the British Dental Association on Saturday, January 17, 1922, with the President-Elect of the Branch, Mr AG Walby, in the chair, the following resolution was passed unanimously: “That in view of the recent political changes a new society of dental surgeons practising in Ireland be formed”. A Provisional Committee was set up to outline details and it arranged to meet on Saturday, February 11.

In the meanwhile the members from the North of Ireland were to investigate the willingness of their colleagues there to co-operate in establishing a united professional body. Mr J Hogan, Dublin, was appointed Honorary Secretary. When the Committee met, as arranged, on February 11, Mr Walby, who had been elected Branch President the previous evening, was again in the chair. Additional members, three from the North of Ireland and three from Cork, were to be invited to serve on the Committee. It was decided that a circular letter would be sent to all registered dentists practising in Ireland seeking support. At the third meeting of this Provisional Committee on Thursday, February 23, in the absence of Mr Walby, Mr DL Rogers took the chair. The circular letter, which contained the names of some 50 supporters, eight of whom were from the North, was approved.

By the end of 1922, the new Association boasted 180 members.

The response to this letter was good, as the new Association could boast of 180 members by the end of 1922. In the continual absence of the representatives from Northern Ireland the Provisional Committee, under different chairmen, continued to meet and provisional rules were adopted at a meeting in December. At the first Annual General Meeting of the Irish Dental Association held on January 12, 1923, Mr Cockburn was elected President, Mr Walby and Mr G Murray, Vice-Presidents, Mr Hogan, Honorary Secretary, Mr Doolin, Honorary Treasurer, and Messrs. Bradley, Clarke, Friel, Hutton, Hackett, Murphy, O’Duffy, O’Brien, Potter, Rogers, Stewart and Sheppard were elected Council members. Mr G Murray died very shortly after this meeting.

The legal situation
About this time doubts were being expressed as to the legal application of the Dentists’ Act 1921 in this country, especially in relation to its penal clauses. Mr Sheridan’s position as Irish representative on the Dental Board was also being questioned. As complaints were being received of the misuse of title and of infringements of the advertising clause of the Act, a solicitor and senior counsel were engaged to advise on the statutory position of the Dental Board of the United Kingdom in this country.

Politics and dentistry
Arrangements were made to hold a two-day scientific and business meeting in November. This was to be concluded by an official Association dinner on Saturday 3rd. The selection of toasts for this dinner caused concern and the advice of the Governor General was sought. In his absence, Council members delayed a decision until the latest possible moment. A majority vote eventually decided to include the toast of ‘The King’. The guests at the dinner included the Governor General, the President of the British Dental Association and the Honorary Secretary of the Northern Ireland Branch of the British Dental Association. The toast of ‘The King’ was duly honoured. The inclusion of this toast was an unfortunate decision as it generated a deep emotional and ideological conflict among members, which was to last for several years. Immediately following the dinner the storm broke, and some 50 dentists signed a letter protesting vigorously against what they considered to be a traditionally objectionable toast.

As elections to Council were at that time pending, the ‘anti-toast group’ set about mounting a vigorous campaign to have six of their supporters elected and the results show that they succeeded admirably in their task. They also submitted a motion for the Annual General Meeting, which read: “That the present Irish Dental Association be now dissolved and that a new Association be formed for the dental profession, within the Free State only, having for its title ‘The Irish Free State Dental Association’”. By the time the meeting took place feelings had apparently simmered down somewhat as the rival groups had agreed on a six-point compromise plan, which, when put to the meeting, initially in the form of an amendment and then as a substantive motion, was passed unanimously.
Beneath the surface, however, feelings were still ruffled. At the April Council meeting a letter was read from Dr K McGrath in which he accused Council of procrastinating on the implementation of the terms of the agreed plan. Mr Hogan immediately tendered his resignation and was replaced as Honorary Secretary by Mr Coogan. A change of solicitors also took place. At the next Council meeting a joint letter from Mr Cockburn and Mr Doolin caused a lively discussion. As this letter has not been preserved, its contents are a matter for conjecture. The minutes, however, show that from then until early the following year Mr Cockburn, while still remaining as chairman of Council, was referred to as Past-President.

The next Annual General Meeting, held in January 1925, passed off peacefully enough, although Mr Doolin tendered his resignation. Mr JI Potter was elected President and Mr Sheridan President-Elect. It was agreed that the name ‘Irish Dental Association’ should be retained. Events during the previous 18 months exacted a heavy toll on membership – down to about 100. However, now that the major differences of opinion within the Association had been satisfactorily resolved, the more tranquil environment, it was hoped, would allow for a greater measure of progress.

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PRIVATE AND CONFIDENTIAL

THE IRISH DENTAL ASSOCIATION
16 UPPER FITZWILLIAM STREET, DUBLIN.

Dear Sir,

In view of the changes in the Government of Ireland, and the establishment of separate legislatures, it is essential that there should be an independent local organisation to look after the interests of the dental profession in Ireland.

With this object ‘The Irish Dental Association’ was formed and the undermentioned members of the profession have already joined:

AWW Baker (Dublin), WN Brass (Dublin), TJ Bradley (Dublin), AF Carberry (Dublin), NA Clark (Dublin), D Craig (Londonderry), JF Coogan (Limerick), JW Cockburn (Dublin), JC Cawnt (Dublin), DO Doonan (Dublin), DD Duignan (Dublin), ES Ewing (Dublin), JH Haughey (Dublin), JR Hackett (Cork), WS Johnston (Belfast), JJ Kelly (Dublin), M Kennedy (Londonderry), JF Lyons (Ormeau), SN Manning (Dublin), MM McDowell (Dublin), J Murphy (25 Lower Fitzwilliam St, Dublin), KM Mulhern (Dublin), AW Moore (Dublin), J Malcom (Belfast), GM Murray (Dublin), CH McCullough (Belfast), JH O’Neill (Belfast), KE O’Duffy (Dublin), W Ogilvy (Dublin), H O’Keefe (Cork), FFG O’Brien (Dublin), WJ Perloch (Cork), PJ Pohla (Don Looghaire), JI Potter (Dublin), DL Rogers (Dublin), JJ Ryan (Dublin), PJ Sheerin (Don Looghaire), AN Summerville (Don Looghaire), F Sheridan (Dublin), GS Sheppard (Dublin), J Smyth (Dublin), W Stewart (Dublin), MS Thomson (Dublin), AG Walford (Belfast), GF Warron (Belfast), A Yeates (Dublin).

This Association has received the unanimous approval of the Council, and of a General Meeting of the Irish Branch of the British Dental Association.

It is anticipated that arrangements can be made, which will make available to our members the advantages of the Dentists’ Provident Society and the scientific and other resources of the British Dental Association.

Sufficient financial resources are available to render unnecessary any subscription for the first year.

I trust you will see your way to join and support this Association, I shall be much obliged for your prompt reply on the enclosed card.

Yours faithfully,

J.E. HOGAN,
Hon. Sec. (pro tem).

Circular letter to all registered dentists practising in Ireland seeking support for the newly formed Irish Dental Association.
Discussion on the proposed new Dentists’ Act occupied almost the whole of Council’s time during the ensuing years. In order to understand more fully the objects and aims of this Act, it would be better to go back a little in history. About the middle of the 19th century, reform was felt to be overdue in the medical and allied professions. The Medical Act of 1858 established the Medical Council. This was the first milestone on the road to self-government in the health professions. The Royal College of Surgeons of England received its dental charter in 1859, and it granted its first licence in dental surgery in 1860. They Royal College of Surgeons in Ireland received its dental charter in 1878. The first Dentists’ Act was passed in 1878. It was therein decreed that the General Medical Council be authorised to prescribe a curriculum for students and also to keep a register of successful candidates. It did not, however, formally prohibit those not on the register from practising. A deterioration in the ethical standards of dental practice in the years prior to, and during, the first world war led to the passing of the second Dentists’ Act in 1921. This, in the main, established self-government for the dental profession by instituting the Dental Board of the United Kingdom. The Board and the dental profession were still, however, to some extent under the control of the General Medical Council.
The power of the 1921 Act can be briefly outlined as follows:

1. To establish and keep a record, i.e., the General Dentists Register, of those permitted to practise dentistry in the United Kingdom.
2. To control the standard of education and ethics.
3. To effect disciplinary powers on those guilty of offences against the Act.

Under this Act a large number of people who had previously practised dentistry, but who had not acquired either a degree or licence, were allowed to continue in practice. In Britain these practitioners formed the Incorporated Dental Society, and later, in Ireland, their interest was catered for by the Irish Branch of that Society.

Following the establishment of a separate legislation in Ireland at that time, difficulties soon arose. Many reports of infringements of the 1921 Act were being sent to the Secretary of the Irish Dental Association. Legal opinion was sought, and the advice received was that the Irish Dental Association should endeavour to have established, by statute, a body similar to the Dental Board of the United Kingdom, to control dentistry in this country. Council was soon at work and sub-committees were established to expedite the matter. The Attorney General at the time is reported as giving valuable guidance and assistance, and of showing a great personal interest in the preparation of the basic points of a Bill, which it was hoped would soon become law. Alas, some five years elapsed before the necessary Act reached the statute book.

During this period, the profession in Ireland was without a controlling body, and numerous instances of misuse of title and infringements of the advertising clause were reported. There can be no doubt that the delay was instrumental in creating a poor image for dentistry in this country.

The lack of valid dental legislation in Ireland from 1922 to 1928 was instrumental in creating a poor image for dentistry in this country.

Little blame, however, can be attributed to the Association for the unfortunate position in which it now found itself. Deputations waited on either the Minister for Local Government or on his legal advisers urging that, in the interregnum, a commission should be established and given the necessary powers. When it became known that the Government sought the prior agreement of all interested parties before proceeding with the Bill, consultations with representatives of the Incorporated Dental Society, with the medical profession and with the licensing bodies were arranged. Reaching agreement within this circle was no easy matter, and reports of many exacting meetings are recorded. The main points of contention were the questions of title.
and the allocation of representation on the proposed Dental Board. Reciprocity with Great Britain was favoured by all concerned.

The Saorstát Éireann Dentists’ Bill was introduced in April 1927, and reached the statute book on August 3, 1928.

By 1925 it had become evident that there was little chance of obtaining a Dental Act prior to the passage of impending medical legislation through the Dáil. As what were considered to be further grave irregularities in the practice of dentistry were constantly coming to light, Council finally instructed its solicitors to institute proceedings against stated individuals. Shortly prior to the hearing Council was informed that, as the Medical Bill was now expected to receive a speedy passage, the way was clear for the introduction of the necessary legislation. In the light of the altered situation it was decided to postpone legal action.

The Saorstát Éireann Dentists’ Bill was introduced in April 1927, but did not reach the statute book until August 3, 1928. At a General Meeting of the Association held on October 26, 1928, the members passed a vote of thanks to Mr P McGilligan, as Minister in charge of the Bill, for his interest and services while promoting the measure. Mr J Hogan, Dr K McGrath, Mr J Potter and Mr K O’Duffy were elected to the first Dental Board, and in order to carry out their onerous duties in an impartial manner they resigned their membership of the Association.

The first Board Meeting took place at the Custom House on November 19, 1928. One of the Board’s prime duties was to establish a Register according to the terms of the Act. Soon after this first meeting the following notice appeared in the Press:

“The Dentists Act 1928
The Dental Board give notice that the Register of Dentists for Saorstát Éireann will be established on the 15th of May, 1929. The fee prescribed for registration under section 26 of the Act is £3.3.0. Persons who desire to be registered pursuant to that section should remit the fee to the Board before the 15th May, 1929, by crossed cheque, made payable to the Dental Board, and state the date of their registration in the General Dentists Register. Persons resident outside Saorstát Éireann must in addition, make formal application to be registered. Persons desiring to be registered under Sections 27, 28, or 29 (i.e., those who have never been registered in the General Dentists Register) must make application on the prescribed form, copies of which may be obtained on application, and pay the prescribed fee of £5.5.0. Attention is drawn to the provisions of Section 45 of the Act in regard to the penalties to which unregistered or unauthorised persons who practice dentistry are liable.”

The first printed Register, in 1930, contained 556 names. Most of these people had previously been on the General Dentists Register, and of these about 250 were qualified by virtue of degree or licence. Approximately 275 were admitted under the category “Dentist 1928”. Thirty-two who were not on the General Dentists Register were now admitted under the category “Dentist 1928”, as a result of passing a special examination.

At the end of 1971 the Register contained about 780 names. Not all of these, of course, were actively pursuing the work of their profession. By far the largest group are those who qualified around the 1950-55 period. The offices of The Dental Board have been at 57 Merrion Square, Dublin, since 1930.
The beginning of the fourth decade found the Association in a more tranquil state. The foundations had been laid, positions had been consolidated and an environment of expansion and development had become apparent. Membership was now in the region of 150. The officers were acutely aware of their previous lack of diligence in the promotion of the scientific life of the Association, and now seemed determined to make good this deficiency. A pattern soon developed which showed great promise. Four General Meetings, to which all members were invited, were scheduled each year. Scientific papers on such subjects as: 'Treatment of Pyorrhoea accompanied by a film showing a Gingivectomy Operation', 'The use of Evipan in Dentistry', 'Minor oral surgery' and 'Intratracheal Anaesthesia' were presented by well-known educators in Britain. Members were free to seek advice on any personal problems of practice at the end of these meetings. The summer and autumn meetings, in which members of the Northern Ireland Branch of the British Dental Association were frequently invited to participate in a practical way, covered two days and included table demonstrations. Golf competitions were arranged for the Saturday afternoons, followed by a golf dinner. This latter function, at this period, was more or less looked on as the annual dinner of the Association. Readers will appreciate that the events immediately following the official dinner in 1923 were not calculated to encourage further participation, and so the function lapsed. An effort to revive it in 1929 did not bear fruit. It is with a feeling of regret that one has to
record that the next official Association dinner did not take place until 1935. Indeed, 1929 must have been a frustrating year as the summer meeting, scheduled for Killarney, had to be cancelled due to lack of support.*

**Becoming an international association**

Thus, the first half of this decade was a time of progress in the scientific life of the members, and through this an international outlook developed. In 1931 the Irish Dental Association was admitted to membership of the Fédération Dentaire Internationale at its annual meeting in Paris, at which upwards of a dozen Irish members were present. This liaison with the Fédération has been of great benefit to the Association, as shall be seen later. In spite of the disappointment suffered in 1929 the decision was made to hold the summer meeting in Galway, in 1933. Although the numbers that attended were small, it was by all accounts a successful and enjoyable event and received wide publicity.

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*The following extract from the circular informing members of arrangements for this meeting will be of interest:

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“Trains leave Kingsbridge, Dublin, at 9.30am arriving Killarney 3.30pm. Fare 35/- 1st class return. Luncheon baskets (hot or cold) available at Limerick junction 3/6 each. Accommodation and meals at GSR Hotel at 17/6 per day.”

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**Business affairs**

Whether it was due to the adverse economic situation that prevailed at this period, or whether it was due to the developing political situation in the international field, activity in the second half of this decade was mainly concentrated on business and political developments. Affiliation with the British Dental Association was achieved and conditions of service and remuneration for dental officers in the Public Dental Services were laid down. These proposed the establishment of a whole-time, permanent and pensionable service, with remuneration commencing at £450 per annum and that, pending establishment of this service, the remuneration of part-time dentists working at a clinic should be £3.3.0 per three-hour session, in addition to travelling expenses. Negotiations were entered into with the Minister for Defence on the conditions of service and remuneration of dental officers in the army. Discussions also took place with the Department of Industry and Commerce on the establishment of regulations for the training, under the Apprenticeship Act, of apprentices in dental mechanics. The Association’s rules were amended. The Public Dental Officers’ Group was established, and the Association was invited to help in organising the Annual General Meeting of the British Dental Association, which was held in Belfast in 1938. Looking back on the events of this latter period, one cannot but be impressed with the feelings of comradeship, good will and co-operation, which then existed between Association members and their colleagues in kindred organisations in other countries.
Chapter 5

The ‘Emergency and beyond

The writer was one of those who qualified at the commencement of what is euphemistically referred to in this country as the period of ‘the Emergency’. Younger readers will have scanty knowledge of the difficulties encountered, not only in the general life of the community, but also in the particular life of one practising dentistry. When one considers the superabundance of equipment and materials and the ease with which these can be acquired nowadays one must admire the tenacity, the courage and the expertise of those who maintained the high standard of dentistry during those difficult years. Money was no more plentiful than other commodities, and the writer was very pleased to acquire a position as house surgeon in the Incorporated Dental Hospital at £1 per week for six sessions. For those commencing practice the hazards were equally trying, and the writer’s gross earnings during his first year in practice amounted to £175.
The activities of Irish Dental Association during the earlier part of this period paint a rather depressing picture. Much time was spent on such mundane matters as seeking an extra allocation of clothing coupons for the purchase of white coats, seeking extra rations of petrol, gas and electricity, or arranging for the interchange of materials and small items of equipment between members. Scientific activities were very severely restricted, and members were confined mainly to their own localities for social life. Some colleagues with branch practices had, of course, to overcome the difficulties of travel, and older members will recall many humorous anecdotes associated with their efforts to pursue this objective. The holding of the official annual dinner was again discontinued in 1939, and was not resumed until 1945, when a gala dinner was held in the Royal College of Surgeons to do honour to a distinguished colleague, Professor E. Sheridan, who, a few years previously, had been President of that College. Professor Sheridan, who died in April 1949, had been President of the Irish Dental Association in 1926, and he had also been Chairman of the Dental Board of the United Kingdom for several years.

Achievements in difficult times

It would be wrong, of course, to give the impression that all major activity ceased during this period – indeed, Council had to its credit such fine achievements as the introduction of a Journal, the inauguration of a new National Health Insurance Scheme, the founding of the Odontological Society and, in 1944, the appointment of a part-time secretary. Membership had increased, and branches were established in such areas as Cork, Limerick, Dundalk, Drogheda, Cavan, and Sligo. These branches had not the same significance as those at present constituted, but were looked on rather as centres where eight or more members were prepared to meet and discuss problems of mutual interest. The ending of the emergency period proved not only to be a chronological landmark in the history of the Association but a psychological one also, as it ushered in a period of greater progress and activity. The publishing of the Journal was recommenced, the Benevolent Society was started, a detailed memorandum on public dental services was submitted to the Minister for Health, additional branches, in Donegal and Kerry, were established, and membership continued to increase. This latter development resulted in the appointment of provincial colleagues to the office of President. JB Moorhead, Tullamore, held that office in 1946, CV O’Malley, Limerick, in 1948, and JW Daunt, Cork, in 1949.

Educational disputes

The lack of opportunity for scientific advancement during the war years was instrumental in guiding many of the younger practitioners to seek an extra qualification in medicine. These, in addition to numerous other members, were now anxious to take part in refresher courses of a purely dental nature, in order to become familiar with modern developments and techniques. Those who were unable to travel abroad sought these facilities at home. Partially as a result of this development the Association found itself involved in a bitter controversy over the standard of clinical undergraduate training in Dublin and the lack of facilities for postgraduate education. The holding of the Annual Session of the Fédération Dentaire Internationale in Dublin, in 1948, was perhaps an additional factor in stimulating this spirit of unrest, as it afforded an opportunity to compare facilities here with those available in other countries. Matters reached a climax later that year and resulted in a breaking off of diplomatic relations between the Association and the Incorporated Dental Hospital authorities. The Board Room in the Hospital, which had been the physical and spiritual home of the profession for about 50 years, became unavailable for meetings.

The holding of an Annual Session of the Fédération Dentaire Internationale in Dublin, in 1948, gave a great boost to Irish dentistry.

The idea of the Association itself organising refresher courses was considered and, eventually, it was decided to go ahead with this venture. Alan Deverell, G Leatherman and Alan Mcleod, all of whom had been in Dublin some months previously, were invited to plan refresher courses for about 30 participants, to be held in Cork, in July 1949. These courses were so successful that they stimulated the idea of having similar ones in the Dental Hospital in Dublin a few years later.

Re-establishing European links

The holding of an Annual Session of the Fédération Dentaire Internationale in Dublin, in 1948, gave a great boost to Irish dentistry. After six years of inactivity the Fédération was again rapidly gathering momentum and the peaceful Irish environment attracted many overseas participants. Annual sessions, up to this, were restricted to business meetings of the Executive and of the various Commissions, but on this occasion scientific papers and reports were included in the programme. The programme was officially opened by An Tánaiste, Mr Norton, on August 3, 1948. Altogether, the Fédération was so pleased at the facilities and reception received that the Association was once again afforded the honour of organising the meeting 12 years later.

Health and politics

The Health Act of 1947 involved Council in a prolonged debate with the Minister for Health, Dr Browne, who had established a number of bodies to advise him on certain aspects of medicine. The National Health Council was set up in March 1948, and it consisted mainly of
persons nominated by the bodies referred to above. The Irish Dental Association was not, initially, given representation. A Dental Consultative Council was later established under the chairmanship of W Brady, the then chairman of the Dental Board. Its function was to advise the Minister, when requested, on various aspects of dentistry. Although there were many problems needing Council’s attention at that time, priority was given to the public dental services. A lengthy memorandum was submitted to the Minister, outlining methods by which this service could be improved. Scarcely had the discussion over the 1947 Health Act abated when an equally vocal and protracted one developed over the intentions of the new government in relation to its Proposals for improved and extended...
Health Services’ as outlined in a white paper published in 1952. This, in addition to a controversial ‘mother and child section’, intended to extend the existing dental services to cover those who were referred to as the ‘middle income group’. Bearing in mind what had happened in Britain only a few years previously, Council immediately got to work on the matter, and in an excellent memorandum again stressed the inadequacies of the existing public dental services as provided by local authorities, and the fatuousness of trying to extend these services to other groups. While the memorandum was to some extent critical, it was nevertheless also constructive, and it advocated once more the desirability of appointing a dental adviser to the Department of Health. It was, therefore, with a feeling of satisfaction that S MacNeill’s appointment to such a post was received early in 1953. For the next five or six years the dialogue on dental services continued unabated. During this time the theme was the subject of several valetudinary addresses.

During 1952, a Social Welfare Bill was also before Dáil Éireann and treatment under the National Health Insurance Society’s dental benefit scheme was interrupted while new conditions of service were being negotiated. The controversy over undergraduate and postgraduate education still raged and was eventually brought to the notice of the appropriate Minister. Illegal practice was a major problem in some parts of the country, and representation was made to the Dental Board to intensify its efforts towards its eradication. When, after some years of great effort, this evil practice showed no signs of being eliminated relations with the Board became, for a time, somewhat strained. It was hoped that an amendment to the existing Dentists’ Act, which then appeared imminent, would facilitate matters. Alas, no such amendment was introduced. At about this time also the initial suggestion that all dentists in this country should be given the courtesy title of doctor was voiced.

Developing the Association

The Association opened its ranks to members of the Incorporated Dental Society in 1951, the Journal was reorganised, and in conjunction with the Dental Board, a library was established. The annual subscription was increased to two guineas, the Odontological Section of the Royal Academy of Medicine had been inaugurated and many members attended the International Dental Congress in London, in 1952. At this time also, great interest was being shown in the prophylactic aspect of dental health likely to accrue from the addition of fluoride to drinking water. In 1952, Dr H Trendley Dean, one of the pioneers in this study in the United States, spoke in Dublin before a very representative and erudite audience. Dr Harold Hillenbrand, Secretary of the American Dental Association, was also at that time supplying us with up-to-date publications on the topic. The outcome of all of this was the passing of a resolution supporting the principle of fluoridation. This helped in no small way to initiate the new era in dental health to which the young children now bear ample testimony. This was indeed a period of much activity and of sustained effort in the life of the Association and reflects great credit on those who held office during this period. In particular one recalls the enthusiasm, energy and ability of Dan Gallivan, who was Honorary Secretary for several years at the turn of the decade, and to whom much credit is due. In 1955, Irish dentistry suffered a sad loss in the untimely and unexpected death of Professor K McGrath, who only a couple of years previously had been appointed Dean of the Incorporated Dental Hospital in place of DL Rogers, who had retired. Professor McGrath was succeeded as Dean by JF Owens.

In 1951, the Association opened its ranks to members of the Incorporated Dental Society, the Journal was reorganised a library was established.

About half way through this the sixth decade, as membership now stood at over 400, a measure of reorganisation within the Association was considered necessary. An Emergency Committee, later to be changed to an Executive Committee, was formed to deal with urgent matters arising between Council meetings. Branches were being reorganised – the Metropolitan Branch was inaugurated – and standing committees on such areas as ‘Educational and Scientific’, ‘Finance and Organisation’, and on the dental health services, were formed. Through the efforts of these committees a greater awareness of the problems facing the profession developed. Very soon, additional work was commenced on the ways and means of overcoming illegal practice, on the training of technicians, on the formation of a co-operative society and on a redrafting of the rules. An invitation was extended to the FDI to hold one of its Annual Sessions in Ireland, pressure was applied to the Department of Social Welfare for an additional increase in fees, and premises were rented for the headquarters of the Association in South Frederick Street, Dublin. This extra workload threw a very heavy burden on the part-time secretary. Tony Flynn had been acting in this capacity for the previous 14 years, and it soon became apparent to all that the desired progress could not be anticipated unless the officers of the Association and of the committees had the benefit of a more broadly based and full-time secretariat. With this object in mind, the following resolution was passed at the Annual General Meeting of 1957: “That this Annual General Meeting directs the incoming Council to appoint a general secretary and to raise the annual subscription to £10”. In March 1958, JJ Ivers was appointed to the post of General Secretary. This began what may well prove to be the period of greatest progress in the life of the Association.
Maintaining scientific input

Although the emphasis was on the political and administrative aspect of our activities throughout most of this decade, the scientific viewpoint maintained its measure of attention. Eminent lecturers from Britain, the United States, Norway and Ireland were invited to present their subjects. In 1956, a further refresher course on ‘Full Denture Prosthesis’ under the direction of JH Lee, London, was held in Cork, and in Dublin a series of annual refresher courses, which continued for a number of years, was commenced. Upwards of 20 members attended the FDI Congress in Rome in 1957, and constant efforts were being made to improve the content of the Journal.
Fortified by the knowledge that it now had a full time secretariat, Council initiated an intensive programme of work, which included the following tasks: to undertake a comprehensive review of the Social Welfare Dental Benefit Scheme; to pursue with vigour the objectives sought by the Public Dental Officers; to investigate the possibilities of publishing the Journal under its own management; to re-examine and if necessary to reorganise the local and central administration of the Association; and, to establish an overall policy on State dental services.

Controversy still existed with the Department of Health over the funds that were made available by some local health authorities for the provision of dentures for lower income group adults, rather than on improving the service for school children as had been mutually agreed. Efforts were also being made to establish, in conjunction with laboratory owners and trade union officials, a method whereby a system of training and registration could be provided for dental technicians. Proposals for the setting up of a Propaganda Committee, later to be renamed the Health Education Committee, were approved, and a sum of money was allocated towards the purchase of teaching aids. The range of services available to members was also to be enlarged.

In 1958, the summer meeting was held in Cork under the Presidency of Barry Collins. About this time the Fluorine Consultative Council, which had been established by the Minister for Health some years previously, issued a report in which it advocated fluoridation of the public piped water supplies. It also recommended the introduction of any legislation that would give local authorities statutory power to undertake this task. The Association was committed to the principle of fluoridation, and it now gave full support to the recommendations contained in the report. By this time, the Executive Committee was so well established that Council meetings were reduced to a whole-day session every three months.
A European surprise
To this elaborate agenda of work was soon to be added an extra and urgent responsibility. Early in 1959, Council was requested, in a letter from the Secretary-General of the Fédération Dentaire Internationale, to mount the 1960 Annual Session of the Federation, instead of the 1961 Session, which had previously been agreed. In spite of the many difficulties that such a request presented, it was felt that every effort should be made to help the Fédération in the difficulties in which it unexpectedly found itself. Council therefore accepted the invitation and immediately set up an Organising Committee, under the chairmanship of D Gallivan and consisting of D Gogarty, RB Dockrell, K Harrington, J McMahon, S Thornton, N Hogan, T O’Grady, JG Delany and R Ryan. Four subcommittees were established to deal with particular aspects. In all, about 40 people were actively engaged. In addition, a ladies’ committee was extremely active. Extra office accommodation and staff were immediate necessities, and so a new headquarters was acquired at 23 Harcourt Street, Dublin, on a ten-year lease, at approximately £230 per annum. With such a programme, the year 1959 became a busy one.

The summer meeting was an elaborate endeavour, consisting of an exhibition on dental propaganda by the local committee, and scientific lectures and demonstrations by members of the United States Air Force Dental Corps. Many will recall Lt.-Col Wilborn’s dramatic introduction to his lecture on facial injuries, which was most impressive, and which showed how a lecture on this theme could be presented to create the greatest impact.

Controversy existed over funds made available by some local health authorities for the provision of dentures for lower income group adults, rather than for improving the service for school children.

Further domestic developments
In the autumn, D Gallivan, the President of the Association, attended the Centennial Meeting of the American Dental Association in New York. He took with him, for presentation to that organisation, a beautiful Waterford Glass tray. The policy of recruitment of those members who, for one reason or another, had lapsed during the previous year or two, was bearing fruit. An example of the interest and
activity, which was then developing in branch areas, was evident when, in October 1959, a two-day seminar on ‘Propaganda and Children’s Dentistry’ was held in Tralee. During this meeting favourable mention was made of the scheme, recently introduced by the Kerry Health Authority, for the treatment of dental needs of the school children in that county.

Among the first tasks allotted to the Scientific Committee was the organisation of the scientific section of the meeting arranged for Killarney in 1961.

The effort that was being put into organising the 48th Annual Session of the FDI, a fuller report of which is given later, was not allowed unduly to interfere with ordinary Association business and some significant developments on the domestic front occurred. It was indeed a memorable year from many points of view, and a busy one for the President, Desmond Gogarty. New terms were negotiated with the Department of Social Welfare and agreement was reached on raising the limit to which treatment could be completed without prior approval. Considerable advances were made by the Health Education Committee, some of whose members attended a course in public speaking in order to improve their method of presentation. Lectures on oral hygiene and associated topics were then being given regularly to organised groups. At this period an intense interest in modern advances in practice management developed; it rapidly gained momentum and was to last throughout the whole of the decade. This resulted in many innovations being applied to the practice of dentistry in Ireland. It perhaps received its initial impetus from a seminar on this topic held in Skerries in October 1960. Towards the end of that year a degree of restructuring of committees took place and the Scientific Committee, as we know it today, was formed. Among the first tasks allotted to the Scientific Committee was the organisation of the scientific section of the meeting arranged for Killarney in 1961, and the preparation of a report on dental education for consideration by Council and for possible submission to the Commission on Higher Education. When this report was presented some six months later, it aroused a spirited debate. Some Council members held that the Committee had gone outside its remit by pronouncing on undergraduate education, while others held that it was perfectly within its right to do so. Eventually, with only minor alterations, the memorandum was forwarded to the Commission. This Committee kept its standards high by organising an excellent meeting for Killarney. The theme chosen was ‘Full Denture Prosthesis’. Alan Lawson from the Eastman Dental Hospital, London, was the guest speaker. He was ably supported by several home speakers. The local branch, under the auspices of the President of the Association, Frank Scully, and Branch Secretary, Ted Clifford, dispensed hospitality, as is their custom, in a most bountiful way. With such excellent hosts and a well-organised programme, it is almost superfluous to say that the meeting was most enjoyable and successful.

The Public Dental Officers had, at this time established a very active group organisation, which had representation on Council, and which received all the facilities available to the branch organisations. Prominent among their activities were their annual seminars. Those scientific activities were well organised, well attended and usually presented at least one well-known international speaker on some relevant topic. Dr Backer-Dirks from Utrecht addressed their meeting in Galway in October 1961. Activity on the dental health education front continued; several popular radio programmes were now including references to oral hygiene and, in August 1961, a display stand was in operation at the Dublin Horse Show. With the surplus funds from the FDI meeting of the previous year, the Irish Dental Association Burse was established. It took the form of a prize, to be awarded for the best original paper on any subject relating to dental science, its practice or its administration.
Change and controversy were to be the ingredients of the period immediately ahead. At the FDI Session in Dublin a report was presented on the training of the dental technician. This report was followed by a questionnaire, which was sent to all national dental organisations. An analysis of the replies was disappointing. It showed that there were too many technicians for whom no formal course of training had been established and that there was a shortage of the more skilled type of craftsman. The position in Ireland also followed this pattern. It so happened that at that particular time the Irish Government was planning for a period of more rapid industrial expansion, and as an essential prerequisite it was considered that a formal and well controlled system of apprentice training was necessary. The training of dental apprentice technicians was included in that programme. A voluntary apprenticeship committee, on which representatives of the workers, of the employers and of the educational authorities sat, was thus established. This voluntary committee was replaced by a statutory committee, on which the Association has two representatives, which regulates the recruitment and training of apprentices to this craft throughout the State. The unsatisfactory position which existed some ten years ago was now in the process of being rectified. A few years prior to this, there was established in Europe an organisation consisting of dental technicians, whose object it was to seek the right to work direct with the public. Branches of this organisation were established in many countries, including Ireland. In 1960, the ‘Irish Association for Dental Prosthesis’ issued a memorandum stating its reasons for seeking this right for its members, and called on the Minister for Health to legislate for such a position. Council immediately established a committee to examine this submission, and to prepare a reasoned reply to the points raised. An extensive memorandum, reviewing both the international and the national situations, was prepared and later forwarded to the Department of Health. Little has been heard of this organisation since then.

On the passing of the Dentists’ Act of 1921, the General Medical Council was made responsible for upholding the standards of graduate education in those schools whose graduates were free to practice in Great Britain and Ireland. In 1957, the General Dental Council was given this responsibility. In order to satisfy itself that these standards were of a sufficiently high and uniform quality, a system of periodic visitation of the schools and of the hospitals responsible for clinical training was necessary. One such visitation took place in 1961, in Dublin and Cork. While the Irish Dental Association had not direct access to any reports from the General Dental Council, nevertheless, indirect reports seemed to give support to the general impression of uneasiness in relation to the facilities available in the dental hospitals. This matter was raised at Council, and a letter was sent to the Minister for Education seeking fuller information and requesting him to meet a deputation on the subject. The Government had, at this stage, accepted a greater measure of responsibility for the administration of the hospitals and had established a ‘Dublin Dental Hospital Board’ on which the three Dublin teaching schools and the Irish Dental Association had direct representation. A major re-organisation, both in structure and in the academic personnel, was now also underway. Advertisements appeared seeking applicants for full-time Senior Consultant posts, full-time Junior Consultant posts, full-time Instructor Technicians, and a full-time Radiographer. To Dr RB Dockrell fell the honour of being appointed Chief Consultant. Soon afterwards a somewhat similar re-organisation in the Cork School resulted in the appointment of Dr B Barrett as Director of Dental Studies.

A major re-organisation of the three Dublin teaching schools, both in structure and in the academic personnel, was now underway.

At that time another event, the groundwork for which had been laid by the School Dental Committee and planned by a special Steering Committee, was approaching fruition. In November 1963, the Faculty of Dentistry of the Royal College of Surgeons in Ireland was inaugurated. In a very impressive ceremony, Foundation Fellowships were conferred on 40 Irish Dentists.

Scientific meetings
In April 1962, the scientific meeting of the Irish Dental Association was held in the College of Surgeons. The programme, presented by a group of overseas dentists supported by Irish participants, was very attractive and included panel discussions and demonstrations. Several Irish dentists attended the XIII International FDI Congress in Cologne and the President of the Irish Dental Association, John F Owens, Adrian
Cowan and Colm O’Sullivan contributed to its scientific programme. The Association was also greatly honoured by the appointment of Drs Owens, MacNeill and Cowan to important commissions of the Fédération. Dr Cowan was later to be appointed Secretary of the Commission on Dental Education.

Two major scientific meetings were held during 1963, one in Bray, the home town of the President, GV Lavelle, at which WA Vale, Guy’s Hospital, was the principal guest speaker, and the other in Killarney. In addition to the grant that was received annually from the Dental Board, the Association was fortunate, at that time, in having some of its meetings sponsored by a well-known pharmaceutical firm. The Public Dental Officers held a very successful seminar in Waterford in the autumn of that year. The theme under discussion was ‘Dental Health Education’. Guest speakers included F Rowntree, J Colin Davis and D Land. The Association’s committee on this subject co-operated by organising, at the same time, a Dental Health Week in Waterford; just prior to this a similar ‘week’ had been organised in Cork. The ‘Incisor Club’, which had been started some years previously as a savings medium, was at that time in the process of being dissolved and the efforts of its members were being directed to the formation of the Irish Dental Credit Union.

Busy times

There were some lively discussions in Council during this period, not the least of which arose over the proposal by the Ancillaries Committee to plan a course of training for dental surgery assistants. Other topics that caused contention were the treatment of school children on a sessional basis in private surgeries, the proposed amendments to the rules, the feasibility of establishing an agency for the purchase of dental supplies and the desirability of changing the Association into a company. Whether or not it had any connection with these issues, one has to record that the Executive Committee, which to all outward appearance had been working satisfactorily, was dissolved towards the end of 1962. Members will also recall the great controversy which then raged over the proposal by the Ancillaries Committee to appoint Chief or Senior Dental Officers; the publicity attached to the High Court appeal on fluoridation; the appointment of several members to sit on important commissions of the FDI; and, the appointment of a member, TG Meehan, to fill one of its part-time secretarial posts. One must also include: the establishment of the Fellowship in the Faculty of Dentistry; the erudite scientific programmes of the Odontological Section of the Academy of Medicine; the scientific programmes that were being brought to each branch area; and, the increasing affluence and feeling of confidence of all members of the community. One should not, of course, forget the friendly and stimulating influence of the ladies’ committee, which had been established for the FDI meeting, but which had been kept in being for the benefit of the Benevolent Society. All of these factors were having varying degrees of influence on the development of a new era in Irish Dentistry.

Through this evolution it was now also possible to see a definite plan emerging, relating in particular to the organisation of the Annual General Meeting. The year 1964 brought this planning one step nearer its objective by combining the Annual General Meeting, the Annual Dinner, and an ambitious scientific programme at the Great Southern Hotel, Galway, from April 30 to May 3. The most attractive part of the scientific section proved to be the table demonstrations, which were ambitiously planned and excellently executed. The installation of JF Thornton as President for the ensuing year was a source of pleasure to all members. In the autumn a further scientific meeting was held in Limerick as part of a Dental Health Education campaign in that city. During 1964 it was decided to increase the annual subscription rate, but to soften the impact of this there was a welcome increase of 20% in the Department of Social Welfare Dental Benefit Scale of Fees. A change in the editorship of the Journal occurred when F Nally replaced F Ryan, and the number of issues was increased from four to six per year. The discussion on ‘sessions for school children and for lower income group patients’ was renewed with greater emotional involvement than heretofore. One is happy to recall that since the final obstacle had now been surmounted by the successful outcome of the protracted litigation on the issue of fluoridation, a start was made in implementing the terms of the Act. The Dublin public piped water supplies were fluoridated in July of 1964 and by 1971 75 supply outlets, serving approximately half of the total population of the Republic, were being fluoridated.
The year 1965 will probably be remembered most for its degree of scientific achievement. The success attached to the previous year’s meeting in Galway supplied a sufficient measure of confidence to a united and happy Scientific Committee to spur it on to greater endeavour, and so it was that within a couple of months the date, venue and draft programme for the following year had been determined. Having particular regard to the statutory obligations contained in the Health and Social Welfare Acts, which at that time were the cause of much concern and anxiety to members, the theme chosen was ‘Whither Dentistry in Ireland’. This took the form of a symposium with a panel of five speakers: Mr FL Morrin, Lecturer in Political Economy, University College Dublin; Professor RB Dockrell, Dublin Dental Hospital; Professor E Matthews, Dental School, Manchester; Mr J McLoughlin, Secretary, Medical Union; and, Mr R Lamb, Secretary, Dublin Health Authority. The success of the table demonstrations in Galway demanded an extension of that section of the programme. Through the winter and early spring the preparatory work continued, invitations were accepted, directions were issued, hotel space was meticulously measured and allotted according to requirements, and an inventory was made of all articles likely to be needed. Rarely indeed in our history had a domestic event been subjected to such a degree of precision analysis and preparation. A symposium of five speakers, it was considered, would have to be very carefully controlled in relation to subject matter and timing. The panel
was brought together beforehand and agreement on these points was reached. From the number of bookings it was obvious that more than usual of the 400 members intended being present from April 22-24 in Waterford, the city of the President for the year, Roland Gallagher. An extract from an editorial in a later issue of the Journal conveys the general impression of members. “It would appear that a new era is dawning on Irish dentistry. The highly praised Annual Meeting at Galway last year was followed this year in Waterford by a scientific programme that many outside observers said was equal to the highest international standard. Even before the meeting there was a keen interest shown in the projected programme from many overseas bodies including the British Dental Association, the USA and as far afield as Leningrad University and Hong Kong. Congratulations are rightly due to all concerned in the organisation and presentation of such an outstanding event. New ideas infused into Irish dentistry can do nothing but good in awakening an enthusiasm among all to improve standards in practice and also to advance present frontiers of clinical dental research. Further efforts to improve the image of Irish dentistry are being made at the Annual Meetings of the British Dental Association and the International Dental Federation”.

International connections

In June, the British Dental Association held its Annual Conference in Belfast under the Presidency of Dr JC Smyth, who practised for many years in Belfast, but who was born and educated in the Republic. An invitation to participate in the scientific section was gladly accepted by the Irish Dental Association and was brought to successful fruition by the presentation of a symposium on ‘The Fractured Incisor’ by a team of four, and by the presentation of table demonstrations by some seven or eight additional members.

The 53rd Annual Session of the FDI was held in Vienna later that month. Many of our members attended and the ‘Fractured Incisor Team’ had the honour of participating in the scientific programme. On Tuesday, June 29, the Irish delegation, on behalf of the President and members of the Irish Dental Association, made a presentation of an oil painting of the West of Ireland by FF Nally, the accomplished editor of the Journal, to the President of the American Dental Association. This presentation was made for the new American Dental Association headquarters in token of the appreciation of what that organisation had done for Irish dentistry.

The dentist and the public

Earlier in June 1965, the new Dental Unit of Our Lady of Lourdes Hospital, Drogheda, which was donated by an American dental surgeon and his friends, was formally opened by the then Minister for Health, the late D O’Malley. In his address, the Minister clarified some of the complexities in relation to the availability of dental treatment under the Health Acts. This was an appropriate occasion, as at this time an overall policy for participation by members in the provision of treatment for eligible groups was being formulated. Indeed, it would be true to say that in the dental political field this problem was uppermost in the mind of colleagues and it influenced the choice of theme for the meeting in Galway in April 1966. For the symposium on ‘The Dentist and the Public’ the contributors were Dr H Hillenbrand, Secretary of the American Dental Association; Major General JL Bernier, Chief of the Dental Corps, US Forces; and, Dr V Diefenback, Acting Head of the Division on Dental Health, US Public Health Service. Dr G Leatherman, Secretary-General of the Fédération Dentaire Internationale, was also in attendance. This meeting, at which JE Keith of Dublin was installed President, followed a similar pattern to that of the previous year. Again, it was most successful from all points of view.

The year 1965 will probably be remembered most for its degree of scientific achievement.

That these elaborate programmes were having the desired effect was being borne out in another way. There developed at this time a great demand for refresher courses in nearly all areas of dentistry. While the Dental Hospitals in Dublin and Cork were anxious and willing to oblige, it was not always possible to make suitable arrangements, or to meet the requirements of intending participants. The Irish Dental Association undertook, therefore, to organise additional courses. They were directed mainly by part-time hospital staff, and were held usually at weekends in hotels throughout the country or in private surgeries. The authorities of the dental hospitals co-operated to the fullest extent both in the planning of these courses and in the mounting of the annual scientific programmes, the timing of which had now been arranged to coincide with the Easter holidays. By this time it had come to be realised that additional and more permanent accommodation was necessary if the expected and desired expansion of activities were to be achieved. For a voluntary Association with slightly over 400 members, at an annual subscription of 15 guineas each, this posed a major problem and it was only after much consideration that it was decided to purchase 29 Kenilworth Square, Dublin, for approximately £8,500.

The Public Dental Officers held their seminar, the eighth of the series, in Parknasilla in October 1966, at which Professor JJ Holst of Copenhagen and Dr WH Bowen of London were among the guest speakers. At their Annual General Meeting dissatisfaction was once more expressed at the very slow progress that was being made in the revision of the salary scale. The unattractiveness of the scale then in operation was, it was stated, so adversely influencing the recruitment of personnel that the school dental service was disintegrating. Council
was indeed perturbed, not only at the position in the school dental service, but also with the much wider issue of providing treatment for all those eligible under the Health Acts. A Health Services Committee was set up to investigate and report on all aspects of socialised dentistry in this country. When this report was considered, Council sent a memorandum to the Minister for Health outlining a plan calculated to improve recruitment of Public Dental Officers and recommending the utilisation of the services of private practitioners on a fee-for-service basis in the provision of treatment for lower income group patients. The Minister accepted the recommendations relating to recruitment of Public Dental Officers.

At the Public Dental Officers seminar of 1966, dissatisfaction was once more expressed at the slow progress being made in the revision of the salary scale.

In the meantime, local health authorities were advertising, seeking the services of private practitioners on terms and conditions that were contrary to Association policy. A measure of intransigence gradually developed, which has existed with varying degrees of intensity to the present time. It should be understood that the Association was quite willing to play its part in developing the necessary services. It was, however, anxious that these services should develop in a fair and equitable manner.

Development and expansion
An effort was also being made to adopt a system of planned expansion. The holding of a 50th Anniversary Congress was agreed, membership of the Federation of Professional Associations was arranged, discussions on the extension of categories of ancillary personnel were initiated, and a new and long-term rota system for the selection of Presidents was agreed. The incidence of illegal practice was still the cause of grave concern and, in an effort to strengthen the hand of the Dental Board in eliminating this evil, a special issue of the Journal, entitled ‘The Hazards of Illegal Practice’ was published.
The next Annual Scientific Meeting and dinner were held in Wexford and PG Reynolds from Kilkenny presided. The year 1967 was a comparatively peaceful one. It was also the year in which the Association decided by referendum to adopt the courtesy title of ‘Doctor’ among members. It was hoped that provision would be made in the eagerly awaited amendments to existing dental legislation to allow for the more general use of this title. Several members attended the FDI Congress in Paris and some participated in the scientific and table demonstration programmes.

Dissatisfaction with Government
Towards the close of the year it was obvious that dissatisfaction was mounting at the lack of progress in negotiations with Government Departments. This spirit of unrest was aggravated, perhaps, by increases in laboratory charges, by increasing disparity between private and social welfare fees, by increasing numbers of young dentists returning from England anxious to establish practices here, and by the recent awards to professional people in the public sectors. It was not surprising, then, to find several controversial motions on the agenda for the Annual General Meeting in Bundoran, in April 1968, at which GT Berney of Dublin was installed President. The debate at this meeting was very frank but not very conclusive, and some of the controversial issues remained unresolved. The scientific and social programme, though still of a very high quality, suffered a little from a certain unpreparedness on the part of the hotel management. We were fortunate to have as guests the President and some of the officers of the FDI. The trade display, which had been initiated the previous year, was again held.

In November of that year a Special General Meeting was held in Athlone. This meeting was noteworthy, inasmuch as it revealed certain undercurrents of discontent and dissatisfaction of which members of Council as a whole were not fully aware. From the feeling of the meeting, and from the resolutions passed, it seemed obvious that a major overhaul in the terms governing the provision of Social Welfare treatment was necessary. Council was asked to report progress to a further Special General Meeting to be held the following February. Readers may follow the sequence of events in Social Welfare negotiations in the special section at the end of this booklet. The pressures now developing within the Association were destined to continue for several years. They were placing a very great additional burden of work on the secretariat and on the honorary officers.

Continuing education and specialisation
The thirst for scientific knowledge continued and was being catered for in many ways. Most branches held at least three meetings during the winter session to which the Scientific Committee appointed speakers. The larger, and perhaps better organised, branches such the Metropolitan, the Munster and the Midland, held meetings more frequently and to a very large extent organised their own affairs. They frequently invited important personalities to deliver addresses on topical subjects.

Readers may follow the sequence of events in Social Welfare negotiations in the special section at the end of this booklet. The pressures now developing within the Association were destined to continue for several years. They were placing a very great additional burden of work on the secretariat and on the honorary officers.

As the number of members holding postgraduate qualifications had increased, the tendency towards limiting practice to certain areas of treatment was becoming more evident.

The Academy of Medicine offered an erudite programme not only on dental matters but covering the entire medical field. The Faculty of Dentistry at this time was expanding its scientific programme and was arranging a series of winter lectures. By including the excellent PDO seminars, and the refresher and postgraduate courses that were being mounted by the Association and by the Cork and Dublin Hospitals, one gets an idea of the amount of information that was available to those in quest of knowledge. The International Symposium on Periodontal Disease at University College Cork in July 1969, at which half-a-dozen well-known speakers from Europe and America participated, is only one example of what was taking place. Through the expanded Dental Health Education programme the general public was being constantly reminded of the need for dental care. Proof that the message was being learnt was evident from the increasing demand for the more sophisticated types of treatment.

As the number of members holding postgraduate qualifications had increased considerably, the tendency towards limiting practice to certain areas of treatment and towards the development of group practices was becoming more evident. There was as yet no specialist...
register by which those wishing to limit their practices could be identified, though the preparatory work for the establishment of such a register was in progress. In the meanwhile, however, the Annual Scientific Meeting, through its symposium, table demonstrations, and mini-lectures, was to a very large extent benefitting from these developments. Here one had a platform for a very personal and friendly exchange of views between those wishing to impart specialist knowledge and those in quest of it. The Scientific Committee, on whose shoulders fell the responsibility for organising these annual meetings, deserves great praise, and at the annual dinner in Killarney in 1969, the President, John B Lee, referred to the Chairman, Frank Allen, and the other members of this committee as the ‘whiz kids’ of Irish dentistry. This particular meeting attracted a large and, indeed, international audience. The weather throughout was perfect. Over 200 people, including the President of the British Dental Association, an official representative of the American Dental Association and colleagues from several other countries, sat down for the Annual Dinner. Press and television personnel helped greatly by giving the meeting wide coverage. There can be no doubt that at this time the image and status of the profession in Ireland was at a very high level.

The Kaim-Caudle report

In October 1969 a report was published by the Economic and Social Research Institute on Dental Services in Ireland. The author of this report was Professor PR Kaim-Caudle. It was the first of several papers on various branches of the health services in Ireland. The object of the report was:

1. To describe the service and attempt an evaluation of its costs and benefits.
2. To compare the service with those of other countries.
3. To ascertain whether changes in the organisation of the service might increase the benefit it renders without appreciably increasing costs.
4. To assess the benefits that might be obtained if increased expenditure were to be devoted to the service.

The report, which was well produced, and provided many facts and figures of great importance, maintained a detached and dispassionate viewpoint throughout. As Professor Kaim-Caudle is an economist by profession the views expressed did not always coincide with those of the dental profession. The booklet received very wide publicity both in the press and on the radio. The Irish Dental Association was given ample opportunity of expressing its point of view and a series of critical reviews was published in the Journal.

Soon after this the special Committee, chaired by PL Heslin, and established by Council to advise on the use of ultra-light anaesthesia and intravenous sedation in dentistry in Ireland reported.

Loss of distinguished personnel

Early the following year the Association lost a most distinguished member. On February 2, 1970, Professor E Sheldon Friel died at his home in Dublin. As is shown by the many degrees, diplomas and honours that were conferred on him, Professor Friel was the most distinguished dentist, internationally, that Ireland has produced. He was the second Orthodontic Specialist in Europe and the first in Ireland. He travelled extensively both in the pursuit of knowledge and to give others the benefits of his observations. He was responsible for many publications in international literature. He held many academic appointments and was during his lifetime president of many organisations including that of President of the Irish Dental Association in 1932. He was also Honorary Secretary of our Association for a short period.

In October 1969, the Kaim-Caudle report on dental services in Ireland was published by the Economic and Social Research Institute.

Early in 1969 Fergal Nally, who had been editing the Journal for a number of years, left to take up a senior academic post in London. He had done much to improve standards during his stewardship and contributors to the Journal will readily acknowledge the expert help he in offered preparing, in particular, the illustrations that accompanied their articles. The members were indeed fortunate in having in the person of Walter Allwright an excellent replacement. His wide international experience as clinician, teacher and administrator has been of great benefit in overcoming the many problems that confront an editor. Under his guidance, and with the help of his two sub-editors, Seamus O’Hickey and Aidan Reilly, the Journal has continued to develop.

New administration promotes the Association

At the Annual General Meeting in Killarney an Executive Committee was formally established and its members, together with the other members of Council, were kept busily engaged. Discussions were initiated on: the changes thought desirable in any proposed amendment to the Dentists’ Act; investigation into the possibility of establishing a contributory pension scheme for members; the formulation of policy on the provision of treatment for those patients eligible under the Health Acts; and, how a better liaison could be established with dental laboratory owners. A rationalisation of all standing committees was effected and those members engaged in planning the 1972 Anniversary Congress in Killarney intensified their efforts.

In October 1969, the President of the Association and Chairman of the
1972 Committee' and about a dozen other members attended the combined meeting of the American Dental Association and the Fédération Dentaire Internationale in New York. Prior to departure it was arranged that the Irish Dental Association, in conjunction with Bord Fáilte and Aer Lingus, would give a reception to which important personalities would be invited. This proved a very happy idea, and it certainly fulfilled its primary function of promoting interest in the anniversary meeting. During visits to Boston, Washington, Philadelphia and other cities by members of the Irish party, friendships were made through which it was hoped that American dentists, particularly those with Irish links, would be encouraged to participate in our celebrations. In October 1971, Frank Allen, Chairman of the ‘1972 Scientific Sub-committee’ attended the American Dental Association Meeting in Atlantic City. During his visit final arrangements were made for the participation by some colleagues from Massachusetts in the scientific programme. Towards the end of the year the Honorary Secretary of the Committee, JB Moloney, reported that booking had at that time been received from over 200 people from America. This was very encouraging news and augured well for the success of the meeting.

Meeting challenges

Art McGann, who had been very active in the Association’s affairs over many years, had the honour of being elected President at the Annual General Meeting held in Ennis in April 1970. It was a well-attended and very successful meeting. The standard of debate on the many items on the agenda was particularly good. His year in office was not an easy one as the issues relating to Social Welfare and Health Act patients were becoming rather acute. The resignation of the General Secretary, Mr J Ivers, in June, added to his difficulties. These were surmounted, however, by the President’s patience and understanding, and by the skill and enthusiasm of Lt Col. Whelan, the Honorary Secretary and Chairman of the Executive Committee, who immediately took over the duties of the General Secretary. These duties he continued to perform until T Leacy was appointed Executive Secretary in April 1971. Besides being a difficult year it was also an extremely busy one for the officers and Council members. Two Special General Meetings were held prior to the holding of a referendum on the issues of social welfare practice. During the year a detailed cost of practice survey was produced by a firm of consultants at Council’s direction. This firm was also asked to advise the Association on staff organisation and clerical methods. Apart from Mr Leacy’s appointment the main problems confronting the Association were still unresolved when members met in Bundoran for the Annual General Meeting in April 1971. On the broad shoulders of Donal Bonar, a native of County Donegal and a practitioner in that county for some 30 years, was bestowed the honour and responsibilities of leading the profession for the ensuing 12 months. Nobody underestimated the difficulties that lay ahead and few envied the new President and his Council their task in assessing the problems and guiding the profession through the delicate situations that were now developing. The issues relating to Social Welfare dentistry and the planning of the Anniversary Congress occupied most of Council’s time during the period up to March 1972. At the Annual General Meeting arranged for that month, SM Thornton will have the honour of being installed President for the Golden Jubilee Year of the Irish Dental Association.
was to consider the terms of an agreement and a fee structure, both consultation with representatives of the Incorporated Dental Society, from the Commission, established a sub-committee which, in persons. The Council of the Association, having considered the request some measure of dental treatment as an 'Additional Benefit' for insured with dental organisations on the conditions on which it would provide reaching a degree of finality, and it was anxious to reach agreement a representative. By 1927 the deliberation of the Commission was operative in Ireland. The fee for a full upper and lower denture was £3. was aggravated and it was not until 1921 that dental benefit became years, however, the inevitable delay associated with such innovations approved by the following year. Due to the intervention of the war scale of fees. The principle of participation in such a scheme was finally committee was formed and directed to draw up an agreement and a scale of fees. The principle of participation in such a scheme was finally approved by the following year. Due to the intervention of the war years, however, the inevitable delay associated with such innovations was aggravated and it was not until 1921 that dental benefit became operative in Ireland. The fee for a full upper and lower denture was £3. When the National Health Insurance Commission was set up here soon after the Irish Free State was established, it had the assistance of a dental advisory committee, on which the Irish Dental Association had a representative. By 1927 the deliberation of the Commission was reaching a degree of finality, and it was anxious to reach agreement with dental organisations on the conditions on which it would provide some measure of dental treatment as an 'Additional Benefit' for insured persons. The Council of the Association, having considered the request from the Commission, established a sub-committee which, in consultation with representatives of the Incorporated Dental Society, was to consider the terms of an agreement and a fee structure, both of which were to be renegotiated annually. Members will be interested to know that even in those days the profession sought the inclusion of a clause giving the dentist the right to decline acceptance of a patient seeking treatment under the scheme. It should be pointed out that, at this time, several approved Insurance Societies were operating similar schemes under the general guidance of the Dental Advisory Committee. Also in operation were guild systems whereby members of a guild could receive dental treatment at a discount rate from any dentist operating on a particular guild panel. The members of the profession looked on all of these systems as being of a semi-charitable nature. One should also bear in mind the special circumstances prevailing at that time: dental health education had not yet been initiated; neither the profession nor the patients had yet been motivated into the conservative ideal; a large portion of those on the dental register had not received a diploma or licence of a teaching establishment; and, the economic circumstance of a large proportion of the population was precarious. Little thought, therefore, was given by the profession to a method of costing each individual fee. As long as the fees for dentures were reasonably satisfactory, little opposition to the overall plan could be expected. We still labour under some of the shortcomings of the agreements finally negotiated at that time. Additional benefits, unlike statutory benefits, are dependent on the resources available and, therefore, may be suspended for any period of time. During the 1930s conditions in the dental benefit sphere of activities were reported as unsatisfactory, and towards the end of that decade benefits were suspended. This was due both to the unavailability of funds and to the re-organisation, which was necessary in anticipation of amending legislation. The new Act eliminated the role of the approved societies and placed full administrative responsibility on the National Health Insurance Society. Two different types of schemes were suggested: a fee per item of treatment service or a clinic system. A referendum among the members disclosed a majority in favour of the former, but only at higher fees than were at that time suggested. Most of the members were also anxious to have some form of grant-in-aid or contracting-out permitted. The Society would not, however, consider such a plan and sent a copy of an agreement of a fee-for-service basis to all dentists on the register, inviting them to sign. Eventually, in November 1942, a further referendum showed a large majority of members in favour. As the fees
accepted on that occasion formed the basis of the increases granted up to quite recently, it will interest members to itemise some of them:

- Extractions: 2/6 for one tooth to a maximum of £1–5–0.
- Fillings: 7/6 for one filling, maximum for one tooth 12/6.
- Dentures: full upper and full lower denture 6/0–0.
- Crowns: £1–12–6 including any necessary root treatment.

A 10% increase was allowed during the period of the emergency.

These fees did not, of course, attract all members of the profession. The agreement was for a quinquennial period, and as fees formed part of the agreement, both were negotiable after that period of time had elapsed. Participation in the scheme was confined to those insured workers earning less than £250 per annum, and approval had to be obtained prior to the commencement of work. Lest any of the younger generation of dentists frown with contempt on the fees shown above, it must be pointed out that this was a period of great emergency in the country; all supplies, including dental supplies, were very difficult to obtain and money was a very scarce commodity. There was little demand for dental treatment, other than emergency treatment, and dentistry as a career was not attractive to those about to enter the university. It should also be remembered that there were, at that time, two dental organisations: the Irish Dental Association and the Incorporated Dental Society. For these reasons bargaining powers were not as effective as one would have wished.

Members will be interested to know that even in those days the profession sought the inclusion of a clause giving the dentist the right to decline acceptance of a patient seeking treatment under the Social Welfare scheme.

The administration of the scheme was by no means perfect and during the next few years relations between the dental organisations and the National Health Insurance Society became somewhat strained. Resistance to the renewal of the agreement mounted as the quinquennial period drew to a close. After some preliminary discussions the Society submitted a revised scale of fees to all members of the profession and invited them to operate it for what was referred to as the 2nd Additional Benefit Period 1947–1952. This invitation was rejected by both the Irish Dental Association and the Incorporated Dental Society. A further revised scale was sent in November of that year and was again rejected. Negotiations on both the agreement and scale of fees were renewed, and in March 1948, a referendum found a large majority in favour of accepting a fee structure that showed approximately a 50% increase over that applying in 1942. The agreement was again for a period of five years.

Before the next expiratory date was reached a change of some importance had occurred. The Incorporated Dental Society had amalgamated with the British Dental Association, and the Irish Dental Association had opened its ranks to any of the Irish members who wished to join. Preparation for the struggle ahead commenced in 1950, and meetings were organised throughout the country. The principle of grant-in-aid was being pursued with vigour. At this period the Department of Social Welfare had incorporated the National Health Insurance Society into its area of authority. In September 1951, Council rejected an offer from the Department and in March 1952, the profession rejected a further offer. Negotiations dragged on, and in June 1953 an overall increase of approximately 25% from the Department was accepted. The patient’s contribution for dentures was increased from one-half to two-thirds of the fee. The new agreement entered into was for an indefinite period, and the salary limit for those eligible was increased from £500, to which it had been raised in 1948, to £600 per annum. This ceiling figure was further increased to £800 in 1958, and £1,000 in 1962, and eventually reached £1,600 in 1971. By March 1960, an additional 15%, which was to be applied to conservative treatment, had been agreed. A further 20% was accepted in 1964. Costs of practice, however, continued to mount and by 1968 a feeling of dissatisfaction had again become evident. Neither the award in the autumn of 1968 nor the increase in certain items, amounting to approximately 5% early in 1969, were favourably received by the profession. By this time Council had embarked on a three-point plan:

1. the revision of what was referred to as the basic scale of fees;
2. the application of the principle of grant-in-aid in certain sophisticated types of treatment; and,
3. the redrafting of specific sections of the agreement.

A reconstituted and very active Social Welfare Committee prepared the Association’s case in great detail. The task of presenting this and of following through the subsequent negotiations was mainly the responsibility of Dermot Nolan and Kevin O’Loughlin. These negotiations eventually resulted in a revision upwards, of approximately 15%, of certain items of the basic scale and in an acceptance of the principle of grant-in-aid. The practical implementation of this tenet, to agreed items, and the slow progress in reaching a satisfactory formula on the agreement were, however, to cause a further deterioration in the relations between the Department of Social Welfare and the profession.

During 1970, the inflationary tendencies that had been gaining momentum in recent years seemed suddenly to suffer an acute exacerbation. The commercial laboratories announced a 33\(\frac{1}{3}\)%
increase in fees, and the Department of Posts and Telegraphs announced increases of up to 50% in their charges. As a result of these and many similar increases the ‘cost of practice analysis’, which the Association had commissioned, showed that the average figure for costs had now mounted to well over 50% of gross practice income. Disillusion and dissatisfaction with the Social Welfare Scheme had now become widespread. This resulted in a large group of dentists withdrawing from the scheme in the autumn of 1970. Later the majority of dentists on the social welfare panel indicated, through a referendum, that they were prepared to withdraw their services unless a reasonably satisfactory solution could be achieved. Negotiations continued throughout the summer of 1971 but without success. On November 1 resignations on behalf of approximately 90% of those on the Social Welfare panel were forwarded to the Department of Social Welfare. A further effort was then made to break the deadlock that existed. Although the differential between the sides was reduced, progress was not sufficient to avert the withdrawal of service, which took place, as arranged, on December 1.

Dental health education

Readers will by this time appreciate that the Dental Health Education campaign, as we know it today, had a very humble origin. In 1958, the Irish Dental Association formed a Propaganda Committee and spent a small sum of money on the purchase of teaching aids. Lectures on oral hygiene and allied topics were soon being given to organised groups of people. At the summer meeting of the Association in 1959, the Committee mounted an exhibition on ‘Dental Propaganda’ and in October of that year a two-day seminar was held on children’s dentistry in Tralee. Soon the Committee changed its name to the Health Education Committee. Its activities continued to flourish. In 1961, a display stand was in operation at the Dublin Horse Show and in the following years Cork, Waterford, Limerick and other centres promoted Dental Health Weeks. In the meantime Dublin had extended its campaign to cover a two-week period. The first national campaign of one week’s duration was held in 1966. By 1969, this had been extended to cover the entire 12-month period.

In this extended campaign is incorporated many different programmes. Some are suited to parent-teacher associations and other adult groups such as the Irish Countrywomen’s Association, women’s clubs, industrial and commercial bodies, and various community organisations. Others are directed towards the younger age groups. A third category would consist of nurses and other paramedical personnel. Those programmes mounted for teacher-training colleges are regarded as being of particular importance. An increasing number of schools are being visited each year where talks on an individual class basis are organised. Final-year dental students are co-opted on to these latter programmes as co-lecturers. It is interesting to note that in many schools children have undertaken projects on dental health for their civics classes. Literature and other information is available at the Health Education Committee offices. This is sent to schools, colleges, dental clinics, private dental practitioners, and to individuals or groups in quest of knowledge on this topic.

Competitions are held annually. The 1971 competition, confined to the Cork city and county schools, attracted over 9,000 entries. The annual poster competition in the Dublin area stimulates great interest. The result is a very high quality entry. The campaign attracts a considerable amount of press publicity and women’s magazines frequently publish interesting articles and comments. There is substantial radio and some television coverage. It is of interest to note that a regular correspondence is maintained with overseas directors of similar organisations.

Members of the Irish Dental Association are grateful to those who took part in these campaigns, which have been directed by ES O’Brien-Moran, and to the various Health Authorities and sponsors for their interest and support.

Dental health education in Ireland, as we know it today, had very humble origins, but now encompasses a wide range of initiatives.

The Irish Dental Library

At a Council meeting of the Irish Dental Association on October 10, 1952, a letter was read from the President of the Dental Board requesting a meeting with some members of Council to investigate the possibility of establishing a library. This was agreed and soon after a committee consisting of three members from the Board and three members from the Irish Dental Association, with the President of the Board as chairman, decided that a lending library should be established in the premises of the Board. Rules were drawn up and Lt-Col. Delany was elected Honorary Secretary, from which capacity he has only recently retired. The Registrar of the Board, S Quirke, has during all of these years acted as Honorary Librarian.

The primary aim in founding the library was to establish an outlet for the dissemination of the increasing volume of scientific and clinical information, which was then being published. In this way it was hoped that high standards would be maintained and interest in research projects would develop. The demand for books and journals had indeed surpassed all expectations. These are purchased out of a small annual income, which is largely derived from the money made available by the Dental Board and to a lesser extent from the annual subscription of the Irish Dental Association. Among its many fine volumes The Index
to Periodontal Dental Literature in the English Language from 1876 up to the present time, is deserving of special mention.

The Benevolent Society
For many years it had been the custom at the Annual General Meeting to vote a sum of money to the Benevolent Fund of the British Dental Association. From such a motion in 1937, arose the suggestion of the formation of a similar fund in Ireland. In 1942, a definite proposal was made but nothing concrete was achieved until the Annual General Meeting in 1945, when a motion by Sydney Henchie, proposing the commencement of a benevolent fund in this country, was passed. A sub-committee was formed, which investigated all aspects of the proposals, and consulted with the secretaries of many existing societies. In February 1949, a meeting with some members of the Incorporated Dental Society (Irish Branch) was arranged, and at this meeting it was decided that ‘The Irish Dental Benevolent Society’ be formed to cater for all dentists on the register. Later, a draft set of rules was presented to the Dental Board for its consideration. The Society was formally launched at a representative meeting of the entire profession in October of that year. JW Daunt was elected President for 1949-50 and T O’Looney, Honorary Secretary and Honorary Treasurer. The fund got a wonderful initial boost through a very generous donation of £1,000 from the Dental Board. The Irish Dental Association donated 100 guineas and members were invited to give generously.

In February 1949, a meeting with members of the Incorporated Dental Society (Irish Branch) was arranged, and it was decided that ‘The Irish Dental Benevolent Society’ be formed.

The accumulation of capital was a slow and tedious process, and some years elapsed before the committee was in a position to offer help to those in need. With the formation of a ladies’ committee in 1961, the financial outlook brightened considerably. The annual income, though by no means adequate, is now sufficient to relieve, in a modest way, the needs of those in distress. In a small professional group this indeed is a fine achievement and much of its success can be attributed to the stimulating influence of Sydney Henchie. At the Annual General Meeting of the Benevolent Society in 1971, he retired from the position of Honorary Secretary after 14 years of loyal and fruitful service.

The Odontological Section of the Royal Academy of Medicine in Ireland
October 1971 marked the twenty-first anniversary of the Odontological Section of the Royal Academy of Medicine in Ireland for it was in October 1950 that the Section held its first meeting, with George Yates as President. This would suggest a young society but it would be slightly misleading on two counts. Firstly, the origins of the Academy itself are much more ancient and secondly the Odontological Section was the continuation of the Odontological Society. This Society was formed in 1944 as a clinical club within the Irish Dental Association and its members met each month in the Incorporated Dental Hospital. At a Council meeting of the Irish Dental Association in November 1949 a letter was read from Donagh O’Brien, the Honorary Secretary of the Odontological Society, saying that the Society was seeking membership of the Royal Academy of Medicine in Ireland. After some difficulty and not a little controversy the Society was admitted to the Academy as the Odontological Section. Initially the new Section continued meeting in the same tradition as the Odontological Society, with scientific presentations followed by discussion and a session on ‘Problems in Practice’, where members and fellows would discuss their recent problems. It might be noted however that three of the speakers at the first occasion were not dentists, thus establishing a link with the rest of medicine, which has been maintained ever since. The first Sectional Secretary was Adrian Cowan and he remained in office until 1957, by which time the pattern of meetings was well established. The first clinical meeting in a hospital was held in the Incorporated Dental Hospital in February 1957, during William Brady’s term of office as President. Since then similar meetings have been held almost each year. Sometimes the venue is in Belfast and sometimes in Cork. On one occasion members of the Section travelled to Bristol.

The Odontological Section has provided a forum for visiting speakers, usually within the framework of ordinary sectional meetings but where necessary by organising additional meetings. Happily many of the original fellows are still with us and it is hoped they have not been disappointed with the progress made by the Section in achieving maturity. They should find a great deal of satisfaction in noting the attendance figures, which make this one of the best supported sections. The dental profession in Ireland continues to benefit from the organisation they created.

There is no doubt that, in the annals of the Association, the 48th Annual Session of the Fédération Dentaire Internationale held in Dublin in June 1960 will be regarded as a pinnacle of its achievements. Its different aspects pursued along parallel courses and closely integrated with one another, produced in a week of intense activity and tight schedules, a tremendous amount of scientific achievement, progress in the international dental field and great social enjoyment. Those members and lady associates who participated in organising this
venture can justifiably feel proud of their endeavours.

Registration of participants commenced on Saturday the 18th. So well had this aspect of the proceedings been organised under the able direction of Dr K Harrington and Lt-Col. J Delany, that few difficulties arose. The social programme commenced on Sunday 19th with a reception given by the Fédération Dentaire Internationale in the Shelbourne Hotel. Some 550 guests, representing all aspects of cultural life of the community as well as delegates from 26 countries, mingled in a warm get-together atmosphere. Special religious services were arranged for early on Monday morning. Later in the morning the impressive opening ceremony was held. At this the Taoiseach, Sean Lemass, declared the Session open. Other speakers at this ceremony were the Lord Mayor of Dublin, Dr O Moen, President of the FDI, and Dr D Gogarty, President of the Irish Dental Association.

The scientific programme, which was directed by Dr RB Dockrell, commenced on Tuesday in University College Dublin, with consideration of the theme ‘Fundamental Principles of Full Denture Prosthesis’ by authorities from Britain, France, Germany and Belgium. Various lectures, demonstrations and films ran concurrently with this. On Tuesday also, the Military Conference attended by the representatives of the Armed Forces Dental Services of many nations took place. Delegates were welcomed by Lt-Col. J Delany, Irish Army Dental Service. They heard several papers on the military aspects of dentistry, visited St Luke’s Hospital, and attended a dinner given in McKee Barracks by the Minister for Defence, Kevin Boland. On Tuesday afternoon the delegates were received by the President, Eamon de Valera, in Áras an Uachtaráin. Later, Honorary Degrees were conferred on four men, distinguished in various fields of dentistry, by Trinity College Dublin. They were Dr H Broadbent, Professor Landa, Dr A Lundstrom and Sir Wilfrid Fish. Guests afterwards attended a reception given by the Provost and Mrs McConnell. Other receptions held that day included those given by the American Embassy, the Swiss Embassy, and several organised privately.

On Wednesday, the scientific programme continued. The main theme for the day’s discussion was ‘The Treatment of Maxillo-Facial Injuries’. Again, many lectures, demonstrations and films ran concurrently, and attending members had a difficult choice to make in deciding which items they would prefer to attend. Receptions were held in the Swedish Embassy and the Canadian Embassy on that day, and later, the FDI Banquet lent an air of splendour to the whole proceedings.

On Thursday, Honorary Degrees were conferred by the National University of Ireland on, among others, Dr O Moen, President of FDI, Dr Trendley Dean, the fluoridation pioneer, and Dr F Wilkinson, formerly Extern Examiner to NUI. That evening a magnificent reception was given by Sean McEntee, Minister for Health, in the impressive top storey of Aras Mhic Dhiarmada. Many of the visitors availed of the ‘free day’ to tour Connemara. Others participated in a golf competition at Woodbrook Golf Club, after which prizes of Waterford Glass, donated by Irish Hospitals Trust Ltd, were presented to the winners.

There is no doubt that the 48th Annual Session of the Fédération Dentaire Internationale held in Dublin in June 1960 will be regarded as a pinnacle of the Association’s achievements.

On Friday the scientific discussion was resumed with the main theme devoted to the activities of the dental technician. The discussion concerned the situation in many countries. Another major item on Friday’s programme was a Symposium on the Planning and Design of Dental Hospitals and Schools. This Symposium, under the chairmanship of Dr JF Owens, Dean of the Incorporated Dental Hospital of Ireland, was contributed to by the world’s leading dental schools. As on previous days, demonstrations, lectures and films ran concurrently within this programme, and included many extremely well-presented Irish contributions. The climax of the week was reached with the FDI Ball in the Gresham Hotel on Friday evening.

All in all, the FDI meeting reflected extremely well on dentistry in Ireland, and on the standing of the Association in particular. During the week, which was blessed with glorious sunshine throughout, Honorary Membership of the IDA was conferred on Dr H Hillenbrand, Dr G Leatherman and Dr K Gard.
## Past Presidents IDA

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