

So you want to be ... an oral medicine physician

The British Society for Oral Medicine (www.bsom.org.uk) defines oral medicine as 'the specialty of dentistry concerned with the oral health care of patients with chronic recurrent and medically related disorders of the oral and maxillofacial region, and with their diagnosis and non-surgical management.'

What is oral medicine?

The clinical scope of oral medicine is broad. It acts as a focus for specialist interdisciplinary care of patients with symptoms arising from the mouth that do not relate directly to teeth. These are often chronic and may have a significant psychological as well as physical impact on the patient's quality of life through changes to diet, speech and other activities of day-to-day living.

Symptoms and signs can reflect local problems restricted to the mouth or represent oral manifestations of more widespread disease. Mucocutaneous disease, including vesiculobullous disorders, dry mouth, soft tissue oral infections or oral presentations of systemic infections, oral manifestations of gastrointestinal diseases such as Crohn's disease and chronic orofacial pain including trigeminal neuralgia or dysaesthesias may all be encountered in a single clinic. Patients are referred from primary care practitioners in dentistry or medicine as well as hospital specialists. It is outpatient centred with no on-call commitments.

Specialist training

Specialist training requires a prior grounding in dentistry and medicine with undergraduate degrees in both providing the necessary opportunities. Some medical

schools offer a shortened 3- or 4-year course for dental graduates. Graduate entry undergraduate dentistry programmes are available and a dedicated 3-year dental course for medical graduates runs in London. A period of general professional training in dentistry and medicine is required. Dentists graduating in medicine should complete foundation year 1 posts and fully register with the General Medical Council before entering specialist training. Unlike oral and maxillofacial surgery, oral medicine remains a dental specialty regulated by the General Dental Council and not the Postgraduate Medical Education and Training Board.

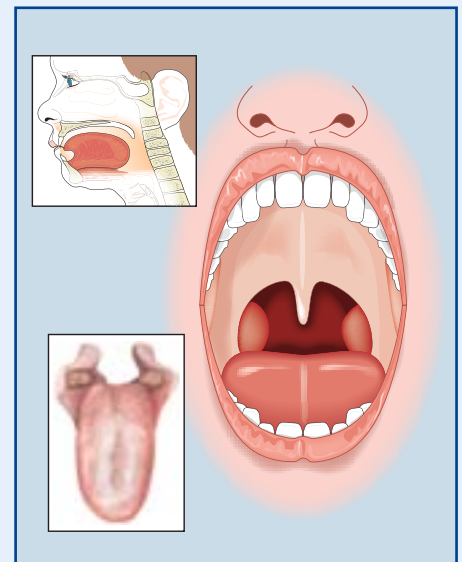
Specialist training posts are primarily based in dental hospitals and schools. The minimum specialist training period is 3 years with progression and quality assurance the responsibility of the postgraduate dean. There is recognition of the need for flexibility in training programmes, for example to allow protected time for academic activities or other commitments.

When the post is NHS-based, there is typically an honorary university appointment and vice versa, reflecting the involvement in learning and teaching and/or research. Trainees draw on their medical training to prepare the dental team to accommodate general health issues in the planning and delivery of oral health care.

Towards the end of specialist training, the Intercollegiate Specialty Fellowship Examination of the Royal Colleges is sat. Success leads to the award of a certificate of completion of specialist training and entry to the General Dental Council specialist list in oral medicine.

What is involved as a consultant?

Appointment to either a substantive NHS consultant or to a university post with an honorary consultant contract brings considerable service and academic opportunities. Service demand is increasing and there is great scope for innovative and interdisciplinary working. This might include the establishment and develop-



ment of joint clinics, e.g. for dysplasia, Behçet's disease, Sjögren's syndrome or chronic pain. Development of academic activities undertaken as a trainee helps translation of the diverse skills acquired to further the education of others and increase the evidence base underpinning clinical practice. The working day is typically challenging, but never dull.

The future of oral medicine

Interest in oral medicine has never been greater. This reflects the diversity of the challenges and associated rewards of interdisciplinary working at the interface of dentistry and medicine. The 10th Biennial meeting of the European Association of Oral Medicine in September 2010 in London will be a great opportunity for interested trainees to learn more about the specialty (www.eaom2010.com/). **BJHM**

Conflict of interest: Dr Hegarty is a member of the sponsorship committee for the 10th Biennial meeting of the European Association of Oral Medicine; Dr Mighell: none.

KEY POINTS

- Oral medicine deals with the medical management of diseases related to the oral and maxillofacial region.
- The specialty is interesting, varied and intellectually stimulating and there are no on-calls.
- There are ample opportunities to carry out research and educate at undergraduate and postgraduate level.
- The training pathway may seem long, but working as a specialist is extremely rewarding.

Dr Anne M Hegarty is Consultant and Honorary Senior Clinical Lecturer in Oral Medicine, Charles Clifford Dental Hospital, Sheffield S10 2SZ and **Dr Alan J Mighell** is Senior Lecturer and Honorary Consultant in Oral Medicine, Leeds Dental Institute, Leeds

Correspondence to: Dr AM Hegarty