Greetings, Colleagues:

I hope that your summer was enjoyable and productive. We certainly had a dynamic beginning to the season with our combined AAOMP/IAOP meeting in San Francisco! I extend our warmest thanks to all who worked so hard to make this meeting such a success. Our co-executive directors, Janet and Liz; the officers of both organizations – especially the presidents, Drs. John Fantasia and Paul Speight; the support team for the scientific programs, especially Drs. John Hellstein and John Kalmar; and our local San Francisco hosts, were all superlative! In addition, our appreciation is extended to Ms. Joan Leider, Drs. Roy Eversole and Lydia Chen and Drs. John and Deborah Greenspan for their contributions to the social aspects of the program. It was nice to see so many past presidents of both organizations and to have the opportunity to see so many international colleagues. The presence of a large number of residents, who also presented papers, was evidence that the future of our specialty is a bright one.

Dental Specialties hold joint meeting
A month after our meeting in San Francisco, I attended the meeting of the dental specialty groups in Chicago, along with Drs. Susan Zunt and Harvey Kessler. At the meeting I proposed that we strengthen communication among specialty groups by developing a list serve to include the officers of each specialty. Orthodontics agreed to take the lead on this and it has now been established. Another proposal that I put forward was the idea of a joint meeting between medical and dental specialty group officers to address areas of common concern in such areas as legislation, billing and education. The Council on Dental Education and Licensure (CDEL) representative from the ADA gave a presentation on the review of all specialties which will occur in 2010. It was emphasized that this is not a re-recognition and is just a review. Documents relating to the review will be sent to the dental specialties in April 2009, providing a year for the preparation of a response.

(continued on page 2)
Response of the specialties to the proposal of the Joint Commission on National Dental Examinations.

Retaining Quantitative Nature of the National Board Exams

BACKGROUND
The Joint Commission on National Dental Examinations recently decided to report only pass/fail on the National Board Exams to eliminate the ranking of all dental schools. This removes a valuable tool that allows dental schools to identify their strengths and evaluate areas in need of improvement in their own curriculum.

In addition, National Board scores were used by all of the specialties to evaluate applicants to the specialty programs. They are the only means that residency programs have for common comparison criteria for applicants. A pass/fail score would mean that the ADA recognized specialties would have to develop a costly test of their own which would result in yet another test for the graduates as well as another fee. This is an unnecessary burden on the students and faculty as well as the specialties.

The Dental Specialties supported the following resolutions:

70RCS-1. Resolved, The ADA House of Delegates urges the Joint Commission of National Dental Examinations (JCDE) to modify or replace the current examinations, to make it secure and to validate its use for quantitative scoring on or before November 1, 2011, and be it further.

Resolved, that the ADA House of Delegates urges the (JCDE) to retain its current system of reporting standard scores from the National Board of Dental Examinations until the new examination is available.

These were passed by the ADA House of Delegates, October 2008.

(continued from page 1)

Oral Path Competency in Cone Beam CT

The specialties met as silent observers with the Commission on Dental Accreditation on July 31. At that time, our Commissioner, Dr. John Wright, presented a new change to our graduate program recommendations that met with some resistance from oral and maxillofacial radiology. This was the requirement that the oral and maxillofacial pathology specialty graduate be competent in the interpretation of cone-beam CT images. When queried with respect to this by oral and maxillofacial radiology, as though it were a conflict of interest, Dr. Wright emphasized that we were asking for competence and not proficiency in the abilities of the graduate students in this regard and, therefore, were not trying to compete with radiology. The requirement was approved by the Commission.

Pass-Fail NDB proposed by ADA

In August the Specialty organizations and boards met with the ADA. A major item of discussion was the proposal that we resist the move to change the entire Dental National Board, Parts I and II, to a pass/fail system. It was explained that the decision to change the National Board to a pass/fail system was:

1. To provide comparable opportunity for all candidates to demonstrate ability on concepts the exam is designed to measure.
2. Preclude misuse of scores and potential adverse impact on validity for intended purpose.
3. Avoid confusion and misunderstanding of individual scores (raw scores/sub scores/standard score) and school score profile/reports.
4. Support curricular innovation.
5. Avoid diversion of resources.

The specialty groups drafted a proposal to oppose this (see side bar).

Full Time Executive Director Proposed

At our business meeting in June, Dr. Fantasia brought up the issue of whether our academy is now ready for a full time executive director. We will work to survey the membership to determine your thoughts on this subject and the extent to which everyone is willing to increase dues to fund such a position. There are many serious ongoing issues with the ADA, other specialties, and organized pathology that merit ongoing intense involvement by our organization. A full time Executive Director could follow these in depth. We also have unfinished business related to the implementation of our new web site, which should be up shortly. Initially, we had wanted to wait to bring up the web site so as not to confuse people during the registration process for the joint meeting. Since the meeting, the people involved in the web site redesign appear to have encountered some glitches that have delayed initiation, but they have promised to get it up in the very near future, perhaps before you receive this newsletter.

Outreach Activities

As a follow-up to my inaugural address, I plan to charge the Public and Professional Relations Committee to develop plans for joint meetings with two of our sister specialties, Oral & Maxillofacial Surgery and Oral & Maxillofacial Radiology. Such conjoint meetings can help to optimize our daily interfaces with these colleagues and foster exciting educational, research and service initiatives. In addition I plan to appoint an ad hoc committee on Outreach and Community Service to address both global and local areas of need in our quest to meet the challenges of oral disease throughout the world. I hope that we all envision the AAOMP as far more than a continuing education organization. Please contact me if you are interested in serving on this committee.

In conclusion, it is an honor to have the opportunity to serve as President. Don’t hesitate to contact me with ideas for new initiatives or issues that you feel we need to address. We have a great Executive Council and an energetic organization. Finally, please polish up your French and make plans to join your friends and colleagues for an exciting meeting in Montreal, Canada, May 16-20, 2009!

Valerie Murrah
Message from the IAOP President

I was honored, but found it somewhat ironic, to be installed as the President of the IAOP at only the second joint meeting of the IAOP/AAOMP in San Francisco. While I am somewhat biased, I thought it was one of the most memorable academy meetings I have attended. I can assure you that the meeting’s success was the result of a concerted and organized effort of numerous people in both organizations.

I am proud to be only the fifth North American to lead the IAOP, having been preceded by Harold Fullmer, James Main, Alan Drinnan and Bill Binnie. This is certainly distinguished company and I am pleased to have an opportunity to work on behalf of our profession in the global community. One of the things I have learned from my travels is the disparity with which oral pathology is practiced around the world. For me, it has been reassuring just how fortunate we are with the way oral pathology is practiced in the US and Canada. As I said in my acceptance speech, one of my goals is to increase the presence and influence of North American oral pathologists in the IAOP. Joining and participating in the IAOP is one of the better professional decisions I have made, and I feel that we have an obligation to support the IAOP in its efforts to advance the specialty in other countries.

I feel so fortunate to have been given an opportunity to serve the academy, the Board and now the international community. I thank you for your past and current support and I sincerely hope you will join us in Seoul, Korea in 2010.

With best regards,

John Wright

---

Message from the IAOP Past-President

In our welcoming message, John Fantasia and I encouraged people to attend the joint meeting in San Francisco and expressed our desire that the bonds of fellowship between the two associations should continue. I do not think we could have anticipated how successful the meeting would have been, nor how strong those bonds would be.

The meeting in San Francisco had the largest number of attendees of any IAOP meeting and was a tremendous success with both the social and scientific programmes meeting the aspirations of both associations. Many new friendships were made and old acquaintances were strengthened. I could not have imagined that the sessions would be so well attended and that our joint gala dinner would be such a successful and enjoyable evening.

I thank all the IAOP and AAOMP members who attended the meeting but a special thanks goes to all the organisers for their hard work in hosting such a successful event. When the meeting finished we parted with the desire that not many more years would pass before the two associations have a third joint meeting.

It is with great pride that I was able to be President in San Francisco but also an enormous honour to hand over the reigns to my successor John Wright. I wish him and our new council best wishes for the future and I hope to meet as many of our IAOP and AAOMP members as possible at our next International congress in Seoul in 2010.

With very best wishes

Paul M Speight
An Annual Meeting to Remember

Valerie Murrah and John Fantasia

Willie Van Heerden and Hans Zoellner

Roy Eversole and Liz Lenard

Rosario Rivera and Keisuke Nakano

John Fantasia and his wife, Lydia Chen

Bud Silverman

Brian Shumway and Faizan Alawi
Awards for Dental Student Research in Oral Pathology

The American Academy of Oral and Maxillofacial Pathology is offering awards that will help dental students who have conducted research in the field of Oral Pathology to attend the annual meeting of the AAOMP and present their research findings. An award of $1,000 will be provided. Meeting registration fees are also waived for awardees. The 2009 AAOMP meeting is in Montreal, Canada, May 16-20.

To apply for the award, you must submit an abstract of your research. Abstracts will be selected for either platform presentation or poster presentation. The scientific program committee will inform awardees which type of presentation has been selected. Research topics include basic pathobiology, oral pathology and clinical oral pathology.

You may, of course, list other authors who mentored or assisted you. Abstracts from previous Essay Programs and guidelines for submission of abstracts can be found at www.aaomp.org/.

NOTICE: Be sure to indicate on the abstract submission form that you are applying for the “Dental Student Research Travel Award”. The deadline for electronic submission of abstracts is January 15, 2009.
American Cancer Society honors Ray Melrose as an “activist and dynamic leader”

The American Cancer Society (ACS) recently presented long-time volunteer and AAOMP member Ray Melrose with the Society’s highest national honor, the St. George Medal of Honor. The St. George Award is given to an outstanding volunteer who has made a significant contribution to the achievement of the Society’s goals over an extended period of time.

“Dr Melrose has been a catalyst for action at all levels of the organization. His impact on advocacy, mission delivery and marketing communications activities is immeasurable and has extended, literally, from the local unit to foreign lands,” says David Veneziano, chief executive officer, California Division, ACS. “He is an activist and an effective and dynamic leader. Dr. Melrose has dedicated his exceptional abilities to bridge disciplines, institutional affiliations and worldwide cultures to benefit the efforts of the ACS.”

Dr Melrose was President of the AAOMP in 1997, and encourages other oral pathologists to reach out to the ACS. “I hope our members might be encouraged to become active in the ACS, as its mission and ours certainly coincide,” he says.

Dr Melrose has been an ACS volunteer for more than 30 years. The fight against tobacco has been a major motivation in his work. He has served as chair of the Division’s Tobacco Control Committee (1995-1997) and Tobacco Control Strategic Agenda Workgroup (1998-1999) as well as the “Stop Big Tobacco—No on Proposition 28” strategic group with other not-for-profit health organization leaders.

Dr Melrose has held numerous positions at the ACS over the years. He practices at Oral Pathology Associates, Inc., in Los Angeles and is Professor Emeritus and former department chair at the University of Southern California School of Dentistry.

Ray Melrose, center right, was honored recently. With him are son Brenden, wife Diane, and son Matt.
Russell Corio, AAOMP Past President, dies at age 77

Russell L. Corio, past president of the AAOMP, died August 2, 2008 in Bethesda MD. He succumbed to complications of treatment for Hodgkin’s lymphoma at the age of 77 years.

Dr. Corio was chairman of the oral and maxillofacial pathology departments at the National Naval Dental Center’s Oral Histopathology Center and the Armed Forces Institute of Pathology before retiring as a captain in 1984 after a distinguished 26-year career in the Navy’s Dental Corps. His military honors included the Legion of Merit and the Navy Commendation Medal.

After retiring from the Navy, he assumed the chairmanship of Oral Pathology at Georgetown University, School of Dentistry. In 1990, he became director of oral and maxillofacial pathology at Johns Hopkins Medical Institutions with appointments in dermatology, pathology and otolaryngology. He also held faculty and consultation appointments at Children’s National Medical Center, the University of Maryland, Washington Hospital Center and the Naval Postgraduate Dental School in Bethesda.

A native of Cleveland OH, he graduated from Case Western Reserve University with a BA in Chemistry and then a DDS in 1958. He completed his oral pathology training with a master’s degree from Indiana University in 1970 and a master’s degree in education from George Washington University in 1978.

He was a diplomate and past president of the American Board of Oral and Maxillofacial Pathology, and a fellow of the AAOMP, American College of Dentists, the International College of Dentists and the Academy of Dentistry International.

He is survived by his wife of 51 years, Mary Jane Damato Corio; four children, Frank Corio, Judy Crain, Diana Cunningham and Angela Corio; two sisters; a brother; and three grandchildren. He will be buried in Arlington National Cemetery.

CPC Diagnoses

The following are the diagnoses for the CPC cases presented at the joint AAOMP and IAOP meeting in June.

Case 1
Hereditary Paraganglioma

Case 2
Peripheral T-cell non-Hodgkin’s lymphoma, high grade

Case 3
Atypical aggressive central giant cell granuloma

Case 4
Intraoral basal cell carcinoma with Fordyce granules

Case 5
Orafacial granulomatosis

Case 6
Meningeal and gingival cryptococcosis

Congratulations New Fellows!
Elizabeth Andrews DDS MS, Pomona CA
Michael Gardner DMD, Bethesda MD
Bradley Jones DDS, Chevy Chase MD
Mohammed Mansour BDS, Richardson TX
Samson Ng BSc MSc DMD RPh, Richmond BC Canada
Ekarat Phattarataratip, Iowa City IA
Molly Rosebush DDS, Memphis TN

Award Winners
Shafer Award: Molly Rosebush
Gorlin Award: Hardeep Chhatwal
Student Travel Award: Anushree Sharma, David Dozal Dominguez, Lindsay Compton

New Diplomates
John Basile, Risa Chaisuparat, Michael Gardner, Bradley Jones, Samson Ng, Molly Rosebush, Mark Scheper
American Academy of Oral & Maxillofacial Pathology
214 N. Hale Street
Wheaton, Illinois 60187
USA

NEW IN 2009:
Afternoon Symposium: Medicare reimbursement and other billing issues for your oral pathology practice.
Jane Pine-Wood JD

CE: Mesenchymal tumors of the head and neck
Dr. Julie Fanburg-Smith
Department of Soft Tissue Pathology, Armed Forces Institute of Pathology

CE: Mohs surgery and histologic features of maxillofacial tumors
Dr. Marta Van Beek
Department of Dermatology, University of Iowa College of Medicine

RETURNING FAVORITES:
AFIP Seminar
Armed Forces Institute of Pathology, lead by Captain Robert Foss

TMD Diagnosis and Management: Clarifying the Issues
Dr Henry A. Gremillion

Translational Oral Medicine
Dr Michael Siegel

Xerostomia: Diagnosis and Management
Dr Susan L. Zunt

Lymphoproliferative Disorders of the Head and Neck
Dr Peter M. Banks

AAOMP meets in beautiful Montreal, Quebec May 16-20, 2009