The Island of Smiles Dental Charitable Trust was established and registered in early 2014. It is comprised of a group of dental and medical health professionals with a common interest of improving the health of those in deprived and remote regions.

In March 2015, the charity’s first mission to Daku, Fiji, was completed. The charity was fortunate to be awarded the following major sponsorships for this mission:

- $6,000 NZD (New Zealand Dental Association)
- $5,000 USD (Wrigleys-NZDA Pacific Oral Health Grant)
- $3,000 NZD (Martin Reesby, Auckland)
- $2,000 NZD (Markit Law, Auckland)
- $1,000 NZD (Simon Lou, Oral and Maxillofacial Surgeon, Hamilton)
- $1,000 NZD (Te Awamutu Rotary Club)

The charity would like to acknowledge the following organisations for the contribution of product and discounted merchandise:

- Braemar Hospital, Hamilton
- UB Freight
- Dentsply Australia
- Henry Schein Shalfoon
- Kathmandu
- The Warehouse
- The Tooth Shop
- Unichem Karori Mall Pharmacy, Wellington
- R A Jenks Ltd

In addition, we would like to thank all of the generous individuals who contributed to our cause.

The aim of this report is to describe the Island of Smiles mission to Daku, Fiji in March 2015.

Those attending:
- Dentists
  - Ryan Smit
  - Graham Jull
  - Margie Paterson
  - Sarah Twine
- Oral and Maxillofacial Surgeon
  - Simon Lou
- Dental Assistants
  - June Crawford
  - Shonal Stephen
  - Amanda Walker
- Clinical Photographer
  - Gus Stevens
- Fijian contact
  - Seli Scutts
MEET THE TEAM

We are a group of Dental Health Professionals representing the Department of Oral Surgery, Maxillofacial, and Dental at Waikato Hospital. The team consists of both past and present House Surgeons, Dentists and Dental Assistants with the common goal of improving oral health in deprived and remote regions of the Pacific.

Dr Ryan Smit
2012/2013 Dental and Maxillofacial House Surgeon (Waikato Hospital)
2015 5th year Medical Student (UOWSM)
Ryan graduated with his BDS from the University of Otago in 2011. He then spent two years working as a Dental and Maxillofacial House Surgeon at Waikato Hospital gaining experience in the field. During this time he completed the Royal Australian College of Dental Surgeons’ primary examinations, passing the exams with commendation. In 2014 Ryan commenced medical school, joining the program in the 4th year via the Oral and Maxillofacial Surgery lateral entry pathway at the University Of Otago Wellington School Of Medicine. His past volunteer trips aboard include providing dental care to remote villages in Cambodia, and in his medical school holidays he enjoys working for Ngati Porou Hauora, a Maori health provider that endeavours to improve the health of the local people in Ruatoria and the surrounding Gisborne region.

Dr Graham Jull
2015 Senior Dentist (Waikato Hospital)
Graham is the current Senior Dentist at Waikato Hospital. He has enjoyed a long career in private dental practice, owning a practice in Te Awamutu for the majority of his career, where he practiced the full scope of Dentistry. In addition, Graham brings experience in Army Dentistry, with previous appointments as Commanding Officer 1 of the Army’s mobile dental unit and CO 2 of GH Field Hospital. He has also been involved in a number of deployments throughout the Pacific region. As the admitting Dental Consultant at Waikato Hospital, Graham is responsible for all dental inpatients on the ward. He is the lead clinician of the hospital’s general anaesthetic dental list, providing treatment under GA to paediatric, special needs, and medically compromised patients. He also acts as a mentor to new graduate dentists who are employed to work as Dental and Maxillofacial House Surgeons in their first and second years out of dental school.

Dr Marguerite Paterson
2015 Dental and Maxillofacial Senior House Surgeon (Waikato Hospital)
Marguerite (Margie) graduated from the University of Otago in 2013 with a Bachelor of Dental Surgery. With an interest in special needs and community dentistry, she commenced her career at Waikato Hospital as a Dental and Maxillofacial House Surgeon. Here she has enjoyed learning valuable skills in dealing with medically compromised patients, as well as helping those who are unable to afford dental treatment in the private sector.

Dr Sarah Twine
2015 Dental and Maxillofacial Senior House Surgeon (Waikato Hospital)
Sarah graduated from the University of Otago in 2013 with a BDS (Hons), after previously obtaining a BSc (Physiology) in 2009. She then commenced working at Waikato District Health Board in 2014, where she has developed a wide range of skills in oral surgery as well as general dentistry. As a final year dental student Sarah was awarded the RC Tonkin grant for her research titled ‘Overcoming human tumour chemotherapy resistance’. She enjoys providing assistance to those in need, and would greatly appreciate the opportunity to be able to use her skills to help those in Fiji.

Dr Graham Jull
2015 Senior Dentist (Waikato Hospital)
Graham is the current Senior Dentist at Waikato Hospital. He has enjoyed a long career in private dental practice, owning a practice in Te Awamutu for the majority of his career, where he practiced the full scope of Dentistry. In addition, Graham brings experience in Army Dentistry, with previous appointments as Commanding Officer 1 of the Army’s mobile dental unit and CO 2 of GH Field Hospital. He has also been involved in a number of deployments throughout the Pacific region. As the admitting Dental Consultant at Waikato Hospital, Graham is responsible for all dental inpatients on the ward. He is the lead clinician of the hospital’s general anaesthetic dental list, providing treatment under GA to paediatric, special needs, and medically compromised patients. He also acts as a mentor to new graduate dentists who are employed to work as Dental and Maxillofacial House Surgeons in their first and second years out of dental school.
Mr Simon Lou  
Oral and Maxillofacial Surgeon (Waikato Hospital)  
“I wanted to get involved with Island of Smiles to help support this charity that was born from an idea and driven by enthusiasm and determination from a number of young dental professionals. I felt I could contribute to this mission to help the people of a remote Fijian village and make it a success”.

Simon is a consultant surgeon at Waikato Hospital. He also works in private practice at Anglesea OMS Ltd, Hamilton. He graduated from Dentistry at Otago University in 1992 before spending three years working as a Dental & Maxillofacial House Surgeon in Auckland. He then went back to university to study medicine and graduated with his medical and masters degrees in 2003 before completing his advanced surgical training in Oral & Maxillofacial Surgery, gaining his fellowship in 2006. Simon then went to the UK to undertake post-fellowship training in head and neck cancer surgery and reconstructive surgery. He worked as a Consultant in the NHS before returning to his home in Hamilton to take up his current roles in the public and private system. He is the Supervisor of Training for Oral & Maxillofacial Surgery at Waikato Hospital and also supervises the House Surgeons and co-ordinates the teaching program.

June Crawford  
2015 Head Dental Assistant (Waikato Hospital)  
Island of Smiles Program Coordinator  
Dental assisting was June’s first job and she has been passionate about dentistry ever since. After an extended time away from the industry, June re-entered the dental field working in private practice, and from there progressed to become the Head Dental Assistant at Waikato Hospital. While working at the hospital, June has witnessed first-hand the impact of how low finance can affect a person’s ability to access dental treatment. Her family connections to Fiji have made June aware of the significant need for dental treatment in villages such as Daku.

Shonal Stevhen  
2015 Dental Assistant (Waikato Hospital)  
Fijian born and educated in New Zealand, Shonal has lived in the Waikato for 20 years, and has worked as a dental assistant for over 10 years in both the private and public sectors. She is looking forward to using her dental attributes to improve the health of the people of her homeland. Over the years Shonal has made many journeys home to Fiji and is all too aware of the deprivation that the local community faces. She has witnessed first-hand the need for basic dental treatment; treatment that is unaffordable to most in the region. Shonal sees this volunteer mission as a benefit to herself, as she will be lucky enough to give back to her community.

Amanda Walker  
2015 Dental Assistant (Waikato Hospital)  
Amanda has worked as a dental assistant since 2001, both in private practice and for the school dental service. In 2013 she commenced employment as a Dental Assistant at Waikato Hospital, after having her two children. “I think good oral health is important for everybody’s general health and teaching good habits from a young age is critical. I’m looking forward to helping the people of Daku improve their smile”.

Gus Stevens  
2015 Medical Photographer (Waikato Hospital)  
Gus is Waikato–trained, having obtained in the 90s, a BMa and BEd at both WINTEC and Waikato University. Her experience in teaching has been in working in the UK, specifically with people on the Autism spectrum, and with all primary ages. Gus has extensive experience in Medical Photography, qualifying as a medical photographer whilst working in the UK for a private company. “I am inspired by the generosity and goodwill of all who are involved in this venture. It’s great to be a part of giving back.”
**SELI SCUTTS**

Seli grew up in Navaloa, a village made up of only her family of 16; uncles and aunts included. The village is a ten minute boat ride from Anitioki. Before the days of boat motors this was a forty minute row.

When Seli was a child she would trek down to the well to get water, a ten minute return trip and a chore that she will always remember and often reflects on. Her parents cooked on an open fire in a wooden bungalow and the family shared two beds for ten family members. The girls were on one bed and the boys on the other.

Seli is driven to improve her people’s health and education. She would like to make a difference to her village in Fiji.

Fijian society looks upon the men as the power and driving force of the village. Women are not allowed to speak. Seli would like to change this. She would like women to have a voice.

Seli sees the organisation of this dental mission as her entry to society, as a way to gain respect and show that she is capable of taking leadership roles. She is rising up from the cultural and social expectation that Fijian society lays on her, in which she is to behave as a submissive woman.

Seli met a New Zealander, John, in Nadi. They married and she moved to New Zealand. She feels that when she moved to New Zealand she found it hard to adjust to the kiwi culture, and remained subservient. In New Zealand, Seli attended university and completed her degree in sport science, majoring in psychology at Waikato University. Seli has taken every opportunity to do and to better herself, as well as her community. She has lived the hard life and it was life changing to move to New Zealand. Now she is motivated to improve the lives of those in her local community in Fiji.

One of her current projects is the coconut plantation she owns, with which she aims to further support her community through providing income and jobs.
DAY 1 – MANJULA

3am it all began—the almost 2 years of planning and preparation were about to kick off. We rose bright-eyed and bushy-tailed from an entertaining heart-warming sleep at the airport hotel on Weetbix mattresses lulled by each others snores.

On landing in Fiji, Manjula from the Fijian Ministry of Health greeted us at the airport, along with Seli, our local hostess, who is the sister-in-law of June. Manjula escorted us to Nausori Dental Clinic where we were welcomed by her colleague Andela, and given a most splendid morning tea. Andela is the dental officer of Nausori who has been tasked to supervise us throughout this mission. Manjula took us on a guided tour of the Dental School, University and Hospital leaving us in the city to get final necessities for the setup of our clinic.

We took taxis, with all of our supplies, to the village of the Daku where the mission was to be held. The villagers met us at the taxi and to our delight and relief helped to carry the kilos and tonnes of equipment into the flax carpeted community hall. “Bula bula” was the universal welcome and we replied in kind.
Kava is a traditional Fijian brew made of the kava root. As part of the custom we were welcomed with a Kava ceremony which was also a mark of the community’s appreciation and respect for what we aimed to do for them. They asked us to assign a ‘chief’ for the group. Naturally this title was awarded to Mr Simon Lou, the consultant Oral and Maxillofacial Surgeon on tour with us, who was from then on renamed ‘Chief Walla Walla’. Everyone partook of drinking kava as a mark of respect for the villagers welcoming us.

As the sun was setting, we departed Daku via longboat, cruising on the river through luscious Mangroves to the village of Anitioki. Dark had fallen by the time we arrived in the village. There was a hum of frogs and crickets as we wobbled ourselves off the boat. Once again the people from this village helped us with our luggage, carting heavy suitcases from the wharf to our new abode. Continuing with cultural etiquette, we had another kava ceremony with the elders and warriors of Anitioki.
DAY 2 – SETTING UP

We arose to a breakfast of paw paw and bananas. Fiji is largely reliant on freshly grown produce. Our tastebuds were tingling as we sunk our teeth into the organic delights. Seli has many talents and pulled one out of the bag later that morning. Freshly baked buns, sandwiched in an oven with fire above and below greeted us for morning tea. Suddenly June’s weight-loss plan in Fiji had evaporated.

In Daku villages, all women are required to wear skirts below the knee and cover up their arms. No hats are allowed to be worn by either male or female. It was quite a relief for the men to wear singlets and shorts in the stifling weather. The women on the other hand were not so fortunate.

We set the hall up ready to start clinic on Monday and while waiting for our ride on the longboat to Anitioki, we engaged in a game of cricket. Immediately we had grown a team of local children who just appeared. It became instantly clear that one game of cricket was not enough for everybody in the crowd to participate. As quickly as they came the children left to go to church and practice for the church service we would attend on Sunday.
DAY 3 – PALM SUNDAY

We never would have imagined boating to church on a Sunday in our whites, but that’s exactly what we did.

We attended the Palm Sunday service which is held one week before Easter. Simon Lou responded to the minister’s welcome with a Maori welcome, expressing our privilege at being able to partake in this mission. The children were amazingly well-behaved, beautifully dressed in formal white, praying with their foreheads pressed into the wooden pews with earnest intent. The church service was lead in full Fijian language by the children of the village.

The singing was glorious. Absolute passion, right from the heart. The congregation sang with unity, conviction and utmost belief. Seli would vouch that this is the most amazing singing the locals have witnessed, and it was for us. The songs were in Fijian language, but that was no barrier to our understanding of the emotion of the occasion.
DAY 4 – REGISTRATION

At Daku community hall the bell was ringing, calling for patients to attend the clinic. It was 9am and The Island of Smiles Dental Charitable Trust was open for service.

Responsible for sterilising the equipment was Minne Walker, who stood in the sweltering heat powering up the steralisers and watching them chug to life.

The charity is fortunate to be joined by Lice Saurara and Bui Saurara, sisters and Seli’s nieces, providing assistance where they can. On this day they helped with sterilizing and head-holding. They continued to volunteer their services for the remaining days of clinic and without their support, we would have been stretched.

Apenisa, a local, recently graduated dentist who has been working for one month for the Fijian Ministry of Health, had been placed with our charity during the four day mission. Apenisa displayed great enthusiasm, working under the guidance of Simon, Ryan, Graham, Sarah and Margie. He was impressed at the number of extractions the team were performing. In the local Fijian clinic where Apenisa works, treatment is limited to four extractions per person. Resources are tight. In Fiji, surgical extractions are still carried out via the largely expired technique of using a mallet and chisel. Slowly things are changing. At Suva Hospital, patients are now given the option of having their surgical extraction carried out using a surgical drill, however the cost is more than doubled when this option is selected; surgical drills are a scarce resource.

12 noon: 88 extractions, 38 patients completed.

Our bellies soon became full from a delicious half hour lunch, which displayed well the culinary expertise of our hosts. Then back into the clinic, patients sitting in garden chairs, head holders bracing their arms for another busy few hours.

4pm: Exhausted with a sense of achievement. Day one had gone off without a hitch.
DAY 5 – ROOT STUMPS

The cockerel crowed at the timely hour of 4.30am awakening us to another day of Fijian hospitality and inevitable root extractions.

After breakfast we walked to the jetty, past newly-built mud crab castles and boarded our boat back to the clinic base in Daku community hall. The community hall was once the house of Seli’s grandparents. Now it serves as the local kindergarten, is used for community events and was also the place where our group first partook of the Kava.

We arrived to no complaints from the Daku villagers who had only praise for the work we had carried out in sorting their problematic teeth the previous day.

Reports had already got back to Seli in complimenting the immediate accessibility our dental service had provided to the village. Dental issues that had remained unsorted were now dealt with.

Today was the day for our neighbours in Anitioki to come and sample our wares. There were many familiar faces coming to be treated, with an average rate of 3 teeth or roots extracted per person. About 10% of patients seen had healthy teeth.
A TOOTHLESS NATION

The Fijian Ministry of Health are coming to Daku in August to take impressions of people’s mouths who want false teeth. In Fiji, the growth of the dental profession is largely due to the demand for false teeth.

For most Fijians, dental treatment is too expensive in comparison to their income. Those with small cavities would rather have teeth extracted as a cost saving measure. Fijian people will usually only turn up to the dentist when their pain has become unbearable, or a vestibular of facial swelling has developed.

Fiji is quickly becoming a toothless nation. The cost to fill a small cavity is five dollars, a class two restoration is eight dollars and large composites can cost upwards of 15 dollars.

Fishing provides the main income to the people of Daku. A bundle of 12 medium sized fish, kabatia, will earn the lucky catcher $15.

Daku is also known for its intricate weaving of fans. A garland fan the size of a dinner plate would bring in around $5 depending on the design. It is no surprise that a trip to the dentist is somewhere low on the list of things to do.
Daku Village Primary School is within close proximity to the community hall where our clinic is located. While providing treatment to children was never the intent of our charity mission, we seized the opportunity of a quiet spell in the afternoon to examine around 70 pupils ages between five and 13.

While some of the children had pristine dentition, it was heart-breaking to see that most had rampant decay across both anterior and posterior teeth. Defining a start point in the treatment of these children is a feat of its own. It had only been a year since a dental team from Nausori had provided a service to all children in the school, however without a facility to provide hospital dental treatment under general anaesthetic available in Fiji, delivering full and comprehensive care was near impossible.

With this in mind, the Island of Smiles clinicians treated these children on a relief of pain basis. In those who ideally required a mouth full of extractions, only the regions causing current pain were dealt to. At the end of the day, there was not a lot more that we could do in our temporary clinic, and the parents and teachers of school were grateful for what we had achieved.

Those who did not require extractions, but were in need of restorative work (most often on a large scale), were recorded. This information will be passed on the dentists of the Nausori Dental Clinic.

**DAY 6 – A DAY OF PAEDIATRICS**
DAY 7 – IMPACTED 38

It was estimated to be our biggest day at clinic and finished off intensely by having to treat the most challenging patient of the day. We had thought our clinic had ended but people kept dribbling in having gained the courage in knowing this was their last chance to be seen. The positive feedback had made the rounds and therefore our last man had decided to face his tooth issue knowing that we would give him the best treatment we could in relief of pain.

Our man had presented to triage with a mesially impacted 38 which was decayed and causing pain. To treat this man we had to unpack all of the gear, in particular the surgical drill that was essential to remove this decayed wisdom tooth.

We had come to realise the use of the fans made by the locals were of utmost relief to working in the sweltering heat and Simon Lou and his patient received fanning treatment whilst performing the surgical procedure. A buccal mucoperiosteal flap was raised, buccal bone was removed and the tooth was sectioned (with surgical drill) resulting in the tooth being removed in bits. The atmosphere was charged and relentlessly Simon drilled away in the heat with a curious audience at his side. A hushed silence accompanied him as he worked, the radio singing out a classic tune with a round of applause from the crowd that had gathered at the final piece of extracted tooth being laid on the surgical tray.

An impressive ending to a successful mission.
BIUKILA NAITASI

Biukila is the Turaga Ni Koro (head man to the village of Daku). He is the liaison between the village committee and the government. He is the person to be contacted first in regards to all community issues. When the Island of Smiles offered to volunteer in Daku, Biukila Naitasi was contacted by Seli. He then went before the village committee to gain their support for the dental mission. After obtaining the village committee’s permission, Biukila wrote to the Provincial House who in turn contacted the Ministry of Health to request the charity be endorsed.

Biukila visited all of the houses in Daku and gathered all the names of those interested in receiving treatment, visiting all of the estimated 400 people in his village. Biukila then wrote to all the outlying villages and arranged appointments for them.

In Daku there is a mutual respect between the women and the men to help each other. The men source palm leaves for the women to cook and dry in preparation for weaving. Men and women gather firewood to light wood burning ovens and women cook fish that the men have caught. Women do the main domestic chores of washing and care for the children, along with weaving the fans to bring in income. In Fiji, men are the leaders of the house and women support the men in leading. Traditions are changing, new ideas and improvements of how things are done are encouraged. Regardless of gender, women do have a voice in the community.

According to Biukila and his perception of Seli, there is huge amount of appreciation for what she has achieved, including bringing Island of Smiles to Daku. Biu stated that Daku is lucky to have the charity volunteer in their region. Common deterrents to seeing the dentist in Fiji are mainly in the expense of bus fare to the nearest dental clinic and the costs of treatment. Seli’s work towards her community is an example of how a male-dominated society is slowly changing. Her people are gaining acceptance of what she does to better the community.
CRUNCHING THE NUMBERS

The Island of Smiles clinic was open for four days, during which time a total of 250 patients were assessed. 167 of these patients were treated immediately after assessment by means of extraction of decayed and infected teeth. Of the remaining 83 patients, 81 required restorative treatment and were referred to the local Nausori dental clinic. Only two patients were deemed dentally fit to the point of no treatment being required.

Number of patients attending each day

The third day of clinic was found to be the busiest day, with the assessment and treatment of the children of Daku village primary school pushing the daily count to 100. Day four was the quietest, attributed to a village bus failing to arrive.

Almost half of all patients seen reported current dental pain, and were treated on a relief of pain basis.

Number of patients assessed versus number of extractions provided per age group

A total of 431 dental extractions were provided over the four day period; an average of 1.72 extractions per patient. The 18-35 year old age group required the largest proportion of extractions, compared to the 6-17 year old cohort who required the least.
The total number of teeth present decreased with age. The youngest patient was 5 and the eldest was 74.

Most patients had seen a dentist at some stage in the past, usually for relief of pain. Dental care in Fiji is mostly sought after when in pain, with regular check-ups a rare occurrence.