

WOMEN IN PROSTHODONTICS

Edited by Dr. Cortino Sukotjo, Dr. Judy Chia-Chun Yuan, and Dr. Fatemeh S. Afshari



Women in Prosthodontics

The American College of Prosthodontists

Prosthodontics.org

Copyright © 2016 The American College of Prosthodontists

All Rights Reserved

EXCEPT WHERE INDICATED, THE PHOTOS IN THIS BOOK WERE TAKEN BY BRANT BENDER.

PREFACE

When Dr. Cortino Sukotjo approached the ACP with the idea of celebrating the history of women in our specialty, the College was immediately excited to support the project. With generous financial contributions from Dentsply Sirona and Straumann, and the dedicated work of Dr. Sukotjo and his colleagues, Dr. Judy Yuan and Dr. Fatemeh Afshari, this celebration has become a reality.

Drs. Sukotjo, Yuan, and Afshari have researched the history of women in prosthodontics, noting important milestones, and collecting first-hand accounts from many pioneering women in our profession.

Reading these women's stories has been inspiring. Of course, if you approach them with today's perspective, you will grow frustrated: how many of these talented, capable, intelligent women were told that prosthodontics, or even dentistry, wasn't for them? Were told they would be a 'distraction' to their male colleagues? Were encouraged to look elsewhere for a profession? Fortunately, these women persevered and succeeded, and today all careers within the dental profession are attainable for anyone with ambition, determination, and the ability to work hard.

Try to look past your frustration and see that time and time again these women were encouraged by their (primarily male) mentors: to seek greater challenges, to continue their education, to take on leadership roles, to strive to be the best. I would venture that for every cutting remark and putdown, there have been five times as many words of encouragement and confidence boosters.

If that weren't the case, the women whose reflections fill this volume wouldn't consistently praise the profession of prosthodontics. Dr. Irena Mausner, who was first introduced to prosthodontics in the 1970s, wouldn't call the specialty "wonderful" and call the camaraderie and friendships in the specialty "unique." As Dr. Mausner says, "We are so fortunate to be such a tight group."

This passion for the profession spans the years. Dr. Virginia Hogsett, who finished her prosthodontics residency not even a year ago, says, "I can't imagine a more gratifying specialty."

I feel the same way, and was pleased to share my own story for this project. It is clear to me that we have made great strides in accepting and encouraging women to become prosthodontists. But what is also clear, from my experience, and from reading the reflections of the women here, is that we need to continue to mentor and encourage women to take on leadership roles.

Most of the mentors praised in this book's essays are men.

I am so grateful for their guidance and visionary leadership.

For many of us, there were no women available to be our mentors, and without these gentlemen's influence and support, we would not be where we are today. But younger women now have the opportunity to seek out female mentors: those who may be more familiar with the delicate balance of work and family obligations (be it caring for children or aging parents)... advice, in fact, that is as valuable to our younger male colleagues as it is to our female colleagues!

We can also provide guidance to those seeking to take on leadership roles. It is a great honor for me to serve as the President of the American College of Prosthodontists this coming year. Following Nancy S. Arbree (2003-2004) and Lily T. Garcia (2011-2012), I am the third woman to assume this role, but I foresee many more women becoming leaders on all levels

of the ACP. This is an organization and a specialty that values our contributions. You may see a story in this e-book that reminds you of paths you have taken or challenges you have faced. If you are looking for a way to contribute, please reach out to one of the prosthodontists featured in this book. If nothing else, the stories in this book demonstrate the importance of mentors.

Before closing, I would like to thank all my colleagues who took time to reflect on their careers and share their stories. It is not easy revisiting the trying and difficult times many of us experienced, but it inspires me to know that I share a profession with these amazing women. I am also gratified and thrilled to see so many confident young women joining the specialty and making an impact on the College—we have a brilliant and boundless future!



SUSAN E. BRACKETT, DDS, MS, FACP2016-2017 PRESIDENT, AMERICAN COLLEGE OF PROSTHODONTISTS

ACKNOWLEDGEMENTS

The idea of documenting the history and journey of women prosthodontists was inspired by a discussion with Dr. Jane Brewer at the Academy of Prosthodontics social outing. Over a plate of Texas BBQ and a glass of wine, she shared with us her encouraging pursuit of prosthodontics and her climb through the ranks of organized dentistry. She acknowledged how the environment is gradually changing, and that female advancement in the field is becoming the new normal. We realized that her inspiring story and others like it should be shared with the growing number of enthusiastic young women in the prosthodontics field.

The American College of Prosthodontists Central Office took a great interest in supporting this project. The list of pioneers, mid-career, and promising women prosthodontists from both academia and the private sector were created and each individual personally contacted. Each expressed her eagerness to participate. Their stories in pursuing prosthodontics, memories, challenges, and advice were compiled. The timeline of women

She acknowledged how the environment is gradually changing, and that female advancement in the field is becoming the new normal. We realized that her inspiring story and others like it should be shared with the growing number of enthusiastic young women in the prosthodontics field.

prosthodontists and their leadership in organized dentistry was assembled. In addition, teleconference discussion about academic and private practice career was also conducted. These women's stories have been compiled and published in an e-book format for all to enjoy and find inspiration. This historical view was not planned to be exhaustive but rather provide a selective glimpse of women's achievements in the field of prosthodontics.

Lastly, we would like to thank the ACP, particularly ACP leaders Dr. Lily Garcia and Dr. Susan Brackett for enthusiastically

supporting this project. We also thank Ms. Alethea Gerding for her assistance in publishing the e-book. Special thanks are owed to Dentsply Sirona and Straumann, whose financial contributions made this e-book possible. Most importantly, we would like to thank all the female prosthodontists who contributed to this project and hope we have done service to the legacy they have paved for us all.

Sincerely yours,

DR. CORTINO SUKOTJO
DR. JUDY CHIA-CHUN YUAN
DR. FATEMEH S. AFSHARI

UNIVERSITY OF ILLINOIS AT CHICAGO,
DEPARTMENT OF RESTORATIVE DENTISTRY
SEPTEMBER 2016





CONTENTS

tap a square to go to that chapter





INTRODUCTION

A BRIEF LOOK AT PIONEERS, LEADERS, AND INSPIRERS

NOTE: THIS INTRODUCTION IS TAKEN IN PART FROM A MANUSCRIPT SUBMITTED FOR REVIEW IN THE JOURNAL OF PROSTHODONTICS.



FATEMEH S. AFSHARI, DMD, MS

CLINICAL ASSOCIATE PROFESSOR,

DEPARTMENT OF RESTORATIVE DENTISTRY,

UNIVERSITY OF ILLINOIS AT CHICAGO COLLEGE OF DENTISTRY



JUDY CHIA-CHUN YUAN, DDS, MS, FACP

ASSISTANT PROFESSOR AND PREDOCTORAL IMPLANT PROGRAM DIRECTOR,

DEPARTMENT OF RESTORATIVE DENTISTRY,

UNIVERSITY OF ILLINOIS AT CHICAGO COLLEGE OF DENTISTRY



CORTINO SUKOTJO, DDS, PHD, MMSC, FACP
ASSOCIATE PROFESSOR,
DEPARTMENT OF RESTORATIVE DENTISTRY,
UNIVERSITY OF ILLINOIS AT CHICAGO COLLEGE OF DENTISTRY

SUMMARY

There are several women pioneers in prosthodontics, and each one deserves recognition and admiration for all she has achieved in helping bridge the gender gap in dentistry. Women have surely come a long way from being first depicted as a thieving woman assistant in an early 1523 dental engraving by Lucas van Leyden¹ to award-winning, board-certified clinicians, program directors, department chairs, and deans of dental schools. However, with less than 40% American College of Prosthodontists female resident membership today and even less in leadership roles, the potential to further evolve still exists.



[&]quot;The Dentist," by Lucas van Leyden, 1523. From the Elisha Whittelsey Collection, The Elisha Whittelsey fund (1960) at the Metropolitan Museum of Art, New York, NY

INTRODUCTION

In the 21st century, women constitute a large percentage of the student body in medical and dental schools. Many female physicians and dentists are advancing in academics, research, private practice, and organized dentistry; however, many challenges still need to be overcome for women to gain equal status to men.

BRIEF HISTORY OF FEMALE DENTISTS

The first woman in the United States credited with establishing a dental practice is Emeline Roberts Jones of Connecticut. As a widow of Dr. Daniel Albion Jones, she apparently learned the profession from her late husband, working as his partner in 1859 as "a skillful dentist." However, at the time, other women were probably also practicing dentistry without dental degrees. The U.S. Census of 1870 indicates 24 women in the U.S. practiced dentistry while 116 women dental practitioners worked in Great Britain.²

The first university-affiliated dental college opened in 1840 in Baltimore, Maryland; followed by a large number of freestanding dental schools. The first woman graduated from medical school in 1849, while the first woman dentist, Lucy Beaman Hobbs Taylor, received a dental degree in 1866 from the Ohio College of Dental

Pioneers in Dentistry



Emeline Roberts Jones, the first woman to practice dentistry in the U.S. Image courtesy of the New Hayen Museum.



Lucy Beaman Hobbs Taylor, the first woman to graduate from dental school in the U.S. Image courtesy of Kansas Memory.org, Kansas State Historical Society. Surgery.² She was accepted to the college after establishing a successful practice in Iowa where the dean felt that her presence "contributed to the good order and decorum" of the class.^{2, 3}

Henriette Hirschfeld of Berlin graduated from the Pennsylvania College of Dentistry in 1869. An opponent, G.T. Baker, an editorial in the *Dental Times* at that time strongly objecting to female dentists, as dentistry required "mental and physical equipment of a higher order," which excluded women: "the same reason holds good against women practicing dentistry that it does against a feeble male." A Nevertheless, the debate continued between supporters and opponents, while approximately 181 women graduated from a dental college between 1866 and 1893.

Even with the number of graduating women increasing in dentistry, the relative proportion of men to women graduates still remained low. It was not until the late 1960s and 70s, with the women's movement, that the number of women in the profession began to drastically increase. This increase was mainly due to the federal financial incentive schools received for matriculating women and minorities. As a result, dental schools began to actively recruit this thus far overlooked and mistreated gender.

WOMEN PIONEERS IN PROSTHODONTICS

In 1918, the National Society of Denture Prosthetists was formed, comprised of several distinguished dentists, all interested in the field of prosthetic dentistry. This society was later renamed the Academy of Denture Prosthetics in 1940 and today is known as the Academy of Prosthodontics. As interest grew, and the discipline of prosthodontics began to evolve, a need to establish a prosthodontics specialty became apparent. Nine fellows from the Academy helped establish the American Board of Prosthodontics (ABP) in 1947 and set the standards and criteria necessary to become a board-certified prosthodontist. The sponsorship of the ABP was then passed on to the American College of Prosthodontists (ACP), the only prosthodontic organization at the time that accepted membership based on educational criteria.⁷

The specialty of prosthodontics continues to grow steadily as younger dentists join the ranks for the opportunity to provide the highest standard of prosthetic care to their patients and community. Although the specialty was envisioned and introduced by men, women have played a large role in solidifying its authority in dentistry today. One must recognize and admire the first women who stepped forth into the prosthodontics arena as true leaders, innovators, and inspiration for all.

PROSTHODONTICS AS A CAREER FOR WOMEN

The number of women enrolling in dental schools has increased steadily over time.⁸ As the number of men remained steady, the percentage of professionally active woman dentists increased from 1998 to 2006 by almost 50%.⁹ Today, women represent almost 50% of dental schools¹⁰ and as of 2015, almost 30% of dentists working in dentistry are women.¹¹

A brief look at Advanced Dental Education programs indicates that female enrollment has risen over the past several years as is the case for Advanced Education in Prosthodontics Programs. ¹² In 2008, women comprised more than a third of the residents in prosthodontics programs. Based on the most recent ACP membership data, this is now closer to approximately 40%. Studies also indicate that female postgraduate general dentistry trained dentists tend to pursue careers mainly in government, hospital care, and dental education as opposed to private practice. ¹³ Women also are more likely to choose career paths in academia. ^{13, 14} This places women in a good position to take on more leadership roles in prosthodontics.

Many female prosthodontists are currently serving in leadership positions in various institutions such as dental school dean:

• Carol Lefebvre-Dental College of Georgia at Augusta University

associate deans:

- Lily T. Garcia—University of Iowa
- Fonda G. Robinson-Ohio State University
- Mary P. Walker-University of Missouri Kansas City

department chairs:

- Leila Jahangiri–New York University
- Sharon Siegel-Nova Southeastern University
- Lisa Lang-Ohio State University
- Julie Holloway–University of Iowa
- Jane Brewer-State University of New York University of Buffalo

and Advanced Education Prosthodontic/Maxillofacial Program directors:

- Betsy K. Davis-Medical University of South Carolina
- Mijin Choi–New York University
- Heather Conrad-University of Minnesota
- Theresa M. Hofstede-MD Anderson Cancer Center
- Colonel Cynthia Aita-Holmes–U.S. Army Advanced Education in Prosthodontics

- Tanya Somohano Marquez-Stony Brook University (interim)
- Evanthia Anadioti–University of Pennsylvania (2017)

BARRIERS TO ADVANCEMENT

Women have made great strides in the dental profession, particularly in the prosthodontics field; however, the gender imbalance remains. These achievements and disparities are best summarized by a recently graduated female prosthodontist, Dr. Virginia Hogsett: "In my residency program, there were as many woman residents as men. However, while gender bias is in some ways diminishing, one look at the list of names of the distinguished speakers at any given prosthodontic conference will quickly prove that we, as women, have a long way to become equally important as leaders in the field." Lack of women in leadership roles is a cause for alarm as it represents the underutilization of women's potential, deprives the profession of a diverse perspective relative to leadership and patient care practices, and deprives the gender balanced dental student body of necessary female role models and educators.

There are some explanations offered relative to this apparent gender imbalance, for instance: 1) the additive effects of a series of micro-inequities over time;¹⁵ and 2) even when opportunities for

advancement are offered, women hold themselves back for a number of reasons, which may include childcare, personal choice, illness, and caring for relatives. ¹⁶ Therefore, significant support from peers, co-workers, spouse/partners, and supervisors are important to create a supportive environment. Networking among female prosthodontists is strongly encouraged as well.

MENTORS, CHAMPIONS, AND SPONSORS

To overcome the gender imbalance and challenges, the talent, hard work, and perseverance of female prosthodontists are the true ingredients to their success. However, nothing in history is accomplished alone but rather with the help and support of mentors, champions, and sponsors who help provide the blueprints for others to reach their goals. Lucy Hobbs Taylor credits Dr. Samuel Wardle, who took her in as an apprentice, for the "honor of making it possible for women to enter the profession." Even Henriette Hirschfeld, the second graduating female dentist, had a preceptor in her time, Dr. James Truman. Relative to women in the dental field, in a valedictory address, Truman in 1866 stated, "The recognition of the right of every human being to an equal share in the privileges that we enjoy has not yet become a principle of faith and practice as I think it should. We say to one-half of the human family, stitch, stitch, darn stockings, make shoes for a shilling, stand



DR. LILY GARCIA WITH HER PROGRAM DIRECTOR, DR. ROBERT MORROW (IMAGE COURTESY OF DR. LILY GARCIA).

behind counters for two or three dollars a week, do anything, but don't enter the sacred precincts that we have marked out for our peculiar benefit..."17

Many female prosthodontists and leaders attribute much of

their success to the mentors who helped and guided them throughout their lives and careers. For most, parents are the first source of inspiration and guidance. Dr. Nancy Arbree says, "My greatest inspiration was my father, Robert Arbree, who always told me that I could be anything I wanted to be. There were no limits, just because I was a girl." Dr. Lefebvre describes her parents as instilling "a fierce appreciation for education in my sister and me. For them, education was everything." Dr. Brewer states that her mother told her that she could do it in one of many mother-daughter talks.

Once on the career path, each woman's journey was guided by many role models and mentors. Some inspired them to pursue

dentistry, others helped them realize prosthodontics as their specialty of choice, while many provided them with a nurturing environment that allowed them to succeed. Surely, their dental and residency faculty members had the greatest impact, "Some of those faculty members do not even realize their full impact or effect they had on us as students" (Lily Garcia), and "the people who are the most influential in our life decisions are those whom we meet that may not even know the impact they have had on our life." (Lisa Lang) Some describe these influential people as more than just mentors but rather sponsors: "A sponsor is a mentor who goes the additional mile. While a mentor is someone from whom you may learn or model behavior, a sponsor is a mentor who takes interest in you and your career and is willing to help, support, and promote you." (Lisa Lang) Dr. Lisa Thoms found a sponsor in Dr. Terry Donovan who flew all the way to Washington to convince the prosthodontics program director at the time that he would not regret accepting her as a student. "I later learned that I came close to not being accepted. The reason, not my grades, all of my extra prosthodontics education, or my clinical skills, but the fact I might be 'too much of a distraction to the men'."

However, not all are blessed with extraordinary mentors or a nurturing environment free from stereotypes. "I had several 'negative mentors' whose impact upon my life was significant.

Even negative mentors can have a positive effect. They were probably responsible for inspiring me towards leadership, as I learned quickly how not to treat people." (Nancy Arbree)

Either way, whether man or woman, parent or teacher, mentors, supporters, and advisors have shined a light on the voyage taken by all these women. Each vow that they too hope to light the way for others who venture forth.

PEARLS OF WISDOM FOR THE MODERN ERA

The success and challenges faced by many female prosthodontists not only makes them pioneers in their specialty, but wise and eager to pass on their wisdom to future generations. The advice below is extrapolated from their reflected stories.

"Be open to opportunities."

CAROL LEFEBVRE

- Learn to listen. (Nancy Chaffee)
- Embrace change and technology. (Nancy Chaffee)
- My wish for all young women was that they would be treated equally as dentists, not "women" dentists. My standard advice

- to them is to be prepared, to assume equality, and accept the responsibility when it comes their way. (<u>Patricia Moulton</u>)
- Have confidence. Open your mouth and say something, even when, and maybe especially when, you are afraid. You will make a difference. Don't apologize when you haven't done anything wrong and don't take grief from anyone. Speak out and fight back, but kindly and gently. Take and share credit. Admit error. Say yes to new opportunities. Try it on for size. You can always go back. (Nancy Arbree)
- We have many more women prosthodontists. However, we need to have more women in leadership roles as chairs, program directors, board examiners, deans, as well as on the podium presenting their educational, clinical, and scholarly findings. I encourage women to seek out leadership programs to assist them in understanding their strengths and weaknesses as well as to enhance their ability to lead self and others. (Carol Lefebvre)

- Learn to be efficient. Develop good time management and don't underestimate how much time a task will take you to complete: you need to allocate your time realistically. If these habits are developed early, they will carry you well into postresidency life. (Jane Brewer)
- Know your rights and learn how to negotiate effectively.
 (Jane Brewer)

"Dismiss the bad and engage the positive."

NANCY ARBREE

- The best defense is to spend your time with positive male colleagues and to nurture an exceptional group of women comrades because they will just know, without you having to tell them. (Nancy Arbree)
- I overcome my challenges by picking fantastic mentors. I have a lot of people I can turn for advice. This is how I manage stress and pressure by relying on the support of people closet to me. (Leila Jahangiri)
- I would recommend that you attend the American College of Prosthodontics annual meetings to see the warmth and encouraging nature of the specialty. (Sharon Siegel)

"Take every vacation day offered."

NANCY ARBREE

- When we die, no one will care how many journal articles you wrote, grants you had funded, or crowns you did. Time and experience with family and friends should take priority. (Nancy Chaffee)
- When I encounter a young woman faculty member and suggest "to take off all the time you can possibly afford to be with your newborn" or to a young male "to take off all the time you can possibly afford to be with your newborn." The intent is genuine and the message clear, make certain you know what you want and then work in a strategic and deliberate manner to achieve the balance you seek, man or woman.

 (Lily Garcia)
- You must also make a decision that while prosthodontics is your profession, your family and friends are your life. (Sharon Siegel)

 The choice of having a family or not is a personal one, but if you do choose to have children, don't feel guilty by working.
 You will find the right balance. Perhaps the most important thing to note is that by working you will be viewed as a fantastic role model. (Leila Jahangiri)

And Finally...

- Take the American Board of Prosthodontics certification examination. It is the capstone of your education, and there is no other substitute to demonstrate your knowledge and skill. (Nancy Chafee)
- There comes a time when all of us need to "give back" to our specialty and the profession that has treated us so well. No matter how busy you are, it is important to contribute more than just dues to your professional organization.
 (Susan Brackett)

CONCLUSION

Exceptional women have broken down the barriers for future generations by not only being qualified for the job, but also courageous in their first steps. Great strides have been made in the past 150 years since Lucy Hobbs Taylor graduated as the first female dentist in the U.S. While women are confronted by an invisible barrier dubbed the 'glass ceiling' when it comes to leadership roles, recent trends indicate that they are beginning to break through the glass and rise above it. Thus far, many inspirational women have become board-certified prosthodontists, program directors, department chairs, deans of dental schools, and presidents of prestigious prosthodontics societies. The first step is always the hard one, and each that follows becomes less difficult; however, room for progress still exists, and the gender imbalance will diminish and one day be another story in the chapters of our dental history.

ACKNOWLEDGEMENTS

The authors thank the American College of Prosthodontists (ACP) for supporting this project and all the female prosthodontists who contributed to the ACP's efforts to compile a brief history of women in prosthodontics.

REFERENCES

- Kells CE: A double extraction. Dent Stud 1967;46:154
- Committee on historical research federation of american women dentist.
 Women in dentistry 1855-1880. J Am Dent Assoc 1928;15:1735-1756
- 3. Chapple JA: Coeducation in dental colleges, and is dentistry a suitable calling for women?. Dent Dig 1904;10:649-656
- 4. Barker GT: Dental surgery-should female practice it? Dent Times 1865;3:152-155
- 5. Loevy HT, Kowitz AA: Dental education for women dentists in the United States: the beginnings. Quintessence Int 1999;30:563-569
- 6. Hyson JM, Jr: Women dentists: the origins. J Calif Dent Assoc 2002;30:444-453
- Academy of Prosthodontics: History. http://www.academyofprosthodontics.org/
 History.html. Accessed: Aug 8, 2016
- 8. Scarbecz M, Ross JA: The relationship between gender and postgraduate aspirations among first- and fourth-year students at public dental schools: a longitudinal analysis. J Dent Educ 2007;71:797-809
- 9. American Dental Association: Distribution of Dentists in the US, Historical Report, from 1998 to 2006. Chicago, ADA, 2009
- American Dental Education Association: First-Time Enrollees by Gender,
 2000-2013. http://www.adea.org/WorkArea/DownloadAsset.aspx?id=23866.
 Accessed: Aug 8, 2016
- 11. ADA: Supply of Dentists in the U.S. 2001-2015. http://www.ada.org/en/science-research/health-policy-institute/data-center/supply-of-dentists. Accessed: Aug 8, 2016

- 12. Kongkiatkamon S, Yuan JC, Lee DJ, et al: Gender disparities in prosthodontics: authorship and leadership, 13 years of observation. J Prosthodont 2010;19:565-570
- 13. Atchison KA, Bibb CA, Lefever KH, et al: Gender differences in career and practice patterns of PGD-trained dentists. J Dent Educ 2002;66:1358-1367
- Wilson LD, Flynn DF, Haffty BG: Radiat ion oncology career decision variables for graduating trainees seeking positions in 2003-2004. Int J Radiat Oncol Biol Phy 2005;62:519-525
- 15. Cuddy A: Womenology on Twitter. https://twitter.com/womenology/status/444179839789314048. Accessed: Aug 8 2016
- 16. Sandberg S: Lean In: Women, Work, and the Will to Lead. New York, Knopf, 2013
- 17. Truman J: Valedictory address. Dent Times 1866;3:161



WOMEN IN PROSTHODONTICS:

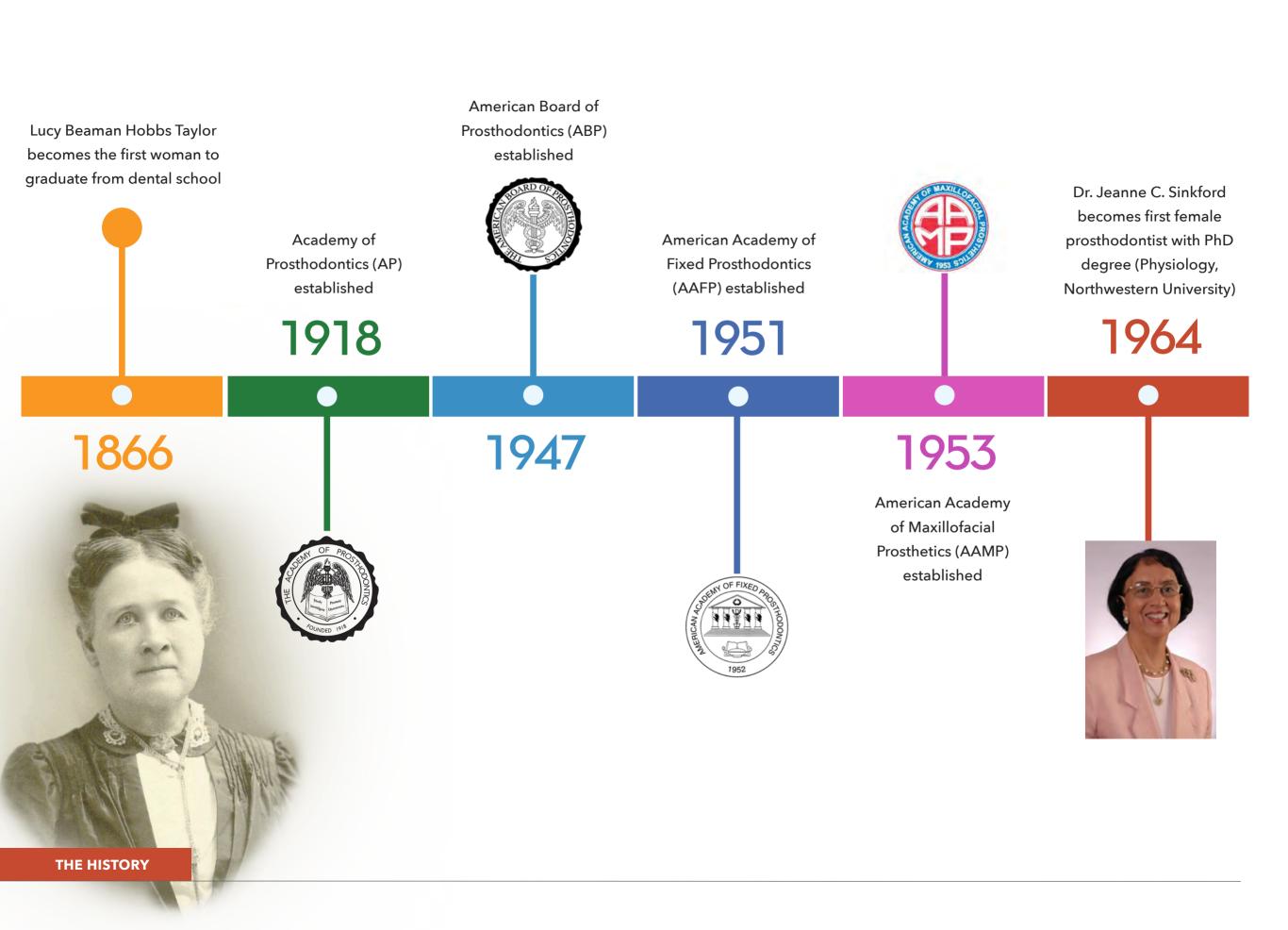
JOURNEY AND LEADERSHIP

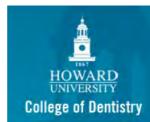
The timeline highlights the significant strides that women have made throughout the history of prosthodontics.

From the first woman to pass the specialty boards, to the women serving as dental school deans or presidents of esteemed prosthodontic organizations, this timeline reflects the important milestones women have achieved in our history. We celebrate these women's talent, dedication, and impact to the field of prosthodontics in an effort to emphasize overlooked accomplishments and encourage others to follow in their footsteps.

PICTURED: DR. CHERILYN G. SHEETS









Dr. Patricia Smathers

Moulton becomes the

first woman to be

board-certified

1974



Dr. Jane D. Brewer inducted as the first female fellow of AP



Dr. Nancy S. Arbree inducted as first female president of ACP

1970

American College of Prosthodontists (ACP) established



Dr. Jeanne C. Sinkford appointed as the first female dean at Howard University, College of Dentistry



1991

Dr. Yvonne Hart, at Marquette University, becomes first known female graduate prosthodontics program director



Dental Professor Is First Woman In Organization

serve a two-year residency in professionally in many ways, prosthodontics and then she explained.

Joined the dental faculty in a Dr. Mitchell has a daughter

THE HISTORY







Dr. Rhonda Jacob inducted as the first female ABP examiner

Dr. Rhonda Jacob inducted as the first female president for **AAMP**

Dr. Rhonda Jacob inducted as the first female president of AP





Dr. Carol Lefebvre

inducted as the Editor-

in-Chief of the Journal

of Prosthetic Dentistry





right

February, 2004

Drs. Louis DiPede, Herman B. Dumbrigue,
Jacqueline P. Duncan, Farhad Fayz, Jay D.

2006

Dr. Jane D. Brewer inducted as the first female president of **AAFP**





2010

Dr. Rhonda Jacob inducted as the first female president of ABP

SPECIAL REPORT

American Board of Prosthodontics

Reported by Thomas D. Taylor, DDS, MSD, Executive Director

The autumn examinations (2003) were held from October 11 to 13 in Dallas, Texas in conjunction with the American College of Prosthodontists annual scientific session. Eleven candidates participated in Part 2, 12 candidates participated in Part 3 and 12 candidates participated of Part 3 and 12 candidates participated in Part 4 for a total of 35 examinations. Eight candidates successfully completed the examination process and were certified as diplomates. The winter examinations were held from February 14 to 18 at the American Dental Association building in Chicago, Illinois is, Ninety-two candidates participated in the Part 1 writer examination. Twenty candidates participated in Part 3, and 21 candidates participated in Part 4 for a total of 65 oral examinations. Thirteen candidates successfully completed the examination process and were certified as diplomates. Results of the November, 2004 examinations will be reported in the December, 2004 examinations will be reported in the December, 2005 Journal.

Dr. Rhonda F. K. Jacob was elected to serve

on the Board replacing Dr. Steven Aquilino whose erm expired in November, 2004.

New Diplomates of the American Board of Prosthodontics

November, 2003

Lang, Basil Mizrahi, Donald W. Sheets Jr., Mari-anella Sierraalta, Veerachai Thumwanit, Scott D.

Thomas D. Taylor, PO Box 271894, West Hartford, CT 06127-1894. Telephone: (860) 679-2649. Fax: (860) 206-1169. Email: ttay-

Information and applications for certification may be obtained by writing or emailing the Exec-utive Director.

American Board of Prosthodontics 2004-2005

the following Board officers were elected to serve luring the 2004-2005 period.

President

Carl J. Andres, 8650 Fawn Lake Dr, Indianapo-

Cari J. Andres, Social anni Lace. Communication St., N. 149278

Vice President

Stephen D. Campbell, 801 S. Paulina St,
Chicago, II. 606512

Secretary-Treasurer

Stephen D. Campbell, 801 S. Paulina St,
Chicago, II. 606512 (to be replaced at October,

Board of Directors
John R. Agar, 4 Penwood Ct, Bloomfield, CT

Roy T. Yanase, 22330 Hawthorne Blvd, Suite

Past Presidents



Dr. Lily T. Garcia inducted as the second female president of ACP

2012

Dr. Julie Holloway inducted as the second female president of AAFP

Dr. Carol Lefebvre inducted as the dean for Georgia Regents University College of Dentistry

Dr. Betsy Davis inducted as the second female president of the AAMP

Dr. Susan Brackett inducted as the third female president of ACP

2016

2013 2014

> Dr. Lily T. Garcia inducted as the Chair of ADEA Board of Directors









DENTSPLY SIRONA

Dentsply Sirona is proud to partner with the American College of Prosthodontists for the Women in Prosthodontics Project. The company has a long-standing relationship with prosthodontists as key opinion leaders, founders, customers, and clinical experts, and Dentsply Sirona broadly supports women throughout the company and within dentistry as a whole.

Dr. Lisa Thoms with Grace Chen, DDS National Sales Director, China Images courtesy Dentsply Sirona





Dr. Lisa Thoms, who recently joined Dentsply Sirona as the Senior Manager, Clinical Affairs, in the Implant business unit will lead the Dentsply Sirona effort to support the Women in Prosthodontics Project. Dr. Thoms, a board-certified prosthodontist and member of the ACP, joins other successful prosthodontists affiliated with Dentsply Sirona, including Dr. Lily Garcia, Dentsply Sirona Education Advisory Board member, and Dr. Julian Osorio, the founder of the Company's ATLANTIS VAD/CAM custom abutments.

Dentsply Sirona employs approximately 200 dental professionals to fulfill its commitment to drive innovation and improve oral health around the globe. Within this robust and experienced professional staff, female dental professionals serve in leadership roles across the global business in nearly every continent. Dr. Terri Dolan leads the clinical affairs team and serves as Vice President and Chief Clinical Officer; she is also Professor and Dean Emeritus, UF College of Dentistry. In our global implants business, Dr. AnnaKarin Lundgren serves at the Director of Clinical Affairs and Clinical Research; Dr. Mia Jensen leads Global Key Opinion Leader Relations; Dr. Charlotte Almgren, Senior Scientific Relations Manager and Clinical Research; Dr. Ulrika Petersson, Senior Manager, Global Scientific Management and Clinical Research. Dr. Nana Sonoda serves as Academic Service Group Manager in

Japan, and Dr. Ivy Lee is the Professional Service Manager for Asia and is based in Hong Kong.

"With well-versed and experienced dental professionals on staff, Dentsply Sirona will continuously create clinical and business success as the preferred partner and essential resource to professionals. The Clinical Affairs team provides a unique value by linking customer needs to clinical outcomes and patient quality of life," states Dr. Terri Dolan, Vice President and Chief Clinical Officer.

Dr. Ricarda Jansen,
Director, Prosthetics
Clinical Affairs and Gail
Malone, former dental



hygienist, and current Preventive Professional Services Senior Manager, ensure the company remains on the cutting edge of dental innovation and education. With a growing number of female dental technicians, hygienists, and key opinion leaders (KOLs) on staff, Dentsply Sirona is passionate about gender equity and promoting opportunities for women leaders. Dentsply Sirona recognizes the increased diversity of the dental profession and applauds the growing number of women in dentistry. The Company is always on the lookout for outstanding dental educators, and is committed to ensuring strong representation of



JUNE 17, 2016 HEIDELBERG, GERMANY. SOME OF DENTSPLY SIRONA'S WOMEN TAKING CHARGE. FROM LEFT: VALENTINA MANUSIA, COUNTRY MARKETING MANAGER, ITALY; JOHANNA NILSSON, SENIOR MARKETING MANAGER;

ANNAKARIN LUNDGREN, DDS, PhD, DIRECTOR CLINICAL AFFAIRS, CLINICAL RESEARCH; ULRIKA PETERSSON, DDS, PhD, SENIOR MANAGER GLOBAL SCIENTIFIC MANAGEMENT, CLINICAL RESEARCH; MIA JENSEN, DDS, SENIOR MANAGER GLOBAL KOL
RELATIONS, CLINICAL EDUCATION/PROFESSIONAL; ANN MAGNUSSON, CDT, SENIOR MARKETING MANAGER, PRODUCT MARKETING AND DEVELOPMENT; DIANE HOWARD, VP OF CANADA SALES AND NORTH AMERICAN CUSTOMER RELATIONS;
LISA THOMS, DDS, MSD, FACP, SENIOR MANAGER, CLINICAL AFFAIRS; AND MAËLLE NIEDERQUELL, GLOBAL MARKETING MANAGER.

women to support our global sponsored activities, including education and research.

Women in leadership, beyond the 50 female dental professionals, include but are not limited to the top female executive and section 16 officer, Maureen MacInnis, Senior VP and Chief Human Resources Officer; VP & General Manager of Asia, Valerie Baschet; Corporate Marketing VP, Andrea Ferencz, and many other leaders across all regions, functions, and business units. Together, our

women in leadership account for over 5,000 combined years of service with Dentsply Sirona.

Maureen MacInnis believes the commitment to women's leadership at Dentsply Sirona is only getting stronger. "We are incredibly lucky to have an increasing number of women in key roles throughout the world," she explained. "The women of Dentsply Sirona bring outstanding clinical knowledge that directly supports our customers and builds our reputation as the dental

solutions company. Having these wonderful women as colleagues is a privilege, and their expertise is shaping our future."

Women are playing an increasingly larger role in dentistry, and Dentsply Sirona recognizes the need to support and develop female colleagues and to provide opportunities for personal and professional growth. The WIN program, Women Inspired Networks, is a critical leadership development tool that will have a tremendous impact on Dentsply Sirona's ability to continue to grow and be successful as The Dental Solutions Company. The WIN leadership journey is designed for Dentsply Sirona women to help accelerate their career development through learning experiences focused on key leadership competencies. "The program was extremely useful in distinguishing my strengths and capitalizing on them to advance my professional success. Additionally, meeting the other participants broadened my network of women across locations and operations," recalls Leana Levin, Dentsply Sirona Senior Patent Counsel and 2015 program participant.

Dentsply Sirona is proud that more than half of U.S. dental school enrollees are women, and businesses with more women in leadership roles not only gain a better understanding of their customers, but also drive revenue growth*. The top independent practitioner customer for Dentsply Sirona Implants North America

is also female, alongside a high number of female customers worldwide who attribute to the expansion. "I believe we need women in leading positions within the company to fully understand how this change in gender among our customers will change the business," says AnnaKarin Lundgren, Implants Director of Clinical Affairs and Clinical Research.

Dentsply Sirona is committed to bringing out the best in its people and throughout the dental industry. The company's female employees are critical to our success. "One of our core values is to bring out the best in our people, and I'm excited about accelerating the personal and professional growth of all of our employees, including the women of Dentsply Sirona. Today, our global management encompasses many women and we're excited to expand further appointments at Dentsply Sirona," states Jeffrey T. Slovin, CEO.

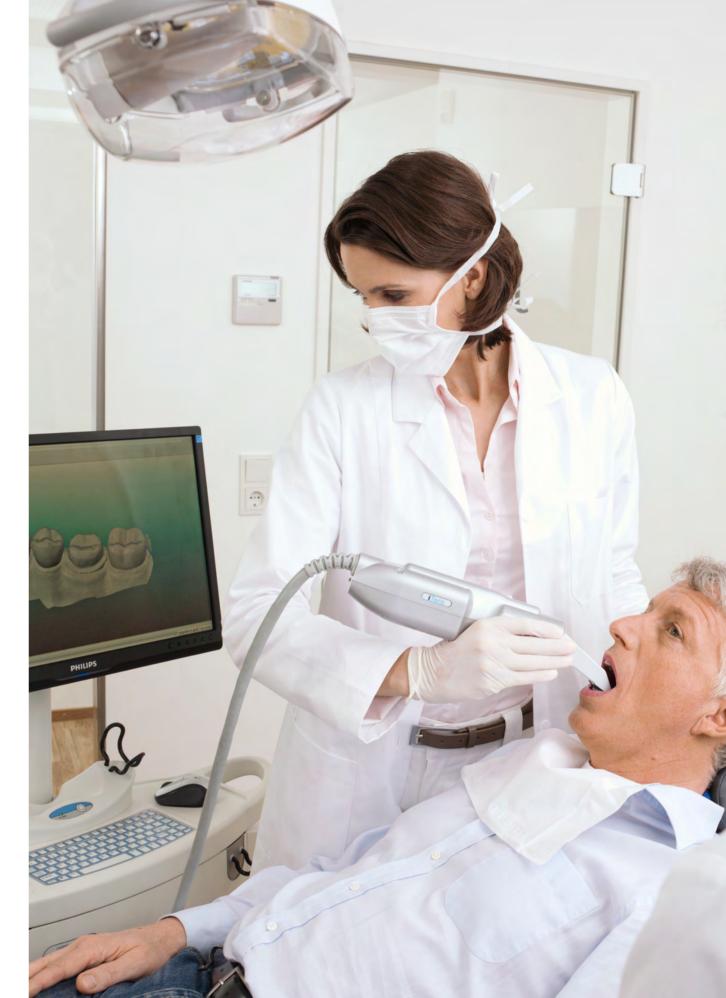
Dentsply Sirona looks forward to future partnership with the ACP and Women in Prosthodontics. With such momentum surrounding the dental industry and ACP, Dentsply Sirona is proud to support the increasing amount of women in prosthodontics and the broader industry to deliver solutions to improve oral health worldwide.

^{*}ADEA REPORT, ESG RESEARCH, FAST FORWARD

STRAUMANN

Headquartered in Basel, Switzerland, Straumann is a global leader in implant, restorative, and regenerative dentistry. In collaboration with leading clinics, research institutes and universities, Straumann researches, develops, and manufactures dental implants, instruments, prosthetics and tissue regeneration products for use in tooth replacement and restoration solutions or to prevent tooth loss.

IMAGE COURTESY STRAUMANN



Why is this project important to Straumann?

Women are the fastest growing segment of dentistry - they are the future. Females are trending toward making up 30% of the dental population. When we look historically on women in dentistry, they were fewer than 3% of dentists in 1980. Today, approximately 19% of the dental workforce is female, and the number of male dentists has declined since approximately 2000*. Straumann intends to be in a position to serve women in the most optimal way to continue the advancement of implant dentistry.

What leadership roles do women play in your organization?

We have a high number of women in leadership roles - Vice President and Director level - and tenured positions, some having risen through the ranks as the result of skill sets, talents, and a solid commitment to the Straumann organization. The Straumann culture promotes diversity of all kinds throughout the company and diversity is an important focus for us, greatly contributing to strong team performance and our ability to support diverse customers around the world.

What percentage of your Board of Directors is female?

In March, 2015, Straumann was proud to announce the appointment of Petra Rumpf as Head of Instradent and Strategic Alliances and Member of the Executive Management Board. Petra has a strong executive track record in the dental implant industry and 20 years of experience in growth management, e-commerce, operational turnaround, strategy, and mergers and acquisitions.

How do you work to ensure female leadership at Straumann?

We regularly monitor and report gender diversity in our team, while the broader perspective on diversity at Straumann is illustrated by our business diversity initiative, which will help us enhance cross-functional and geographic collaborations.

Females are trending toward making up 30% of the dental population. When we look historically on women in dentistry, they were fewer than 3% of dentists in 1980. Today, approximately 19% of the dental workforce is female.



Do you see dentistry, and prosthodontics in particular, as a field that is 'friendly' to women? In what ways can it improve, and how is Straumann working to make this happen?

Straumann believes dentistry is very friendly to women. Times have changed and will continue to evolve. Women are making the decision to choose dentistry as a profession and with that, doors are opening to them because of their level of interest and commitment. Through our customer feedback, we have learned that there is a particular interest in restorative and group practices for the female workforce. Straumann is supporting a number of female initiatives through sponsorship and education.

Traditionally, a lot of business is conducted 'on the golf course,' or through 'old boys networking,' and while this still may be the case in some instances, in what ways have you worked to change the business dynamic to be more inclusive? Where does Straumann excel in providing opportunities for women (both as employees and as customers)? In what ways is Straumann working to improve in these areas?

Through Study Clubs, networking opportunities, education, professional development, and social media, Straumann is making certain that female employees and customers are a focus. In years past, a lot of business was conducted on the golf course. Today, time is a luxury that needs to be managed wisely, and balancing family with a career can be a challenge. The opportunities mentioned here afford women a plethora of ways to connect, learn, and grow - while striving to maintain work-life balance. Straumann is honored to be a contributor and supporter of the Women in Prosthodontics Project.

^{* &}lt;a href="http://www.dentaleconomics.com/articles/print/volume-95/issue-2/features/the-future-of-dentistry.html">http://www.dentaleconomics.com/articles/print/volume-95/issue-2/features/the-future-of-dentistry.html



Pioneer Woman Dentist Practised In Danielson

Emeline Roberts Jones, Denied Collegiate Advantages by Her Sex, Educated Herself in the Profession of Her Husband and Became an Eminently Successful Dental Surgeon, Supporting Family After His Death

HAD AN OFFICE HERE FOR OVER TWENTY YEARS







WOMEN IN PROSTHODONTICS:

FROM PAST TO PRESENT

While researching the history of women in the profession, the editors decided that it would be valuable to ask the women themselves to share their stories. We have reached out to the women whose milestones this book celebrates. Many of them shared their stories. For perspective, we also asked a few newer prosthodontists to reflect on their career choices. These reflections are shared in an approximate chronological order, so that reading them provides a sense of growth and progress for women in the field.

DR. PATRICIA S. MOULTON

A BACKWARD GLANCE

PATRICIA S. MOULTON, DDS



In the spring of 1959 I was in my senior year of Dental School at the University of North Carolina, and one day was I summoned to the Dean's Office. One does not expect a positive outcome from such an event, but I was pleasantly surprised. My Dean was suggesting I apply for one of the residencies, and offered periodontics or pedodontics as possibilities. He stated that prosthodontics would be out of the question, as it was too "mechanical." Surprised and slightly offended, as my interests and best grades were in the Restorative Departments, I did not apply to a residency but instead entered the private practice of General Dentistry.

This was a period of tremendous advances in materials; my class had been one of the first trained with rubber-based impression materials, and porcelain fused to metal products were entering the market. One of my fixed partial denture patients in school had badly stained remaining teeth, and I had stained the porcelain denture teeth to match them. Encouraged by the success of that experience, I set about learning, and subsequently teaching my dental technician, how to fuse porcelain onto metal restorations.

After nine years in practice, I accepted a teaching position at Emory University in the Crown and Bridge Department (as it was called at that time) as the first full-time female faculty member, and quickly recognized the need for more training. The administration there

was very accepting of women in prosthodontics and welcomed me to the residency.

Finishing the residency, I decided to make application to the American Board of Prosthodontics. My commitment was absolute; I recognized if I attempted the exam and failed, I would lose credibility with my students. Every afternoon I checked out a copy of the *Journal of Prosthetic Dentistry* (starting with Volume I, Issue 1), read it through that night, and returned it to the library next morning. Reading the first years of that journal in sequence gave me an invaluable perspective on the origin and growth of the specialty and the pioneers who nurtured it; I highly recommend it to others on this journey.

One approaches an exam of this magnitude with some trepidation....was I adequately prepared? Talented enough? Would I be the object of ridicule? I had already been accepted as the first female member of the Academy of Fixed Prosthodontics, thus some ground had been broken in this area. Passing Part I in February 1974 relieved some of my anxiety, but raw fear returned with the trip to Part II. However, while there may have been some curiosity when I appeared, I felt no hostility or prejudice on the part of the examiners or my fellow applicants.

When my last bridge was cemented, the examiners took a photograph of me with the President of the Board. Interpreting this as a positive sign, I relaxed for possibly the first time in a year. Thus I became the first woman certified by the American Board of Prosthodontics, an achievement of which I am very proud.

I am equally proud of the fact that I am not the last. It is impossible to find out how many women have completed this exam, because the Board no longer separates their database by sex. This is real progress! The Board reports that almost half the applicants this year were women. It should not be a problem for women to excel in this specialty. The articulator is not an inscrutable instrument; seating a fixed restoration is not physically demanding. We may even have some advantages, in smaller hands and eyes trained from childhood to detect minor variations in color.

I became the first woman certified by the American Board of Prosthodontics, an achievement of which I am very proud.



Vol. 27, No. 3, October 21, 1974



Dr. Patricia S. Mitchell, left, with student and patient.

EMORY UNIVERSITY ANNOUNCING DR. MOULTON'S ACCOMPLISHMENT.

Dental Professor Is First Woman In Organization

certified as a diplomate of the Dental Clinic of the School of American Board of Prosthodontics.

eight recognized dental University of North Carolina specialties and is concerned and the only woman in her with making dental ap- class. pliances and substitute struc-

with bridges", said Dr. Mit- exhaustive written test in chell, who is an associate Chicago last February and a professor of crown and bridge practical exam in Columbus, prosthodontics in the School of Ohio in June. Dentistry. "We also restore badly decayed teeth with complete crowns."

Dr. Mitchell received the doc- the examining body. torate of dental surgery (D.D.S.) at the University of expenses, she estimates that North Carolina in 1959 and the whole procedure cost her was in the private practice of about \$1,000, "and actually, I general dentistry in Chapel don't have to be certified in Hill, N.C., for nine years.

prosthodontics and then she explained. full-time teaching position.

said the reason may be that cooking. "it's so highly technical."

and creative." Much of her \Raleigh, N.C., in 1953.

Dr. Patricia S. Mitchell has time is spent working with become the first woman ever students and patients in the Dentistry.

She was the third woman Prosthodontics is one of dental graduate at the

Her examinations before the American Board of Pros-"We replace missing teeth thodontics included an

In the latter test, she was required to bring a patient with her and actually replace his missing teeth under the gaze of

Counting travel and other order to practice pros-She came here in 1968 to thodontics, but it will help me serve a two-year residency in professionally in many ways,"

joined the dental faculty in a Dr. Mitchell has a daughter, Jan Mitchell, who is a junior in Asked why so few women the College. Outside of denhave entered dentistry, and tistry, Dr. Mitchell's interests particularly such specialties include water sports, as prosthodontics, Dr. Mitchell gardening, music, and

She is a native of Canton, "But I found the field to be N.C., and graduated from Canvery challenging," she said, ton High School in 1949. She and it's also the kind of work received her A.B. degree cum that allows me to be artistic laude at Meredith College,

Miscellaneous

American Board of Prosthodontics

William R. Laney, D.M.D. Rochester, Minn.

The 1974 Phase I examination (written, patient presentation, and oral) for certification by the American Board of Prosthodontics was held at the American Dental Association Building, Chicago, Ill., Feb. 5 and 6, 1974. The Phase II clinical and oral examination was held at The Ohio State University, College of Dentistry, Columbus, Ohio, June 17 through 21, 1974.

The following candidates met the requirements of the Board and have been certified as Diplomates of the Board: Dr. George P. Argerakis, New York, N. Y.; Dr. Marvin O. Barnett, Jr., Louisville, Ky.; Dr. Lucius W. Battle, Jr., Augusta, Ga.; Dr. David E. Cunningham, Ft. Rucker, Ala.; Dr. James W. Davis, Lighthouse Point, Fla.; Dr. Gerald W. Eastwood, Great Lakes, Ill.; Dr. John T. Goodman, Ft. Leonard Wood, Mo.; Dr. James R. Holtan, Virginia Beach, Va.; Dr. William A. Jennings, Columbus, Ohio; Dr. Jerome A. Mahalick, Milwaukee, Wis.; Dr. Roger P. Masella, Biloxi, Miss.; Dr. Patricia S. Mitchell, Atlanta, Ga.; Dr. Thomas G. Reddy, Ft. Belvoir, Va.; Dr. Larry M. Shimoda, APO San Francisco; Dr. Larry D. Sindle-decker, Ann Arbor, Mich.; Dr. Ronald M. Staab, Omaha, Neb.; Dr. Edgar N. Starcke, Jr., Houston, Texas; Dr. Mark M. Stevens, San Francisco, Calif.; Dr. Alfred V. Stines, Southfield, Mich.; Dr. Ned B. Van Roekel, Indianapolis, Ind.; Dr. Edgardo Vila-Pescador, Santurce, P. R.; Dr. Larry J. Wisman, Cockeysville, Md.; and Dr. Ronald I. Woody, Silver Spring, Md.

At the 1973 Annual Meeting of the Federation of Prosthodontic Organizations, Dr. Milton H. Brown was elected to the Board as the replacement for Dr. Arthur E. Aull, Jr., who completed his term Aug. 31, 1974. Dr. Aull provided leadership, intuition, and a forthright approach to the solution of difficult problems during his loyal involvement in Board activities.

The following changes in Board policy and requirements were approved during 1973-74:

1. The application fee for certification is \$50.00.

The period of Board eligibility (commencing with the acceptance and approval of an application and receipt of fee) is three years and must be re-established by reapplication if the candidate has not been examined during the three-year period. Approved applications are valid for three years.

3. (a.) Upon submitting an application, to include evidence of the successful

682

Undoubtedly, women in many areas face challenges in balancing family life with a profession. Historically, women have done the major share of child rearing and nurturing, and a sick child or an aging parent can throw a schedule into chaos. My observations are that men are recognizing this and assuming more of a role in this area, and I certainly benefitted personally by an emotionally supportive spouse.

One of the great pleasures of my academic career was watching many young women (including my own daughter) enter the profession. I find it ironic that the school which felt prosthodontics was closed to women has since hired one as Director of the Residency in Prosthodontics (see Dr. Nancy Chaffee). My wish for all young women is that they be treated equally as dentists, not "women" dentists. My standard advice to them is to be prepared, to assume equality, and accept the responsibility when it comes their way. As I watch so many of them doing just that, I can see that my efforts to pave their way were not in vain.

This is a page from the 1974 (Vol 32, Issue 6) *Journal* of *Prosthetic Dentistry* announcing Dr. Moulton's (then Dr. Patricia Mitchell) passing of the boards.

DR. IRENA K. MAUSNER

IRENA K. MAUSNER, DDS

My first exposure was in the early 1970s when Dr. Lester Rosenthal, a very eminent prosthodontist, who himself was a disciple of Dr. Max Pleasure (the curve of Pleasure in full denture occlusion) invited me to the Greater New York Academy of Prosthodontics (GNYAP), and then subsequently invited me every year to the meeting in December. I was the only woman in the room for many years until <u>Dr. Nancy Arbree</u> appeared.

I had originally graduated from dental school in London, England, as a general dentist, and practiced as such in London. I arrived in New York in 1970, and had to re-qualify to get a license. I practiced general dentistry for the next eight years. Dr. Rosenthal often said to me during that time that "you cannot be a jack of all trades and master of none." Of course, this is not absolutely true, as there are many fine GPs, who have become proficient in our discipline.

After attending the GNYAP meetings, I decided to become trained as a prosthodontist as soon as I could; however, my personal life posed a challenge. I had two young children, and a husband who needed me in his career. I made the decision to wait until my youngest child turned 13. It was a very difficult decision, because the postgraduate program was very demanding. I felt I was not home for the next two years. I also tried to maintain a very small practice in New York City.





While I was at NYU dental school, I was extremely fortunate to have Dr. Gerald Barrack and Dr. Donald Kitzes as my mentors. I think of them both daily as I practice.

I was, of course, the only woman in the program. As such, it was hard to achieve full acceptance by both faculty and classmates. We all need people to be our mentors. While I was at NYU dental school, I was extremely fortunate to have Dr. Gerald Barrack and Dr. Donald Kitzes as my mentors. Dr. Barrack was the best teacher, best dentist, and best friend one could hope for. Dr. Kitzes was an original thinker, and I always felt that he shone the light on the unseen part of the moon. His thoughts on occlusion were so original. I think of them both daily as I practice. Dr. Ira Klein, was the director of the program at the time. He ruled with an iron fist, but once one had his confidence, he was generous and supportive in every way. I owe him an un-repaid debt of gratitude. He, too, is often in my thoughts. He was so encouraging. Because I had been in practice for several years before I went back for PG training,

TOP: Dr. Irena Mausner, and one of her mentors, Dr. Gerald Barrack at a GNYAP function in 1994.

BOTTOM: Dr. Lester Rosenthal, who initially invited Dr. Mausner to attend GNYAP.

Photos courtesy of the Greater New York Academy of Prosthodontics

Dr. Klein said to me, "You can have a bad swing all your life" referring, of course, to golf, but the same applies to dentistry.

So what conclusion can I derive from this journey, that could help these wonderful young women who are in a postgraduate prosthodontics program? I have to say I had a blissful professional life. It is a wonderful profession, because in it, one contributes to the wellbeing of others, which results in great personal satisfaction. I have been able to have a very successful private practice in New York City. I have been able to give my patients treatment of the highest level, and that has been my life's aim. Secondly, I have been able to be on the faculty in the postgraduate department of prosthodontics, and tried to pass on all I can to the new generations. I have been doing this for 35 years. Lastly, the camaraderie and friendships in our specialty are unique. We are so fortunate to be such a tight group.

The camaraderie and friendships in our specialty are unique. We are so fortunate to be such a tight group.

All this came with many sacrifices. I often felt I was not a good enough mother, wife or dentist! Now, late in my life, on reflection, it has been a super journey.

I have loved being a prosthodontist, and am still at it... I still get fired up by all the new innovations and want to participate!

DR. JANE D. BREWER

JANE D. BREWER, DDS, MS



Well, I never started my adulthood thinking of being a prosthodontist. I grew up in an Air Force family of seven, moving across the US to Europe and back several times, changing schools every two or three years. My last high school guidance counselor in Virginia told me to forget my interest in medicine because women just didn't become physicians. So in 1967 I headed off across the country, again, to begin what would become a rollercoaster college career that mirrored my earlier youth. In the middle of that journey I returned to Rochester, New York, where my parents had settled after retiring from the Air Force and my father, Allen Brewer, founded the Postgraduate Prosthodontics Program at the Eastman Dental Center (now the Eastman Institute of Oral Health).

I entered the Dental Hygiene Program at Monroe Community
College because a career in hygiene would be family-flexible and
offer job security in the future—a necessity for all four of his
daughters, according to my father. At the time this was a means to
an end—not a career path. But I watched the likes of Gerald Graser,
Ed Plekavitch, Gary Rogoff, Aaron Fenton, and other young
prosthodontic residents as they moved through the Eastman
program, and sometime in my second year of hygiene training I
started to have this "itch" to pursue dentistry. I still wasn't thinking
prosthodontics, but dentistry in general. My dad shared with me

that he didn't see how I could do this and have a family. My mother, who had given up a promising music career when she and my dad were married, listened to my frustrations and in one of many mother-daughter talks we would share, told me I could do it. That was the beginning! Of course it helped that my older sister, widowed at a very young age, was putting herself through law school at Catholic University. My dad was beginning to come around to women in the professions, but it was my mom who was pushing me forward.

My dental hygiene education served me well while I was gathering all of my prerequisites for dental school admission. Not only did it pay my way, it facilitated experiences in dentistry that I would not otherwise have had. Once into dental school, I practiced evenings and Saturdays in the faculty periodontics practice of Dr. Robert Genco, participated in research projects, and briefly contemplated perio as a specialty. The experience of dental school introduced me to the world of sexism and sexual harassment, which was

My dad was beginning to come around to women in the professions, but it was my mom who was pushing me forward. certainly not unique to Buffalo, but it was uncomfortable and didn't do much to build self esteem. The five women in my class endured the typical comments about us taking up space that men should have, that we wouldn't practice much, that we got good grades because of our physical attributes. We sat through lectures peppered with off-color jokes and slides of naked women. There was pressure from that environment and pressure from having a father with colleagues who were my teachers. But I think it pushed me forward--I wanted to be competent and to be perceived as such. I started out wondering if I was going to be as smart or as capable as the men in my class, and gradually the doubt disappeared. I finished first in my class.

After dental school I served in the Indian Health Service in Sells, Arizona. It was there that I began to realize that there was a lot more to prosthodontics than what we learned as dental students. I really wanted to be more than that "safe beginner," and it was becoming pretty clear what I didn't know. I also went to my first Academy of Prosthodontics meeting in Scottsdale during that time, when my dad was president of that organization. It was very intimidating—all these giants in prosthodontics and not one of them a woman. I asked my dad why there weren't any female members. His response said a lot to me: "There aren't any women who are qualified." I didn't realize it then, but that statement probably set

Really think about how you want to spend each day. Don't let the day spend you.

my course. I returned to Buffalo for postgraduate training in fixed prosthodontics, a two-year program at the time, and was able to combine it with a half-time teaching position that paid a salary but also stretched out the program another year plus more to finish my MS degree. My new home was the pros lab—which we residents shared with our mentors (all male).

I think I was about 10 or 12 years into my life as pros faculty when I saw a change in the women: their numbers started to rise significantly, and they were "regular students." They did not have to be exceptional and could even have difficulty and not have their gender connected to their performance. How refreshing! And now that the mix is commonly 50-50 it's quite normal.

Since that time I've had many conversations with young women in dental school. Their questions have been about prosthodontics as a potential specialty, but also about life balance. Many of my choices professionally reflected my old dental school feeling about having to do what was expected to become successful. But that definition of success was based on the lives of my male colleagues, and I perhaps didn't have the confidence or self-



esteem or courage-or role models I could relate to. I tell my students that to succeed in a postgraduate prosthodontics program they need to be passionate about it. It is a tough residency, and demanding of their time, and if it "becomes her life" for a while, she had better really like it (what she's learning, that is). It is hard work. Personal life comes in smaller doses, and it's critical to preserve it. Learn to be efficient. Develop good time management and don't underestimate how much time a task will take you to complete: you need to allocate your time realistically. If these habits are developed early, they will carry you well into post-residency life. And really think about how you want to spend each day. Don't let the day spend you. Oh yes, take your boards exams as soon as you can; I hope your Program Directors prep and push you. Another thing-learn to communicate and work well with the commercial laboratory. Delegate as much as you can when you find the technician you can partner with. Figure out what is essential for you to do and what you can "let go" to her or him. It's great to have a lab partner who understands what you want and expect.

TOP: UNIVERSITY AT BUFFALO SDM 2014. ADDING TO THE "PROS PACK AT THE UNIVERSITY AT BUFFALO SDM GRADUATION 2014! LEFT TO RIGHT: GILLIAN ALEXANDER HAZBOUN (UB SDM 2010, UMD PROS 2013), ANTHONY ALEXANDER (UB SDM 2014, UB PROS 2018), GARY ALEXANDER (UB SDM 1981, UB PROS 1983), JANE BREWER, DAUGHTER OF PROSTHODONTIST ALLEN BREWER (UB SDM 1978, UB PROS 1982)

BOTTOM: DR. BREWER (CENTER) WITH COLLEAGUES AND FORMER STUDENTS FROM THE SUNY BUFFALO ADVANCED EDUCATION PROSTHODONTICS PROGRAM AT THE 2013 ACP ANNUAL SESSION IN LAS VEGAS, NV.

PHOTOS COURTESY OF DR. JANE BREWER AND DR. JUDY YUAN

After my daughter was born I returned to work when she was 3 weeks old instead of challenging the decision requiring me to do so. I didn't want to be perceived as not being able to fulfill my obligations.

Unfortunately I never did fully develop the habits I speak about, and my children will tell you that I don't follow my own advice, and they are correct. But, I still try to get better with my life balance. It's just that I like to do so many things (and not all work related). When I finished my program and started teaching, I was pregnant with my first child. After my daughter was born I returned to work when she was 3 weeks old instead of challenging the decision requiring me to do so. I didn't want to be perceived as not being able to fulfill my obligations.

(Another piece of advice: know your rights and learn how to negotiate effectively.) I am so glad my daughter and daughter-in-law do not feel they have to fit a mold—they can work within the flexibility they choose.

I regret that I never challenged the Board. Somehow boards just didn't seem that urgent when I was eligible to start that process following the birth of my twin boys. Fortunately, that process is



JANE BREWER AND DAUGHTER GILLIAN ALEXANDER
HAZBOUN IN FRONT OF THE ALLEN A. BREWER
TREATMENT ROOM DURING THE CELEBRATION OF THE
CLINIC RENOVATION AT THE EIOH IN ROCHESTER, NY,
JUNE 2014.

different today. I wouldn't have traded my kids' soccer or lacrosse games or horse shows or music recitals or concerts for anything.

Things have changed dramatically for women in prosthodontics. A young woman in residency has female colleagues and professors, many of whom have strong careers, families, or

both. Discrimination and harassment are less frequent, and can be challenged successfully. There is a great community of women, and that is truly comforting. Women do not have to follow a straight upward trajectory in their career paths. There are many paths from which to choose, and they can change when circumstances or personal desires dictate the need. Women can see what is possible, not just wonder. I'm fairly certain that in future prosthodontic leadership there will be an abundance of role models who followed different paths to get there. I'm grateful to my profession for all the opportunities I've had and proud to be part of this journey of women in prosthodontics.

DR. SUSAN E. BRACKETT

SUSAN E. BRACKETT, DDS, MS, FACP



My journey to become a prosthodontist was unpredictable, often difficult, and one of the best decisions I ever made, certainly the best career-related decision I ever made. My parents were both born in 1914 and each came from very humble beginnings. It doesn't take much more than simple arithmetic to realize that they were in high school during the Great Depression, and it was quite an accomplishment for them to graduate. As parents, they were determined that their children would go to college, but they never dreamed that I would pursue such a high level of education.

I grew up in Bartlesville, Oklahoma, and one summer when I was 16 I worked for a dentist while his lone staff member went on a three-week vacation. I was quite intrigued by dentistry and did a good enough job that he hired me to work part-time as an assistant to help both chair side and at the front desk during the school year. When I graduated from high school I decided to go to college to become a hygienist. At one point during the application process for hygiene school, some people interviewing me suggested that I should consider dental school instead. Since I found dentistry so

PREVIOUS PAGE: 1971: BETSY BRACKETT, WORKING AS A DENTAL ASSISTANT IN HIGH SCHOOL RIGHT: 1978: Dr. Brackett and dental school classmates pose for the Yearbook. Can you guess which one she is?

My journey to become a prosthodontist was unpredictable, often difficult, and one of the best decisions I ever made, certainly the best career-related decision I ever made.

much more interesting than hygiene, I decided to pursue my DDS. When I informed my parents, they were appalled—dentistry was not a suitable profession for their daughter! It took some time and maturity for me to realize that they weren't being mean; it just wasn't in their frame of reference to imagine their daughter as a "Doctor."

After completing my requirements for dental hygiene school my first two years of college, I spent a grueling third year taking and



completing the additional requirements I needed for dental school. I applied and was admitted to the Oklahoma University College of Dentistry, in its third class with a total of 24 students. I was the only woman, and I was absolutely miserable. Many of my classmates delighted in teasing and harassing me; dental school was much harder than I expected, and I was putting myself through school on loans and scholarships. At the end of the first semester I was so overwhelmed by the debt I was accumulating and so discouraged by my harassment, I decided to withdraw, and I actually missed the first two or three days of the second semester. As I was moving my belongings back to my parents' house, two curious things occurred. First, a few of my classmates called to inquire as to why I wasn't in school and seemed disappointed to hear my decision and expressed regret that I would not be returning. Then as my father was helping me move things inside from my car, he shook his head and said "I never thought you would be a quitter." My parents did not understand my desire to become a dentist, and they had a very difficult time accepting my decision. But, you see, both of them endured difficult times growing up, especially my father. Not only did he survive the Great Depression, but his father died when he was young, no more than 10 or 12 years old. As often happened in that era, my grandmother found a job in service to a wealthy family in Tulsa and sent her only child to live with her sister and brother-inlaw. As an adult, my father worked as a salesman and ceramic tile contractor then taught himself the trade of homebuilding and managed to survive the many pitfalls of that trade and became a real estate broker as well. I came to realize that the qualities of determination and perseverance were ingrained in him, and my father expected his children to work hard and overcome the obstacles they encountered. Those qualities certainly have served me well throughout my life and career. I returned to dental school, realizing that I had to graduate because no other job would allow me enough income to repay my loans.

During dental school my hardest subject was Fixed Prosthodontics. Dr. Herbert T. Shillingburg, Jr. was the Department Chair, and he ran all of the preclinical courses. He seemed larger than life with an intimidating presence—a big man with a booming voice, a quick wit, a no nonsense approach and exacting standards.

I must admit that we got off to a rocky start—there were a lot of issues, but mostly, I just wasn't very talented. I had no natural skills or abilities when it came to crown and bridge. Preclinical Fixed was my most difficult class, and I struggled to make a "C."

I don't know if I was a "late bloomer" or maybe just taking care of patients meant more to me than working on typodonts, but Fixed



1978: On the day of her graduation from dental school, Dr. Brackett poses with her parents, Elsie and Delbert Brackett, and her older brother, Jim.

Prosthodontics made a lot more sense. I began to put it all together once I started in clinic, and my skills improved. Ironically when I was a senior I participated in an elective where I helped teach younger students in preclinical courses—during this time I got to know Dr. Shillingurg better, and he became a mentor and confidante. Because of a number of faculty members who encouraged me throughout dental school, I decided to pursue a career in academics upon graduation.

After serving as a faculty member at the University of Colorado for two years, I returned to Oklahoma to work for Dr. Shillingburg in the Department of Fixed Prosthodontics. Working for Herb was

both rewarding and frustrating; he was a demanding taskmaster, a gifted clinician, and an outstanding teacher as well. After a few years I grew restless and considered a change. For some odd reason I contacted a variety of endodontic postgraduate programsat this point of my life I have no idea why I considered endo. I did not like endo, my endodontic skills were less than optimal, and my personality is not well suited to treating patients wearing rubber dams during the entire procedure! Herb often picked up the department's mail and noticed that I was receiving information about postgraduate endodontic training. He finally approached me and counseled me that I should build on my skills, background, and interests in fixed prosthodontics. It made sense, and about that time a former student told me about the prosthodontic program at the University of Iowa. I applied to that one program and was accepted to begin my postgraduate studies seven years after I graduated from dental school.

Dr. Kenneth A. Turner was the program director, and I will always be grateful that he took a chance on me. My transcript from dental school was far from stellar. I know he was concerned and rightfully so. Fortunately, I received outstanding recommendations from Herb Shillingburg and Dr. Dean Johnson, Chair, OUCOD Department of Removable Prosthodontics and 1981-82 ACP

The learning curve was incredible, and the knowledge and confidence I gained from my prosthodontic program was priceless. Ken Turner ingrained in all of his residents the importance of achieving Board Certification and the value of belonging to the American College of Prosthodontists.

President. Dr. Turner rolled the dice and welcomed me as one of his two residents beginning a two-year program in Fixed Prosthodontics in 1985. My class was the last year to receive a certificate in Fixed Prosthodontics vs. Removable Prosthodontics; in 1986, the programs were combined. Dr. Turner made sure that in addition to fulfilling our fixed requirements, we also treated some removable patients and even restored totally edentulous patients with implant-supported fixed hybrids.

When I arrived in Iowa and declared that I would be pursuing a Master's degree as well as a Certificate, I was told that I would need an additional six months to accomplish both. I could not afford to be out of work for two years PLUS six months. My loans were

1985: ONE THING DR. BRACKETT DID FOR FUN DURING HER PROSTHODONTICS GRADUATE STUDIES: ATTEND HER FIRST ACP ANNUAL SESSION, WITH FELLOW RESIDENTS, ERIC LANGENWALTER, HAL ARNOLD, AND JON MAHAFFEY.

suspended while I was in school; and I received a stipend that covered the cost of my tuition, but I was forced to live on the meager savings I had accumulated. There wasn't time or money for much fun—in two years I went to one movie ("Hannah and Her Sisters"), bought one dress, and attended one football game (Hawkeyes vs. Drake), but I joined all of the residents at the Blue Moon for happy hour every Friday!



Aquilino, Larry Huber, etc.) for teaching me how to apply the principles I learned so well from Herb Shillingburg to treat the patient's overall dental needs. The learning curve was incredible, and the knowledge and confidence I gained from my prosthodontic program was priceless. Ken Turner ingrained in all of his residents the importance of achieving Board Certification and the value of belonging to the American College of Prosthodontists.

JOHN J. SHARRY RESEARCH COMPETITION FINALISTS

After months of reviewing abstracts of research articles accomplished by Affiliate and Associate members of the College, the Research Committee selected six candidates as semifinalists in the 1987 John J. Sharry Competition

The semifinalists (all Affiliates '87), their thesis title, their sponsor and the schools they represent are listed below.

- Eun H. Hahn, D.M.D., M.M.Sc.
 "Preservation of the alveolar ridge with hydroxylapatite-collagen implants in rats"
 Stephen Sonis, D.M.D., D.M.Sc. (Harvard)
- Ana M. Diaz-Arnold, D.D.S
 "Bond strengths of intra-oral porcelain repair systems"
 Robert L. Schneider, D.D.S., M.S. (lowa)
- Susan E. Brackett, D.D.S. M.S. "An evaluation of porcelain strength and the effect of surface treatment" Kenneth A. Turner, D.D.S. (lowa)

I completed my Master's, my Certificate, and my Board patient in July 1987–two years and three weeks after I started my program. Ken Turner was more than a mentor; he and his wife, Sue, became friends. When my furniture was delayed when I arrived, they invited me into their home, and when my departure was delayed they opened their home again and allowed me to stay with them until I completed my Board patient.

I returned to Oklahoma and resumed my faculty position in the Department of Fixed Prosthodontics. That same summer, the first book I co-authored with Herb Shillingburg was published. Fundamentals of Tooth Preparations won an award from the American Medical Writers Association. I also converted my thesis into a scientific paper, which finished third in the Sharry Competition later that year and won the Tylman Award from the American Academy of Fixed Prosthodontics in 1988.

Completing my Board Certification was challenging, but I received a great deal of encouragement from both Herb Shillingburg and Ken Turner. As my boss, Herb even allowed me some flexibility in my schedule to facilitate my studies, and I successfully completed my Board Certification in 1993.

My father died in 1995; a few years later, my elderly mother's health began to decline, and I realized I needed to increase the flexibility in my schedule to care for her. I left the University of Oklahoma in 1998 and joined Dr. Thomas J. McGarry in part-time private prosthodontic practice. It worked out well since Tom was beginning his ascension to ACP President. He needed someone to help keep the office running while he was out of town representing the ACP, and I was able to travel to Tulsa regularly to take care of my mother. Even though I told Dr. McGarry I was here for a "good time, not a long time!", 18 years later we are still sharing an office and enjoying a close friendship.



PRESENT DAY: DR. TOM MCGARRY, DR. LARS BOUMA, AND DR. SUSAN BRACKETT. PHOTOS COURTESY OF DR. SUSAN E. BRACKETT.

Not only did Tom McGarry teach me the ins and outs of private practice, he taught me coping mechanisms for dealing with difficult patients and the highs and lows of practice. Most of all, Tom served as an inspiration and, by example, taught me that there comes a time when all of us need to "give back" to our specialty and the profession that has treated us so well. No matter how busy you are, it is important to contribute more than just dues to your professional organization. There is no better testament of Dr. McGarry's commitment to professional service than the role he

I felt an acceptance and camaraderie in prosthodontics that I never experienced in dental school.

played in revitalizing the ACP Education Foundation. At the turn of the 21st century, Dr. McGarry was joined by Dr. Jonathan Ferencz to initiate the New Vision Campaign, which jumpstarted the fundraising for the Foundation. Today, thanks to Drs. McGarry and Ferencz's efforts and vision, the Foundation is growing with a \$4 million endowment and many active and productive programs that support the College and its members. Because of Tom, the prosthodontists in our practice are active participants in both the American College of Prosthodontists and ACP Education Foundation. I am proud of the support I have given the Foundation as a donor and a Board member, and following Tom's example I will become the third President of the ACP from Oklahoma, a state with fewer than 20 prosthodontists.

Certainly, my postgraduate prosthodontics training was challenging—it was demanding and difficult, and it was hard to become a student without any income after seven years as a faculty member. But I felt an acceptance and camaraderie in prosthodontics that I never experienced in dental school. To this day, I don't know if that was due to the University of Iowa being a

more established and seasoned school that had admitted women for years, and there were women in my program, or if it had more to do with my maturity. I was 20 years old when I started dental school, and I was 31 and much more confident, self-assured, and focused when I began my pros program.

I would like to think that more than forty years after I entered dental school, opinions have changed towards women. I was often mistaken for the dental assistant or the hygienist, but now the public is accustomed to women as physicians, CEOs, and politicians. Just look at popular TV shows where women are routinely cast as strong, independent leaders. I am so pleased and proud of the young women in our specialty—they are self-confident, poised, and accomplished, and no one is going to tell them they don't belong or that they don't deserve recognition. I believe these female prosthodontists can do anything they set their minds to do—the sky's the limit!

Prosthodontics is a wonderful career for young people, male or female. Although it has been many decades since my dental school experience, I feel that all young people face many of the same challenges, especially the cost of education. I went into debt for my education, though it certainly wasn't near the debt today's students are amassing. With that sort of debt, it must be extremely difficult to

secure loans to begin a practice, and many of our recent graduates will need to follow a more unconventional course rather than a traditional solo practitioner practice.

In my opinion, a group practice or even a corporate model may be appealing to young prosthodontists, since it is easier in that environment to create a more flexible schedule. This flexibility will appeal to both men and women, but it will be necessary for those practitioners who might develop health problems or need to increase their family duties. For instance, although I never had children, some years ago I needed to find more time to care for an aging parent. That led me to a part-time practice rather than a fulltime academic career. Women who have children will need to recognize that there may be some physical limitations during their pregnancy and plan accordingly. It seems to me that the young people today are much more creative in their solutions to these types of problems and do not feel a need to follow the stereotypes of the past. There's always something that can interfere with your balance of professional and personal life. At this stage, I struggle to find the solution to balancing my volunteer duties as ACP President Elect with my spouse, since my husband is retired and would like more of my time to travel and enjoy our life together. My husband supports me, but he never worked in the dental profession and

does not consider traveling to prosthodontic meetings fun or recreational! So, the challenges often change, and finding the right balance takes creativity.

I am greatly encouraged by the increasing numbers of women in prosthodontics. When I first joined the American College of Prosthodontists in 1987, 3 to 4% of its members were women; it's now up to 20% and growing. It's exciting to me that today when a woman says she wants to be a prosthodontist, she is not asked "Why?" but "Why not?" As a specialty, we will benefit as women participate in more and more leadership roles in professional organizations, academics, research and continuing education.

DR. LILY T. GARCIA

LILY T. GARCIA DDS, MS, FACP



Many friends and colleagues share their stories of who influenced them to become a dentist. Whether it was the culture of family, or a family member who is a dentist, or a hometown dentist, the stories resonate at times in a similar manner. A decision is usually influenced by someone who you may admire, respect, and look upon as a role model in the community. When I was asked to consider discussing my rationale for pursuing prosthodontics, it is a similar story, influenced by some or someone whom I admired and respected in addition to the early experiences in my clinical education to become a general dentist.

I attended Baylor College of Dentistry in Dallas, Texas. I was as far from home than I could ever imagine, at least an 8-hour drive from my hometown. I was surrounded by some amazing classmates with whom I would share hours upon hours of contact, although many were scattered throughout the Dallas-Ft. Worth metro area. Many of us worked significant hours during dental school, yet we managed to forge friendships that would remain for our lifetimes, even with those we have minimal contact. When my previous classmates connect even now, 32 years after graduation, I commit to help in what is possible for my colleagues. It is in this most interesting of learning environments that I was able to connect with key faculty at Baylor as well. Some

I saw prosthodontists as the ultimate specialists to envision the future for an individual patient, for how they want to appear, how they want to live and function, and how they want to feel about themselves with a sense of confidence and value.

of those faculty members do not even realize their full impact or effect they had on us as students. These connections allowed me to listen and discuss my future with trusted faculty. Their comments, both challenging and complimentary, led me to discuss the specialty of prosthodontics. Those faculty members' assessments of my professional goals led me to think seriously about specialization, and to be specific, specialization in prosthodontics.

I saw prosthodontists as the ultimate specialists to envision the future for an individual patient, for how they want to appear, how they want to live and function, and how they want to feel about themselves with a sense of confidence and value. I also saw this as the recognized specialty to serve as the conductor of this patient-care symphony, in which you bring the best and the brightest of colleagues – allied professionals, general dentists,

and other specialists - to support the vision and treatment plan for one unique person at a time. I did not comprehend the depth and intensity of an advanced education program, a specialty program, but also knew it was an investment in my ability to provide the best possible patient care. I saw this as a similar decision when I began to show interest in music. Early on when all my friends chose to play the "typical" band instruments, I viewed studying the oboe as a unique opportunity, one in which "centers" the orchestra with a single note by which all tune in to prior to a performance. So seeking a specialty that numbers ~4,000 out of the current population of dentists approximating 190,000 was not intimidating, but rather inspiring.

I have been asked about my perspective as a woman in prosthodontics. I suggest that many in similar positions do not necessarily filter their decisions simply because they are women. In fact, many in my age cohort - the "seasoned" - would argue the contrary, since we worked just as hard as our male counterparts. I do reflect on my dental school environment, the starting class size was ~140, but the yearbook shows 125 of which 22, or 18%, are women. This was the environment, it was what our experience was, and it did not seem unusual for that time, as compared to a near 50:50 men:women ratio in many dental schools today. This does

not strengthen or weaken the environment, but rather it is what exists. Anecdotally, I hear more of our newer female colleagues voice interest in networking, but also one of an environment that is not judgmental of their decisions under consideration, such as women managing their own private practices, professional career choices, and the personal work-life balance so many seek. I experience similar issues for discussion with our newer male colleagues as well, but possibly due to creating a safe, confidential environment to have these types of discussions.

The recent graduates from specialty programs in prosthodontics experience the same challenges many seek in private practice, the competitive environment in the business of private practice. One of the key differences from the day I graduated from dental school in 1984 to today in 2016 has been noted nationally through organizations such as the American Dental Education Association: educational debt! Loans approximately valued at \$45,000.00 in 1984. With a 2.69% annual inflation rate over this period, this would be equivalent to \$105,100.00 in 2016.¹ The average debt of a dental school graduate today is said to be approximately \$250,000.00 and higher. That implies that those who seek advanced education in a specialty must realize that specialization is an investment in and of itself, and investment in one's self, that can





provide a higher return on investment as compared to moving immediately into practice in comparison.²⁻⁴

I initially set my professional goal to be in private practice. Due to my personal decisions, I learned to be flexible in managing professional challenges and opportunities. My first real work toward becoming a private practitioner was as an associate with a highly experienced, highly talented, and highly skilled general dentist. Due to personal constraints, I was unable to seek a full business partnership when I committed as an associate dentist. I did frame the associate position as one in which I could learn from someone who had business acumen and lived through extremely challenging economic times; she survived and thrived successfully in the Denver, Colorado private practice sector. So for those just beginning, view your opportunities carefully and learn from your situation. I did transition from private practice into an academic institution with respect and appreciation for both what I was leaving and what I was gaining. Many will transition into their own practices, or multi-practitioner practices but either route

TOP: DR. LILY GARCIA WITH DR. PER INGVAR BRANEMARK AND MS. HIROKO SHIRANE
BOTTOM: DR. LILY GARCIA INSERTS A MOUTHGUARD IN TO THE FACE OF HER PROGRAM DIRECTOR, DR. ROBERT
MORROW. DR. GARCIA CALLS HIM ONE OF HER MENTORS.





LEFT: DR. DAVID BOHENKAMP AND DR LILY GARCIA WITH DR. SUMIYA HOBO AND DR. NOBUTAKA HARAMOTO.
RIGHT: DR. LILY GARCIA CONSIDERS HELPING OTHERS SUCCEED A JOY OF HER CAREER: "EXPERIENCING THAT
FEELING IS A REWARD."

requires a substantial commitment. It is not easy to transition, since the patients may perceive change for other reasons. It is best to thoroughly understand the entry and exit legalese from whatever environment you explore but remain responsible for your professional path and for the well-being of your patients. As a prosthodontist, the professional relationship with patients is highly valued in a monetary sense and in situations where the prosthodontist was the specialist of last resort to address a complex oral health need, such as when one handles complex oral rehabilitations.

The specialty of prosthodontics has evolved over the past 30+ years when one considers the advances in oral health technologies, both for direct intraoral use and desktop planning for procedural dentistry, in addition to therapeutic advancements for maintaining both hard and soft tissue. The most significant and one of the most impactful dental advances has been in planning for oral rehabilitation with dental implants as adjunctive therapy options. While many patients are keenly interested in the full benefits of including dental implants as part of an overall treatment plan, the long-term maintenance of highly individualized prosthetic designs and implant biomechanical componentry is important to realize and communicate. A patient's commitment goes well beyond an annual "check" but rather, a commitment by patients to maintain





TEXAS: In a beautiful ceremony on May 30th attended by the prosthodontic community of South Texas, Dr. Lily Garcia and Dr. David Bohnenkamp were joined in matrimony, undoubtedly one of the few prosthodontic weddings on record. Both are Affiliate members, soon to be Associates, of the College.

Lily completed her residency in June from the University of Texas Health Science Center at San Antonio at the same time her husband David, completed his residency at Wilford Hall USAF Medical Center.

There were more than forty prosthodontists from both the civilian and military communities in attendance. Shown with the happy couple are the Air Force prosthodontists from the Wilford Hall residency program. their healthy condition over their lifetime. I was fortunate to have been a resident at the University of Texas Health Science Center San Antonio at the time Dr. Per Ingvar Brånemark executed his first dental implant surgery for us, UTHSCSA, as one of the five centers in North America. The experience exceeded my vision for prosthodontics and most certainly transformed patient care based on the premise of

osseointegration. From mentors such as Dr. Ken Rudd, Dr. Robert Morrow, Dr. Stephen Parel, to name a few throughout the years, we became the first cohort of Prosthodontist graduates to have experienced dental implants at a new level. Experience with Dr. Axel Kirsch challenging concepts in dental implant design, Dr. Sumiya Hobo challenging dentists to restore dental implants based on gnathologic principles for success intraorally, Dr. George Zarb challenging us to expand

TOP: DR. GARCIA'S WEDDING TO DR. DAVID BOHNENKAMP WAS CELEBRATED IN THE *ACP Messenger*.

BOTTOM: DR. GARCIA WITH HER DAUGHTER, JULIANNE BOHNENKAMP.

PHOTOS COURTESY OF DR. LILY T. GARCIA

It is important to identify what drives you to succeed and to recognize when you have achieved whatever you set for yourself.

the scientific foundations for this therapy, prosthodontists should be proud to have been part of the team to advance patient care.

The specialty of prosthodontics is one of the most incredible as to the professional scope and bandwidth available, offering a unique and recognized subspecialization. It is a specialty known to challenge many to seek excellence in every aspect of the education program, and in every aspect of ultimate patient outcomes. While many may state "I do what you do," it is not about a boundary between colleagues, it is about what is in the best interest of our patients.

So now what?! With all this education and attempting to balance personal choices for work-life balance, it is important to identify what drives you to succeed and to recognize when you have achieved whatever you set for yourself. Without detailing my personal life choices, I am so fortunate to have worked and lived with an incredible person, in addition to having the gift of a full

family life. I realize now that it is important to acknowledge there are many who seek to identify with a person of backgrounds similar to their own, whether the latter means "as a woman," "as a woman prosthodontist," "as a Mexican-American," "as a Hispanic professional," "as an Academic," "as a volunteer leader in an organization,"... whatever the label, if it means to connect with a person to help model what is possible, it is important to frame the view from that person's perspective, rather than my own.

It is with a deliberate, respectful vantage point that I can then speak briefly when I encounter a young female faculty member and suggest "to take off all the time you can possibly afford to be with your newborn" or to a young male "to take off all the time you can possibly afford to be with your newborn". The intent is genuine and the message clear, make certain you know what you want and then work in a strategic and deliberate manner to achieve the balance you seek, male or female.

References

- 1. Dollar Times: Inflation Calculator. http://www.dollartimes.com/calculators/ inflation.htm
- 2. Nash KD, Benting DG: Private practice of prosthodontists in the United States: Results from the 2008, 2011, and 2014 Surveys of Prosthodontists. J Prosthodont doi: 10.1111/jopr.12475
- 3. Nash KD, Benting DG: Private practice of prosthodontists in the United States: Results from the 2008 & 2011 Surveys of Prosthodontists. J Prosthodont 2014;23:10-20
- 4. Nash KD, Pfeifer DL, Sadowsky SJ, et al: Private practice of prosthodontists: Current conditions of practice in the United States. J Prosthodont 2010;19:175-186

DR. CAROL A. LEFEBVRE

CAROL A. LEFEBVRE, DDS, MS, FACP



My journey has been guided by the many role models and mentors who have impacted me along the way. My parents were my first role models. My father was orphaned young. My mother was the oldest of 13 children, so she was pulled out of school to help raise her siblings. Although they did not have the opportunity to finish high school, they instilled a fierce appreciation for education in my sister and me. For them, education was everything.

Having a love of science throughout my education, my plan was to go to medical school.

I was studying premed when I spent a summer working as a dental assistant for Dr. Roy H. Roberts, a University of Michigan graduate who had a general dentistry practice and was very devoted to his patients. Dr. Roberts encouraged me to switch gears and apply to dental school. I worked in his office during holidays and breaks throughout dental school. He supported me by paying for all of my books during dental school and trained me in all aspects of his practice.

It was never my plan to consider a career in academics. During my senior year of dental school Dr. Brien Lang asked me to teach in the complete denture block after graduation. That experience led me to pursue specialty training in prosthodontics, as there was still so much I wanted to learn. After spending three years teaching removable prosthodontics at Northwestern University I was recruited to the Medical College of Georgia by Dr. Arthur Rahn, who served as my clinical/educational mentor. Soon after joining the faculty in Georgia, I was paired with a research mentor, Dr. George Schuster, Chair of Oral Biology. Again, I found myself in a very nurturing environment and enjoyed the variety that academics brings: teaching, clinical care, research, and service.

After serving as a journal reviewer for several years, I was appointed as the Basic Science Section Editor for the *Journal of Prosthodontics* and ultimately editor of *The Journal of Prosthetic Dentistry*. I was fortunate to have the opportunity to work again with my mentor, Dr. Brien Lang, on a daily basis for nine years. The Editorial Council ultimately took responsibility for the design, layout, and publishing of the Journal, and I learned much along the way, interfacing with an editorial review board, authors, staff, and the publisher.

While serving as section director of removable prosthodontics,
Dean Connie Drisko supported me to attend the Executive
Leadership in Academic Medicine (ELAM) program. Being in a
community of accomplished women and having the opportunity to
hone my leadership skills was a transformational experience.

After I completed the program, Dean Drisko appointed me as an Associate Dean to lead the team planning and designing our new dental school. After serving as Vice Dean, I was appointed Dean of The Dental College of Georgia.

My journey has been full of twists and turns that were never anticipated, let alone planned for. While it is important to have goals to strive for, it is equally important be aware of and open to opportunities that may come along the way. There is no way that I could have anticipated that I would serve as an editor, an associate dean overseeing the construction of a new dental school facility, or a dean. Each new opportunity presented challenges, but the lessons learned with each new responsibility were tremendous. I have come to appreciate those opportunities that cause uncertainty or doubt as they have caused me to grow both professionally and personally.

It is important for young prosthodontists to develop a strong support system, both professionally and personally, to help achieve goals and work/life balance. I would not be able to do what I do without a supportive husband and a network of family and friends to rely on. It is equally important to be passionate about something outside of the work environment to help in achieving work-life

balance. I took up quilting when I moved to Georgia and enjoy blending the fabrics and colors to make a unique work of art.

Certainly, when I started my residency program there were fewer women in prosthodontics than there are now. I was only the second women to matriculate through the prosthodontic residency at the University of Michigan. However, my mostly male faculty and mentors never made me feel different because of gender. At each institution, I found a very encouraging and accepting environment that I hope all prosthodontists, male or female, experience.

The landscape of prosthodontics has changed dramatically since I was a resident. We have many more women prosthodontists. However, we need to have more women in leadership roles as chairs, program directors, board examiners, deans, as well as on the podium presenting their educational, clinical and scholarly findings. I encourage women to seek out leadership programs to assist them in understanding their strengths and weaknesses as well as to enhance their ability to lead self and others. It has been my experience that one of the most positive benefits of such programs is the network one establishes. Knowing that you can reach out to others who have similar experiences is important.

DR. MARY P. WALKER

MARY P. WALKER, DDS, MS, PHD



After graduating from dental school and completing a general practice residency, I purchased a dental practice from a gentleman who after 22 years decided to specialize in prosthodontics. Dr. Bergstrom was a wise and wonderful mentor who counseled me "to keep your career options open, and if you decide to specialize, don't wait as long as I did." Looking back, my journey to prosthodontics probably started the day he said that to me.

Having purchased a long-standing, successful general practice from a male, some of the patients definitely wondered about this 'lady' dentist who was taking over. Starting a family was another challenge, since I couldn't afford to take off much time as the solo owner and still maintain my staff and continue to meet practice financial responsibilities.

Two weeks after the baby was born, I went back to practice. I came back half days for 4 weeks and brought the baby with me to the office, which was possible since my staff graciously helped care for the baby. Beyond that, there was an unexpected benefit of having the baby at the office. At that point there were very few female solo practice owners and as I mentioned earlier, some of the patients didn't quite know what to think of a female dentist. Once I came back to work with the baby, now I was a 'mom' and everyone can

Having purchased a long-standing, successful general practice from a male, some of the patients definitely wondered about this 'lady' dentist who was taking over.

relate to a mom. My interactions with those reluctant patients became easier on a personal level—we had something in common.

After 12 years of practice, I did return to school to specialize in prosthodontics with the objective of an academic career focused in the area of dentistry I enjoyed the most.

Selling my practice to specialize in prosthodontics, while challenging, was a good decision. Although the residency was demanding and there were long hours, after owning a dental practice and having a family, the residency for the most part was manageable. I was fortunate to learn from some caring and passionate faculty who were excellent role models. I also had an extremely supportive spouse, who was encouraging and helped me keep things in perspective. My career has been immensely satisfying and my training in prosthodontics was a vital component of my successful career development from private practitioner to professor and an associate dean. I have no regrets about the path I've taken and would do it again.

DR. SHARON C. SIEGEL

SHARON SIEGEL, DDS, MS, MBA



I never set out to be a prosthodontist. I only wanted to be the best general dentist in the world for my patients. I thought I wanted to "do it all" and "know everything about everything in dentistry" and that this was actually possible. But as I was practicing in a small clinic after doing a General Practice Residency and a two-year utilization tour in Germany in the United States Army Dental Corps, I had an opportunity to apply for a teaching position at the University of Maryland, Baltimore College of Dental Surgery.

The Department of Removable Prosthodontics lost a faculty member, and Dr. Robert Leupold needed a replacement immediately. I interviewed with Dr. Leupold, who was most supportive of me joining the department. I recall saying shyly and humbly to him that "Removable Prosthodontics" was a difficult area of patient treatment for me but that I would be willing to do my best. He stated to me very comfortably, "I would rather mentor someone with a character like yours and great work ethic than to try to reteach someone with bad habits." Besides this, my husband told me that if I didn't like teaching, I could just quit! I had nothing to lose by joining the faculty at the University of Maryland. Dr. Leupold was my first mentor, and was the person I attribute to showing me "the way" in following the path for my life in prosthodontics.

I can't thank Dr. Leupold enough for providing the opportunity he afforded me in academics in general and in prosthodontics in particular. I discovered that I just loved teaching. The process was so fulfilling and exciting and different every day. I could teach, learn, do research, become involved with committees and politics in the school, add to new knowledge in the field. There was no limit to what I could accomplish. I had no idea that this was the area of dentistry that I would fall in love with. As I continued in my career in teaching, with presenting lectures to the students, becoming involved as a course director, and becoming involved with more complicated patient treatment, I realized I needed to learn more to give more to the students. I wanted to be able to understand the literature, and the rationale and evidence base behind the treatment I was recommending. I needed to learn more about treatment planning more complicated cases.

I could teach, learn, do research, become involved with committees and politics in the school, add to new knowledge in the field. There was no limit to what I could accomplish.

One day, Dr. Leupold asked me if I wanted to join one other faculty member and matriculate into the PG Prosthodontics Program while continuing to teach the predoctoral students. It was a tremendous decision for me since I had a 6-year-old daughter. But, I knew this opportunity had a limited timeframe and that it was what I needed to do to be better for my students and to be able to treat patients at the highest level possible. I accepted the challenge, and it took me three years to complete the PG Prosthodontics program in 1992. I have not regretted a moment of the time I spent completing the program, even though processing dentures at 3 a.m. caused some reverberations in my personal life. I completed a Masters Degree in Oral Biology at the same time but that took me 2 more years to finish, since I needed to change thesis projects and mentors.

The advice I have for other women entering the specialty of prosthodontics is that it is difficult and challenging, but so fulfilling. I believe that the specialty is so much more embracing of women than when I started in the specialty. We have so many wonderful female prosthodontist leaders who have paved the way for women, to include <u>Dr. Nancy Arbree</u>, <u>Dr. Lily Garcia</u>, <u>Dr. Carol Lefebvre</u>...

You have so many women who have joined the ranks who will be there to mentor you and support you and to tell their stories to help you. I would recommend that you contact them with questions that you have about entering the specialty. I would recommend that you attend the American College of Prosthodontics Annual Session to see the warmth and encouraging nature of the specialty.

It is difficult to balance your professional and personal life as a prosthodontist. You need to have the philosophy that you don't have to be good at every aspect of your life every day. One day you may be a great prosthodontist treating your patients but not such a great wife or mother. The next day may be just the opposite. But that is ok.

You just need to continue to make progress and to focus on what is the most important component of your life at the time. You must make time for yourself with adequate sleep, good nutrition, exercise, and cultivating hobbies. You must also make a decision that while prosthodontics is your profession, your family and friends are your life. They are both important and should both have a focused value in how much time you devote to them. Each must be nurtured and shown how much they are valued.

You need to have the philosophy that you don't have to be good at every aspect of your life every day.

One day you may be a great prosthodontist treating your patients but not such a great wife or mother.

The next day may be just the opposite.

But that is ok.

I believe that women will make a tremendous impact in prosthodontics in the future. More female prosthodontists have shown themselves to be leaders and are being invited to join the ranks of the leadership of the American College of Prosthodontists. I believe that the current leadership must extend open arms for more women to become Directors of Postgraduate Prosthodontics Programs and Chairs of Departments of Prosthodontics and Deans of Dental Schools. Women in prosthodontics need to encourage and engage women to apply to prosthodontics programs, to publish their research in prosthodontic journals and to become educators in prosthodontics. The specialty of prosthodontics is challenging, but those women who become prosthodontists will always be gratified to become part of this exciting, constantly

innovating specialty of dentistry. Women should be encouraged to know that they can be successful in this area of dentistry that at one time was very male dominated. Prosthodontics now embraces women, and women can shape the face of our specialty.

DR. LISA A. LANG

LISA A. LANG, DDS, MS, MBA, FACP



Although one might have thought it was a likely path for me to pursue a career in dentistry being the daughter of a prosthodontist, my path to becoming a prosthodontist was a convoluted one. The world was a very different place when I was growing up, and the glass ceiling was lead lined. Having been raised by parents who inspired their children to be whoever they wished to be and to pursue the career in which they were most interested, I chose a pathway towards sports medicine. As a student trainer at the University of Michigan, I quickly learned a valuable lesson when I was sent over to the men's training facility to obtain supplies, but was refused entrance into the men's athletic complex because I was a woman. I stood at the back door of the facility in the rain waiting for boxes of athletic tape. It was 1982, I was a sophomore in college, and I quickly made the decision that I needed to change my career path.

As I reflected on what I wanted to do with the rest of my life and was considering a career in dentistry, I met two dental hygienists who had returned to school to obtain their bachelor's degrees. Their passion for their profession inspired me. I decided to transfer into the dental hygiene program at the University of Michigan, obtaining a bachelor's degree in Dental Hygiene with the goal of using dental hygiene as a stepping stone to dental school and a

I decided I wanted to be a prosthodontist after treating my first denture patient. The experience I had treating that patient under the supervision of Dr. Charles Kelsey was life changing for me.

means of funding my education. After graduating from the dental hygiene program, I spent a year completing the additional course work needed to apply to dental school and working full time as a dental hygienist prior to entering dental school the following fall.

Oftentimes in life, the people who are the most influential in our life decisions are those whom we meet that may not even know the impact they have had on our life. So was the case for me.

I decided I wanted to be a prosthodontist after treating my first denture patient. The experience I had treating that patient under the supervision of Dr. Charles Kelsey was life changing for me, for that was when I learned the impact one could have on the self esteem and quality of life of our patients through our prosthodontic patient care. Time and time again over the course of my career I have had this rewardingly powerful experience. It is that which has validated my decision to be a prosthodontist.

I was very fortunate to have gone to the University of Texas Health Science Center in San Antonio to complete my prosthodontic residency. My mentor, Dr. Robert "Mick" Morrow, was a true officer and a gentleman. He was a scholar who early on believed in evidence-based dentistry (before the term was coined), a master clinician, forward thinking, a promotor of women, and loved by his students. Dr. Morrow promoted hard work and an environment of striving for excellence.

As one of only two women out of nine residents, it was a different world than we live in now. As a woman, you needed to make a decision as to how you wished to fit into this atmosphere; you could isolate yourself, or you could be one of the boys. I chose to be one of the boys. In doing so, the camaraderie created through three years of working together in the lab and clinic forged friendships that will last a lifetime.

We all must face challenges in life; it is part of life. How we choose to face these challenges is what defines us as a person. My decision early on in life was to be the best that I could be at whatever I chose to do. In other words, I decided not to define myself by an adjective (gender) but chose to define myself by a noun (prosthodontist). In doing so, I took back my equality. Men don't define themselves that

way - why should I? This mindset has allowed me to face and overcome life's challenges.

I decided not to define myself by an adjective (gender) but chose to define myself by a noun (prosthodontist).

When I speak to female dental students, it is often hard for them to imagine a world in which the dental class was not at least half women, in which the patients did not assume you were the dental assistant and ask when the doctor would be there, and in which you were expected to be twice as good to be considered equal to your male counterpart. These were the times from which today's dental students' female faculty rose. Fortunately, the students of today do not have to endure these times. Instead, they may focus on the changing world of dentistry and the technical advances in prosthodontics.

Over the course of my last 25 years, my life has been enriched because I chose a profession that I love. I enjoy and have a passion for teaching and for prosthodontics. My career choices have given me great opportunities to experience the world. Although when I was a teenager, I never would have imagined following in my father's footstep, as an adult when I reflect upon my childhood, living in a home with a mother who was a teacher and a father who

is a prosthodontist who also has a passion for the specialty of prosthodontics and teaching, it now seems like the most natural thing for me to have done.

When I am asked by students contemplating specializing in prosthodontics why I chose the specialty and would I do it again, I recount my rewarding patient experiences of my first denture patient, of the nine-year-old ectodermal dysplasia patient for whom I made a mixed dentition denture, and of my 93-year-old implant patient, all of whose treatment improved their self-esteem and quality of life. I tell them of the satisfaction I have received by positively impacting my patient's lives, and that you cannot get that from a class II composite, extracting a tooth, or scaling and root planning. So, to anyone considering a career in prosthodontics, I say if your impetus to be a dentist is to help people, then there is no better specialty than prosthodontics.

As one begins a specialty program or practice, it is important to remember that mentors come in all shapes and sizes. I have been very fortunate in my prosthodontic lifetime to have had wonderful formal and informal mentors; parents, teachers, chairs and deans, and colleagues all from whom I have learned. However, I have recently learned while mentors are important, it is even more important to have a sponsor. A sponsor is a mentor who goes the

For women seeking a career in private practice, the potential is limitless. For women in an academic career, the prospects are infinite.

additional mile. While a mentor is someone from whom you may learn or model behavior, a sponsor is a mentor who takes interest in you and your career and is willing to help, support, and promote you. These individuals are more difficult to find, but establishing this type of relationship is beneficial to both parties.

The future for prosthodontics is a bright one. New advances in the discipline are creating opportunities for us to improve our patient's oral health like never before. For women seeking a career in private practice, the potential is limitless. For women in an academic career, the prospects are infinite. Female prosthodontists are Prosthodontic Program Directors, are Department Chairs, and are Deans of Dental Schools. My parents were right: you can be whoever you wish to be.

DR. LISA THOMS

LISA THOMS, DDS, MSD, FACP

In the late 1980s, at USC School of Dentistry, I was told "women are inept." OK, I admit, I did leave some extra plaster on my articulator. By the time I graduated, this particular professor offered to write me a strong and loving recommendation for me to proceed to graduate prosthodontics. Obviously, his words only strengthened me.

After applying to grad pros at the University of Washington and gaining acceptance as the third woman to go through this program in the 25 prior years, I later learned that I came close to not being accepted. The reason, not my grades, all of my extra prosthodontic education, or my clinical skills, but the fact I might be "too much of a distraction to the men." One of my staunch supporters, Dr. Terry Donovan, flew up to convince Dr. Yuodelis I was a very serious candidate, and he would not regret my acceptance. Whew, that was a close one! Because I can't imagine my life if I had not had this amazing opportunity to further my education in a field I love and continue to love.

Becoming a prosthodontist was the best thing I have ever done in my career and I am grateful to have had this opportunity.

Fast forward to 2016, and Dentsply Sirona has welcomed me with open arms for my encore career as Senior Manager, Clinical Affairs in the Implant Small Business unit. No derogatory words toward



Dr. Lisa Thoms with ACP leadership. Photo courtesy of Dr. Lisa Thoms.

women. In fact, I got a little excited during my interview and recommended that our general manager and VP, John Voskuil, read Fast Forward: How Women Can Achieve Power and Purpose, by Melanne Verveer and Kim Azzarelli. I also told him that we only had one female board member and needed another, and that I wanted to grow our list of female Key Opinion Leaders (KOL's). He still hired me! Also, Alison Adams, Senior Events and Tradeshows, interviewed me and explained that she also was supportive of more women and told me about the ACP's

Women in Prosthodontics project. This got me even more excited about a position in this company, feeling like I could help make a difference.

After graduation from dental school, I taught a day a week, practiced in a general dental practice a couple days a week, practiced in Cherilyn Sheets' prosthodontic practice a day a week, and worked as a hygienist temporarily. I knew I was going to apply to grad pros soon, as every elective course I took was in pros, I excelled in this area, and all of my mentors were prosthodontists. However, I was just about to be married. Knowing that I was too focused on dental school, he waited to propose until I graduated. I really couldn't wait to apply once I started practicing and learning more and seeing what prosthodontics was all about in the real world. So, I moved to Washington shortly after getting married and he stayed, as his job was in California. I hated college, but I absolutely loved dental school, and grad pros was the best thing ever! I loved every minute of it, even though it was three straight years of up to sixteen-hour days with a grueling schedule. I learned so much and didn't know what I didn't know until I got there. Needless to say, my marriage didn't last, as I was only able to fully commit to prosthodontics.

Straight out of grad school, I bought a practice from another prosthodontist. Toward the end of my third year, I was wearing thin and told Dr. Bryant, the seller, that I was not going to get my MSD. He told me I had to get my MSD because I needed to have the same letters after my name as he did so that I would have more credibility with his patients. It was great advice, and I persevered. In 1993, I began my new career with \$580,000 of debt.

I was raised by a very strong single mom who worked as a secretary. She has always been, and continues to this day, to be my closest friend and role model. I loved every day of my beautiful practice in Seattle, WA and would have never left except for the fact I began to have severe, chronic cervical pain. I tried everything, including two surgeries and 250 practitioners, inside and outside of western medicine. I never had children, and I hung onto my practice as if it were my only child. Ultimately, I had to let go, knowing I couldn't practice to the level required of a prosthodontist.

I sold my practice to Jennifer Emerson, who was one of my graduate students at the University of Washington. I had devoted a day a week to teaching clinically and in the scientific literature review while practicing three days a week. I loved this combination, as it kept me current and I felt like I was making a difference and

I was raised by a very strong single mom who worked as a secretary. She has always been, and continues to this day, to be my closest friend and role model.

contributing to our profession. Prior to my decision to sell, I recognized needed a just-in-case back-up plan, so I began studying for the pros boards even though I was on the downhill side of forty. It took three years, a ton of stress, but I did it. I got board certified! I was then able to apply for the position of Associate Director of Prosthodontics at AT Still Arizona School of Dentistry and Oral Health a year after I sold my practice. I was hired and then moved to Arizona from Washington to teach full-time. I fulfilled my two-year contract and absolutely loved this job as well; however, the clinical teaching was still too hard on my neck.

I regrouped, moved back to Newport Beach to be close to my mom, dad, and brother and took a year off. I learned to surf, did a lot of yoga and meditation and recovery, and got lots of time with my family. I had planned to start looking for a new job after one year. Toward the end of my year sabbatical, I went to hear my very good friend and fellow prosthodontist, Mark Montana, speak for Dentsply Sirona. The next morning, I went to meet him for breakfast

and he said there was a job opportunity at Dentsply Sirona for me. I was surprised, as I didn't realize I was "interviewing" when I met the people in the company. That position was filled internally, but this connected me to the regional sales manager, Alfred Semaan, who then listened to my story and said he would keep his eyes open for a position that would suit me. Within another couple weeks, Alfred called and said there was a newly created position that had not yet been posted, and it fit me perfectly. He was right. This new position fits me like a silk glove. It's only been three and a half months, but I could not be happier with Dentsply Sirona as a company, the people within the company and the opportunity to connect with all of the dentists and specialists. I am learning even more about implants now that I am not in practice.

I'm thrilled to see some of my male colleagues' daughters graduating from dental school and the specialties. Steve Chu's daughter will be going into Perio after her AEGD program, Michael Block's daughter just graduated from Ortho, Keith Phillips' daughter wants to go into dentistry, although still in high school, Jonathan Wiens' daughter received her board certification at the same time as I did, and Thomas Taylor was

I am so grateful for all who have gone before me and supported me and who have contributed to our field academically, politically, scientifically and clinically men and women.

incredibly supportive and sweet to me during my boards. I later found out he has a daughter who is also a prosthodontist.

It only makes sense that our natural progression is to continue to normalize our distribution of women in leadership roles. I am so grateful for all who have gone before me and supported me and who have contributed to our field academically, politically, scientifically and clinically-men and women.

Having been a women's libber since I tried out for peewee football in the 70s, I am so very supportive of this initiative with ACP. If I can help anyone during her prosthodontic career journey, please feel free to contact me at lisa.thoms@dentsplysirona.com.

DR. JUDY CHIA-CHUN YUAN

JUDY CHIA-CHUN YUAN, DDS, MS, FACP



My father is the inspiration for my pursuing prosthodontics as my specialty training. He has shared his clinical experience with me as a general practitioner, and has always encouraged me to seek additional training. His philosophy of being prepared and an expert in the specific field is the driving force for me. Being meticulous and attention to detail - I feel that I fit right into the prosthodontics specialty.

I have come to appreciate all the tools and knowledge I have acquired along the way. The more I learn, the more I feel that I can achieve the near perfect outcome for my patients. I enjoyed my prosthodontics training in SUNY Buffalo, and had the opportunity to meet other accomplished female prosthodontists at the school. My program director, research mentor, and clinical faculty made my journey very enjoyable. They were supportive in both academic and private life, and this precious experience has become something I will always cherish. Their guidance and encouragement throughout training were superb. My program director once told me "Life is not a superhighway. There are always bumps along the way." Although it was hard to digest immediately, when I faced a challenge, I take that lesson to heart, and it has helped me overcome obstacles throughout my training, and even now at my current position. I share this advice

I am proud to be a prosthodontist, and would like others to have the same positive journey and experience as I had. I envision that the equal opportunity will rise for all, as long as one is qualified, not because of one's gender.

with my peers and students, and hope that it will empower them as well.

I have always wanted to be in academia, starting early in my dental training. Part of it was from my father's recommendation that it is a good career pathway for women. He felt that the complexity and responsibility of a clinician is enormous compared to an academician. Aside from that, I had grown the passion to contribute what I have acquired to others. I felt the obligation to share my knowledge and guide students to reach their goals. I wanted to duplicate my positive experiences with my mentors to my students.

Along my educational journey, I have seen more and more women participate in the field. Remembering what others have shared with me about gender inequality and discrimination,



DR. JANE BREWER PRESENTS THE CLAUDE BAKER AWARD TO DR. JUDY YUAN AT THE 2012 AMERICAN ACADEMY OF FIXED PROSTHODONTICS ANNUAL SCIENTIFIC SESSION. *PHOTO COURTESY OF DR. JUDY YUAN*.

I feel blessed that I did not encounter any of the unpleasant scenarios. I see even more female prosthodontists in academic dentistry compared to when I was a student. This is truly encouraging and satisfying. Perhaps gender will not be an issue anymore. I am humbled to be where I am now with my current position. I am fortunate to have guidance from my mentors, support and

acknowledgement from my supervisors, and assistance from my peers.

I have learned from my mentors tremendously, not only for academic success, but also for private life-work balance. They have taught me the importance of having a healthy private life to sustain a productive work life. I see them as examples on how to I have learned from my mentors tremendously, not only for academic success, but also for private life-work balance. They have taught me the importance of having a healthy private life to sustain a productive work life.

manage the academic work, organized dentistry participation, patient care, and family time. I am learning to be better in terms of having more private time to recharge. I hope that I will reach that goal.

I believe that we will soon enter an era with no gender inequality issues. I have learned that there are many programs in organized dentistry and institutions to support women and facilitate female growth and development. These have led to many successful women leaders in the prosthodontics field. Being in academia for almost a decade, I have always encouraged my students to pursue the prosthodontics specialty. I am proud to be a prosthodontist, and would like others to have the same positive journey and experience as I had. I envision that the equal opportunity will rise for all, as long as one is qualified, not because of one's gender.

DR. GHADEER THALJI

GHADEER THALJI, DDS, PHD, FACP



Growing up, I often accompanied my dad to his dental office, which inspired me to choose dentistry and further, prosthodontics, as career paths. I found prosthodontics a fascinating field where there is a synergy of art and science in which demanding technical skills must be partnered with thoughtful foresight.

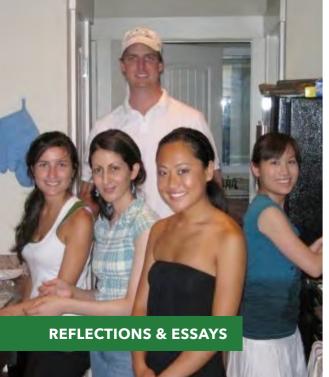
Prosthodontics is unique in how it gives the clinician the ability to transform patients' lives. Loss of teeth is associated not only with compromised oral function, but also loss of social status and diminished self-esteem. It is incredibly rewarding to see the joy on the patient's face right after receiving a dental treatment. A great reason why I chose to be a prosthodontist is our direct interactions with patients and how we can influence their outlook and self-confidence; our ability to make them enjoy their meals with their family and friends, or make them smile for their prom or wedding pictures. It is amazing, but even little kids notice their grandmother's teeth when they are absent.

Early in my dental career, I started seeing complex patients with loss of vertical dimension, severe atrophic ridges, and young patients with cleft lip and palate, etc. This made me feel that I would not be as effective in providing the best treatment available for my patients as a general practitioner.

I understood early on that as a prosthodontist, I would get to be the captain of the ship, but most importantly I will get to work as a part of a team with many other specialists in an interdisciplinary manner to give those patients the best care they deserve.

My interest in prosthodontics also came from an affinity for challenge and excellence. I knew that being a prosthodontist gives you a different dimension in your thought process and treatment planning for unique challenges posed by different complexities of treatment. I wanted to be the one who gets to treat those young kids affected with oligodontia, those with clefts, surviving cancer patients who were affected by surgical resections of part or all of their jaws. I understood early on that as a prosthodontist, I would get to be the captain of the ship, but most importantly I will get to work as a part of a team with many other specialists in an interdisciplinary manner to give those patients the best care they deserve. That needs a level of competence that prosthodontists can certainly deliver. As a prosthodontist, you learn to envision the final outcome at your planning phase and develop a strategy to maximize the longterm efficiency of the dentition. As a prosthodontist, you get the







tools to change and create new smiles. What even makes it more fun is that each patient you encounter is unique in their oral conditions and history, and you get to individualize the treatment to best fit this patient's needs.

In addition, I found prosthodontics an innovative science. Developments in materials, dental implants, and digital technologies to provide our patients with the best outcomes are continuously and rapidly evolving. There is always something new to learn and do!

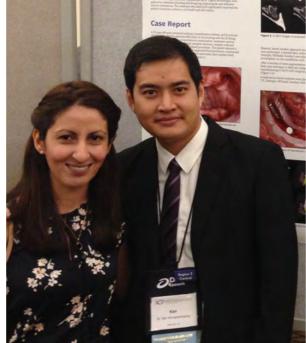
I am very proud to have chosen prosthodontics. I advise young women to consider it as a career path. Prosthodontics is a very prestigious and rewarding specialty. Yes, the prosthodontics residency can be challenging at times with the loads of work

TOP: DR. THALJI IN THE LAB KEEPING HER UNIVERSITY OF IOWA RESIDENTS IN LINE.

BOTTOM, LEFT: DR. THALJI (SECOND FROM LEFT) AND FELLOW UNC RESIDENTS TAKE SOME TIME OFF TO BAKE.

BOTTOM, RIGHT: DR. THALJI (RED SWEATER) WITH UNIVERSITY OF IOWA RESIDENTS.







LEFT: UNC PROSTHODONTICS STUDENTS PAST AND PRESENT GATHER TO SAY GOODBYE TO THEIR MENTOR, DR. LYNDON COOPER. (DR. THALJI 2ND ROW, 5TH FROM THE LEFT)

CENTER: DR. THALJI IS IN THE EARLY STAGES OF MENTORSHIP: HERE SHE ENCOURAGES HER RESIDENT, DR. KAN WONGKAMHAENG, IN HIS ACP POSTER PRESENTATION.

RIGHT: DR. ALIREZA MOSHAVERINIA AND DR. GHADEER THALJI WERE NAMED THE 2013 GSK PROSTHODONTIST INNOVATOR AWARD RECIPIENTS (PICTURED WITH DR. LILY GARCIA).

PHOTOS COURTESY OF DR. GHADEER THALJI.

that need to be done, whether it is didactics, lab work, or research. But you learn early on how to efficiently manage your time. I am a strong believer that where there is a will, there is a way! I like a quote by Steve Jobs: "Your work is going to fill a large part of your life, and the only way to be truly satisfied is to do what you believe is great work. And the only way to do great work is to love what you do."

Something that I certainly benefited from during my residency is the great team of co-residents that I had. They were amazing. They made my late hours in the lab pass by quickly. We often learned together. You can learn much more by sharing your experiences with your co-residents.

In the past the prosthodontics profession was mostly made up of men. But this is not the case nowadays, nor was it during my residency. In fact, in some years, there were more female residents. It did not matter whether they were single or married with kids. We all excelled.

In my opinion, dentistry in general is a great profession for women with flexible hours that can be tailor-made for their family needs, and I do not see how it would be different in prosthodontics. If anything, prosthodontics residency teaches you how to be efficient and great at time management. Balance between work and personal life can be a huge challenge in every career. Bringing harmony is always possible with setting priorities the support of family and friends.

You see many great women prosthodontists shine in their careers whether they are involved in private practice or in academia. There are already great leaders in this profession and I believe that there will continue to do be!

DR. VIRGINIA HOGSETT

VIRGINIA HOGSETT, DMD, MS





I wore out the dental chair as a teenager, not because of poor oral hygiene, but because I am congenitally missing my maxillary lateral incisors. The gaps didn't bother me all that much when I was younger, as they were mostly hidden by ortho wires and rubber bands. However, as a senior in high school my braces were removed and I had to go without anything to replace the missing laterals while my implants healed. It was a transformative experience; I learned on a personal level how debilitating it can be to lack confidence in your smile. Having that confidence suddenly restored when I received my final restorations was a life-changing moment. This experience made the decision to go into dentistry remarkably easy. Deciding on a specialty, however, was a different matter.

Even as I entered dental school, I had never heard of prosthodontics. I learned of its existence in our How to Be a Dentist 101 class, but had already decided to go into oral surgery due to my experience with dental implants. The blatant sexism displayed by the surgical faculty quickly turned me off the specialty, however. Becoming an orthodontist was my next goal, but the allure of geometry and wire bending didn't last long either.

Having that confidence suddenly restored when I received my final restorations was a life-changing moment. This experience made the decision to go into dentistry remarkably easy. Deciding on a specialty, however, was a different matter.

By the end of my second year in dental school I had spent time wanting to study at least half of the dental specialties, including for a long time, oral radiology. It was not until we were in a crash course on dental laboratory techniques, learning how to wax #9, that I considered prosthodontics. I remember taking my creation to our instructor. He examined it for a brief moment and replied, "No, it's too short."

"Are you kidding me?" I replied. "What do you mean? It looks exactly the same as #8!" with only the confidence that a second-year dental student can have.

He calmly set the cast down on the desk, resting the occlusal surfaces flat on the tabletop and pointed to the incisal edges, "See #9 is a hair short?"

PREVIOUS PAGE: TAKING A DINNER BREAK TO TRY A NEW RESTAURANT WITH DR. JOANNA BASAYA.





LEFT: THE WOMEN OF UIC PROSTHODONTICS WITH DR. LEE JAMESON DURING THE 2015 ACP MEETING. THE NIGHT DR. HOGSETT'S LONG-TIME BOYFRIEND, HAYDEN BOX, PROPOSED DURING HER FIRST YEAR OF RESIDENCY.

PHOTOS COURTESY OF DR. VIRGINIA HOGSETT

I looked. They looked exactly the same. I looked closer; they still looked exactly the same. Finally, I leaned over and squinted hard. "Mohamed, are you talking about the width of a actual hair?" I asked in disbelief.

"Yes," he replied, seeming confused by the question.

My mind was blown. Someone cared about a difference the width of an actual hair? But instead of being turned off, I was invigorated by the challenge. This was dentistry at an entirely different level than what I had previously imagined. I wanted the eye that my instructor had, and I wanted to be able to spot minute differences just that quickly. I wanted to be a prosthodontist.

Next came learning denture set-ups. Again, I was fascinated with the geometry, precision, and coordination required to produce that moment when everything finally came together to achieve bilateral balance. As we transitioned into the clinic, my confidence that prosthodontics was the right fit for me grew. I appreciated (most days) the precision to which the prosthodontic faculty worked. They seemed to notice details other faculty didn't, and they certainly had higher standards and expected better work from us.

This was dentistry at an entirely different level than what I had previously imagined. I wanted the eye that my instructor had, and I wanted to be able to spot minute differences just that quickly. I wanted to be a prosthodontist.

It was a perfect fit for my personality. But what I admired most was that our predoctoral program director, Dr. Brian Chang, seemed to have the ideal mix of perfectionism and realism. He always seemed to know when the details I had missed mattered and when to teach me the short cuts. He was skilled and also extremely efficient.

I was also fortunate to have strong female role models in prosthodontists Dr. Shigemi Nagai and Dr. Sang Park. They encouraged me that it was possible to be great clinicians, teachers, and leaders in the field without sacrificing family. However, the prosthodontic residents I knew as a dental student were not as encouraging. "Are you sure you want no life for the next three years?" they asked. "Prosth really isn't a good specialty for women. Your boyfriend is going into orthopedic surgery, right? You need to be focusing on getting him to propose instead!" the male prosthodontic residents suggested.

Now on the other side of residency and starting practice, I still see no evidence that women are somehow innately less qualified than men. In my experience prosthodontics requires meticulous attention to detail without getting lost in minutiae, systematic organization and the ability to multitask, a genuine love for people, and perhaps most importantly, endless patience and humility. If anything, it seems women may be more likely to have these traits and may be better suited to the specialty in general. Research has shown us that women are better at color matching, which, could be argued, is one of the most important outcomes from the patient's perspective. Additionally, many patients undeniably find visiting a dentist to be a stressful experience, and women have the advantage of being seen as less intimidating, more nurturing, and more patient. In my residency program there were as many female residents as males. However, while gender bias is in some ways diminishing, one look at the list of names of the distinguished speakers at any given prosthodontic conference will quickly prove that we, as women, have a long way to go to become equally important as leaders in the field.

Regardless of gender, prosthodontics is certainly not for everyone. I can count on my fingers the number of times during residency that I left the lab by 5:00pm. But for me, the frustration wasn't in the

I love to get things right the first time, but enjoying prosthodontics requires considerable humility.

long hours, but in the fact that no matter how long I had planned for something to take, it routinely took triple the time. And then something would break, and I would have to start all over again. I love to get things right the first time, but enjoying prosthodontics requires considerable humility. I had to learn let go of my personal expectations to be "the best" or "the most efficient" and to enjoy the process itself. And when I did, prosthodontics became extremely satisfying.

It took years for me to learn that being empathetic did not require attempting to achieve the impossible. Setting realistic expectations for both for my patients and myself was an essential means of reducing stress and pressure. Teaching patients, and believing myself, that work would often need to be revised, adjusted, and repeated, not due to a lack of skill or a shortcoming in planning, but because that is how things go when dealing with something as complex as the oral cavity, had a hugely positive impact on

me professionally. Although most patients do not enjoy the process, it is our job as providers to help the patient envision what the final outcome will be and to see how each appointment brings them closer to that goal. No matter how many interdisciplinary team members are involved in a patient's care, it is the prosthodontist who, with the patient, determines the final vision for treatment and makes that vision a reality. I can't imagine a more gratifying specialty.

Even within my admittedly short experience in prosthodontics, I have seen the specialty advance dramatically. From changes in the accreditation requirements for surgical experiences in residency to the explosion in digital dentistry, it's an extremely exciting time. I look forward to seeing what the future holds and I would propose that there has been no better time for female dental students to enter the field of prosthodontics.



PRIVATE PRACTICE:

A CONVERSATION

In mid-June, the ACP hosted a phone conversation between Dr. Karen Bruggers and a younger female prosthodontist in private practice. Dr. Bruggers has been in private practice since 1991 and is an adjunct Professor in the Department of Prosthodontics at UNC School of Dentistry, primarily teaching in the graduate program. Dr. Bruggers has lectured throughout the United States. The younger prosthodontist asked to remain anonymous, but she has been in private practice for less than 10 years.

KAREN BRUGGERS, DDS, MS



Younger prosthodontist [YP]: When looking back on your career, what would you say was the best career decision you have made? And what was the worst?

Karen Bruggers [KB]: That's not an easy one to answer. Honestly, a lot of it is specific to the person. Let me give you some background. I had planned to go into academia, did my thesis and everything. Totally planned for an academic career. It didn't take me long to realize the lifestyle wouldn't work for me. I was at UNC, at Chapel Hill, and they expected 80 hours per week. I was married already and we were thinking about having a family, and that just wouldn't work. My husband was in private practice as an endodontist. We just sort of said, "Let's try this. Both of us in practice." Not the same practice!

So, that is my background, how I ended up where I have. I think it would be hard to say specifically what was good or bad, because so much depends on situation. To tell the truth, I may have stayed in academia in a different environment, but here I am!

Alethea Gerding [AG]: But it sounds like for you, you have no regrets, you made the choices that worked for you?

KB: Absolutely right.

AG: What would you like to ask a younger prosthodontist, if given a chance?

KB: Well, I always felt like "just one of the guys," the only woman in my residency program when I started, and sure, there were a few times when there was... I don't think it is right to say 'harassment,' but just a feeling of being treated a bit differently. I just wonder now, with so many women in the field, 50% or more in many programs, does that still happen?

YP: I have not experienced it personally, but I have heard stories of female residents who received a lot of criticism for being pregnant during residency. The male residents didn't seem to have any issues when their wives were pregnant.

KB: I can see that. Residency, yes, well that would be a difficult time.

YP: You know, I think that may be easier than when you are in practice. Especially if you own a solo practice, I think there was a bit more time flexibility in residency.

KB: True. I can see that. I had my daughter in private practice. It wasn't easy, and you know, our family size was probably limited to just one because of that. My husband and I both had practices, so much work, and that was just how it had to be.

AG: What do you see as the biggest change in the work environment from when you were beginning your career? For better? For worse?

KB: Well, for better: people are just more used to seeing a female doctor. It isn't a strange thing or something worth nothing. It just is... people are used to it.

For worse: Well, this isn't a male/female thing but the, the... corporatization of dentistry? Or, the fact that there are all these people out there trying to sell people on this procedure or that procedure or whatever to make money. I still work with the grad students at UNC and tell them, 'Hold on, it's coming. It's a good time to be in pros because all these procedures are messed up and someone's going to need to fix it." And a prosthodontist will be there to fix it!

YP: It's already here! I have a lot of patients in that situation. But, yes, that is coming, more and more I know.

KB: I guess that is good for the prosthodontics profession, but not sure it is great for dentistry! I just have to tell people their dental work is all wrong. I'm getting hard-hearted in old age! Well, it's not hard hearted, of course, it's honest and correct to help the patient, but I guess I don't feel as bad about it as I used to.

AG: An issue that faces many young prosthodontists today is student debt. And this is certainly not a male/female issue, but an important one. How has student debt affected the choices you have made in your career?

YP: Student debt was a huge factor. I had to take out loans for dental school and grad school as well, so I really had debt. I just couldn't even consider academia.

KB: No, of course not.

YP: I could be an associate to a GP, but that didn't seem a good fit. Here is this young person who is trained to do all these specialist and complicated cases, but is doing what the GP gives to you.

KB: Yes, and people don't want to give up those cases!

AG: Is this something you see with a lot of your colleagues who are the same age?

YP: Well, some of them were lucky to have families who did pay for some or all of their education and didn't end up \$500,000 in debt, but yes, it is something that is a deciding factor for so many young residents, young prosthodontists.

AG: Dr. Bruggers, have you felt any differences from your male colleagues in how you are approached in the workplace? For example by patients or colleagues, employees? Salespeople? Has this changed over time?

KB: Well, not so much from colleagues or salespeople or anything like that. But, early in my career, I joined the Junior League, and from those women... you know, they thought it odd that I hadn't changed my name, or they could never quite understand why I couldn't just meet for coffee or lunch... patients are scheduled, you know! At a certain time, that's what the schedule is for, I can't just drop everything and meet for lunch, so there was that.

AG: I would imagine that is something that has changed significantly.

KB: Oh yes. First of all, Cary has changed a lot. When I started here it was just this small bedroom community, a suburb of Raleigh, but now I think we have something like 200,000 in Cary. Many professional women. No one thinks it's strange that I didn't take my husband's name. Many dual-career couples. That has changed a lot.

AG: And to the younger prosthodontist on our call, have you felt any differences from your male colleagues in how you are approached in the workplace?

YP: I haven't. You know, there are patients who would prefer a male doctor, but there are also those who would prefer a female doctor. That's why I have some of my patients! So, I don't think that is a bad thing, it is just preference.

Now, one thing I notice. When I look at conference agendas and the like and see the speaker lists. Well, they are mostly male! And especially when the topic is science-based. You may see women on the program, and a lot of time it is on something like a practice issue or something, but when it's science, it's primarily male.

KB: I can speak to that, having worked with the ACP and the Foundation, and trying to arrange speakers. You are right, there is an imbalance. But, we've found it can be hard to get women in those roles. It's a family thing. You know, doing those slides and preparing for those talks on a national level, it takes so much time. And that is time away from family. We ask, and we try, and we're getting there. And there aren't quite as many women on the senior level, but we are getting there.

One way I would recommend starting, to anyone who is interested in this sort of thing would be to start on the local level, with local study clubs or state and local or regional groups. It is a good way to hone your presentation skills and to put your name out there.

AG: Dr. Bruggers, What advice would you give any young woman prosthodontist starting in private practice, and what was the best piece of advice (if any) you ever received?

KB: Well, I know how hard you're working and the time it takes to get a practice going, pay off that debt, start your career. I was there. Hard work. But, make sure you take some time. You know, my daughter is 22. It goes so fast and you don't get that time back. I think we work so hard, sometimes because we are trying to prove something. Or, because we want to make sure that we are as good or better, but life goes on. This is true for many of my male colleagues as well, you know, you get to a stage in life, and all you have is your practice. And you can't let it be that way. It's hard for you now, because building the practice takes so much time, but you get an associate or you get a lab tech you can really trust and you can start making time for yourself. It happened for me when my daughter was born. That was it. I had to be at home more. And now she is 22. She wants to be a PA. My husband is an endodontist, and

he asked her, "Don't you want to be an endo?" And she said no, and he asked her, what about a prosthodontist, and she said, "No way! Mom works too much!" It was in good fun.

AG: To our younger prosthodontist, do you have concerns about work/life balance in your career? How have you managed them to date?

YP: Well, it's funny you ask me that question. I think people who know me would say I have no work life balance. My staff probably thinks I sleep at the office! It is so hard to go home when you are working. Working on someone's dentures. You feel guilty for not getting it done. You feel guilty to the patient.

KB: But you have to get away.

YP: I know, I know. And one thing, now I have a personal trainer, so I force myself to go to the gym twice a week

KB: Good, taking care of yourself.

YP: Yes, it forces me to. And, I am taking a vacation and shutting the practice for the first time in three years. A week vacation. I don't have a family yet, I'm single.

KB: I was going to ask.

YP: Yeah, and it makes dating tough. I mean some guys just don't understand how much I work, they think I am blowing them off, but it's just a lot of work 5/6 days a week.

KB: Yes, I was already married at the stage I was starting my practice, so it was different for me, but I can understand that. I just think, when you look back on everything, you do have to put yourself, your family, your friends first. One day you will retire, and your practice will be gone, and what will you have? But, when you are starting out, it does take so much to keep it going.

AG: We interviewed <u>Lily Garcia</u> last week, and she mentioned one thing she tries to tell younger women, when they are pregnant, and it is interesting you mentioned this. That she tells them to take as much time as they need. She felt that when her daughter was born she came back too soon, maybe just to make a point.

KB: That is good advice, and I would hope women listen to that. But it is different in private practice. Especially solo practice. You know, you pay the bills, you see the patients, you just can't be gone that long and keep things running. So that is a challenge. You can plan for it. It's not easy, but you can plan.

AG: Any final thoughts?

KB: Betsy Brackett and I used to joke that you could go to meetings and swing a stick and not hit another woman in the room. There just weren't many of us. But that is changing. It really is. You see it when you go to our annual meeting, you see it in residency programs.

DR. NANCY R. CHAFFEE

NANCY R. CHAFFEE, DDS, MS, FACP

Please elaborate on your reasons for becoming prosthodontist. Who inspired you? Why did you decide to become a prosthodontist?

I selected dentistry as a profession due to my interest in art and in science. I was so lucky to attend the University of Iowa College of Dentistry and be inspired by many of the faculty there. In our first year dental anatomy course within the Operative Dentistry Department, I loved creating teeth out of wax and was the only one in our class to achieve a perfect score on an exam. The faculty were engaging and encouraging. They made lab work fun. When we got into the prosthodontics laboratory courses our second year, some of the concepts were challenging, but working in the lab was great. The preclinical complete denture course assigned us to a faculty who did a demonstration case so we all got to create a set of complete dentures for that patient too. My faculty was Dr. Thomas Taylor. We got to see what a difference we could make in someone's life by restoring their smile. Many other prosthodontic faculty who inspired me during my predoctoral education: Drs. Keith Thayer, Robert Schneider, Rick Jordan, Robert Luebke, Forrest Scandrett, Ken Turner, Carl Svare, Edward Semler, Larry Huber, Fritz Drexler, Dan Hall, Howard Dedmon, Vince Williams, as well as a new faculty member, Steven Aquilino, who served as my graduate program director several years later.



DR. CHAFFEE POSES WITH DRS INGEBORG DE KOK, LUISA MEDINA ECHETO, AND MARIA CHATZISTAVROU UPON THEIR GRADUATION FROM THE UNC GRAD PROS PROGRAM IN 2002 DR. CHAFFEE CALLS THEM HER "PRIDE AND JOY." IMAGE COURTESY OF DR. NANCY CHAFFEE.

Once I received my DDS, I knew I wanted to go back to graduate school, but felt I needed some "real world" experience. I worked as an associate for a year and an independent contractor for 2 years before I started my graduate program at the University of Iowa. During those years in private practice, I realized there was so much more I wanted to learn and understand. I also realized I wanted to be involved in academics at some level, whether full-time or part-time. Once in the graduate program, I continued to be inspired by faculty including Drs. Aquilino (my program director), Donna Dixon,

Larry Breeding, Larry Huber, Jim Clancy, Forrest Scandrett, Ana Arnold, Mike Leary, Bill Lavelle, Robert Luebke, David Fritz, and Robert Strug as well as my fellow residents, Drs. Clark Stanford, Gordon Krueger, Jose Mondragon, Betsy Davis, Jeff Ryther, Kent Knoernschild, Jim Tiegte, Mark Matthews, Bill Larson, Bill Gates, Jose Iturregui, Poh Hong Tan, and Fred Thompson.

What advice would you have for young women considering a career or just starting a career in prosthodontics?

Prosthodontics can be a very rewarding specialty of dentistry, and I am incredibly grateful for my career, but the most important advice I can give is that you need to develop a thick skin and learn to pick your battles regardless of your gender. Dental school is challenging, but specialty education is even more challenging. During training, faculty will be demanding, and the standards you will be held to will be high. Whining and complaining won't get you anywhere. If you don't know the answer, know where to look it up or who to contact to find the answer. Patients and referring doctors will be even more demanding than the faculty so you need to be prepared but be honest.

Next, learn to listen. Many patients who seek the care of a specialist will have had less than optimal experiences with other dentists, listen to them. When a dentist refers you a patient, listen to what the dentist tells you. The information you get from patients and dentists has to be processed so that you can make a diagnosis before formulating a treatment plan. You can't make the patient fit what you know how to do, you must develop a plan to fit what the patient presents with.

Accept that the dental laboratory can be your savior one day and your frustration the next. In prosthodontics, we cannot do our best work without a reliable dental laboratory. Find one you can collaborate with but never forget, you are the final judge of what is acceptable. If it's not good enough to go in your mouth, don't put it into a patient's mouth.

Last, learn to embrace change and technology but don't forget the basics. The world of prosthodontics is changing exponentially. Since I started dental school I have seen our profession evolve: light-cured composite resin, fiberoptic handpieces, automix impression materials, glass ionomer cement, resin cement, all-ceramic crown materials, dental implants, digital radiography including cone beam tomography, intraoral digital scanning, and digital restoration design and construction. Even with these

advances, not all patients can afford the top of the line treatment options, so understanding and being able to construct a conventional complete denture or removable partial denture is still important.

When you reflect back to your residency, how has the profession in prosthodontics changed for women over the years?

When I was a resident, it was a 2-year program. I was the lone female in my class of five, with one female in each of the classes ahead and behind me. There was one female full-time faculty member within our department and there was a second full-time female prosthodontist in another department. At that time, prosthodontists were either full-time faculty, in the military, or if in private practice, were practicing as general dentists. Since that time, more of us are now in private practice. There are far more females becoming prosthodontists throughout the country and world today. Sometime between 2000 and 2003, I was attending the annual meeting of the American Academy of Fixed Prosthodontics. This meeting is held at the Marriott in Chicago and for years, there was a dental hygiene meeting in the hotel during one day of our meeting. At a break during the meeting on the first

day, I met up with <u>Dr. Patricia Moulton</u>, a female prosthodontist from Georgia, while standing in line for the restroom. She casually mentioned that there must be a dental hygiene meeting as we typically never had to wait due to the low numbers of women in prosthodontics at the time. When we found ourselves waiting again on the second day and these women were clearly at our meeting, she remarked, "I believe we've arrived!" While now it seems impossible that something like this could make us so excited, it really demonstrated a turning point for women in prosthodontics.

As a woman, what are some challenges you have faced in prosthodontics and how did you overcome them? How do you handle stress and pressure?

Early in my career, many of the challenges had more to do with level of experience than with gender. The patients and students did not think I had enough experience. The main gender challenge I experienced was that my salary was typically less than my male colleagues with less practice experience but similar training. I was not a good negotiator and did not realize my own worth. After learning that the males hired at the same time I was hired were paid more than I was, I tried to be a better negotiator but it was very difficult for me and just not part of my DNA. Another challenge

I have been preaching to others that when we die, no one will care how many journal articles you wrote, grants you had funded, or crowns you did.

I experienced in academics was that the better job I did, the more they gave me to do without appropriate compensation, recognition, or support. Some of my male colleagues seemed to be able to give half the effort and their workload would either stay the same or decrease while they would have their salaries increased. I'm still not sure how to reconcile that. Perhaps the gender issue was more that I was afraid to say "no," afraid I would be judged more harshly since I was in the minority.

I don't think I handled the stress and pressure particularly well until I was well past 40 years old. While I did pursue outside interests like singing in choirs and church activities, my job always came first. Looking back, as a workaholic I think I gave up a personal life while chasing my profession's goals. I'm not very proud of that. My inability to deal with the stress and pressure is what led me to leave academics for private practice. After experiencing some health issues, my MD suggested that maybe I needed to find another occupation. Since this was my life, it was a very difficult decision as I

finally had achieved a pretty significant professional goal, but I felt I had to give it up after only 3 years for the sake of my health. It was devastating.

For the past 15-20 years, I have been preaching to others that when we die, no one will care how many journal articles you wrote, grants you had funded, or crowns you did. Time and experiences with family and friends should take priority. It took me a long time to learn this. Now that I am in private practice, I have to do things to prevent me from staying too late at the office: I set the alarm on my watch so that I leave the office at a reasonable hour, I exercise 4-5 times a week, I still sing in choirs that have taken me to Carnegie Hall and internationally, I ride my bicycle as much as possible, and volunteer for various charity events not involving dentistry.

As you project to the future, what role do you envision women play in prosthodontics?

I think the number of women in prosthodontics will continue to increase and as such, women need to continue to assume leadership positions. I have been involved in organized dentistry, both in local dental societies as well as in our national specialty organizations and it has been for the most part rewarding, but my

experience has been that within these organizations there are typically two types of individuals: 1) folks who want to make a positive impact on the profession/organization who very thoughtfully do their research to improve things for all of us and 2) narcissists who are in it for themselves to see what they can add to their CV to brag to others about. While I have encountered mostly men who fall into the latter category, it's not gender specific. They are the people who sabotage others due to their own insecurities. When encountering these types of people, whether male or female, who may be the master manipulator, always take the high road when dealing with them. Eventually they get caught at their own game. The bottom line is that if we work together, whether male or female, we move forward and make our profession better. Additionally, take the American Board of Prosthodontics certification examination. It is the capstone of your education, and there is no other substitute to demonstrate your knowledge and skill.

The bottom line is that if we work together, whether male or female, we move forward and make our profession better.

On becoming a grad pros director.

When I elected to go into academics following my graduate program, I don't think I really thought much further than the next 5 years but clearly, being a program director is one of the highest positions in academics and I was interested at some level in becoming a program director. Beyond knowing that I wanted to teach and that I wanted to take the American Board of Prosthodontics examination, I had no idea where my career was really headed. I was fortunate to be hired by The Ohio State University when they had many new faculty, so we were paired with experienced faculty to co-direct preclinical courses. I was assigned to Dr. John Bailey, who became my mentor. He taught me how to put together a course manual, lecture, and ultimately organize a preclinical course. He was and is the consummate professional. At the time, the ABP was changing its format so I elected to take the written Part I right away to avoid having to take the newer format of the written exam. I was advised by several fellow faculty at OSU that it was a waste of my time. Dr. Bailey told me to ignore them and take it, as did my mentors at Iowa. I did take Part I and passed. After leaving OSU to join the faculty at Nebraska, I completed and passed the final portions of the ABP exam. While I wanted to teach at the graduate level, being a program director was not

in my immediate future while at Nebraska but by then it was definitely a goal.

I did not follow a traditional path to become the program director at UNC. Some might say it fell in my lap. I joined the faculty there in August of 1997 and shortly thereafter the existing director announced he was stepping down. A full search was completed and an individual was offered the position but declined. At that point, the position needed to be filled, and three of us were Boardcertified and possible candidates. After much debate between the three of us, I made it known I wanted to take the position, but due to the rigors of the promotion and tenure process, I was concerned whether I would be able to accomplish what I needed to achieve to receive tenure. My chair, Dr. David Felton, then made the decision he would be the director, and I would become the "assistant director." In reality, I did the majority of the work and received 60% of the administrative stipend, but it also meant that he had to answer to our Dean if there were issues. After about 11 months of progress including increasing the productivity of the program, I was offered the position by the Dean during a lunch meeting off campus. At that point, I asked for several things before I would agree to take the position: a salary equal to what the previous candidate (a male) had been offered (it was almost \$40,000 higher

than my current salary) as well as some other administrative things like a dedicated laboratory technician and staff for the clinic. The Dean refused to approve these things, offered me the whole administrative stipend (\$5000) with no salary increase, and as a result, I declined the position. Less than a month later and the day before the new class of residents was set to begin, I was summoned to the Dean's office. He had changed his mind and agreed to my requests, so I agreed to become the new Graduate Program Director.

There were many challenges that I encountered while serving as program director but I am incredibly thankful I had the opportunity. We had excellent students. My pride and joy were the three women we accepted who started the program in 1999: Drs. Ingeborg De Kok, Luisa Medina Echeto, and Maria Chatzistavrou. I was told by multiple colleagues at UNC that I had set the bar too high for what the students could achieve. Over the previous 4 to 5 years, the research productivity of the students remained consistent, but the clinical productivity had continued to decline. When I began my involvement in the program, many of the faculty did not embrace the changes we made and chose not to participate in the seminars and clinics, even though assigned to be there. With the help of

We had excellent students. My pride and joy were the three women we accepted who started the program in 1999: Drs. Ingeborg De Kok, Luisa Medina Echeto, and Maria Chatzistavrou.

Dr. Lyndon Cooper, the research productivity increased and I, along with others (Drs. Felton, Glenn Minsley, Dan Bailey, James Parker, Glenn McGivney, William Sulik, Matt Wood, and Ed Kanoy) ensured the clinical productivity steadily climbed. The three women were able to complete all their requirements, and did so in less than the 36 months of the program. I definitely owe them for feeling vindicated of the negativity from some of my peers.

LIFE IN ACADEMIA: A CONVERSATION

MATILDA DHIMA, DMD, MS





In mid-May, the ACP hosted a phone conversation between Dr. Lily Garcia and Dr. Matilda Dhima. Dr. Garcia has had a distinguished career in academia that includes a tenure as the ACP President and Chair of the American Dental Education Association. She is currently the Associate Dean for Education at the University of Iowa College of Dentistry. Dr. Dhima's career is just beginning. She is currently an Assistant Professor at the University of Pittsburgh School of Dental Medicine. She completed her residency at the Mayo Clinic, Department of Dental Specialties where she remains the first and only resident to be awarded the academic title of Assistant Professor in Mayo Clinic College of Medicine.

While their careers may be at different stages, Dr. Garcia and Dr. Dhima noted many similar issues when discussing women in academia and in the field of prosthodontics. They discussed career choices, the impact of student debt, and ways their gender does and does not influence their career as female prosthodontist academicians.

LILY T. GARCIA DDS, MS, FACP

Matilda Dhima [MD] Lily, as a woman, but also as someone very prominent in the profession, based on what you have accomplished, what have you found to be a helpful tool that, or even relationships that we as women can develop in our profession to grow, not only professionally but also to support the many academies and organizations that represent our field? I feel as if there are not a lot of women present in the leadership positions, and you are one of the few women that have been able to accomplish that. What have you found to be helpful throughout the years, to get more of us in those positions?

Lily Garcia [LG] First, thank you. In prosthodontics, as you know, there're so many different organizations. I worked so hard to become a specialist, I feel like I wanted to give my time to my specialty organization. There are so many wonderful academies and associations that are related, what Deal Chandler calls 'Sister Organizations' that I realized I couldn't do a lot for everything. So, I couldn't be as active in other organizations like the The Hispanic Dental Association, but offer my support by maintaining membership. You realize you have limited time, so you think, 'Where does your passion lie?' And, number one, I felt an allegiance; my first allegiance is to my specialty. It's just learning



AS A FOURTH-YEAR DENTAL STUDENT IN 2008, DR. MATILDA DHIMA WON FIRST PLACE AT THE ACP TABLE CLINIC SESSION

that focus over time, yet, early on I thought you had to say "yes" to every opportunity, I didn't know you could say "no".

I was a member early in the ACP so the year after I finished my residency, I was back at the meeting, and I don't think I've missed a meeting since. That is my network.

[MD] I would love to be a part of that meeting. It definitely does feel like this the one that you would just feel so special to be a part of that group, so it's wonderful to hear that you've invested so much of your time and effort into that.

[LG] What's nice is in the ACP Educators Group since that group is even smaller. Those are people who're doing what you're doing. That's how the group didn't seem so big, because I started with that smaller group, that group that you're going to see a lot of over the years.

Cortino Sukotjo [CS] Lily, what influenced you in your academic career? I know you are Associate Dean right now, and before that, you were a department chair. How did you manage your career to reach these positions of authority?

[LG] I never deliberately said 'I'm going to be a chair,' or, 'I'm going to be a dean.' I wasn't thinking like that. I just had opportunities, and sometimes opportunities are right in front of you, and some people don't see that chance. I was in practice in Denver and a position opened up, and I thought, 'well, I'll teach part time, that'll be fun' because my practice was slow to start and I had time, so I started teaching part time. And then this one guy retired early, and they asked me would I help out, and I said, 'Sure!' I didn't know you should have a course ready. At that time, we had slides, and I basically had four slides for a course that was going to start in two weeks. And so my dean, who was wonderful, Dr. Bob Averbach, said, "Just remember, stay a chapter ahead of the students, they won't know any differently, because you know this stuff, they don't!"



Dr. LILY GARCIA, TOP OF HER RESIDENCY!

And so, I called my mentors in San Antonio and they sent me tests, and notes, and syllabi to help me be successful. And in two weeks, I started the course, and I was just about a week ahead of schedule. Before my eight o'clock class, at six a.m., there I am loading slides into carousels, because I had just picked them up wherever I got the slides printed.

Anyway, it's the idea that if somebody offers you something and it's something you enjoy, why not? And so when the Department Chair position came open, I was on the search committee and Dr. Larry

Meskin, the editor of the JADA, chaired the search committee. As I looked at some of the applicants, I made a little comment, "Boy, if they're applying, why don't I apply?" He looked at me and he says, "Okay, we're kicking you off the committee. Why don't you apply?" And I was like 'No! I was just kidding! And he said, "No, I want you to apply." My parents always said, when you can be in charge, why wouldn't you want to? You get to direct your own path. So, it wasn't any magic. And believe me, sometimes, you know, saying flip remarks, doesn't always work out well. People use the word serendipity, it's chance, and you're at the right place at the right time.

[CS] Did you get a lot of support from your peers, either from lowa or from Texas?

[LG] My best support was and is the prosthodontist I married, David Bohnenkamp. And then, it was the Dean, who had a lot of faith in me, and then the previous Department Chair, who was a great general dentist and supported me a great deal. And they just kept saying 'you can do it!' and like I said, I turned back to my mentors in San Antonio. Drs. Ken Rudd, Robert Morrow, Ken Stewart, Bill Kuebker, it's these people you read about all the time that said, 'How can we help you?' And that's where I had the support, because you have to understand, you're in a competitive

environment. Sometimes your competitors, not that they're nefarious, they're just there to just say, 'okay, let's see if you can do it.' Not that they want to cause you harm, but they may not be the first to help you. I think, Matilda, you were saying something like, part of this is starting your network, having a special group of colleagues from your university and see them at a meeting and say, 'Can we have a cup of coffee?' You talk to people, and as friends they can tell you, 'that stinks, don't try that,' or, 'that's not a good idea,' someone who can be honest with you.

[MD] Yes. I think that's very important in the environment where we are in, be it in a practice or a teaching environment. Not everyone surrounding us shares the same interests as us, which can make that environment a bit discouraging at times. But, I think it's important just to keep your aspirations and your dreams and your goals and your network outside of an environment that may not be as excited as you are about all of the lectures, and all of the research, and all of that good stuff, and it seems like you were very fortunate to have that, and it's really wonderful to know that great support can...

[LG] Well think about you, you got into Mayo! They accept one? One? That had to be a little competitive!

[MD] You know, as you were talking, I thought, 'maybe it was just meant to be.' If I didn't finish high school in three years, I could not have applied that year, and I'm thinking kind of the stars aligned, like you said, those serendipitous moments. I did have support and I had wonderful mentors and people that helped me and guided me so I am very thankful to them for being able to get to Mayo and learn as much as I did, and I feel very fortunate now, at this stage in my career to have had that opportunity. And that was part me, but also everyone who supported me to get to that point.

[LG] You still had to have the tickets to get there. Nobody gave you something you couldn't handle, you had to compete. Female or male, you still have to have the tickets to be there. And look at your Mayo network, you're automatically part of an important network.

[MD] And a great tradition as well. Like you were talking about those people that write all the books that we learn from, and it's wonderful. I feel very fortunate to have them as people who taught me professionally but also as friends, like you said, someone you can go have coffee with and connect, it's really wonderful.

[LG] Matilda, I've been told by women like in my cohort, my age range, they're saying because we competed, we didn't compete as women. Instead we competed and worked in a predominantly

male environment. Do you see that there's a need to have a separate type of arena for just women's issues? Whether you're a prosthodontist, a physician, anything?

[MD] I see there is a strong need. In the sense of not only supporting each other, the reality is that the majority of our colleagues are males. And we want them to understand how, from our point of view, our role in the field is important. But also, we do struggle a little bit, not only to fit into the environment, which has been for a long time male dominated, but also to really feel a part of it, and I think for someone in my career, at my stage, I really do feel it. I work in a hospital environment, in a practice environment, and in a school environment, and I also provide maxillofacial prosthetic treatment, so I'm also related to fields like Ear, Nose & Throat and Plastic Surgery, and they are even more male dominated than we are. Sometimes I feel as if it's easier for me to connect with them than it is with people in my profession. Maybe it's because they have longer experience with women in their profession than we do.

I also think there is a large generational gap, and we see that in our academic institutions as well. So I don't think it's gender only, I think it's also a generational difference. The way that we communicate and connect with each other is very different as well. I find that

sometimes maybe my generation would be more up-front and forthcoming than people in the later generations. I think that has a great impact, in addition to gender.

So, yes, we do need to be more connected to each other. Right now, I can tell you that it's hard for me to find a female in my field where I can just pick up the phone and say, 'Lily, this is what I ran into today at work. What are your thoughts on this?' I have a whole list of male colleagues and mentors.

[LG] I remember being insulted at work. I was home fussing about, and my husband says, 'Well, why didn't you just slap him?' And I said, "Well, if I slapped everybody that insulted me, I would be in really good shape!" So, I handle it with humor and try to handle difficult people in a different way, to control the situation.

Sometimes, I'm sure I would have liked to have punched somebody, but I chose not to handle it that way. And you're right, sometimes it's nice to call somebody and just say, 'What would you have done?', just listen.

There's a more diverse environment now than when I went to dental school. We had a class of 140, there were 18 women, no African Americans, probably 3 Hispanics, and the rest were white. Now, it's so different in our classes, and I love it. It's just this rich environment where you can learn from so many different people. That too is different, because how many women were in your class, and what was the ethnicity of your class?

[MD] Very diverse, and I think we don't understand each other's cultures. Like you said you were raised in the South, well I was raised in Europe and here in the States, and it's very different. I don't know that we know enough about each other to respect our differences and understand where everyone is coming from.

[LG] When they talk about the civil rights movement, in South Texas, it was white against "Mexicans." That's the environment I was raised in. But this is a challenge to all of us - you have to give people respect to start with. Then they can lose the respect by their behavior, but you start on the positive.

[MD] Yes, always assume good intentions.

Alethea Gerding [AG] And that's a segue into the next question we had for Lily. She's talking about the environment changing over the course of her lifetime. How do you feel the work environment, especially for women in academia, has changed through the

course of your career, in some ways for better, and perhaps some ways for worse?

[LG] I tend to see it for better. Whenever I see a young colleague who's pregnant, I'll go tell her, 'You take as much time as you humanly can, that you can afford.' I just talked to Mary Walker, and she said, 'I was back in practice within two weeks!' For me, I took six weeks off because that's all the vacation and sick leave I had. And I was back, and still thought I had waited too long to go back, because you felt like you had to be there to prove something. And now I don't think you have to prove something because the environment now is such that you should be able to take the time needed.

[AG] Do you feel that that has also benefited men? Because I feel like men too now feel like they can take some time, and maybe women set the example for them that way.

[LG] Yeah, and I'm not just talking about the family issue, but in this environment, it makes it better for everyone. It's not this guilt factor, and it shouldn't be a bullying environment for students or for faculty. Your work environment is so important and becoming humanistic for students, but think about it for faculty as well. It's just a better work environment. I don't know about you Matilda,

because you're going back and forth between a hospital and an academic environment, and I'm not even talking about the practice environment.

[AG] One thing that's changed for the worse is the level and the impact that student debt has on peoples' career choices. Matilda, I was wondering how student debt has affected your choices.

[MD] I had to choose whether to go completely into a private practice environment or education or a combination of both. They were not completely impacted by my student loan debt, but it was certainly one of the factors that I had to consider because as we all know, student debt unfortunately is something that we cannot escape. At the end of the month, the bills have to be paid, and for someone starting out right away, I think it may have been a bit discouraging to jump right into a private practice environment when gathering hundreds of thousands of dollars of debt that you have to start paying in about six months. But I don't see that as a step back, I see it as a possibility to maybe do more than just a private practice environment, go to teaching or if there is a love of academia, than maybe be involved in a research project that can be fulfilling and rewarding not always financially, but also for a career. It was not the determining factor, but it certainly had an impact.

I was fortunate enough to actually receive a stipend during my time as a resident and fellow, and I know not everyone has that opportunity. I had more flexibility than others where I could have a combination of hospital practice and teaching education. And I loved both of them, and I felt fortunate that I could accomplish both while paying the student loans, and enjoy what I do every day maybe a little bit more. I think that's also very important.

To think of being in debt two to three hundred thousand dollars and even half a million dollars, it's scary for not having worked until the age of 30 or 32 when you finish all the training. It's quite scary and you see your friends, who already have steady jobs, and they got a Master's degree or a PhD or even just finished college, and you haven't really worked a full day in your life, or for quite some time. I think that in academia there may be opportunities to have the loan forgiveness plan if you teach for a certain amount of time, but that was not introduced until more recently. There are faculty repayment programs for every state, but some of them require support from the institution that you're in, or they require the institution to match those funds, and the answer is not always yes, sometimes institutions are really strapped for funds, and even though they may want to support and help you, it's not always

possible. I think everything has to be within the context of what you love to do, while paying the bills every month.

[LG] I'll add on to that. I didn't come from a wealthy family, I came from a big family, I'm number five out of seven, so there was already a line of people going "through that payroll." My parents helped me through college along with scholarships, so I graduated from college without debt. Then when I went to dental school, I went into debt. At that time, it was probably in the high forty thousands, relatively high for that time, but I also was able to work; I worked part time jobs including waiting tables, drew blood, all kinds of odd jobs. Now, we highly discourage students from working because the curriculum is so overloaded. I didn't know how I was going to pay back my debt, and I thought I would be in private practice. I was absolutely certain – 100% - that I was going into practice.

You don't want to live like a dentist when you're going to dental school. As a resident in San Antonio we had an annual salary of \$8,600 as the stipend, and I thought, 'I'm in hog heaven, this is great! I've never made this much money!' and, I didn't know you could live better than that. I think the first job offer I got was like \$35,000 a year, so when you go from making \$8,600 to \$35,000, you're thinking 'wow!', but to live in Dallas, it was very low for the

Dallas market. So that was tough. That was why I was always going to be private practice, in my mind. And then I went the farthest from that I could have imagined. But I've had a lot of professional opportunities and filled with gratitude. I think even more so for Matilda's generation, the debt loads are really high, and people have to be cautious of what they're deciding. I can't imagine now, graduating with over \$300,000 in debt, that's got to be overwhelming.

[MD] It is, and a lot of students and graduates are in that position, it's tough. And it makes everything else more challenging, starting a family, purchasing a home, even buying a car is a decision that has to be very well thought out. It's very difficult for things that used to be considered quite basic for the next stage in life.

[AG] We sometimes hear that it's more difficult for women to be published, or to receive tenure and promotion particularly in the science fields. Has this been something that either of you have experienced in this field? Especially to Lily, is this something you've experienced in the past; is it something that you see improving? Or is prosthodontics different?

[LG] I can't speak to differences in the specialties, and frankly, for most journals and review processes, authorship is blinded, so you can't distinguish if it's a woman writing or a man writing. For me, to go it alone, to be sole author is difficult. I've seen lack of credit and wonder why not offer credit when earned... what would it have cost them to connect and contribute when appropriate? So, yes, it is competitive, and I don't know if it's limited to whether or not you are a woman or a man, it's just competitive. I don't know your environment for tenure and promotion, Matilda. I've seen most universities don't distinguish between men and women, maybe it's very subtle in a hidden kind of way, I just haven't seen that.

[MD] I did not experience that during my time at Mayo. When I was a resident and fellow, I was actually promoted to Assistant Professor at the College of Medicine simply because of the accomplishments, and it was something that was quite encouraging to see. But, I was the first, and I remain the only one to have accomplished that, but I think it was because of personal initiative, and not because it comes with any greater salary.

I don't think that there are any barriers regarding gender from those who are in charge of promoting you to those academic positions. I haven't found gender to be a barrier. I have found the barrier is simply the initiative of an individual to be a part of a project or to put in the time and the effort to do that research project or publish that article or be involved with other members of the team.

[LG] Absolutely. I will tell you having been through a couple of university systems, they're actually trying to accommodate things that may be of particular importance to a woman or a family, such as "stopping the tenure clock", so you if you're going to have a family, you can pause to allow time to achieve tenure. So there are new policies trying to accommodate people. In this new day of partnerships and family, they're trying to accommodate more people, so it's not just women, it's men as well, like you referred to earlier Alethea. They deserve the same rights to be able to be with the family to start a family as well. I think that tenure and promotion, besides tenure sometimes being questioned at some universities, they're trying to give a little bit of flexibility for people in general.

[AG] Lily, what advice would you give any young woman prosthodontist starting an academic career? And what was the best piece of advice, if any, that you ever received?

[LG] Well first, woman or not, be focused. You can't do everything. It will reflect as well in your CV if you're really interested in an area, so focus on that and try to collaborate. Like I said, some of us work really well in a collaborative way, and so it's a win-win for multiple



Dr. LILY GARCIA BEING INDUCTED AS PRESIDENT OF THE AMERICAN COLLEGE OF PROSTHODONTISTS

people. The best piece of advice? Oh, I don't know if I want you to print this, but my mother said, 'Never let them see you cry.' It implies so much, too much to explain here but it's not tears of sadness, usually it's out of frustration and anger sometimes. It was just the idea that if you're going to accept all the accolades, are you going to accept all the criticism as well? Some of your own goals have to be for your own personal satisfaction. Otherwise, you're relying on everyone else to say, 'Gee, you're doing a great job.' You have to know you're doing a good job. It has to be selfmotivated. Because, just like Matilda said, promotion doesn't always mean more money, more certification doesn't translate

into more money. It's about your professional goals, and keeping that focus balanced with everything else you're doing.

[AG] Speaking of balance, Matilda, is work-life balance something you struggle with now, or have a concern with for the future?

And how have you managed that balance so far?

[MD] I think wearing many hats can be very challenging for worklife balance, and I really love what Lily commented on, which is the fact that you really have to know your limits and don't say yes to everything and to everyone. I think I've learned early enough that it's very important to say yes only to the things that you know you are very good at or can contribute well to. I think that has helped me with keeping a life-to-work balance and knowing there's always going to be those times where one gets more attention than the other. I think in the future it may be more challenging as there are children introduced and maybe being caretaker for older family members, and those are all realistic things that can occur in life. I anticipate that it may be more difficult. I think our specialty is very fluent and flexible in that it allows us to work in various environments that can be fulfilling in different ways, be it full time or part time. I think it may be more difficult in the future. What do you think, Lily?

[LG] You know each generation might say the same thing. But you consider what is it you're looking for that will give you that fulfillment, or that pride in what you do. For me, my family is intact, my daughter graduated from college last week. She's a good young woman; she's has a great loving spirit. I enjoy the people I work with. I love what I'm doing.

Just try to find enjoyment in the moment. If you're always looking ahead, you miss what's right in front of you sometimes. It can be a lot of fun, and it can be challenging, not everyone is happy-go-lucky excited about doing what they're doing. But I can't own their problems; I just continue to do my job as well as I can.

[CS] Do you think that being an academic is a good career choice for a woman? Particularly in prosthodontics?

[LG] Let me put it this way; there are a lot of opportunities right now...so is it really about female or male? Or is it about what you want to do?' Now, if I were the sole provider, would I feel pressure to do something different? I don't know, because I'm not the sole provider, I'm part of a professional couple. So, if I'm graduating at this time and it's just me and I owe \$300,000, I don't know if I would make a different choice. That's a really good question. But I will tell you, in academic positions, I've gotten more joy and fulfillment out

of it my work. The young general dentists that I see years later and they're doing well when I hear back from them, or I might see them at a meeting asking, 'Do you remember me? I have five kids, and two practices!' It is highly probable they're earning more than I am, but it's not about the money, it's about the fact that I may have contributed in helping someone do well. That is professional fulfillment in of itself. I'm not this perfect person, let me tell you, but experiencing that feeling is a reward.

[MD] I think the feeling is mutual. I feel the same way. And I think it takes different personalities and aspirations to be in academia than in a private practice, and I think that can change, even in the person's lifetime and career. I am happy where I am now, but the future, like Lily said it's all about taking chances, and being open to what comes along. I truly believe in that and I think it's really one of the things that distinguishes people who enjoy what they do, and love what they do every day.

[LG] You've seen it; you work with people who seem so unhappy, and you think, 'Why are you doing this? Is it because you're bound by other reasons?' And when you're around people who really enjoy it, it's almost infectious, there's some enjoyment and pride in what you do. That is what makes our positions fun.

[LG] I've got to tell you, thank you Tino and Alethea, for connecting Matilda and me, and I'll buy you that cup of coffee, Matilda, or I'll buy you a margarita!

[MD] Yes, I would love that! How about a prosecco, I've heard those are really good.

[LG] Yeah, there you go! The thing I will tell you—I gotta credit Nancy Arbree, she was the first woman president for ACP, and she had an informal breakfast in her suite her year as president. It was great! And it wasn't the idea of just women; it was the idea of great conversations in a "safe environment." I had more young colleagues come up to me and say, 'we don't even care if you buy our drinks; it's just the idea to have that environment to talk.' So I'm glad to hear you say there is a need for it, Matilda. Sometimes it's a need for a different circle, a different network.

[MD] I was at that meeting! I was a resident at the time, and I was one of those people that said, 'Gosh, I would've loved to have been at that get-together!'

[LG] I'm glad to hear it, and you don't have to buy me a drink, I'll pay for the drink!

[MD] I can't wait!

DR. NANCY S. ARBREE

NANCY S. ARBREE, DDS, MS, FACP



What made you decide to become a prosthodontist?

A fourth year lecture on Maxillofacial Prosthetics by Dr. Hratch Abrahamian at Georgetown University School of Dentistry clinched my decision to become a prosthodontist. During the following year, as a General Practice Resident at the Veterans Administration in Gainesville, FL, I was assigned several obturator patients. With the encouragement and talent of the VA laboratory technician, Jack, I was able to successfully treat these wonderful maxillofacial patients. The decision to continue onto prosthodontics was clear. The prosthodontic work of creating was more rewarding to me than my alternate choice, oral surgery.

Who inspired you?

My greatest inspiration was my father, Robert Arbree, who always told me that I could be anything I wanted to be. There were no limits, just because I was a girl.

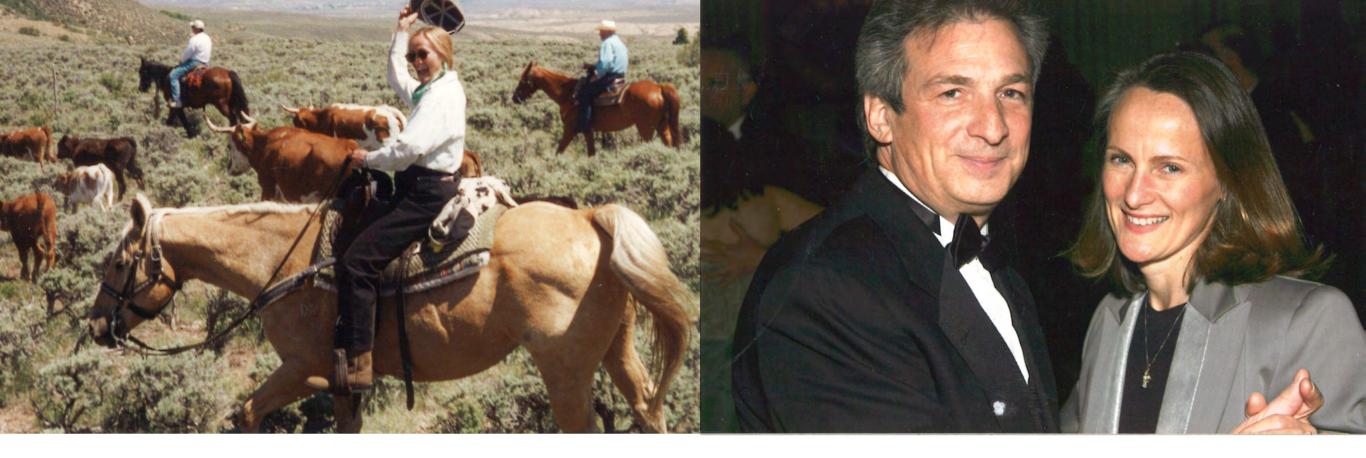
At Georgetown, Dr. Robert Lytle inspired me. His disciplined approach to complete dentures taught me much. His smile when he told me that I had failed my first denture reline attempt and now I would have to make the patient a whole new denture was a moment I will never forget. My confidence was shot, but my curiosity about this precise specialty was definitely kindled.

In my prosthodontics residency at Memorial Sloan Kettering Cancer Center in NYC, I was fortunate to meet a dedicated, hands-on educator, Dr. John Piro. We residents also participated in treating patients at the Cleft Palate Clinic at NYU Dental School, where I met another inspiring role model, Dr. Gus Valauri. He was a mentor for prosthodontics and for how to be a good person.

As a prosthodontic resident attending the Greater NY Academy of Prosthodontics, every meeting was an inspiration. Dr. Robert Schweitzer made me feel unafraid and welcome to apply for membership in the GNYAP. Dr. Gerry Barrack inspired me to challenge the Boards by answering my complaint that "I couldn't find the right patient" with the advice that "the next patient who walks into your operatory is your Board patient." He was right.

Leadership inspiration came from Dr. Lonnie Norris, the former Dean at Tufts University School of Dental Medicine, for his collaborative and inclusive leadership style, and Dr. Tom McGarry for his persistent, consistent message and his selection for an outing at his ACP presidential year's June Board of Directors' meeting. He knew that herding cattle would both challenge and bond us!

A word about those who "inspire" us: Not everyone is blessed with good mentors. I had several "negative mentors," whose impact



upon my life was significant. Even negative mentors can have a positive effect. They were probably responsible for inspiring me towards leadership, as I learned quickly how not to treat people. Perhaps they made me subconsciously put myself in positions where I could prevent some of what had been done to me. They might also have given me early independence and confidence, which can be the outcome when the safety net is pulled out from under you each day.

What advice would you have for young women considering a career or just starting a career in prosthodontics?

Prosthodontics is an excellent career choice because the greatest effect that you can have on a patient is in the realm of our specialty, LEFT: JUNE 2001 ACP BOARD OF DIRECTORS' MEETING SOCIAL EVENT, A CATTLE DRIVE, PLANNED BY PRESIDENT TOM MCGARRY. "WE WERE SCARED, CHALLENGED, SOCIALIZED AND ENERGIZED." RIDER: DR. NANCY ARBREE.

RIGHT: DECEMBER 2004 GREATER NEW YORK ACADEMY OF PROSTHODONTICS DINNER MEETING. DR. NANCY ARBREE WITH HUSBAND, DR. ARNIE ROSEN. DR. ARBREE OFTEN WORE A DESIGNER TUXEDO TO BLEND IN WITH THE MOSTLY MALE TUXEDO 'D MEMBERSHIP.

now more than ever. The most impressive "before and after" pictures of any specialty is in prosthodontics.

As a career, prosthodontics allows flexibility in your work and your life. You can be in private practice full or part time and make a good living. You can split your time between private practice and teaching. You can have a specialty profession and still have the time for life's other pursuits. I can speak to the wonderful balance of work with travel, enjoying friends, hobbies, and family.



FALL 2002 RECEPTION AT THE ACP ANNUAL SESSION. FROM LEFT TO RIGHT: Dr. RHONDA JACOB, Dr. BRUCE VALAURI, AND Dr. NANCY ARBREE. STRESS RELIEF = GOOD MALE AND FEMALE FRIENDS. PHOTOS COURTESY OF Dr. NANCY ARBREE.

The best gifts that prosthodontics gave to me were opportunities in leadership, education, travel, and patient care. The number one gift: I met my wonderful husband and fellow prosthodontist, Dr. Arnie Rosen, in my residency.

As you start your career in prosthodontics, have confidence. The best advice I got from a leadership mentor, Dr. Ken Turner, was: "what you have to say is as important as anyone else around the table." Open your mouth and say something, even when, and maybe especially when, you are afraid. You will make a difference.

Don't apologize when you haven't done anything wrong and don't take any grief from anyone. Speak out and fight back, but kindly and gently. Take and share credit. Admit error. Say yes to new opportunities. Try it on for size. You can always go back.

And always remember that you can be a role model and not know it—to someone you don't even know.

When you reflect back, how has the profession changed for women over the years?

You can bet that a male prosthodontist never heard this while being consoled about not being selected for membership in a prosthodontic group: "...but there isn't a guy in the room who wouldn't want to sleep with you!" In the past, there was much more inequity in many circumstances for women. Comments could be made to you that would be unheard of today. Unfortunately, inequity does still exist.

As a woman, what are some challenges you have faced in prosthodontics and how did you or do you continue to overcome them?

In your career, you will meet many wonderful male colleagues who truly are gender sensitive. These included for me: Drs. Tom Vergo,

Art Nimmo, Tom Taylor, Bruce Valauri, John Agar, and my husband. You will also meet challenging people who think they are gender sensitive, but really aren't. This latter group will strive to make you feel small. My advice: dismiss the bad and engage the positive. The best defense is to spend your time with positive male colleagues and to nurture an exceptional group of women comrades because they will just know, without your having to tell them. Great women such as Drs. Ana Arnold, Betsy Brackett, Jane Brewer, Karen Bruggers, Nancy Chaffee, Lily Garcia, Rhonda Jacob, Irene Mausner and many others were there to support me.

This paragraph was the hardest for me to write, but it is a true observation and needs to be shared. An ongoing challenge is the strange phenomenon of some women not supporting their own gender. We should be kind to all the women we meet. Our specialty demands that we be fearless on a daily basis. As strong women, we can be intimidating. The personality of the prosthodontist can be so focused, you may need to make an extra effort to let your hair down in order to relax others. You will be successful with most other women in establishing a lovely working relationship. With those who still insist on disempowering you, let it go (if you can't eliminate them). Learn to recognize these challenging people early and, as much as possible, avoid the damaging atmosphere that they live in.

How do you handle stress and pressure? How do you balance work and private life?

My advice is to spend time with family, friends, animals, and nature. Always have a form of exercise in your life be it stretching, walking, jogging, or hiking. It is a natural stress reliever and mood elevator. After 30 minutes of exercise, nothing will ever seem as bad. And get away - as often as you can. Take every vacation day offered. When you get back from vacation, start planning the next day off. That is your time to replenish.

What role do you envision women will play in prosthodontics in the future?

The vision that I would like to see come true is that more women take on leadership positions in prosthodontics and other organizations. Women don't usually seek or need these positions because it is not connected to their ego and because they don't have as much free time. We often don't let people know that we are interested - which you have to do. Sometimes being a mother precludes having the time for leadership. But when it is possible, I think that the best inspiration that a young female prosthodontist can have is a woman such as you on the podium at a national organization or heading a postgraduate program or a hospital residency.

DR. LEILA JAHANGIRI

LEILA JAHANGIRI, BDS, DMD, MMSC



INTERVIEWS & CONVERSATIONS

Please elaborate on your reasons for becoming prosthodontist. Who inspired you? Why did you decide to become a prosthodontist?

I became a prosthodontist because it's the most artistic aspect of dentistry. As a dental student I loved aspects of dentistry that were skill related, and I was inspired by my prosthodontics faculty. In my predoctoral years, Dr. Wright and Dr. Watson had the most impact. I loved their demeanor, interaction with patients, and their depth of knowledge. They were legends at King's College School of Dentistry, in London.

What advice would you have for young women considering a career or just starting a career in prosthodontics?

I have always been challenged when asked to separate gender specific aspects of a profession. Having said that, I have advised many young women. A career in prosthodontics is very demanding with complexity, patient care, precision, and skills needed to excel; however, the field allows for a diversity of career options from practice to academics to the combination of the two. Further, many patients appreciate a female perspective on beauty and a "gentle touch," which may indeed be more of a perception than reality. My advice is to "do it" and get into it as soon as possible. For a woman,

Previous page: Dr. Leila Jahangiri at Her HSDM graduation, 1995. Photos courtesy of Dr. Leila Jahangiri

a late entry into the field of prosthodontics may delay other equally important aspects of life such as a family and home life.

When you reflect back to your residency, how has the profession in prosthodontics changed for women over the years?

When I was a resident, over 25 years ago, the field was mainly male-dominated. In my program I got all the attention and the abuse, so it balanced out nicely! Frankly, I didn't mind it. On my first day of residency at HSDM (Harvard School of Dental Medicine) I was directed to the Orthodontic Clinics, as it was the female-dominated specialty. It was a joke from my classmates that makes us laugh to this day. Today our class sizes are an even mix of men and women. In our specialty, I still think it's the talent and not the gender that rules.

As a woman, what are some challenges you have faced in prosthodontics and how did you or continue to overcome them? How do you handle stress and pressure?

I have not faced prosthodontic-specific challenges but in the academic world, men and women are not seen in the same light, especially when socializing with colleagues. The bond tends to be stronger among the same genders. Simply, I don't have the ability



Dr. Jahangiri (Back Row, Third From Left) with the 2016 graduates of the NYU pros program (pictured at the

to travel and golf with colleagues the same way as my male counterparts. Perhaps I have less opportunity to discuss business in casual environments. I overcome my challenges by picking fantastic mentors. I have a lot of people I can turn to for advice. This is how I manage stress and pressure by relying on the support of people closest to me.

How do you balance work and private life?

Balance of a female professional is more challenging than a male counterpart, I think. So, the hardest part is when I get home after a long tiring day. I remain an active wife and mom who cooks and does plenty of homework with my kids. I am very hands-on with their schooling and upbringing. The biggest challenge for me was when I became the Department Chair at NYU and my son was only 4 months old. I never understood why the school concerts were held at 9:30 am!! For many years I relied on friends and neighbors

to chaperone my kids to birthday parties. In return I had a craft club for eight kids in town every Saturday morning. Their moms and dads could take a break and this was may pay back for their week long efforts. Looking back, I am not sure how I handled the multitude of tasks at home and work but it was equally important for me to maintain my life balance. I overcame problems by having a fantastic team at work and an even better partnership at home. I am the daughter of a highly successful surgeon and never felt any inadequacy in my upbringing, due to my mother's extreme working hours. As a result, I never felt guilty working and being away from my children when they were small. The choice of having a family or not is a personal one, but if you do chose to have children, don't feel guilty by working. You will find the right balance. Perhaps the most important thing to note is that by working you will be viewed as a fantastic role model.

As you project to the future, what role do you envision women play in prosthodontics?

In the future, I believe men and women will play equal roles in our specialty and the question of what role women may play will be irrelevant. They will play the same role as men! I urge my female colleagues to embrace their gender but not to use it as a differentiator.

DR. BETSY K. DAVIS

BETSY K. DAVIS, DMD, MS



Dr. Betsy Davis was inducted as the President of the American Academy of Maxillofacial Prosthodontists (AAMP) in 2014.

Dr. C. Wallace interviewed her for the AAMP newsletter,

AAMP Connections. Dr. Davis and the AAMP have graciously given us permission to reprint her interview here.

Q: What was your journey into dentistry, prosthodontics and eventually maxillofacial prosthetics?

A: Growing up, I was the science "geek." I had undertaken a science project in high school and won the SC competition. This gave me the opportunity to present my science project to the American Academy of Science in Houston, Texas. From there, I won a trip to present at the International Science and Engineering Fair in Anaheim, California. Truthfully, I thought that I would be going into medicine but decided on dentistry because I thought that I could have both – family and career. Ironically, I chose a specialty in dentistry that is much more medicine-based than dental. I chose prosthodontics because it always came easy to me, and it was my greatest strength.

With respect to maxillofacial prosthetics, Dr. Bill Lavelle and Ann Flyer at the University of Iowa were the ones who made Maxillofacial Prosthetics fun and exciting. From then on, I knew that I wanted to do Maxillofacial Prosthetics once my rotation with them was completed.

Growing up, I had great parents, and they were my inspiration (although I had a lot of great mentors). My motivation is the pursuit of excellence. As my staff will tell you, I don't care "how much" of each procedure that I do – I just want to do it with quality.

Q: How do you maintain such energy to be involved with so many organizations, lectures, and publications over the years?

A: There are so many other people in our profession who have a lot more energy than I have, who are involved with many more organizations, lectures, and publications. Now that I am older, I always ask myself, "Will this bring me joy?" or "Do I really need to do this?" During different parts of my life, my priorities have changed and along with that my choices. Being famous was never my priority – so I have never felt the need to belong to a lot of organizations. I think that our specialty is so small that we need to work together. My concern is that we have a lot of organizations, and we tend to "compete" with one another. If we work together, we can accomplish more.

Dr. Davis assumes the Presidency of the AAMP.







Q: Where do you see our specialty heading? How is the field changing/evolving? Where do you see our future?

A: I think that our specialty, like all of medicine, at least in the US, will need to change. This year ahead, 2014, will be re-membered as the year for change in medicine. So, it is important that our specialty changes in a positive manner in order for us to continue to serve our patients - that means we have to look at how we define our specialty. Our "value" has to increase - so we have to look at incorporating more technology into our practice model. We have to partner more with bioengineering to solve clinical problems, and we have to start defining our outcomes. The Obama healthcare plan is changing the reimbursement model. In the past, our reimbursements were dictated by our expenses; in the future, our reimbursement will be dictated by our outcomes. Hence, we need to define our outcomes in order to obtain a better reimbursement.

TOP: Dr. Davis (Blue dress) at the grand opening of MUSC's new Wellin H&N Clinic Bottom, left: Dr. Davis' first day at the MUSC clinic, 1994.

Bottom, right: Attending an AAMP meeting (Dr. Davis, Dr. Rhonda Jacob, Dr. Larry Brecht).

Photos courtesy of Dr. Betsy K. Davis





Q: How do you maintain a balance between your career and personal life?

A: I do not know if I am the one to ask about that - but, I am at peace with my decisions. Finding a balance between your career and personal life is difficult, especially in the hospital, given the urgency of the medical diagnosis. I think being flexible helps one through the difficult times when patient need is great and perhaps the personal life has to take a back seat to the career. Most importantly, I think having a sense of gratitude is also important. As my parents taught me years ago - don't look at what you don't have, look at what you do have. All of us have difficult times in our lives. What is important is that we try to learn our life lessons and develop a sense of peace about the choices that we make.

Now that I am older, I always ask myself, "Will this bring me joy?" or "Do I really need to do this?" During different parts of my life, my priorities have changed and along with that my choices.

TOP: THE EXECUTIVE BOARD OF THE AAMP, INCLUDING AAMP PRESIDENT, DR. BETSY DAVIS.

BOTTOM: DR. DAVIS TRAVELING IN FRANCE WITH THE UCLA FAMILY. DR. DAVIS TRAINED AT UCLA.

Q: Let us know about your family, friends, likes and dislikes?

A: I am one of four children. I have an older brother and sister who are twins and are 11 months older than me, and I have a sister who is 5 years younger. My parents emphasized education, and so we always knew from a young age that education was important. My brother has his MBA and is Vice-President of Transportation for North American Composites in Minneapolis, MN. His twin sister received her Ph.D. in psychology from NYU and is on faculty at Georgia Southern University. My younger sister is a midwife who works for a hospital in South Carolina. Equally as important as my career is my role as "Aunt Betsy" to Will (17), and Elizabeth (12) and my role as "Aunt BB" to James (3), and Caroline (1½). When time allows, my hobbies include painting (watercolor and oil), swimming, reading, and golf.



Thank you to the American Academy of Maxillofacial Prosthetics for allowing us to reprint this interview.

TOP: DR. DAVIS' FAMILY PHOTO ACCOMPANIED HER INTERVIEW IN AAMP CONNECTIONS.

BOTTOM, LEFT: DR. DAVIS WITH HER NEPHEW, JAMES.

BOTTOM, RIGHT: DR. DAVIS WITH WILL AND ELIZABETH, HER NEPHEW AND NIECE.

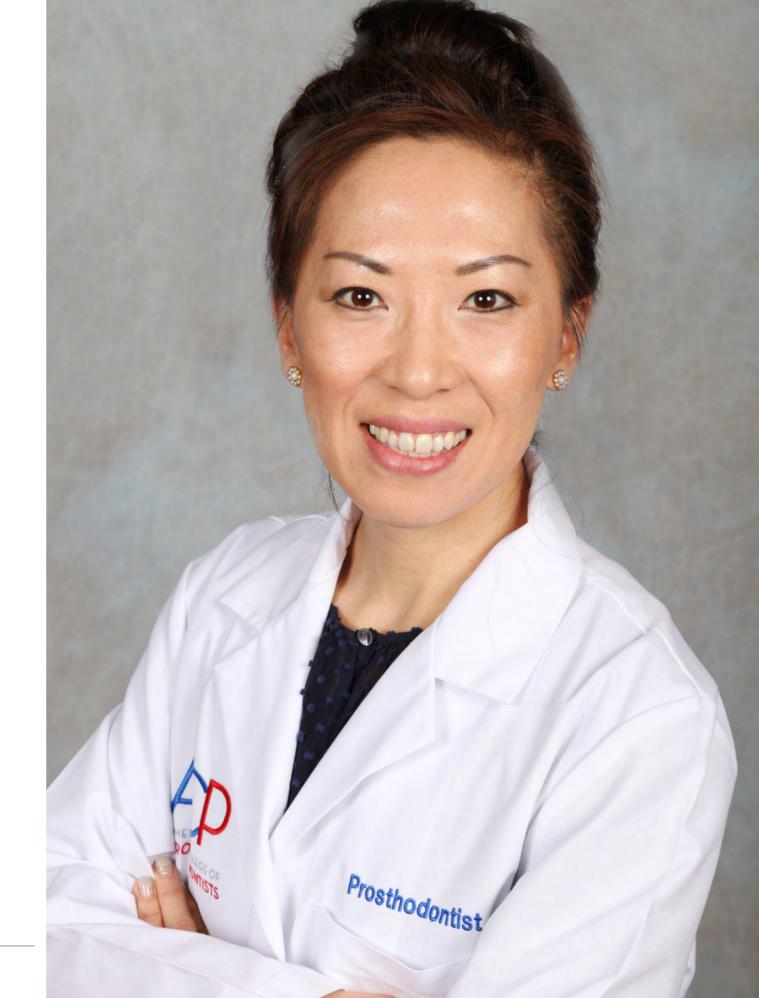






DR. MIJIN CHOI

MIJIN CHOI, DDS, MS, FACP



Please elaborate on your reasons for becoming prosthodontist. Who inspired you? Why did you decide to become a prosthodontist?

My career as a prosthodontist began in the second year of dental school. My admiration for the meticulous demonstrations of the professor in the dental simulation lab was the start. The desire to do the best work pushed me to study further. After completing dental school, I quickly realized that I didn't have all the answers for patients I was taking care of. From that point on, I was sure that I had to become a prosthodontist. I just wanted to better serve the patients that I was privileged to help.

What advice would you have for young women considering a career or just starting a career in prosthodontics?

If you have already chosen prosthodontics as your life's passion, the advice I can give at the starting point is simple: just stay focused on the big picture that brought you into the field of prosthodontics, and let that be your guide. Circumstances of your life will always change, but when you keep your eyes on 'the right place,' you will be able to persevere and make right decisions.

The challenge I faced as I was beginning my career was people's general perception of what an experienced doctor should look like. People related the word "experienced" more with gray hair and male.

When you reflect back to your residency, how has the profession in prosthodontics changed for women over the years?

When I joined my prosthodontic residency program, I was the only woman in the program. Now, more than half of the students in our prosthodontic program are female. This change is also reflected in dental school student population. More women are seen in dental education leadership positions. The diversification of genders in these leadership roles created a positive impact by offering different leadership styles and diversifying approaches in solving problems.





LEFT: 2014 NORTHEAST GNATHOLOGICAL SOCIETY MEETING (DR. CHOI, CENTER)
RIGHT: 2016 NYU GRADUATION DINNER. PHOTOS COURTESY OF DR. MIJIN CHOI.

As a woman, what are some challenges you have faced in prosthodontics and how did you overcome them or continue to overcome them? How do you handle stress and pressure?

The challenge I faced as I was beginning my career was people's general perception of what an experienced doctor should look like. People related the word "experienced" more with gray hair and male. As a young female clinician, the high level of professionalism and leadership skills in addition to high level of knowledge and clinical skills in ways I conducted myself with colleagues, staff, and patients played important roles in facilitating success in my career. In managing stress levels, it is important to know how to prioritize, work as a team, and understand the capabilities of the team members.

How do you balance work and private life?

I am not sure how to answer this question because balancing work and private life can be about how you weigh your happiness level resulting from your "balance ratio." I am still in the process of figuring this out.

As you project to the future, what role do you envision women play in prosthodontics?

I believe that as the world is made up of women, men, different experiences, varieties of different capabilities and abilities, the makeup of an organization has to reflect this diversity. The field of prosthodontics is no exception to this fact. By having more voices of women in our profession, our approaches in dealing with many issues will be more creative by providing different perspectives.



Fatemeh S. Afshari, DMD, MS

Dr. Fatemeh Afshari is a Clinical Associate Professor in the Department of Restorative Dentistry at the University of Illinois at Chicago (UIC), College of Dentistry. Dr. Afshari received her BA from Northwestern University in 2006, DMD Degree from Harvard School of Dental Medicine in 2006, and Certificate in Prosthodontics-Master in Oral Sciences from UIC in 2009. She was recently honored with the 2016 Claude Baker Faculty Award by the American Academy of Fixed Prosthodontics.

Dr. Afshari has co-authored several peer-reviewed articles and mentored predoctoral, residents, and master students, many of which have received local and national research awards. Her research interests include education, outcomes assessment, and caries risk assessment.

Nancy S. Arbree, DDS, FACP, MS

Dr. Arbree received her dental school training at Georgetown University School of Dentistry (1977), her General Practice Residency training at the Veterans Administration Hospital in Gainesville, FL (1978), and her Prosthodontic and Maxillofacial Prosthetic training at Memorial Sloan-Kettering Cancer Center in New York City (1978-81). In 1990, Dr. Arbree received a Masters of Dental Science in Research from Tufts University School of Dental Medicine; she was the first faculty member to do so.

Dr. Arbree is a prosthodontist, Diplomate of the American Board of Prosthodontics, and a Fellow in the American College of Prosthodontists (FACP), where she served as national President (2004; first female president). She is also a member of the American Dental Association and the Greater New York Academy of Prosthodontics, where she also served as President (2008; first female president).

Dr. Arbree came to Tufts University School of Dental Medicine in 1981 as an Assistant Professor in the Department of Complete Dentures. She joined the Dental Faculty Practice. She taught in the predoctoral student clinic from 1981 to 1996 as the Director, and then Division Head of Clinical Complete Denture Prosthodontics. Dr. Arbree was the Associate Dean of Academic Affairs at Tufts from 1996 to 2012.

In 2012, Dr. Arbree retired from TUSDM and devoted more time to her private practice. She was awarded Professor Emeritus and Academic Dean Emeritus (the latter award being a first at TUSDM). In 2012, she was awarded the first Lifetime Achievement Award by the Georgetown University School of Dentistry Alumni. In 2014, she was awarded the American College of Prosthodontists' Distinguished Service Award.

In 2015, she was awarded the American College of Prosthodontists' Dan Gordon Lifetime Achievement Award.

Dr. Arbree has limited her practice to prosthodontics at the Post Office Square Dental Group at Post Office Square in Boston since 1999. She lives in the Back Bay of Boston with her husband, Dr. Arnie Rosen, who is also a prosthodontist, and their two Tonkinese cats, Blue and Romeo. Leisure time interests include

spending time with family and friends, walking, running, hiking, gardening, cooking, reading, music, theater, needlework, visiting museums, and traveling.

Susan E. Brackett, DDS, MS, FACP

Dr. Brackett graduated in 1978 from the University Of Oklahoma College of Dentistry. Upon graduation, Dr. Brackett joined the faculty of the Colorado University School of Dentistry and returned to Oklahoma in the summer of 1980 as a faculty member of the OU College of Dentistry, Department of Fixed Prosthodontics. In 1987, Dr. Brackett received her certificate in Fixed Prosthodontics and a Master of Science degree from the University of Iowa. At that time, she returned to the OU College of Dentistry as a full time faculty member. Dr. Brackett presented her original research and won the 1988 Stanley D. Tylman Award sponsored by the American Academy of Fixed Prosthodontics. She is the coauthor of the American Medical Writer's Association award-winning textbook, Fundamentals of Tooth Preparation as well as the Fundamentals of Fixed Prosthodontics, third Edition. Following a long and successful career in academics, Dr, Brackett joined an established prosthodontic private practice in Oklahoma City, OK in 1998.

In May, 2013 Dr. Brackett received an Honorary Doctorate in Humane Letters from the University of Oklahoma. Then in October, 2013, the ACP Education Foundation recognized her service to the organization as the third recipient of the Founders Society Award.

Dr. Brackett participates as an active member in the American Dental Association, the Oklahoma Dental Association and the American Academy of Fixed Prosthodontics, as well as the American College of Prosthodontists. She is a Diplomate of the American Board of Prosthodontics and a Fellow of the American College of Dentists and of the American College of Prosthodontists. She has been active in the American College of Prosthodontists serving as Section President and as a member of numerous committees and task forces. Dr. Brackett was a member of the ACP Education Foundation Board for nine years and was the Co-chair for the ACPEF's Annual Appeal for a number of years. She has served consecutive terms on Board of Directors. of the American College of Prosthodontists since 2005 as Director of the Public Relations and Communications Division and as the Secretary and Vice President. Currently, Dr. Brackett is the President Elect and will ascend to the Presidency in October 2016.

Dr. Brackett maintains a part-time private practice limited to prosthodontics in Oklahoma City, OK.

Jane D. Brewer, DDS, MS

Dr. Brewer received her dental school training (1978), a certificate in Fixed Prosthodontics (1982) and an M.S. in Oral Sciences (1985), all from the State University of New York, University at Buffalo, School of Dental Medicine. She was the first woman to become a fellow in the Academy of Prosthodontics (1994), and served as the first woman president for the American Academy of Fixed Prosthodontics (2007). Dr. Brewer currently

serves as Chair of the Department of Restorative Dentistry at the SUNY Buffalo SDM. In addition, Dr. Brewer maintains a highly successful private prosthodontic practice.

Karen Bruggers, DDS, MS

Dr. Karen Bruggers received a BS degree in Microbiology from Louisiana State University Baton Rouge, and an AS degree in Dental Laboratory Technology and a DDS from Louisiana State University School of Dentistry. She received her MS in Prosthodontics from the University of North Carolina at Chapel Hill. Dr. Bruggers is on the editorial review board for the *Quintessence of Dental Technology* and has memberships in the American College of Prosthodontics, where she is on the Board of the ACP Educational Foundation, the ADA, and the American Academy of Fixed Prosthodontics.

Dr. Bruggers taught dental ceramics at LSU prior to attending dental school and after completing her prosthodontics training, she taught full time in the Prosthodontic Department at UNC for three years. She has been in private practice since 1991 and is an adjunct Professor in the Department of Prosthodontics at UNC School of Dentistry, primarily teaching in the graduate program. Dr. Bruggers has lectured throughout the United States.

Nancy R. Chaffee, DDS, MS, FACP

Dr. Nancy Chaffee is a graduate of the University of Iowa College of Dentistry. After several years in private practice as a general dentist, she returned to the University of Iowa College of Dentistry where she received her certificate and Master's degree in Prosthodontics. She received her American Board of Prosthodontics certification in 1993. Dr. Chaffee has held academic appointments at the Ohio State University, the University of Nebraska Medical Center, and most recently the University of North Carolina where she served as Graduate Prosthodontics Program Director until 2001. She is currently in private practice in Apex, NC. Dr. Chaffee is an active member of the American Dental Association, the North Carolina Dental Society, the American College of Prosthodontists, and the American Academy of Fixed Prosthodontics.

Mijin Choi, DDS, MS, FACP

Dr. Mijin Choi is a clinical associate professor at the New York University College of Dentistry in the Department of Prosthodontics, where she is the director of the Advanced Education Program in Prosthodontics. She obtained her DDS degree from the Columbia University College of Dental Medicine, and completed her certificate in Prosthodontics and a MS degree in Oral Biology at the University of Maryland. She then completed her sub-specialty training in Maxillofacial Prosthetics at Memorial Sloan-Kettering Cancer Center. She became a Diplomate of the American Board of Prosthodontics in 2004. Her areas of expertise are in complete oral rehabilitation for patients with

missing teeth and management of oral cancer utilizing wide range of simple and complex restorations and prostheses, esthetic restorations, implant prostheses, and removable prostheses. Dr. Choi is a Fellow of American College of Prosthodontists, Academy of Prosthodontics, Greater New York Academy of Prosthodontics and American Academy of Fixed Prosthodontics. She received the Claude R. Baker Faculty Award from the American Academy of Fixed Prosthodontics in 2010.

Dr. Choi is dedicated to providing the postdoctoral students with the educational processes that emphasize in a patient-centered approach in teaching, research, and oral health care delivery. She co-authored the book *Clinical Cases in Prosthodontics* by Blackwell in 2010, and has written a chapter titled "Chemotherapy and radiation therapy for head and neck cancer" for the Second Edition of *Laney's Diagnosis and Treatment in Prosthodontics* in 2011.

Betsy K. Davis, DMD, MS

Dr. Betsy Davis is an Associate Professor of Otolaryngology - Head and Neck Surgery, and Associate Professor of Oral & Maxillofacial Surgery with special interests in maxillofacial prosthodontics, implant prosthodontics, and dental oncology.

Dr. Davis is a cum laude graduate of Wofford College and received her D.M.D. degree from the Medical University of South Carolina. Dr. Davis pursued graduate training in Prosthodontics at the University of Iowa where she received her Certification and Master's degree in Prosthodontics. She joined the faculty at Ohio State University where she taught and practiced from 1989-1992. Davis completed her fellowship training in Maxillofacial Prosthodontics at M.D. Anderson Cancer Center in Houston, Texas, followed by a Maxillofacial Prosthetic/Implant Residency at UCLA Maxillofacial Prosthetic Clinic under the direction of Dr. John Beumer. She returned to her home state of South Carolina in 1994 to develop the MUSC Maxillofacial Prosthodontic Clinic.

Dr. Davis is an adjunct faculty member in the Department of Bioengineering at Clemson University. Dr. Davis' research focuses on rehabilitation of the maxillofacial patient. Her collaboration with the Bioengineering Department at Clemson University includes studies in 3D modeling and rapid prototyping of facial prostheses, implant biomechanics focusing on photoelastic and finite element analysis of tissue bar designs in head and neck cancer patients, and bisphosphonate associated osteonecrosis. Future plans include the development of a Functional Outcome Center to measure the functional recovery of head and neck cancer patients.

Dr. Davis is Past President of the American Academy of Maxillofacial Prosthetics and past Treasurer of the International Society for Maxillofacial Rehabilitation and currently serves as the Maxillofacial Prosthetic Director of the American College of Prosthodontists. She is a member of the Academy of
Osseointegration, American Academy of
Maxillofacial Prosthetics, American College of
Prosthodontists, American Dental Association,
International College of Prosthodontists,
International Society of Maxillofacial Rehabilitation,
H&N Cancer Alliance, and the America Academy of
Dental Sleep Medicine. She has been selected to
be in the Consumers' Research Council of America
in their publication of the *Guide to America's Top*Dentist, 2006-2016. She has been inducted into
the International Academy of Dentistry and the
American College of Dentists. She is a reviewer
for the *Journal of Prosthetic Dentistry* and the
Dysphagia Journal.

Dr. Davis' clinical expertise bridges the College of Medicine and Dental Medicine into collaborative efforts in the arenas of patient care, teaching, and research. This has resulted in the integration of dentistry with multiple medical specialties including Otolaryngology - Head and Neck Surgery, Plastic and Reconstructive Surgery, Dermatology/Dermatologic Surgery, Neurosurgery, Radiation Oncology, Rehabilitative Medicine, and Psychiatry.

Matilda Dhima, DMD, MS

Dr. Matilda Dhima is a faculty member and Maxillofacial Prosthodontist at the University of Pittsburgh School of Dental Medicine. She teaches dental students, graduate students, and residents on all topics of prosthodontics. She also provides life-changing care to patients with acquired or

congenital head and neck defects as a maxillofacial prosthodontist. Dr. Dhima has published outstanding and landmark articles nationally and internationally such as novel treatment methods for complex prosthodontics patients, novel methods to assess mentoring of students in prosthodontics, patient-based evidence for prosthodontics management of edentulous patients, and fixed prosthodontics care. She lectures extensively as an invited speaker at numerous national and international venues. She obtained her Doctorate degree from the prestigious University of Pennsylvania School of Dental Medicine. Dr. Dhima completed her residency in Prosthodontics and Maxillofacial Prosthetics and a Master's degree in biomedical sciences focusing on dental material science at the world-renowned Mayo Clinic. Dr. Dhima remains the first and only resident in the history of the Mayo Clinic Department of Dental Specialties to be awarded the academic title of Assistant Professor in Mayo Clinic College of Medicine as a recognition of her outstanding contributions to the research and patient treatment in the field of prosthodontics.

Dr. Dhima has been recognized with several prestigious national and international awards for her outstanding and innovative research to advance patient care and the field of Prosthodontics. She was awarded first place in the 2008 poster research competition at the American College of Prosthodontists annual session, 2009 Colgate Research Award, 2014 Tylman Research Award, American Prosthodontic Society graduate prosthodontic competition winner, and selected as

a prosthodontics educator for IJP/Karlsruhe
Workshop. She has been elected as a member of
the Ethics Committee of the American Academy of
Dental Research. She serves on the editorial board
of several internationally renowned journals
including the Journal of Prosthetic Dentistry,
Journal of Prosthodontics, and Journal of Advanced
Prosthodontics. Her research has been recognized
by grant awards from the American Academy of
Prosthodontics, American Academy of Fixed
Prosthodontics, Greater New York Academy of
Prosthodontics. She continues to focus her
research, teaching, and patient care on clinical
outcomes and dental biomaterial science.

Lily T. Garcia DDS, MS, FACP

Dr. Lily Garcia completed her dental education at Baylor College of Dentistry in Dallas, Texas, followed by the Certificate and Master of Science program in Prosthodontics at the University of Texas Health Science Center San Antonio. Her initial goal was to be a private practitioner but eventually accepted an academic position at the University of Colorado Health Sciences Center: "I did transition from private practice into an academic institution with respect and appreciation for both what I was leaving, and what I was gaining."

Dr. Garcia is currently a Professor & Associate Dean for Education at The University of Iowa College of Dentistry & Dental Clinics. She is also Vice-Chair of the American College Prosthodontists Education Foundation, Past President of the ACP (2011), and Past Chair of the Board for the American Dental Education Association (2014). For her inspirational

work, she received the Educator of the Year award from the ACP in 2004. As a woman and a Hispanic, she has overcome both race and gender barriers to be the top of her field: "I realize now that it is important to acknowledge there are many who seek to identify with a person of background similar to their own, whether the latter means 'as a woman,' 'as a woman prosthodontist,' 'as a Mexican-American,' 'as a Hispanic Professional,' 'as an Academic,' 'as a volunteer leader in an organization.' Whatever the label, if it means to connect with a person to help model what is possible, it is important to frame the view from that person's perspective, rather than my own."

Virginia Hogsett, DMD, MS

Dr. Virginia Lea Hogsett grew up in Baldwin City, Kansas. She attended William Jewell College, in Kansas City, Missouri, where she double majored in Molecular Biology and Mathematics and graduated summa cum laude. She received her DMD from Harvard School of Dental Medicine in 2013 and was inducted in Omicron Kappa Upsilon. She received her certificate in prosthodontics and a master's degree in oral sciences from the University of Illinois at Chicago in 2016. During residency she won first place at the American Academy of Fixed Prosthodontics for her clinical poster presentation entitled A Prosthetic Approach to Class III Malocclusion Utilizing Fixed Complete Denture Therapy. She won third place among all postgraduate residents at the University of Illinois at Chicago Annual Clinic and Research Day for her master's thesis project on Prosthetic Complications

and Patient Outcomes of Implant-Supported Fixed Complete Dental Prostheses. She currently practices in Dallas, Texas, and enjoys cooking, eating, and drinking coffee in her free time. Her latest projects include planning her wedding and completing board certification.

Rhonda Jacob DDS, MS, FACP

Dr. Rhonda Jacob received her dental school training, prosthodontics certificate, and master of science at the University of Iowa, followed by maxillofacial prosthodontics training at MD Anderson Cancer Center. She worked at MD Anderson for 30 years as professor, faculty, Director of the Maxillofacial Program, and Director of the Implant Fellowship. She is a Diplomate of the American Board of Prosthodontics and the first female ABP Board examiner. She co-authored one of the most popular selling textbooks in prosthodontics, Prosthodontic Treatment for Edentulous Patients: Complete Dentures and Implant-Supported Prostheses. Dr. Jacob served as the first female president for American Academy of Maxillofacial Prosthetics (2006) and Academy of Prosthodontics (2008). Recently she also served as president of International College of Prosthodontists in 2015.

Leila Jahangiri, BDS, DMD, MMSc

Dr. Leila Jahangiri completed her BDS from King's College, University of London (UK) and DMD. training, Certificate in Prosthodontics, and Masters of Medical Sciences degrees (MMSc) from Harvard School of Dental Medicine where she was the

recipient of Joseph L. Henry Award for "Overall Achievement in Clinical and Research Training and Contribution to the School." Having taught undergraduates and residents in dentistry and Prosthodontics at Harvard, the University of Medicine and Dentistry of New Jersey, and New York University College of Dentistry, her expertise is in innovative curriculum development and teaching effectiveness. She is the Chair of the Department of Prosthodontics at NYU. Her clinical areas of expertise include extensive crown and bridge reconstructions, implant prosthodontics, esthetic dentistry, and removable prostheses. She has been an active clinician, researcher and teacher since 1991. Dr. Jahangiri is the recipient of the New York University's Distinguished Teaching Award (2014).

Dr. Jahangiri is responsible for the oversight of the predoctoral and postgraduate Prosthodontics curriculum at NYU. She gives many lectures to the undergraduates and postgraduates, is actively involved in clinical supervision, and mentors students and faculty in research. She has served as a consultant, member, or chaired many dental, medical, and prosthodontic educational committees. Additionally, Dr. Jahangiri is an active member and fellow of numerous organizations, including an active position as an Advisory board member of the Institute for Professional Development, Associated Medical Schools of New York.

Lisa A. Lang, DDS, MS, MBA, FACP

Dr. Lisa Lang is the Assistant Dean of Clinical Education and the Chair of the Department of Comprehensive Care at Case Western Reserve University School of Dental Medicine, Cleveland, OH. She received her BS in Dental Hygiene and DDS from the University of Michigan. She completed an AEGD Program at Columbia University and earned a Certificate and MS in Prosthodontics from the University of Texas Health Science Center at San Antonio.

Within her specialty of prosthodontics, Dr. Lang's clinical practice interests include fixed partial dentures, implant and complete dentures, and removable partial dentures. Dr. Lang is a fellow of the American Board of Prosthodontics. She has practiced dentistry for over 20 years.

Dr. Lang is a member of the ADA, ODA, GCDS, AO, ACP, and Academy of Prosthodontics. She has held several offices in these organizations, including Chair of the Prosthodontics Section of ADEA and Chair of the Education and Research Committees of several organizations, and is on the Board of Trustees for the Greater Cleveland Dental Society.

Carol A. Lefebvre, DDS, MS, FACP

Carol A. Lefebvre received her DDS and MS in Prosthodontics from the University of Michigan School of Dentistry. Dr. Lefebvre is Dean at The Dental College of Georgia at Augusta University after serving as the Vice Dean/Associate Dean for Strategic Initiatives and Faculty Affairs for six years. She is a Professor in the Departments of Oral

Rehabilitation and Oral Biology in the College of Dental Medicine and the College of Graduate Studies, Dr. Lefebyre is the PI of the Nobel Biocare/ AU Center of Excellence grant. She is a recipient of The Dental College of Georgia's Excellence in Teaching and Outstanding Faculty Member Awards. Dr. Lefebvre is a Diplomate of the American Board of Prosthodontics, a Fellow in the Academy of Prosthodontics, the American College of Prosthodontists, and the Pierre Fauchard Academy as well as a member of Omicron Kappa Upsilon, Phi Kappa Phi, the Thomas P. Hinman Dental Society and the International College of Dentists. Dr. Lefebyre served as Editor-in-Chief for The Journal of Prosthetic Dentistry for nine years after serving four years as the Associate Editor. The American Academy of Fixed Prosthodontics honored Dr. Lefebvre by naming their Scientific Poster Award after her in honor of her tenure as Editor, Dr. Lefebyre is a 2005-2006 fellow of the Hedwig van Ameringen Executive Leadership in Academic Medicine (ELAM) program.

Irena K. Mausner, DDS

Dr. Irena Mausner graduated from Guy's Hospital Dental School in London England. She practiced for a few years in London, and then came to the USA in 1970. She passed the dental boards and acquired a license to practice in 1972. She remained in general dentistry until 1979 and was an Attending at Mount Sinai Dental Department at that time.

Dr. Mausner entered the P.G. Prosthetic program at New York University in 1979 and graduated in

1981. Since that time she has been teaching first in the graduate department, and then in the postgraduate department of NYU and practicing in her office in midtown Manhattan.

Patricia S. Moulton, DDS

Born Patricia Karyne Smathers on March 27, 1931 in Canton, North Carolina, Dr. Moulton graduated from high school in 1949. She received an A.B. degree (cum laude) from Meredith College (Raleigh, NC) in 1953 and a DDS from the University of North Carolina School of Dentistry (Chapel Hill, NC) in 1959 and a Certificate in Prosthodontics from Emory University (Atlanta, GA) in 1973.

From 1959-1968, Dr. Moulton practiced general dentistry in Chapel Hill, NC. She served in the Department of Fixed Prosthodontics at Emory University from 1968-1987. She is currently a Professor Emeritus at Emory University.

Dr. Moulton has been a member of the North Carolina Dental Society, Georgia Dental Society, American Dental Association, American College of Dentists, American Academy of Fixed Prosthodontics, and Hinman Dental Society.

She received the Emory Faculty Award in 1979 and was named a Distinguished Alumna of Meredith College in 1975.

Dr. Moulton was certified by the American Board of Prosthodontics in 1974, the first woman to be board-certified.

Sharon Crane Siegel, DDS, MS, MBA

Dr. Sharon Siegel completed her undergraduate training at Western Maryland College, and her DDS degree (1979), her certificate in Prosthodontics (1992) and her MS Degree in Oral Biology (1995) at the University of Maryland, Baltimore College of Dental Surgery. She completed a General Practice Residency at Walter Reed Army Medical Center (1980) and served in the United States Army Dental Corps as a General Dentist in Baumholder, Germany from 1980-1982. She taught in the Department of Prosthodontics at University of Maryland from 1985-2002, serving as Director of Fixed Prosthodontics and earning the rank of Associate Professor with tenure. She moved to the Nova Southeastern University in 2003 where she has served and currently serves as the Chair and Professor of the Department of Prosthodontics. She recently earned an MBA from the H. Wayne Huizenga College of Business and Entrepreneurship (2015). Dr. Siegel is a member of the American College of Prosthodontists and has served the organization as the Section Editor of the Journal of Prosthodontics since 2006, as Chair of the Classification Implementation for the Prosthodontic Diagnostic Index Task Force (2004-2010) and as a member of the Research Committee (2007-2012).

Dr. Siegel has authored over 30 peer reviewed articles, and 6 Book Chapters. She is a 2006 Fellow of the ADEA Leadership Institute. She has lectured internationally on osteoporosis and women's health issues, and has conducted research and published extensively in the field of dental cutting. She is

currently conducting research in the area of CAD/CAM dentistry. She is the 2015 winner of the Lucy Hobbs Taylor Award from the American Association of Women Dentists. She holds a patent on a dental device.

Jeanne Craig Sinkford, DDS, PhD

Dr. Jeanne Craig Sinkford is one of the first female leaders in prosthodontics, and she is also the first female prosthodontist to become dean of a dental college. As she said in an interview, "homemaker, dentist, department head, and dean, from ballerina to dental school dean would aptly describe the career of Dr. Jeanne Craig Sinkford."

Dr. Sinkford studied ballet intensely in junior and high school before entering the academic route. Born in Washington, D.C., one of four successful sisters, Dr. Sinkford's family valued education and her parents "never felt that because we were female we could not achieve." Dr. Sinkford graduated first in her class at Howard's College of Dentistry in 1958, and joined the Howard faculty in the Department of Prosthodontics. Two years later, she moved to Chicago with her husband and attended Northwestern University to study for a doctorate in physiology while undergoing postgraduate training in prosthodontics within a timespan of 3 years. She returned to Howard in 1964, where she was appointed as chair of the Department of Prosthodontics and later became the first female head of a Division of Prosthodontics in the country. "When I used to go to meetings, there were no other women there. They used to

think I was at the wrong meeting." She became the Associate Dean for Advanced Education and Research in 1967 and was promoted to full professor in 1968.

During a 1974-1975 sabbatical, she served at the Children's Hospital National Medical Center in which she also completed a pediatric dental residency. She was appointed Dean of Howard University's College of Dentistry in 1975. Throughout her career, Dr. Sinkford not only overcame race and gender barriers while rising as a leader, but also focused on recruiting minority students, fighting discrimination and segregation, and helping women pursue dental careers, and academic and leadership roles.

Cortino Sukotjo, DDS, PhD, MMSc, FACP

Dr. Cortino Sukotjo is a tenure Associate Professor at the University of Illinois at Chicago (UIC), College of Dentistry (COD). He also holds an adjunct appointment in the Department of Biomedical Engineering at UIC and Department of Mechanical Engineering at Michigan Technological University. Dr. Sukotjo received his DDS Degree from the Padjadjaran University, Indonesia, followed by Ph.D in Oral Biology from University of California at Los Angeles and Certificate in Prosthodontics-Master in Medical Sciences from Harvard School of Dental Medicine. Currently, he is pursuing a Master of Health Professional Education (MHPE) at Department of Medical Education, College of Medicine, UIC.

He is a Diplomate of the American Board Certified Prosthodontics, Fellow of the American College of Prosthodontists (ACP), Associate Fellow of the Academy of Prosthodontics, member of the ADEA Policy Center of Educational Research and Analysis Committee, ADEA/William J. Gies Foundation Education Fellow, and Past President of the IADR/AADR Prosthodontic Research Group. He was recently awarded as the Clinician/ Researcher Award by ACP, Best Research Mentor of the year by UIC-COD and was the past recipient of the ACP Young Prosthodontist Innovator Award. He has served as member of ACP Digital Task Force and ACP Research and Education Committee. He has previously served as an editorial board member of Journal of Dental Education and Journal of Prosthodontics and as a judge for the ACP Sharry Award and the IADR Prosthodontics Awards competition. Dr. Sukotjo has co-authored 105 peer-reviewed articles and 4 book chapters. He has mentored 75 predoctoral, resident, master, and Ph.D students as well as junior faculty members, many of which have received local and national research awards. His research interests include dental education, corrosion-tribocorrosion, and the use of nanotechnology in dentistry.

Ghadeer N. Thalji, DDS, PhD, FACP

Dr. Ghadeer N. Thalji completed her DDS training at University of Jordan in 2004.Dr. Thalji earned her Prosthodontics Certificate in 2009, and a PhD in Oral Biology in 2012 from the University of North Carolina at Chapel Hill. In 2011, she became a diplomate of the American Board of Prosthodontics (ABP) and a fellow of the American College of Prosthodontists (ACP).

In 2012, she joined the department of prosthodontics at University of Iowa as an assistant professor and became the graduate prosthodontics program director in 2013.

Dr. Thalji has extensive clinical experiences in fixed prosthodontics, removable prosthodontics, dental implants, and maxillofacial prosthodontics. Her major research interests include dental implants and bone tissue engineering. She is now on the faculty of the University of Illinois at Chicago, College of Dentistry.

Lisa Thoms, DDS, MSD, FACP

Dr. Lisa Thoms is a Senior Manager, Clinical Affairs at DENTSPLY Implants North America. She received her DDS from the University of Southern California School of Dentistry and her Certificate in Prosthodontics from the University of Washington School of Medicine. She has worked in private practice in Southern California, and as an Associate Professor at the University of Washington School of Dentistry. She was the Associate Director of the Prosthodontics Department at the A.T. Still University of Arizona School of Dentistry and Oral Health. Now working at Dentsply Sirona as Senior Manager, Clinical Affairs in the Implant Small Business she states that growing the company's list of female Key Opinion Leaders is one of her goals.

Mary P. Walker, DDS, MS, PhD

In addition to serving as the Associate Dean for Research and Graduate Programs at the University of Missouri-Kansas City School of Dentistry, Dr. Walker is a professor in the departments of Oral and Craniofacial Sciences (OCS) and Restorative Clinical Sciences. She also serves as the program director for the OCS PhD and MS degree programs. Besides a prosthodontics specialty certificate, Dr. Walker has an MS and PhD degree. Before joining the UMKC faculty, she was a faculty member of the College of Dentistry, University of Nebraska Medical Center. Prior to her academic career, Dr. Walker owned a solo general dentistry practice.

Throughout her academic career, she has mentored more than 75 MS, PhD and predoctoral dental students, graduate specialty residents, and postdoctoral fellows. Her teaching responsibilities include graduate Biomaterials. She has been involved in translational and clinical research related to mineralized tooth structure, biomaterials and understanding the direct mechanism of oral cancer radiotherapy on the dentition.

Dr. Walker is a member of numerous professional organizations including American Academy of Dental Materials, American College of Prosthodontists, and International and American Association of Dental Research and has served on the AADR Board of Directors. She has served on several editorial boards including Journal of Dental Research, Journal of Prosthetic Dentistry, and International Journal of Oral and Maxillofacial Implants.

Judy Chia-Chun Yuan, DDS, MS, FACP

Dr. Judy Chia-Chun Yuan is UIC Assistant Professor and Director of Predoctoral Implant Education, the University of Illinois at Chicago, College of Dentistry in Chicago, Illinois. Dr. Yuan received her BA from the University of California at Berkeley. She received her DDS, Certificate in Prosthodontics and MS in Oral Sciences from the State University of New York at Buffalo. She participated as an International Team for Implantology Scholar in Bern, Switzerland. She is a Diplomate of the American Board of Prosthodontics and a Fellow of American College of Prosthodontists.

Dr. Yuan has received teaching awards at the organizations (Claude R. Baker Award for Excellent in Teaching Predoctoral Fixed Prosthodontics, American Academy of fixed Prosthodontics) and campus level (Teaching Recognition Award, and Departmental Teaching Excellence Award, UIC-Council for Excellence in Teaching and Learning). Dr. Yuan has co-authored more than 50 peerreviewed papers. She has served as Editorial Review Board for Journal of Dental Education and Journal of Prosthodontics. Her research interests include dental educational research, and implant dentistry and related areas.

RESOURCES

There are programs to assist women in various stages of their careers. These include:

- The Hedwig van Ameringen Executive Leadership Academic Medicine (ELAM) Program for Women
- The ADEA Leadership Institute
- The ADEA/Johnson & Johnson Healthcare Products
 Enid A. Neidle Scholar-in-Residence Program for Women.

 Both Drs. Lefebvre and Garcia are graduates of the ELAM Program and encourage others to follow suit.