

Archives

Steven P. Geiermann, DDS



Teran J. Gall, DDS

Obituary

On April 16, 2006, dental public health lost an exuberant soldier and accomplished community leader with the passing of **Teran J. Gall, DDS**. Teran was a good friend, a confidant, an invaluable colleague to all of us, and a credit to his profession, his community, and his family.

Interestingly, Teran was a 'dental public health'er, not by formal training, but solely out of 'instinct' and personal orientation. A 1983 graduate of Northwestern University School of Dentistry, he completed a general practice residency at the University of Minnesota School of Dentistry and Postgraduate Fellowship in Dental Education for the Care of the Disabled at the University of Washington School of Dentistry. He then went on to achieve Fellowship with both the American College of Dentists and the Pierre Fauchard Academy, and was an active member of the American Society of Geriatric Dentistry, the Academy of General Dentistry, and the American Association of Hospital Dentists. He also was an active member of many other professional societies, including the American Public Health Association,

Special Care in Dentistry Association, and the American Association of Public Health Dentistry.

Teran held a number of positions over the years, demonstrating his commitment to serving the disabled, the economically disenfranchised, and those otherwise disadvantaged. These included time in private (for-profit) practice, as Hospital Dentistry Coordinator at the University of California at San Diego Medical Center, as Director of Special Projects with the California Dental Association, and terms as Dental Director at the Red Bluff Dental Center and Modoc Medical Center (non-profit clinics in remote Red Bluff and Alturas, California, affiliated with Northern Valley Indian Health Services).

Throughout his career, Dr. Gall was a persistent driving influence for the improvement of the health of his community through his organizational involvement on wide ranging issues relating to community water fluoridation, health education, pediatric and geriatric oral health, and special patient care. For some, he might be most recognizable as a regular contributor to discussions on the dental public health listserv. Locally, he served his community in a number of capacities, including most recently as a board member, fund raiser, and construction laborer, for the restoration of the State Theatre for the Arts in Red Bluff. His closest friends also knew him for his accomplished photographic and culinary skills - his photographs of old barns are incredible and his theme dinners... legendary.

Though his presence will be missed, his memory and energy will remain with us.

-Mark H.K. Greer, DMD, MPH

-Michael W. Easley, DDS, MPH



Lois Cohen, PhD

Retirements

Dr. Lois Cohen, PhD The way Lois Cohen tells the story; it was happenstance that she got her first post doctoral position at the PHS Division of Dental Health (DDH). Some colleagues recommended her and she was quickly recruited. "I figured, why be in Washington if you can't have access to national problems, national data, and really have a chance to do something significant!" So the newly minted Ph.D. began her career as a social science analyst and over the years became a driving force for incorporating social science research into dentistry and expanding interdisciplinary oral health research around the globe. Dr. Cohen, who most recently served as Director of the National Institute of Dental and Craniofacial Research's (NIDCR) Office of International Health, retired on June 2, 2006 after 42 years of government service. Thirty of those years were spent at NIDCR.

"Lois has been instrumental over the years in advancing our Institute's mission domestically and internationally," said NIDCR Director Dr. Lawrence Tabak. "She's a dedicated and forward thinking researcher and

science administrator whose contributions to the Institute and the field of oral health research are numerous and wide-ranging. Lois has been a leader in integrating the application of the social and behavioral sciences into research for the study of oral health, which has ultimately helped improve public health both in the U.S. and around the world."

Dr. Cohen's early work concentrated on the social, behavioral, cultural, and economic factors that influence oral disease development and oral health care delivery. The Division was vibrant and active, she said, but there were hurdles to overcome. "It was definitely a challenge being a woman in what was then a male dominated working environment," she said. "Being a non-dentist in a dental world; there were always certain avenues that were blocked, but the very fact that the Division leadership sought out social and behavioral scientists to address their issues was an over-riding incentive for me."

While at DDH, she and her colleagues devised strategies to help overcome the public's reluctance to adopt water fluoridation as well as to encourage use of topical fluorides and dental sealants in private practices. Her initial studies focused on incentives and barriers facing practicing dentists in adopting techniques for the early detection of oral cancer. Dr. Cohen also launched two international studies in collaboration with the World Health Organization (WHO) that looked at which national delivery models of care resulted in better oral health status.

In 1976, the National Institute of Dental Research (NIDR) Director David Scott recruited Dr. Cohen to advise him on the relationship between dental health and the social and behavioral sciences. As an advisor, and subsequently as director of the Office of Planning, Evaluation, and Communications from 1983-1989, she incorporated social and behavioral research into the strategic plans for the Institute and pioneered major evaluations of the Institute's portfolios in caries research, craniofacial anomalies, and biomaterials.

In 1989, Dr. Cohen was selected to head the Institute's extramural research program, which faced restricted funds and a stagnant budget. "It was not unlike today," she said. "We needed to figure out ways to keep our enterprise strong and to move the science forward during that time." To circumvent the budget issues, she worked with the extramural scientific program management community to facilitate public-private partnerships that would help leverage the agency's resources. Those models for collaborative funding continue to guide other agencies as well.

Most recently, Dr. Cohen was Director of NIDCR's Office of International Health (OIH), ensuring that global health issues were addressed by international oral health research. "Take Noma or oral gangrene," said Dr. Cohen of the condition prevalent in Africa. "Why do we study it since we have hardly any cases here?" She explains, "Because you have to understand what it is to be able to prevent it. And, as we all know, diseases can cross borders — they don't respect geopolitical boundaries." The OIH also served as a WHO Collaborating Center for Dental and Craniofacial Research, functioning as a liaison with agencies involved in global oral health research and training both here and abroad.

A native of Philadelphia, Dr. Cohen received a B.A. in sociology from the University of Pennsylvania and an M.S. and Ph.D. in sociology from Purdue University. She has received numerous honors and awards and her *alma mater*, Purdue University, conferred its first honorary doctorate to a sociologist in 1989 for her work related to global dental health research. She is an honorary member of the American Dental Association, an honorary fellow of the American and International Colleges of Dentistry, and has received numerous distinguished career achievement awards from the International Association of Dental Research, the District of Columbia Sociological Society and other related domestic and international professional associations.

In retirement, Lois may return to ceramics, explore other crafts, have more time for reading, spend extra time with friends and family, and lead a "more balanced existence." Although officially now retired, Dr. Cohen will consult for NIDCR part-time. "I'm very committed to what we do here," she says. "What we're about is so important and I love being a part of it."

Jim Lipton, D.D.S., Ph.D., retired from the U.S. Commissioned Corps and the National Institute of Dental and Craniofacial Research (NIDCR) on May 1, 2006, ending a career of 30 years in the U.S. Public Health Service (PHS). Since 1985, he held leadership positions at NIDCR involving planning and evaluation, scientific development, research training and career development, and research infrastructure and curriculum development. In addition to helping start the first oral molecular epidemiology laboratory at the National Institutes of Health (NIH), Dr. Lipton played a major role in initiating the development and implementation of several new NIDCR/NIH research training programs and two new grant programs involving research infrastructure in dental schools and oral health research curriculum development. From 2004 until his retirement, he served as senior advisor to the Chief Dental Officer (CDO), U.S. Public Health Service, assisting the CDO in all PHS dental public health activities.

Appointment

RADM Christopher G. Halliday was selected as the Chief Dental Officer for the U.S. Public Health Service (USPHS) effective May 1, 2006. As Chief Dental Officer, he is responsible for providing leadership and coordination of dental professional affairs for the Office of the Surgeon General.

Dr. Halliday received a Bachelor of Arts degree in the combined studies of biology, psychology and anthropology from the University of California at Santa Barbara in 1983, a Doctor of Dental Surgery degree from Marquette University in 1987, and a Master of Public Health degree from



RADM Christopher G. Halliday

the University of North Carolina, Chapel Hill, in 2002. Dr. Halliday also completed the Interagency Institute for Federal Health Care Executives training program at the George Washington University Medical Center in 2005.

Commissioned in 1988 and assigned to the Indian Health Service (IHS) in Barrow, AK, he served as a Staff Dental Officer, and later as Chief of Dental Services, for the North Slope Borough and was responsible for dental patient care at eight Inupiat Eskimo villages on the North Slope of Alaska. In 1990, he transferred to the Dziłth-Na-O-Dith-Hle PHS Indian Health Center in Bloomfield, NM, as Chief of Dental Services. In 1992, he became the Area Dental Disease Prevention Officer for the Navajo Area IHS, stationed in Window Rock, AZ.

In 1998, Dr. Halliday transferred to the Health Resources and Services Administration in Rockville, MD, as a Senior Program Management Officer, co-managing dental grant programs that included funding for residencies in dental public health, general dentistry and pediatric dentistry. RADM Halliday served on numerous national recruitment, retention, promotion and readiness work groups and has demonstrated notable interaction and leadership in the Commissioned Corps of the U.S. Public Health

Service and Dental category activities. He has served on several Dental Professional Advisory Committee workgroups and has established and maintained relationships with numerous public and private organizations to advocate for the oral health needs of those served by the USPHS.

He is a member of several professional organizations including the American Dental Association, American Association of Public Health Dentistry, American Dental Education Association, and the Society of American Indian Dentists. He has served as an adjunct professor of several dental schools and has served on the American Dental Association House of Delegates.

In 2005, RADM Halliday was the recipient of the USPHS Dental category Jack D. Robertson Award, the highest award bestowed upon a dental officer by the USPHS Dental Professional Advisory Committee.

Letter to the Archives Editor

January 30, 2006

Dear Dr. Geiermann,

I wish to add a personal thought and reflection to the following item, which appeared in the Archives section of the Fall 2005 Journal of Public Health Dentistry.

Bob Bagramian and I were classmates at the University of North Carolina School of Public Health in the Fall of 1966 until he transferred to Michigan during that academic year. Indeed our loss was Michigan's gain. Regrettably we have neither seen each other nor communicated over the years.

I am writing not to dispute, but to comment on the following sentence (p.247): "Dr. Bagramian was the first Western trained dentist to provide oral healthcare on the island (Taiwan) during the 1960s." It should be noted that Bob's service at Changhua as a visiting American civilian dentist did not enable him to have the opportunity to contact the dental clinic personnel of the U.S. military stationed on Taiwan.

I was stationed – with my family – at Taipei, Taiwan, from January 1960 until December 1961 where and when I was a member of the U.S. Naval Support Activity's dental department. Although I don't recall the exact number of Navy dentists and dental technicians, we did perform nearly all types of Western dentistry: oral diagnosis, operative, crown and bridge, periodontia, prosthetics, exodontias, endodontics, and especially pediatric dentistry (but not orthodontics). I recall there was also on the island at least one U.S. Air Force dentist.

We treated primarily U.S. Military forces and their dependents. Over 90% of our patients were dependents of U.S. military and State Department personnel. It was estimated there were about ten thousand Americans stationed and living on Taiwan.

As dentists we did have both professional and personal contact with our Chinese/Taiwanese civilian and military colleagues. I lectured on Western dentistry at the Chinese Military Dental College in Taipei and on at least one occasion visited a major Taipei civilian hospital dental clinic where I became friends with their staff.

It should also be noted that during those years the United States provided a large amount of dental equipment and supplies to the Chinese military-Army, Navy, and Air Force. The use (and the lack of use) of this equipment and those supplies was a contentious subject whenever senior U.S. Military dentists visited the island and expressed serious concern [about] where and how the Chinese military were storing and using U.S. provided dental material.

Regrettably, I have not returned to Taipei or the Far East. Thank you for printing this special Archive.

Sincerely,
William J. Jasper DDS MPH
Life member, AAPHD
Commander, Dental Corps, U.S. Navy
Retired
FICD, FACD