

PRIDE *of* MKUDESASA

September 2023

Special Issue

Genesis of
MKUDESASA

Theme
Articles

MKUDESASA
Activities

Talents
Corner

Kadzo Wanje
Research Enthusiast

**Uncovering the core tenets of
Dentistry**

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EDITOR'S NOTE



Being charged with designing and editing of the 1st special issue magazine of MKUDESAs, “**Pride of MKUDESAs**” was a great honor to me. Designing a magazine that will last a life time and would be a reference point to anyone who would read it somehow sent a shiver down my feet. Writing a magazine is different from just any kind of writing and it is not as easy as many people may think. It called for a lot of patience, creativity and being open minded

I drew my motivation from the fact that MKUDESAs has come a long way. This would remind people of the beautiful story of MKUDESAs. Reading through all the beautiful research based articles and stories of the various people featured in the magazine inspired me all the way. That the dental fraternity have research enthusiasts, leaders, talented and creative people melted my heart.

Even though I lack solid foundation in graphic design, I took this as a challenge for me to try out something that would push me to learn new skills that would unlock my potential in graphic design world. Having passion in writing and graphic designing inspired every bit of designing process of this magazine.

The secret ingredient was believing in the power of benchmarking one’s imagination. This was very instrumental in the entire process because it is only through imagination that you can come up with ideas which are very unique.

I also had a very great and dedicated team which worked tirelessly to ensure we completed the project, I am really grateful for sacrificing some of their time for this project.

It is my sincere hope that you will enjoy reading every section of this magazine and you will be inspired and enlightened by all its contents.

“History recorded can never be forgotten, I believe this magazine will always be a reminder of where we have come from as MKUDESAs and the entire dental fraternity”.

Editor-in-Chief.

Masphine Juma

EDITORIAL TEAM



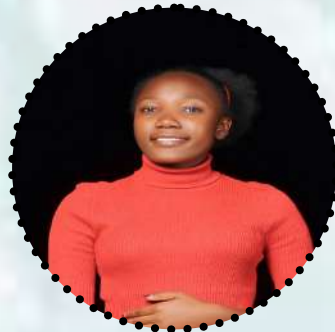
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PATRON'S MESSAGE



MKUDESА is a student association comprising of members of students within Medical School, department of Dental Sciences. The membership is derived of students from the four programs the department is offering, Bachelor's degree in Oral Health, Bachelor's degree in Dental Technology, Diploma in Oral Health and Diploma in Dental Technology.

MKUDESА has been very instrumental in championing matters pertaining student interests; academics, social issues, mentorship programs, leadership skills, career development, extra curriculum activities and reaching out to members of the community.

The department is very pleased with the leadership of the association.

LONG LIVE MKUDESА

**Mr Joseph Kangogo
MKUDESА Patron.**

MESSAGE FROM THE HEAD OF DEPARTMENT



Dentistry is a very important branch of medicine that plays a key role in promotion of oral health and general health of the body. With increase in burden of oral disease worldwide especially in the developing countries, training of many dental practitioners is very crucial and we are proud that Mont Kenya University has not been left behind being the only university in Kenya that offer a bachelors degree in both dental technology and oral health and among the few offering diploma on the same.

MKU is part of the few institutions in Kenya that trains future dental practitioners with the aim of solving the existing crisis of shortage of dental practitioners and increases burden of oral diseases.

MKU acknowledges that dentistry is a hands on course hence theoretical knowledge is not enough therefore establishing a state of art facilities which includes well equipped and furnished dental labs and clinic that facilitate adequate training of students equipping them with practical skills which are very essential when dealing with patients during various dental procedure.

**MKU joins the rest of the world in transforming the field of dentistry.
Why not join us and be part of the transformation.**

To read more about the prospect of dental department, click the link or scan the QR code below.

<httpsdocs.google.comdocumentd/1vdyDWPNIxknmpfXDdcioTVDSPbKDF4x6sWa7sbCA-Yc/editusp=sharing>



MR. LAWRENCE MBOGO
Head of Department
Dental Sciences.

MESSAGE FROM THE CHAIRPERSON



I'm Aliya Ali, a 3rd year student pursuing BSc. in Dental Technology. In our tenure in office I served as the vice-chairperson for 11 months and thereafter as the chairperson for 7 months.

I never saw myself being in the top leadership of the association one day but when the opportunity came, I knew a lot was expected from me. I took the assignment wholeheartedly and did my best in serving. At the back of my mind, I had this quote by Mohamed Ali **“The service to others, is the rent you pay for the room you have on earth”**

I am grateful for the opportunity.

WHAT HAS YOUR EXECUTIVE TEAM ACHIEVED?.

We drafted the constitution and proposal booklet that foresaw registration of this association in the university. Thereafter, we did the launching ceremony in less than 3 months.

We were also able united all the students from both degree and diploma in Dental Technology and Oral health. This was our initial success.

We managed to do a lot of activities which included dental camps, dental research competition, game night, oral and mental health awareness campaigns, attending world oral health day ceremony, outreach program, honouring our finalist members with certificates and partnering with our mother association (MKUHSA) in some of their activities such as health camps and HSA tournament where our association emerged the winner.

Having a couple of our articles posted in the university official website through the marketing department of MKU and one of our article featured in the August 2023 graduation booklet was among our greatest achievement and through that we were able to reach more people as far as spreading oral health awareness was concerned.

Throughout our tenure we were privileged to work and make contact with the following companies and organizations; Coca-Cola company, Colget Palmolive company, Equity Afia Medical centre, Sunset Dental Clinic and Ministry of Health (Oral health Unit).

Our final project for the ending tenure was releasing the 1st special issue MKUDESА magazine and launching the official MKUDESА website where dental reading aid would be posted for easy access by students

As an association we advocated for issue affecting dental students to the department through our able Patron Mr Joseph Kangogo that foresaw setting up of spacious dental clinic, expansion and equipping of the dental lab.

Also in our bucket list was honouring our finalist with dinner and pushing for our own dental school and it's our hope the incoming leader will do that on our behalf.

May God bless MKUDESА

MESSAGE FROM THE VICE-PERSON



Valerian Orege Ooko is my name. Currently a 3rd year pursuing Bachelors of science in oral health. I have been part of MKUDESAs for the past one year and seven months within which I have served both in the secretariat committee and also as the vice-chairperson's position. Serving as an authority in MKUDESAs is one of my greatest achievements and privilege.

Impacting lives was the sole reason for the establishment of this great association- MKUDESAs and being part of this transformative journey is one thing I take so much pride in. Driven by the desire to achieve what others failed to, the pioneer executive members brought forth our diversified and sensational ideas that gave birth to the now vibrant and fragrant association. It has unlimitedly gone beyond its set objectives not only to serve the dental department but also reach out to the larger MKU fraternity and the surrounding community

Apart from having the right policies that create an enabling environment for the tremendous growth witnessed in MKUDESAs it has also developed trust among our members, acted as a strong link between the dental department and dental students and has been a strong pillar for development of competent dental professionals.

Special heart of gratitude to the office of the dean of Students', club's coordinator, marketing department of MKU, multimedia department, estate manager, The Head of Department (Dental Sciences) through our patron Mr. Joseph Kangogo, all our department and associate lecturers and most important all the dental students who have walked with us all through this historical journey.

In less than two years MKUDESAs has achieved more than the reasons for its establishment.

What then can we call a success story if not the one set by the ever promising and delivering MKUDESAs?.

I am a proud member and will forever be grateful for having identified with MKUDESAs. As a dental student you're as valued as much as MKUDESAs is, so join and be part of the success story.

**REMEMBER THE JOURNEY IS ENDLESS, WE HAVE JUST STARTED,
NO RETREAT NO SURRENDER.**

MKUDESAs TO THE WORLD. .

THE FOUNDING EXECUTIVE COMMITTEE



ALIYA ALI
Chairperson
Head of all special committee



VALERIAN OREGE
Vice-chairperson
Member of Treasury



MASPHINE JUMA
Secretary general
Chair of secretariat



PETER NGATA
Treasurer
Chair of Treasury



MODEST KOBERO
Organizing secretary
Chair of Organizing committee



KADZO WANJE
Media Coordinator
Chair of Media committee



ELIZABETH NKATHA
Head of Students Committee
Member of Treasury



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Assistant treasurer
Member of Treasury



NICHOLUS CHONGA
Assistant Sec. general
Member of Secretariat



DUNCAN KIPYEGON
Executive member
Member of Secretariat



OWEN BARISERE
Assistant Org. Secretary
Member of Org. committee



ANN MAKENA
Executive member
Member of Org. committee



RUTH KILONZO
Executive member
Member of Org. committee



JESSEE NDENGWA
Executive member
Member of Org. committee



EMMANNUEL NARASHA
Executive member
Member of media committee



HARON KOECH
Executive member
Member of Media committee



FRIDAH NDETI
Executive member
Member of Media committee

THE GENESIS OF MKUDESА

The idea of having an association that would unite all the dental students was conceived in the month December 2021.

After extensive consultation and engagement, the founding committee that comprised of 16 members drawn from both dental technology and oral health was formed.

The idea was later shared with the department through the head of the department for approval and support to ensure the dream become a reality. Mr Joseph Kangogo volunteered to be patron of the association.

The reasons that led to the formation of the association are clearly defined by the mission vision and objectives of the association

To officiate the existence of MKUDESА, two principle documents; the proposal and constitution that were required for registration of the association under the office of the clubs and association coordinator were written.

The association was officially approved and registered by the Dean of Students on 9th February, 2022 through the office of the clubs coordinator.

The executive embarked on publicizing the association among the dental students and recruitment of members alongside preparation for the official launch of the association



The patron with some executive members during ongoing preparation for the launching ceremony



*“success comes to those who dares to attempt”
Mallika Tripathi*

THE SECRET CODES THAT UNLOCKED THE DOOR

“How we succeeded where others failed”

Many people kept wondering how these first year barely three months old in the university were able to form an association that many senior students had tried and hit a dead end. What they did not fathom is that leadership is not about age or size rather experience and strategies.

Our success story lies behind embracing the spirit of team work because ***Together Everyone Achieve More (TEAM)***. The executive committee was made up of people with selfless and transformative form of leadership. One statement would turn things around, **“if its for MKUDESAs am in”**.

Having the association registered and launched in less than three months since the idea was coined called for sacrifices and to us it was not a big deal because we clearly understood **“that you cannot milk a cow with your hands in your pocket”**.

Though in the process we were faced with challenges and resistance from people who thought we were unfit to lead and the team was at the verge of being torn apart, the unity we had and sincere communication founded on trust helped us sail through.

I think working with large executive team has always been a challenge to many organizations and has contributed to their downfall, but with MKUDESAs it worked out perfectly with a membership of 17 people, coming up with special committees within the executive was an ice breaker for us because through the committees every member was extensively engaged in the day to day running of the association. For us servant leadership was the approach we took, we served with a towel.

Lastly, having Mr. Kangogo as our patron was the best thing that ever happened to the association, he is an understanding, approachable, silver-tongued and meek person. The positivity of this gentleman is on another level, he has always been source of inspiration and motivation to the team and he has never lacked solution to any problem we encounter, listening to him is always enough to rejuvenate and get us back into action.

I remember one time our sponsor for certain event pulled out one week to the event and we were thinking of postponing the event but he candidly told us, “with or without the sponsors were are soldering on” and to our surprise the event turned out to be a success than we expected. His gospel has always been “plan for it and get it done.”

I know many of you have heard of the popular saying, “the golden keys that will unlock the door” and many of us thrive to get the key, but for MKUDESAs we did not need a single key (effort of an individual) rather combination of secret codes (a group of people selfless character).

The codes represents every single executive member that dedicated themselves to see existence of MKUDESAs does not remain a dream but becomes reality.

To us leadership was about making others better as a result of our presence and making sure that impact last in our absence.

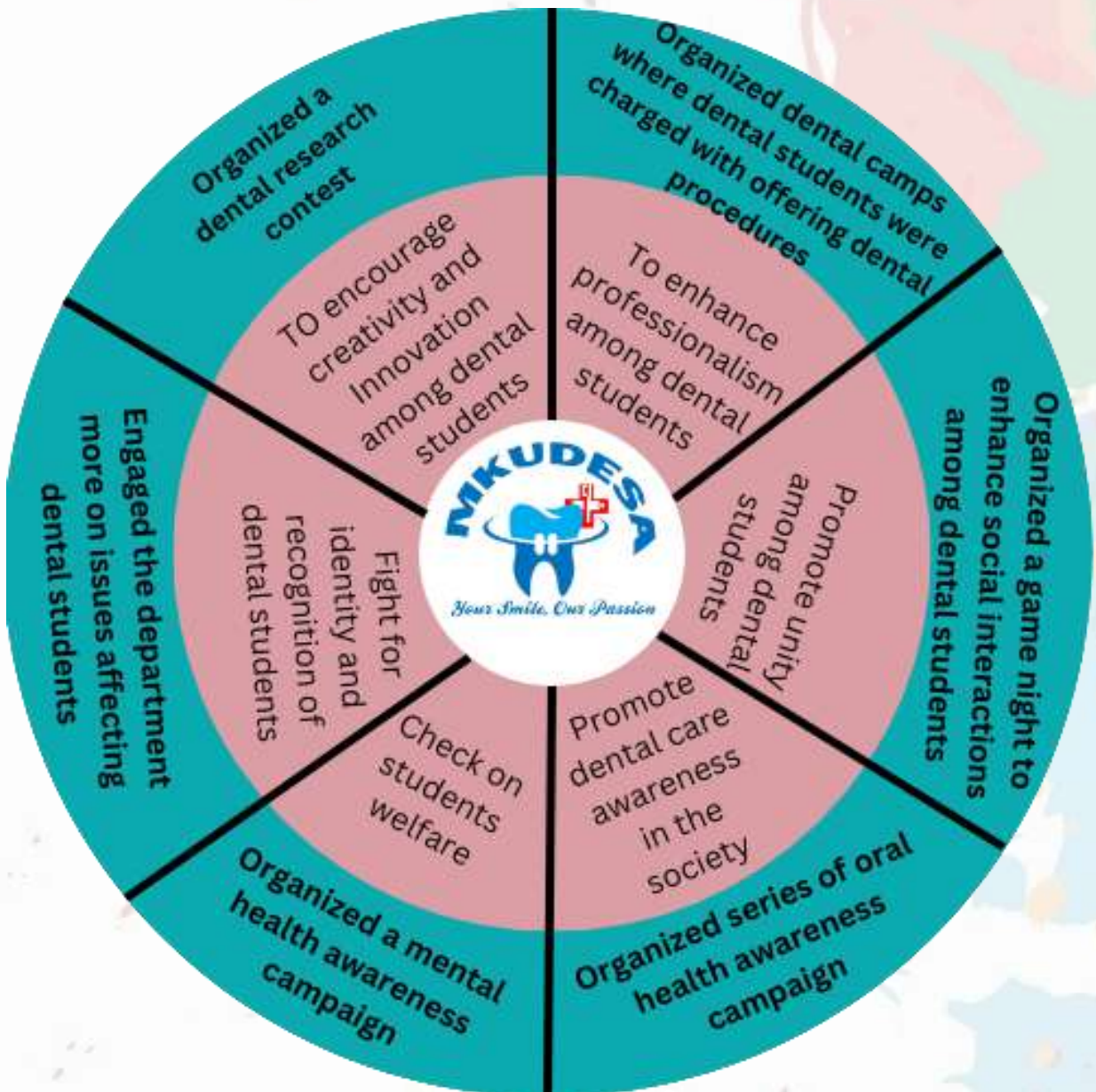


LET'S SCAN THROUGH THE OBJECTIVES

Tony Robbins once said “**setting goals is the first step into turning the invisible into visible**” In our first meeting, among the agendas was coming up with objectives of the association. Many suggestions were put across but the biggest concern was how would we be

able to realize this objectives, would they address the various issues that we felt were a miss?. This gave birth to a 2 in 1 discussion, drawing of the objectives and various ways the objectives would be achieved.

Did we achieve the objectives ?



THEME ARTICLES

UNCOVERING THE CORE TENETS OF DENTISTRY





THE ORAL-SYNDROMIC CONNECTION

"The hidden destructive nature of periodontitis"



Periodontal disease, commonly known as gum disease, is a group of chronic inflammatory conditions that affect the tissues that support teeth. While often thought of as an oral health problem, research has

uncovered their far-reaching impact on various systemic health conditions. The potentially destructive nature of periodontal disease goes beyond oral health and exerts a significant influence on various systemic conditions. The inflammation and bacterial spread associated with gum disease creates a complex web of interactions that can affect various crucial body systems. Recognizing these connections, emphasizing the importance of maintaining good oral hygiene practices and collaborating between dental and medical professionals to promote overall health and well-being is seamlessly undeniable.

This article explores the potentially devastating nature of periodontal disease and its complex relationship with various body systems.

THE HEART.

Periodontitis and Cardiovascular diseases.

The correlation between periodontal disease and cardiovascular disease has been well established. This is because the oral bacteria from the periodontal diseases may travel through the bloodstream into the arteries in the heart triggering a cycle of inflammation and arterial narrowing (atherosclerosis) that can greatly contribute to heart attack.

THE BRAIN

Periodontitis and Dementia.

New research suggests that chronic inflammation caused by periodontal disease may contribute to higher percentage cognitive decline and increase the risk of dementia. Mechanisms caused by inflammation and the spread of bacteria from the oral cavity to the brain takes place through the cranial nerves that connects the jaw or through the blood stream and contributes to a type of plague that is linked to Alzheimer disease.

Periodontitis and stroke.

Periodontal disease is associated with an increased risk of stroke. This is because the inflammation and infection associated with gum disease can result to narrowing of blood vessels and the formation of blood clots, increasing the risk of stroke.

THE KIDNEY.

Periodontitis and chronic kidney disease

Periodontal disease can greatly contribute to the progression of CKD because both periodontal and kidney disease are associated with inflammatory markers, therefore inflammation caused by gum disease can affect the body's ability to control kidney function resulting to increase in kidney workload worsening kidney disease in those already affected.

In addition good oral hygiene is crucial for dialysis patients, therefore poor oral health can increase the risk of infection, and any infection can be more serious in people with impaired kidney function.

PREGNANCY.

Periodontitis and premature birth

Risk of Premature Birth: Expectant women with periodontal disease have an increased risk of preterm birth and low birth weight because the women runs the risk of transmitting the oral bacteria to the unborn baby, pre-term birth can also result when the inflammation and infection in the gums triggers a systemic inflammatory response that can result to preterm labour (though the mechanism is not clearly understood)

Periodontitis and Preeclampsia

Some studies suggest a link between periodontitis and preeclampsia, a serious pregnancy complication caused by high blood pressure and damage to organs such as the kidneys. The inflammation caused by gum disease can contribute to this condition. Effects on the immune system: During pregnancy, a woman's immune system undergoes changes, and gum disease can put a strain on this system. This could potentially lead to an increased susceptibility to infections and complications.

THE PANCREAS

Periodontal disease and diabetes.

A two-way association has been identified between periodontal disease and diabetes.

Periodontitis is known to trigger the body's inflammatory response which affects insulin sensitivity and consequently can negatively affect glycaemic control that can accelerate the progression of full blown diabetes. On the other hand people with diabetes are more susceptible to oral infections, especially gum disease.

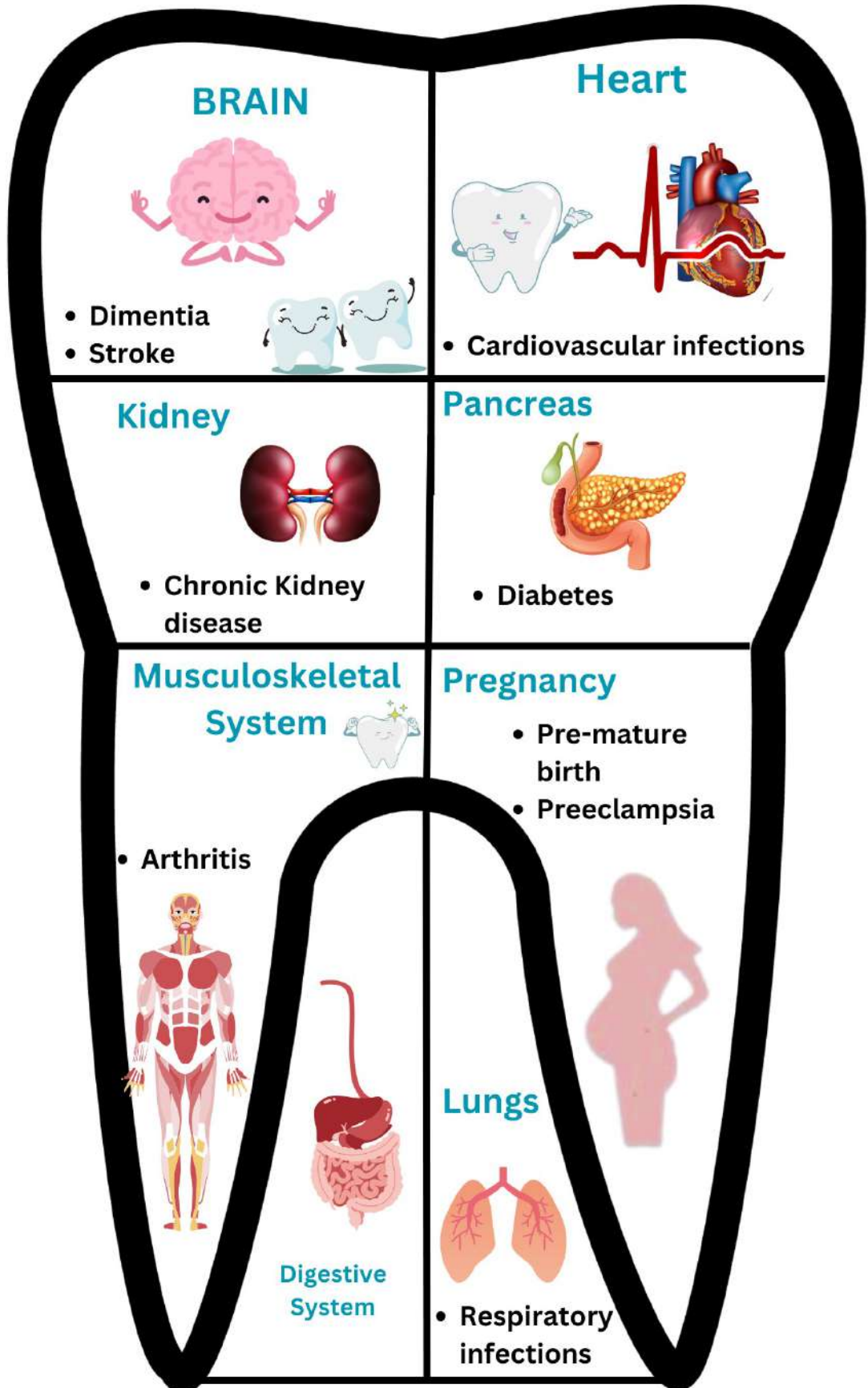
THE LUNGS.


Periodontal disease and respiratory infection.

Research has suggested a potential link between periodontal disease and respiratory infections, such as chronic obstructive pulmonary disease (COPD) and pneumonia. Poor oral health promotes growth of harmful bacteria resulting from periodontitis, these oral bacteria can get sucked into the lungs where they can contribute to breathing problems by aggravating symptoms of respiratory diseases especially in people with weakened immune systems.

Article by;
Mohammed Mohammed Abdullahi

WHAT YOU SHOULD KNOW ABOUT MOUTH-BODY CONNECTION





FLUORIDE

THE DOUBLE EDGED SWORD



Fluoride in the recent years has been nicknamed “**double edged sword**” because on one side it has benefits in respect to oral health whereas on the other side it has disastrous effect to oral health and general health of the body.

The ingestion of the fluoride can be either through intake of fluoridated water, ground water especially from wells and boreholes, fluoride supplements such as tablets, some food processed with fluoridated water or from dental care product like tooth paste and mouth rinse.

Upon ingestion of fluoride, it is transported to the gastro-intestinal tract where 90% is absorbed into the blood stream and 10% excreted directly in feaces without absorption. About 75% of fluoride absorbed into the blood is absorbed into blood plasma, 20% into the blood cells and 5% is protein bound. 50-70% of the absorbed fluoride is excreted through urine, sweat/saliva or milk in cases of lactating mothers.

About 30%-50% of the fluoride is retained into blood stream with 1% remaining in the soft tissues whereas 99% of it is permanently retained into calcified tissues (teeth/born).

On a positive note research has shown that fluoridated water can help to reduce risk of cavities by 25% in children and adults.

Fluoride consumed in the right amount(1mg/ l) per day results to benefits such as preventing growth of oral bacteria and preventing development of dental caries though hardening the weakened enamel and slowing lose of tooth mineral by enhancing remineralization process. Acid production by oral bacteria that normally initiates demineralization is also inhibited.

Fluoride destructive effect cannot be over-looked, though this has been looked shallowly and limited to dental fluorosis without being concerned with the underlying dangers it may cause .

This goes as wide as wide as resulting to skeletal fluorosis, reproductive toxicity, kidney malfunction, liver problem, neurotoxicity, cardiovascular problem, autism, epilepsy, arthritis and bipolar.

The potential hazard of fluoride is determined by timing of exposure, duration of exposure and dosage of fluoride ingested.

DENTAL FLUOROSIS.

This is dental condition that is caused by deposition of fluoride on the hard tissue of the teeth characterized by hypo-mineralization of the tooth enamel caused by ingestion of excessive fluoride during enamel calcination of permanent teeth and pre-eruption period during the 1st 6 years of life.

It normally appears as a range of visual changes tooth discoloration due to loss of protein and in severe cases physical damage to the tooth.

SKELETAL FLUOROSIS.

Frequent intake of drinking water with high level of fluoride results to deformation of bones due to deposition of fluoride which in severe cases results to crippling, this condition normally occurs when the liver is unable to process the fluoride passing it into blood stream where it combines with leached calcium and gets deposited on the bone surface.

REPRODUCTION TOXICITY

◆ *MALES.*

High level of fluoride exposure is linked to abnormal sex hormones levels (testosterone). Research confirms that high fluoride causes a change in sperm structures and function resulting to infertility. In addition it also results to low sexual drive.

◆ *FEMALE.*

Excessive exposure to fluoride from drinking water or in conjunction with exposure from other sources interferes with fertility, this is because excessive exposure is linked to abnormal sex hormone level especially estrogen. Research also confirms that it results to change in pregnancy related hormone.

KIDNEY MALFUNCTION.

Studies have revealed that there are direct adverse effect on kidney by excess fluoride leading to kidney damage and dysfunction, excessive exposure contributes to kidney diseases. Among major adverse effect includes immediate effect on the tubular area of the kidney, inhibiting the tubular reabsorption and changes in urinary ion excretion.

NEUROTOXICITY.

Research has shown that fluoride ingestion in excessive amount can result to neuron degeneration consequently resulting to various

abnormalities such as cognitive impairment in children.

CARDIOVASCULAR DIOSRDER.

Fluoride causes oxidative stress and degeneration of heart muscles (myocardial mineralization), this consequently interferes with the blood pumping mechanism of heart, in severe cases it can cause sudden rapture of aorta resulting to death.

ARTHRITIS.

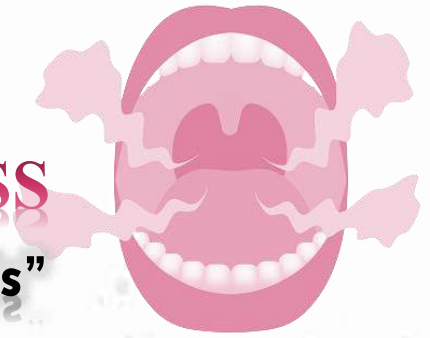
Excessive fluoride cause arthritis, this is because fluoride is absorbed into the cartilages located on the joints resulting to its calcination. In severe cases it results to generative osteoarthritis which is linked to skeletal fluorosis.

Its very clear that fluoride can either be beneficial or harmful depending with amount ingested therefore, it is imperative to keep under check the consumption level to healthy recommended amount.

**Article by;
Masphine Juma**

BEYOND THE MINTY FRESHNESS

“ Navigating the world of Halitosis”



Halitosis is an offensive odour originating from the oral cavity or an air filled cavity. Oral malodour or bad breath can originate from physiologic or pathologic sources, and has been estimated to

occur chronically in approximately half the population. Halitosis is derived from the Latin word "**halitus**," which means breath, and the Greek "**osis** " which means condition.

This occurs when odours (from foods or tobacco) are ingested and inhaled or when pathologically produced odiferous compounds (intra oral or systemic) are introduced into the lungs.

Halitosis has been estimated to be from oral sources in (40 - 90) % of case; however, it can also arise from systemic diseases.

Oral halitosis is a very common problem in dental patients, in fact, most adult subjects have socially unacceptable bad breath when waking up in the morning. This problem is transitory and attributed to physiologic causes such as reduced saliva flow during sleep. Although these transitory problems are easily controlled, persistent bad breath may be indicative either of oral diseases (i.e. periodontal diseases the presence of bacterial reservoirs in the mouth) or indicative of systemic diseases (i.e., hepatic cirrhosis or diabetes mellitus)

When dealing with the problem of halitosis or with the halitosis patient: it is important to distinguish between "genuine halitosis" and

"pseudo-halitosis". "*Genuine halitosis*" is where the breath malodour is a real problem that can be easily diagnosed either by organoleptic or by physico-chemical means. "*Pseudo halitosis*" is where the oral malodour does not exist but the patient believes that he or she has it. if after successful treatment for either genuine halitosis or pseudo- halitosis the patient still believe that he or she has halitosis .then the diagnosis is termed "**halitophobia**"

Physiologic halitosis also termed transient halitosis is self-limited, does not prevent the patient from carrying out a normal life, and usually does not need any therapy. This situation, also termed (morning breath) is more a cosmetic problem than a health-related condition. Happens when a patient eats certain aromatic foods such as herbs, spices, onions and garlic.

Pathologic halitosis permanent does not resolve by usual oral hygiene methods, and prevents him patient from carrying out a (normal) life. . This type of halitosis is not easily reversible and tends to persist without treatment. The best way to treat the bad breath caused by pathological halitosis is to treat the underlying condition.

Classification of halitosis can either be; Local (Pathological, Non pathological), Systemic (Pathological, Non-pathological) as a result of Systemic drug administration or Xerostomia. Local (non-pathologic) morning breath occurs due to decreased salivary flow, decreasing tongue movement leading to food stagnation.

Poor maintenance & overnight use of dental prostheses can produce malodours as a result of poor oral hygiene or decrease night time salivary flow.

In children under 4 years. (Fermentation of milk) results to halitosis. Other causes are; smoking: due to xerostomia and nicotine (substrate of mal odour), spicy food, tea, coffee and Teeth condition. Although dental caries does not produce bad breath, it creates food traps as do overhanging, sub gingival and open restorations. Debris remaining in these areas decomposes and produces fetid odours

Diabetes is a common systemic cause of halitosis. A diabetic patient is at increased risk of infection and poor wound healing predisposing them to odour producing periodontal diseases and other intraoral infections.

Dehydration component of diabetes, can result in decreased salivary flow and a subsequently increased risk of developing halitosis.

Uncontrolled diabetes causes the accumulation of abnormal metabolites in the bloodstream, and these are excreted through the lungs.

They include ketones such as acetoacetic acid, hydroxybutyric acid and acetone

Salivary hypo function diminishes the self-cleansing action of the oral cavity, and lower levels overnight frequently result in "morning breath." When saliva evaporates, non sulphur containing gases (e.g. cadaverine, putrescine, butyric, indole) can be released in addition to the VSCs, contributing to halitosis in the patient with salivary hypo function. salivary hypo function contributes to halitosis hence sugarless candies mints, or gums, artificial saliva, and pilocarpine (5mg tid) can increase saliva secretion and flow resolving halitosis.

"Have a minty fresh day. Won't you?"

**Article by;
Gachoki Boniface Ndegwa**



THE UNDENIABLE TIE BETWEEN MENTAL AND DENTAL HEALTH



“LINK BETWEEN DEPRESSION AND ORAL HEALTH”



Having a healthy mind is a very crucial thing in our lives. We tend to ignore it whenever we feel drained. We need to shed light on this area of mental health. Whenever you feel drained and mentally breaking

down, pause, reflect, get help and bounce back. Going for therapy does not mean we are mad people or weak, it just means we are concerned about our own progress. Healthy mind, healthy body!!!

Mental disorders can result to oral anxiety. **Oral anxiety** refers to the effect of mental health problems on the oral health of a person. Depression, an example of mental health disorder is a life threatening disease is directly or indirectly linked to a range of health issues. Studies have shown there is a link between mental health and poor oral health as discussed below.

ANTI-DEPRESSANT AND DENTAL CARRIES.

Medications used for depression increases the risk of carries because it causes reduction in salivary flow rate, Also patients with dry mouths will try to alleviate the symptoms by taking sweets, chewing gums and taking acidic beverages that increase the risk of dental carries.

DEPRESSION AND ORAL CANCER.

Depression is linked to increased high risk behaviours such as Tobacco use. Tobacco use is directly associated with increased risk of oral

cancers among users. Tobacco is known to contain some chemicals (carcinogen) such as nicotine which triggers genetic changes in cells of the mouth cavity which can lead to development of oral cancer. These chemicals are also known to make it difficult for cells to repair any DNA damage as well as damaging the DNA protecting us from the cancer. The build-up of DNA damage in the same cell over time leads to cancer development

DEPRESSION AND TEMPORO-MANDIBULAR JOINT DISORDER.

Depression results to TMJ disorder that causes pain and resists jaw movement. Stressful situations can cause one to clench their face a lot, putting pressure on both facial muscles and jawbone, eventually, stress resulting in TMJ.

DEPRESSION AND XEROSTOMIA.

Antidepressants can cause dry mouths which consequently causes Xerostomia which salivary gland not making enough saliva to keep the mouth wet and it also causes change in saliva composition. Salivary gland function is controlled by both sympathetic and parasympathetic innervation and in depression, both sympathetic and parasympathetic get affected which leads to altered salivary function. This could reflect in altered salivary function and salivary composition

DEPRESSION AND GLOSSODYNIA.

Glossodynia is an ongoing or recurrent burning in the mouth with no obvious cause. It may affect the tongue and other parts of the mouth like mucosa. It appears suddenly and can be severe, as if the mouth was scalded. It also known to be associated with major depression and anxiety disorder.

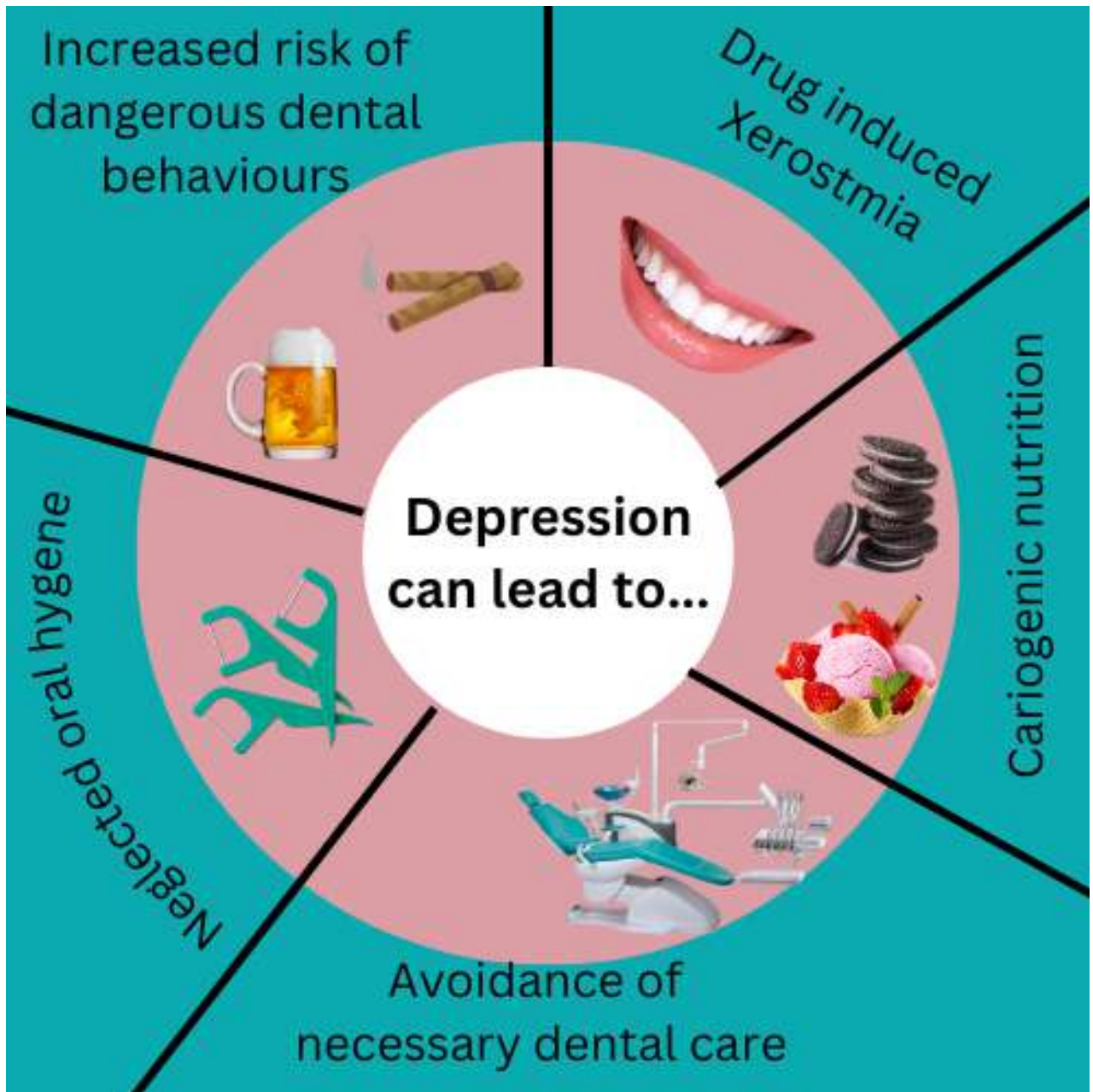
DEPRESSION AND PERIODONTAL DISEASES.

It's linked by behavioural and immunological factors. Depression is known to increase the circulating level of cortisol (an immune system suppressor). Excess cortisol increases the risk of progression of periodontal disease due to destruction of periodontal ligament. In addition people with depression may neglect their oral hygiene increasing risk of periodontal diseases. On the other hand, periodontal diseases may cause inflammation and stress which worsen depression

DEPRESSION AND ORAL INFLAMMATION.

The stress created manifests itself in the body as a hormone called Cortisol. As cortisol level increases, the immune system gets weaker. This can leave one vulnerable to mouth conditions like gum inflammation (gingivitis).

Article by;
Aliya Ali



DENTAL CARIES "THE SILENT EPIDEMIC"



Oral diseases are among the commonest chronic diseases worldwide and constitute a major public health problem due to the resultant affliction as well as the economic burden on individuals, families, societies, and healthcare systems.

The burden of oral diseases in the world keeps on rising as time advances and number of deaths attributed to oral diseases is also increasing as each day pass, dental caries is known to be the second most prevalent disease after cold world wide. Globally an estimated two billion individuals suffers from dental carries of the permanent teeth according to WHO global oral health status-2019. This statistic shows that the prevalence of dental caries among adults in Kenya is 34.3%. The first and only Kenya National Oral Health Survey (2015) reported high oral disease burden with one being notable was dental caries in children which was 40%.

Dental caries also named “ Universal diseases” is a prevalent chronic infectious disease that results from tooth adherent cariogenic bacteria that metabolize sugars to produce acid which over time demineralizes tooth structure forming cavities.

ETIOLOGY

It results when plaque forms on the surface of a tooth and converts the free sugars contained in the foods and drinks into acids that destroy the tooth over time primarily under the influence of bacteria known as streptococcus mutans.

DEVELOPMENT PROCESS.

Development of dental caries begins as discoloration of the teeth and with time results to surface cracks as it progresses to the 2nd stage.

Consequently there is tissue loss especially when it reaches the dentine and later extends to the root and when left untreated an infection and abscess may be formed causing unbearable pain and breakdown of surrounding bone. In severe cases it results to tooth loss and transfer of the bacteria's which affect the standing healthy teeth.

CAUSES OF DENTAL CARRIES.

Tooth location - mostly occurs in the jaws back of tooth (molars and premolars).

Cariogenic diet - frequent snacking or sipping sugary drinks gives mouth bacteria more fuel to produce more acids to attack the teeth.

Poor teeth brushing technique– this leads to plaque formation

Eating disorders- anorexia and bulimia can lead to significant tooth erosion.

Heartburn/gastro esophageal reflux disease-this causes flow of stomach acid to the mouth

PREVENTION MEASURES.

Oral hygiene; this is daily plaque removal by brushing, flossing and rinsing.

Fluoride application; this encourages remineralization.

Vaccine administration to suppress dental caries based in DNA

Xylitol used as sugar substitute.

Pit and fissure sealants to make them less morphologically susceptible.

**Article by;
Precious Faraja**

THE INSEPARABLE RESEMBLANCE IN HISTORICAL EVOLUTION OF DENTAL FLUOROSIS AND CHOLERA

“ Was it just a coincidental unconscious thinking between John Snow and McKay”



FLUOROSIS

Fredrick McKay is known as a **scientist** who unearthed the root cause of fluorosis. In 1901 he set up a clinic in Colorado spring and discovered a high proportion of the residents had stained teeth locally termed “**Colorado brown stain**”. His first epidemiological investigation were scuttled due to lack of interest among most areas dentists. He took this information to Greenwood Harriman Black a prominent American dentist and in 1909 after examining the specimens of affected enamel he described the condition as an “**enemy’s imperfection of the enamel of the teeth,**” a condition unknown in the literature of dentistry.

Black and McKay began their investigation for six years until 1915 when he died. During the period they made 2 crucial discoveries. First they showed molten enamel results from developmental imperfection in children teeth, Secondly they found that tooth afflicted by Colorado Brown stain were surprisingly and inexplicably resistant to decay.

Even with the crucial discoveries they were still a long way to determining cause of Colorado brown stain.

But McKay had a thought of theory that there was **an ingredient in the water supply that molested the teeth.** With time they also became aware of existing and further report of a similar condition worldwide.

In 1923 McKay travelled to Oakley Idaho where he met parent’s whose children had peculiar brown stains on their teeth and they stated the condition started appearance shortly after Oakley constructed a communal water pump but found nothing suspicious in it upon analysis, **nonetheless he advised town leaders to abandon the pipeline and within few years young children whose teeth were sprouting were healthy,** this led to emergence of **water causation theory.**

Later McKay traveled to the Bauxite company to investigate reports of the brown stains. They discovered that mottled enamel was prevalent among children of Bauxite but non-existent in another town five miles away. He analyzed the water and did not find any clue but they published a report in their findings and sent to H.V Churchill ALCOA’S chief chemist at their head quarter in Pennsylvania. **Churchill conducted his own test of water** in bauxite using photo spectrograph analysis, a more sophisticated technology than that that used by McKay and he found that the water had **high levels of fluoride.**

In 1931 years he wrote to McKay on this new revelation and requested him to collect water samples from other towns for testing and it was confirmed high levels of water borne fluoride caused the discoloration. **This answered his 30 years question of research,** this was published. The condition thereafter termed dental fluorosis.

**Article by;
Valerian Orege.**



CHOLERA

John Snow was a surgeon and physician with many scientific and social interest. He is known as the father of Epidemiology following his series of investigation he conducted

in London England between 1813-1854.

He conducted his classical study in 1854 when Cholera was an epidemic in the golden square of London where broad street pump was located, at the moment 600 people had already died from the disease.

Snow carried out “**shoe-leather epidemiology**” as popularly known where he was going from house to house counting all death from cholera and determining which water company supplied water to each house.

At that point nothing was known about the biology of cholera disease but Snow came up with hypothesis that **contaminated water polluted with feces was associated with Cholera**, this was entirely based on observational data.

He tested his theory with series of ingenious observation and “natural experiment” and **though he failed to identify specific disease causative agent**, his evidence drew attention that inspired Epidemiologist.

His work laid out ideas of Cholera as a disease that primarily affected the gastro-intestinal tract in which the cholera poison was taken directly into the mouth.

The remarkable discovery that there was high mortality in areas supplied with water from broad street pump made him suspect the water was contaminated therefore, he convinced the vestrymen of the parish to **remove the pump handle to stop its usage and with time the cases of death due to Cholera reduced.**

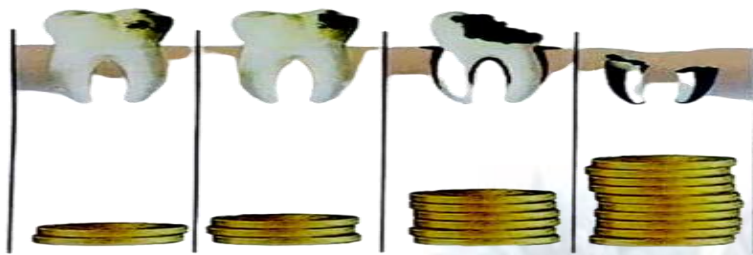
His clinical finding were crucial in discovering of the causative agent of the disease (**Enterotoxigenic Vibrio cholerae**) 30 years later by Koch.

Article by;
Viviane Kadzo Wanje.

COMPARATIVE ANALYSIS THE SIMILARITIES

1. Both Snow and McKay were scientist and research enthusiasts. And their respective study contributed largely in identifying the specific disease causing agent of the various diseases
2. They both suspected that the causative agent of the disease was linked with water, though they failed to specifically identify them.
3. They both attempted to find out the causative agent of the diseases without any success.
4. They both proposed people to stop using water from suspected water pump as intervention measure though they did not know the exact causative agent.
5. The intervention measures proposed by both parties largely contributed in reducing the disease incidence and mortality.
6. Other people build on their research and were able to identify the specific disease causative agent. Koch for Cholera and Churchill for Dental fluorosis.
7. The answers to their research were known after 30 years

Analyzed by;
Masphine Juma




**DENTISTRY
IS NOT
EXPENSIVE,
NEGLECT
IS**



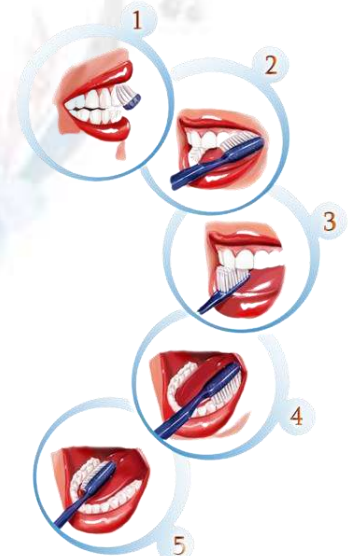
The practice of good oral hygiene seems to be an overlooked concept in most people's day to day life. This has consequently resulted to increased burden of oral diseases in the world with the number of deaths attributed to oral diseases also increasing as each day pass. According to comprehensive report of oral disease burden with data profiles for 194 countries by WHO 2022 almost half of the world's population (45% or 3.5 billion people) suffers from oral diseases with 3 out of the 4 affected people living in low and middle income countries. This is largely contributed by neglect in oral hygiene.

There is ongoing debate on high cost of dental services not just in Kenya but worldwide, (A root canal treatment costs up to Ksh 7,000, teeth whitening up to Ksh 30,000 and artificial oral restoration such as crown, bridge or implant between Ksh 10,000– Ksh 100,000 just to mention a few), “ No! No! the cost is to high” complains a patient. They fail to understand the more damage is caused to the teeth the more expensive it becomes to restore it considering teeth does not have mechanism to repair itself.

A simple tooth cavity diagnosed early can be filled with less than Ksh 3,000 but due to negligence we delay treatment until the pulp is damaged and the pain is unbearable and RCT becomes inevitable forcing us to dig deep into our pocket. shun away scaling to get rid of plague only to cost you a tooth that will call for a denture, crown, bridge or implant to restore your smile and oral function.

Good oral hygiene is necessary to keep the teeth and gum healthy. To maintain good oral hygiene is not rocket science rather call for adopting healthy basic practices which includes;

- ◆ Using the right teeth brushing technique to ensure proper teeth cleansing.
- ◆ Brushing at least twice a day for 2 minutes in the morning and at night.
- ◆ Flossing at least once a day to ensure food particles between the teeth and along gum line which can not be accessed by toothbrush are removed.
- ◆ Visiting a dentist for regular dental check-up, this will allow for early diagnosis of dental condition and prompt action to curb advancement of the disease.
- ◆ Eating healthy diet such as proteins and vegetables and shun away sugary diet.



**Article by;
Elizabeth Nkatha Muchena**



FACTS ABOUT THE TEETH

**Say aaaah...
I did not know that**

Tooth Decay



Dental caries is the 2nd most common disease worldwide.



Tooth enamel is the hardest tissue of your entire body and unlike bone or other tissues it is incapable of self repair

Say Cheese



About 61% of people are attracted to someone just by their smile. That's the power of healthy teeth.

Home sweet home

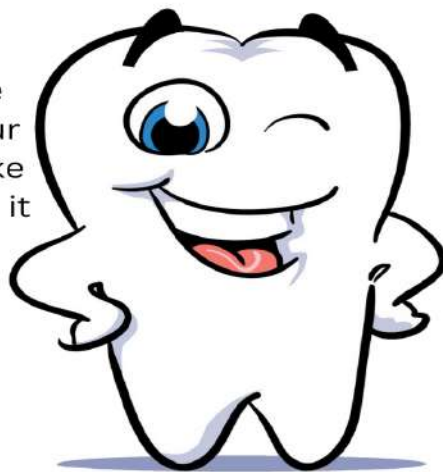


Over 300 types of bacteria call your teeth home

Very early



Teeth started growing 6 weeks intrauterine life



I am Alive



Each tooth is connected to the brain via the trigeminal nerve

Facts by;
Nicholas Deche

How hard?



Brushing too hard can harm your teeth and gum. It can cause damage to tooth enamel and gum recession

Say good+bye



If your teeth get knocked out it will start to die in 15 minutes

Unique Identifiers



Just like the fingerprints tooth prints are unique to each individual

Not necessarily pearly white



Right tooth colour should appear yellowish



SUMMARY OF EVENTS



THE ELEVATED LAUNCH

Before officially commencing operation of the association, a launching ceremony which would officially introduce the association to all dental students was organized.

The Patron Mr Joseph Kangogo was at hand to officially start off the ceremony.

Many dignitaries were in attendance including chief COHO of Kenya, vice Chairperson KDTA, secretary general KDTA, MKUSA secretary general, KePSA vice chairperson.

The key note speakers included Mr James Mwangi, Mr Benard Irungu, Mr Paul Kiilu, Mr Mwangi (Head of Dental Department KNTRH) and all the dignitaries present.

The chief guest was Mr Fredrick Ngeno (Chief COHO of Kenya), who delivered his speech covering various areas stressing on the importance of having an association.

Message of goodwill from the vice-chancellor of the university prof. Deogratius Jaganyi was sent via the official email of the association.

Also on board were the dental students across the board including the weekend students’.

Acknowledging the supremacy of almighty God, a representative from the university Christian union invited to dedicate the association to God before commencing its operation



Receiving consignment

KNOW OUR SPONSOR

The official corporate sponsor of MKUDESА Launch was Coca-Cola company.

To ensure every attendee of the launch quench their thirst and enjoy every bit of the launch, the company provided us with soft drinks and water which were received by the executive Chairperson.

Great thanks to Diana, Grace and Sarah for coordinating the entire process on behalf of Company’s management

It was once said, “ celebrate the people who impact your life and give them flowers when they are still alive”.

For the work well and dedication, our patron could not go unrewarded



Chief Guest with some Executive members



(L) Mr. Kangogo, (M) Mr. Kiilu
(R) Mr. Ngeno.



WORLD ORAL HEALTH DAY



World oral health is celebrated every year on 20th March. The thematic event aims to empower people with knowledge, tools and confidence to secure good oral health.

To mark the 2022 world oral health day the ministry of health (oral health) unit organized an outreach program at Baraka children's home in Kayole Nairobi. Following an invite, MKUDESa sent 10 representatives to join the team from ministry of health.

The chief guest of the event was Madam Mary Nalyenya from the ministry of health.

The main partners of ministry of health was Colget Palmolive company that donated tooth paste and tooth brushes that were given to the children to ensure they maintain good oral hygiene through regular teeth brushing.

The children were also gifted dental floss courtesy of MKUDESa

The main issue addressed was importance of maintaining good oral hygiene and prioritizing the oral health as well as adopting positive oral health seeking behavior.

The children were taught the right teeth brushing technique as well as how to use a dental floss.

The event was themed
"BE PROUD OF YOUR MOUTH".





MENTAL HEALTH AWARENESS CAMPAIGN

Acknowledging the prime role of mental health in general well-being of a person and the challenges that students' face that are triggering factors of mental disorders, MKUDESA organized the awareness campaign during the month of May which marks the world mental health awareness month.

The awareness was carried out in the digital space such as whatsapp groups, Instagram and twitter. Various mental health related infographics were shared.

The campaign was carried out every Friday throughout the month



Mentorship *MKB*

Acknowledging the importance of empowering each other, MKUDESAs executive organized a series of mentorship programme for newly admitted student to the university. So far four mentorship program have been done as listed below.

- * May 2022 intake.
- * September 2022 intake
- * January 2023 intake
- * May 2023 intake

The idea of mentorship hub was founded on the following pillars; career guidance, support, coaching, advice, motivation and engagement



One of the objective of mentorship program was to have an avenue where the students could be enlightened on what dental technology and oral health courses and their scope of practice in the filed of dentistry at large.

This was after noting that many students admitted into the respective courses could not clearly define what the courses involved raising uncertainty and confusion amongst themselves.

This helped to clear any misunderstanding the students might had and ensure their mind is set right before starting their classes.



Apart from career guidance, the students are normally taken through how to create MKU student E-mail, the technical team are always ready to intervene in case where a students have trouble with the process.

The students are also taken through how to register and confirm the units online via students' portal

The students are taken through the objectives of the association and encouraged to register as members. They are also taken through the structure of university examination as well as do's and don'ts during exam period.

The importance of study groups is also emphasized

ANNUAL GENERAL MEETING

The AGM was organized on 15th September 2022 at the Indoor Arena. The main purpose of organizing the AGM was to create an avenue where students and lecturers would have an interactive session of addressing issues of concern affecting the Students. The event was attended by lecturers, executive committee members and the dental students.

The chief guest was the head of department Mr. Lawrence Mbogo who delivered his speech addressing various issues that the department was putting in place to solve the various challenges students were experiencing. These included hiring a specialist in restorative dentistry, setting up of new dental clinic to be used by oral health students for their practical sessions. Various committees including the secretariat, treasury, organizing and media committee submitted their report which were read to the members present.



The chairperson gave a speech on the progress and the long term plan of the association.

The vice-chairperson took the stage thereafter and urged the students to find pride in the association and register themselves as members so that together we can grow the association.



**Mr. Lawrence Mbogo
Head of Department.**

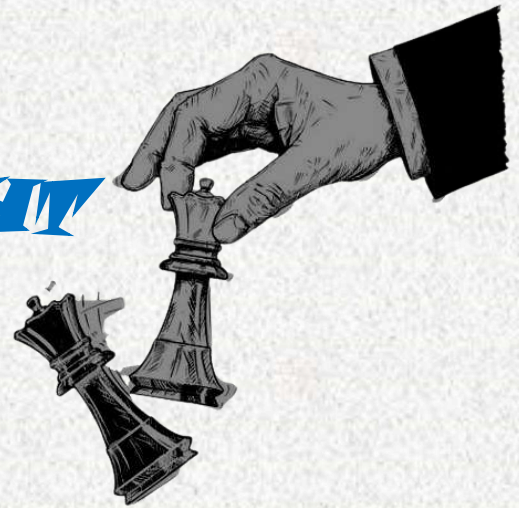


AGM

AGM

GAME

NIGHT



A come together game night was organized on 23rd September 2023

The main purpose of organizing the event was create an avenue where dental students would meet and interact with each other while having fun therefore, enhancing social interaction.

The indoor games that were played encompassed board games such as chess, monopoly, scrabble, snakes and ladder. Other games were card, Jenga and Play station.

“Play is not just about having fun but about taking risk, experimenting and testing boundaries”



ORAL HEALTH AWARENESS CAMPAIGN

THEME: YOUR ORAL HEALTH= YOUR SMILE

Oral hygiene month is marked worldwide every year in the month of October in order to mark the thematic event. The association organized a two weeks oral health awareness campaign that was carried out from 1st to 13th October.

The campaign was carried out in the digital space via various MKUDESA social media platforms which included Instagram, twitter, Facebook and whatsapp groups. Infographics, posters and dental related articles were used to spread the message.

The awareness was founded on three key pillars of community health services which includes prevention of diseases, promotion of oral health and prolongation of life, in order to achieve the three key objectives, various stakeholders which includes individuals, family and community members to be engaged and be part of the entire process

The purpose of the campaign was to create awareness among the three key stakeholders on importance of oral hygiene through adopting simple practices such as tooth brushing, flossing, regular dental check-up, infrequent snacking and seeking early treatment upon diagnosis with any dental condition. This was in line with the mission of the association “ **improving dental services in the society**”.

The various key issues that were addressed included various oral diseases, risk factors, preventive measures and various treatment option available for the oral diseases and dental conditions.

The campaign turned out to be of so much impact due to feedback and intense enquiries done by the public concerning the information on the posters and infographics that were being circulated.





DENTAL CAMP

**“Take charge of
your oral health”**

This was the first dental camp organized by the association, the camp was held on 14th October 2023 to climax the oral health awareness campaign that ended on 13th October. The event took place at chancellors towers ground within the university vicinity. The event was themed **“Take charge of your oral health”**

The purpose of organizing the dental camp was to impart the MKU fraternity (students, teaching and non-teaching staff) with knowledge concerning oral health. Some of the activities that were undertaken included free dental check-up, free consultation and basic dental procedures such as extraction.

People who required advanced procedures such as root canal treatment, filling, masking, scaling etc. that could not be performed at the camp was referred to Sunset dental clinic. In order to realize full objective and sole purpose of the dental camp, the association partnered with Sunset dental clinic.

The post camp analysis that was done showed that many people who were screened presented with the following dental problem: exposed dentine due to erosion of the enamel, carious teeth, plaque, mild and severe fluorosis, impacted 3rd molar, pericoronitis, inflamed gums and teeth malocclusion.

The executive committee did not leave the work unfinished because our aim was not just to diagnose the problem but to help find solve the problem, therefore the association entered

into an agreement with sunset dental clinic to reduce the cost of all advanced procedures for the referred patient by a half for the next 2 weeks after the dental camp.



Mr Thomas (sunset dental clinic) with some dental students’

INSIGHT FROM ONE OF THE BENEFICIARIES.

“ my anterior teeth had severe fluorosis and therefore upon check-up masking was recommended for my case alongside full mouth scaling.

In total I was supposed to pay Ksh 8500 to facilitate my treatment, but due to the partnership of MKUDESA and sunset dental clinic I only paid Ksh 4500 for all the services.

Am happy I was among the beneficiary of this noble partnership that sought to help people in the society affordably access dental services”

Jackson– MKU student.



COMMUNITY DENTAL CAMP



The dental camp took place on 17th March 2023 at MKU chancellors towers ground. The association partnered with Equity Afia Medical center (Makongeni Branch).

The event was themed “**A healthy mouth, a healthy body**”. This theme emphasized on how the mouth is directly connected to the rest of the body and therefore negligence of oral hygiene practices can consequently have adverse negative effects on the rest of the body system.

Being a community dental camp, it was open to students, staffs and people from the community who were allowed to access the university.

The various services provided included free dental check-up, consultation and oral health education.

All the people who were referred for the advanced procedures were given vouchers with discounted prices The following were some of the critical observations that were made during the camp;

- ◆ Many of the people are suffering from at least one dental condition with the common one being dental caries.
- ◆ Many people in the community has inadequate knowledge about dental condition and general oral health.
- ◆ Many people procrastinates from seeking dental services because of fear they may be diagnosed with a disease and they lack money to finance the treatment immediately.
- ◆ Myth that once someone has been screened and diagnosed with a disease(know their oral health status), they will start ailing due to stress and anxiety if they are unable to seek medical attention immediately.

N/B they believe what you don't know about cannot harm you.

- ◆ Many dental student’s shy away from seeking dental services with the believe that they can do self diagnosis This was clearly indicated where only 12 dental students came for check-up out of the 140 people.

The following recommendations were suggested;

- * Students and staff should visit the dentist regularly for dental check-ups (at least twice in a year).
- * Students and staff should embrace high level of oral hygiene. (brushing teeth at least twice a day)
- * Oral health awareness campaign program should be rolled out in all social media platforms.
- * Use of correct tooth brush and tooth paste. (adopt right tooth brushing technique)
- * Eating healthy diet and intakes of vitamins.



DENTAL CONTEST

This was the first ever dental research competition to be held in the university. The event was themed “A generation of researchers, critical thinkers and innovators”

“A GENERATION OF RESEARCHERS CRITICAL THINKERS AND INNOVATORS”

The main purpose of the dental contest was to ignite the spirit of research and critical thinking among dental students due to acknowledgement of the prime role of research in coming up with solution to various health problems. In addition research also helps to broaden the knowledge of an individual due to discovery of new helpful information that would add to their knowledge of dentistry

The competition was carried out in two rounds as indicated below;

Level one-A research topics (based on each level of study) were given to all the interested participants from both oral health and dental technology and were given a period of one week to do research and thereafter present their written findings for evaluation by the lecturers. 12 students qualified for the 2nd round of the competition.

Level two- This was the 2nd and final round of the competition which was held physically on 27th February 2023 where all the participant did an oral presentation of their research finding. The audience were given opportunity to cross examine the contestants before determination of winners by the judges.

The winners in each category (1st, 2nd & 3rd year) were awarded.

All the 12 participants who made it to the final round were awarded with certificates of participation.



Starich Maundala
Winner-1st year category

“It was super exciting to take part in the contest, the competition was good, I learnt a lot and am looking forward to the next one”



Micah Otieno
Winner-2nd year category

“I felt really good having emerged the winner (the award was recognition of my efforts), the competition was a tough one, my opponents staged a tight contest and it was worth it.”



John Gichoki
Winner-3rd year category

“I was very honored to have participated and won, this forum offered an extensive out of class learning opportunity and in depth skill and motivation for future researchers. See you at the next !”.

FINAL ROUND PARTICIPANT'S AND THE JUDGES



MKUDESA OUTREACH

“Sharing a heart of compassion”

This activity was organized to celebrate the world oral health day which is marked on 20th March every year, The event took place at Otto Hoffman children’s home which houses 70 children. The aim of the organizing the outreach was to give back to the community as well promote oral health awareness amongst the students.

The event was themed “ **sharing a heart of compassion**”, our desire was to put a smile on the face of the children’s through interacting with them on various aspect.

It was extremely heartwarming when the dental students’ took ownership of the initiative and provided their support in terms of money, clothing, foot ware and other accessories. 45 members of the association went to the place to represent the larger dental fraternity.

The money that was collected from the students, lecturers and MKUDESA associates were used to purchase food stuff, non-food stuff and other personal effects. Some cash was handed to the their coordinator to assist in

purchasing any other thing the children might be in need of.

The children were take through the right teeth brushing technique which was demonstrated to them by Ann Makena, this would help them in ensuring they take good care of their oral health. Other activities undertake included outdoor games such as foot ball, team building activities and helping them with splitting their cooking logs.





Due to copyright issues, the photos that captured the children during the event could not be added to the gallery of this magazine.

QUICK FIRE SESSION WITH OUR LECTURER



ACADEMIC ACHIEVEMENTS.

MTech Dental Technology (DUT, South Africa)
BSc. In Dental Technology (DUT, South Africa).
Dip Dental Technology (C.H.P , Kenya)
Cert. Dental Technology (city & Guilds of London)

TELL US ABOUT YOURSELF (name, profession, hobby etc.)

My name is Paul Kiilu, a senior Dental Technologist by profession and a lecturer, married to one wife and a father of two children.
I like travelling and farming

WHAT IS YOUR AREA OF SPECIALIZATION AND WHY DID YOU CHOOSE IT.

Dental material science is my area of specialization. It is very interesting to study material science
This is where I did my masters research.

HOW WAS YOUR UNDERGRADUATE EXPERIENCE.

I did my undergraduate in South Africa, it was a good experience though intimidating being a foreign local.

WHAT WAS YOUR CHILDHOOD DREAM CAREER.

To be a medical doctor or a dental Surgeon.

TELL US ABOUT YOUR BEST AND WORST EXPERIENCE EITHER WORKING IN HOSPITAL.

Best experience is when I was working as a young man in public hospitals.
My worst experience was when I had to upgrade my studies and raising a young family at the same time.

DO YOU THINK DENTISTRY PLAYS A KEY ROLE IN PROMOTING GENERAL BODY HEALTH.

YES, dentistry plays very important role because when your oral health is poor your health is affected . Studies have shown correlation on the two.

WHERE DO YOU SEE DENTISTRY IN THE NEXT TEN YEARS.

I foresee technology being the driver of dentistry and this has started to be witnessed now.

FINAL REMARKS.

Dentistry is a lucrative career when well practiced . People are not serious with oral health and in the coming years there will be a lot of work.



**DENTAL
STUDENTS'
CORNER**

CAN A DENTIST SING



Hello, I'm Joel an International student from Nigeria, currently a Final year student pursuing a Bachelor's degree in Oral Health. I am a talented Oral Health Professional with a remarkable talent for music, that has been a defining aspect of my life. Born with a natural gift for both healing smiles and creating melodies.

From a young age, I displayed an innate passion for music, picking up various instruments and exploring different genres. My musical journey began during my childhood with piano lessons at the age of 8 and later singing in the local church choir. I would find myself composing original song that resonated with audiences and showcased my songwriting skills. So far my musical journey has been marked by a relentless pursuit of excellence.

One of the most remarkable highlights in my life was his appearance on **"MKU Got Talent."** season 1 this year. My audition was a memorable moment as I melted the hearts of both the judges and the audience with a breathtaking musical performance. Throughout the competition, I continued to captivate viewers with my unique blend of musical talent and charisma.

My journey on the show inspired aspiring musicians and showcased his versatility as an artist. I believe my story is a testament of unwavering commitment to both music and dentistry and I have always strived to be dedicated and consistent in propelling my passion in both fields.

My ability to excel in multiple domains reflects my dedication and passion for my chosen paths. Whether I am crafting beautiful melodies, caring for patients' oral health, keeping fit at the gym or spending time with friends, my talent continue to shine, making me a truly remarkable unique dental professional. On another note I think music has been the best mechanism that has helped me to cope with pressure that comes with being in medical school.

My story is a testament to the power of combining passion and profession and one that is propelled by dedication, determination. I would urge anyone who feels they are talented not to shy away from exploring their respective talent rather they should nurture them and they should not limit themselves to their future career linked to the course they are pursuing.





THE BEAUTY OF DENTISTRY

**BY MICAH OTIENO (The poet)
“strolling poetic life”**

**Let me sprinkle,
A deep science affection
From our very acquaintance
I've become an obsessed folly
Got myself a new ally
This science that pierces my heart out
Cuts deep through my veins
My joy with ignition, sparks
This science to be my daily grind
I for sure find delight**

**Its uniqueness is blatantly clear
Through its aura of transformation
Which bred my passion
One second, you are toothless
The next you are grinning
And hard meals vigorously grinding
Today there's a cavity
Tomorrow, no evidence
Make an older look younger
Crooked teeth well aligned
From unbearable toothache to comfort**

**It is a science that defines emotions
Whether to laugh
With confidence in your breath
or close mouth
In disguise of unexplainable Odour
Smile to the camera**



TEARS OF THE SOUL

BY DANTE THOMAS.

Pressure, pressure, pressure, pressure on the shoulder,
like a soldier with loads of arsenal bags,
the weight is oppressing me, the struggle in my chest is
sending pain in my lungs and my heart,
I'm being hurt.

I was thinking its gonna be easy but no matter how hard I
try to forget, it isn't easy for me,
This large institution is supposed to tutor me on my career,
but now its teaching me on how to live but ironically I am
not leading the life it wants me to live.

This course I chose, was happy when I clicked the icon
upon registration congratulations you're the chosen,
I chose this path, but everything is getting overwhelming.

No matter how hard I try to read I don't get the concept,
I try to read through minds, through books but everything
remains the same,
I see darkness roaring flaming eyes with sharp horns ready
to strike me down. This darkness,
depression it is?, ready to roll me round and round lie a
ball.

I have no one to talk to but my inner self,
I think I should come to my rescue,
Ooh! Forgot the therapy session,
I only know who I am, Ooh!
It is relatively hard all alone, Ooh! I think I need to see the
therapist to quench all my thirst.

My soul is crying because I am losing myself,
I am losing this inner me,
Suicidal thought! Ooh! No! what a bad thought ,
I think I should let it fade away,
Come to my rescue! Please heaven I need you,
I need your help.

I should stay strong and find a remedy to this,
I should talk to one of my counsellors in town or perhaps in
school,
I will be better.

THE JOURNEY OF RESILIENCE;

From campus dream to uncharted realities

BY; NJOKI CALEB MUNENE

**On December 18th, in 2019's embrace,
A day that shaped my journey's trace.
From high school days, back to study once more,
An eager undergrad, destiny to explore.**

**With excitement and hope, I entered the gate,
Campus life awaited, a clean slate.
Promised freedom, mobiles in hand,
To shape our generation, a noble stand.**

**Far from home, we found our space,
Unaware of the mental race's embrace.
Beautiful peers, the cool kids we thought,
But as we settled, challenges did unfurl.**

**Rent overdue, the landlord's stern decree,
Walking everywhere, no money for fare,
Surviving on empty stomachs, learning to bear.**

**Girlfriends left for wealthier hearts,
Rarely did we smile, shoes tattered and worn,
Missed marks, exams for recovery, frustration's waves,**

**Rented rooms, no ceiling, heat's cruel jest,
Thieves lurking, phones taken away,
No communication, loneliness in sway.**

**Each day chaotic, class after class,
Pressure mounting, late-night study cramming,
Lecturer harassment, a painful disgrace,**

**Away from home, broke and feeling low,
Hopes of distinction slowly faded away,
Attachments hard to find, a dream so far,**

**But we persisted, no other choice,
Dreaming of brighter days, we'd rejoice.**



MY LEADERSHIP JOURNEY



TELL US ABOUT YOURSELF.

Am **Kobero Prisca Modest** international student from Tanzania Pursuing Diploma in Community Oral Health.

I love listening to music, reading books and hanging out with friends. I passionately

dislike arrogance and whenever I get an opportunity to gain more knowledge, I go for it.

WHAT WAS YOUR INITIAL ATTITUDE TOWARDS LEADERSHIP?.

My leadership journey started at tender age when I was in class 2 as a class prefect, at this point I did not know importance of leadership, to me it was more of a favor and entitlement.

TELL US ABOUT THE VARIOUS LEADERSHIP POSITIONS YOU HAVE HELD.

I have gotten the opportunity to serve as a leader in very many places and in different areas from school, church and various working committees; in school I have been privileged to serve as class monitor, school librarian, welfare prefect, class representative in the university and the organizing secretary of MKU Dental Students' Association.

At the church God gave me the opportunity to serve him as a Soprano Voice Representative, Treasurer, and Vice moderator in a sub-committee of the YCS leadership. My greatest achievement was serving as commissioner in the 2023 MKUSA election.

DO YOU THINK LEADERSHIP IS A CALLING FROM GOD.

YES, personally I believe you have to be

chosen by God for any leadership position for you to be successful, personally I have overcome a lot of situation through God's guidance .He has linked me up to mentors, and destiny friends who have been instrumental in my leadership throughout.

BEST EXPERIENCE IN LEADERSHIP.

Seeing the group you are leading doing great and achieving its objective.

Having the opportunity to learn how to be patient, understanding, humble and self conscious which as has really helped me grow at a personal level.

WORST EXPERINCE IN LEADERSHIP.

People shifting all the blame on me when something seems not to be going right even though I gave it your all.

Sometime leadership call one to be selfless and putting others first and at times I forget about myself.

DO YOU EVER REGRET BEING A LEADER.

NO, leadership has shaped me to the right path in terms of time management, conflict resolution etc. what I have passed through am okay with it.

ADVICE TO ONE WHO WANTS TO BE A LEADER.

Believe in yourself, the journey is never easy but its get better each day and its blessing to be a leader

“leadership is a journey not an event”

YOUNGEST DENTAL PROFESSIONALS IN THE FIELD



TELL US ABOUT YOURSELF(name, hobby, course etc.)

My name is Vincent Thurania a recent graduate with Bachelors degree in Dental Technology. I'm Kenyan by birth from a small village in Meru county. I am goal

oriented, community outreach ambassador, Humanitarian, problem solve and a passionate soul. I love traveling and exploring. I enjoy providing services though community outreach activities. I love Reading inspiration books

HOW DO YOU FEEL THAT YOU ARE DONE WITH YOUR UNDEGRUATE LEVEL OF STUDIES.

It feels fantastic to have been crowned with the first degree, am looking towards having much more academic achievements. I would describe my academic journey in three words **“God . Goal, Consistency”**

WHAT AREA OF SPECIALIZATION WOULD PREFER IN DENTISTRY AND WHY.

Let's say Cosmetic dentistry, yeah, I am so passionate about this specialization and I feel it is under exploited in Kenya . Probably I will be the pioneer dental Technologist in that field.

HOW WOULD YOU DESCRIBE YOUR UNDERGRUATE EXPERIENCE

It was nice especially getting the opportunity to engage myself in many activities such as community outreach, mentorship program, medical camps and inter-university first aid competition apart from my studies and I believe all this transformed me to be a better person.

On challenges I would say the course was so demanding and I had challenges balancing my classes and my leadership roles as a Class

Representative, Red cross president, Head of Student Committee MKUHSA. Initially it was not an easy path for me but with time I was able to adapt and brought remarkable results in all.

WHAT DID YOU DO TO ENSURE YOU GRADUATE WITHIN THE STIPULATED TIME.

I would say proper time management. Doing the right thing at the right time.

WHAT WAS YOUR DREAM CAREER.

A lawyer. Hahaha. A career I haven't given up on yet, probably I will be the next medical lawyer

WHERE DO YOU SEE YOURSELF IN 10 YEARS

Ten years is way to long. Am just 23 now,...at 33? I don't really know where I will be but I know am on the right way and I will always strive to go an extra mile because I know it's never crowded there .

My Fellow Dental Technologist I would urge you all to pursue the course passionately, opportunities are out there waiting for you. Manage your time well, network with the right

ONE WORD FOR CONTINUING STUDENTS'

people and try to learn something new every day. Probably I would propose a book to you.

HOW to Win Friends and Influence People by Dale Carnegie. It changed my life it can change yours too.



TELL US ABOUT YOURSELF (name, course, hobby etc.)
Am Macline Akoth, a religious nun, Oral health Officer .My hobbies are reading motivational books and singing

HOW DO YOU FEEL THAT YOU ARE DONE WITH YOUR UNDERGRADUATE LEVEL OF STUDIES.

I have feelings of excitement and anticipation for I know I have achieved my heart's desire.

WHAT AREA OF SPECIALIZATION WOULD YOU PREFER IN DENTISTRY AND WHY.

Community dentistry. This is because I have always been passionate about community dentistry because it's all about participating in community oral health care to the general population.

HOW WOULD DESCRIBE YOUR UNDERGRADUATE EXPERIENCE (Best and worst).

I really enjoyed my studies at campus, the learning environment was comfortably good, I felt respected and going through the practical sessions was my best moments.

But my worst experience was during the COVID-19 pandemic when we had University closure and I was forced to do virtual learning which was not effective on my side.

WHAT DID YOU DO TO ENSURE YOU GRADUATE WITHIN THE STIPULATED TIME.

I was very committed, hardworking and faithfully attending all my lectures and had personal study schedules and practical sessions which helped a lot with the stipulated four years course duration

WHAT WAS YOUR CHILDHOOD DREAM CAREER AND DO YOU THINK YOU HAVE LIVED UP TO IT.

I've always aspire of becoming a medical professional. I feel I have lived up to my dreams because dentistry is my passion.

WHERE DO YOU SEE YOURSELF 10 YEARS FROM NOW.

I see myself as a model to many, continue working hard to achieve my goals and providing services to the community at large.



TELL US ABOUT YOURSELF (name, course, hobby etc.)

I'm Concepta Nyangasi, an oral health officer. I like reading.

HOW DO YOU FEEL THAT YOU ARE DONE WITH YOUR UNDERGRADUATE LEVEL OF

STUDIES

I feel like I've achieved one desire of my heart

WHAT AREA OF SPECIALIZATION WOULD YOU PREFER IN DENTISTRY AND WHY.

I would prefer prosthetics because it's all about restoring the smile.

HOW WOULD DESCRIBE YOUR UNDERGRADUATE EXPERIENCE (Best and worst).

Best part of it was going through the practical sessions I enjoyed doing that a lot. But my worst part was when some units would not be on offer for a long duration due to lack of lecturers .

WHAT DID YOU DO TO ENSURE YOU GRADUATE WITHIN THE STIPULATED TIME.

I was faithful in attending all my lectures and had personal study schedules and practical sessions which helped a lot with the stipulated course duration.

WHAT WAS YOUR CHILDHOOD DREAM CAREER

I've always dreamed of being a Doctor because I love serving humanity.

WHERE DO YOU SEE YOURSELF 10 YEARS FROM NOW.

I see myself as a worldwide bright smile ambassador having achieved greater heights academically.

ALUMNI MKU UNLOCKED HIS INFINITE POSSIBILITIES

“Redefining the field of Dentistry through dentist-patient engagement”



Chrispine Mutune Wanjiku
Oral Health Officer

Asking questions during your appointments help you stay in control of your oral health. It’s important to know what you’re up against, so you can be prepared to diagnose any problems early before they escalate into serious health-threatening issues. If you’re not sure where to start or what to ask, this article will help! I have compiled a list of all the best questions I am regularly asked and hears though the list is endless.

Dental visits will be a great opportunity to air all your concerns about your oral health and the dentist has valuable advice to offer, So make sure you’re maximizing your time in the dentist’s chair by asking lots of questions

What Does This Pain, Sensation, or Discoloration Mean? Don’t make the mistake of dismissing warning signs. Bring dental issues up with your dentist so you can outline a treatment plan.

How is My Overall Dental Health? It’s your dentist’s responsibility to accurately explain any severe dental issues. Asking your dentist to give you a summary of your overall dental health will help you better manage your day-to-day dental care.

What Type of Toothbrush and Toothpaste Should I be using? It may seem like a small thing, but the dental tools you use on a daily basis can have a big effect on your dental health. For instance, even though hard bristled toothbrushes are effective at removing plaque and stains, they can damage your teeth and gums. With so many kinds of toothbrushes available today (electric, hard and soft bristles etc.) it’s best to get a recommendation from your dentist for what’s right for you.

What Foods Are Bad for My Teeth? The saying “you are what you eat” rings true when it comes to your dental health! Certain foods can cause big problems for your mouth, so make sure you are enlightened about them to minimize your risk.

What’s the Best Way to Whiten My Teeth? Your dentist can provide information about how to whiten your teeth and outline the best teeth treatment options, Over-the-counter teeth whitening kits can cause harm, so make sure discuss the issue with the dentist first.

Parting shot

As a dental practitioners, I offer world-class dental care. I always accept new patients and create adequate time during their visit for questions. their dental health goals is my priority and I want to make sure they leave the office with the answers and information they need to maintain their beautiful smile. Am very grateful to MKU for molding me to a professional that put my patient’s concerns first before the actual treatment.

BSc. In Oral Health
Mount Kenya University

leadership management and governance
for health systems strengthening course
(I.M.H.S.S.C)

AMREF International university

WHERE DENTAL STUDENTS' UNLOCK THEIR INFINITE POSSIBILITIES

MKU has set up a state of art dental facility to facilitate effective and adequate training of dental students

PICTURES SPEAK LOUDER







The Founding Executive Committee

Mission:

To improve dental services in the society

Vision:

Enhance professional network among dental students

