

MDA Bulletin

Fall 2025 Volume 45, Issue 3 ISSN 0707-1717



Alumna of Distinction 2025

Dr. Pat Kmet

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Dental
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ON THE COVER:

Dr. Pat Kmet

Alumna of Distinction 2025
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Greg Guenther at: gguenther@manitobadentist.ca

Nov. 15, 2025	Dr. Hoda Hosseini	Beyond Extraction: Practical Ridge Preservation for Everyday Dentist
January 2026 Date TBC	Dr. Zara Gangji	ZOOM Lecture: Incorporating implants into private practice
February 2026 Date TBC	Dr. Scott Leckie	ZOOM Lecture: Dental Trauma
Mar. 28, 2026	Dr. Mo Kadhim	From Benign to Malignant: Top 10 Oral Pathology Findings Every Clinician Should Know

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Register at: WinnipegDentalSociety.org



President's Message

Dr. Jeff Hein
President, MDA

Despite our beautiful (albeit smoky) Manitoba summer, the Manitoba Dental Association (MDA) office has been busy over the summer months. I'd like to update you on some of the most recent Association business as well as plans for the upcoming Fall.

In May, the MDA welcomed a new group of Manitoba dentists and hygienists with the graduating classes of 2025. The MDA hosted the annual graduation breakfast on May 15 and the students of the College of Dentistry and School of Dental Hygiene celebrated with their families as they received their degrees, diplomas and awards.

As one group of newly graduated dentists and hygienists leaves the college, another begins their journey. In August, the MDA held a "Welcome to the Profession" dinner at St. Charles Country Club for the incoming dentistry class of 2029. All of the students were filled with excitement, anticipation and maybe just a little trepidation. The MDA wishes to support their journey from outset through convocation and beyond.

Now in its 12th year, the MDA's General Practice Study Club (GPSC) was developed with new graduates' needs in mind. Over these 12 years, the study club has evolved considerably. Sessions follow a format of presentation by a mentor dentist or a hands-on program followed by open questions and discussion. Sessions may be online or in-person, and efforts have been

made to host sessions in both Districts 2 and 3, as well as in Winnipeg improving access to this valuable resource. The GPSC schedule of sessions is packed with valuable material for 2025/2026.

GPSC sessions are open to dentists who have been in practice fewer than five years, and the MDA is always happy to welcome mentor dentists. If you have interest in this, regardless of your age or the stage of your career, please contact the MDA office.

Western MB Dental Society Golf Event & GPSC Fall CE Retreat

Each year in September, the Western Manitoba Dental Society partners with the GPSC for a weekend of social activities, golf, collegiality and CE. This year's Fall Retreat was held at Thunderbird Lodge in beautiful Riding Mountain National Park in Wasagaming, MB. The event was well attended and feedback from attendees was very positive.

UMDAA

The University of Manitoba Dental Alumni Association (UMDAA) hosted the annual Alumni of Distinction Awards Evening on September 19th at the Fort Garry Hotel. This event celebrated the 50th anniversary of the graduating class of 1975, as well as the nomination of a Manitoba dentist by their peers and the awarding of "Alumnus of Distinction". This year, UMDAA and the dentists of Manitoba honoured Dr. Pat Kmet. Well deserved, Dr. Kmet!

Manitoba Dental Foundation

This Autumn, we are also looking forward to another fabulous event, "The Smile Gala", to support the Manitoba Dental Foundation (MDF). Please consider joining us in celebrating the 10th Anniversary of the MDF on Saturday, November 1st, 2025 at the RBC Convention Centre. This worthy cause needs our support – let's help show our spirit of giving and demonstrate the true generosity Manitobans have come to be known for. The evening will feature the entertainment of internationally renowned Manitoban singer, songwriter, composer and pianist Chantal Kreviazuk. I hope to see you there!

On the regulatory side...

EIA contract update

On May 16, members of the MDA Executive Committee met again with representatives from the Provincial Government regarding the ongoing negotiation of a new Employment and Income Assistance (EIA) contract with the Province. The MDA had submitted a comprehensive proposal to the government for consideration, and had suggested an interim contract be agreed upon pending the review and acceptance of a longer-term agreement. The province, disappointingly, is unwilling to commit to an interim agreement in the middle of a budget year, so no deal is forthcoming in 2025.

We remain hopeful that an enhanced agreement will be reached for Spring 2026. Work on this file continues.

Bylaws

The MDA continues to work on the modernization of its Bylaws to meet current regulatory practices. Once a revision to an existing Bylaw (or an entirely new Bylaw) has been drafted, there is a thorough review process that involves the MDA Executive Members and, in some cases, independent reviewers or dedicated MDA Committees. Before approval by the MDA Board of Directors, a new (or amended) Bylaw Draft is sent out to the membership for review before final ratification.

On August 1st, the "Bylaw for Delegation of Duties to Non-Regulated Personnel" came into effect. This Bylaw outlines duties that can be delegated to office-trained dental auxiliaries and dental therapists.

There are other Bylaws currently under review and, from time to time, you will

receive a 'Draft Bylaw' for your review. Please take the time to read through it as Bylaw changes may affect day-to-day standards of practice. Your feedback is valuable in helping shape MDA Bylaws.

Canadian Dental Care Plan

All Canadians who meet the eligibility criteria, including all working age Canadians, are now able to apply for the Canadian Dental Care Plan (CDCP) coverage. The plan, designed and funded to meet the basic dental care needs of up to 9 million Canadians, will soon be in full swing. As with any dental plan, not all eligible users will utilize those services. However, concerns remain about several aspects of the plan. Some of the key advocacy points the Canadian Dental Association and the Provincial/Territorial Dental Associations (PTDAs) are pursuing include;

- Plan sustainability (long term funding)
- Deterioration/loss of private, employer sponsored dental insurance plans

- Ability of existing dental clinics to absorb the extra demand created by the CDCP (especially given human resource shortages)
- The high rejection rate of certain pre-authorized dental treatments
- The unintended effect the CDCP has had on decreasing the supply of patients for Canadian dental schools resulting in limited clinical experience for students

Both the CDA and PTDAs continue to advocate government officials to address these serious concerns, among others.

With autumn officially here, take a moment to be thankful for the many blessings our wonderful profession affords us. Finally, please reach out to me any time at my personal and confidential email president@manitobadentist.ca.

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Periodontics



Bethany Valachi
Ergonomics



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MDAA President's Report

Heather Brownlee
President, RDA MDAA

D

ear RDAs,

As the crisp days of fall begin to settle in, I hope each of you had a wonderful and restful summer. It seems the season flew by — where did the time go?

As we embrace the beauty of autumn and watch the leaves change, the Manitoba Dental Assistants Association (MDAA) has been busy preparing for our annual Fall Continuing Education event and gathering data for our wage survey. We sincerely thank everyone who took the time to participate. We anticipate that the compiled results will be available on our website by the end of November. It is our goal to update this information

annually to ensure it remains as current and relevant as possible.

We would also like to remind all RDAs about the **CDSPI Members Assistance Program**, which was launched in late spring and is available to all members of the dental team. Full details on how to access the program can be found on our website. If you are facing challenges, please don't hesitate to reach out — the program is completely confidential, and support is always available.

MDAA remains committed to advocating on your behalf through ongoing discussions with the Manitoba

Dental Association and other key stakeholders in the oral health profession. We are currently addressing several important issues that we feel will impact the future of RDAs in Manitoba and will continue to keep you informed through our e-blasts, social media platforms, and website updates.

As we move into the new season, I wish you all a safe and enjoyable fall. Please feel free to contact our office at any time should you have any questions, concerns, or matters you'd like assistance with.



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Registrar's Message

Practical and Ethical Considerations when Dismissing a Patient from Your Practice

Dr. Arun Misra
Registrar, MDA

As members are aware, the dismissal of a patient from a dental practice remains one of the more challenging and sensitive issues we encounter. Since the publication of the original article in the Spring 2023 Bulletin, the Manitoba Dental Association (MDA) has continued to receive calls from members on this topic, as well as complaints from patients who have been dismissed. This tells us that the matter continues to present real difficulties in practice.

For that reason, I am including the 2023 article again in this Bulletin. The considerations outlined then remain as relevant today as they were two years ago. Dentists must continue to manage patient relationship challenges while ensuring that patient health is not compromised, that continuity of care is respected, and that our collective responsibility to the public is upheld. By revisiting this article, members are encouraged to reflect once again on these principles and to apply them in a way that minimizes conflict, supports professional judgment, and maintains public trust in the profession.

Practical and Ethical Considerations when Dismissing a Patient from Your Practice

As we are all aware, members of the public have the right to choose their healthcare providers. There are also times when dentists may exercise reasonable discretion in selecting patients for their practice. Provided that they are not discriminatory, dentists have the right to refuse to accept individual patients in

non-emergency situations. There are also circumstances when a dentist may choose to dismiss an existing patient. We should always strive to make these decisions in the patient's best interests while being cognizant that such determinations may result in potentially significant conflict. The MDA often receives calls from members about how to dismiss a patient and complaints from patients who are upset that they have been dismissed from an office. By reflecting on the practical and ethical considerations outlined in this article, members will hopefully gain the tools to resolve these situations with minimal conflict.

The breakdown of a dentist-patient relationship could stem from several reasons. Some examples could be issues related to treatment being unsuccessful, a patient's refusal of advised treatment/non-treatment, and financial disputes. Principles of informed consent usually play a role in the above issues. When the dentist-patient relationship comes into conflict due to a breakdown of trust, dismissing a patient may become an option. In a dismissal, the dentist must take the necessary and available steps to ensure that the dismissal does not have a negative impact on the patient's health. If possible, dental procedures should be completed or stabilized before dismissing the patient. Dentists having undertaken a patient's care must not discontinue that care without first having given notice of that intention and endeavouring to assist with ensuring continuity of care with another dentist. The dentist should take all reasonable steps to assist in this continuity of care of the patient, such as providing

recent radiographs, relevant chart notes, and other information that is perceived to be helpful.

Dismissing a patient should be expressed in writing, and there should be a reasonable amount of assurance that the patient has received and understands this communication. In any health-related communication, dentists must keep in mind that they have an ethical obligation to be truthful and forthright. Dentists should also be mindful of the emotional impact a patient is likely to experience with being dismissed and any financial bearing of seeing a new provider. Anticipation of these factors may have implications on the dentist's process of dismissal. It is strongly recommended that members take steps to mitigate these potential issues whenever possible. Despite a breakdown in the relationship, patients still often appreciate receiving the contact information of other dentists who might be better suited to provide their treatment. Throughout this process, it is critical to ensure that you keep detailed, factual records that include notes of all conversations with the patient, representatives and/or recommended providers.

Access to dental care for all Manitobans is crucial. Although not every member of the public will be suitable for your office, dentists need to be mindful that dismissing challenging patients only passes them to another one of your colleagues. Ensuring optimal oral health for all Manitobans is a responsibility shared by all members of the MDA — we must all do our part to protect that privilege and work in the public's best interests.

BEYOND THE PLAQUE: A CLINICAL REVIEW OF ORAL CANDIDIASIS SUBTYPES

Dr. Mohamad Kadhim, BSc, DDS, FRCDC
Oral Medicine & Oral and Maxillofacial Pathology Specialist

Oral candidiasis, most commonly caused by *Candida albicans*, presents with a wide spectrum of clinical manifestations that require careful recognition and accurate diagnosis. While *Candida* is generally a harmless commensal organism within the oral cavity, its transition to a pathogenic state is driven by the interplay of host immune function, local mucosal factors, and inherent fungal virulence. For clinicians, appreciating these variations is crucial in formulating an effective diagnostic approach and selecting appropriate management strategies.

The classic and most common form, pseudomembranous candidiasis, appears as soft, white plaques that can be wiped away to reveal an erythematous base. It is frequently associated with recent antibiotic therapy, corticosteroid use, or systemic immunosuppression. By contrast, erythematous candidiasis presents more subtly, typically as diffuse mucosal redness accompanied by a burning sensation and is often seen in patients with xerostomia or broad-spectrum antibiotic exposure.

Central papillary atrophy (median rhomboid glossitis) is characterized by a well-demarcated erythematous patch at the mid dorsal tongue due to papillary loss, and in some patients may be accompanied by a palatal “kissing lesion” resulting from tongue–palate contact. Denture stomatitis is another highly prevalent form, appearing as erythema localized to the denture-bearing mucosa/gingiva, most commonly seen on the maxilla.

Angular cheilitis, meanwhile, presents at the oral commissures with erythema, fissuring, and golden-yellow crusting. It is frequently associated with over-

closure from ill-fitting prostheses or reduced vertical dimension of occlusion (VDO), and often represents a co-infection with *Staphylococcus aureus* isolated alongside *C. albicans*.



Figure 1: Chronic hyperplastic candidiasis exhibiting a hyperkeratotic white plaque with some areas of erythema at the anterior buccal mucosa (bilateral).

Of particular clinical concern is chronic hyperplastic candidiasis, typically presenting as a persistent, non-removable white plaque on the anterior buccal mucosa (commissure), sometimes exhibiting a speckled pattern. Unlike other forms, this entity carries significant diagnostic weight because of its established association with epithelial dysplasia and potential malignant transformation. In all suspected cases, a biopsy is essential to confirm the presence of candidal hyphae within hyperkeratotic epithelium and, crucially, to exclude dysplasia (pre-cancer).

Oral candidiasis encompasses diverse clinical subtypes, each with unique diagnostic and management considerations. Early recognition and appropriate intervention are essential not only for symptom relief but also for reducing the risk of pre-malignant progression in high-risk variants.

Clinical Pearls

- Diagnosis is primarily clinical, but confirmed by smear or biopsy sample
- Lesions that fail to resolve with antifungal therapy, warrant biopsy to establish a definitive diagnosis and rule out epithelial dysplasia or neoplasia.
- Patients with recurrent or recalcitrant cases should be worked-up thoroughly for underlying local or systemic predisposing factors, such as immunodeficiency, endocrine disorders, nutritional deficiencies, or xerostomia, etc.



CDA Report

Dr. Marc Mollot
CDA Board Representative

Hello all. Fall is a special time in our province as the leaves turn revealing all their warm rich colours. Harvests are coming in while sweaters are coming out! How lucky are we to have four distinct seasons to enjoy.

CDA 2025 Environmental Scan Available to all MDA members

The Canadian Dental Association (CDA) is pleased to provide a copy of our 2025 Environmental Scan Update as a resource that provincial/territorial dental associations (PTDAs) can use for organizational planning and for dentists to help navigate the healthcare landscape. The information found in this invaluable report aims to give wide-ranging insights into the challenges and opportunities faced by our profession.

The Environmental Scan is viewed through three lenses:

- The external environment where political, economic, social and technological (PEST) dimensions are considered, particularly factors that could relate to and impact dentistry and demand for oral health care.
- The health environment where pertinent information, trends and factors are explored from both the provider and patient perspectives.
- The dentistry environment where data and trends across the dental spectrum are examined including demographics, practice settings, economics, education, workforce, oral health status, regulation and models of care.

CDA recently prepared an op-ed as part of our ongoing advocacy on the Canadian Dental Care Plan. Penned by Bruce as the

author, we are pleased to share that it was published on August 22nd on National Newswatch, “A patient-first dental program still needs work”.



The piece highlights our core priorities, including:

- preauthorization challenges
- risk of de-insurance
- workforce capacity
- supporting dental school



The op-ed builds on the same themes and tone that we conveyed through CDA's July press release on the CDCP.

Welcome to the Profession

I recently had the distinct privilege to be invited again to attend the “Welcome to the Profession” dinner. The formal event is held every year in August to celebrate the incoming class of dental students to the University of Manitoba (U of M) Dr. Gerald Niznick College of Dentistry. It is a highlight for me. As much as I like to attend so that I may visit with my old buddies and instructors, it is inspiring to see the new ‘up-and-comers’ in our profession! We are all stewards of our profession, but they will be the ones to proudly ‘carry the torch’ and manage the profession for the future generation. They will pick up where we left off in providing care to Manitobans. Naturally the students are both excited and nervous; they are living the emotions of being welcomed with open arms while feeling the understandable ‘butterflies’ for what is to come.

The event puts on full display the caring and generous nature of dentists. Dentists from throughout our province volunteer their time and energy and commit to provide a safe place for mentorship of students throughout their four years of study. Through this program, the students experience our community and how well we interact with each other. They witness first-hand the pride we take in providing our best in-patient care.

Finally, the Mentorship Program is foundational to the maintenance of a strong and collegial dental community. Our program is recognized as one of the best programs in the country. It is a true partnership between the MDA and the U of M College, including participation and sponsorship from critical stakeholders in ScotiaBank, CDSPI and the University of Manitoba Dental Alumni Association.

CDA/NLDA Joint Convention 2025

I had the pleasure of attending the Newfoundland and Labrador Dental Association (NLDA) joint convention in St. John's on August 27-30. The convention and trade show was extremely well organized and was a tremendous success. The city of St. John's, with its unique history and architecture, offered the perfect backdrop for the event. Many Manitoba dentists made the trip and all had rave reviews. Although the CE was wonderful, highlights included hiking Signal Hill, being Screeched in, and meeting Alan Doyle and Kendel Carson before their private concert to close out the convention!

During the visit, the International College of Dentists and the Pierre Fauchard Academy met, and we had the

CDA Meetings/Joint Conventions

- 2026 Joint Convention with the Manitoba Dental Association
Prairie Lights Dental Convention
April 17-18, 2026 • Winnipeg, MB
- 2027 Joint Convention with the Ontario Dental Association
Annual Spring Meeting
May 10-15, 2027 • Toronto, ON.
CDA will be celebrating its 125th anniversary.
- 2028 Joint Convention with the Dental Association of Prince Edward Island
August 9-12, 2028 • Charlottetown, PEI



(from left) MDA President Dr. Jeff Hein, Class of 2026 Senior Stick Hashim Abidullah and CDA Board Representative for Manitoba Dr. Marc Mollot during the Welcome to the Profession dinner held at the St. Charles Country Club.

opportunity to recognize two special Manitobans:

- Dr. Deb Saunders (UM class of 1999) received the Pierre Fauchard Award of Merit for her sustained contributions to dentistry. She is the Medical Director of the Department of Dental Oncology at the Health Sciences North, Northeast Regional Cancer Center and the Program Lead at the Northeast Cancer Center. In addition to full time practise, she is an Assistant Professor, Northern Ontario school of Medicine.
- Sophie Chen (UM class of 2026) was selected to participate in the CDA/Dentsply Sirona Student Research Program. The program, where one dental student from each of Canada's 10 dental schools is selected to participate in a national research competition, is intended to support the advancement of dentistry by introducing dental students to research. Managed by CDA and sponsored by Dentsply Sirona Canada, the competition is convened at the CDA's annual national convention.

In addition, participating dental students are invited to attend the annual Pierre Fauchard Academy luncheon, where each receives a \$1,000 scholarship. The academy has long

played a vital role in supporting this program through the contributions of the Pierre Fauchard Academy Oral Health Foundation.

About the Canadian Dental Association

The Canadian Dental Association (CDA) is a trusted national voice for dentists and leader working to improve the oral health of all people living in Canada. We promote oral health, support our members, and advance the dental profession. Founded in 1902, CDA has no regulatory role and is a federally incorporated not-for-profit organization whose corporate members are Canada's provincial and territorial dental associations (PTDAs).

We represent over 21,000 practising dentists nationwide and are a trusted brand and source of information about oral health and the dental profession on national and international issues.

Because the MDA is a corporate member of the CDA, all MDA members are CDA members. Together, we all benefit from the work of the CDA. Why an Association? In addition to the many products, services, and practice supports offered by the CDA, the simpler answer is, 'We are always better together than alone.' I have observed that in Manitoba we understand this very well.

If you have any questions related to the CDA, or just want to chat, please feel to reach out to me anytime.

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Winnipeg Endodontic Study Group 2025-2026



We are excited to announce the 2025-2026 Winnipeg Endodontic Study Group sessions. As you know, the purpose of this group is to improve the level of awareness and endodontic care within our practices and community.

Our intention as educators and clinicians is to gather a group of general practitioners and specialists with whom we have professional relationships, and who already diagnose and treat endodontic cases within their practices.

The Endodontic Study Group provides a vehicle for like-minded dentists to share and exchange information. Looking forward to seeing you soon!



Cheers,
Dr. Rodrigo Sanches Cunha DDS MSc PhD FRCD (C) FICD
Dr. Simona Pesun BSc DMD MSc FRCD (C) Dipl ABE

Dr. Jeffrey Bassey	Dr. Ana Schettini
Dr. Mo Kadhim	Dr. Mario Zuolo
Dr. Juliano Offerni MD RCPC	Dr. John Tsourounakis



October 24, 2025 | Friday | 9 am - 4 pm
October 25, 2025 | Saturday | 9 am - 12 pm

HANDS-ON: Shaping using the new RECIPROC Blue files, disinfection and packing the root canal system

Speakers: Dr. Rodrigo Sanches Cunha & Dr. Simona Pesun

LIVE DEMONSTRATION: Endodontic treatment in a maxillary molar: From diagnosis to the final restoration

Speakers: Dr. Rodrigo Sanches Cunha & Dr. Simona Pesun

Location: Prairie Endodontics
271 Madison St. Winnipeg, MB, R3J 1H6

Fee: \$1,600.00 (10 CE credits) - **12 spots available**

Subject code: 070 **Verification code:** Oct2425

Light breakfast and lunch in the office, and Happy hour at One Great City Brewery is included on October 24th

November 25, 2025 | Tuesday | 6 pm - 9 pm

Post Endodontic Pain

Speakers: Dr. Mo Kadhim & Dr. Simona Pesun

Location: Canadian Museum for Human Rights
85 Israel Asper Way (Group Entrance)
Winnipeg, MB R3C 0L5

Fee: \$220.00 (3 CE credits)

Subject code: 070 **Verification code:** Nov25

Three-course meal is included.



December 13, 2025 | Saturday | 9 am - 12 pm

LIVE DEMONSTRATION: Endodontic treatment in a maxillary molar: From diagnosis to the final restoration

Speakers: Dr. Rodrigo Sanches Cunha & Dr. Simona Pesun

Location: Prairie Endodontics
271 Madison St. Winnipeg, MB, R3J 1H6

Fee: \$500.00 (3 CE credits)

Subject code: 070 **Verification code:** Dec13

January 20, 2026 | Tuesday | 6 pm - 9 pm

Inter-relationship Endodontics and Restorative Dentistry

Speakers: Dr. Ana Schettini & Dr. Rodrigo Sanches Cunha

Location: Canadian Museum for Human Rights
85 Israel Asper Way (Group Entrance)
Winnipeg, MB R3C 0L5

Fee: \$220.00 (3 CE credits)

Subject code: 070 **Verification code:** Jan20

Three-course meal is included.

February 12, 2026 | Thursday | 6 pm - 9 pm

LIVE DEMONSTRATION: Endodontic treatment in a maxillary molar: From diagnosis to the final restoration

Speaker: Dr. Rodrigo Sanches Cunha

Location: Prairie Endodontics
271 Madison St. Winnipeg, MB, R3J 1H6

Fee: \$500.00 (3 CE credits)

Subject code: 070 **Verification code:** Feb12

February 28, 2026 | Saturday | 9 am - 4 pm

**Endodontic without fear:
A simplified approach for general dentists**

Speaker: Dr. Mario Zuolo, Sao Paulo, Brazil 

Location: Canadian Museum for Human Rights
85 Israel Asper Way (Group Entrance)
Winnipeg, MB R3C 0L5

Fee: \$500.00 (6 CE credits)

Subject code: 070 **Verification code:** Feb28

Light breakfast and three-course meal lunch is included.

March 17, 2026 | Tuesday | 6 pm - 9 pm

**How far should I go to save a tooth?
An endo-perio perspective**

Speakers: Dr. John Tsourounakis & Dr. Rodrigo Sanches Cunha

Location: Canadian Museum for Human Rights
85 Israel Asper Way (Group Entrance)
Winnipeg, MB R3C 0L5

Fee: \$220.00 (3 CE credits)

Subject code: 070 **Verification code:** Mar17

Three-course meal is included.

March 27, 2026 | Friday | 9 am - 4 pm

March 28, 2026 | Saturday | 9 am - 12 pm

HANDS-ON: Shaping using the new RECIPROC Blue files, disinfection and packing the root canal system

Speakers: Dr. Rodrigo Sanches Cunha & Dr. Simona Pesun

LIVE DEMONSTRATION: Endodontic treatment in a maxillary molar: From diagnosis to the final restoration

Speakers: Dr. Rodrigo Sanches Cunha & Dr. Simona Pesun

Location: Prairie Endodontics
271 Madison St. Winnipeg, MB, R3J 1H6

Fee: \$1,600.00 (10 CE credits) - **12 spots available**

Subject code: 070 **Verification code:** Mar2728

Light breakfast and lunch in the office, and Happy hour at One Great City Brewery is included on March 27th.

REGISTRATION:



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UMDAA's 2025 Alumna of Distinction Award winner **Dr. Patricia Kmet**



The University of Manitoba Dental Alumni Association announced its 2025 Alumna of Distinction Award winner: Dr. Patricia Kmet.

Dr. Kmet was raised by Ukrainian immigrant parents in Winnipeg's North End. She earned her UM bachelor of science in 1983 and graduated with her DMD from the UM dental school in 1987.

She practised at Regent Avenue Dental for 35 years, from 1989 until her retirement in 2024.

She was a Board Member of the Manitoba Dental Association (MDA) from 2002 to 2009, serving as president in 2008-09. She chaired the MDA Convention from 2014 to 2020.

For 10 years she was a part-time instructor in the restorative and pediatric departments at UM's Dr. Gerald Niznick

College of Dentistry. She also served as a longtime examiner for the National Dental Examining Board of Canada.

Dr. Kmet's honours from the dental community include being inducted into the Pierre Fauchard Academy in 2006 and the International College of Dentists in 2010. She received the MDA President's Award of Merit in 2022.

Recently, she has given back to UM by fundraising for the leading-edge dental clinics planned for the Dr. Gerald and Reesa Niznick Centre, now under construction on the Bannatyne campus.

Outside of dentistry, Dr. Kmet has generously given her time to the Ukrainian community, serving in leadership roles with organizations such as the Kyiv Pavilion at Folklorama and the Holy Family Home personal care home.



Why do our implants and implant restorations fail?

AN OVERVIEW OF TOPICS TO BE DISCUSSED

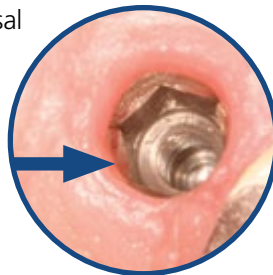
By Dr. Jack Lipkin Bsc. D.M.D. Cert. Pros. F.I.C.D.



Over the next number of articles, I will attempt to establish the case for **making every reasonable effort to restore teeth** as it is not only a function of local factors – but also our long term goal of giving patients a rigid (or extremely stable dentition for the purpose of masticatory efficiency) as they reach their golden years. Implant restorations, crowns and FPD's on natural teeth all have a very good long term success rate, but there are limitations to how long they will last. There is no 'one' treatment plan that will necessarily work for the exact same clinical situation for a 45 year old patient versus a 70 year old patient.



- **PLANNING IS EVERYTHING.** Treatment Planning is not the same as Planning Treatment.
- Bone density varies depending on the location in the mandible or maxilla. D4 bone (posterior maxilla) is amongst the poorest bone substrate within which to place implants.
- Not every 'open space' in a patients' mouth needs or warrants an implant.
- Patients who brux or clench (unchecked) can and will destroy everything in the restored or natural dentition including the implants themselves. Bruxism does not necessarily contraindicate implant treatments, but it **significantly** influences treatment planning.
- It is well established that excess occlusal forces in MIP or lateral excursions will break screws; abutments; or the head of the implant (called flowering of the implant). That being said, it is important to have light occlusal stops (contacts) on all implant restorations, obviously with some exceptions.
- The success rate of root resected molars (Fugazzotto J Perio 2001) is extremely high and is very similar to the success rate of implants in similar molar positions.
- The success rate of endodontic treatments is well established (Friedman et al JOE 2003,2004, 2006, 2008).
- The incidence of peri-implantitis and peri-mucositis varies greatly depending on the definitions used. Some studies report rates of approximately 20% and some as high as 60% (Schwarz J Perio 2018). (Derks. JDen Res 2016). (NIH).



Strong evidence exists that correlates peri-implantitis with chronic periodontitis. (Schwarz J Perio 2018).

- (Kensara ACP 2022, 2023) assessed the microbiological profile of peri-implantitis **within the body of the dental implant** (2022) and **the peri-implant microbiome** (2023). Within the body of an infected implant and in the peri implant sulcus of infected implants, a much higher level of gram negative bacteria was noted compared to the control implants, which had much higher levels of gram positive bacteria.
- Torabinejad's article (JPD October 2007) clearly states that it is impossible to make a direct comparison of success rates between endodontically treated teeth and implants. Long term survival rates for implant retained crowns and root canaled teeth were similar (and superior to FPD's).
- Plaque adheres to implant surfaces and it is extremely important to clean around implants. Hygiene instructions to implant patients should be **case specific**.
- Poor oral hygiene, inability to properly clean implants (both potentially related to poor implant site location and poor prosthesis design) are significant causative factors in peri-mucositis.



2013



2019



2020

DR. JACK LIPKIN has taught at the Dental School, U of M, for 48 years and currently is a clinical instructor and lecturer in the Graduate Prosthodontic program at the University of Manitoba. He also has a full time private practice, limited to Prosthodontics.

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The Mental Health Risks of Dentistry:

Insurance That Gives You Peace of Mind

Dentistry is a deeply rewarding profession, but it's also one of the most mentally and emotionally demanding. A recent study¹ found that nearly half of Canadian dentists surveyed (44%) reported struggling with mental health concerns such as anxiety, depression, and symptoms of Post Traumatic Stress Disorder (PTSD). Gender plays a significant role in shaping these experiences with female dentists reporting higher rates of mental health issues (50% compared to 37% of men), often a result of the stress from juggling professional duties with caregiving responsibilities. Many women pointed to caretaking as a key source of personal strain. Professionally, dentists face a range of pressures. Practice owners report ongoing staffing issues and the stress of running a business, while associates often felt powerless in decision-making and described tension with office leadership. Across the board, dentists reported feeling weighed down by the demands of patient care, and many described a sense of isolation in their day-to-day work.

Mental Health: A Growing Concern in Dentistry

It is recognized that dental professionals experience higher-than-average rates of burnout, substance use, anxiety, and depression. The profession's high demands — from financial pressures and clinical precision to staffing challenges and patient expectations — can accumulate over time, taking a serious toll on mental health.

Mental health struggles can manifest in many ways: fatigue that doesn't go away, loss of motivation, difficulty concentrating, or an increasing sense of dread about going to work. Left unchecked, these symptoms can lead to burnout or serious mental health conditions that require time away from practice.



Mental health struggles can manifest in many ways: fatigue that doesn't go away, loss of motivation, difficulty concentrating, or an increasing sense of dread about going to work.

Members' Assistance Program (MAP): A Lifeline When You Need It Most

Managing stress in dentistry can be isolating but you don't have to face it alone. CDSPI sponsors the Members' Assistance Program (MAP), a confidential support service at no cost for dentists, their immediate families, and practice staff.

MAP offers 24/7 access to professional counselling and a wide range of wellness resources, so help is always available. Whether you're dealing with work-related stress, anxiety, burnout, relationship issues, grief, or simply feeling overwhelmed, MAP connects you with experienced mental health professionals who understand the pressures that come with a high-performance, patient-focused career.

You can choose the manner of support that suits you, including phone consultations, video sessions, live online chats, or in-person appointments. MAP is completely confidential and available at no cost to you or your immediate family members.

Beyond clinical counselling, MAP also offers a range of tools and resources to support you, your family, and your staff:

- Nutrition counselling to support healthy habits and lifestyle changes
- Legal and financial consultations for personal matters
- Self-guided mental health programs for anxiety, stress, sleep, and more
- Stress management tools and interactive self-assessments
- Support with life challenges and transitions, including addiction, parenting, eldercare, and grief
- Health and wellness resources for everyday wellbeing and resilience

Accessing MAP is easy and discreet. Whether you prefer to call, chat online, or

schedule a session later, support is always just a click or call away.

To get started or learn more, visit **CDSPI.com/MAP** or call **1.844.578.4040**.

Proactive Planning: Preparing Before You Need It

Taking care of your mental health doesn't just mean recognizing the signs, it means setting up support systems before you need them. Having the right insurance in place can create space to recover, get help, or make long-term changes without fear of financial collapse.

Knowing that your income is protected, your family is supported, and your business can keep running provides peace of mind that allows you to care for yourself as thoughtfully as you care for your patients.

Here's how some of the products offered through CDSPI can help support you and your practice:

can no longer perform the specific duties of your job—even if you could work in a different job. This distinction is crucial for dentists facing burnout or mental health issues that make it unsafe to continue hands-on patient care.

Office Overhead Expense: Keeping Your Practice Running

If you're the sole practitioner or a key decision-maker in your practice, your temporary absence—even for a few months—can create serious financial and operational strain. Bills keep coming, even when you're not able to see patients.

CDSPI Office Overhead Expense Insurance

helps cover the fixed costs of your practice, such as rent, utilities, staff salaries, and lease payments, while you recover. This means you won't have to deplete personal savings or rush back to work before you're ready. It offers an extra

If you or someone you know is struggling, please don't hesitate to seek support. Help is available through MAP.

Visit **CDSPI.com/MAP** or call **1.844.578.4040**



Disability Insurance: Protecting Your Income When You Can't Work

CDSPI's DisabilityGuard™ Insurance provides monthly income replacement if you're unable to perform your clinical duties due to physical or mental health conditions that meet the policy's definition of disability. This financial support allows you to step away from practice and focus on recovery, without the added pressure of lost income.

CDSPI's DisabilityGuard policy includes **own occupation coverage**, meaning you may receive benefits if you

layer of protection that works together with disability insurance, especially if you are away for an extended time.

Putting Your Well-Being First

Prioritizing your well-being is one of the most important choices you can make for yourself, your family, your practice, and your future. If you or someone you know is struggling, please don't hesitate to seek support.

Help is available through MAP. Visit **CDSPI.com/MAP** or call **1.844.578.4040**.

¹Maragha T, Atanackovic J, Adams T, Brondani M, Bourgeault I. Dentists' Mental Health: Challenges, Supports, and Promising Practices. JDR Clin Trans Res. 2025 Apr;10(2):100-111. doi: 10.1177/23800844241271664. Epub 2024 Sep 20. PMID: 39301941; PMCID: PMC11894879.

DisabilityGuard Insurance and *Office Overhead Expense Insurance* are underwritten by The Manufacturers Life Insurance Company (Manulife), PO Box 670, Stn Waterloo, Waterloo, ON N2J 4B8. A full description of coverage and eligibility, including exclusions, restrictions and limitations can be found in the Certificate Booklet containing the terms and conditions governing each policy.

Owner to Leader



by Jackie Joachim
Chief Operating Officer, ROI Corporation

What makes a practice successful? Is it the patients, the team, the office, or the services?

Well, many would say it is all the above. And while that is true, none of the above can be truly successful without the leadership and vision of the owner.

In an increasingly competitive and complex economy, leading with purpose is a pivotal strategy for practice success. One can never underestimate the importance of leading with purpose as practice owners must effectively implement purpose-driven strategies within their offices.

As the owner of the practice, one's specific leadership or lack of leadership influences culture, team engagement, and overall practice performance. By defining a clear purpose and aligning the practice's strategies with

this purpose, leaders can inspire their teams, foster loyalty, and drive sustainable growth.

As a dentist, when you were in dental school, did you ever think you would be an entrepreneur – the owner of your own business? Even if this were your goal, did you have an idea of what your leadership style would be? Being a leader means one looks at how their practice operates and engages with their stakeholders – the patients and the team. Only the owner, who is also the leader, can and must articulate a clear and compelling purpose which creates a sense of direction and meaning within their clinic. It is so much more than the phone being answered, or the patient being scheduled and treated.

So, let us start with what purpose means. Purpose refers to the reason the dental office exists beyond profit-

making. It must encapsulate the values and beliefs that guide decision-making and actions. Once this is clear, the profit will come. One must understand and believe that as a leader, the owner is key in defining, communicating, and embodying the clinic's purpose. You set the tone for how purpose is integrated into daily operations.

A clear purpose will very possibly result in higher levels of engagement from the team. When members of the team understand and resonate with the clinic's purpose, they are more likely to be motivated and committed to their work. This will further ensure that the culture created will also attract top talent. This higher-level of engagement will most certainly result in an improved patient experience. Patients will experience this exceptional service and increase loyalty to the practice. In challenging economic times, and

increased competition, we must all differentiate ourselves in our respective markets.

Leaders should foster an environment where team members feel comfortable discussing purpose-related topics. Encouraging feedback and ideas can strengthen the connection between the entire team and the clinic's purpose. A good leader must consistently communicate their purpose through various means. This could include internal meetings, team events and patient appreciation events, marketing materials, and charitable opportunities.

It is also important to remember that your efforts must be measured. Establish opportunities for feedback from both patients and team members. Feedback will aid in the identification of those areas that require improvement. Measuring, identifying, and adjusting, will most certainly result in a better

financial performance, team retention, and patient satisfaction. Tracking these metrics can provide insights into the effectiveness of purpose-driven leadership.

can inspire your team, foster loyalty, and create a positive impact in your community.

Leaders can inspire their teams, foster loyalty, and drive sustainable growth.

Initially, moving towards purpose-driven leadership, will be met by some with skepticism about the authenticity of purpose initiatives. As a leader, this is where you must demonstrate genuine commitment to the purpose through actions and strategies. Moving from an owner mindset to a leader mindset takes time. It is a transformative approach that can significantly impact an office's culture, team engagement, and overall success. By defining and embodying a clear purpose, as the leader, you

Jackie Joachim has 30 years of experience in the industry as a former banker and now the Chief Operating Officer of ROI Corporation. Please contact her at email: Jackie.joachim@roicorp.com or cell: 416-500-5708 or

Instagram: [@jackie_joachim_](https://www.instagram.com/jackie_joachim_)

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—Timothy A. Brown, CEO

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(from left) MDA President Dr. Jeff Hein, ScotiaBank Healthcare and Professional Sarah Hyslop, UMDAA President Dr. Nancy Auyeung and CDSPI Investment Planning Advisor - Manitoba Region Michael Tyler

ScotiaBank, UMDAA and CDSPI have supported the Welcome to the Profession Dinner since 2008.



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IDDP Class of 2027



Class of 2029

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Oral Cancer Screening 2025



The Manitoba Dental Association partnered with Never Alone Cancer Foundation during the Oral Cancer Screening held at the Garden City Shopping Centre, October 28.

109 people were screened and 9 were given referrals. Early diagnosis is a key survival factor with oral cancer – when in doubt, get checked out!



Obituaries

DR. WILLIAM ALAN FRANCIS NORGATE

May 20, 1949 - September 5, 2025



The only child of the late Dr. Ian and Susan Norgate. Survived by Gillian, his wife of 53 years, daughter Sally (husband John), son Stephen (wife Yin Yin) and grandchildren Samantha and Logan.

Bill was born in Glasgow, Scotland but lived most of his early life in Liverpool. He was educated at Liverpool College and went on to graduate from Liverpool Dental School in 1972. In the early seventies he and Gill married and immigrated to Winnipeg. He initially worked for the Osborne Dental Group, before opening his practice on St. Mary's Road in 1979. Dr. Jean Bodnar joined him in 1988, and they worked together until his retirement. As well as working in general practice, he became a Certified Dental Consultant through the American Association of Dental Consultants. He was President of the Canadian Association of Dental consultants and worked for various insurance companies in Winnipeg over the years. In 1994, he was made a Fellow of the Academy of Dentists International and in 1975, Bill was made a fellow of the International College of Dentists Canada. He joined the executive of Winnipeg Dental Society in 1999 and served as President in 2004.

Family was paramount to Bill, having grown up in a small family. Bill prioritized spending time with Gill and his kids and enjoyed having everyone together. Whether they were spending time at dinner around the kitchen table, the Canoe Club pool, going on family vacations to Disneyworld and Florida or having movie night each Saturday, he ensured that family was his main priority in life.

Gill met Bill 30,000 feet over the Bay of Biscay flying to Portugal. This fairy tale romance resulted in marriage and they were devoted to one another. They loved their family and had the same values. Bill was Gill's rock and Gill was Bill's rock, especially in difficult times.

Bill was also active in sports and played for the first XV rugby team at the College. From 1986-88 he was President of Squash Manitoba. He has served on the Council of Squash Canada and is both a certified coach and referee in squash. Later golf became the sport of choice playing at Southwood Golf and Country Club for over 30 years, in addition to traveling with friends on their annual golf trip to the U.S. Bill was an avid sportsman and was a season ticket holder for the Bombers for years, attended numerous Jets

games and each Saturday would be watching English Premier League games on TV. Bill passed on his love of sports to his children and supported Stephen's youth hockey teams by being the general manager or club statistician. Bill was consistently in squash clubs supporting and cheering Sally on to become a national champion.

Bill retired in 2014, after working in dentistry for over 40 years, a career which he loved, and then he became a world traveler. He and Gill had many stories and adventures to relate about visiting many countries in Asia, Africa, Europe, North America, South America and Australia. During his free time Bill enjoyed spending time with Gill and their friends, and visiting Sally, Stephen and the Grandkids. Bill was known by his friends for having extensive trivia knowledge and his wonderful dry wit stayed with him even while he was still struggling in hospital.

DR. HAROLD WESLEY TRAFANANKO

September 4, 2025



Harold Wesley, age 80 years, was called home by our Lord on September 4, 2025. Harold was born at Yorkton, SK to parents Nicholas and Helen Trafananko and raised in Wroxtton, SK. After high school, he obtained a Bachelor of Science degree

and then graduated from the Manitoba College of Dentistry in 1971. Harold bought a dental practice in Prince Albert and was possibly the first ethnic Ukrainian dentist in our city. He practised Dentistry over 36 years in Prince Albert and had a satellite practice in La Ronge for over nine years. Harold enjoyed interacting with his patients. He retired in 2007.

Harold met his wife Nadia on a blind date in Winnipeg when

they were both university students. As fate would have it, Nadia had a nursing job commitment in New Brunswick so their courtship and engagement were long distance. In 1972, they married and Nadia joined him in Prince Albert.

Harold had many interests. He was an avid stamp and coin collector. He took courses in carpentry and electrical which he put to good use at home and at the lake cabin. In 1993, Harold and his late friend, Dental Technician George Scheirer, set up a dental clinic in Lviv, Ukraine. It was part of the Gift of Hope project co-ordinated by the Ukrainian Catholic Women's League of Canada.

Harold served on a local school board and as President of the Cabin Owner's Association at Weyakwin Lake, SK. He was an active member at the Holy Trinity Ukrainian Orthodox Church in Prince Albert, having served as parish Vice-President, President and Treasurer. He sang and cantored in the church choir. He carolled with his carolling group in many parishioners' homes at Christmas. He enjoyed making perogies at the parish work bees. Harold was very proud of his Ukrainian roots and loved Ukrainian traditions, especially at Christmas and Easter.

Harold and Nadia travelled in Canada, the United States especially Florida, Bermuda, The Bahamas, Mexico, Hawaii, Ukraine, Great Britain and Ireland. Mostly Harold loved being at our cabin at the lake. There he enjoyed fishing with his family, picking mushrooms and berries and visiting with friends. We owned the cabin for 35 years before we sold it in 2020. Harold loved being with his family. He took interest in our daughters' school activities. One of the girl's project was about birds. Harold called magpies Holstein pigeons and our believing daughter insisted to her teacher that their proper name was Holstein pigeons not magpies. Renaming things with funny names was Harold's typical humour.

Harold began to experience health problems several years ago but was determined to regain his health. He rose above many challenges. He had an optimistic, never give up attitude which served him well. Tragically, Harold suffered a fatal brain injury in a fall. He passed away peacefully the next day at Victoria Hospital with Nadia by his side.

Harold is survived by his loving wife of almost 53 years Nadia, daughters Orysia (Ryan) and Lesya (Chris), his sister Joan and brother Robert (Sandy), their sons Nicholas and Robby and his sister-in-law Janice (Rick). He was predeceased by his parents, his brother-in-law Eric, his brother-in-law Ross and a nephew Brent.

DR. PETER THOMAS RICHARD WILLIAMS

February 6, 1940 - October 17, 2025



At the close of a lovely summer we sadly announce Peter's sudden passing in Dryden, Ontario on Friday October 17, 2025 at the age of 85. He will be sadly missed and lovingly remembered by his wife Peg of 56 years, sons Kerry (Shannon) and Jonathan (Seth), granddaughters Amber, Heather, Megan and Erin. Peter was predeceased by son Jeffrey and daughter Elizabeth.

Peter grew up in the Swansea area of Toronto with wonderful friends and lots of adventures. He graduated from the University of Toronto Dental School and Faculty of Applied Science and School of Engineering where he studied Material Science. In 1970, he began teaching Dental Materials at the University of Manitoba Dental School, where his passion for teaching was matched in equal measure by his penchant for research. Peter was a member of the Canadian delegation of the International Standards Organization Dental Materials and a reviewer for the Journal of the Canadian Dental Association.

Peter enjoyed working with young people including all levels of Scouts Canada and the Klondike Derby for 30 years in Manitoba and 9 years in Ontario. His love of the outdoors included hiking and camping and canoe trips in Algonquin Park, Ontario and cottaging on Eagle Lake.

We would like to thank Dryden Hospital for their care and Machin Paramedics, Dryden Paramedics for their quick response.

KEYNOTE SPEAKERS



STEVEN PAGE

Singer, songwriter
and mental health advocate
— formerly of Barenaked Ladies

Thursday, April 16

Trade Show Reception - 6 pm
Keynote - 7 pm



NIIGAAN SINCLAIR

Award-winning writer,
professor and columnist

Friday, April 17

Trade Show Opens - 7:30 am
Keynote - 8 am

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