

The Facial Surgery Research Foundation

Saving Faces



research today saves faces tomorrow

Saving Faces Research Projects

Saving Faces presents results of research at British Association of Oral and Maxillofacial Surgeons' Annual Scientific Meeting

National Facial Injury Survey

In our last newsletter, we described how Saving Faces worked with Facial Surgeons and Emergency Consultants in 230 hospitals to analyse every facial injury that occurred in the UK in one week in September 2008. We collected comprehensive details on 8,757 people who suffered facial injuries in this week. This suggests that at least half a million people sustain facial injuries every year in the UK. Sadly, over a third of these patients were the victims of assault. The harmful effects of alcohol were very much in evidence. Two thirds of the assaults were associated with alcohol use. Young people aged 16-25 years had the greatest risk of alcohol related assault, even when they had not themselves been drinking. It is clear from our results that binge drinking is

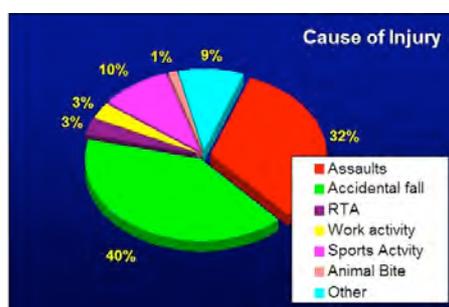
"Two thirds of the assaults were associated with alcohol use"

taking its toll. The proportion of facial injury patients who had consumed alcohol has increased by more than 40% since the previous national facial injury survey in 1997. The results of our survey will be used to target injury prevention programmes, which will reduce the incidence and severity of facial injuries in the future.

AND ON THAT NOTE

Binge Drinking Teenagers Heed Surgeons' Warnings

Saving Faces has also been working on a novel binge drinking prevention intervention for teenagers. We studied



Breakdown of causes of facial injuries
RTA=Road Traffic Accidents

13 and 14 year old pupils in 70 English schools. Our results showed that more than half of those who had tried alcoholic drinks had binged and these 13/14 year olds had suffered harms when drunk such as getting in fights, having to go to hospital with alcohol related problems and having sex they later regretted. Saving Faces sent Oral and Facial surgeons into half of these schools to talk to these pupils showing them a series of increasingly graphic pictures of patients with horrific alcohol related facial injuries. Two years later, those who remembered the talk were very much more aware of the consequences of binge drinking than their counterparts in the 35 control schools, who had not received the talks. They were less likely to get drunk and had suffered fewer alcohol related harms. They also drank less frequently and had reduced their consumption by 15%. Further research is needed to establish how the surgeons' stark, but effective message can be delivered to larger audiences.

Shock Tactics Reduce Teenage Smoking

Saving Faces has demonstrated that a presentation highlighting the link between mouth cancer and tobacco

use, really can reduce teenage smoking. Oral and Maxillofacial surgeons visited 46 schools around the UK and delivered a standardised presentation to 11 and 12 year olds, including graphic pictures of mouth cancer patients, before, during and after surgery. In a further 40 "control" schools the pupils followed their usual anti-smoking curriculum. Two and a half years after the fifteen minute talk, two thirds of the pupils remembered the talk. Among the 3,000 pupils who remembered the presentation, far fewer smoked than those who had never received the talk. Both boys and girls remembered the talk, but the boys were much more likely to be affected by the shocking pictures and fewer than half the expected number had taken up smoking. We are currently writing up the results and need to carry out further research to investigate why so many girls who remembered the presentation chose to ignore its stark message about the consequences of their behaviour.

Saving Faces research poster wins prize at the BAOMS' meeting



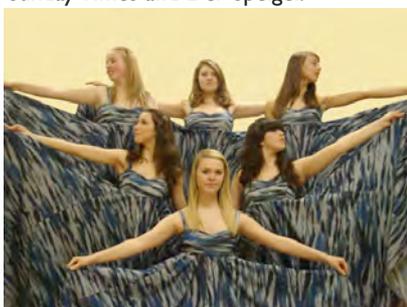
Saving Faces researchers with the prize-winning poster on our pharmacy study

A Big Thank You to all our Supporters

Here are just a few of the ways in which you have been raising money for us over recent months.

Special thanks to Mary Holdsworth for all the hard work she does for Saving Faces and, of course, for the never-ending supply of delicious biscuits. The 'Santa Run' was a great success. Jack Dentith, our research assistant, also took part.

Graham Smith, one of our surgeons, swam in Tooting Lido in January (4 degrees C.) His 'mankini' attracted attention from the Sunday Times and Der Spiegel.



The Laton Ash Dance Centre gave us half of the proceeds from their 35th anniversary celebratory show in April.



Dan Welldon entered a bike race in the Scottish Highlands to raise money for Saving Faces and Macmillan Cancer

Parisa Zaringhalem and Rebecca Gordon both raised money by running Marathons.



See the Saving Faces Art Exhibition

at 'The Art of Medicine' exhibition,
The Art House Gallery, Southampton
Friday 2nd October 09 - Sunday 8th November 09
www.thehousesouthampton.co.uk



Our art exhibition displays paintings by BP National Portrait award winner Mark Gilbert, produced during a three year period as artist-in-residence in the Department of Oral and Maxillofacial Surgery at St. Bartholomew's and the Royal London Hospital. The paintings portray the faces of patients before, after and in some cases actually during their surgery for injury, deformity or cancer. The project was conceived as a way of conveying to the public the possibilities of today's facial surgery whilst at the same time communicating the strength of spirit which can enable people with facial disfigurements and trauma to lead full and happy lives. The paintings chart not only the patients' physical transformations through surgery but also capture their emotional responses in a way photography can rarely achieve.

We are always delighted for our exhibition to go on tour. If you would like your organisation to host our exhibition please contact us.

Have Fun Fundraising with Family and Friends

Why not hold your own event?

We have enclosed a leaflet full of advice and ideas to help you to set up your own fundraising events. Please get in touch with us if you need any further help. We would love to hear from you.

Help us to set up a Saving Faces Patient Helpline

We are aiming to establish a helpline for patients and their concerned families with assistance from motivated 'expert' patients who have undergone similar experiences. Newly diagnosed patients, or their friends or family, would be able to make a call on a dedicated phone line to members of our medical research team who would take details, including the diagnosis and preferred language, and link the call to the appropriate member of our panel of patients. Are you a current or former patient who could you give up some time to answer calls and share your experiences? If so, please get in touch. We also need your help to raise funds to set up this valuable facility.

Facial Reconstruction: A Glimpse Of The Future

In May, Saving Faces in association with The BioCentre presented an afternoon and evening event hosted by the Science Museum and Dana Centre on the implications for facial surgery of new technology and techniques.

As a direct result of this meeting a team of British surgeons and scientists, led by Professor Iain Hutchison, are collaborating to carry out facial reconstruction using tissue engineering. Facial deficits causing disfigurement involve loss of bone, muscle fat and skin. In the past 3 decades surgeons have found revolutionary ways to reconstruct the face using huge segments of tissue from the patients' own bodies but this necessitates 2 long operations, one to harvest the tissue and the second to fashion it to approximately the correct shape of the facial defect. This can cause problems at the patient's donor site and usually does not reproduce facial form and function exactly.

Facial transplants from dying donors have solved some of these issues but have created new problems. Patients have to take immunosuppressant drugs for life. The young Chinese man who received the world's 3rd face transplant stopped taking the drugs, lost the transplant and died.

Professor Iain Hutchison and his colleagues believe that tissue engineering provides the best solution to the challenges of facial reconstruction. The British team plan to build replacement facial and skull bones in the patients' own bodies using the patients' own stem cells, genetically engineered proteins which stimulate correct growth and computer generated scaffolds.

Pat Puts Patients First even in Retirement



Pat Wicking with Professor Hutchison

Pat was by all accounts (and probably still is) a wonderful dancer. That would explain to some degree how she managed to float so gracefully around all those chaotically crowded clinics. They were in fact not so much managed as choreographed by her. Too many of you reading this may well have witnessed those Wednesdays where a 'patient' necessarily contemplates both senses of the word, but many of you will also have witnessed Pat's manifest calmness and kindness under all that constant pressure. Poised, elegant, and of course always immaculately turned out, she truly graced the outpatients' department; her recent retirement has deprived the NHS of a dedicated public servant but left it all the richer for her having been part of it.

When people's lives are overtaken by trouble and trauma, it takes a special sort of person to feed them efficiently yet compassionately into a challenging, often overburdened system. For many years Pat did both in a gentle, tactile and utterly admirable manner. No wonder so many of the patients count her as a friend. No wonder so many of them ignored the transport restrictions and civic displeasure prefacing the April G20 summit, in order to express their affection and gratitude in the Great Hall. She returned there in July, having been nominated for a much merited award. Thankfully, she remains a Trustee of this charity and will doubtless continue to do what she always did, ensure that the patients' interests, both clinical and emotional, come first.

When the Saving Faces' office began compiling a book of well-wishers' letters and cards, dominant themes soon emerged. Who was going to do the consoling, counselling and cuddling? How on earth would the clinics cope without her? Who was going to attempt to organise a certain eminent gentleman? Well, the jury is probably going to be out for rather a long time as regards this last question, but Pat Wicking always was going to be a hard act to follow...

Research today saves faces tomorrow



Standing Order Mandate

To (your bank's name and address):

Your Sort

Code: _____

Your Account
number: _____

Please pay Saving Faces (Abbey, Sort code 09-06-66, Account no. 40769363) the sum of £ _____ on the _____ day of _____ and thereafter on the same day of the following months/quarters/years until further notice, making _____ payments in all.

Signature: _____

Single Donation

I enclose a cheque in the sum of

£ _____

Gift Aid Declaration

I am a UK taxpayer and I would like Saving Faces to reclaim the tax paid on this and any other donations I make until I tell you otherwise

Signature: _____

Date: _____

Your Details

Title: _____

Name: _____

Surname: _____

Address: _____

Post
code: _____

Telephone: _____

Fax: _____

Email: _____

Contact Saving Faces

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My Story

by James Rivett

‘A man hears what he wants to hear and disregards the rest...’

The truth of Paul Simon’s tuneful observation has pursued me down the long dark years of my illness. If I had not been so willing to listen to an assortment of GPs, and even the odd consultant, telling me that I was imagining/exaggerating my symptoms, I cannot help but feel that my past would not have been so fearful, and my future so uncertain. The truth is though that I wanted to be told that I wasn’t seriously ill, and there are far wiser people than me who have chosen to be in denial about cancer.

I remember just how it was when I discovered the first symptom (a numb upper left lip): the date, the time, how the sun dappled my Guardian and the pigeons cooed in the flowering cherry. Something told me that my life would never be the same again. There is an inner voice at the very centre of all of us which is not just another tawdry facet of our self deceit; it does not lie, it does not need to. It needs to be listened to. Or else.

I have lost so much between then and now. Every day I have to confront and shave a gross snarling caricature of myself. Besides the obvious visible disfigurement, my scars can be measured in feet, from my neck to my ankle (courtesy of the failed reconstructions), my senses are severely impaired (courtesy of the radiotherapy), and my public confidence is totally shot (courtesy of both physical and verbal abuse). But I have managed to hold on to the things I really and truly needed: the love of my wife and daughter; the affection of my friends and my enduring wonder at this strange and achingly fragile thing called life.

When an oncologist tells you that you have cancer how can you not feel that at the end of any sentence the word is “death”? What is remission but perhaps a pathetically short space of time to put one’s affairs “in order”?- as if there is any chance of “order” in the chaos of despair cascading down from the most blatant betrayal of your own body. And, for those of us who do not have the lumpy mattress of faith to fall back on, the impact is even more jarring. The void that was before, the void that is to come, these are but two dismal drapes snatched hurriedly together. I know this is a dour diagnosis but it seems so cruel that whatever it was that let there be light could let there be so little of it for some of us.

“In the long run we are all dead” is the Keynesian analysis of course, and rather like travel, it is not really about arrival, but the getting there. I am very fortunate insofar that, after years of forced unemployment and frustrating housebound paralysis, I have found some peripheral purpose at Saving Faces itself. It is one of the few places in London, if not the world, where my twisted Quasimodo could find some sanctuary. You may not often have to stare disfigurement in the face, but it is out there somewhere, in its miserable devastated thousands. It just tends to hide itself away. In a world besotted with beauty, its opposite is deemed offensive.

It shouldn’t be like that, but it is. That is why this charity’s work is so important. We don’t want people to get ill or injured in the first place, hence the vital work around awareness of risk factors; but if it happens, then we want them to benefit from best practice. It is like fighting a war on two fronts: never advisable, seldom winnable, but sometimes sadly necessary.

There is much to admire about Saving Faces, including its humanitarian ambition, its incisive directional analysis and its fiercely devoted staff. But what I revere most about it is the compassion and love it evokes amongst its supporters, and how the patients, their family and friends constitute its proudly beating heart. These things move me profoundly and I know I am not the only one to be thus inspired and humbled.

The continuing generosity of our donors will see us through these ominously straitened times; donations both large and small are equally valued. I remember how the whole office was deeply touched by the lovely note from Hilary who lives in County Down; her donation might have been small in monetary terms, her handwriting spidery and apologetic, but her gesture was almost Biblical in its emotional impact. Bless you Hilary!

Saving Faces is endeavouring to secure the funding to set up a help line to put fellow sufferers and their families in touch with each other. There is nothing comparable out there operating in real time. We do have the wonderful asset of an extensive list of ‘expert patients’ who are willing to give others the benefit of their experience. In the meantime, if I can be of any help to anyone, I am available on 0207 601 8147 or via j.rivett@savingfaces.info