



**Dec 27th, 2016**

**World Workshop on Oral Medicine VII (WWOM VII)  
Gothenburg, Sweden, September 24<sup>th</sup>-26<sup>th</sup> 2018**

**Dear Oral Medicine colleagues:**

The Steering Committee has been making excellent progress planning WWOM VII. Many of you have provided us with suggestions as follow-up to the WWOM survey conducted earlier this year involving approximately 120 oral medicine colleagues from more than 30 countries worldwide. We are grateful for your collective input.

The document on the following pages is designed to report on the current status of and future plans for WWOM VII, which represents a culmination of the first six Workshops, conducted over nearly 30 years. The model for these Workshops, however, remains a work in progress.

As always, comments are welcomed. The attached description of WWOM modeling will provide a foundation for continued work leading into WWOM VII, scheduled for September 24<sup>th</sup>-26<sup>th</sup> 2018 in Gothenburg, Sweden. The WWOM VII meeting will occur in conjunction with the meeting of the European Association of Oral Medicine (EAOM) which follows on September 26<sup>th</sup>-29<sup>th</sup> 2018.

Thank you again for your interest and support. We very much look forward to the next steps leading into 2018 Workshop.

Sincerely,

WWOM Steering Committee

Siri Beier Jensen, Martin S. Greenberg, Timothy A. Hodgson, A. Ross Kerr, Peter B. Lockhart, Giovanni Lodi, Douglas E. Peterson

## **World Workshop on Oral Medicine (WWOM)**

### **I. Historical context:**

In the mid-1980s, Professor Sir David Mason (UK) and Dr. Dean Millard (US) conceived the idea of convening experts in oral medicine from around the world to explore the current status and future directions of the field. The first 3 World Workshops on Oral Medicine took place at the American Dental Association headquarters in Chicago in 1988, 1993, and 1998; and in 2006, 2010, and 2014, the WWOM took place in Puerto Rico and London, and Orlando respectively. At each conference, approximately 50-100 global experts in oral medicine and other fields participated, and worked in sections to rigorously review the current literature and to examine educational standards. The proceedings have been published and widely distributed (see *Oral Diseases* 2015;21:409–416).

### **II. Goals:**

The WWOM Steering Committee is dedicated to advancing oral medicine patient care, research and health professional education at the international level. WWOM will continue to strive to achieve high impact in the health professions and in science by:

- Promoting new, multicentered, transdisciplinary research studies;
- Advancing interprofessional health curricula;
- Highlighting the value of oral medicine in addressing current unmet medical needs;
- Facilitate the career development of junior oral medicine professionals, through the opportunity to work closely with an international network of specialists.

WWOM will also strive to promote collaboration among international Oral Medicine organizations, including development of joint research projects, educational programs and training opportunities.

## **II. WWOM VII Progress Report**

At this time the following Sections for WWOM VII have been defined relative to preparation of Systematic Reviews and Position Papers:

### **Workshop Groups**

*Group 1 – Oral Microbiome*

*Group Head: TBD*

*Steering liaisons: P. Lockhart, D. Peterson, R. Kerr*

*Group 2 – Personalized Medicine*

*Group Head: TBD*

*Steering liaisons: D. Peterson, S. B. Jensen*

*Group 3 – Molecular Biology for Oral Medicine Specialists*

*Group Head: Ilias Alevizos*

*Steering liaisons: R. Kerr*

*Group 4 – Use of Biologics in Oral Medicine*

*Group Head: Scott DeRossi*

*Steering liaisons: M. Greenberg*

*Group 5 – Consensus on Outcome Measures for Burning Mouth Syndrome*

*Group Head: Craig Miller*

*Steering liaisons: S. B. Jensen, G. Lodi*

*Group 6 – Future of International Oral Medicine*

*Group Head: Mark Drangsholt*

*Steering liaisons: R. Kerr*

*Group 7 – Medically Necessary Dental Care*

*Group Head: Alex White*

*Steering liaisons: P. Lockhart, M. Greenberg*

*Group 8 – Pediatric Oral Medicine*

*Group Head: Catherine Hong*

*Steering liaisons: T. Hodgson, G. Lodi*

### **III. WWOM Organizational Structure**

#### **Steering Committee Governance and Leadership Succession Plan:**

Consistent with the trend since WWOM IV, at least one Board Member from both EAOM and AAOM will also continue to serve on the WWOM Steering Committee. Steering participation will continue to expand in the coming years as the clinical, scientific and education modeling evolves.

Composition:

Steering Committee will be principally comprised of Oral Medicine specialists such that

expertise regarding clinical practice, research and education is collectively represented. In addition to scientific and administrative leadership skills, criteria for appointment to Steering will include:

An effort to ensure a cross section of faculty that is representative of the specialty world-wide, as well as strong and well documented commitment to serve.

Duties:

Steering is responsible for the overall implementation and management of the goals of WWOM.

This includes but is not limited to:

- Program modeling
- Fostering collaboration between international oral medicine organizations
- Publications
- Organizing and supporting scientific oral medicine meetings
- Fundraising to support future WWOM activities.

#### **IV. Participation in WWOM Opportunities**

Three key principles guide participation in WWOM opportunities:

- i. It is vital that participation in WWOM be viewed as an evolving career opportunity, guided by new directions in Oral Medicine clinical practice, research and education.
- ii. As such, appointment to certain activities (e.g., Steering, Section Head, Consultants) will continue to be based on several considerations, including scientific expertise, administrative leadership, and geographic distribution. This is consistent with the WWOM working group model which is designed to foster oral medicine activities.
- iii. It is also essential that the governance model provide (i) a foundation for systematic leadership succession as well as (ii) maximum opportunity for participation by interested Oral Medicine faculty, residents and practitioners worldwide.

In this context, the following model will be utilized to comprise the participant roster for WWOM VII. It is similar to the approach utilized for WWOM VI, with the revision to include a competition for Reviewer selection. Details of the specific roles are listed in **Attachment I**.

## **Attachment I**

### **WWOM VII Participant Roles**

**Steering Committee liaisons** will serve to facilitate the review and publication processes for each group in relation to Steering Committee oversight. The Steering Committee is comprised of oral medicine specialists with collective extensive scientific and administrative experience relative to the Workshop goals and management.

**Section Heads** are senior level authorities in the field. They will involve their Consultants in a review of the drafts prepared by the Reviewers and Assistant Reviewers, several months in advance of the Workshop. They will coordinate the Consultants' review and return their suggestions to the Reviewers. Section Heads will be appointed by the Steering Committee.

**Reviewers** are early to mid-career experts in oral medicine, well versed in systematic reviews and research methodology. For the systematic reviews, they will be assigned a topic that is not an area of their expertise, which will contribute to objectivity in the literature review process. They will initiate and complete the literature review, and develop the draft of the report. The selection of reviewers will be by a competition based on a call for applications.

**Assistant Reviewers** are early career experts in oral medicine or residents in oral medicine training programmes who are interested in contributing to the review process while at the same time observing the overall process and interacting with the collectively highly experienced Workshop leadership and faculty. This strategy thus helps the review process move forward while at the same time also providing a mentorship environment for the assistant reviewers. The selection of assistant reviewers will be by a competition based on call for applications.

**Consultants** are also authorities in the field, and may include physicians and members of other disciplines, if appropriate. They will read and comment on the initial and subsequent drafts as deemed appropriate by the Section Head. Consultants will be selected by the Section Head with approval by Steering among the most prominent researchers and clinicians who have published in the subject areas over the last 5 years.