# WELCOME TO THE WORLD-FIRST D3 RESEARCH INCUBATOR (2021)



#### **Overview**

Realising the need to cross-learn and all "sing from the same songsheet", the ground-breaking "research incubator" design involved: (1) practitioners illustrating current issues they face; (2) scientists outlining latest research capabilities and understanding; then (3) these two parties plus end-translators collaboratively filtering the status quo (1+2) to arrive at key researchable

questions and actionable plans that lead to social good. And continuing 2020's Translational Framework concept, two draft Discussion Documents – aimed at producing consensus-seeking green papers on a D3 Research Agenda and D3 Research Standards and Guidelines – were worked on before, during and after the event.

#### **EVENT BASICS**

**Format:** Webinar, comprising three 2-hour sessions over 3 days

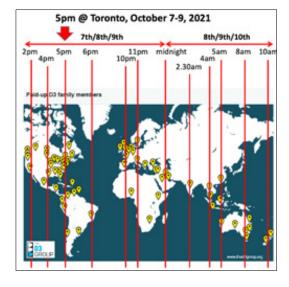
Dates: October 7th/8th/9th or 8th/9th/10th depending on location

**Times:** 5-7pm in Toronto (<u>US EST</u>), 8-10am in Melbourne (<u>AU EST</u>)

**Delivery:** Invited presentations, panel discussion, audience Q&A

Videos: Available to registrants at no extra cost

Research posters: Yes, see below



## WHY HAVE AN INTERNATIONAL D3 RESEARCH INCUBATOR?

If the D3 research community is to perform strongly as a "global choir", it follows we must all "sing from the same song sheet" and have a translational repertoire ranging from basic science through end-translation into better practice, policy and products – all with a view towards social good.

Our ground-breaking **"research incubator"** event will leverage a powerful lineup of stakeholders – comprising clinical and public health practitioners, students, industry directors, scientists, research publishers and funders – to formulate a socially impactful repertoire and start a "collaborative songwriting" process. (**read more**)



# **SOMETHING FOR EVERYONE**

# Why should I attend the D3 Research Incubator?

#### CLINICIANS

- Good science often starts with clinical problems
- Clinicians know the problems with MH
- Want to help set the direction of problem-solving?
- Then attend and share your clinical experience!

#### **SCIENTISTS**

- Clinical problems always benefit from good science
- Scientists should know about the problems with MH
- Want to help set the approach to problem-solving?
- Then attend and share your scientific experience!

#### **END-TRANSLATORS**

- Good science gets better once effectively translated
- End-translators should engage "the MH problem"
  - Want to help set the
- approach to problem-solving?
  - Then attend and share your
- translational experience!

This "cross-learning" event is relevant to everyone from clinicians through to industry, research publishers and funders, and policymakers (so-called "end-translators").

• Here for the first time is an opportunity for **clinicians** exposed to Molar Hypomin (e.g. therapists, hygienists & dentists, paediatric & orthodontic specialists,

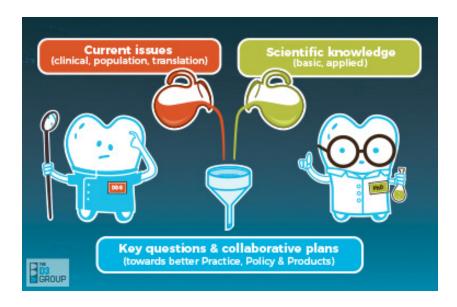
paediatricians) to voice their concerns about the day-today problems they face and ensuing needs for research.

 The same goes for public health practitioners and others battling to increase awareness of the <u>striking link</u> <u>between Molar Hypomin and childhood decay</u>. (<u>read</u> <u>more</u>)

## WHAT IS OUR RESEARCH INCUBATOR CONCEPT?

Simply put, practitioners (clinicians, public health) have great awareness of major problems that hinder the field whereas researchers (particularly career scientists) excel at finding useful answers. So, given D3G's translational aim to foster **top-quality investigations into key knowledge gaps**, we think it's important that

practitioners and scientists understand each other's perspectives better, and also think ahead collectively towards eventual end-translation of research outcomes into "the 3 Ps" (practice, policy, products). To facilitate such **cross-learning**, this first stage of our incubator concept involves: (1) practitioners (read more)



## **KEYNOTE CAMEOS**







Realising Molar Hypomin is the dental outcome of medical problems during early childhood, how great would it be to start each webinar with inspiration from an expert on medical-dental integration and translation to social good? Well, we're thrilled to say

Martha Somerman, Janet Southerland and Maria Ryan have kindly agreed to precis their journeys to the highest levels of medico-dental research, interprofessional education, and end-translation. (read more)

## DISCUSSION FRAMEWORK AND CONSENSUS D3 RESEARCH AGENDA

Given the translational nature of this event (diverse viewpoints & content, lofty goals & limited time), it's important to have a customised framework available to guide discussion - before, during and after the event. Better still, wouldn't it be great to use the development phase of this framework to **grow community** and **narrow consensus** before the official kickoff?

Consequently, building from the **discussion framework document** for last year's Workshop (available <a href="here">here</a>), participants from that event plus early registrants for this Research Incubator are currently drafting a **consensus D3 Research Agenda** that lists what our community sees as the **top clinico-scientific questions** and translational needs (e.g. **products**, **policy**) for a raft of topics spanning clinical practice, homecare, public health & medical prevention. (read more)



A draft consensus

D3 RESEARCH

AGENDA

for "D3G-Toronto Events" and beyond

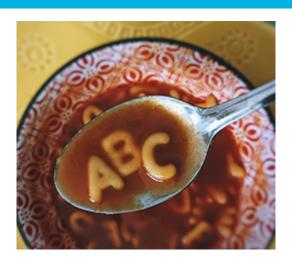
### **FEATURED REGISTRANT'S QUESTION**

Given Molar Hypomin is usually invisible in radiographs of unerupted teeth, could researchers develop tools for pre-eruptive diagnosis (e.g. biopsy test or transmucosal imaging for chalky enamel)?

Michael M, Paediatric dentist and D3er, Adelaide, Australia (paraphrased<sub>,</sub>

## FIXING OUR "ALPHABET SOUP PROBLEM"

The 2020 D3 Workshop identified **lack of research standards and guidelines** as the "numero uno" problem facing our field. Indeed, since **"MIH"** was defined 20 years ago, the academic literature has accumulated at least 21 other terms referencing "demarcated opacities" – **HSPM**, **DMH** and **IH** being the most famous. Yet key gaps remain (e.g. hypomineralised 12-year molars). Is this shemozzle of terms and acronyms good for science, clinical practice and communication? Or should we gather all involved parties (researchers, reviewers, publishers, funders, educators, industry) and fix this "alphabet soup problem"? Arguing for the latter, we have drafted a set of **Research Standards & Guidelines** (read more)



## POSTER PRESENTATIONS OF ORIGINAL RESEARCH

To complement the main program – which involves brief talks on a strategic range of research-related topics followed by panel discussion then audience Q&A – we extend an open invitation for students and other researchers to share their project work, even if it's not fully baked yet (this is an incubator aimed at hatching great ideas after all).

For information about the **28 September deadline**, presentation formats and submission process, see our MORE INFO download <a href="https://example.com/here">here</a>.

## **EVENT FLYER AND ADVERTISING**

Download the Research Incubator flyer using the button below - please share it among colleagues and stakeholders across the sector.

We also have advertising content available for websites/ newsletters etc - please <u>contact us</u> if you're in a position to help promote this trailblazing event.



