A practice of firsts and high standards in Kuwait

By Dr Praveen Chandra LP, Kuwait

When Maidan Clinic – Sharq branch opened in 1987 in the central business district, it was the first private dental practice in Kuwait. The aim was to provide a first class dental experience to patients by meeting the highest standards and using the latest technology and innovations. Now, there are six other centres that belong to the Maidan group, though Sharq remains the biggest, both in team and physical size (the centre is spread over roughly 10,000 square feet). Maidan Clinic – Sharq branch is very popular with VIP patients.

Including me there are 10 dentists in the Sharq branch, 16 dental assistants, 5 infection control specialists, 4 hygienists and 4 receptionists that work across 12 surgeries in shifts between 0900 and 2030. Together, we are able to provide a comprehensive list of treatments from general dentistry to implants, orthodontics, and a list of treatments from general dentistry to implants, orthodontics, and more thanks to the broad skill set of the team and variety of qualifications. I specialise in conservative dentistry and endodontics, but my scope of practice also includes placing implants and minimally invasive anterior alignment using the Invisalign appliance (though only in select cases). I was instrumental in arranging the first certification programme for Invisalign in Kuwait, an honour that was observed by the then United States Ambassador to Kuwait, Matthew H. Tueller.

Each dentist – myself included – will see approximately 100 patients each day, though of course this can vary depending on the types of treatment required. The practice is open Saturday to Thursday, which is a half-day, and we have Friday off as this is considered our weekend in Kuwait.

As part of our service, we also offer a state of the art mobile dental clinic designed especially for corporations, private senior management consultations, schools and to treat patients with additional needs that are unable to attend the practice for treatment. This service is usually offered around twice a month, but at peak times of the year it can be as many as four.

Altogether, our patients receive a high standard of care across all aspects of dentistry, not only with treatments but infection prevention and control too, which is regulated by the Ministry of Health. As well as our personal benchmark that we set, there are specific regulations that we must comply with. There are specific regulations that we must comply with. We have two rooms – one for the dirty, used instruments and cleaning and disinfection, and one for sterilisation, packaging and storage, which are interconnected by a hatch to minimise recontamination. Equipment wise we use an ultrasonic cleaner before the instruments are packed, sealed and sterilised using either dry heat sterilisation or steam under pressure (autoclave).

To ensure we stay up to date with all the latest regulations, techniques, equipment and so on I regularly attend conferences and workshops all over the world such as the Midwinter Meeting in Chicago, the IDCS Cologne (American Academy of Cosmetic Dentistry) event. Any new changes or innovations that I come across I always take back to my practice, and where possible we always try to incorporate to make our service that little bit better.

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Study finds acupuncture could help with dental anxiety

By DTI

YORK, UK: Fear of the dentist is something some people suffer from more than others. With multiple reasons for dental anxiety and its effects, there is however limited research on its impact and possible treatment methods. In an effort to look deeper into the topic, researchers from the University of York have recently reviewed a number of studies on treating dental anxiety with acupuncture, and the results show it could be a helpful tool.

For the systematic review and meta-analysis, six trials with a total of 800 patients were chosen from almost 130 eligible trials. The researchers used a points scale to measure anxiety, and in the studies included, anxiety was shown to be reduced by eight points when dental patients were given acupuncture as a treatment. According to the researchers, this level of reduction is considered to be clinically relevant, indicating that acupuncture could be a possibility for treating dental anxiety.

Co-author Dr Hugh MacPherson, Professor of Acupuncture Research at the University of York’s Department of Health Sciences, said: “There is increasing scientific interest in the effectiveness of acupuncture either as a standalone treatment or as an accompanying treatment to more traditional medications.”

Of the six studies, those that compared anxiety levels between patients that received acupuncture and those that did not show a significant difference in anxiety scores during dental treatment. However, the researchers noted that no conclusions could be drawn between patients that received acupuncture as an intervention and those that received placebo treatment, and suggested that larger controlled trials are needed to increase the robustness of the findings.

“If acupuncture is to be integrated into dental practices, or for use in other cases of extreme anxiety, then there needs to be more high-quality research that demonstrates that it can have a lasting impact on the patient. Early indications look positive, but there is still more work to be done,” said MacPherson.

The study, titled “Acupuncture for anxiety in dental patients: Systematic review and meta-analysis”, was published in the June 2018 issue of the European Journal of Integrative Medicine.

Researchers from the University of York have found that acupuncture could help with dental anxiety.

(Photograph: acupuncturebox/pixabay)
By King’s College London

An acidic diet has long been associat- ed with erosive tooth wear. However, some people who consume dietary acids develop erosive tooth wear and some do not.

Scientists at King’s College London have examined the risk factors and damaging habits associated with the consumption of acidic foods that re- sult in the loss of tooth enamel and dentine.

Drawing on a previous study at Guy’s Hospital, London, that com- pared the diet of 900 people with se- vere erosive tooth wear and 900 peo- ple without, researchers identified how different behaviours increased the risk of developing the condition that affects more than 30% of adults in Europe.

The King’s team found that eating and drinking acidic food and drinks, particularly between meals, carried the greatest risk. Those who con- sumed acidic drinks, including wa- ter with a slice of lemon or hot fruit-tea, were more than 11 times more likely to have moderate or severe tooth erosion. This figure was halved when drinks were consumed with meals.

The research, reviewed in the Brit- ish Dental Journal, also identified a range of foods, drinks and medica- tions that have the potential to be erosive. Drinks with added fruit or fruit flavourings were dominant and massively increased the erosive po- tential of the drink, putting them on a par with cola drinks.

Researchers found that sipping, holding or rinsing drinks in the mouth prior to swallowing increases the risk of tooth erosion, as these habits increase the duration and/or force of the contact between the acidic drink and surface of the teeth.

Wine tasters, for example, swish and hold wine in their mouths for pro- longed periods and multiple times a day, while long distance drivers or office workers may sip acidic drinks over long periods of time.

The study also found:

- Sugar-free soft drinks are as erosive as sugar-sweetened ones
- Fruit flavoured teas and fruit fla- voured sweets, liqueurs or medica- tions have large erosive potential when consumed regularly
- The increase in patients with tooth erosion may be linked to changing patterns of eating, such as increased snacking in both children and adults
- Drinks are more likely to cause tooth erosion when served hot
- Vinegars and pickled products can also lead to tooth erosion

Lead author, Dr Saoirse O’Toole said:

‘It is well known that an acidic diet is associated with erosive tooth wear, however our study has shown the impact of the way in which acidic food and drinks are consumed. With the prevalence of erosive tooth wear increasing, it is vitally important that we address this preventable aspect of the previous research.

Erosive tooth wear is a long-term problem that can lead to a range of conditions such as pain and sensitivity, and can be very costly to treat. It is a very preventable condition that, at its most severe, can lead to the disfigurement of tooth enamel.

‘The increase in patients with tooth erosion may be linked to changing patterns of eating, such as increased snacking in both children and adults. These are very preventable factors and the message is quite simply that we should cut down on snacking and think carefully about what type of food and drink we consume.’

Dr O’Toole said that acidic food and drinks were increasing in popularity and that parents should take care to ensure their children were aware of their potential erosive effect.

‘Children and adults must be aware of how acidic food and drinks can affect the teeth. The message is that there are simple things one can do which will help to prevent tooth erosion. Sipping, holding or rinsing drinks in the mouth prior to swallowing increases the risk of tooth erosion, as these habits increase the duration and/or force of the contact between the acidic drink and the teeth.’

Further research is needed to determine which foods and beverages cause tooth wear. The findings are likely to be relevant to the global community, as this is an increasingly common problem worldwide.

See Saoirse on BBC News here:

By King’s College London

Another cohort of accomplished delegates gathered in London in March for the 12th annual Senior Dental Leaders programme (SDL), an international conference designed to develop high-level leadership and management capabilities in oral health leaders from around the globe.

Over 100 participants from over 40 countries now count them- selves as part of the highly connect- ed senior dental leader network.

First conceptualised by Professor Raman Bedi in 2007 at King’s Col- lege London, the SDL programme is organised by the Global Child Dental Fund, King’s College London Dental Institute and the Harvard School of Dental Medicine, and is co- sponsored by Henry Schein, Inc. and Colgate-Palmolive.

The intensive multi-day confer- ence brought together dental policy makers, national Chief Dental Offi- cers, representatives from NGOs and members of clinical and academic communities, who work to forge an international collaborative network with the goal of advancing the mis- sion of a cavity-free world for chil- dren.

Speakers included Professor Mike Curtis, Dean of King’s College London Dental Institute; Dr Bruce Donoff, Dean of the Harvard School of Dental Medicine; Dr Manisha But- ler, Vice President of Oral Health and Professional Relations, Colgate-Pal- molive; and Mr Stanley M Bergman, Chairman & Chief Executive Offi- cer, Henry Schein, Inc.

Professor Raman Bedi, Chairman of the Global Child Dental Fund, said:

‘Leadership training in oral health is just as important as gaining clini- cal skills. It is not only necessary for dentists but a whole range of other health professionals such as doctors, nurses and health visitors. Leader- ship development is also crucial for schoolteachers around the world to advocate for better child oral health.’

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**Researchers develop drug-filled 3-D printed dentures**

**By DTI**

NEW YORK, U.S.: It is not uncommon for denture wearers to suffer fungal infections that cause inflammation, redness and swelling in the mouth. Seeking to avoid or better treat such denture-related stomatitis, researchers from the University at Buffalo have used 3-D printing to create dentures filled with microscopic capsules that periodically release amphotericin B, an antifungal medication. They found that the dentures reduced fungal growth.

“The major impact of this innovative 3-D printing system is its potential impact on saving cost and time,” said the study’s senior author, Dr. Praveen Arany, an assistant professor in the Department of Oral Biology in the university’s School of Dental Medicine.

Using PMMA for the denture material, the researchers sought to determine if the dentures could both maintain their strength and effectively release anti-fungal medication contained in biodegradable, permeable microspheres. The microspheres protect the drug from the heat of the printing process and allow the release of medication as they gradually break down. With a flexural strength testing machine, the scientists found that, while the flexural strength of the 3-D printed dentures was 35 percent less than that of a conventional laboratory-fabricated denture used as a control, the printed dentures never fractured.

To examine how well the dentures could release the antifungal medication, the dentures were tested with one, five and ten layers of material to learn if additional layers would allow the dentures to hold more medication. The researchers found that the dentums with five and ten layers were impermeable and thus not effective at dispensing the medication.

With the new approach, Arany believes the antifungal application could prove invaluable among those highly susceptible to infection, such as the elderly and hospitalized or disabled patients. Additionally, unlike current treatment options, such as antiseptic mouthwashes, baking soda and microwave disinfection, the new means of controlled drug release can help prevent infection while the dentures are in use.

Arany and his colleagues are now looking to further research how to reinforce the 3-D printed dentures with glass fibers and carbon nanotubes to achieve greater mechanical strength and to focus on denture retting.

The study, titled “Functionalized prosthetic interfaces using 3D printing: Generating infection neutralizing prosthesis in dentistry,” was published in the June 2018 issue of Materials Today Communications.