New research links oral health and weight issues

By DTI

GOTHENBURG, Sweden: Having children eat healthily can be a tricky task. However, having found an association between the prevalence of cariogenic bacteria and a high body mass index (BMI) in children, research by a doctoral student at the Sahlgrenska Academy of the University of Gothenburg has pointed to a possible new approach.

The thesis on children’s diet, BMI and well-being has suggested that discussions with parents and children about what foods are good or bad for the teeth may help to reduce the risk of obesity. “Weight can be a sensitive subject, but if you talk about eating behaviours alongside dental health, you’re looking at the issue from a different angle,” said the author of the thesis, Louise Arvidsson.

In one of her sub-studies, Arvidsson reviewed the eating behaviour, BMI and dental health of 271 preschool and primary school children in Sweden. She compared the children’s height, weight and food intake over one day with the prevalence of cariogenic bacteria in saliva and discovered a link. The children who had higher amounts of the bacteria also had a significantly higher BMI and less healthy eating habits, such as eating more frequently and consuming more foods rich in sugar.

The researcher emphasised that more studies are needed to investigate the mechanism behind the association between BMI and cariogenic bacteria count. However, she suggested that improving children’s eating habits by reducing intake of sugar-rich foods and beverages and limiting intake frequency (specifically of unhealthy snacks) may provide multiple benefits in preventing both dental caries and the development of childhood obesity.

Furthermore, Arvidsson believes that, with the right collaboration between dentists, child health care specialists and schools, there is a good opportunity to help those most at risk, specifically in Sweden, where children visit the dentist from a young age.

Arvidsson also pointed to the link found in the study between healthy food and a higher self-esteem, better relationships with friends and fewer emotional problems.

“We know that adults with depression feel better if, in addition to other treatment, they also meet with a dietitian. The question is whether a healthy diet can have effect also in young children. There has been a lot of focus on physical activity and mental health in children, but diet is an increasingly recognized aspect,” said Arvidsson.

A thesis has suggested using discussion of dental health as a way to combat obesity in children after finding a link between the two. (Photograph: jarmoluk/Pixabay)
“Machines will never replace the human hand...”

An interview with Dr. Stavros Pelekanos, assistant professor at the School of Dentistry of the University of Athens, Greece, and faculty member of the Global Institute for Dental Education, Los Angeles, USA

By DTI

What is the role of aesthetics in dental implantology today?

Dr. Stavros Pelekanos: Implantology in the 1980s and 1990s was bone-driven. The Albrektsson criteria for a successful implantation back in 1986 did not even refer to esthetics and were followed for many years to come. Nowadays, prosthodontists start the treatment and perform backwards planning, always keeping in mind the correct positioning of the tooth or teeth to be replaced.

Patients’ expectations regarding aesthetic results are growing with the emergence of new technologies and materials. However, have these innovations truly arrived in every dental office?

Well, in continuation of my response to your first question, there are two major problems that the dental community has been facing in recent years, incorrect implant positioning and peri-implantitis both being difficult to resolve. As patients become more aware of these complications, they expect and demand more esthetics and predictable results. New technologies such as high-resolution CBCT, CAD/CAM abutment manufacture, abutments produced using new zirconia technologies, and digital planning are already widely in use in everyday dentistry, minimizing risks, as well as enhancing esthetics and treatment workflow.

Have digital solutions changed the way dental restorations and full-mouth rehabilitations in particular have been performed over the past several years?

Digital planning, intra-oral digital impressions and CAD/CAM tech-

Away Kits for the MAP System

In cooperation with experts in endodontics and dental surgeons worldwide, we have developed and are proud to introduce 4 different kits available for the MAP System. Each kit meets the specific needs of the different MAP System users (novice or accustomed general practitioner, endodontist and dental surgeon).

The MAP Needles now come with colored plastic plungers according to their respective diameter, for easier use and size identification.

The MAP System provides a unique and efficient method, enabling any dentist to place MTA or other endodontic repair materials with precision and no waste.

www.pdsach.ch

Produits Dentaires

Swiss quality dental products

PAN ARAB ENDODONTIC CONFERENCE

Register for Dr. Tonini’s session and workshop in the PAN Arab Endodontic Conference!!

6-8 December 2017 (Dusit Thani Lake View, Cairo - Egypt)

Booths # 29 & 30

www.paecc2017.com
...digital technology is a very helpful tool, especially for the novice dentist, for implementing these rules and simplifying the treatment workflow.

In your experience, what is the best way to achieve a natural looking implant crown? Irrespective of the digital revolution, the hand skills of a talented dental technician are indispensable, especially in the case of a single implant crown next to natural teeth. Machines will never replace the human hand, as individual perception of every case, the knowledge of biology and anatomy of the greatest importance. The factors that determine the success and natural appearance of an implant crown are accurate implant positioning, meticulous bone- and soft-tissue handling, and a skilled dental technician.

The number of implants placed worldwide is expected to double over the next five to six years. Consequently, education efforts have to double too in order to ensure that dentists are adequately trained in implant placement. Do you agree with this statement?

Of course, however, and I say this al- though I am a faculty member of the School of Dentistry of the University of Athens, which provides education at the highest level, students are still unfortunately not adequately trained in implants. Postgraduate studies in a university environment or very well-organized implant master programs are necessary for a dentist to be able to place or restore implants.

We have seen quite a few different concepts emerging over the last several years in aesthetic dentistry, such as bio- emulation and smile design. Which concepts will have the most impact in the future and change the way aesthetic dentistry is performed?

Well, as a prosthodontist, I have to say there is nothing new in these concepts. Basic aesthetic rules are to be applied to every prosthodontic case, such as tooth positioning, proportion, occlusion, color and design. However, digital technology is a very helpful tool, especially for the novice dentist, for implementing these rules and simplifying the treatment workflow. The same applies to bio-emulation. Biological concepts, improved materials and techniques are always there to simplify clinical dentistry and reduce potential errors and complications.

What is the position of aesthetic dentistry in the development of dental specialties in your opinion? Aesthetic dentistry is not a recognized specialty generally, falling mainly under prosthodontics. I do not think aesthetic dentistry should be a stand-alone specialty. Being trained in a periodontic-prosthodontic environment (University of Freiburg, Germany, under Prof. J.R. Strutz), I believe that a modern restorative dentist should be adequately trained in more than one main area.

Periodontics, prosthodontics and restorative dentistry all constitute what is considered aesthetic dentistry.

Certificate & Diploma in Restorative Aesthetic Dentistry

From British Academy of Restorative Dentistry

Dubai 2018-2020

Certificate | 4 Modules | 15 Days

Module 1 | 04-06 October 2018 | Prof. Paul Tipton, Dr. Adam Toft & Dr. Ash Rayeral

Certificate in Treatment Planning in Advanced Restorative Dentistry | The Principles of Occlusion in Advanced Restorative Dentistry | Tooth Preparation in Advanced Restorative Dentistry with Prof. Paul Tipton, Dr. Adam Toft & Dr. Ash Rayeral

Module 2 | 14-17 November 2018 | Prof. Paul Tipton & Dr. Adam Toft & Matthew Halyo & Dr. Ash Rayeral

Minimally Invasive Veneer Preparations | Master the Art of Composites Part 1 - Adhesion Composites & Anterior Composites Restorations | Master the Art of Composites Part 2 - Composite Veneers | Master the Art Composites Part 3 - Posterior Composites Restorations

Module 3 | 1 February 2019 | Prof. Paul Tipton & Prof. James Prichard & Dr. Adam Toft & Dr. Ash Rayeral

Enhance Your Expertise in Endo Part 1 & Part 2 | Occlusal Examination | Erasmus & Zirconia Anterior Restorations

Module 4 | May 2019 | Prof. Paul Tipton & Dr. Malcolm Riley & Dr. Adam Toft & Dr. Ash Rayeral

Bridge Design | Aesthetic Perio Connective Tissue Grafting | Aesthetic Perio Crown Lengthening | Modern Post and Core Techniques

Diploma | 4 Modules | 15 Days

Module 5 | October 2019 | Prof. Paul Tipton & Dr. James Russell & Dr. Adam Toft & Dr. Ash Rayeral

Bridge Preparation Techniques | Articulator selection in Restorative Dentistry | Porcelain Inlays & Onlays | Veneer Cementation Techniques Practical

Module 6 | November 2019 | Prof. Paul Tipton, Prof. Goran Urde & Mr. Bill Sharpling & Dr. Adam Toft


Module 7 | February 2020 | Prof. Paul Tipton & Prof. Edward Lynch & Dr. Adam Toft & Dr. Ash Rayeral

TMJ, It’s Diagnosis and Treatment | Gold and Zirconia Posterior Crown and Partial Crown Prepar Techniques | Minimally Invasive Dentistry | Adhesive Bridge Preparation Techniques

Module 8 | May 2020 | Prof. Paul Tipton & Dr. James Russell & Dr. Adam Toft & Dr. Ash Rayeral

Digital Dentistry Workflow | Orthodontics and Restorative Interface | AM-Occlusion 3 Seminar, Treatment of the Worn Dentition, Vertical Dimension and Facial Aesthetics Lectures | PMI Exams

+971 528423659 | p.mollov@cappmea.com
www.cappmea.com/capptipton
Marketing dentistry in the global connected economy

By Chris Barrow, UK

In an information rich world, the wealth of information means a dearth of something else: a scarcity of whatever it is that information consumes. What information consumes is rather obvious; it consumes the attention of its recipients. Hence a wealth of information creates a poverty of attention. These prophetic lines were shared by Nobel laureate and social scientist Dr. Herbert Simon in 1971. It seems incredible to think that his words predate the internet by 20 years. Simon lived in a world in which advertisers tried to gain our attention with billboards, newspaper advertisements and television commercials. At the same time, the local ma-and-pa business prospered through convenience and human interest.

The connected economy and growth in population have created statistics that are beyond our comprehension. There were 60 trillion websites at the last count and every year the internet grows by eight million new songs, two million new books, 16,000 new films, 30 billion blog posts and 112 billion tweets. Google handles 35 billion e-mails every day alone, and 1.8 billion tweets. Google handles 35 billion films, 30 billion blog posts and 182 two million new books, 16,000 new

films, 30 billion blog posts and 112 billion tweets. Google handles 35 billion e-mails every day alone, and 18

billion photographs are uploaded to the cloud from everywhere around the globe. I speculate as to how many of those photographs are of happy, smiling faces.

IBM tells us that we are “a world away in data”, 80 per cent of which is currently invisible to our computers; however, with the IBM Watson project, the company intends to use cognitive computing to bring that data into a usable table domain. With global health care data expected to grow by 99 per cent in the next 12 months, the search is on to find a new unified theory that will bring all of this information to the fingertips of government, business and individuals.

The question is, can we cope with this? In his book Homo Deus: A Brief History of Tomorrow, author visualizes a completely connected world in which “Data-ism” dominates. There he writes: “Sapiens evolved in the savannah thousands of years ago and their algorithms are not built to handle 21st Century data flows. We might try to upgrade the human data processing system but this may not be enough. The Internet-of-all-things may create such huge and rapid data flows that even upgraded human algorithms will not be able to handle it. When can replace the horse-drawn carriage, we didn’t upgrade horses—we replaced them. Perhaps it is time to do the same with Homo Sapiens.”

A rather grim and ominous suggestion perhaps, but by joining our sensibilities, Hawai’i makes us pause for thought. Let us narrow our field of vision from these impossible numbers and facts. Purists suggest that you and I are interrupted by advertising and brand exposures 5,000 times in an average day and mentally register around 350 of these. We note 150, think briefly about 80 and pause at 12 to think about whether they are relevant to us at this time. Thus, the challenge facing the dental marketer is how to become one of 12 of 5,000 at the right time, on the right day, for the right person.

Big business has a simple solution to this problem; it is called big money. Whether it is a Super Bowl television commercial, a giant billboard on a motorway or, nowadays, massive expenditure on internet visibility via paid media, those with the deepest pockets offering the best products and services are the winners in the race to attract that poverty of attention. Everyone wants to be a ‘thought leader’ in their field. Where does this place the independently owned dental practice? Are you a mouse, wandering between the legs of a herd of bull elephants, all trumpeting their mating call. No matter how loudly you squeak, at best your sound will be drowned out and at worst you may be trampled in the rush.

I have watched the world of digital marketing in dentistry very carefully over the last five years and have reached some conclusions that are likely to land me in trouble with traditional digital marketers. However, I did not get where I am today without stepping on the fenced-off grass every now and then, running along the side of the swimming pool and tearing up the rule book. So, here is my recommended list of actions to be taken by the independent dental practice in order to gain attention.

1. Use good search engine optimisation (SEO) to optimise your position in Google’s organic search. SEO is a technical skill that has to be delivered

Phantom Head Course: Veneers, Bonded Crowns and Bridge Design

Prof. Paul Tipton, UK

PRICE: 2,200 AED (US$ 599 USD)

TIME & LOCATION: Saturday 06 January 2018 | 09:00 – 18:00
CAPP Training Institute, Dubai, UAE

COURSE OUTLINE:
- Delegates will learn about:
  - The latest practical techniques in Aesthetic Dentistry,
  - Tooth preparation for veneers and crowns on phantom heads hands-on training,
  - Understand when and how to prepare teeth for different styles of veneer press.
  - Learn when and how to prepare teeth for different types of aesthetic crowns,
  - Understand and use the correct types of impression materials and soft tissue manipulation techniques.

CONTACT:
Email: events@cappmea.com
Mob: +971 50 2793711

ADA CERP is a registered provider and this activity is 7 CE Credits

7 CE Credits
Est. 6-7 HAAD
Est. 5-6 DHA

Template for end-of-treatment protocol

So Mr Patient, now that we have arrived at the end of your course of treatment, I’d like to ask a couple of questions:

- Are you happy with the clinical outcome?
- Are you happy with the customer service that the team delivered?

If so, I’d like to ask some favours:
1. We are growing the practice at the moment and we would love to see more people like you, because we like you! Would it be OK to give you three of my referral business cards to pass on to any family, friend or colleague who may be interested in visiting our practice?
2. We have noticed that online reviews are growing in importance and would like to invite you to submit a review of your experience on Google, Facebook or any other review site that you may be connected to.
3. We love to collect testimonials from happy patients. They are great for our marketing and can give confidence to other patients who may be nervous. We find that 90% of those who do consent to a testimonial prefer a written commentary, as they are uncomfortable with a video camera recording, whereas 10% are happy to be filmed and photographed. May I ask, are you a 90% or a 10%er?
4. If a 90% er, I’d love to organise a written testimonial from you.
5. If a 10% er, we would like to invite you to one of our quarterly video testimonial evenings here at the practice. Every three months, we set aside some time early evening and invite four to six of our 10%’ers to come along for some light refreshments and to have their photograph taken professionally (at our expense) and to be filmed for four minutes or so. The questions we ask on video are:

- How did you find us originally? What was it that had you looking?
- How was your customer service experience? What difference did the treatment make?
- It would be lovely to invite you to our next event. The dates are...
ended by experts. Google changes its own goalposts regularly and the savvy SEO guru will know that and take appropriate action quickly.

2. Maximize the collection of Google reviews, user reviews via Facebook and critic reviews via proprietorial sites like WhatClinic.com, NHS Choices and Compare-the-treatment.com in the UK. In September 2016, Google changed the rules twice; first by including external reviews alongside its own in searches and second by altering its own search criteria to favour businesses with in excess of 100 Google reviews. It is necessary that your marketing activity be adjusted to reflect such changes.

3. Connect to your patients through a well-maintained social media channel like Facebook or Twitter (and deliver daily human interest content). Remember that those 1.8 billion photograph uploads per day include the inevitable selfies. Many of my clients now take a patient selfie at the end of a course of aesthetic dental treatment. To quote again from Harari’s new book: “If you experience something—record it. If you record something—upload it. If you upload something—share it.”

4. Build a website that engages the visitor through video and visual testimonials. Your most powerful marketing collateral is the stories that your patients can tell about the difference that you have made to their lives.

5. Collect visitors’ e-mail addresses and consent (to e-mail) via white paper marketing. A coffee shop, hotel or airport exchanges free Wi-Fi access for an e-mail address and permission to keep one informed. You can do the same by exchanging useful information (free guides).

6. Nurture long-term relationships with patients and prospects by publishing a monthly human interest e-mail newsletter.

7. Deal with initial enquiries directed through the Internet, by telephone or in person in a polished manner.

8. Create a memorable new patient experience from initial consultation all the way through to treatment delivery.

9. Employ a strict end-of-treatment protocol to capture reviews, testimonials and social connections (as well as plan membership).

I have given you nine marketing actions designed especially for the smaller business. Actions that should be avoided by the independent dental practices are seeking to gain attention by paying through the nose for Google or Facebook advertising, broadcasting non-human interest material or selling services on price, discount or special offer. This is because every week I hear from dentists and their marketing teams that advertising to strangers, using jargon and cutting prices at best attract nobody and at worst attract bargain-hunters, price-shoppers and messers.

“A wealth of information creates a poverty of attention.” We end where we began. The challenge is for the mouse to gain attention without competing with the bull elephants. You can only do that by stepping away from the herd of elephants and delivering your story in a different way and a different place. For me, that means human interest, personal service and recommendation, and so when I am working with clients on their marketing plans, we focus on and mobilise their most valuable asset: the goodwill of their existing patients.

Editorial note: This article first appeared in Dental Tribune United Kingdom Edition 8/16.
Certificate & Diploma in Clinical Endodontics

From British Academy of Restorative Dentistry

DUBAI 2018-2019

Certificate  |  3 Modules  |  12 Days

Module 1  |  22-25 February 2018  |  Fundamental of Endodontics
Programme outline: Introduction to contemporary endodontics. Understanding of instrument design and its effect on prevention of iatrogenic errors.
Hands-on: Hand filing and lateral compaction techniques.

Module 2  |  26-29 April 2018 (4 days)  |  Aetiology and Diagnosis of Endodontic Disease
Programme outline: Microbiology of endodontic disease and its relationship with the host immune response.
Hands-on: Rotary NiTi and advanced thermoplastic obturation techniques.

Module 3  |  16-19 August 2018 (4 days)  |  Traumatic Injury, Pain and Its Management
Programme outline: Emergency endodontics and diagnosis in depth. Odontogenic and non-odontogenic pain. Diagnosis and management.
Hands-on: Rotary NiTi and thermoplastic obturation techniques.

Diploma  |  3 Modules  |  12 Days

Module 4  |  November 2018 (4 days)  |  Dental Resorption and Pattern of Tooth Fracture
Programme outline: Understanding advanced endodontic problems.
Hands-on: Reciprocating NiTi and Carrier based thermoplastic obturation techniques.

Module 5  |  February 2019 (4 days)  |  Restoration of Endodontically Treated Teeth
Hands-on: Placement of core restorations and post retained restorations.

Module 6  |  May 2019 (4 days)  |  Management of Endodontic Failure
Programme outline: Endodontic retreatment, surgical endodontics.

+971 528423659 | p.mollov@cappmea.com
www.cappmea.com/endo
Currently, Nadine is “working” at the ArtScience Museum in Singapore, where she interacts with visitors. “No-one is afraid of Nadine. Children who visit the exhibition can’t get enough of her; they don’t want to leave,” Thalmann said. Further research will experiment with different types of speech synthesis and models of personality. Right now, the researchers are working on a male robot, Charlie.

In the future, robots with social functions such as Nadine could be used for looking after and stimulating elderly people and patients with dementia. In dentistry, the MEDi robot developed by US company RxRobots has already been successfully used in the paediatric dental setting since 2015. The robot helps distract children with initial anxiety and fear, thereby enabling the dental team to continue with their work with less interruption.

Celebrating its 100th anniversary this year, the Knut and Alice Wallenberg Foundation is one of Europe’s largest private research funders. The jubilee symposium in Linköping was received enthusiastically by both the audience and the organizers alike. “Today has given me a great deal of inspiration. It’s not often that I can sit and listen for a full day, but this has been truly interesting and exciting,” commented LiU Vice Chancellor Prof. Helen Dannetun on the successful event. "I am impressed and fascinated by research that leads to discoveries that we didn’t even know that we were looking for," said Peter Wallenberg Jr, Chairman of the Knut and Alice Wallenberg Foundation. "Some Swedish universities are exceptional, and Linköping is one of them. This is a relatively small university which focuses on a few areas, and is doing an excellent job with limited resources," he added.

**From organic electronics to social robots:**

**Digital pioneers illustrate the future**
By Dental Tribune MEA / CAPPmea

AACHEN, Germany: The Rheinisch-Westfälische Technische Hochschule Aachen (RWTH) has recently held its award ceremony in The Netherlands for the fellowship in laser therapy on 12th October 2017.

The RWTH Aachen University recently held its awarding ceremony in The Netherlands on 12th October 2017. For the upcoming edition in Amsterdam, the organisation anticipates offering a similar number of highlights, including a live surgery part of the Master Clinician/Periodontal Specialist Forum and a number of sessions aimed at the various members of the dental team. The scientific programme will be accompanied by a large trade exhibition, which will feature the latest innovations from leaders in the field, such as CURAPROX, EMS and Philips.

With its congress newspaper, DTI already provides daily news on all significant global dental congresses and exhibitions, including the International Dental Show in Germany, the FDI World Dental Congress and the Annual Scientific Meeting of the European Association for Osseointegration.

First held in Paris in France in 1994, EuroPerio is organised every three years by the European Federation of Periodontology, a professional body representing over 30 organisations, with 14,000 members, worldwide. The last edition saw a record attendance of over 10,000 visitors, including some of the most high-profile experts and scientists in the field.

For the upcoming edition in Amsterdam, the organisator is anticipating offering a similar number of highlights. The students’ help teaching oral health and hygiene on behalf of the Dental Wellness Trust, a charity that aims to promote general dental wellness to less fortunate communities around the world. The students helped teach oral health as a business model.

Dr. Shallen Verma, currently practicing in the dental department of Majid Al Futtaim group, City Center Clinic and has been in clinical practice for over 21 years. The unique ceremony was held at the Bloemenvalt Vaux Hotel, The Netherlands where the event continued for over four hours included a presentation and certificate awarding by Prof. Norbert Gutknecht.
Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into wider context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

External Features
• Written by dentists for dentists – authors who know exactly what students need for safe clinical practice!
• Contains full coverage of topics such as tooth eruption, tooth support, the effects of aging on teeth and associated soft tissues, periodontal regeneration, and the use of isotope analysis
• Includes sectional anatomy and functional anatomy (covering mastication, swallowing, speech, taste and olfaction, thermoreception)
• Many chapters include Clinical Considerations which explore associated pathological findings as well as other topics of consideration such as the use of local anaesthetics, temporomandibular joint disorders and malocclusion
• Explores bone structure and remodelling – including potential bone atrophy following tooth extraction, its relevance to orthodontic treatment and implantology, trauma and malignancy
• Rich with over 1300 images including schematic artworks, radiological images, electron-micrographs, cadaveric and clinical photographs, all specially selected to make learning and recall as easy as possible

Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into wider context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

Celtra® Press
Developed to make a difference

The benefits of the Celtra® Press system for your dental laboratory:
• A unique combination of excellent esthetics and high strength > 500 MPa (natural opalescence and translucency, stable margins)
• Excellent shade fidelity according to the VITA shade system and a surprising chameleon effect (easy shade adaptation to the surrounding teeth)
• Simple and fast processing (minimal reaction layer, easy to polish, a simplified shade system reduces inventory costs)

celtra-dentsplysirona.com

Barry Berkovitz is Emeritus Reader in Dental Anatomy, King’s College London, United Kingdom. Oral Anatomy, Histology and Embryology is founded on knowledge acquired over 40 years of teaching and research experience.

Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into wider context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

External Features
• Written by dentists for dentists – authors who know exactly what students need for safe clinical practice!
• Contains full coverage of topics such as tooth eruption, tooth support, the effects of aging on teeth and associated soft tissues, periodontal regeneration, and the use of isotope analysis
• Includes sectional anatomy and functional anatomy (covering mastication, swallowing, speech, taste and olfaction, thermoreception)
• Many chapters include Clinical Considerations which explore associated pathological findings as well as other topics of consideration such as the use of local anaesthetics, temporomandibular joint disorders and malocclusion
• Explores bone structure and remodelling – including potential bone atrophy following tooth extraction, its relevance to orthodontic treatment and implantology, trauma and malignancy
• Rich with over 1300 images including schematic artworks, radiological images, electron-micrographs, cadaveric and clinical photographs, all specially selected to make learning and recall as easy as possible

Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into wider context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

External Features
• Written by dentists for dentists – authors who know exactly what students need for safe clinical practice!
• Contains full coverage of topics such as tooth eruption, tooth support, the effects of aging on teeth and associated soft tissues, periodontal regeneration, and the use of isotope analysis
• Includes sectional anatomy and functional anatomy (covering mastication, swallowing, speech, taste and olfaction, thermoreception)
• Many chapters include Clinical Considerations which explore associated pathological findings as well as other topics of consideration such as the use of local anaesthetics, temporomandibular joint disorders and malocclusion
• Explores bone structure and remodelling – including potential bone atrophy following tooth extraction, its relevance to orthodontic treatment and implantology, trauma and malignancy
• Rich with over 1300 images including schematic artworks, radiological images, electron-micrographs, cadaveric and clinical photographs, all specially selected to make learning and recall as easy as possible

Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into wider context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

External Features
• Written by dentists for dentists – authors who know exactly what students need for safe clinical practice!
• Contains full coverage of topics such as tooth eruption, tooth support, the effects of aging on teeth and associated soft tissues, periodontal regeneration, and the use of isotope analysis
• Includes sectional anatomy and functional anatomy (covering mastication, swallowing, speech, taste and olfaction, thermoreception)
• Many chapters include Clinical Considerations which explore associated pathological findings as well as other topics of consideration such as the use of local anaesthetics, temporomandibular joint disorders and malocclusion
• Explores bone structure and remodelling – including potential bone atrophy following tooth extraction, its relevance to orthodontic treatment and implantology, trauma and malignancy
• Rich with over 1300 images including schematic artworks, radiological images, electron-micrographs, cadaveric and clinical photographs, all specially selected to make learning and recall as easy as possible