Inauguration of Carestream Dental Training Centre for Knowledge and Care in Ajman UAE

By Dental Tribune Middle East

Ajman, UAE: Carestream Dental hosted the official opening of the Ajman University Dental Centre for Care in UAE on 30th of October 2013. Dr. Aisha Sultan, Director of Dental Services, MOH, UAE was the Guest of Honor alongside more than 60 attendees.

The event was opened with a warm welcome by Dr. Mohd. Kashif Shafiq of Ajman University Dental College who introduced Dr. Aisha Sultan Alsuwaidi, Director of Dental Services at the Ministry of Health in UAE alongside several VIPs including Deans of Health in UAE as well as regional dental industry dealers.

Carestream Dental has partnered up with Ajman University to combine academia and business through the opening of the new Carestream Dental Training Centre resulting in a win-win situation across the board. According to Fritz Dittman, Regional Sales and Service Director Northern Europe, Middle East, Russia and Africa, “Next to the fact that the University has a great team, being able to take X-Rays and constantly have our equipment in use are the main reasons behind this partnership. The benefits are clear, this is a unique opportunity which will lead to great things. We can train our customers, their technicians, dealer engineers and in the future application training for dentists and clinicians as the equipment evolves. Customers from the Middle East no longer have to travel to USA or Europe to be trained how to use our technologies."

The Ajman University Dental College is one of the pioneers in oral and dental healthcare education in the country with well-structured and accredited programs. With over 150 dental units and a very experienced and highly qualified faculty, the college is one of the largest in the middle-east providing free dental services to dental patients. Under the leadership of Prof. Salem Abu Fanas, Dean of Ajman University of Science & Technology the college has produced 12 batches of quality dental graduates who are already very well received by the dental industry. Mr. Osama Saeed Abdulla Salman, Vice President of Ajman University of Science & Technology comment in his opening speech, “Ajan University of Sciences & Technology has become a hub for higher education in the entire region. We are now working hard on becoming the hub leader in Research & Development. R&D is what makes Carestream and the University what we are, it is our dream, our ambition and our vision.”

Prof. Salem Abu Fanas, Dean of Ajman University Dental College further explained “Our vision at the Ajman University Dental College is clear, we are catering for 150 clinics and until today we have treated over 40,000 patients coming to Ajman from all over the UAE. There is a great demand for education. Last year alone we received more than 510 applications from students willing to join our university, double of what we can cope with.” Prof. Abu Fanas further commented on the partnership with Carestream as “a new landmark for the college”. The University is very pleased with these new facilities, “I would like to express my sincere gratitude to those who made it possible. Thank you to Carestream for enabling this project to take place as well as Mr. Fritz Dittman and Montessori Ben Tal together with their fantastic team who all went far beyond their core of duty to see the success of it” were the closing words of Prof. Salem Abu Fanas.

After the ceremony, the delegates were taken for a tour of the new facilities witnessing the ribbon-cutting of the new Training Centre. Make sure you visit Carestream at AEEDC Dubai 2014.

“Carestream, Innovation made Simple”

By Dental Tribune Middle East

Ajman, UAE: Dental Tribune Middle East & Africa covered the Inauguration of the Carestream Dental Training Centre for Knowledge and Care in Ajman, UAE. During the event we caught up with Dave F. Pullen, General Manager Dental Business Europe, Russia and Africa and Fritz Dittman, Regional Sales and Service Director for Northern Europe, Middle East, Russia and Africa.

DTMEA: Why should the dentists chose Carestream?

Dave Pullen: Carestream originated from Eastman Kodak. All the heritage, trust and quality in Eastman Kodak was inherited by Carestream. Then a company called Onex (equity company) helped to extract the medical and dental business from Kodak and invested in Carestream which became a 2.5 billion corporation. Prior to the rebranding of Carestream, Kodak bought Trophy, known for innovating the sensor and

> Page 11
A new CAD CAM system from Carestream Dental extremely flexible and very easy to use

By Ernesto Jaconelli

This year’s AEEDC 2014 will see Carestream Dental launch its own CAD CAM on site restoration system to the Middle East Dental Trade. (Stand No 256)

The complete system is gathered under the banner title of CS Solutions and brings to the market a system that allows the Dentist to perform everyday restorations in considerably less time as well as in the comfort of their own practice. In fact a single tooth restoration can be completed in as little as one hour.

Most CAD CAM systems that are currently available are actually, “closed” systems that lock the user into using only the equipment and software provided from that manufacturer. However, CS Solutions is an “open” system – giving the dentist the flexibility to choose from a comprehensive integrated system or a series of standalone solutions that can be adapted to their preferred workflow and practice layout. This means that the dentist can do scans either from their hand held scanner, the CS 3500, or they can scan an impression on a CBCT system such as the CS 9000 3D. They then have the option of designing the crown themselves on CS Restore and completing the milling on site on the CS 3000 or they can send the data via the internet to their lab, which can produce the crown on their system. All the options are there for the Dentists to choose what works best for them.

CS Solution products are extremely easy to use and are compatible with many third-party CAD systems or restorative design programs, and are covered by warranty to guarantee their long-lasting top performance.

So make sure you visit the Carestream Dental Stand at AEEDC 2014 and acquaint yourself with this amazing new opportunity.
NEW: Philips Sonicare FlexCare Platinum

For outstanding cleaning, even deep between the teeth

Philips has the right sonic toothbrush for every cleaning need. The latest innovation is called Philips Sonicare FlexCare Platinum. Its innovative pressure sensor gives immediate feedback in a simple manner if too much pressure on the brush head minimizes the vibrations. This makes the Philips Sonicare FlexCare Platinum ideal for those of your patients who are worried about using too much pressure when cleaning with an electronic toothbrush. Nine individual settings and intensity levels thereby make adaptation to the individual cleaning requirements possible.

Pressure sensor
This innovative sensor gives simple and intuitive feedback if the brush head is pressed down too hard.

3 cleaning settings
- Clean – ensures optimal plaque removal (standard)
- White – removes discoloration of the tooth surface in 2 minutes, and the front teeth are whitened and polished in a further 30 seconds.
- GumCare – combines 2 minutes in the Clean setting with 1 minute of gentle gum massage for healthy gums.

3 intensity levels
Maximum comfort with the 3 adjustable intensity levels: low (for sensitive areas), medium and high. Each of the 3 intensity levels can be combined with each of the 3 cleaning settings.

Philips Sonicare InterCare brush head
Extra long filaments reach deep into the spaces between teeth and ensure an excellent plaque removal there compared to a manual toothbrush. For better tooth and gum health.

UV-Sanitizer
With the UV light technology from Philips, up to 99% of the bacteria and viruses on the brush head are rendered harmless – in only 10 minutes.

Lithium-ion rechargeable battery
With 3-week working life

Removes up to 6x more plaque in the spaces between the teeth in comparison to a manual toothbrush.

1 E. coli, S. mutans and HSV, HA
New Philips Zoom WhiteSpeed Light-Activated Whitening System.
A better experience for your patients and your practice.

Philips Zoom In-Office Whitening kit makes treatments easier
Packed in procedural order, you get everything you need for each treatment, including Philips Zoom at-home whitening gel for follow up and maintenance complete in a single package. The Philips Zoom Kit also includes simplified visual instructions.

Unique products for your sensitive patients
Each treatment comes with a Patient Post Care and Maintenance kit that includes the Relief ACP Oral Care Gel. This unique formula combines potassium nitrate for sensitivity relief along with Amorphous Calcium Phosphate (ACP) that helps create healthier smiles through advanced enamel protection. To ensure a more comfortable experience all around, instruct patients to use it for 10-30 minutes after treatment.

New Philips Zoom WhiteSpeed Whitening LED Accelerator
The advanced Philips blue LED technology provides approximately 50,000 hours of use—reducing operating costs, downtime and is 40% more energy efficient. The light also emits 100% greater light intensity* with no compromise to safety. Redesigned to be easier to position and more ergonomic, your patients and your treatment will be better than ever.

New support for your practice
Philips Zoom is funding a worldwide public relations campaign to drive patients to dental professionals, and new programs to help you quickly and easily integrate Zoom into your practice.

“With this new light the patient’s sensitivity is minimal, making the procedure much more pleasurable.”
—Juban Dental Care - Baton Rouge, LA

Reveal your patients’ most healthy, radiant smile with Philips Zoom WhiteSpeed

Give your patients the immediate white smile they want and the healthy white teeth they need, with the new Philips Zoom WhiteSpeed. The number one patient-requested professional teeth whitening brand® is clinically proven to deliver superior whitening results in just one office visit. WhiteSpeed is shown to whiten teeth up to 8 shades in 45 minutes; that’s 40% better than a comparable non-light activated system.†

The new Whitening LED Accelerator’s variable intensity settings allow you to customize the output to ensure each patient receives a more comfortable treatment. 91% of patients experienced little to no sensitivity with Zoom WhiteSpeed.‡

Now better than ever — Philips Zoom WhiteSpeed.

* In the U.S.
† Compared to Philips Dash
‡ Results based on 500 person study. Data on file.
Saliva and Oral Health

By Michael Edgar, Colin Dawes & Denis O'Mullane and contributed to by Helen Whelton

Excerpt from Saliva and Oral Health – An Essential Overview for the Healthcare Professional, 2012

The presence of saliva is vital to the maintenance of healthy hard (teeth) and soft (mucosa) oral tissues. Severe reduction of salivary output not only results in a rapid deterioration in oral health but also has a detrimental impact on the quality of life for the sufferer.

The complexity of this oral fluid is perhaps best appreciated by the consideration of its many and varied functions. The functions of saliva are largely protective; however, it also has other functions, including:

- Fluid/Lubricant – Coats hard and soft tissue which helps to protect against mechanical, thermal and chemical irritation and tooth wear. Assists smooth air flow, speech and swallowing.
- Ion Reservoir – Solution saturated with respect to tooth mineral facilitates remineralisation of the teeth.
- Buffer – Helps to neutralise plaque pH after eating, thus reducing time for demineralisation.
- Cleansing – Clears food and aids swallowing.
- Antimicrobial actions – Specific (e.g. sIgA) and non-specific (e.g. Lysozyme, Lactoferrin and Myeloperoxidase) antimicrobial mechanisms help to control the oral microflora.
- Agglutination – Agglutinins in saliva aggregate bacteria, resulting in accelerated clearance of bacterial cells. Examples are mucins and parotid saliva glycoproteins.
- Pellicle formation – Thin (0.5 μm) protective diffusion barrier formed on enamel from salivary and other proteins.
- Digestion – The enzyme amylase is the most abundant salivary enzyme; it splits starch foods into maltose, maltotriose and dextrins.
- Taste – Saliva acts as a solvent, thus allowing interaction of foodstuff with taste buds to facilitate taste.
- Water balance – Under conditions of dehydration, salivary flow is reduced, dryness of the mouth and information from osmoreceptors are translated into decreased urine production and increased drinking.
- Changes in plaque pH following sucrose ingestion and buffering capacity in the presence of saliva

The anatomy and physiology of salivary glands

Patients suffering from dry mouth can experience difficulty with eating, swallowing, speech, the wearing of dentures, trauma to and ulceration of the oral mucosa, taste alteration, poor oral hygiene, a burning sensation of the mucosa, oral infections including Candida and rapidly progressing dental caries. The sensation of dry mouth or xerostomia is becoming increasingly common in developed countries where adults are living longer. In addition, polypharmacy is very common among the older adult population and many commonly prescribed drugs cause a reduction in salivary flow. Xerostomia also occurs in Sjögren’s syndrome, which is not an uncommon condition.

In addition to specific diseases of the salivary glands, salivary flow is usually severely impaired following radiotherapy in the head and neck area for cancer treatment in both children and adults of all ages. Clearly oral dryness is a problem which faces an increasingly large proportion of the population. An understanding of saliva and its role in oral health will help to promote awareness among health care workers of the problems arising when the quantity or quality of saliva is decreased; this awareness and understanding is important to the prevention, early diagnosis and treatment of the condition.

There is an extensive body of research on saliva as a diagnostic fluid. It has been used to indicate an individual’s susceptibility; it has also been used to reflect systemic physiological and pathological changes which are mirrored in saliva. One of the major benefits of saliva is that it is easily available for non-invasive collection and analysis. It can be used to monitor the presence and levels of hormones, drugs, antibodies, microorganisms and ions.

The following information provides an overview of the functions of saliva, the anatomy and histology of salivary glands, the physiology of saliva formation, the constituents of saliva and the use of saliva as a diagnostic fluid, including its role in caries risk assessment.

Functions of Saliva

A complete preventive oral care routine should include regular check-ups, brushing, flossing and chewing sugarfree gum when on-the-go.

Oral care on-the-go.
Following a sucrose rinse the plaque pH is reduced from approximately 6.7 to less than 5.0 within a few minutes. Den- mineralisation of the enamel takes place below the critical pH of about 5.5. Plaque pH stays be- low the critical pH for approxi- mately 15-20 minutes and does not return to normal un- til about 40 minutes after the ingestion of the sucrose rinse. Once plaque pH recovers to a level above the critical pH, the enamel may be remineralised in the presence of saliva and oral fluids which are super- saturated with respect to hydroxyapatite and fluorapatite.

**Anatomy and histology**

The type of salivary secretion varies according to gland. Se- cretions from the parotid gland are watery in consistency, those from the submandibu- lar and sublingual glands, and particularly the minor mucous glands, are much more vis- cious, due to their glycoprotein content. The histology of the gland therefore varies accord- ing to gland type.

All of the salivary glands de- velop in a similar way. An in- growth of epithelium from the stomatodaeum extends deeply into the ectomesenchyme and branches profusely to form all the working parts of the gland. The surrounding ectomes- enchyme then differentiates to form the connective tissue component of the gland i.e. the capsule and fibrous septa that divide the major glands into lobes. These developments take place between 4 and 12 weeks of embryonic life, the parotids being the first and the sublingual and the minor salivary glands being the last to develop. The minor salivary glands are not surrounded by a capsule but are embedded within the connective tissue.

**Formation of saliva**

The fluid formation in salivary glands occurs in the end piec- es (acini) where serum cells produce a watery seromucous secretion and mucous cells produce a viscous mucin-rich secretion. These secretions are formed by the formation of inter- stitial fluid from blood in capil- laries, which is then modified by the end piece cells. This modified interstitial fluid is secreted into the lumen. From the lumen it passes through the ductal system where it is further modified. Most of the modification occurs in the stri- ated ducts where ion exchange takes place and the secretion is changed from an isotonic solu- tion to a hypotonic one. The composition of saliva is further modified in the excretory ducts before it finally secreted into the mouth.

**Physiology of saliva forma- tion**

**Composition and flow rate**

The composition of saliva var- ies according to many factors including the gland type from which it is secreted. Salivary flow rate exhibits circadian variation and peaks in the late afternoon. Normal salivary flow rates are in the region of 0.5-0.6 ml/min when unstimu- lated and 1.5-2.0 ml/min when stimulated. Approximately 0.5 – 0.6 litres of saliva is secreted per day. Many drugs used for the treatment of common con- ditions such as hypertension, depression and allergies (to mention but a few), also in- fluence salivary flow rate and composition.

**Saliva as a diagnostic fluid**

**Caries risk, assessment**

A number of caries risk as- sessment tests based on meas- urements in saliva have been developed, for example tests which measure salivary mu- tans streptococci and muta- bacterii and salivary buffering capacity. High levels of mutans strep- tococci, i.e. >105 colony forming units (CFUs) per ml of saliva, are associated with an increased risk of developing caries. High levels of Lactoba- cilli (>105 CFUs per ml saliva) are found amongst individuals with frequent carbohydrate consumption and are also as- sociated with an increased risk of caries.

Buffering capacity – Higher buffering capacity indicates better ability to neutralise acid and therefore more resistance to demineralisation. In addition to showing promise for the prediction of periodontal disease progression and caries levels, analysis of saliva has been employed in phar- macogenomics, as well as the evaluation and assessment of endocrine studies. Saliva not only plays a pivotal role in the maintenance of a healthy homeostatic condition in the oral cavity, but contributes to one’s overall health and wellbeing. Components from saliva interact in differ- ent ways with the dentition to protect the teeth. Patients who lack sufficient saliva suf- fer from many oral diseases, of which caries is only one. To al- leviate discomfort they are ad- vised to use saliva stimulants and substitutes which have the function of lubricating the oral surfaces. Chewing gum is increasingly being viewed as a delivery system for active agents that could potentially provide direct oral care ben- efits, as it promotes a strong flow of stimulated saliva.


*Underwriting costs for this Saliva and Oral Health edition were provided by Dr. Michael Dodds and The Wrigley Com- pany.*
Dr. Tariq Khoory (Head Dental Services, Dubai Health Authority (DHA)) and Dr. Aisha Sultan (Head of Dental Chapter Emirates Medical Association EMA and Head of Dental Services, Ministry of Health in Northern Emirates). I then got involved in establishing the Dubai campus of the Boston University School of Graduate Dentistry project in Dubai Health Care City. It was an eye opener on academics in post graduate education. In 2010 I joined the First Pediatric Dentistry Center in the UAE, established by Dr Elhami Nicolas as part of the Nicolas and Asp Dental Centers, where preventive and comprehensive services are offered within the scope of practice of the American Academy of Pediatric Dentistry (Guidelines of the APD).

Please elaborate on the process behind the formation of the EPDC and its members?

The pediatric dentistry community has evolved and blossomed to reach more than 100 professionals within the last 4 years with the establishment of the post graduate pediatric dentistry programs in the UAE and with the influx of specialists from overseas. Joining efforts with the mission to provide quality care to younger ones can better be rendered by gathering all efforts and joining in the path of excellence. Each child in the UAE has a fundamental right to his complete oral health care. The Emirates Pediatric Dentistry Club has a dutiful obligation to ensure that all children living in UAE receive high-quality and accessible oral health care.

What are the plans for the coming year 2014 for you and the EPDC?

The plan for our members is to provide advanced specialized continuing dental education for pediatric dentists. We are looking forward to working closely with The European University College for their hosting of the European Academy of Pediatric Dentistry (EAPD)/MENA Middle East chapter and North Africa) chapter from 27th until the 29th of March 2014. We are also planning to have collateral sessions during the Asia Pacific Dental Congress (APDC) from 14th until 17th June 2014. Also on the agenda is a side event to ADEDC from 5th until 7th of February 2014. On a larger scale we will be trying to establish close netted cooperation with the already established GCC Pediatric Dentistry Associations since we do face the same prevalence and incidences of oral health diseases in children.

What are some of the biggest challenges for Prevention and Oral Health awareness in the Emirates?

Evidence based research has provided us with data relevant to the caries index in the UAE. The index of caries in 6 year old children is 8 to 9. More explicitly, it reveals 8 to 9 carious primary teeth in the oral cavity of a 6 year old. The basic need of chewing is jeopardized leaving children victim to soft diet. Multiple episodes of emergencies due to dental pain are witnessed, whereby children miss school and experience severe episodes of spontaneous pain at night. Speech problems arise since the phonetics of letters rely on the palatal surfaces of upper and lower anterior teeth. Esthetic issues aggravate already challenges of bullying at school with missing front teeth or unaesthetic image of large cavious anterior dark lesions. At last but not least, loss of space due to premature extraction of primary teeth and loss of mesio-distal diameter have seen an influx of rise in orthodontics needs.

How does the EPDC plan to elevate the level of dental hygiene awareness and promote preventative oral health measures across UAE?

We know that changing habits is very challenging. In order for it to be successful it has to follow the bio-psycho-social model where the habit is treated as a community based initiative where we work closely with government entities (Dubai Health Authority and Ministry of Health) to help in their already established extensive oral health programs starting with pregnant mothers, moving to pediatricians during infants vaccine visits, involving mothers and working closely with school health programs. It will also involve including preventive treatment programs for permanent teeth as soon as they erupt (Fissure sealants). We will attempt to help out in the different levels of this chain reaction. Close cooperation has already been established with large oral health private players on the market who plan to help us out as part of their citizen responsibility initiative of giving back to the community (Procter & Gamble, Johnson and Johnson and Glaxo Smith Kline corporations).

Would you like to share additional information with the readers?

The establishment of the Pediatric Dentistry Chapter of the Emirates Medical Association is aimed at making a difference in children’s lives, all children, healthy and less healthy children. The community is faced with new challenges with Children with Special Needs. Behavior problems under the larger umbrella of Autism Spectrum Disorder is adding more difficulties to families. Working closely with all community groups is our daily endeavor. We will keep trying and learning in the long journey towards a caries free community. Sincerest thanks for your close interest in Pediatric Dentistry.

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European University College

European University College (EUC) is the first dental postgraduate institute in the Middle East to provide dental postgraduate education reflecting “Euro Western” standards of dental education and patient care. The College was founded on November 1st, 2006 and licensed as Nicolas & Asp Postgraduate Institute. The Institute underwent considerable growth and change and in 2009 was approved to operate the Abu Dhabi Emirate by the Abu Dhabi Education Council (ADEC). Further expansion resulted in Ministry of Higher Education and Scientific Research approved relicensing as Nicolas & Asp University College on August 23, 2009 and then European University College in 2011. EUC continues to expand and plans to add two more colleges and satellite teaching clinics in the near future.

EUC operates from a 17,000 sq. ft state-of-art facility in Dubai Healthcare City (DHCC) and is comprised of 32 dental chairs, 7 seminar and lecture halls, a pre-clinical laboratory, and a general anaesthesia facility; in addition, EUC maintains a lecturing facility in the Emirate of Abu Dhabi.

EUC offers the following programs:
- 3-year Master degree program in Orthodontics
- 3-year Master degree program in Pediatric Dentistry
- 3-year Master degree program in Endodontics
- 2-year program in Advanced Education in General Dentistry - 1-year modular Oral Implantology Diploma - 2-year Associate Degree in Dental Assisting program

Since EUC began postgraduate educational programs in 2007, 113 dentists have been admitted in various programs and, to date, 52 have graduated.

The student body is comprised of individuals from 25 countries and is represented by many cultures, the country with the largest representation is United Arab Emirates (35%).

By European University College

Qualident is standing in the 1st line to improve the communication between Dentist & Dental Lab in the region

As communication between the lab and clinic is important, and organizing the lab work between clinic and lab is delicate, Qualident Dental Laboratory is glad to announce the launch of the new web-based online ordering system, which will provide easy access, follow up and less time consuming to each dental case sent to Qualident lab. This new software is easy to use and understand, thus allowing the dentists to submit new cases, track existing cases, and view their billing information.

As now, it is easier and faster for dentists to communicate with the lab by the Dentist Messaging tool, regarding a Case or General message they would like to send, and receive with shorter time.

In addition, financial access will allow accountants or dentists to keep track on the latest invoices, statements, and policies by Qualident dental lab.

Qualident always strives communication technology between dental lab and clinic.

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www.qualident-online.com

For more information contact: info@dubaipostgraduate.com | www.euc.ac.ae | +971 4 362 4787
Located in Dubai Healthcare City (DHCC), Dubai, UAE
FKG Dentaire has inaugurated its Dubai based ME-A Office and Training Center

Managing Director of Dubai Medical Equipment, Dr. Omar Shuja, added: “The training in the dental business is extremely important as education is a key factor of achievement. We must help dental professionals to know how to use the products in the right way and have an excellent success rate with FKG Dentaire Products. Dubai is becoming central in the dental industry and having FKG Dentaire unique, high precision and top quality Swiss made products is a great opportunity for us”.

FKG Dentaire Training Center in Dubai is open to anyone who wants either to get trained in endodontics or just want to discover FKG Dentaire top quality instruments.

New top endo products to be presented by FKG Dentaire during the AEEDC

Managing Director of Dubai Medical Equipment, Dr. Omar Shuja, added: “The training in the dental business is extremely important as education is a key factor of achievement. We must help dental professionals to know how to use the products in the right way and have an excellent success rate with FKG Dentaire Products. Dubai is becoming central in the dental industry and having FKG Dentaire unique, high precision and top quality Swiss made products is a great opportunity for us”.

FKG Dentaire ME-A opening event at the Almas Tower, Dubai, UAE

By FKG

New top endo products to be presented by FKG Dentaire during the AEEDC

By FKG

DUBAI, UAE: Following the opening of its high end ME-A Office and Training center in Dubai UAE, FKG Dentaire is increasing its activity in the region to spread through Workshops, lectures, congress and close work with universities, its unique technologies:

- Unique rounded safety tip
- Alternated and sharp cutting edges to avoid screwing-in effect
- Exclusive electrochemical polishing to increase resistance to torsion and cyclic fatigue of NiTi
- SafetyMemoDisc (SMD) reliable monitoring of metal fatigue and number of uses.

Holding a booth for the 2014 AEEDC (Booth 610, hall 8) FKG is also inviting two international endodontists renowned for the high quality of their work to share their FKG Dentaire experience.

Contact Information

For more information on the Dubai training center: info@fkg.ch / www.fkg.ch

By FKG

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18 EVENTS

DENTAL TRIBUNE Middle East & Africa Edition | January - February 2014
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info@vertex-dental.com | www.vertex-dental.com
University of Sharjah College of Dentistry signs MOU with Crest & Oral-B

By Dental Tribune Middle East

Sharjah, UAE: In line with the University of Sharjah’s interest in the development of students’ academic excellence, and its belief in the importance of oral health education and promotion, the College of Dentistry, signed a memorandum of understanding (MOU) with Crest & Oral-B.

This event took place on October 27th, 2013 during a ceremony at the Medical & Health Sciences Campus, University of Sharjah. The agreement was signed by Dr. Guy Goffin, Director of Professional and Scientific Relations EMEA, Procter & Gamble and Professor Hossam Hamdy, Vice Chancellor for the Medical & Health Sciences Colleges.

The signing was witnessed by Professor Richard Simonsen, Dean of the College of Dentistry and Dr. Ashhad Kazi, Professional & Academic Relations Consultant (AP) for Crest & Oral-B. The MOU includes an agreement to hold continuing educational courses, participate in research at the newly established Oral Health Center, University of Sharjah as well as supporting the undergraduate students’ education program at the College of Dentistry.

Prof. Eng. Samy A. Mahmoud, Chancellor of University of Sharjah, delivered his address by extending his congratulations to both parties emphasizing that this agreement reflects the great need for education and training in the field of preventive dentistry in the region. Prof. Hossam Hamdy added that this collaboration with Crest & Oral-B is in line with the goals and objectives of the Center of Oral Health that will take the lead in oral health education and research in the area of preventive dentistry.

In his speech, Dr. Guy Goffin added: “The vision of Procter & Gamble Oral Care is to improve oral health of more people in more parts of the world more completely”. He also remarked that “Thanks to a strong emphasis on research and development, Crest & Oral-B became a global leader in oral health products like dentifrices, brushes, floss and mouth wash. Within Procter & Gamble (the parent company), we deliver education on the science of preventive dentistry and oral care products for dental students and populations at large. That is why this agreement with Sharjah University is so important for both partners.”

Professor Richard Simonsen Dean of the College of Dentistry, University of Sharjah expressed his enthusiasm regarding the collaboration between the College of Dentistry and Crest & Oral-B, indicating that one of the important missions of the College of Dentistry is to serve the community and reduce the burden of oral disease in the UAE population and that this agreement will support this mission towards better oral health for the community.

The signing ceremony took place in the presence of Prof. Rani Samsudin, Professor of Oral and Maxillo-Facial Surgery and former Dean of College of Dentistry, Dr. Manal Awad, Associate Professor of Community Dentistry and Director of the Center for Oral Health and Dr. Hatem El-Damanhoury, Chair of Continuing Dental Education and Professional development, College of Dentistry.

DTMEA was present to cover the event.
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5x

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1 COMPLETE SENSITIVITY TOOTHPASTE
SPECIALY DESIGNED WITH 7 BENEFITS*

All-round care for dentine hypersensitivity patients*1-6

We are constantly evolving our specialist range to meet the differing needs of dentine hypersensitivity patients. That's why we developed Sensodyne® Complete Protection.

SENSITIVITY  ENAMEL  CLEAN  GUMS  FRESH  PLAQUE  WHITENING

*With twice daily brushing

1 denture

Everyday, day after day, your patient’s denture will have to support thousands of tasks. So it’s little wonder that even people with well-fitting dentures will have problems with trapped food, fears their denture will dislodge or a concern about bad breath.

This is where a Daily Denture Care Regime from Corega fits in

Corega adhesive
- Proven to improve bite force by 38% in well fitting dentures,¹ which improves your patient’s ability to eat difficult foods
- Provides all day hold and helps seal out 74% more food particles compared to no adhesive,² helping to reduce the irritation and pain they cause

Corega cleanser
- Proven to manage denture hygiene effectively*³
- Reduces plaque build-up with proven⁴ bactericidal⁵ and antifungal activity⁶

¹Proven bactericidal activity against gram-negative bacteria⁴
²Kills 99.9% of bacteria

1 denture care regime

By recommending a Daily Denture Care Regime to your patients with dentures, you can be assured that you are helping to improve their comfort and confidence every day, day after day

*When used as directed. 'In vitro

Monomer free denture base material, Vertex ThermoSens.

By Vertex-Dental B.V.

Vertex Dental worked out in cooperation with ACTA University and Fontys University the BMS Project for Development of alternative denture base materials: Rapid Prototyping, e.g. stereolithografic (STL), milling (CNC) and laser sintering (SLS); Thermoplastic products and techniques, e.g. PA, COC en SAN.

ThermoSens is the innovative, virtually unbreakable, new monomer-free rigid denture base material (Flexural modulus & strength, Charpy impact strength notched, Toughness test, Hysteresis, Polish).

The development aimed ThermoSens to be:
- Low allergen denture base material with reliable performance and acceptable cost price
- Used for partial and full dentures
- Used in combination with current techniques
- Less shrinkage
- Biocompatible and complying to ISO standards and CE mark
Post in-surgery whitening: What next?

Chris Dodd
Managing Director of Purity Laboratories, discusses how to maintain the new, white smile after professional in-surgery whitening.

New research by the British Dental Health Foundation (1) found that one in five people now spend more money per month on oral care products, compared with hair products, skincare, fragrances and cosmetics. And, having seen a huge increase in the demand for teeth whitening over the past decade, it’s clear that the quest for a “Hollywood smile” is unlikely to end any time soon!

The ability to offer a professional tooth whitening service in your practice is an extremely attractive and lucrative offering which will keep you at the cutting edge of cosmetic dentistry. In just one surgery visit, you can give your patients a brighter shade through treatment, helping maintain their white smile for longer.

The abrasiveness of toothpaste is measured according to the BDA (relative dentin abrasivity) value, and any value over 100 is considered to be “abrasive”, something which is unfortunately often not included in the marketing or promotional information supplied with toothpaste products, thus masking a common problem.

Interestingly, a USA-based independent testing laboratory (July 2012) tested the abrasion levels of 15 toothpastes. The results confirmed that Beverly Hills Formula’s whitening toothpaste is less abrasive than other leading brands of both whitening and regular toothpastes. In fact, Beverly Hills Formula Perfect White scored as low as 95 on the Abrasivity Index Table, whilst some leading competitors displayed levels as high as 158.

The bright side of whitening

As patient safety, protection and awareness of tooth whitening remains a prime concern for you and your team, it’s essential to promote a consistent oral health message. Communicating the importance of good at-home oral care routines, through the use of whitening toothpastes after in-surgery whitening treatments, will help patients maintain a white smile and a healthy mouth for longer.

Whitening - no longer a sensitive issue

After in-surgery tooth whitening treatment patients can experience sensitivity, this can be anything from a mild twinge to having severe discomfort that can last for several hours, or even days. For these patients, why not recommend the use of a toothpaste that contains Potassium Citrate. This desensitising agent relieves tooth sensitivity by effectively blocking the transmission of pain sensation between the nerve cells that enable cold and hot sensations to reach the tooth’s nerves. Those who require extra sensitivity relief alongside an extra whitening boost will appreciate the benefits toothpastes like Perfect White Sensitive. Combining the advanced Hydrated Silica for high performance whitening with Potassium Citrate for rapid sensitivity, patients can start to enjoy acidic foods and drinks once again whilst leaving teeth looking and feeling brighter. Regular use will also help to prevent tartar build-up and relieve tooth sensitivity, effectively protecting and whitening teeth whilst allowing patients to maintain good oral care.

References

1. Research conducted on behalf of the British Dental Health Foundation by Atomiuk Research, February 2013. Sample size: 2,044.

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INDUSTRY

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offer working very closely with our Dealers and why doctors choose our company.

Starting with the inauguration of the Carestream Training Centre at Ajman University, can you elaborate on the plans for the Middle East?

Fritz Dittmann: The main plan is obviously growth. You have to grow sales and services side by side. With our huge install base in the Middle East we are represented in most countries in the region so our distribution channel is set, running and effectively working. We are working on constantly helping our dealers to facilitate better training and provide easier access to training to the end customer. That was the purpose of setting up the training centre here at Ajman University. The future looks fantastic, we have a product pipeline which is really exciting. Next year we are launching three new products which one is very exciting. Next year we are launching three new products and significantly high tech science of which one is very exciting. We are excited to be able to take an existing product like the CBCT image and turn it into an image from which you can make a crown. Recently our Research & Development team just passed the CS500 which is the powder free scanner allowing dentists to scan the teeth without taking impressions. This technology is coming very detailed and the necessity to train and educate the end users to cope and work with the technological advancements is essential.

Dave Pullen: We look forward to focusing on the Middle East, we mention the continuous improvement and that is why we are here today. Regarding the Ajman University, I had no idea about its super organization. When I first arrived to Ajman University I said I was very impressed and that was even before meeting the people behind the magnificent organization. If you see the facilities and then meet the people, it is a great pleasure to work with such great people. It is not easy to invest in a training centre and we look forward to working with the University to improve the needs of the dentists.

Do you plan to focus on the Dental Technicians as well?

Fritz Dittmann: Initially the concept was to train the technicians here but we are extending this now due to the technological advancement and the demand for the dentist to be trained. When you talk about three dimensional imaging, dentists do not learn about this subject at university so there is a real need for training them when investing a hefty sum of money for a high technological state of the art training centre the dentists can take advantage of the full benefits. What we certainly did not want to have was someone buying new machine, spending money and just having the machine standing without being used which unfortunately happens sometimes in the industry.

Dave Pullen: The new system of Carestream is about restorative dentistry, taking digital dentistry and expanding it as we all know the future is digital. Making restorations and crowns is a big future for us. We are excited to be able to take an existing product like the CBCT image and turn it into an image from which you can make a crown. Currently our Research & Development team just passed the CS500 which is the powder free scanner allowing dentists to scan the teeth without taking impressions. The future is very exciting. The Carestream scanner is much simpler than other products available, we have seen the other products and the main goal of our R&D in Shanghai was to improve it and make the process a bit easier and not just immediately scan as many teeth as possible. The Carestream scanner is much easier and simple. The education of Digital Dentistry is very limited and education through conferences such as the ones CAPP organizers and the Dental Tribune newsenders and magazines are very important.

Fritz Dittmann: The new scanner that we have just passed the CS500 is the next time in the Middle East at the 5th Dental Facial Cosmetic International Conference in Dubai last November at the Carestream stand. What we strive to achieve through the Carestream triangle Logo is Humanized Technology, Digital Excellence and Workflow integration. If you take the Microsoft products we use in our daily computer lives we probably only use 10% of the full capabilities which are enormous. That for me is an example of non-humanized technology. We only use bits of it. We have access to technology and some of the things which allow us to use the full spectrum and understand what the benefits are when using it to the maximum.

How do you make sure the orthodontists pick your system?

Fritz Dittmann: For us as a manufacturer the CS500 is our education program. One of the core advantages of Ormco products and solutions that help doctors to achieve better clinical outcomes for the patient and to improve their professional life in the office. Our vision and our mission is “Your Practice is Our Priority” which certainly covers our Orthodontics products but also education. One of the core advantages of Ormco products and solutions that help doctors to achieve better clinical outcomes for the patient and to improve their professional life in the office. Our vision and our mission is “Your Practice is Our Priority” which certainly covers our Orthodontics products and solutions that help doctors to achieve better clinical outcomes for the patient and to improve their professional life in the office.

By Dental Tribune Middle East

DUBAI, UAE: The 1st Ormco MENA Symposion took place last November 2013 at the Emirates Towers in Dubai, UAE. Dental Tribune Middle East covered the historic event and caught up with Xavier Cherbavaz, Director for France and Emerging Markets, Ormco.

By Dental Tribune Middle East

"First Ormco MENA Symposium attracts 250 loyal users to Dubai, UAE"

It dealt with the latest advances in Orthodontics.
- Dr. Dalia El-Bokle

By Dental Tribune Middle East

"The first MENA symposium was a great success."
- Dr. Dalia El-Bokle

By Dental Tribune Middle East

| Our target: | Our target is to connect doctors with the highest and new technology of dental laboratories field |
| Our mission: | We make more great art to your patients smile |
| Our work: | Ceramic work |
| In ceram work |
| In ceramic support with zirconium 30% |
| E-max work |
| Implant work |
| Acrylic work |
| Chrome cobalt work |
| Orthodontic work |
| Aesthetic Smile work |

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"First Ormco MENA Symposium attracts 250 loyal users to Dubai, UAE"