Soft Tissue Engineering With Native Collagen Matrixes

By Dr. Hueskens

Mucogingival surgery can be divided into four objectives:
- Increase of keratinized tissue around teeth and implants
- Cover demuded root surfaces
- Augmentation of papillae
- Regeneration procedures as ridge augmentation.

All these indications have been treated in the past with free gingival, or connected tissue grafts harvested from the patients palate[1]. The fact that a second surgical site is necessary and that due to complications as bleeding or pain...the procedure is not very comfortable for the patient it is often refused. The amount of harvested soft tissue material is very limited too.[2] Therefore the use of xenogenous materials can be an very interesting alternative and was well investigated in the past [3]. Since 2010 we have now three years of experience with collagen matrixes from native origin (MucoMatrixX, Dentegris Germany). These matrixes are 1.2 to 1.7 in thickness and are available in the dimensions 15X20 mm, 20X30 mm and 30X40mm. As they come in a dry state they have to be rehydrated before use. Therefore the MucoMatrixX is hydrated with sterile, physiological saline solution for about ten minutes. It is bendable, sutureable and it can be shaped, both with scalpel or scissors. The matrix has two sides, one that shows little cuts is the bottom side, the upper side shows little pores. The time of resorption is six to twelve month. In the following cases we show how the collagen matrix works as a perfect substitute for both, free gingival and connected tissue graft.

Case one: Increase of keratinized tissue around teeth.

In the sequence is shown how a matrix is sutured on a recipient site in region 45 to 47 (1a). Therefore a horizontal incision is placed followed by a mucosal flap preparation (1b). The fixation of the matrix was made by some single sutures that can be removed after four days post operation because of the fast revascularization of the graft (1c). The next pictures show the site after two weeks (1d) and six month post operation (1e). A perfect result of enlarging the keratinized tissue could be achieved.

Case two. Root coverage.

In this sequence is shown how the matrix is used to substitute a connected tissue graft to serve in a root coverage procedure in region 33 to 36 (2a). In this case the fixation follows the sulcus and a mucosal flap (without lateral incisions), is performed (2b). A MucoMatrixX in fitting shape is brought in. After coronal repositioning of the flap, it is fixed with vertical matrass sutures (2c). Picture 2d showing healing after three weeks, 2e after two years. Region 33 showing start keratinization.

Case three. Soft tissue ridge augmentation including reinforcement of the distal and mesial papilla.

This sequence shows the reconstruction of the resorbed ridge after an extraction of tooth 12, due to a bridge 13 to 11 and 21 (3a). In this case after a palatal incision a mucosal flap is prepared and enlarged direction labia (3b). Two layers of the matrix are positioned under the flap and the sutures fixing the flap (3c). The provisional shows the good primary success in reconstruction of the defect (3d/3e). The documentation of the following healing period showing a perfect long term treatment success. Remarkable is the gain of the papilla from picture 5g to picture 5h.

Case four. Closure of the socket during an immediate implant placement proce...
“Using short implants you are much more conservative”

By Dental Tribune Middle East

Dubai, UAE: During the Bicon Short Implant Forum 2013 in Dubai, UAE, we caught up with Dr. Michael Ziegler, Clinical Director of the American Dental Clinic in Dubai to understand his experience with Bicon.

DTME: Dr. Michael Ziegler, you have been here a long time in the Middle East and we are eager to learn more from you.

Dr. Michael Ziegler: Well I have been here for over 27 years, actually I opened my clinic when Emirates Airlines opened their office who grew and had a great time here.

How long have you been using Bicon?

For about 5 years now however I have known about Bicon for a long time but I just was not quite ready to embrace and take the jump into Bicon mainly due to the fact that I did not know enough about it and everybody was talking against the usage of short implants and I believed that too but a lot has changed since. What changed was that I am looking for something conservative and something that is consistent which works. These two points work for me and for my patient. Bicon is conservative because in my hands I had a lot of problems before to make bone. By using short implants you are much more conservative and it is a lot easier for the patient and with less time involved, risk with a consistent outcome. You can top these points and Bicon offers all of these.

Would you advise your dental colleagues to use Bicon? How is the learning curve?

When I started using Bicon I was on my own over here. There is a learning curve but once you understand it, it becomes simple and you have more control compared with other systems. The is a learning curve because there is a different way of thinking. One system is a screw and one you tap in so these are two different total concepts, two different healing concepts and the healing process of Bicon is one of the greatest reasons why it is a wonderful implant. The Bicon implant provides room to form a clot or a callus with quick support whereas a screw in implant is very closely associated to the bone so it is a total different type of healing. I have put Bicon in a patient where after drilling the site there was no blood after having lost two implants and absolutely no bleeding and to put a regular implant in there would have been a very scary thing to do. Two years I had put it in and recently the x-rays showed it is working and it is fine. Furthermore, it is suitable for many situations such as periodontal situations and one of the greatest benefits is for sinus lifts allowing predictability and easy on the patient.

When I came here I was eager to learn more from you.

Dr. Michael Ziegler: I was on my own over here. My lecture will explain a bit about my philosophy and the experiences with Bicon in areas amongst the pioneers to use it in the area I will show my experiences with Bicon in areas which it is difficult to use other implants. My presence here today is not to teach the participants but to share my experiences and to show that using the Bicon system works for me and has led to many successful results. Bicon has been good for me.

More or less you have enough experience to share today during your lecture at the Forum?

My lecture will explain a bit about my philosophy and I have been asked to share some of my cases and being amongst the pioneers to use it in the area I will show my experiences with Bicon in areas which it is difficult to use other implants. My presence here today is not to teach the participants but to share my experiences and to show that using the Bicon system works for me and has led to many successful results. Bicon has been good for me.

Bicon Short Implant Event held in Dubai

By Bicon

Dubai, UAE: The Bicon Short implant event 2013 has been held on November 14th and 15th at Atlantis the Palm resort in Dubai, UAE. The main speakers were Dr. Vincent Morgan, President of Bicon LLC/Boston; Prof. Dr. Mauro Marincola, Clinical Director Bicon/Italy; Dr. Laura Murcko, Bicon consultant/ Boston; Mr.Paolo Perpetuini, Italy, Bicon International Technician. Additionally two local Implantologists Dr. Kadhim Hinduani and Dr. Michael Ziegler spoke about their experiences with Bicon. Dr. Haider Klauder and Dr. Joji Markose assisted the hands on course which also took place.

The 2 day program was organized in Dubai for a delegation of 70 Iranian dentists and was co-organized with the help of the Iranian distributor of Bicon Mehr Taban Co. In addition, dentists from UAE, Kingdom of Saudi Arabia, Oman, Iraq, Qatar and India formed the group of 112 dentist who attended the theoretical course on the first day with 75 dentist taking part in the hands-on course on the second day. In addition 18 lab technicians from UAE and Iran attended for education.

Bicon presented pro ven clinical studies on the 4.0 x 5.0 SHORT implant, TRINIA, the metal Free CAD/CAM Solution and Metal Free Fixed Restorations on short implants. Bicon presented guided surgery techniques for the first time to the Middle East dentists. The course attendees received 17 CE credit hours. At the end of the course the attendees received good exposure advantages of the only unchanged implant system since 29 years.

During the hands-on course on Bicon Surgical, Prosthetic, Guided Surgery and TRINIA, dentist took advantage and learned about the product in a practical way. Based on the success of the Bicon Short Implant Forum 2015 in Dubai, Bicon would like to conduct more hands-on courses from coming year 2014 to dentists from the Middle-East region.

Since 1985, the Bicon Dental Implant System has offered dentists a proven solution for missing dentition. The Bicon implant design comprises plateaus, sloping shoulders and a bacterially-sealed, and 1.5° locking taper implant to abutment connection. With the plateau design, cortical like bone forms around and between each plateaux. This Haversian bone allows for the routine use of 5.0mm short implants. The sloping shoulder provides the necessary room for bone to support interdental papillae that are gingival aesthetic. Bicon’s 360° of universal abutment positioning provides for the revolutionary cement less and screw less Integrated Abutment Crown™, which consistently provides for a non-metalic aesthetic gingival margin.

The Scientific Session at Atlantis Dubai, UAE
“So many features in Bicon make it a unique implant”

**Dubai, UAE:** Dr. Himdani, Ph.D, M.Sc., B.D.S., Maxillofacial Surgeon & Oral Implantologist Paris VII, France Clinical director of French center for Dental Implants.

Since 1980, Dr. Al Himdani started practicing as Oral Implantologist in one of the most famous hospitals in Paris "Cochin Hospital"; he was one of the founders of the first University Diploma “MSc. Oral Implantology” in France & Europe. In 2002, Dr. Al Himdani arrived in the Emirates as a Consultant Implantologist & Maxillo-Facial Surgeon in Al Zahrah Private Hospital and in 2003 he established his own clinic “French Center for Dental Implant” where actually practiced exclusively his speciality as Oral Implantologist.

**DTME:** When was the first time you started using Bicon?

Prof. K. Al-Himdani: About 6 years ago when my friend a Dr. M. Al Jabbawi from U.K. “Whom I would like to thank him” introduced it to me and from that time Bicon solved approximately 90% of problems that I faced with all other implant system which I have used during my 30 years in this field.

What makes Bicon different from other implant systems?

So many features in Bicon make it a unique implant starting from:

1. Implant macro geometry;
   - Its Platform switch & Sloping shoulder which enhances hard & soft tissue growth improving the quality of biological width and so the final Esthetic outcome.

2. Surgical Kit which gives the ability for Manual Bone Manipulation “Splitting & Expanding” and the collection of precious Autogenous Bone, maneuvers which help to overcome "to a certain limit" ridge deficiency avoiding so bone grafting procedures. Beside that the 50 rpm of motorized surgical procedure decreases, if not eliminate the chance of bone damage during host preparation.

3. Prosthetic restoration with its unique Implant Abutment Connection especially with the absence of internal screw has advantage regarding crown’s reparations without traumatizing the implant and oral tissues. On top of that, the ability of the use of Integrated Abutment Crown to overcome the aesthetic result of the use of screw retained crown restoration in case of palatal oriented implant placement.

What is your advise for Dental Colleges?

Implant practice is very exciting field from all points of view “Functional, Esthetic, Healthy, …” and it seems to be easily achieved, but to obtain a durable successful result needs a proper implant selection with good understanding of patient risk factors which are susceptible to compromise our final result.

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Dubai, UAE: DFCIC and AAID together welcomed over 1,358 world experts in Aesthetics and Implantology from 30 countries on 09th - 10th November 2013 at Jumeirah Beach Hotel, Dubai. With the excellent ambiance and cozy atmosphere the conference again provided warm exceptional networking opportunities, connecting the leaders in the field of Aesthetic Dentistry & Implantology – practitioners, researchers and industry players. The organizers, CAPP, AAID and Emirates Dental Society with the support of Saudi Dental Society and Lebanese Dental Association achieved one more time a great record of attendance and established a reputation as the industry’s leading international conference.

Bringing together industrial leaders and professional practitioners, the conference not only delivered extensive scientific knowledge but gave way for an excellent opportunity to present the latest advancements and developments within Aesthetics and Implantology.

The sponsors included Sirona, Ivoclar Vivadent, 3M ESPE, Crest & Oral-B, GSK, Philips

Excellent ambiance and cozy atmosphere at Jumeirah Beach Hotel Dubai, UAE

By Dental Tribune Middle East

Demonstrations at the product display area by Dr. AbdelAziz Yehia, Sirona Middle East - Business Development Manager CADCAM

Dental Tribune Middle East Nov-Dec edition presented to Dr. Elie Maalouf (President LDA)

Dr. Mohammad AlObaida (President SDS) shakes hands with Dr. Elie Maalouf (President LDA) at 5th DFCIC

Dr. Munir Shwadi (left) and Dr. Andreas Kurtad (right) discussing questions

The scientific session at 5th DFCIC

Dr. Mohammad AlObaida (President SDS) shakes hands with Dr. Elie Maalouf (President LDA) at 5th DFCIC

Dental Tribune Middle East Nov-Dec edition presented to Dr. Elie Maalouf (President LDA)
### Mouth cancer awareness month

**By Victoria Wilson, Dental Hygiene Therapist**

DUBAI, UAE: For the month of November ‘Mouth Cancer Awareness Month’ runs throughout the UK. In support of ‘Mouth Cancer Awareness Month’ Dr Roze & Associates Dental Clinic, wanted to play our part in contributing to making our patients and colleagues more aware about the risk, signs and symptoms of mouth cancer in the UAE, by offering complimentary oral cancer screening in November. Dr Nigel L Carter OBE BDS LDS (RCS) Chief Executive of the British Dental Health Foundation, kindly agreed to support us in our work.

Monday 16th December marked our partnership with CPS Clinical Pathology Laboratory in Dubai, for an evening of lectures. Victoria Wilson, Dental Hygiene Therapist at Dr Roze & Associates Dental Clinic, began the evening with a lecture on ‘Mouth Cancer Awareness’, followed by Dr Peter Cruse from CPS, who lectured on ‘The Pathology of Oral Cancer’. In reference to publications from the British Dental Health Foundation 400,000 cases of mouth are diagnosed worldwide every year. In the UK research reveals there has been a 50% increase in Oral Cancer since 2000. The prevalence in youngsters is increasing, Early diagnosis is key, and can increase survival rate by 90%.

The key message is ‘If in doubt, get checked out’. Any ulcers, white patches, red patches, lumps, swellings that don’t go within 2-3 weeks, visit your doctor or dentist. Create awareness of the main risk factors associated with mouth cancer. The main risks are smoking, alcohol, poor diet, HPV (Human papillomavirus), smokeless tobacco (betel nut, naswara, paan, gutka, areca nut). Due to recreational Sonicare, Carestream, Invisalign, Wirgley (Oral Health Program) and VITA. Other Industry Players taking part included, Middle East Dental Lab, Noble Medical Equipment, Rocky Mountain Tissue Bank, ADL Laboratories, Falhlos Int’l, Inman Aligner, Dentekgris, High Technology, Dubai Medical Equipment, Anyong Zongyang Dental Materials Co, Qualident and Pigeon.

The conference welcomed 1255 participants and 105 representatives from the international dental industry, There were 20 different countries represented within the two day conference. The international team of speakers, Dr. Andreas Kurbad, Germany; Dr. Maria Hardman, UK; Prof. Dr. Claus-Peter Ernst, Germany; Dr. Paul West, Germany; Dr. James Russell, UK; Dr. Gary Wadhwia, USA/ A/A; Colgate Palmolive Murray UK; Prof. Khaled Balto, KSA; Dr. Ramesh Sabhlok, UAE; Dr. Roze & Associates Dental Clinic, Dubai, UAE and Qatar.

Well in the year 2015, the level of Den- tistry in the GCC took a real de- tour towards quality products and services and such detour Sirona has always been the leader in producing Surpassed Innovative products through the whole product portfolio, thanks for the dedicated man- agement and dedicated B&K department that are keen on keeping the same level by in- vesting a huge budget for this purpose which for sure ends up with products like CEREC. We always say it is just a start!!

**How do you rate the level of dentistry in the Middle East, GCC & Pakistan in particular?**

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By AEEDC

Dubai, UAE: The 18th edition of the UAE International Dental Conference & Arab Dental Exhibition - AEEDC Dubai 2014 will take place at the state-of-the-art Dubai International Convention & Exhibition Centre (DWTC) from 4 - 6 February 2014. AEEDC Dubai is ranked first in MENASA Region and the Second Largest Worldwide. Every year, AEEDC Dubai provides the best platform for dental professionals and industry experts from the MENA region and other parts of the world to update knowledge, network, interact and generate business partnerships.

AEEDC Dubai 2014 conference will present a very comprehensive scientific program with more than 130 international and regional speakers highlighting the latest topics and clinical cases in the field of dentistry. Several continuing dental programs will be hosted at AEEDC Dubai 2014 focusing on the most up-to-date scientific information and advanced dental solutions. In addition, AEEDC pre-conference courses named as the Dubai World Dental Meeting - DWDM will run 3 days prior (1 – 3 February 2014) to the conference offering a variety of highly specialised courses. AEEDC Dubai 2014 exhibition is the gateway to the emerging and fast-growing dental market in the MENA region. A wide-ranging dental products, equipment and services will be displayed. A number of practical and interactive activities will run alongside the exhibition halls. More than 30,000 Dental Professionals, Healthcare Providers and Industry Leaders are expected to attend AEEDC Dubai this year. It also represents an outstanding opportunity for all dentists and decision makers from the private and public sector, to explore and test equipment and devices displayed by more than 1,000 exhibiting companies. Moreover, AEEDC Exhibition will feature 19 national pavilions primarily from: Brazil, China, Finland, France, Germany, Hungary, Italy, Japan, Korea, Portugal, Slovenia, Spain, Sweden, Switzerland, Taiwan, Turkey, United Arab Emirates, United Kingdom, and United States of America.

This year’s edition of AEEDC Dubai has four conference halls with the best speakers the profession has to offer. The lectures start with many established keynote speakers who have been educating and innovating for more than 20 years and new speakers offering, with enthusiasm, fresh topics and new concepts.

The pre-conference courses of Dubai World Dental Meeting, which will be conducted from 1 – 3 February 2014, have topics ranging from Endodontics, Orthodontics, Implantology, Periodontology, Restorative and Infection Control. Each course selectively designed to offer the latest advancements in their field.

The 18th Edition is held in strategic partnership with the Ministry of Interior Naturalization and Residency Administration, Dubai, United Arab Emirates and has gained the esteemed support from Arab Dental Federation, Global Scientific Dental Alliance, Executive Board of the Health Ministers Council for Gulf Cooperation Council States, GCC Oral Health Committee, Riyadh Colleges of Dentistry and Pharmacy, Arab Academy for Continuing Dental Education, and International Association for Orthodontics-IAO.

AEEDC Dubai is held under the patronage of His Highness Sheikh Hamdan Bin Rashid Al Maktoum, Deputy Ruler of Dubai, Minister of Finance, President of the Dubai Health Authority in co-operation with the Dubai Health Authority.

Inibsa Dental: the specialists in dental anaesthesia

Inibsa Dental is a pharmaceutical company with over 65 years’ experience in the R&D and production of dental anaesthetics.

With a production capacity of over 150 million cartridges a year, Inibsa Dental is positioned in its own right amongst the world’s leading manufacturers. Inibsa Dental has the right anaesthetist to suit every patient. In their daily practice, dentists face a wide range of pathologies and patients. It is important to choose the appropriate anaesthetic for each treatment and patient considering factors such as the need for postoperative pain control, the required haemostasis, the risk of postoperative self-inflicted injuries and any existing contraindications to the selected local anaesthetic. Inibsa Dental provides a complete range of drug to deliver safe, convenient and effective anaesthesia for every type of dental procedure and patient.

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Make highly precise IMPRESSIONS using 3M™ ESPE® (Soft) Monophase Polycrylate Material and rely on proven quality from the inventor of polycrylate. Benefit from self-free mixtures out of the Pentamix® Automatic Mixing System.

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Create reliably strong TEMPORARIES with natural aesthetics using Protemp™ 4 Temporization Material.

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Optimize your time. Simplify your procedure.
dure including augmentation of the alveoli.

After extraction of a first upper molar on the left, an internal sinusfloor elevation is performed and a SoftBone Implant is placed. The alveoli are augmented (4a-4c) with a bovine bone substitution materials (CompactBone B, Dentegris).

Than the collagen matrix covers the extraction site and the gingiva is adapted with some sutures (4d). There is no primary closure of the wound. During the next two weeks a complete closure could be achieved (4e), so at second stage after four months there are perfect soft and hard tissue conditions around the implant (4f).

Conclusion

Since 2010 we used 122 collagen matrices in 15 patients to substitute free gingival or connected tissue grafts in mucogingival surgeries. The results were similar to what we are used to in tissues harvested from the palate. The main advantage in comparison to the autogenous grafts is that there are almost no complications as there is no need for donor site at the palate. The second is the unlimited amount of tissue that can be used. So by that patients are very comfortable with the use of collagen matrices instead of tissue from the palate.

Literature


> Page 1

According to Rosenberg, today’s CAD/CAM technology allows the average dentist a number of options in high-speed design and manufacturing, more significantly in regards to implant prostheses, crowns, orthodontic aligners and cosmetic digital imaging.

Referenced frequently throughout Rosenberg’s presentation, Dentiva and Invisalign (denture and aligner manufacturers) founded their products through CAD/CAM technology by careful analysis and research. Both companies boast a two- to three-visit schedule per patient to fully complete the design and manufacturing of their products, eliminating chairside time and increasing profitability.

The two to three visits incorporate impression creation, a second patient visit less than a week later and an optional patient follow-up.

Speakers Dr. Cristina Teixeira and Dr. David B. Munich spoke on orthodontic topics, including “Misconceptions in Orthodontic Early Treatment” and “Early Class II Treatment: A Minimally Invasive Treatment Approach.”

The International Congress of Oral Implantologists’ seminars featured Dr. Michael Tischler, Dr. Alvaro Ordonez, Dr. Gordon Christensen and Xana Winans. Topics ranged from “The Zirconia Screw-Retained Implant Bridge” to digital dentistry to soft media marketing.

In the Dental Assistants Pavilion, Shannon Face Brinker, CDA, spoke on “Becoming a Whitening Specialist in Your Practice,” which focused on practical techniques for in-office and take-home whitening.

Highlights in exhibit hall

The Greater New York Dental Meeting has long been a favorite venue for companies to
highlight new and improved products and services, and this year was no exception. The exhibit hall’s miles of aisles beckoned with flyers and signs announcing advancements in virtually every sector of dentistry— and new deals on the proven state-of-the-art products.

Jerry Herman, DDS introduced for the first time at the GNYDM the MouthWatch, an intraoral camera system for patients to use at home. It lets patients send high-resolution images of their mouth directly to their dentists via a HIPPA-compliant online platform. The idea is to tighten the connection between patient and practice, boost recall rates for cleanings and improve overall patient compliance—in part by enabling them to examine their own mouths in privacy and see just how bad their teeth and gums might be looking.

Herman’s goal was a system for the same price as a powered toothbrush, which, at $150, he hit. Consumers can buy the scanner and then find a MouthWatch dentist through an online referral site—or ask their dentist to use the system. Or dentists can provide the wand to their patients.

Biolase used the GNYDM to introduce its GALAXY BioMill, which the company developed and designed in conjunction with the German company imes-icore. It’s an open-architecture CAD/CAM system for scanning, designing, milling and finishing crowns, inlays and veneers in the dental office in a single appointment. It uses the 3Shape Trios intraoral scanner to capture high-resolution 3-D digital images of the teeth and crown-preparation site, all of which are then processed through a CAD/CAM software program to design the restoration. The design is then transferred to the GALAXY BioMill to mill the crown using the latest in esthetically pleasing, biologically compatible and durable tooth-colored materials. Isolate was demonstrating its new Isovac Dental Isolation Adapter, the latest addition to its dental isolation product line. The Isovac uses dual vacuum controls so you can focus continuous hands-free suction in either the upper or lower quadrant and improve control of moisture and oral humidity.

In the DEXIS booth, attendees could test out the DEXIS photo app, which the company unveiled at the GNYDM. The app enables practitioners to wirelessly send photos directly into the DEXIS Imaging Suite via newer-model iPhones or iPod touches. DEXIS also announced expansion of its imaging products to natively support Apple hardware and the OS X operating system—coming in the second quarter of 2014. In the IQ Dental Services booth, attendees could see some of the newest imaging technology by checking out the Soredex Cranex 3D dental imaging system with panoramic, optional cephalometric and cone-beam 3-D imaging programs.

New customers who visited CareCredit and signed up for the patient-payment plan credit service—or requested an evaluation to see how CareCredit might best serve their practice—got to leave with a highly coveted Penguin Pillow Pal.

The experts at HealthFirst were staffing “Compliance Help” information stands, where attendees could find out about environmental recovery, infection control, practice quality, emergency preparedness and radiation minimization.

For dental hygienists, Dentistore had all sorts of tricks up its sleeves to help make treating patients easier and more fun. Of particular interest was the Zootooth, a polished and finished 3-D printed structure, and it comes in different sizes, colors and flavors. Also on display at GPP was a fossilized mammoth’s tooth.

Speaking of enticing booth attractions, DC Dental Supplies had a bartender on hand, dispensing Brooklyn Lager, in honor of the company’s first anniversary in Brooklyn. You could also get a caricature of yourself drawn at the booth.

Austin Powers was back at this year’s Greater New York Dental Meeting, at the Millennium Dental Technologies booth, to help increase awareness of how lasers can be used in dental treatment.

Also on the exhibit hall floor, many attendees bumped into Floyd, who was on hand to help increase awareness of the new Aquasil Ultra impression system, available from DENTSPLY Caulk.

And yet another exhibit was beckoned with fliers and signs: “Compliance Help” information stands, where attendees could find out about environmental recovery, infection control, practice quality, emergency preparedness and radiation minimization.

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Come to discover FKG Dentaire range during the IJRDC 2014, Hall III, booth 610