Dentsply Sirona Clinical Affairs 2018

Almost 432,000 dental professionals have benefitted from clinical education and training

By Dentsply Sirona

Dentsply Sirona Clinical Affairs organizes one of the largest clinical and most comprehensive education programmes in the dental industry to empower dental professionals to provide better, safer and faster dental care. In 2018 alone, Dentsply Sirona offered 11,835 courses all over the world, in which nearly 432,000 dental professionals participated.

The global Clinical Affairs team develops the next generation of educational content that supports the implementation of innovative solutions for dental professionals. This clinical education program’s overall objective is to empower dentists, technicians, and dental team members to improve dental care and oral health. Clinical Affairs cooperates with opinion leaders, academic and research communities, and practitioners in their respective local markets.

In 2018, Clinical Affairs offered 11,835 courses, which provided training and education to 431,854 dental professionals in 99 countries.

Clinical Affairs 2018 at a glance

- **11,835 Courses**
- **99 Countries**
- **431,854 Attendees**

By 2018, more than 432,000 dental professionals from 99 countries participated in the program. Over 76 per cent – over 330,600 – of them were dentists – 11 per cent more than in 2017. Also, the number of participating students has grown by 12 per cent to a total of 53,420. Together, they took part in 11,835 courses in total including live lectures, product trainings, Train-the-Trainer sessions, self-instructional courses, Webinars and hands-on trainings. For the latter, the participants spend at least 50 per cent of the instructional time practicing skills. Compared to the 2017 statistics, the number of organized courses increase by almost 15 per cent. Hands-on seminars or participation course became more important with a rise of 35 per cent to 3,396 courses in 2018. About half of them were held in Europe, the Middle East and Africa region and about one third in American markets.

Innovative technologies meet traditional methods

The three key course topics include endodontics, implant dentistry and restorative dentistry. Furthermore, the dental professionals were interested in CAD/CAM, preventive dentistry and ultrasonic instrumentation and imaging. Besides traditional live lectures and product trainings, the Clinical Affairs’ program comprises innovative active learning and engagement methods including simulated and patient demonstrations of procedures and workflows.

On-demand courses have gained importance because they allow the participant to learn when they want and where they want to learn. And the use of state of the art webinar technology allows us to extend our reach and reach dental professionals across country boundaries. In addition to live webinars, the use of the on-demand format allows dental professionals to learn at their convenience and to earn CE credits where appropriate. “Compared to 2017, the number of on-demand webinar participants has increased almost fivefold in 2018,” explains Dr. Terri Dolan, Chief Clinical Officer of Dentsply Sirona. “We see the use of educational technologies as a great way to support our customers, introduce new clinical concepts, explain procedures and solutions, and then encourage participants to attend more extensive courses and hands-on learning based on their needs and interests. Providing these educational opportunities, paired with our leading materials and technologies, are key to empowering dental professionals and improving dental care and oral health.

Dentsply Sirona Academy offers triple excellence

The success of the Dentsply Sirona Academy’s educational program is increasing annually. This positive result can be attributed to our understanding of customer needs and organizing courses in three important categories: clinical excellence, technical excellence and practice excellence.

Clinical excellence offers scientifically sound, evidence-based education on key clinical topics and common clinical challenges facing dental professionals. The program covers topics such as prevention, restorations, orthodontics, endodontics, implantology and prosthodontics.

Technical excellence introduces Dentsply Sirona’s new technologies, innovative materials and workflow solutions, for example. These courses support dentists, technicians and team members in adopting and implementing technological innovation and workflows into their own practices.

Practice excellence as the Academy’s third component focuses on administrative and management issues including front office and back office support to improve practice efficiency and patient outcomes. “A dental practice is only as good as the people who work there and the culture they foster,” says Dr Dolan. “The practice excellence component supports the team performance of a high-quality dental treatment.”

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For more information about clinical education from Dentsply Sirona please contact your local representative or visit dentsplysirona.com/MENA

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One-year clinical specialisation course for selected wavelengths

**DUBAI, UAE**
Module 1  |  23-26 October 2019 (4 days)  |  Laser Safety, Laser Devices and Diode Lasers
Laser Safety Officer course | e-learning | Laser technique (Diode lasers) | High power Diode lasers (clinics) | Scientific background and clinical indications | Skill training every day of every clinical indication | Patient treatments (demonstrations)
**Hands on:** Pigmentation on soft tissue, gingivectomy and gingivoplasty, frenectomy, fibroma removal, crown lengthening, depigmentation, endodontic procedure—canal irradiation performed on sheep heads | Patient treatments (demonstrations)

**Module 2**  |  11-14 March 2020 (4 days)  |  Module Erbium Lasers
Laser Safety Officer course | e-learning | Laser technique (Diode lasers) | High power Diode lasers (clinics) | Erbium Lasers (clinics) | Laser technique (Erbium lasers) | Er:YAG and Er,Cr:YSGG | Scientific background and clinical indications | Skill training every day of every clinical indication | Patient treatments (demonstrations)
**Hands on:** Preparation in enamel and dentine, generation of a retentive surface, canal decontamination, apicectomy, soft-tissue cut with short pulses, soft-tissue cut with long pulses, open curettage, crown lengthening and bone preparation performed on sheep heads. | Patient treatments (demonstrations)

**AACHEN, GERMANY**
Module 3  |  13-16 December 2020 (4 days)  |  Combined Wavelengths Therapy Concepts & Mastership Exams
Laser therapy concepts with the use of 2 different wavelengths | Written multiple-choice exam | Oral Exam (presentation of 5 patient treatments cases with diode or Erbium lasers) | Graduation Ceremony, after successful completion of an examination at RWTH Aachen University | 600 hours total workload | Over the complete course duration: case documentation & discussions

The programme targets dentists who would like to specialise in certain wavelengths. Over the course of one year, participants are taught fundamental physical and technical knowledge, and how to recognise primary, secondary, and tertiary indications on 12 attendance days split into 3 modules held over 3 educational blocks. This programme concludes with an official certificate of RWTH Aachen University, and is offered in collaboration with the RWTH Aachen International Academy, the post graduate education wing of the University.

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Researchers develop microrobots to break up plaque

By DTI

PHILADELPHIA, U.S.: The fight against plaque has been a long-running battle. In a discovery that might give dentists the upper edge, researchers from the University of Pennsylvania have developed a swarm of microrobots, directed by magnets, that can break apart and remove dental biofilm from a tooth.

The innovation arose from a cross-disciplinary partnership among dentists, biologists and engineers.

Lead researcher Prof. Huyan Koo, from the University of Pennsylvania School of Dental Medicine (Penn Dental Medicine), said the development was truly a synergistic and multidisciplinary interaction. "We are leveraging the expertise of microbiologists and clinician-scientists as well as engineers to design the best microbial eradication system possible. This is important to other biomedical fields facing drug-resistant biofilms as we approach a post-antibiotic era." He can be reached at..."
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Scientists find effective treatment for oral pain caused by radiation therapy

A new study has reported that doxepin mouthwash or diphenhydramine-lidocaine-antacid mouthwash may be effective in reducing radiotherapy-related mucositis pain.

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Scientists find effective treatment for oral pain caused by radiation therapy

By DTI

JACKSONVILLE, Fla., U.S.: Scientists have recently discovered that an oral rinse referred to as magic mouthwash significantly reduces the pain caused by oral mucositis and mouth ulcers in patients receiving radiation therapy for head and neck cancers. The mouthwash contains diphenhydramine, lidocaine and antacids.

The study was led by Dr. Robert C. Miller, Professor of Radiation Oncology at Mayo Clinic. The findings emerged from a multi-institutional randomized, double-blind, placebo-controlled Phase III clinical trial.

“Our group published a study in 2012 showing that an oral rinse of doxepin reduced oral mucositis-related pain, compared to placebo,” said Miller. “However, there were no large randomized controlled trials studying the potential benefits of magic mouthwash.”

In the new study, conducted between November 2014 and May 2016, Miller and his colleagues studied 275 patients who underwent definitive head and neck radiotherapy and had an oral mucositis pain score of 4 points or greater. The participants were followed up for a maximum of 28 days. The research team found that pain related to oral mucositis was reduced by 11.6 points after using doxepin mouthwash and by 11.7 points after using diphenhydramine-lidocaine-antacid mouthwash, within 4 hours of administration. There was a reduction of 8.7 points for placebo mouthwash.

“Radiation therapy may cause mouth sores because it is designed to kill rapidly growing cells, such as cancer cells,” said co-author Dr. Terrence T. Sio, a radiation oncologist at the clinic. “Unfortunately, healthy cells in your mouth also divide and grow rapidly, and may be damaged during radiation therapy, which can cause discomfort. We’re glad to have identified a proven method to help treat the discomfort of this side effect,” he concluded.

The study, titled “Effect of doxepin mouthwash or diphenhydramine-lidocaine-antacid mouthwash vs placebo on radiotherapy-related oral mucositis pain: The Alliance A221304 randomized clinical trial,” was published online on April 16, 2019, in JAMA.
Scientists work on remedy for painful jaw disease

By DTI

LOS ANGELES, U.S.: University of Southern California (USC) researchers and collaborators from the University of California, Los Angeles (UCLA) have reported a breakthrough in preventing the damage to the jaw that is a side effect suffered by some people undergoing treatment for cancer or osteoporosis. The newly published research is an important step toward a cure for osteonecrosis of the jaw, which is a rare consequence of drugs commonly used to combat bone loss.

Osteonecrosis of the jaw causes severe and persistent inflammation leading to loss of bone from the jaw and has no effective means of prevention or cure. The risk, though small, deters people from taking drugs needed to fight bone cancer or prevent fractures owing to loss of bone density.

USC scientist Prof. Charles McKenna said the research raises hope that physicians could adapt the new method to treat the condition in people. "This is a condition that has been exquisitely painful and difficult to treat for more than a decade. We think our new approach may provide hope for the future."

For years, physicians have prescribed a class of drugs called bisphosphonates (BPs) for metastatic bone cancer patients and for osteoporosis patients to maintain bone density. BPs include a range of compounds that share a remarkable ability to adhere to bone, but when used in high doses in the cancer clinic, BP drugs sometimes have the debilitating side effect of necrosis in the jaw. The problem often occurs after a tooth is removed, the extraction socket does not heal, and the jaw begins to deteriorate.

Although the condition is very rare at the lower BP doses used to combat osteoporosis, many patients avoid the drugs altogether for fear of the side effect. The risk is low, as the National Osteoporosis Foundation estimates incidence of osteonecrosis of the jaw owing to the BP used to treat osteoporosis to be between one in 10,000 and one in 100,000 people annually. The risk has been estimated to be much higher, about 3 percent of patients, at the BP dose used to treat cancer. McKenna said. Nonetheless, more and more osteoporosis patients are willing to take their chances with the disease rather than risk the side effects. Surveys have shown that the recent trend in reduced hip fractures among postmenopausal women may be reversing owing to BP drug aversion.

"The fear factor of this condition has led to severe underuse of bisphosphonates for osteoporosis, so much so that we’re seeing a rise in hip fractures in elderly people, aversion to bisphosphonates in oncology clinics and liability concerns in the dental office," McKenna said.

The research team used a different BP compound, an inactive compound that could be used locally in the mouth to push the BP drug from the jawbone while leaving undisputed the useful drug in the rest of the skeleton. "Think of it as a way to fight fire with fire," McKenna commented.

The scientists involved in the study used mice to test different BPs attached to fluorescent dyes. One coded the BP zoledronate, which is administered systemically to treat osteoporosis and cancer, while a different dye coded a BP compound with similar bone affinity, but no biological activity, referred to as a rescue BP. The researchers discovered that the rescue BP injected into the jaw removed most of the BP drug causing the jaw bone tissue damage, clearing the way for the animal’s natural healing process to repair the extraction site.

The new technique is not yet ready for clinical use in humans. McKenna said BioVinc, which provided funding for the study via a National Institutes of Health small business research grant, will be responsible for advancing the treatment to commercial clinical use. Several of the authors of the study disclosed a financial interest in BioVinc, a company specializing in bone-targeted therapeutic and diagnostics. McKenna is the company’s academic founder.

The study, titled “Rescue bisphosphonate treatment of alveolar bone improves extraction socket healing and reduces osteonecrosis in zoledronate-treated mice,” was published online ahead of print on March 26, 2019, and is due to appear in the June 2019 issue of Bone.

For more information visit www.dentsplysirona.com

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Quality Beyond Reliability – How Dentsply Sirona defines design for treatment centers

By Dentsply Sirona

There is never a second chance for the first impression. This phrase is particularly applicable to the perception of a dental practice where a treatment centre is located. To convey the high quality and comfort of its treatment centres, Dentsply Sirona places high value on premium design – a central pillar of the quality commitment “Quality Beyond Reliability”.

What turns a plain dentist’s appointment into a first-class treatment? Dentsply Sirona’s answer to this question lies in the premium design concept that defines the treatment centres’ environment. In a concept where “internal balance and external impression” of a treatment centre visualises high-quality functions by its ergonomic design with an energetically clean line, this ensures comfort for the patient as well as an optimal working position and workflow for the dentist.

Award-winning design with three colour schemes

“Our treatment centres’ design evokes trust and spreads an atmosphere of safety and reliability. The patient experiences this in a fraction of a second”, explains Susanne Schmädicke, Vice President Global Brand Marketing and Clinical Affairs, Equipment and Instruments. Dentsply Sirona’s treatment centres combine harmonious color design with a distinctively streamlined shape. The design concept provides three color worlds grouping together shades that harmonize particularly well with each other. This convincing design received renowned awards such as the iF Design Gold Award and the nomination for the German Design Award.

Premium design visualises hand-made high quality

The essential basis for premium design is high-quality materials and high-quality production processes. Therefore, Dentsply Sirona’s treatment centres rely on three indisputable principles:

- Collaborating with specialized designers guarantees that the treatment centres show a state-of-the-art ingenuity that fulfills the customers’ highest expectations.
- The research and development (R&D) work hand in hand with the epiphenomeno department to carefully select the best possible material for the treatment centers.
- According to Dentsply Sirona’s demand, test procedures such as tests to pass 250,000 stresses and strains without loss of quality – 190,000 times more than officially required.

The upholstery is available in two versions. As a premium option, that is processed by thermoforming for ultra-firm cushioning or as a handheld lounge version with a smooth and seamless surface for a flat design.

Latest design trend: within the dental sector

The latest trends in design will be published in Dentsply Sirona’s exclusive trend:DSM magazine at this year’s IDS. In this issue, Dentsply Sirona has discovered four exciting new directions among dental practice designs all over the world. Mindful Clarity, Striking Energy, Sensitive Luminance, and Refined Luxury. The magazine includes personal interviews with dentists around the world and some interesting background articles on dental solutions and lighting, as a look at the patient experience in general and a myriad of stunning and inspiring photos.

Tangible benefits for patients and dentists

The well thought-out design of Dentsply Sirona treatment centers benefits both, patients and dentists. Thanks to the compact but soft upholstery, patients enjoy a comfortable and comfortable positioning, including support of their shoulder and back area. The cooling effect of the thermo upholstery reduces accumulated heat in the seat and back area to contribute to the patient’s relaxation, whereas the lounge version offers extra comfort through additional softness. Moreover, the spacious legroom enables easy access to the treatment center. At the same time, the dentist can work in an ergonomic position throughout the treatment. In addition, the treatment centers’ flat surfaces are easy to clean and disinfect.

By Michele Renners

‘Stress’ is a term that is often misused and applied inappropriately. In today’s world, being stressed is often associated with a busy, active work life. In reality, what we call ‘stress’ is actually a complex phenomenon that weakens our organism and whose main purpose is to maintain internal balance. Stress, at each level of stress, can cause many illnesses and, more than just a risk factor, it is a real ailment

But it was not always like this. Primeval humans lived under much more stressful conditions than we do today, since their survival was constantly at stake. They had to hunt to survive and were required to either fight or flee. The reactions generated by stress were a source of energy that allowed them to survive in the aggressive world they lived in. They slowly turned the potential energy into action. In today’s world, aggression is evidently more often verbal and it is impossible to fight or flee from a board of examiners, the boss or a traffic jam. Stress often lasts longer and is a more intense form of energy in the workplace, for example. It is here that the pathology becomes ingrained.

But what is stress?

It is an adaptive response. In 1929, Cannon proposed a scientific description of stress: “the body of any complex and organized being is affected by the state of stress, the change in the condition of the organism in response to an imposed stressor.”

In the subsequent years, the concept of stress was developed and modified. Stress is now understood as a complex adaptive response to a variety of stimuli, including physical, psychological, and social factors. Stress is not just a physical response, but also a psychological and emotional response. Stress can lead to a wide range of negative health outcomes, including cardiovascular disease, depression, anxiety, and sleep disturbances.

What is the link between stress and periodontal disease?

Periodontal disease is an inflammatory multifaftoral disease. In necrotic periodontitis, stress has long been recognised as a major risk factor. Alexander the Great’s soldiers were already suffering from this pathology, and later, it affected soldiers in World War I, when it was known as “trench disease”. Stresses of activity have been described in the development of periodontal disease. Stress is considered to be an aggravating factor during two phenomena: stress generates a change in behaviour on the one hand and a reduction in immune defences on the other. Many studies, some very old, have shown that patients with depression have a tendency to eat poorly, take less care of themselves and increase their consumption of tobacco, alcohol and medication. We know that periodontal disease is stabilised if patients carry out daily meticulous cleaning of their teeth and interdental spaces. Internal motivation is reduced in depressed patients and so negligence of dental hygiene increases the amount of biofilm and changes its composition. Nutritional deficiencies are also responsible for decreased immunity. Tobacco use is a recognised risk factor for periodontal disease. The accumulation of all these changes in behaviour increases the risk of developing periodontosis or of relapsing.

The way in which stress acts on the immune system is summarised according to the hypothalamus-pituitary-adrenal axis. Psychosocial stress is capable of activating the hypothalamic-pituitary-adrenal axis, which will in turn stimulate the adrenocortical gland to produce glucocorticoids, of which cortisol has an...
Plant-based diet could help reduce gingivitis

By DTI

FREIBURG, Germany: A recent study has shown that a plant-based whole-food diet enriched with omega-3 fatty acid and vitamin D is able to reduce gingival inflammation naturally. Based on the findings of this trial, the researchers recommended that dental professionals ought to assess dietary behaviour in patients with gingivitis and provide dietary recommendations in addition to periodontal therapy.

For the trial, 30 patients with gingivitis were randomised to an experimental and a control group stratified by their plaque values, which were taken at baseline and the end of the study. The experimental group changed to a diet low in processed carbohydrates and animal proteins, and rich in omega-3 fatty acid, vitamin C, vitamin D, antioxidants, plant nitrates and fibre for four weeks, whereas the control group remained on their western diet. All participants stopped using dental floss and other interdental cleaners during the trial period. Periodontal parameters, such as subgingival plaque values and gingival bleeding, after the procedure were assessed by a blinded dentist.

The findings indicated that, although there were no differences regarding the participants’ plaque values, the experimental group experienced a significant reduction in gingival bleeding. Apart from the potential benefit for oral health, a substantial increase in vitamin D values and weight loss was also evident. “Study results clearly demonstrate the possibility to naturally reduce gingivitis by an optimised diet that also promotes general health. According to this, dental teams should address dietary habits and give adequate recommendations in the treatment of gingivitis, since it might be a side effect of a pro-inflammatory western diet,” said lead author Dr Johan Wölber, a dentist and research assistant in the Department of Operative Dentistry and Periodontology of the Centre for Dental Medicine at the University of Freiburg Medical Centre.

The study, titled “The influence of an anti-inflammatory diet on gingivitis: A randomized controlled trial,” was published online on 2 April 2019 in the Journal of Clinical Periodontology.

A recent study has suggested that gingivitis is profoundly affected by diet. It has also been shown that these techniques directly stimulate the regions of the brain associated with well-being, relax muscles and have an analgesic effect. Having pleasant social interactions and avoiding isolation reduces the secretion of cortisol. Similarly, relaxation techniques reduce the concentration of catecholamines.


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Unilever to acquire Fluocaril and Parogencyl brands from Procter & Gamble

By DTI

LONDON, UK/ROTTERDAM, Netherlands: Unilever has announced that it has signed an agreement to acquire the Fluocaril and Parogencyl oral care brands from Procter & Gamble.

Fluocaril and Parogencyl are well-known therapeutic brands sold in the pharmaceutical industry, primarily in France and Spain. They have a product portfolio that is widely endorsed by health professionals. Fluocaril offers oral care solutions specialising in protection against dental caries. Parogencyl tackles gingival issues.

The acquisition will give Unilever a leading role in oral care in the pharmaceutical industry in France, as well as a strong position in Spain. With their powerful brand heritage, high visibility and sound reputation with dentists, these brands are a great complement to the existing oral-care portfolio of Unilever.

The terms of the deal were not disclosed. The acquisition is expected to close in the second quarter of 2019.

Research finds presence of dental phobia not a barrier to treatment

By DTI

LONDON, UK: It has been established that patients with a phobia of dentistry may often delay visiting the dentist or avoid it altogether. It comes as welcome news, then, that a recent study has found that treatment plans offered by dentists are overwhelmingly influenced by the complexity of the patient’s oral situation and are not impeded by the presence of a phobia.

Though over 50 per cent of the British public say that they are anxious about visiting the dentist, 12 per cent have such high anxiety levels that it can be classified as a phobia. These patients frequently have poorer oral health and higher rates of dental caries, outcomes that are partially driven by an avoidance of clinical treatment.

A new study conducted by researchers from King’s College London set out to test whether the presence of a dental phobia modifies the proposed treatment plan for such a patient compared with the plan for a non-phobic patient. The researchers invited 79 UK-based dental practitioners to create a treatment plan for an imagined patient that had either simple or complex treatment needs based on a number of dependent variables, such as periodontal treatment, extractions and provision of crowns.

The results of the study showed that dentists offered a more complex treatment plan for complex conditions and that treatment decisions were primarily influenced by the oral needs of the patients, and not whether or not a dental phobia existed.

Dr Ellie Heidari, lead author of the study and a senior specialist clinical teacher at King’s College London, said in a release regarding the study: “In order to deliver dental care for people with dental phobia, it is important to adapt an approach, where prevention of oral diseases and preservation of teeth, when possible, is provided as part of dental care plans.”

“Another important component in their care would be to address dental phobia by providing them with an opportunity to access cognitive behavioural therapy. This is a therapy that has been proven to be very successful,” she added.

Dr Tim Newton, Professor of Psychology as Applied to Dentistry at King’s College London, commented: “Those with dental phobia are experiencing both the enormous challenges of living with their fear, and of having poorer oral health. It is gratifying to see that for the dental team the presence of a phobia is not perceived to be a barrier to complex restorative or preventive approaches. We hope to be able to ensure that not only do people with dental phobia derive the benefits of good oral health but also overcome their fear through the most effective treatment—cognitive behaviour therapy.”

The study, titled “The impact of dental phobia on care planning: A vignette study”, was published in the April 2019 issue of the British Dental Journal.

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With their powerful brand heritage, high visibility and sound reputation with dentists, these brands are a great complement to the existing oral-care portfolio of Unilever.