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 patient’s 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 matrices from native origin (MucoMatrixX, Dentegris Germany). These matrices 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 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). 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 incision follows the sulcus and a mucosal flap is prepared and enlarged (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 starting 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 (5b). Two layers of the matrix are positioned under the flap and the sutures fixing the flap (5c). The provisional shows the good primary success in reconstruction of the defect (5d/5e). 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 procedure.

This sequence shows how the matrix is used to substitute a connected tissue graft to serve in a root coverage procedure in region 53 to 56 (2a). In this case the incision follows the sulcus and a mucosal flap (without lateral incisions), is...
“Using short implants you are much more conservative”

By Dental Tribune Middle East

UBAI, UAE: During the Bicon Short Implant Forum 2015 in Dubai, UAE we caught up with Dr. Michael Ziegler, Clinical Director of the American Dental Clinic in Dubai to understand his experiences 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 a little faster than I did but I have always loved the region 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 sight 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.

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 show 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 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

UBAI, UAE: The Bicon Short implant event 2015 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 Perpetuani, Italy, Bicon International Technician. Additionally two local Implantologist Dr. Kadhim Hmoudani and Dr. Michael Ziegler spoke about their experiences with Bicon. Dr. Haider Khader 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 Tahran Co. In addition, dentist 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 recent 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 20 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 plate. 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-metallic aesthetic gingival margin.
“So many features in Bicon make it a unique implant”


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 Jabhawi 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 lock taper Implant Abutment Connection (1.5) which creates a completely hermetic sealed free from any bacterial infiltration which means no future bone pocket or bone resorption, so we can place the implant 2mm subcrestally to obtain best long life 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.

Contact Information

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5th DFCIC and AAID 2nd Global Conference hosted 1,358 world experts in Aesthetics and Implantology at Jumeirah Beach Hotel Dubai, UAE

By Dental Tribune Middle East

Dubai, UAE: DFCIC and AAID together welcomed over 1,358 world experts in Aesthetics and Implantology from 50 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

Dr. Munir Silwadi (left) and Dr. Andreas Kurthab (right) discussing questions

The scientific session at 5th DFCIC

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

Dr. Mohammad Al-Obaida (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)
Sirona has always been the leader in producing surpassed innovative products

By Victoria Wilson, Dental Hygiene Therapist

Solarcine, Carestream, Invisalign, Wrigley's Oral Health Program and VITA. Other Industry Players taking part include Middle East Dental Lab, Noble Medical Equipment, rocky Mountain Tissue Bank, ADL Laboratories, Fahmons Int'l, Inman Aligner, Dentegeirs, High Technology, Dubai Medical Equipment, Anyong Zonder Dental Materials Co, Qualident and Pidgint. The conference welcomed 1255 participants and 195 representatives from the industry. There were 20 different countries represented within the two day conference.

The international team of speakers, Dr. Andreous Kurbend, Germany; Dr. Maria Hardman, UK; Prof. Dr. Claus-Peter Ernst, Germany; Dr. Paul Wegl, Germany; Dr. James Russell, UK; Dr. Gary Wadhwa, USA/AAID; Colleen Murray UK; Prof. Khaled Balto, KSA; Dr. Ramesh Sabhlok, UAE; Dr. Shankar Iyer USA/AAID; Harald Hueskens, Germany; Dr. Luca Cardaro, Italy; Dr. Natalie Wong Canada/AAID; Dr. Harold Hueskens, Germany; Dr. Shankar Iyer USA/AAID; Dr. Tedie Lynn Hudson, KSA discussed together the latest in Aesthetic and Implantology. The agenda featured valuable examples of how the latest developments are being put to work in the service of learners regardless of their location or level of technology. The conference was being put to work in the service of learners regardless of their location or level of technology. The conference was designed to provide a platform for the exchange of ideas and experiences in the field of dentistry.

The team of speakers from the international team of speakers included Dr. Andreous Kurbend, Germany; Dr. Maria Hardman, UK; Prof. Dr. Claus-Peter Ernst, Germany; Dr. Paul Wegl, Germany; Dr. James Russell, UK; Dr. Gary Wadhwa, USA/AAID; Colleen Murray UK; Prof. Khaled Balto, KSA; Dr. Ramesh Sabhlok, UAE; Dr. Shankar Iyer USA/AAID; Harald Hueskens, Germany; Dr. Luca Cardaro, Italy; Dr. Natalie Wong Canada/AAID; Dr. Harold Hueskens, Germany; Dr. Shankar Iyer USA/AAID; Dr. Tedie Lynn Hudson, KSA discussed together the latest in Aesthetic and Implantology. The agenda featured valuable examples of how the latest developments are being put to work in the service of learners regardless of their location or level of technology. The conference was being put to work in the service of learners regardless of their location or level of technology. The conference was designed to provide a platform for the exchange of ideas and experiences in the field of dentistry.

Sirona always has been the leader in producing Surpassed Innovative products through the whole product portfolio, thanks for the dedicated management and dedicated R&D department that are keen on keeping the same level by investing a huge budget for this purpose which for sure ends up with products like CEREC Omnican and we always say it is just a start!!

Dr. Amro Adel, Area Sales Manager GCC & Pakistan Country Manager Saudi Arabia - Private Sector

Sirona has always been the leader in producing surpassed innovative products believing that our products are not just a dental equipment but yet an innovative technology that we need all our customers to make the benefit out of it, so product Knowledge, continuous educational programs are goals everyone in Sirona would deliver anytime anywhere.

What is your impression of the dental industry in Middle East?

Looking at the dental industry in the ME in the past 10 years, I can only have one impression...HERE IS Future!!

Sirona is amongst the largest providers of dental products and solutions on the market. What role does digital dentistry play in your portfolio?

As a market leader or we say The Market leader in digital dentistry, Sirona portfolio will always cherish such products and we will always be keen that Sirona role in digital dentistry will reflect the power of the company in this sector and thus the trust by our customers will be retain for years and years.

What is the impact Sirona and Digital Dentistry have had on dentists and dental technicians in the Middle East?

Well a question can be asked to the customers and I will be so happy to hear their feedback!! But anyhow in general we invest in our products, invest in our customers (allow me to call them Friends) either dentists or Technicians, They invest in us and I assume the profit both ways is Trustable.

Recently you have launched CEREC Connect in the Middle East, could you emphasize on this new system?

Adding to what we mentioned earlier, Sirona will always invest to reach each and every customer, CEREC connect will be one of such tools, a CEREC software that will allow all dentists and Technicians to communicate and get their digital impressions sent via email generating a new era of Dental office / Dental Lab communication.

Sirona booth presentation, Platinum Sponsor at the 5th DFC in Dubai

Successfully launched in Kuwait two months ago with a real positive results and customer satisfaction, soon in Saud, UAE and Qatar.

Would you like to share anything else with the readers?

Just to conclude, our commitment in Sirona is trust and we are there to gain it and we will work hard to maintain it as well.

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AEEDC Dubai 2014

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 (DITCC) 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 far-reaching 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 sectors, to explore and test equipment and products, interact and generate business partnerships.

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

By Inibsa Dental

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 anaesthetic 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 hemostasis, the risk of postoperative self-inflicted injuries and any existing contraindications to the selected local anaesthetic. Inibsa Dental provides a complete range of drugs to deliver safe, convenient and effective anaesthesia for every type of dental procedure and patient.

Inibsa Dental’s local anaesthetics are aesthetically manufactured, silicone-coated and have latex-free rubber components to ensure a smooth and painless injection.

Inibsa Dental

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

Inibsa Dental is positioned in its own right amongst the world’s leading manufacturers.

Inibsa Dental provides a complete range of drugs to deliver safe, convenient and effective anaesthesia for every type of dental procedure and patient.

Visit us at:
- AEEDC Dubai, UAE, 4-6 February 2014, Hall 4 – Booth 856
- EXPODENTAL-Madrid, Spain 15-17 March, Hall 7 – Booth D08-10
- IDBM Singapore, 4-6 April 2014, Level 4 – Booth 4H-51

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Implant tribune

After extraction of a first upper molar on the left, an internal sinus floor elevation is performed and a Soft-Bone Implant is placed. The alveoli are augmented (4a-4c) with a bovine bone substitution material (CompactBone B, Den-tergris). 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 constricted 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


Contact Information

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Twain Harte, Calif., helped attendees “See and Compare the Newest Lasers in Dentistry.” Gianni is the CEO of Kainos Dental Technologies and the co-founder of Zap Laser. Dr. Robert W. Carter, past president of the Second District Dental Society, presided over the lecture series.

A discussion of applied laser physics was used to explain how to safely and efficiently use a laser for the benefit of the patient. Both hard- and soft-tissue procedures, many of which can be used by general dentists, were discussed and illustrated. The seminar concluded with a brief discussion of current laser research and the criteria for the “ideal laser.”

An all-day “Botox and Facial Fillers: A Clinical Workshop and Demonstration” seminar/workshop was conducted. Dr. Steven Clark of Miramar, Fla., led the full-day course, which focused on the art of esthetic use of botox and facial fillers. The morning session provided an introduction to neuromodulators (botox, disport and xeomin) and various facial fillers, while the afternoon provided a live demonstration. Clark offered “clinical pearls,” which he developed during the last 20 years, to assure proper technique and safety while also achieving excellent cosmetic results.

Living in a digital era, it’s no surprise the dental field has made many technological advancements in the past couple decades — one of the most beneficial being CAD/CAM. Precise and increasingly user-friendly, 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, Dentca and Invisalign (dental 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. Musich 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 social media marketing.

In the Dental Assistants Pavilion, Shannon Pace 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

> Page 1
Jerry Herman, DDS introduced the first time at the GNYDM its GALAXY BioMill, which the company developed and designed in conjunction with the German company i-mes-ico. 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 quadrants 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, DentiCare had all sorts of tricks up its sleeves to help make treating patients easier and more fun. Of particular interest was Austin Powers was back at this year’s Greater New York Dental Meeting, at the Millennium Exhibit Hall. Attendees could see some of the newest 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.

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 Mouth-Watch 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, and crowns-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 crowns using the latest in esthetically pleasing, biologically compatible and durable tooth-colored materials.

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