International dental community gathers in Dubai

AEDDC 2012 to present the latest in dental materials and technology

Under the patronage of the Deputy Ruler of Dubai, Sheikh Hamdan Bin Rashid Al Maktoum, the 16th UAE International Dental Conference & Arab Dental Exhibition is currently being held at the Dubai International Convention & Exhibition Centre in Dubai. According to the organiser, the meeting is expected to be visited by almost 30,000 dental professionals from the region and abroad over the next three days.

Last year’s edition was one of the largest since the meeting was first inaugurated in 1996. Besides 850 trade exhibitors, the event drew more than 27,000 dental professionals to the World Trade Centre in Dubai.

While being the largest meeting of its kind in the region, AEDDC has also become the third largest dental meeting in the world in terms of size and business volume, the organisers said. It is a founding member of the World Dental Exhibition Alliance, an international network of dental trade shows set up in 2010 in order to promote dental business throughout the world. It includes large meetings like the Greater New York Dental Meeting in New York or Sino-Dental in Beijing.

AEDDC 2012 is presenting the latest advancements in dental materials and techniques from clinicians and manufacturer’s around the globe. The conference programme offers educational courses presented by over 100 dental specialists and ranging from topics like the enhancement of treatment through the use of lasers to strategic business planning in dental practices. Advanced specialty courses covering different fields of dentistry are also being held throughout the event.

“We have been working hard to offer the best educational programme, which is a challenge by itself considering the exceptional success of AEDDC 2011,” says Conference Chairman Dr Nasser A. Malik. “We are proud to present a diverse programme again this year that suits the interest of all professionals involved in dentistry.”

For the first time, continuing education session were held prior to the congress, labelled as Dubai World Dental Meeting, this programme has received support by re-known manufacturers like Ivoclar or SybronEndo.
On behalf of the Dubai Health Authority (DHA), I would like to invite you to the 16th edition of the UAE International Dental Conference and Arab Dental Exhibition—AEEDC, which will be held from 31 January–2 February, 2013, in the city of Dubai in the UAE.

Dubai is a city with a huge prospects and a strong ambition. Over the last few years, the city has seen a phenomenal growth of the health sector owing to the vision of our leader, His Highness Sheikh Mohammed bin Rashid Al Maktoum, UAE Vice President, Prime Minister and Ruler of Dubai, who has placed much importance to the health sector in the Dubai 2015 strategic plan.

At DHA, to host, attend and speak at conferences such as this one is part of our strategic vision. We are proud to have hosted esteemed international conferences and our initiatives not only advance the field of dentistry but also help to transform scientific knowledge for the best of all.

On behalf of the entire AEEDC Dubai team, I extend a warm and cordial welcome to all participants, visitors, exhibitors and distinguished guests.

Keeping dental professionals and personnel updated through Continuing Education is an important factor for the quality of services provided by dental specialists for the general public. AEEDC Dubai is becoming an effective platform and one of the most valuable sources for Continuing Education in the dental field through its rich offering of lectures, advanced workshops, poster sessions as well as a dental exhibition.

I firmly believe that the feedback of our participants and visitors will always make a difference to us and will help us in the distribution of the latest information and technology in the field of dentistry.

AEEDC Dubai has been presenting new and better scientific programmes with each edition held throughout the years. As organisers, we feel elated that our initiatives not only advance the field of dentistry but also help to transform scientific knowledge for the best of all.

I sincerely looking forward to an active participation at AEEDC Dubai 2012.
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Researchers investigate caries using nanotechnology

Colgate-Palmolive and DT Study club launch new Oral Health Network

Scientists focus on brain for treatment of swallowing disorders

Dental researchers bite into spinal cord injury rehabilitation

Study finds DNA vaccine to inhibit caries formation

Researchers from the Chinese Academy of Sciences in Beijing are reporting to have found a vaccine containing genetically modified DNA to be effective in preventing tooth decay. By injecting lab rats with a protein derived from Sal monella, they found evidence that it promoted the formation of anti body molecules that have the po tential to inhibit the colonization of Streptococcus mutans and the de velopment of caries lesion.

Being a relatively new concept, nucleic acid vaccines have been un der examination for their use in forming antibodies against a num ber of diseases and systematic con ditions including cancer. It’s poten tial to influence the formation of caries lesion was first examined by scientists almost 30 years ago. The new results build upon previous re search from the Beijing research group with the so-called pGJA/VAX vaccine and are the most convinc ing so far in having found an effec tive mucosal adjuvant candidate for intranasal immunization of an anti caries vaccine, the authors said.

They admitted that low im munogenicity which is the ability to provoke an int emune response is still relatively low in the vaccine. “Animal experimentation with this vaccine and route of adminis tration have been reported over the past several years,” explains Dr Daniel Smith, an immunology spe cialist and member of the Forsyth Institute in the US, to Dental Trib une Asia Pacific. “The new feature here is the use of flagellin as an adjuvant which seems to give a modest improvement in antibody levels.”

Other substances cur rently in pre-clinical experi mentation for use as a caries vaccine are other recombinant proteins and gluc an pro tein conjugates, according to Smith, human trials however cannot be expected to be realised anytime soon.

Researchers at the University of Basel and the Paul Scherrer Insti tute, the largest research centre for natural and engineering sci ences within Switzerland, have successfully demonstrated how caries affects human teeth at a nano-level. Their study offers new possibilities for the treatment of tooth damage.

Dentine consists mainly of inorganic elements but a fifth is com posed of organic material. It was previously hypothesised that these organic components—espe cially certain endogenous struc tural proteins (collagen)—were un affected by damage to the dentine and that their structure could offer a basis for remineralisation. To test this hypothesis, the research team, led by Prof. Bert Müller at the Bio materials Science Center at the University of Basel, used X-ray scat tering to compare the density of collagen in healthy and carious tooth spots.

The researchers cut both healthy and carious teeth into thin slices of 0.2 to 0.5 mm and exam ined them using small-angle X-ray scattering, a technique used for the structural characterisation of solid and fluid materials in the nano metre range.

They observed that various bac teria initially destroy the ceramic components of the outer enamel and the subjacent dentine. In contrast, in the early to mid-carious state, a significant part of the den tinal collagen network, remains practically unaffected.

Hence, the researchers suggest that in the future their method will allow the development of biom et ric dental fillings and cavity treat ments that are based on an undamaged dentinal collagen network, and allow the remineralisation of damaged dentine, for example, with nanoparticles.

The study was published online in the Nanomedicine Journal in Sep tember.

Dental researchers bite into spinal cord injury rehabilitation

In recent years, dental stem cells have increasingly been investi gated for their “stem cell” capabil ities, including the rehabilita tion of lost or damaged biological function. Scientists from the Nagoya University in the Nagasaki Prefecture in Japan have reported that they could possibly help to re pair injuries of the spinal cord, a leading cause of paralysis and dis ability.

Having transplanting human dental pulp stem cells into lab rats with severe spinal cord injury (SCI), they found that the animals re gained significantly more limb function than through a transplant of human bone marrow stromal cells or skin-derived fibroblasts.

According to the researchers, the cells not only inhibited the death of nerve cells, but also promoted the regeneration of severed nerves and replaced lost support cells with new ones, two main factors essen tial for functional rehabilitation. ”Spinal cord injury often leads to persistent functional deficits due to the loss of neurons and glia and to limited axonal regeneration,” they stated in the study pub lished in the Journal of Clinical In vestigation last week. “Our data demonstrate that tooth-derived stem cells may provide therapeu tic benefits for treating SCI through both cell autonomous and paracrine neuroregenerative ac tivities.”

Investigating different types of stem cells for their potential in SCI rehabilitation has a long track record in science. This September, for example, researchers from the Medical College of Wisconsin re ported that they had begun to im plant foetal neural cells into SCI pa tients. The Nagoya study is the first to have shown a rehabilitation ef fect in SCI cases with stem cells de riv ed from dental tissue.

Classified by the grade of im pairment, SCI can have mild to se vere health effects on patients, in cluding total loss of biological func tion. Common therapies include surgery, long-term physical ther apy and other rehabilitation ef forts.

If untreated, the condition can lead to severe health conditions like silent aspiration, dehydration or even pneumonia, which can be life threatening, especially for el derly patients.

Common therapies to overcome the problem include physical exer cises to improve the coordination of mouth and throat muscles. The new therapy approach de veloped by Doeltgen and his team uses magnetic stimulation to cre ate electric currents in the brain that stimulate the nerve cells that the scientists believe control the complex process of swallowing.

Similar techniques were suc cessfully used by German re searchers earlier this year to stim ulate cerebral nerve cells in rats.

“When people have a stroke, the parts of their brain that control the muscles in the mouth and throat are often damaged and we have to find ways to reactivate these re gions,” Doeltgen said.

The initial results of the study, which has received governmental funding of AUD 300,000 (US$313,000), are ex pected to be re leased in 2 to 3 years.
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### Congress programme AEEDC 2012

#### Tuesday, 31 January, 2012

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<td>Ferzad Mohd Al Awadhi, Rashid Al Abed</td>
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<td>Endodontic re-treatment: Achieving success the second time (Part 1)</td>
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<td>Peri-implant complications: A periodontal perspective</td>
<td>Mohd Mansoor, Rashid Al Abed</td>
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<td>12:00–12:45</td>
<td>Cytoxicity of dental resins-containing restorative materials</td>
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<td>Orthognathic Surgery Alters Jaw Neck Motor Behaviour</td>
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<td>Moosa Abu Zaida, Sanil Poosnam</td>
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<td>Review of treatment modalities for the over closed vertical dimension, i.e. correcting deep overbites and improving brachy-facial profiles</td>
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<td>Outpatient surgical orthodontics</td>
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<td>Chairside and labside CAD/CAM systems: Possibilities and limitations</td>
<td>Ziad Salameh, Khaidi Al Gergawi</td>
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<td>11:00–11:15</td>
<td>The way to a beautiful zirconia veneered restorations</td>
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<td>11:15–12:00</td>
<td>How to achieve long-lasting full-ceramic restorations using a CAD/CAM system at chair-side</td>
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<td>Zirconia in CAD/CAM dentistry</td>
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<td>Contemporary view of caries and what constitutes treatment</td>
<td>Khalid Farqabi, Yaser Alasousi</td>
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<td>New indications in aesthetic dentistry: Closing diastemas with minimally invasive techniques</td>
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<td>Local haemostasis techniques after tooth extractions and minor oral surgeries in patients with blood coagulation disorders</td>
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<td>Space maintenance as interceptive trend</td>
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<td>Occusal Asymmetries: Aetiology, prevalence, diagnosis and treatment (Part I)</td>
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<td>Whitening, the foundation of aesthetic dentistry</td>
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<td>Regenerative Medicine: Status and future potential</td>
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<td>Bone regeneration at dehiscence-type defects with a novel PED-technology membrane impact of successful re-generation for long-term peri-implant stability</td>
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<td>Practical approach to implant dentistry: From diagnosis to delivery</td>
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I want to smile

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Teeth Whitening
11:15–12:15
The bone ring technique: New augmentation perspectives in implant dentistry. Method and 5-year clinical observations
12:00–12:45
Potentially malignant disorders

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Chairpersons: Neeraj Khaana, Emad Abu Sirdana

09:00–09:45
Evaluation of imaging modalities for the diagnosis of bisphosphonate-related osteonecrosis of the jaws
09:45–10:30
Pregnancy and dental X-rays
10:15–10:45
New technologies in dentistry
11:00–11:45
Break
11:15–12:00
Interceptive orthodontic treatment in the mixed dentition
12:00–12:45
Occlusal asymmetries: Aetiology, prevalence, diagnosis and treatment (Part 2)

Sponsored by Colgate
Chairpersons: Shaoh H. Siddiqui, Ayman Balche

09:00–09:30
Alternative therapeutic approach to Temporomandibular Joint Disorder
09:30–10:00
Overcome neck & upper back pain: Preventing neck & upper back pain in dental professionals
10:00–10:45
Contemporary approaches for managing dentist hypersensitivity
11:00–11:45
Break
11:15–12:15
Systemic health and the management of gingival inflammation through the use of anti-bacterial and anti-inflammatory agents
12:15–12:45
Contributions and limits of endodontic therapy in the treatment of radicular cysts and peri-apical lesions

Chairpersons: Jumana Sabbarini, Moustapha Saad

14:00–14:30
Primary and secondary surgery in cleft lip and palate deformity
14:30–15:30
Anticipatory guidance and management of patients with cleft lip and palate from infancy through adolescence (joint lecture)
15:30–16:00
Challenges in paediatric dentistry
16:00–16:45
Advanced gingival aesthetic
16:45–17:30
The art of the complete exam: Implementing digital photography & diagnostic records for predictable success

Chairpersons: Najiya Ayoob Hassan, Nadia Mohd Saleh

14:00–14:45
Sterilization best practices
14:45–15:30
Building a dental practice business plan
15:30–16:15
How to mould every technology aspect to bringing your clinic to the new era
16:15–17:00
Anterior maxillary restorations
17:00–17:45
Tooth discoloration: Aetiology & management

Sponsored by Crest
Chairpersons: Dina Debaybo, Robert Edwab

13:45–14:15
Facial prostheses
14:15–14:45
Laser—the modern tool for selective caries management—A tug of war
14:45–15:30
The clinical application of lasers and principle-based patient care
15:30–16:00
Intrarural imaging: A comparison of systems in the identification of root fractures
16:30–17:30
Who needs conscious sedation in dentistry?– A novel assessment tool

Sponsored by Colgate
Chairpersons: Kaveh Seyedian, Boukais Hamid

16:00–16:45
Contemporary all-ceramic restorations: Decision making
16:45–17:30
The use of electrobond improves microtensile bond strength and reduces nanoleakage expression of dental adhesives
18:00–18:45
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18:15–18:45
The endodontist vs. the implantologist—A tug of war
19:45–17:30
Modern microsurgical endodontics: Raising the bar

Thursday, 2 February 2012

Chairpersons: Saad Al Bayatti, N. Santana

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Global trends in caries epidemiology
09:30–10:15
Blood borne exposures in dentistry
10:15–11:00
Bringing your clinic to the new era
11:00–11:15
The blessing of mother nature: A herbal revolution
11:15–11:45
Health behaviour and public dental health
12:00–12:45
Critical review of Matrix systems for posterior composite restorations

Sponsored by Listerine
Chairpersons: Fuad Al Dowikat, Ahmed Adam Moneim

09:00–09:45
Cosmetic gingival surgeries
09:45–10:30
Nasalavcular molding (NAM) therapy in infants born with clefts of the lip, alveolus, nose and palate
10:15–11:00
Traumatic injuries to permanent teeth: A paediatric dentist’s perspective
11:00–11:45
Break
11:15–12:00
Dental sleep medicine & Temporomandibular Disorders: The medical/dental connection
12:00–12:45
Computer-controlled local anaesthesia delivery: New state of the art technology and dental injections

Sponsored by Crest
Chairpersons: Steen Sindet-Pedersen, Paul Tipton

09:00–09:40
Conservative dentistry, endodontics and prosthodontics applications with Er:Cr:YSGG
09:40–10:20
Soft tissue and perio pocket with Er:Cr:YSGG
10:20–11:00
Minimally invasive laser oral surgery
11:00–11:45
Break
11:15–13:10
Interdisciplinary Approach for Better Aesthetic Results

Sponsored by Colgate
Chairpersons: Hassan Al Seed, Nadia Mohd Saleh

16:00–16:45
Endodontics: High Tech or Appropriately?
16:45–17:15
The Endodontic-Periodontic Lesion, A Clinical Dilemma
17:15–18:45
Crestal Bone Loss Around Dental Implants, Follow Up 1 To 5 Years Of Functional Loading
18:45–19:15
The Inman Aligner
19:15–19:45
Break & Exhibition Visit
20:00–20:30
Smile design from a new aspect

Chairpersons: Rachwan Kouteby, Basim Bo Hawas

14:00–14:45
Latest concepts of Minimally Invasive aesthetic dentistry in the 21st century
14:45–15:30
Different materials and techniques in cosmetic veneers
15:45–16:45
Computer-guided implantology: The New Deal
16:45–17:30
The use of PRF in reconstructive dental implant surgery

Sponsored by Crest
Chairpersons: Bohum Al Hashimi, Donald Ferguson

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Better orthodontic results with the right bracket selection: Essential hints and tips to make the prescription work for you
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“Papacarie”—A new chemo-mechanical means of caries removal in children
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Alternative interventions to fioracresol as a pulpotomy medicament in primary dentition
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CT-scan based guided implant surgery using a relieved denture during the osseointegration period: A prospective study

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15:15–16:00
Temporomandibular Joint—What we have to know?
16:00–16:45
Functional Occlusion. The fundamentals of predictable dentistry
16:45–17:30
Physical and biotechnological means in regenerative dentistry
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GERMAN PIONEER OF DENTAL CEMENTS PRESENTS AT AEEDC

In its 120th year, the German dental industry pioneer Hoffmann Dental Manufaktur presents itself and its production of dental materials at the AEEDC in Dubai.

Their success story began with the invention of zinc phosphate cement by founder Dr Otto Hoffmann in 1892. Since then, the family-owned company based in the German capital Berlin has retained a worldwide leader in high quality lining and luting cements on zinc phosphate basis.

Hoffmann founded the company with Dr Robert Richter, a dentist who had been educated in the US, who knew that the dental world was in need of a reliable dental cement after the late father and son Rostaing de Rostagni had taken the composition of the first dentinogene to their graves. Being the son of a farmer and village mayor, Hoffmann already had a reputation as a successful inventor by the time he met Richter. When he had completed his research he did not only replicate Rostaing’s dentinogene but surpassed it considerably thus acquiring a patent and royal approval for his zinc phosphate cement.

The first portions of the new cement were consigned to the Harvard Dental School who sent its full account. This inspired the two entrepreneurs to name the cement after the university and to found the Harvard Dental Manufaktur Company in 1892.

The product quickly found many applicators across the world, so that the company held a monopolistic position by the end of the First World War. The families continued the business of the founding fathers until in 2005 when the two families split. The successor to the Richter family received the brand name and the grandson of Otto Hoffmann continued manufacturing.

The current CEO and grandson Tobias Hoffmann has inherited the passion for accuracy and reliability that made the company successful 120 years ago.

“When it comes to cement production, quality control is everything,” he says. “Nowadays we have technical devices that can measure particle sizes accurately. We are also able to control the heating processes within a single degree and define the shape of the optimum particle. Year after year and piece for piece, our customers can rely on consistent accuracy of all our products, piece for piece.”

Hoffmann Dental Manufaktur, Germany
www.hoffmann-dental.com
Booth 507

COMPOSAN BIO-ESTHETIC

Composition bio-esthetic from Promedica in Germany is an innovative composite material based on three-dimensionally linked inorganic glass-like components and organic monomers. Special nano and ceramic filler particles are incorporated in this cross linked network matrix. The material’s chemical buildup ensures an extraordinarily high biocompatibility, the company says.

As Demathyrates of traditional composites only have two reactive connection points residual monomers are released due to incomplete polymerisation. These monomers bear the potential to trigger allergies. According to Promedica, the molecules of Composan bio-esthetic have more than 100 connection points resulting in complete polymerisation and virtually no residual monomers, thus reducing potential for allergies considerably.

In addition, Composan bio-esthetic offers excellent physical properties e.g. extremely low polymerisation shrinkage, high resistance to chewing stress and a remarkably low abrasion resistance. Owing to the material’s enamel-like thermal expansion coefficient there are hardly any tensions between tooth substance and filling material. In combination with Composand 1, also distributed by Promedica, the adhesion to the tooth substance is said to be extremely high and to assure a perfect and durable marginal seal. In addition, the restorative tooth-like translucency, very high colour stability, perfect colour adaptability and excellent polishability thus allowing tooth restorations in natural beauty.

Composan bio-esthetic is suitable for all filling classes, repair of veneers, core build ups as well as composite inlays and is also available as a flowable in attractive and translucent shades which exactly match those of the packable version. Therefore, it is perfectly suited for combined fillings in lining or CBF-technique (Composite bonded to Flow).

The specific product features and physical properties of Composan bio-esthetic flow equal those of the packable material thus providing extraordinarily strong, aesthetic fillings without marginal gaps. The company says that the material is even suitable for posterior regions exposed to masticatory loading.

Composan bio-esthetic flow is indicated for minimally invasive preparations, class III and V cavities, extended fissure sealing as well as the repair of fillings and veneers.

Promedica Dental Material, Germany
www.promedica.de
Booth 607

LISA AND LINA

With Lisa, the Austrian dental equipment manufacturer W&H presents the latest addition to its sterilizers that is supposed to offer dental clinicians everything they would expect from the best sterilizers as well as the possibility to adapt it to individual practice requirements. Together with Lisa, the two type B sterilizers were designed to meet the needs of clinicians through the sterilizer’s exclusive ‘made-to-measure’ type B cycles and integrated automatic traceability system featuring a load release option.

According to the company, Lisa was designed for intensive use and therefore features new type B cycles, that automatically reduce and optimize the whole sterilization cycle according to the number and type of instruments to be sterilized. It is also supposed to shorten the drying process owing to the patented ECO-Dry system.

Lisa also becomes a premium performing sterilizer for medium loads as there is no longer the need to wait until the sterilizer is fully loaded. The company says that with the help of this feature, clinicians can now save up to 25 minutes while valuable instruments are less exposed to heat which increases their lifespan.

Lisa comes with an interactive touch-screen that eliminates the need for extra hardware or a standard user interface. On-board processor manages the whole traceability process. At the end of the cycle and after the door has opened, the user can release the load by identifying themselves through a password directly on the touch-screen. Together with the new “traceability pack” that includes the LisaSafe label printer and a USB bar code reader, the link can easily be made from the dental instruments and corresponding sterilisation cycle to the patient file to help ensure that hygiene protocols are complete. Both load release and label printing will only be possible if the sterilisation cycle has completed successfully to guarantee maximum legal protection, the company says.

Besides staying true to the W&H concept to offer highly type B cycles and a short ECO B cycle for your smaller loads, and ensure ease-of-use through its practical keypad, the Lisa steriliser was also designed to evolve according to the requirements of every practice. If required, it is therefore possible to add the optional Multiport which allows to save cycles on an USB stick and to print of bar-code labels via the LisaSafe printer.

W&H, Austria
www.wh.de
Booth 30
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AIR-N-GO POLISHERS AND POWDERS

With AIR-N-GO, the French manufacturer Satelec aims to increase the clinician’s possibilities for care and treatment with one single handpiece. The dual purpose air polisher with direct connection to the chair was designed for ultra-active supragingival polishing (The Beauty) and instantly converts into a perio system through items delivered with the optional Air-N-Go PERIO KIT comprising an ultra-fine PERIO nozzle, a green PERIO powder tank and PERIO powder for sub-gingival periodontal diseases and peri-implantitis treatments (the Health).

Available as seven different powders, the AIR-N-GO powder product range is said to provide gentle care and effective prophylaxis and/or sub-gingival treatments. According to the manufacturer, the grain structure of each type of powder was specifically developed to allow an efficient and painless polishing and cleaning, with no damage to the tooth or implant.

The AIR-N-GO “CLASSIC”, active and sodium bicarbonate based powder, with less aggressive geometry, comes in five 100% natural fresh flavours, Satelec said.

The AIR-N-GO “PEARL” ultra-active powder, based on natural calcium carbonate, consists of microspheres that are gentle on delicate tissues. These two ranges are recommended for supragingival prophylaxis.

Sub-gingivally, the glycine-based “AIR-N-GO PERIO” powder is supposed to prevent and fight periodontal and peri-implantitis diseases.

SATELEC, FRANCE
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The onsite Business Centre offers high-speed Internet connection, telephone and fax facilities as well as interpretation and secretarial services. For those who prefer to use their own computer, wireless Internet access is provided by the company Etisalat. Login data can be acquired directly via credit card and online at etisalat.ae. Prices range from Dhs. 5 to Dhs. 120.

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Embassies and consulates help visitors with an array of issues directly via credit card and online at embassyworld.com.

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**Exhibition opening hours**
- Tuesday, 31 January: 10:00–18:00
- Wednesday, 1 February: 10:00–18:00
- Thursday, 2 February: 10:00–18:00
- Friday, 3 February: 10:00–18:00
- Saturday, 4 February: 10:00–17:00

**Disabled Access**
All exhibition halls, meeting rooms and public areas are accessible by wheelchair and a man-dated number of spaces are also reserved for handicapped parking. Toilets on the ground floor and above Exhibition Halls 6, 7 and 8, as well as elevators and doorways, are designed to meet disabled access requirements. Additionally, wheelchair service for emergency needs are available at our Medical Services Centre next to Exhibition Hall 5.

**Medical Service (EMS)**
All delegates, exhibitors, contractors, staff and visitors should be aware that the DICEC provides an emergency service for persons, who become injured or ill whilst at the Exhibition Centre. The EMS is permanently located between Halls 4 and 5 at the Complex. A second EMS station is also located on a Za’abeel Concourse near the Za’abeel Bistro during larger exhibitions at the venue.

The Emergency Medical Services office is open from 8:00 to 17:00. It is always open one hour before and after all exhibition and conference operational hours.

**Other Facilities**
The Concourse serves as a link between the Exhibition Halls and the Sheikh Rashid and Sheikh Maktoum Halls, and connects the two Center hotels. It is lined with banking, postal, travel and rental facilities, restaurants, coffee houses, and retail stores, and registration desks capable of housing organiser-supplied equipment.

**Parking**
Free car parks are available for deferred visitors within the perimeter of DWTC. These car parks operate on a first-come, first-served basis.

**Telephone Services**
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The information provided is subject to change. Participants who need help are requested to visit the General Information Desk.

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