Get checked for oral cancer today

The Oral Cancer Foundation estimates oral cancer kills one person every hour, every day in the United States, and the five-year mortality rate is higher than cervical cancer and prostate cancer. However, when oral cancer is detected early, patients have a 90 percent survival rate.

More people are being diagnosed with oral cancer than ever before. But surprisingly, research shows this increase is not because of the traditional risk factors of drinking, smoking and using chewing tobacco. Rather, oral cancer is now being found in a younger population of men and women because of their exposure to HPV (human papillomavirus).

The FDA estimates 70 percent of cervical cancers are associated with HPV-16 or 18. New studies have confirmed a significant link to oral cancer as well. In the oral environment, these manifest themselves primarily in the back (posterior) regions, such as the base of the tongue, back of the throat (oropharynx), tonsils and tonsillar pillars. The Centers for Disease Control (CDC) recommends all patients older than the age of 17 be screened annually.

The good news — when found early, oral cancer patients have an 80 percent survival rate within five years.

The bad news — only 27 percent of those diagnosed with stage 4 oral cancer will survive within five years because the majority of these cases will be discovered as a late-stage malignancy.

Early detection is the key to controlling this terrible disease, and yet, the American Dental Association (ADA) estimates that even though 60 percent of the U.S. population visits a dentist every year, less than 15 percent of those regularly report having received an oral cancer screening.

When used in conjunction with the conventional intraoral and extraoral head and neck exam, adjunctive light-based technology is effective in helping to uncover abnormalities before they become visible under normal lighting.

The Identafi® Oral Cancer Screening System (made by DentalEZ and distributed by Henry Schein Dental) is a small, cordless, handheld unit that is designed for use in the offices of dentists, specialists and general practitioners to screen for oral cancers and pre-cancers.

Unlike other fluorescent technologies and dye systems, the multi-spectral device uses a three-wavelength optical illumination and visualization system that allows dental professionals to identify biochemical and morphological changes in cells of the mouth, throat, tongue and tonsils that are not visible to the naked eye.

The Identafi Oral Cancer Screening Device received an Editor’s Choice award from The Dental Advisor, was named as one of the “Top 100 Products of 2012” by Dentistry Today and was selected as the Gold Winner in the dental instruments, equipment and supplies category of the 2012 Medical Design Excellence Awards competition.

Why wait? While you are here at the Thomas P. Hinman Meeting, why not stop by the Henry Schein Total Health booth (No. 1017) for a free oral cancer screening?

April is Oral Cancer Awareness Month, and it is a great time to get involved in programs that increase awareness and identify at-risk patients. To find out more about how you can help and the support available, contact the Oral Cancer Foundation (www.oralcancerfoundation.com) or DentalEZ (www.identafi.net).
BruxZir® restorations, a more lifelike emergence profile

Visit us at booth #1022

After

"This endodontically treated molar had a large amalgam and a fracture, necessitating a full-coverage crown. I selected BruxZir® Solid Zirconia for its conservative nature (as thin as 0.5 mm) and the fact that I will get a great fit in the gingival third due to its natural emergence profile. I'm not sure my patient is going to floss as much as he should, and I want to make sure I do my part to help his gingival health."

— Michael C. DiTolla, DDS, FAGD

Before

Another BruxZir Award

This image represents the typical PFM prep we receive with a conservative feather-edge margin. When a PFM is fabricated for this prep, there is a bulky 1 mm margin on the PFM that catches on the explorer. Even if the margin is sealed, the emergence profile is unacceptable.

This image represents the typical PFM prep we receive with a BruxZir crown in place. Because it is a monolithic crown and can be milled to a feather edge, there is no bulk of material, or "speed bump," at the margin. Dentists tell us their explorer cannot detect where the tooth ends and the BruxZir crown begins.

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Visit us at booth #1022

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Seeing is believing

Check out a product demonstration of BEAUTIFIL Flow Plus here at Hinman

Shofu Dental is holding product demonstrations at booth No. 2314, featuring its new injectable hybrid restorative, BEAUTIFIL Flow Plus. Now available in three new shades — B1, B2 and C2 in two viscosities — BEAUTIFIL Flow Plus gives dentists even more esthetic treatment options at their fingertips.

In addition, you can get a taste of BEAUTIFIL Flow Plus when you attend Dr. Scott Parker’s lecture, “The Future of Adhesive Dentistry: Making Our Lives Easier” at either 8:30 a.m. or 1 p.m. on Friday.

Adhesive Dentistry: Making Our Lives Easier,” at 8:30 a.m. and 1 p.m. on Friday. BEAUTIFIL Flow Plus combines hybrid-like strength and functionality, unique handling and stackability and a flowable delivery. Additionally, it has 15 percent more radiopacity than enamel and offers the benefit of fluoride release and rechargeability. Those interested in seeing the material firsthand are encouraged to come check it out at the Shofu booth.

According to Shofu, BEAUTIFIL Flow Plus represents the next step in the evolution of restorative materials, based on its convenient flowable delivery system and its physical properties and functionality that rival leading hybrid composites.

Brian Melonakos, president of Shofu Dental, said he has been very pleased with the success of the product. “We’ve always known that we have an amazing product on our hands … but none of us imagined how quickly it would catch on,” he said.

Unlike other flowables, BEAUTIFIL Flow Plus has stay-put handling and physical properties that allow use on the occlusal surface and marginal ridge, eliminating the need to pack a hybrid composite on top.

A flowable base, liner and final restorative material, BEAUTIFIL Flow Plus is approved for all indications (Class I–V). With a smooth, self-leveling consistency, the material leaves a tight marginal seal on the bottom and a smooth ready-to-polish surface on top. Moreover, Shofu’s proprietary S-PRG (surface pre-reacted glass) technology provides sustained fluoride release and recharge that can’t be found in any other composite material.

BEAUTIFIL Flow Plus is available in two distinct viscosities. F00 (zero flow) offers precision stacking, and F03 (low flow) is an ideal base/liner.

For a limited time only, BEAUTIFIL Flow Plus is available in two introductory kits. The standard kit (PN 2000S) offers two 2.2-gram syringes of both viscosities in shades A2 and A3, and the pedo kit (PN 2000P) offers two 2.2-gram syringes in both viscosities in shades A1 and bleach white. Both kits also contain samples of Shofu’s top-selling products, including the seventh-generation bonding agent BeautiBond, One Gloss, Super Snap and Shofu’s hybrid material, BEAUTIFIL II. The kit retails for $102.25 (a $160 value).

Stop by the Shofu booth, No. 2314, to see BEAUTIFIL Flow Plus for yourself.
Handpiece manufacturer aims for global leadership

TOKYO, Japan — It is no secret that the years since the global financial crisis have not been very kind to companies in Japan. First, the recession slowed business investments significantly down, then the negative effects of the 2011 tsunami and the massive destruction it wrought almost brought the world’s third largest economy to a halt.

For NSK, one of the country’s largest dental manufacturers, troubles in the home market are its least concern because the company conducts most of its business elsewhere.

According to President and CEO Eiichi Nakanishi, with whom Dental Tribune International had the opportunity to speak at the company’s headquarters in Tochigi, more than 80 percent of the company’s revenues are now generated by its operations outside of Japan.

In the last three years, NSK has been performing particularly well in mature markets such as Europe and North America, where it boosted its presence with the opening of its new headquarters near Chicago, despite unfavorable conditions such as high market saturation and the ongoing decline of the yen against the dollar.

Since 2009, Nakanishi has also seen his company regaining its former market shares in Asia through centralized distribution and after-sales support offered by its new subsidiary in Singapore. Another significant contributor has been NSK’s European office in Germany, which accounted for almost one third of the 22.2 billion yen ($278 million) in sales the company reported in 2011.

“That is why economic conditions in our home market have little or no impact on our overall business. We really think globally,” Nakanishi explained.

According to the 48-year-old, who has run the company since 2000, one of the major reasons for NSK’s strong market position, even in established markets, is its dedication to innovation and quality, combined with the excellent after-sales service it is able to provide to customers in almost every country except North Korea. But this hasn’t always been the case.

Founded in the 1930s, the company had a rough start and operations were completely halted during World War II. Since the production of dental handpieces resumed in 1951, however, the company has grown extensively and now employs more than 700 people in its Japanese offices in Tochigi and Tokyo. NSK also still produces most of the precision parts in-house, which, according to Nakanishi, is one of the reasons that dentists now identify the company with high-quality products.

“We employ many good engineers and marketing people who help us to constantly improve our brand and make it more attractive to dentists,” he said.

One of NSK’s most recent innovations, which was launched at IDS in Cologne in 2011, for example, is the Ti-Max Z series, a durable premium handpiece that is purported to have the smallest heads and necks in the industry, as well as an exceptionally low noise level and virtually no vibration.

The Surgic Pro surgical micromotor has also received much interest, particularly by dental implant surgeons. This device is distributed alongside implant systems by major implant manufacturers.

NSK asserts it pays close attention to the needs of its customers, a philosophy that has resulted in products such as the S-max pico, which was developed solely for the treatment of patients with smaller mouths, such as children.

Moving into other markets is conceivable but unlikely to happen anytime soon, according to Nakanishi. Even though his company has begun to enter new areas in the last decade with the launch of instruments such as ultrasonic scalers and polishers, its core business will remain dental handpieces and other small-motor equipment.

“When it comes to handpieces, we have produced more innovations than our competitors,” Nakanishi said. “Our goal is to become the No. 1 company worldwide in this segment.”
The phenomenon: A clinician’s perspective

May 6, 2011, is an important day in dental history. That’s the first day dentists prescribed more BruxZir® restorations than PFM restorations.

At the time, BruxZir was 2 years old and PFMs were 50 years old. Here at the lab, it confirmed a trend we had been observing during those two years. The days of the PFM being the dentist’s everyday restoration were coming to a close.

The sales of BruxZir never dipped below those of the PFM again, in fact, the gap between the two continues to grow wider as BruxZir grows and PFMs continue to shrink.

Ten years ago, our R&D department asked me what they should work on, what kind of restorative material would most benefit dentists and patients. My answer was simple: cast gold in shade A2.

They reminded me they were not alchemists, but I remained undeterred in my push for a cast gold in shade A2.

Five years later, they presented me with BruxZir, an impressive effort at creating my request. Fast-forward five more years to today, and it is clear they were truly on to something big.

As the translucency and esthetics of BruxZir continue to improve, it has transitioned from just a posterior material to an anterior material as well, one that can be used in almost any clinical situation.

The biggest reasons for the rapid growth of BruxZir are high strength and fit. As a monolithic restoration with no porcelain on it, BruxZir has the lowest fracture rate of any restoration (besides cast gold) in our lab.

It’s clear that dentists place strength very close to the top of their list of desirable characteristics for an everyday crown and bridge material.

The most common comment we get is about how well the BruxZir restorations fit compared with most of the crowns they have used in the past. Dentists notice the emergence profile of BruxZir crowns blend with the tooth structure and soft tissue better than any material they have previously used (again, with the exception being cast gold).

Dentists tell us their explorer cannot detect any preparation with at least 0.5 mm of BruxZir thickness, this allows you to safely adjust the crown if necessary when checking the occlusion. While BruxZir can be milled as thin as 0.5 mm, it cannot be adjusted at this thickness without breaking at some point. With a BruxZir crown at 0.5 mm thickness with high occlusion, consider adjusting the opposing tooth.

Here in Atlanta
For more information or to see BruxZir for yourself, stop by the Glidewell Laboratories booth, No. 1022.

The microscopic images (Fig. 1 and Fig. 2) demonstrate how a high-strength monolithic material (BruxZir) has a much better emergence profile than a bi-layered crown (PFM) on an identical prep. This combination of fit, strength and improved esthetics has made BruxZir the most prescribed restoration in the lab. The final frontier for BruxZir is to be used for veneers, and with the translucency and esthetics improving monthly, that day is not too far off.

Indications
BruxZir Solid Zirconia is indicated for crowns, bridges, veneers, inlays and onlays. It is an aesthetic alternative to PFM metal occlusal/lingual or full-cast restorations and ideal for restorations requiring extra durability such as crowns under partials or screw-retained implant crowns.

The chip-proof durability of BruxZir restorations makes them ideal for bruxers who have broken natural teeth or previous PFM restorations. BruxZir restorations are also ideal for patients lacking the preparation space for a PFM.

Preparation requirements
- Shoulder preparation not needed, feather edge is OK. It is a conservative preparation similar to full-cast gold, so any preparation with at least 0.5 mm of occlusal space is accepted.
- Minimum occlusal reduction of 0.5 mm, 1 mm is ideal (Fig. 3).

A look at the increase in the amount of BruxZir restorations prescribed.

Fig. 1: These illustrations show an ideal 1 mm reduction for an anterior or posterior BruxZir crown and also have feather-edge margins. BruxZir does fine at 1.5 or 2.0 mm as well, but this amount of reduction is not always possible. By maintaining 1 mm of BruxZir thickness, this allows you to safely adjust the crown if necessary when checking the occlusion. While BruxZir can be milled as thin as 0.5 mm, it cannot be adjusted at this thickness without breaking at some point. With a BruxZir crown at 0.5 mm thickness with high occlusion, consider adjusting the opposing tooth. Photos/Provided by Glidewell Laboratories.

Fig. 2: This represents the typical PFM prep we receive with a conservative feather-edge margin. When a PFM is fabricated for this prep, there is a bulky 1 mm margin on the margin. When a PFM is fabricated for this prep, there is a bulky 1 mm margin on the PFM that catches on the explorer. Even if the margin is sealed, the emergence profile is unacceptable.

Fig. 3: This represents the typical PFM prep we receive with a BruxZir crown in place. Because it is a monolithic crown and can be milled to a feather edge, there is no bulk of material, or ‘speed bump,’ at the margin. Dentists tell us their explorer cannot detect where the tooth ends and the BruxZir crown begins.

Fig. 4: This is a side-by-side comparison of BruxZir and PFM restorations produced per month at Glidewell Laboratories.

By Michael C. DiTolla, DDS, FAGD
Henry Schein Dental and the DentalEZ® Group are pleased to offer you a

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Commentary: Not all handheld X-ray systems are created equal

By Joel Gray, PhD

As a recent article on www.dental-tribune.com points out, there are some safety issues with handheld X-ray units made in China and Korea and elsewhere outside the United States. There are two sources of radiation from an X-ray system — leakage radiation from the X-ray tube and scattered radiation from the patient. The leakage radiation is minimized by placing highly absorbing material, such as lead, around the X-ray tube.

The major issue with the handheld X-ray units is the scattered radiation — that is, X-rays that are scattered from the patient toward the operator. In fact, about 20 to 30 percent of the X-rays are scattered from the patient toward the person holding the device. The X-ray units from outside the United States, which are under FDA scrutiny, do not provide any protection from X-rays scattered from the patient.

These systems look like a large camera you hold with both hands. There is no shielding provided by these systems; the user’s hands are exposed to all of the X-rays scattered from the patient. Consequently, the user’s hands are going to receive a radiation dose that will probably exceed the radiation-protection limits for skin and extremities.

We evaluated one handheld X-ray unit made in the United States (NOMAD, Arribex) and compared staff doses with those for the same staff using conventional wall-mounted systems prior to acquiring the handheld systems (Gray et al. 2012). This handheld system uses a proprietary shielding material around the X-ray tube, resulting in leakage radiation levels that are virtually immeasurable. In addition, it has an integral leaded-acrylic shield that protects the user from radiation scattered from the patient.

The results of our study indicated that the users of the handheld X-ray system received lower radiation doses than they did when they were using conventional wall-mounted systems.

Buyers should be beware that not all handheld X-ray systems are created equal and not all of those being sold on the web have been reviewed by the FDA. Handheld X-ray units should have sufficient shielding to minimize leakage radiation from the X-ray tube and an integral shield to protect from radiation scattered from the patient.

Here in Atlanta

To check out the NOMAD for yourself, stop by the Arribex booth, No. 923. For information on the handheld X-ray study, visit www.arribex.com/wp-content/uploads/file/pdf/DosimetryStudyCRCPD.pdf.
Jimmy Carter Presidential Library and Museum
The Jimmy Carter Presidential Library and Museum is an opportunity to learn about the life and work of the 39th president’s life. Explore an exact replica of the Oval Office, view special exhibits and listen to oral histories and interviews from the Carter White House.

Centennial Olympic Park
This 21-acre park is the city’s lasting legacy from the Centennial Olympic Games.

Castleberry Hill
Trendy art galleries, restaurants and meeting places can be freely explored at Castleberry Hill.

Piedmont Park
Piedmont Park is the largest green space in the city with festivals and events throughout the year. The park’s sidewalks are just some of many trails for use by pedestrians, bikers and rollerbladers.

Underground Atlanta
Underground Atlanta is located downtown and features shopping, dining, history, city festivals and entertainment.

Georgia State Capitol
Self-guided tours include a history of the building, the public galleries of the house of representatives and the senate and the Georgia Capitol Museum.

Martin Luther King Jr. Historic Site
The National Historic Site includes year-round tours of Dr. King’s birth home, the church where his father preached, his and wife Coretta Scott King’s final resting places, the International Civil Rights Walk of Fame and the visitor center exhibiting civil rights memorabilia.

Historic Oakland Cemetery
This historic cemetery serves as the final resting place to 70,000 people, including author Margaret Mitchell, golfing legend Bobby Jones, six Georgia governors, 24 Atlanta mayors and more.

Atlanta Botanical Garden
The Atlanta Botanical Garden features more than 30 acres of gardens, forest and wildflower trails as well as a 10,000-square-foot Fuqua Orchid Center.

ATL-Cruzers Electric Car Tours
Discover a new way to explore the city with ATL-Cruzers Electric Car Tours, Atlanta’s only electric car tour company. Learn about Atlanta’s rich history, find the most popular places to grab a bite or just sit back and enjoy the ride.

Atlanta History Center
The Atlanta History Center features 32 acres of gardens, wildlife trails and woodland areas. The complex includes the 1840s Tullie Smith Farm and the fully restored 1928 Swan House mansion.

For more information, visit www.photomed.net, call (800) 998-7765 or stop by the PhotoMed booth, No. 1218, here during the Hinman Dental Meeting.

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