2015 Annual Scientific Congress of the EAO continues

After a promising start on Thursday, participants of this year’s EAO Annual Scientific Congress can look forward to another two days of dental excellence and learning. Starting off the programme on Friday are two parallel sessions on implant treatment of the elderly and the use of CAD/CAM in implant treatment, followed by two major sessions on virtual planning as well as treatment and outcome challenges in the afternoon.

The role of imaging in implantology and peri-implant treatment will be in focus of two more sessions before the congress ends with a closing ceremony on Saturday.

Continuing its successful introduction at last year’s congress in Rome, Saturday will also see another session presented by an invited society from outside Europe. Guest country this time is the People’s Republic of China, a significant future market for implantology treatment (see also page 4). Joined by clinical experts from universities in Beijing and Jilin, this part of the regular congress programme will discuss immediate implant placement and restoration in patients with severe periodontal disease, among other things.

Delegates can still get an overview about the latest clinical methods and techniques during a number of satellite industry symposia and hands-on sessions, which are supported by several major companies in the market. The latest products, including new implants and solutions for improved implant treatment planning, are still on display at an industry exhibition.

It is the first time that the Annual Scientific Congress of the EAO is held in Sweden. Over 4,000 dental professionals from Europe and outside the continent are expected to attend the annual three-day event at Stockholmmässan, which is staged for the 24th time. This year’s edition is largely influenced by the work of Prof. Per-Ingvar Brånemark. The Swedish clinician and researcher changed dentistry in the 1960s significantly with his breakthrough discovery of the possibility of integrating bone tissue with an artificial material like titanium, thereby making modern implant therapy possible. Unfortunately, he passed away after a period of illness in December last year. The meeting will honour his achievements with a special symposium on Sunday at the Aula Medica at Karolinska Institutet, where Brånemark was awarded an honorary doctorate.

More information about the meeting, the scientific sessions and the latest products is available on the EAO congress website at www.eao-congress.com. The association also has on offer an application for mobile devices and tablet computers that is aimed at giving visitors quick access to congress-related information. Daily news updates, interviews and product reviews from the show floor are available on www.dental-tribune.com.

Implant care for every need

All TePe’s products are developed in collaboration with dental expertise to meet the demands of professionals and consumers worldwide.

Visit the TePe stand S16 at EAO.

www.tepe.com
During a Friday morning session at EAO 2015 in Stockholm, Prof. Martin Schimmel from the Division of Gerodontology at the University of Bern will be discussing some of the ethical and financial challenges related to implant treatment of the elderly. Today spoke with him about these issues and the importance of offering this vulnerable population the benefits of implant therapy.

Today International: Implant manufacturers seem to be exclusively targeting younger age groups nowadays. Do you think the silver generation is being overlooked when it comes to implant therapy and, if so, what could be the reasons for this? Prof. Martin Schimmel: I do not think that statement is true. Tooth loss is increasingly associated with elderly people. In my opinion, most manufacturers of dental implants are aware of the fact that people in the Western world are retaining their own teeth for longer owing to the successful implementation of preventive measures.

The treatment of trauma cases in younger people is rather limited. At the same time, the clientele for implant treatment is becoming increasingly older. Data from the Department of Oral Surgery and Stomatology at the University of Bern’s dental clinic clearly demonstrates this. Narrow-diameter implants are also explicitly marketed as “Gero” implants nowadays.

Why do older patients benefit from implant therapy in particular? Particularly fully edentulous patients and those with an edentulous mandible benefit the most. Stabilising mandibular complete dentures with the help of endosteal implants is one of the greatest achievements in dentistry. Scientific studies have found many positive effects, including improved quality of life, satisfaction with dentures, masticatory functionality and reduced bone atrophy.

Partially edentulous patients can benefit from fixed implant prostheses functionally, as well as structurally. Conventional removable dentures have proven to be inferior, especially in free-end situations.

During a panel discussion at the EAO congress last year in Rome, it was found unanimously that there is no age limit for implant therapy. What is the maximum age at which dental implants could reasonably be used? Age per se is not a contra-indication. Even in palliative care, implants may still play a valid role. Excluding people from the benefits of this therapy owing to their statistically lower remaining lifespan is unethical. However, one must consider exactly the point at which implants in the mouth do more harm than good—primum non nocere (above all, do no harm)—particularly in situations where cleaning is no longer possible and implants become merely a surface to which biofilms adhere. Furthermore, the possibility of medical contra indications does increase with old age.

What factors play a crucial role in the implant treatment of elderly patients, and what factors do clinicians need to consider compared with treatment of other age groups? Of course, the interindividual variability between patients increases with age, meaning that the older the patient, the more person-alised treatment strategies have to be. The planning and implementation need to be constantly adjusted to medical, psychological and social individualities. Minimally invasive surgical approaches and prosthetic treatment methods that take the reduced adaptability and other physiological changes due to age into account have proven successful in this respect.

In Western countries, the gap between rich and poor is ever widening. Elderly people are increasingly falling into the latter group. What measures can help to ensure their access to dental implant treatment? The only path to broad access to these therapies for financially less well-off patients lies in private or public insurance systems. These are political issues. However, dentists, dental technicians and the industry are constantly working on industrial production structures and thereby reducing costs. Digital developments in dentistry will surely help to provide patients with otherwise expensive treatments for a much more reasonable price. Nevertheless, oversimplified production methods are often not suitable for the complex treatment needs of the elderly.

You have pointed out the benefits of digital production methods. What other measures could also facilitate access to dental implants for the elderly? Nowadays, the bulk of the costs incurred is due to the hours of work performed by the dental team and technicians. Digital processes can help to shorten treatment times through innovative workflows. Moreover, quasi industrial production methods can be used in less complex cases, thus reducing costs further.

It is important to note that implant manufacturers have maintained or even lowered their price levels for quite some time. However, it remains important to evaluate the economic value of using low-cost implants, because they can have a much higher failure rate, as demonstrated by a recent Swedish study (Derks et al. 2010).

From a health policy standpoint, do you see any deficits in the subsidisation of dental implants for the elderly? This might differ from country to country. In Switzerland, for example, the subsidisation of patients with low income is evaluated individually by local authorities. The treatment of persons who receive social security benefits or needs-based minimum benefits is subsidised if implant therapy can be performed in a simple, economical and appropriate way. Two inter-feraminal implants, for example, will be reimbursed if conventional prosthetic treatment is not able to restore a patient’s chewing ability.

In the statutory health insurance system, there is an obligation to perform the therapy if the loss of teeth was due to the occurrence or treatment of a severe disease, or to an accident or birth defect. There is certainly room for other indications, but one also has to consider the burden for the social security systems. In my opinion, Switzerland has established a sufficient and balanced system.

Thank you very much for the interview. «
Working with Henry Schein gives you following assurances:

- Professional advice through a personalized and workflow oriented approach supported by a team of Henry Schein ConnectDental specialists.
- Complete workflow management between practice and laboratory providing data transfer, interfaces and digital case management solutions.
- Implementation of your bespoke solution: Installation of network solutions, conebeam CBCT scanning, implant and prosthetic offerings, open digital impression scanning, chairside and laboratory side CAD/CAM systems, appropriate consumables and technical services and support.

Digital Impression and Workflow Solutions:

Henry Schein offers full digital seamless and easy to use workflow solutions for dental practices and dental laboratories under the ConnectDental Brand through its specialist teams. These teams of digital systems ConnectDental specialists provide professional and individually tailored product and service solutions built on an open platform.

www.henryschein.com
Growing CAD/CAM abutment adoption vs increasingly popular discount implants

Opposing pricing trends to influence Asia Pacific dental implant market

Dr Kamran Zamanian & Celine Mashkoor, Canada

The various countries in the Asia Pacific region are all expected to demonstrate an increasing demand for dental implant treatment, primarily driven by growing consumer awareness, the ageing population, growing accessibility (such as through the National Health Insurance Service coverage in South Korea), as well as greater product availability and other influencing factors. Traditionally, premium implant companies have dominated the dental implant market globally. However, in recent years, discounted implants have become increasingly popular, especially in the Asia Pacific region.

The growth of the discount implant segment will emerge at the expense of the premium segment and as a result is set to limit market growth of the dental implant fixtures by lowering the market’s overall average selling price (ASP). In contrast, the premium abutment market is set to experience an increasing ASP owing to the growing adoption of CAD/CAM abutments in the place of stock abutments. While commoditisation of stock abutments has greatly depressed the ASP of the final abutment market, growing adoption of CAD/CAM abutments is set to stimulate the final abutment market by pulling the ASP upwards. Therefore, the dental implant market is set to grow in all four countries included in the Asia Pacific region in this report, namely Australia, South Korea, Japan and China, despite varying pricing trends.

In the Asia Pacific dental implant market, consumer awareness, cultural tendencies and domestic regulations vary greatly. South Korea presents the most highly developed dental implant market as a result of being home to a number of global leading dental implant companies. This in turn has led to a high level of consumer awareness and early accessibility to a variety of dental implant products. However, the dental implant market in South Korea is also the most highly discount dominated and led by domestic implant producer OSSTEM IMPLANT and as a result demonstrated the lowest regional dental implant ASP of US$86 in 2014.

In contrast, the Australian market remains highly dominated by leading global implant companies, which collectively held over 70% of the domestic market. Consequently, Australia demonstrated the highest dental implant fixture ASP in the region at US$345 in 2014. An increasing number of general practitioners are being trained in dental implant procedures in Australia, and general practitioners have been observed to be more cost sensitive relative to speciality Research and Education Centre. All segments of the dental implant market in China are expected to demonstrate double-digit annual growth. However, the discount market is set to grow far more dramatically throughout the forecast period. By 2021, discount implant fixtures are set to represent over 50% of the overall units in the Chinese dental implant market.

The shift towards discount implants in Japan is expected to be far less dramatic, especially owing to cultural barriers that limit the success of Korean dental implant companies. In contrast, the premium implant segment is expected to remain the dominant dental implant market throughout the forecast period.

The Japanese and Chinese markets for dental implants are also dominated by premium companies. In recent years, OSSTEM IMPLANT has had a significant impact on the Chinese market, however, especially as a result of the training programme offered by the company’s Advanced Dental Implant MarketView. As a result of a growing number of general practitioners in the market, consumer preferences are shifting towards discounted solutions. Discount implant companies from the US and South Korea have recently been gaining market share in Australia. Throughout the forecast period, the premium segment of the market is expected to grow at a far lower annual growth rates relative to the discount and value segments in Australia. By 2021, it is expected that discount implant market will represent 43% of the overall units in the Australian market.

Growing popularity of its products. Throughout the forecast period, OSSTEM IMPLANT and other discount implant companies, such as MegaGen, Dentium and Neo-biotec, are expected to capitalise on the growing popularity of discount implants. The Japanese and Chinese markets for dental implants are also dominated by premium companies. In recent years, OSSTEM IMPLANT has had a significant impact on the Chinese market, however, especially as a result of the training programme offered by the company’s Advanced Dental Implant MarketView. As a result of a growing number of general practitioners in the market, consumer preferences are shifting towards discounted solutions. Discount implant companies from the US and South Korea have recently been gaining market share in Australia. Throughout the forecast period, the premium segment of the market is expected to grow at a far lower annual growth rates relative to the discount and value segments in Australia. By 2021, it is expected that discount implant market will represent 43% of the overall units in the Australian market.

Growing popularity of its products. Throughout the forecast period, OSSTEM IMPLANT and other discount implant companies, such as MegaGen, Dentium and Neo-biotec, are expected to capitalise on the growing popularity of discount implants. The Japanese and Chinese markets for dental implants are also dominated by premium companies. In recent years, OSSTEM IMPLANT has had a significant impact on the Chinese market, however, especially as a result of the training programme offered by the company’s Advanced Dental Implant MarketView. As a result of a growing number of general practitioners in the market, consumer preferences are shifting towards discounted solutions. Discount implant companies from the US and South Korea have recently been gaining market share in Australia. Throughout the forecast period, the premium segment of the market is expected to grow at a far lower annual growth rates relative to the discount and value segments in Australia. By 2021, it is expected that discount implant market will represent 43% of the overall units in the Australian market.

Growing popularity of its products. Throughout the forecast period, OSSTEM IMPLANT and other discount implant companies, such as MegaGen, Dentium and Neo-biotec, are expected to capitalise on the growing popularity of discount implants. The Japanese and Chinese markets for dental implants are also dominated by premium companies. In recent years, OSSTEM IMPLANT has had a significant impact on the Chinese market, however, especially as a result of the training programme offered by the company’s Advanced Dental Implant MarketView. As a result of a growing number of general practitioners in the market, consumer preferences are shifting towards discounted solutions. Discount implant companies from the US and South Korea have recently been gaining market share in Australia. Throughout the forecast period, the premium segment of the market is expected to grow at a far lower annual growth rates relative to the discount and value segments in Australia. By 2021, it is expected that discount implant market will represent 43% of the overall units in the Australian market.