While in New York for the Greater New York Dental Meeting, Crest Oral-B hosted a spectacular evening Tuesday on the Circle Line Sightseeing Cruise, taking an intimate group of oral-health professionals around Manhattan Island, allowing them to see the lights that inspire so many.

“Crest Oral-B is happy to have taken time away from the exciting convention floor to provide our guests with a unique view of New York City,” said Ann Hochman, marketing director for Crest Oral-B. “We are also pleased to have had the opportunity to share the inspiration for our latest patient-based solution, the Clinical Pro-Health System for Gingivitis, stemming from the fact that one out of two American adults continues to suffer from this disease, which we can now virtually eliminate.”

Both Dr. Robert Gerlach, DDS, MPH, research fellow, P&G Worldwide Clinical Investigations, and Dr. Leslie Winston, DDS, PhD, P&G director of professional and scientific relations for North America, were on board to discuss the recent launch of the Clinical Pro-Health System for Gingivitis.

The new Clinical Pro-Health System for Gingivitis helps break the cycle of gingival inflammation and gingival bleeding for improved oral health in patients with mild to moderate, persistent gingivitis and includes the following products:

- Oral-B ProfessionalCare Smart-Series 5000 electric toothbrush with oscillating-rotating technology, and SmartGuide, which encourages compliance.
- Oral-B Glide PRO-HEALTH Clinical Protection for Professionals floss, the most advanced Glide floss.
- Crest PRO-HEALTH Clinical Gum Protection toothpaste with the highest level of protection against plaque bacteria that cause gingivitis.
- Crest PRO-HEALTH Multi-Protection rinse with CPC that kills 99 percent of germs.

This new system has been clinically proven to help reverse gingivitis within four weeks and virtually eliminate the disease within six weeks.

To learn more about the system, please visit www.dentalcare.com/clinical.

Also, check online at www.dentaltribune.com later this week and the December issue of Dental Tribune to view images from this special event.

References
1. In laboratory tests
2. Six-week clinical results with NEW Crest PRO-HEALTH Clinical Gum Protection Toothpaste, NEW Oral-B Glide PRO-HEALTH Clinical Protection for Professionals Floss, and Oral-B ProfessionalCare SmartSeries 5000 Electric Toothbrush with SmartGuide — not included is the Crest PRO-HEALTH Multi-Protection Rinse.
ANNUAL DENTAL TRIBUNE STUDY CLUB
SYMPOSIA AT THE GNYDM

WEDNESDAY
DECEMBER 1

FULL DAY SCHEDULE

10:00 - 11:00  Mr. Al Dube
MERCURY AMALGAM WASTE AND OSHA
AND REGULATORY ISSUES AFFECTING DENTISTS

11:20 - 12:20  Glenn van As, DMD
THE DIODE LASER IN RESTORATIVE COSMETIC DENTISTRY

12:30 - 5:00  Various Speakers
THE FIRST ANNUAL OSSEO UNIVERSITY SUMMIT

Ethan Pansick, DDS, MS
UTILIZING PATIENT SPECIFIC ABUTMENTS TO ACHIEVE EXCEPTIONAL RESULTS

Maria Ryan, DDS, PHD
DISEASE STARTS AT THE TOP!

Enrique Merino, DDS, MD
MICROSCOPIC MANAGEMENT OF ALVEOLAR BONE DEFECTS IN FRESH SOCKET
IMPLANTS

David Hoexter, DMD
IMPLANTS & BISPHOSPHONATES, OSTEONECROSIS, OSTEOPOROSIS, ESTHETICS

Dwayne Karateew, DDS
CONTEMPORARY CONCEPTS IN TOOTH REPLACEMENT: PARADIGM SHIFT

Jeffery Hoos, DMD
BALANCING THE ART, SCIENCE & BUSINESS OF DENTISTRY

Benedict Bachstein, DMD
MODERATION

FREE ENTRANCE
EARN 5 C.E. CREDITS

FIND US IN AISLE 6000, ROOM 3
WALK-IN’S ARE WELCOME!
Diode lasers for periodontal treatment

By Fay Goldstep, DDS, FADC, FADFE, & George Freedman, DDS, FAACD, FADC

Two types of diode lasers have been studied for their effects in laser-assisted periodontal therapy: the diode laser (which emits high levels of light energy) and the low-level diode laser (which emits low intensity light energy).

There is very compelling evidence in dental literature that the addition of diode laser treatment to scaling and root planing (SRP) will produce significantly improved and longer lasting results. SRP is the gold standard in non-surgical periodontal treatment.

Low-level lasers for biostimulation have been used in medicine since the 1980s. The therapeutic effect is non-cutting and low intensity and covers a much wider area than the traditional laser.

Low-level laser therapy (LLLT) is treatment where the light energy emitted by the laser elicits beneficial cellular and biological responses. On a cellular level, metabolism is increased, stimulating the production of ATP (adenosine triphosphate), the fuel that powers the cell. This increase in energy is available to normalize cell function and promote tissue healing.

The functions of the diode and low-level diode laser have remained separate until recently. With the introduction of the biostimulation delivery tip, the diode laser is able to provide both cutting and therapeutic effects. When a low-level tip is used, the laser energy is delivered over a wider area, decreasing the energy level and producing the low-level therapeutic effect. Two laser companies have made these auxiliary tips available. (See Figs. 1–4).

Used together, these two laser treatment modalities provide benefits that help to heal the chronic inflammatory response in the periodontal pocket. This works well in treating mild to moderate periodontits. Patients can be treated in a minimally invasive way, without surgery, in the general practice. There is time to try the surgical approach, if needed, at a later date.

The protocol so far

The protocol must incorporate the four steps discussed above to create the ideal environment for periodontal healing to occur: a clean, calculus-free hard-tissue surface, no pathogenic bacteria, a smooth, clean, soft-tissue surface and biostimulation.

Biostimulation tips are at present only available for two diode lasers: the Picasso by AMD LASERS and the EZLase by Biolase.

Individual parameters vary depending on the clinician and the particular diode laser used. However, most protocols follow a simple formula:

1. The hard tissue side of the pocket is first debrided with ultrasonic scalers and hand instruments (Fig. 5).
2. This is followed by laser bacterial reduction and coagulation of the soft-tissue side of the pocket (Figs. 6, 7). The laser fiber is measured to a distance of 1 mm short of the depth of the pocket. The fiber is used in light contact with a sweeping motion that covers the entire epithelial lining, starting from the base of the pocket and moving upward. The fiber tip is cleaned frequently with a damp gauze to prevent debris build up.
3. The low-level laser tip is applied at right angles and with direct contact to the external surface of the pocket (Fig. 8) for biostimulation.
4. Re-probing of the treated sites should be performed no earlier than three months after treatment to allow for adequate healing (Fig. 9). The tissue remains fragile for this period of time.

The protocol may be performed by any periodontal provider, using the power settings and duration determined by the particular laser used. The manufacturers should be consulted for the proper parameters to achieve the best results. With experience, the user will feel comfortable enough to adapt the protocol to his or her particular practice.

The power settings and duration are determined by the particular laser used. The manufacturers should be consulted for the proper parameters to achieve the best results. With experience, the user will feel comfortable enough to adapt the protocol to his or her particular practice.

This protocol may be performed by the dentist and/or hygienist as determined by the regulating organization in the geographic location of the dental practice.

The diode laser and periodontal treatment: The story is clear

Many of our patients have periodontal disease, but they want to be treated in a minimally invasive way. They are not rushing out to the periodontist to have “gum surgery.” We need to treat their disease before it spirals out of control, especially when considering the periodontal health/systemic health link.

There is significant proof that the addition of laser-assisted periodontal therapy to scaling and root planing improves outcomes in mild to moderate periodontitis. The treatment is not invasive. It is not uncomfortable.

We now have the tools and protocol to treat our periodontal patients with an effective procedure that they are ready to accept. What are we waiting for?
BEAUTIFIL Flow Plus attracts global attention

By Robin Goodman, Dental Tribune

BEAUTIFIL Flow Plus is an injectable hybrid restorative material for all indications that is making its debut here at the Greater New York Dental Meeting (GNYDM).

However, this launch is a global one that brought senior members of Shofu Inc. from Europe and Japan all the way to New York. Dental Tribune stopped by the Shofu booth (No. 4025) to speak with Shofu Dental Corp. President and CEO Brian Melanokos and Director of Marketing Lynne Calliott to learn more about this new material.

What more can you tell us about BEAUTIFIL Flow Plus?

Melanokos: Well, for one, it’s FDA-approved for all indications. The predicate device was a leading hybrid composite, not a flowable, but it is still flowable. It has wonderful opportunities for reducing time and making procedures much easier.

We also feel like the pedodontists are going to have an excellent opportunity to do the entire restoration using only flowables. I say flowables because we have two viscosities: a 03 and a 00, which means zero flow for the latter.

Calliott: Essentially, this is all of the attributes that people like or choose a flowable for, and they are now available to them with the performance and strength attributes you would expect from a traditional nano-hybrid composite. And they can use it in all indications because with the 00 flow, some practitioners have been commenting that it is a remarkable material.

They mention particularly the use in restorations where access is difficult, and sometimes a flowable wants to slump or move before they have the opportunity to cure it. The 00 material just stays put.

While you can still use this material as a base and a liner, and additional things you would think of in a flowable, you can also use it as a final restorative material for all classes of indications.

Are there any special offers available during the GNYDM?

Calliott: We are launching introductory trial kits. One is designed for the general dentists and includes the A2 and A3.5 shades. Then we also have a trial kit that is more focused for the pedo market with a bleach white and an A1 shade. In the trial kits, they receive both viscosities along with an assortment of other Shofu products for the bonding agent and the traditional BEAUTIFIL II Composite and some finishing and polishing materials. Basically the kit gives them $160 worth of materials for the cost of $99.
Digital implant treatment planning: the importance of the scan appliance

By Bradley C. Bockhorst, DMD

One of the fastest-growing segments of implant dentistry is the utilization of CT scan data and treatment planning software in conjunction with guided surgery for implant reconstruction cases. The scan appliance is critical to the process and success of these cases.

The primary purpose of the scan appliance is to show the ideal prosthetic positions of the teeth to be replaced in the digital plan. By utilizing a scan appliance, the case can be planned from both a prosthetic and surgical perspective, making implantology a truly restoratively driven process.

There are several excellent implant treatment planning and guided surgery systems available. We will focus on two of the most popular programs on the market: NobelGuide™ from Nobel Biocare and SimPlant® from Materialise. While the names of their scan appliances are different, their purpose is the same. Which system you choose is typically driven by the implant system you are utilizing. NobelGuide is designed for use with Nobel Biocare implants. SimPlant has an open architecture, so most available implants can be planned with its software.

Role of the scan appliance

The scan appliance provides an invaluable diagnostic tool to relate the tooth-to-tooth relationship. This is critical for the planning process. While the SimPlant “virtual teeth” function is useful for short spans such as single-tooth replacement, an appliance in which the teeth have been set in the ideal position provides the most accuracy. Both NobelGuide and SimPlant advocate a dual-scan protocol. In these cases, the surgical guide is literally fabricated from the CT scan of the scan appliance.

Restoratively driven treatment planning

The whole point of the diagnostic work-up and utilization of the scan appliance is to show the ideal positions of the teeth to be replaced. While digital treatment planning guided surgery protocol was initially developed for the fully edentulous patient, it has advantages for partially edentulous patients as well. While you are replacing one tooth, multiple teeth or a full arch, digital treatment planning allows you to virtually plan the case from both a surgical and prosthetic perspective in a 3-D environment. This allows you to make almost all of the clinical decisions up front. The result is implants that are more ideally placed and, therefore, simpler prosthetics and superior restorations.

In appropriate cases, the prosthesis can be prefabricated for an immediately loaded restoration. If you plan to immediately load the case, we recommend you deliver a provisional restoration at the time of surgery and then proceed to the definitive prosthesis at a later date.

Fabrication of the surgical guide

Once completed, the virtual plan can be transferred to the clinical setting through the use of a surgical guide. The guide produced for NobelGuide is referred to as a surgical template. The guide from Materialise (SimPlant) is called SurgiGuide. Using the surgical guides allows the surgeon to place the implants according to a restoratively driven treatment plan.

References

Stop by Burbank booth for free Patient Education Model

Burbank Dental Laboratory is very excited about its show special offer of a free Patient Education Model. Come to the company’s booth (No. 3737) to receive your model. This valuable tool is designed to help clinicians educate patients and promote metal-free restorations, such as IPS e.max and Burbank’s own full zirconia restoration, Zir-MAX.

In today’s economy, it is important to have options that patients can afford and a way to educate them regarding the results they can expect. Burbank’s acrylic metal-free replica crown allows the clinician to have a tool that Burbank provides on a complimentary basis, and the impact on a dental practice could be invaluable.

There are two Burbank products that are positioned best for today’s patient demands for esthetics, durability and value: both IPS e.max full-contour pressed monolithic lithium-disilicate and Zir-MAX restorations meet the clinician’s needs for esthetically driven quadrant dentistry.

Many of the dental practices that work with Burbank have expressed the concern they are doing more need-based quadrant type dentistry. This translates into a focus on more posterior restorations, but the patient’s desire for cosmetics has not diminished ... even if their budget has.

Today, Burbank Dental Laboratory can offer these two products that are strong, esthetic and provide great value:

- Strength: e.max monolithic at 400 MPa, and Zir-MAX at over 800 MPa
- Esthetics: e.max has four levels of translucency and the full spectrum of shade to choose from, and Zir-MAX is the most translucent full zirconia available.
- Value: e.max monolithic (Press and Glaze) is on an introductory fee of $154 per unit through the end of December, and Burbank’s Zir-MAX is on an introductory offer of $99 through January 2011.

Come by Burbank’s booth (No. 3737) at the Greater New York Meeting to receive your free Patient Education Model and request more information about Burbank Dental Laboratory, especially IPS e.max and Burbank Zir-MAX full zirconia restorations.
THE FIRST ANNUAL OSSEO UNIVERSITY SUMMIT:
IMPLANT DRIVEN DENTISTRY

WEDNESDAY, DECEMBER 01

12:30 - 12:45  Opening Remarks by Dr. Benedict Bachstein; Short Intro to Biomarker Diagnostics for Testing Periodontitis and Periimplantitis with Dirk Gieselmann
12:45 - 1:30  Utilizing Patient Specific Abutments to Achieve Exceptional Results with Dr. Ethan Pansick
1:35 - 1:55  Disease Starts at the Top with Dr. Maria Ryan
2:00 - 2:40  Microscopic Management of Alveolar Bone Defects in Fresh Socket Implants with Dr. Enrique Merino
2:45 - 3:25  Implants and Bisphosphonates, Osteonecrosis, Osteoporosis, Esthetics with Dr. David Hoexter
3:30 - 4:10  Contemporary Concepts in Tooth Replacement: Paradigm Shift with Dr. Dwayne Karateew
4:15 - 4:55  Balancing the Art, Science & Business of Dentistry with Dr. Jeffery Hoos

FIND US IN AISLE 6000, ROOM 3
WALK-IN’S ARE WELCOME!
Dentatus makes implants attainable to new populations

By Fred Michmershuizen, Dental Tribune

Many companies here at the Greater New York Dental Meeting (GNYDM) have products that can dramatically improve a patient’s life and overall well-being.

One such company is Dentatus, whose innovative designs are making dental implants attainable to large segments of the population, people for whom implants have — until now — been considered beyond reach.

With its systems — Anew narrow body implants, which are ideally suited for patients with a compromised implant site, and Atlas Denture Comfort, which use the narrow-body implants to secure new or existing dentures — Dentatus, a company based in New York City, is making implants available to patients who might be lacking in bone or those who find themselves short on time or money.

“Dentatus is a trailblazer,” Nita Weissman, executive vice president, told Dental Tribune during an interview here at GNYDM. “We have taken the elitism out of dental implant technology.”

Thanks to their narrow body design, Dentatus implants – which come in 1.8, 2.2 and 2.4 mm — are ideally suited for patients with resorbed bone, thin bone or knifelike ridges. The implants allow for all sorts of flexibility and are ideal for the elderly, young people whose bones are still growing or even patients who might want a provisional solution while undergoing a bone-augmentation procedure.

Anew implants, made of Grade 5 Ti-alloy, have a blasted surface for improved stability and osseointegration and are packaged pre-sterilized. In 2004, they were granted FDA approval. The restorative protocol was developed in conjunction with the Department of Implant Dentistry at New York University College of Dentistry. Numerous published clinical and histological studies of the Anew Implant report excellent bone adaptation and high survival levels, in addition to 100 percent patient survival.

Atlas Denture Comfort eliminates the hardware typically associated with over dentures. The system uses no O-rings, no housings and no adhesives. The unique Tuf-Link silicone reline provides the retention to the implants for a stress-free denture, easy insertion, retention and removal.

Technical speak aside, Weissman told Dental Tribune she finds it personally gratifying to be associated with a company whose products have the potential to make such a big difference in people’s lives.

“I’m very passionate about what I do,” she said. “I’ve seen patients who have gotten their life back.

“I mean, think about it,” Weissman said. “If you don’t have your lower teeth, how do you go on a job interview? To your daughter’s wedding? Or on a date? With Dentatus, dental implants are affordable and attainable, even for patients who in these financial times are not able to spend the kind of money required for traditional implants.”

Spyridon Xynogalas, a student at the New York University College of Dentistry, tells attendees at the Greater New York Dental Meeting about narrow diameter implants during an educational presentation at the Dentatus booth (No. 2401). (Photo/Fred Michmershuizen, Dental Tribune)
Just because the economy is unstable does not mean that your practice has to be.

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- Shreveport, LA  April 1-2
- Yuma, AZ        April 1-2
- Racine, WI      April 8-9

**LVI & MICRODENTAL PRESENT:**

**2011 EVENTS**

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- Santa Barbara, CA March 4-5
- Arcadia, CA     March 25-26
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suggestions, courtesy of the editors at Dental Tribune:

• PhotoMed International (booth No. 200) has a wide range of cameras and other photographic equipment. What’s more, the folks at PhotoMed have the technical expertise to guide you to the equipment you might require to meet your specific needs.

• At Zirc Co. (booth No. 3823) you can check out a wide range of instrument cassettes and holders, tubs, accessories, mirrors, dams and many other supplies.

• Theta Corp. (booth No. 1608) is offering a wide selection of non-verbal intra-office communication tools, including a Multi-Channel Five-Lite System and a Col-R-Lite Ten-Lite System.

• At Axis Dental (booth No. 4632) you can learn about the All-Inclusive IPR Set, which is designed to allow you to begin to conservatively and quickly progress to an efficient, precise and painless technique for interproximal reduction.

• At L&R Ultrasonics (booth No. 1509), you can check out the Sweep-Zone ultrasonic cleaning system and other ultrasonic cleaners.

• If you are interested in furthering your education while serving your country at the same time, you might want to stop by U.S. Navy Recruiting Command, located in booth No. 1112. HM1 Lawrence Laranang can give you information, and you can also sit inside a special bubble chamber to view an informative video.

There is also plenty of education to be had right on the show floor. For example, Dr. David Clark is offering presentations at 3M ESPE (booth Nos. 4407/4609), and at Dentatus (booth No. 2401) students from the New York University College of Dentistry are discussing narrow body implants with meeting attendees.

There are, of course, many others. And today is your last chance to check out these exhibitors — and those in approximately 1,500 other booths. Otherwise, you will have to wait until the fall of 2011 for the next GNYDM. Remember, you only have until 5 p.m.!

DENTSPLY and other companies support Oral Health America

By Fred Michmershuizen, Dental Tribune

When it comes to helping those who are most in need, some companies have their heart in the right place. That was apparent Monday afternoon at the Greater New York Dental Meeting, when DENTSPLY International helped kick off Oral Health America’s “Seal Two Million Campaign,” which aims to seal 2 million teeth for more than half a million at-risk children by 2020.

DENTSPLY is a 55-year supporter of Oral Health America, a national, non-profit organization dedicated to changing lives by connecting communities with resources to increase access to oral health care, education and advocacy.

“DENTSPLY International is a proud supporter of Oral Health America’s programs and is honored to help raise awareness among the dental industry and profession of the ‘Seal Two Million Campaign,’” said Dr. Linda Niessen, chief clinical officer of DENTSPLY International. “We know that a gift to Oral Health America, whether it’s funding or donated dental product, is truly making a difference keeping children and adults healthy, in school and at work.”

This year, Oral Health America reached its previous goal, a commitment made to America’s Promise Alliance in 2000, to provide 1 million dental sealants for more than 225,000 children by 2010. “The Seal Two Million Campaign reflects our intention to expand the impact of our programs, and it represents our commitment to ensuring that all children and families get the dental care they need,” said Beth Truett, president and CEO of Oral Health America.

In addition to DENTSPLY, many other companies, including 3M ESPE, Pulpdent Corp., Harry J. Bosworth Co., and Ivoclar Vivadent, have donated over 1 million dental sealants.

More information about Oral Health America is available at www.oralhealthamerica.org.