

IMPLANT TRIBUNE

— The World's Dental Implant Newspaper • U.S. Edition —

JULY 2014 — Vol. 9, No. 7

www.dental-tribune.com

ICOI symposium: Summer in Chicago



The ICOI's Summer Implant Prosthetic Symposium returns to Chicago in August. Photo/www.freeimages.com

The ICOI's Summer Implant Prosthetic Symposium heads to a new site for its popular meeting

By Craig Johnson,
ICOI Executive Director

For years, the ICOI has held its Chicago Summer Implant Prosthetic Symposium at the Michigan Avenue Downtown Marriott hotel. Well, guess what? Our event has outgrown that property!

With the very welcome dilemma of increased attendees and vastly improved corporate support via exhibitors and sponsors at this and other ICOI events (ICOI now has a waiting lists for exhibitors at its meetings), the 2014 Summer Implant Prosthetic Symposium will be held at the Hyatt Regency McCormick Place Hotel & Convention Center.

While the host hotel will be the Hyatt Regency, the meeting, being held Aug. 21–23, will take place in the convention center, which is attached to the Hyatt.

ICOI President Dr. Jon Suzuki has designed a scientific program featuring 20 hours of C.E. credit with a theme focusing on “Implant Failures.” The international faculty will feature clinical reports from generalists, specialists, academicians and laboratory technicians with a primary focus on the restorative discipline, but with secondary emphasis on surgical placement and its issues.

Featured speakers include Drs. Robert Blackwell, Lyndon Cooper, Frank De Luca, Charles Goodacre, Ken Hebel, Les Kalman, Aldo Leopardi, Craig Misch, Ricardo Mitrani, Ady Palti, Yvan Poitras, Thomas

Rams, Randy Resnik, Paul Rosen, Guido Sarnachiaro, Edwin Scher and Raymond Yukna.

Upon completion of this symposium, attendees will:

- Learn to properly assess patients and understand the essential components for thorough implant examinations.
- Compare the clinical survival rates of multiple implant treatment modalities.
- Review treatment solutions for surgical and prosthetic implant complications.
- Learn how important the treatment planning phase is to avoid problems.
- Review etiologies of peri-implant disease and treatment strategies for infectious dental implant complications.

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Guided bone regeneration treats implant lesions

Oral implant surgery is complex and not without complications, one of which is an implant periapical lesion (IPL). If the lesion site becomes infected, it can lead to an abnormal growth, persistent inflammation and tenderness. However, a procedure that allows complete bone regeneration at the implant-related lesion site shows promise in treating the resulting bone defect and infection.

IPL develops rapidly after implant surgery and is treated with a second reparative surgery, in combination with antibiotic use. Surgeons have tried various treatments, such as using hand tools to enucleate the lesion, placement of bovine bone mineral to replace the diseased bone and using an enamel mixture to help strengthen the surrounding tissues. Results from these treatments have been mixed. Some treatments have been successful, while others resulted in the lesion progressing, and in others the implant was lost.

In a Journal of Oral Implantology case study titled “Active implant periapical lesion: a case report treated via guided bone regeneration with a five-year clinical and radiographic follow-up,” surgeons reported on using guided bone regeneration (GBR) principles to completely remove the lesion and any subsequent infections. (The article is published in Journal of Oral Implantology, Vol. 40, No. 3, 2014, and full text is available at www.joionline.org/doi/full/10.1563/AAID-JOI-D-11-00214.)

A 43-year-old female presenting with a symptomatic left, first premolar was a candidate for dental implant treatment and scheduled for an immediate implant placement following tooth extraction. After surgery she was prescribed antibiotics. She was seen three months later because of pain at the implant site, which revealed a sinus tract related to the implant.

Additionally, there was a “soft spot” due to edema and bone loss. She was prescribed another course of antibiotics and returned in four days. At that time, a tetracycline paste was created and placed on the defect and around the implant for three minutes, then removed. In two months a

► See LESIONS, page B10

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Osteogenics 2014 Global Bone Grafting Symposium boasts largest attendance and first time as 'sold-out'



Dr. Massimo Simion of Milan, Italy, one of three international speakers at the Osteogenics 2014 Global Bone Grafting Symposium, speaks on what we've learned in the last 25 years in bone augmentation, including vertical ridge augmentation. Photo/Provided by Haute Photography

By Osteogenics Staff

Osteogenics 2014 Global Bone Grafting Symposium was held April 3–5 at the Hyatt Regency Resort & Spa at Gailey Ranch in Scottsdale, Ariz., which marked the fifth global symposium hosted by Osteogenics Biomedical.

Distinguished as the first dental education meeting in the United States focused on bone grafting and treatment planning, this year's program featured several bone-grafting topics, including a special focus on vertical ridge augmentation using GBR techniques.

Considered by many to be the most difficult defect to predictably treat, vertical ridge augmentation was covered by four experts on the topic, including Dr. Massimo Simion, Dr. Marco Ronda, Dr. Istvan Urban and Dr. Sascha Jovanovic.

In addition to discussing patient selection, treatment planning, surgical techniques and materials, there were special discussions on flap management, preventing and handling complications, and soft-tissue grafting following augmentation.

Additional bone-grafting topics included maxillary arch reconstruction for partial and completely edentulous patients by Dr. Michael Pikos, minimally invasive sinus elevation techniques by Dr. Daniel Cullum, the evidence for socket grafting

and the histology of various graft materials by Dr. Brian Mealey and Dr. Gustavo Avila-Ortiz, and the meeting concluded with a lecture by Dr. Kirk Pasquelli on the topic of soft-tissue manipulation and grafting around implants.

In addition, a treatment-planning session, led by the speakers and Dr. Thomas Wilson, was held each day.

The day before the symposium, there were optional hands-on workshops, which included the following topics: vertical ridge augmentation using GBR techniques, clinical guidelines and surgical techniques for implant site development and state-of-the-art sinus elevation and grafting techniques.

During the past five years, the symposium has grown from 170 attendees from six different countries in 2009 to a sold-out 500 attendees from 15 countries and 44 of the 50 states in 2014. Limited to 500 participants, this year's event marked the first sell-out in the symposium's history.

This symposium was arguably the most successful in the history of the event, event organizers said.

Periodontist Dr. Bernardo Villela said: "I like the great selection of speakers. The quality of the materials as well as the clinical results were very impressive, but at the same time with options to apply the techniques to our practice. I would recommend this course to periodontists, oral surgeons and general practitioners

who have been involved in implantology."

Periodontist Dr. Lloyd Nattkemper added: "I felt that the caliber of presentations — from the quality of the images, videos and statistical analyses, to the manner in which each presenter shared materials and fielded questions — was among the finest I have enjoyed in my 28 years as a periodontist. The quality of the presenters, without exception, was in my opinion, the finest available in the world. I would have no qualms attending another Osteogenics symposium next year with the same lecturers."

Osteogenics plans to host its next Global Bone Grafting Symposium in the spring of 2016.

About Osteogenics Biomedical

Headquartered in Lubbock, Texas, Osteogenics Biomedical is a leader in the development of innovative dental bone grafting products serving periodontists, oral and maxillofacial surgeons and clinicians involved in regenerative and implant dentistry throughout the world. Osteogenics offers a complete line of bone-grafting products including enCore® Combination and Mineralized Allografts, Cytoplast™ PTFE membranes, Cytoplast collagen membranes, Vitala™ porcine collagen membranes, Cytoplast PTFE suture and the Pro-fix™ Precision Fixation System.

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3D Diagnostix announces official surgical guide compatibility with BioHorizons

By 3D Diagnostix Staff

3D Diagnostix, international leader in computer-guided surgery solutions, is proud to announce official 3DDX Surgical Guide support for BioHorizons' computer-guided surgery kit and implant system.

The 3DDX research and development team has been working with BioHorizons to ensure maximum compatibility with its computer-guided system and offers to all BioHorizons users a surgical guide that features carefully engineered precision and ease of use.

The 3DDX "\$200 Guide" entered the industry in 2013 and continues to raise the bar with ease of use, affordability and workflow accessibility. 3DDX Surgical Guides are made in Boston, utilizing state-of-the-art manufacturing technology. They are available at affordable prices, starting from \$200, and offer bone, tooth and mucosa support.

3DDX Surgical Guides can be ordered either using 3DDX treatment-planning services or purchasing the all new coDiagnostiX 9 implant planning software, also available through 3DDX.

The BioHorizons guided surgery kit of-

fers the precision and predictability of guided implant placement with a streamlined, single kit design. All components are color-coded to avoid the complexity seen with other systems while offering customers predictable implant placement for optimal esthetic outcomes.

For more information on 3DDX Surgical Guides, visit www.3ddx.com/codx.

About 3D Diagnostix, Inc.

3D Diagnostix started a digital CT scan conversion business for dentistry in 2005, supporting the CT imaging department for a leading dental school with 3-D re-

constructions of oral maxillofacial cases. Since then, 3D Diagnostix has expanded beyond its Boston base, opening offices in the United Kingdom, Europe and the Middle East.

About BioHorizons

BioHorizons is committed to developing evidence-based and scientifically proven products. This commitment started with the launch of the Maestro implant system in 1997 and remains in full force with its recent launches, the Tapered Plus and Tapered 3.0 implant systems. For more information, visit www.biohorizons.com.

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ICOI Summer Implant Prosthetic Symposium

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The theme for this meeting will be "Implant Failures"

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Photos courtesy of the Chicago Tourism Bureau, Todd Rosenberg, Ron Schramm & Mike Gustafson

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• Understand the various systemic medical conditions and contraindications that influence implant success.

A highlight of this symposium will be the Aug. 23rd commemorative reception to honor Dr. Carl Misch and to recognize the vast contributions he has made to the field of oral implantology/implant dentistry.

Accompanying the doctor program will be the customary two-and-a-half-day auxiliary program given by an ICOI Component Society, the Association of Dental Implant Auxiliaries (ADIA), and designed by ADIA Executive Director Lynn Mortilla, RDH.

Thursday's half-day session will feature Patti DiGangi and Deborah Miller followed by a two-hour ADIA hands-on workshop.

Friday's program will consist of speakers from both the auxiliary arena as well as several doctors (Ira Langstein, Avi Schetritt, Burt Melton and Jeff Melton), whose lectures will cover a wide variety of implant topics, and Yva Khalil, who will deal with post-op implant care.

While the Plenary Session for the ICOI summer symposium begins at 1 p.m. on Thursday, Aug. 21, several sponsor-conducted pre-symposium workshops will be offered Thursday morning from 8 a.m. to noon.

The ICOI is pleased to announce that the following sponsors will offer both didactic and hands-on courses: Gold Sponsor, Zest Anchors; Silver Sponsors, BioHorizons, Consult Pro, Dentis, DENTSPLY Implants and Salvin Dental Specialties.

Visit the meeting website, www.icoichicago2014.org, for full course descriptions and additional information.

Information

What: ICOI Summer Implant Prosthetic Symposium

Where: Hyatt Regency McCormick Place Hotel & Convention Center in Chicago

When: Aug. 21-23

Information: www.icoichicago2014.org

PreXion's digital treatment planning results in predictable patient outcomes

Edentulous patients can benefit from the integration of CBCT data

By Siamak Abai, DDS, MMedSc

The diagnosis and treatment planning of edentulous patients with the integration of cone beam computed tomography (CBCT) data and digital treatment planning results in predictable treatment outcomes.

As the new standard of care turns toward technological advances with CBCT scans at the forefront, clinicians and patients benefit from ever increasing accuracy and minimally invasive procedures.

The PreXion CBCT scanner and treatment-planning software allow the clinician to properly diagnose and treatment plan edentulous patients based on the final restoration design. A preliminary diagnostic CBCT scan (Fig. 1) is beneficial to properly visualize in three dimensions the extent of bone loss and the prognosis of existing dentition.

When a patient presents with hopeless and non-restorable teeth, the proper treatment of extractions and fabrication of an ideal complete denture based on functional, esthetic and phonetic guidelines is completed.

Based on a dual-scan protocol (Figs. 2a, 2b), the final tooth position and prosthetic outcome is transferred onto a digital treatment-planning protocol. The treatment-planning software allows the clinician to propose the proper implant position based on anatomical limitations.

This data can be utilized to fabricate a surgical guide for guided implant placement, resulting in minimally invasive surgery, increased accuracy and faster healing and restorative times. A post-operative CBCT scan confirms the accuracy and final implant position (Fig. 3).

About the author

Siamak Abai, DDS, MMedSc, is a graduate of Harvard University's Advanced Graduate Prosthodontics program with a master's degree in oral biology and prosthodontics. He received his doctorate of dental surgery degree from



Columbia University College of Dental Medicine, followed by two years of advanced education in general dentistry training at the Columbia University Medical Center. Abai practices implant, esthetic and reconstructive dentistry at the W-Clinic in Newport Beach, Calif. He serves as a lecturer and clinical attending at the UCLA School of Dentistry's Advanced Graduate

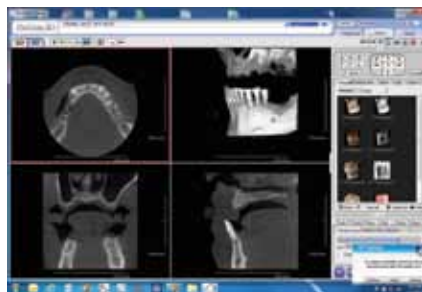
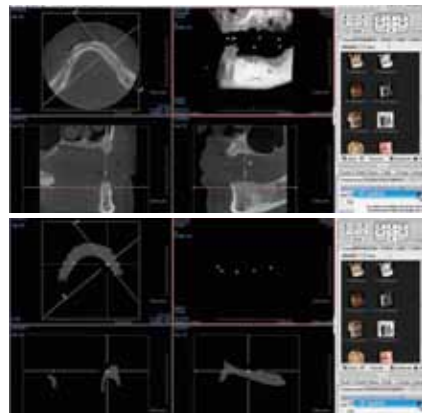


Fig. 1: Preliminary diganosis. (Photos/ Provided by Dr. Siamak Abai)



Figs. 2a, 2b: Dual scan protocol.

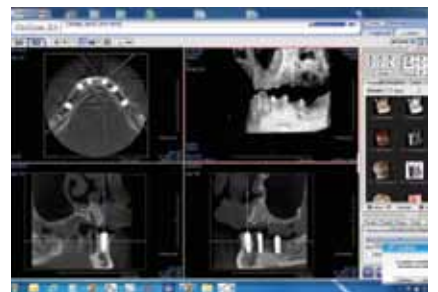


Fig. 3: Post-operative CBCT scan.

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Sterngold Dental's new ORA, ball and o-ring attachment system.

Photo/Provided by Sterngold Dental

By Sterngold Dental Staff

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About Sterngold Dental

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The partnership involves the placement of Carestream Dental's CS 9300, an all-in-one extraoral imaging system that supports a wide range of clinical applications for different oral health specialties, at the Zimmer Institute located in Parsippany, N.J.

As a leader in implantology educational programs, the Zimmer Institute provides an interactive learning environment to enhance training. With four locations, the Zimmer Institute has served the needs of more than 6,000 clinicians globally during the last nine years.

Sharing the CS 9300 with the Zimmer Institute's students gives them an advantage as they enhance and refine their skills.

"I remain extremely impressed with the Zimmer Institute facility and training capabilities," Dr. Maurice Salama, an industry-leading dental implantologist who serves as an instructor at the Zimmer Institute, said. "The utilization of both high-tech mannequin and cadaver labs, along with Carestream Dental's CS 9300 CBCT imaging system and software, provides a very dynamic and robust educational opportunity for all attendees."

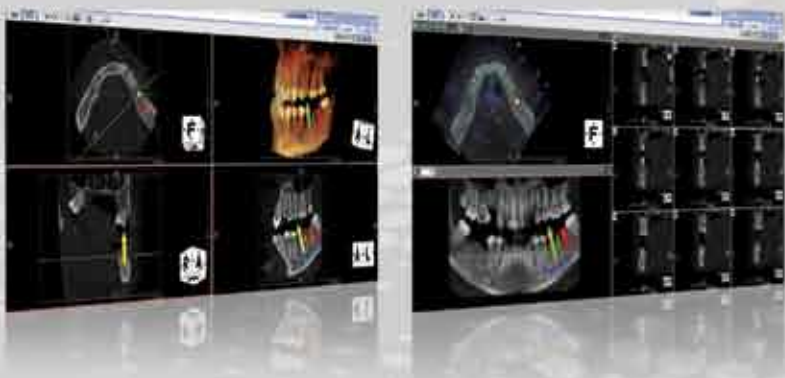
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