DENTAL TRIBUNE

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SCENES FROM FRIDAY

DHIN AT COAPRESENTS

Check out a presentation, play a game, visit a magician and find some people who really, really like you. • pages 4–6



SHOW SPECIALS

Find an array of deals, including some 'buy one, get one free' offers, on the exhibit hall floor. • page 5



STRIVING FOR PREDICTABILITY

Implant positioning in the esthetic zone is an ages-old dilemma. Here is some modern-day advice. • page 8



Free for everyone!

Handouts and special pricing fill the exhibit hall

By Robert Selleck, Dental Tribune

lways a highlight in any exhibit hall, free handouts, free samples, free drawings, free trial offers and special pricing are abundant at CDA Presents.

Walking down just a few aisles enables an attendee to quickly fill a bag with brochures, trinkets, samples and more. Beyond that, of course, virtually every booth has CDA Presents special offers to help you decide to buy.

It's hard to miss the aroma of fresh popcorn wafting from booth No. 919, ProSites Website Design and Internet Marketing (also in booth No. 1733). There's often a line for free tubs of popcorn. And while waiting, more than a few folks have learned about the discounts ProSites has on bundled packages of services.

Steady lines can be found moving through the Colgate booth (No. 1702), where visitors take home a Colgate 360

► See FREE, Page 2



A wide variety of dental study models is on display in the Kilgore International booth (No. 1821), including skulls illustrating TMJ and dental nerves. Special CDA Presents pricing is available on all of the models, including the popular perio model and an oversized single-tooth implant **model**. Photos/Robert Selleck, Dental Tribune



What's your specialty?

By Fred Michmershuizen, Dental Tribune

No matter what your specialty — or even if you happen to specialize in general dentistry — there is no doubt a course, lecture or workshop that is right for you.

Dr. L. Stephen Buchanan presents the sold-out 'The Art of Endodontics: A Hands-On Workshop' on Friday morning. Photo/Fred Michmershuizen, Dental Tribune Sessions are being offered here at CDA Presents on everything from implants to infection control to pharmaceuticals.

On Friday, one of the many highlights was Dr. L. Stephen Buchanan's sold-out "The Art of Endodontics: A Hands-On Workshop." Today, Buchanan presents a daylong lecture, "The Art of Endodontics: Everything Has Changed But the Anatomy," from 9:30 a.m. to noon and continuing from 1:30 to 4 p.m. in Room 104.

To get times and locations for the dozens of other offerings today, check the meeting guide or app. FREE, Page 1

toothbrush and samples of Colgate Total and Colgate Sensitive Pro-Relief tooth-pastes.

In the Philips Sonicare and Zoom Whitening booth (No. 2228), you can get a Zoom whitening touch-up pen, a sample of Zoom NiteWhite (22 percent carbamide peroxide) and a brush head for the Sonicare FlexCare Platinum toothbrush.

There's often a crowd at the Crest Oral-B booth (No. 1202), where brushing stations are set up to enable visitors to not just pick up free samples but to also try them. You get an Oral-B Pro-Health Clinical Pro-Flex toothbrush and sample sizes of Crest Pro-Health toothpaste, Crest Pro-health rinse and Oral-B Glide Pro-Health floss.

Check out the special show pricing on all of the dental study models — most cast from natural specimens — in the



Kilgore International booth (No. 1821). Beyes Dental Canada, booth No. 2402, has special CDA Presents pricing when you buy three handpieces.

A Zila rep will hand you a pack of Rotapoint Interdental Cleaners at booth No. 1926. You're welcome to some lip balm from Second Story Promotions in Catlin Mongrain with Philips Sonicare and Zoom Whitening (booth No. 2228) gives a presentation to visitors before they receive a Zoom whitening touch-up pen loaded with 5.25 percent carbamide peroxide, a sample of Zoom NiteWhite (22 percent carbamide peroxide) and a brush head for the Sonicare FlexCare Platinum powered toothbrush.

booth No. 506 - as long as you take a moment to imagine your practice name and logo on your own batch.

And if you really want to go big, in the Planmeca booth (No. 2016), you can sign up for an in-office presentation about the ProMax S3 imaging system and be entered into a drawing to win one.

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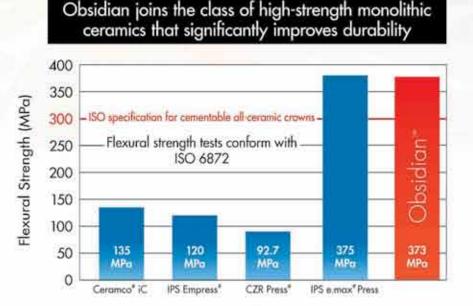
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 theory in fracture analysis of dental ceramics. J Dent Res. 2001;80:57.
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- Obsidian ceramic resists chipping compared to a layered ceramic or PFM restoration



The first biscuspid had a large direct composite with recurrent gingival decay, and the second Before

bicuspid had a stainless steel crown. Both were replaced with Obsidian crowns. Versatile Obsidian ceramic can already be used as a monolithic material, and soon will also be available pressed to metal for a high-strength PFM.





Scenes from Friday



A presenter offers information about DEXIS Digital X-Ray at Imaging Sciences (booth No. 1102).



Meeting attendees learn more about E4D Technologies at the Henry Schein booth (No. 2210).



Pooneh Sabo, left, and Paris Sabo of BloomSmile Laboratories (booth No. 2140). This new exhibitor at CDA Presents is offering teeth whitening demonstrations.





The Henry Schein booth (No. 2216).



Elizabeth Pineda of Top Quality Manufacturing (booth No. 1838).



Kamran Shak of Dino Chair (booth No. 2136).



Sheri Merrick of InfoStar (booth No. 2033).



There's always more to learn, as these meeting attendees in the CDA Educational Theater know.

Photos by Fred Michmershuizen & Robert Selleck, Dental Tribune





We like you, we really like you! That's Gabriella Piazza, left, and Eufemio Infante of Likeable Dentists (booth No. 2420).



A magician practices sleight-of-hand at Netsertive (booth No. 2410).



Tetsuya Shimabuku of Planmeca USA (booth No. 2016) demonstrates the touch-screen control pad on the Sovereign Classic dental chair, which has special CDA Present show pricing.



Kevin Symes of Komet USA (booth No. 1742).



Get your gear at the CDA store.



From left in the Biolase booth (No. 1536), William Reuss, DDS, of Anderson, Calif., tries out a Waterlase iPlus all-tissue laser with guidance from Biolase booth volunteer Gina Delgado, RDH, and Biolase representative Kevin Tuckman. The company's 'epic' laser is also available for a test drive. On display are the 3Shape TRIOS digital impression-taking system and the NewTom cone-beam 3-D imaging system.



David Murphy, left, and Kim Meggs in the KaVo booth (No. 2240) have show-special pricing on a variety of handpieces, couplers and motors. Photo/Robert Selleck, Dental Tribune

KaVo offers special prices

If you've been thinking about adding to or upgrading your selection of KaVo handpieces — or considering buying your first KaVo handpiece — you might want to take advantage of the special offers KaVo USA has at its booth in the CDA Presents exhibit hall.

Visit KaVo USA in booth No. 2240 to learn about the four main promotions at the conference:

• With its Air Collections, when you buy two high-speed Master and Expert handpieces, KaVo is offering you one free coupler (460LE, 1390 or 457).

• If you buy two PROPHYwiz hygiene handpieces, you get one PROPHYwiz hygiene handpiece free (1003.2278 single

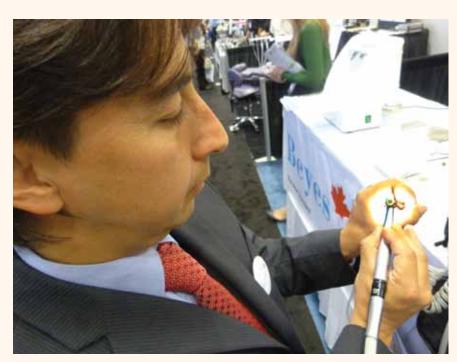
PROPHYwiz).

• When you buy six handpieces from the Master Series collection, you can get one free QUATTROcare Plus.

• And if you buy one electric motor (either the ELECTROtorque plus or the ELECTROtorque TLC), you can get one free high-speed handpiece (the E25L or the 25LPR).

Separate from the promotions above, if you're considering chairs, units and lights, contact your authorized KaVo dealer about the handpiece bundle program that offers up to 47 percent off retail prices on handpieces.

Ruben Huyo of Beyes Dental Canada, booth No. 2402, demonstrates an AirLight V3 handpiece, which — as with all Beyes' handpieces — has a direct-LED light powered by an internal microgenerator, eliminating the need for a fiber optic system.





From left: Anna Olofsson, Scottie Chapman and Edgar Cadena of TePe Oral Health Care (booth No. 1741).

TORONTO ACADEMY of DENTISTRY ^{76th} ANNUAL WINTER CLINIC PROGRAMME FRIDAY, NOVEMBER 8, 2013

SCRAPBOOK



Kathryn Mallman of DMG America (booth No. 1335).



John Stephens, left, and Dennis Naber, along with assorted creatures and critters, at E-Z Floss (booth No. 2114).



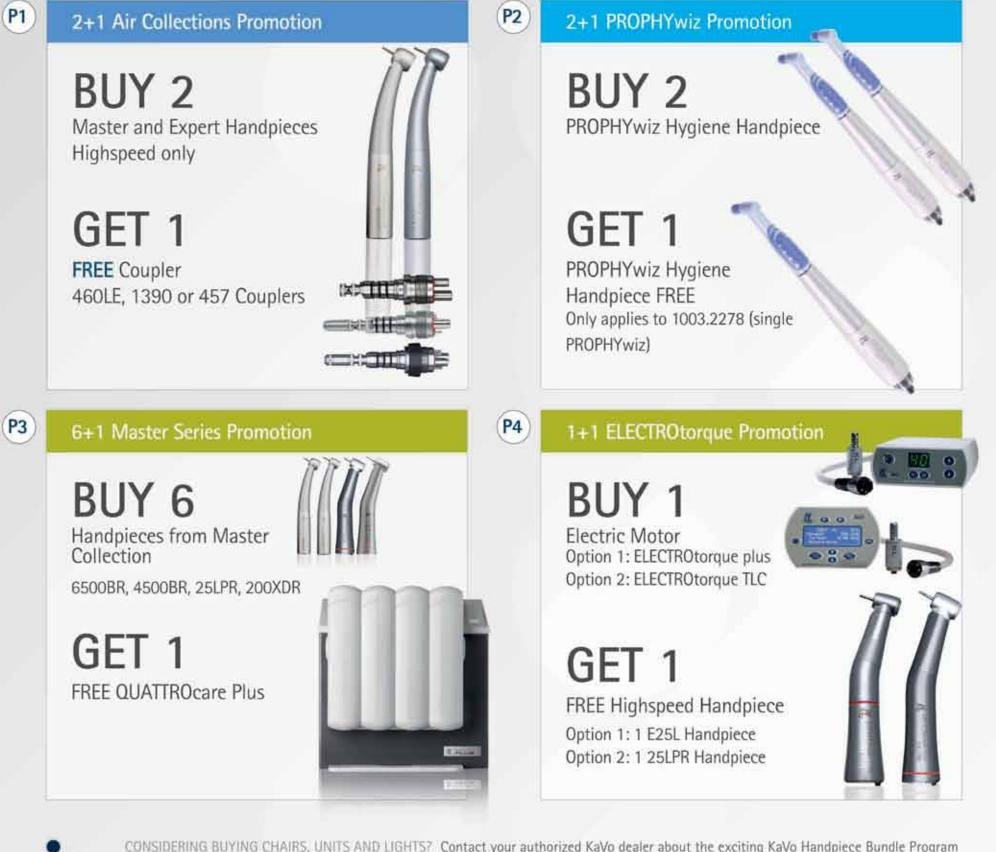
A meeting attendee tests her skill with a challenging game at Dental Ventures of America (booth No. 2239).



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Implant position in the esthetic zone

By Siamak Abai, DDS, MMedSc

Since the advent of modern root form osseointegrated implant dentistry in 1952, clinicians have strived for improvements in implant positioning in the esthetic zone to achieve predictable restorative and esthetic results.

Years of clinical experience in congruence with controlled clinical studies have helped establish parameters as a guide for these results. Establishing a treatment plan and clinical protocol prior to implant placement is paramount.

Treatment planning traditionally begins with comprehensive medical and dental evaluations, articulated diagnostic casts, radiographs, cone-beam computed tomography (CBCT) scans and a diagnostic wax-up. Patient demands must be taken into consideration prior to surgery, and pre-surgical mockups may be necessary to convey the information to the patient.

The advancement of CBCT technology has led dentistry into a new realm of dimensional accuracy. In combination with the use of a surgical or guided stent, proper 3-D positioning of an implant has led to more accurate clinical results.

The importance of the implant position can be manifested in the four dimensionally sensitive positioning criteria: mesiodistal, labiolingual and apico-coronal location, as well as implant angulation.¹ The ultimate goal is not only to avoid sensitive structures, but to respect the established biological principles to achieve esthetic results.

Mesiodistal criteria

Correct implant position in a mesiodistal orientation allows the clinician to avoid damaging adjacent critical structures. A minimum distance of 1.5 mm between implant and existing dentition prevents damage to the adjacent teeth and provides proper osseointegration and gingival contours²⁻⁴ (Fig. 1a).

Distances of less than 3 mm between two adjacent implants leads to increased bone loss and can reduce the height of the inter-implant bone crest. A distance of more than 3 mm between two adjacent implants preserves the bone, giving a better chance of proper interproximal papillary height (Fig. 1b).

Labiolingual criteria

An implant placed too far labially can cause bone dehiscence and gingival recession while an implant placed too far lingually can cause prosthetic difficulties. A thickness of 1.8 mm of labial bone is critical in maintaining an implant soft-tissue profile⁵ (Fig. 2).

Labially oriented implants compromise the subgingival emergence profile

Here in San Francisco

For more information or to see the Inclusive Tooth Replacement Solution, stop by the Glidewell Laboratories booth, No. 1328.

development, creating long crowns and misalignment of the collar with respect to the adjacent teeth.⁶

Apico-coronal criteria

Peri-implant crestal bone stability plays a critical role in the presence of interdental papilla.⁷ Implants placed too shallow may reveal the metal collar of the implant through the gingiva. Countersinking implants below the level of the crestal bone may give prosthetic advantages but can lead to crestal bone loss.

The ideal solution would be the placement of an implant equicrestal or subcrestal to the ridge. However, the existing microgap at the implant abutment junction leads to bone resorption because of peri-implant inflammation.⁸ It is suggested an implant collar be located 2 mm apical to the CEJ of an adjacent tooth if no gingival recession is present⁹ (Fig. 3).

Implant angulation

Implant angulation is particularly important in treatment planning for screwretained restorations. Implants angled too far labially compromise the placement of the restorative screw while implants angled too far lingually can result in unhygienic and unesthetic prosthetic design.

For every millimeter of lingual inclination, the implant should be placed an additional millimeter apically to create an optimal emergence profile.¹⁰ In general, implant angulation should mimic angulation of adjacent teeth (Fig. 4). Furthermore, maxillary anterior regions require a subtle palatal angulation to increase labial soft-tissue bulk.¹¹

Inclusive Tooth Replacement Solution

The Inclusive[®] Tooth Replacement Solution was developed by Glidewell Laboratories as a complete, prosthetically driven method of restoring missing dentition. The solution is composed of treatment planning, implant placement, patient-specific temporization and the definitive restoration (Figs. 5a–5f).

When utilizing the comprehensive range of Inclusive Digital Treatment Planning services, the clinician has absolute and precise control of each step. The clinician has control of the four dimensions of implant placement in the esthetic zone, creating a consistently predictable result.

To read the full article, go to www. inclusivemagazine.com. *References are available from the publisher.*

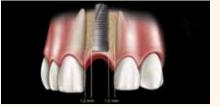


Fig. 1a: Minimum distance of 1.5 mm between implant and existing dentition. Photos/Provided by Glidewell Laboratories

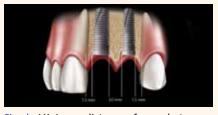


Fig. 1b: Minimum distance of 3 mm between two adjacent implants.



Fig. 2: Proper labiolingual placement with 1.8 mm thickness of labial bone.



Fig. 3: Lateral view of implant placed with the collar at the level of crestal bone with adjacent teeth CEJ 2 mm coronal to the collar of the implant.

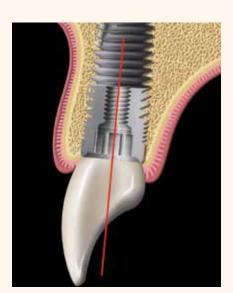


Fig. 4: Proper implant angulation with screw access in the cingulum area.



Fig. 5a: Inclusive Tapered Implant at placement.



Fig. 5b: Inclusive custom healing abutment in place.



Fig. 5c: Contoured soft-tissue sulcus after healing.



Fig. 5d: Screw-retained IPS e.max crown (Ivoclar Vivadent; Amherst, N.Y.) in place.



ig. 5e: PA to verify seating of crown



Fig. 5f: Buccal view of final restoration at delivery.



Dental Tribune Study Club LIVE SYMPOSIUM



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