
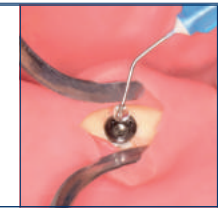



today²³₂₄

EuroPerio9 Amsterdam • 20–23 June 2018

<p>WELCOME!</p> 	<p>Congress news</p> <p>Yesterday, a new global classification system for periodontal health, diseases and conditions was announced in front of a packed house.</p> <p>» page 3</p>		<p>Products in focus</p> <p>A clinical case by Prof. Dr Çetin Sevik, an expert in prosthodontics, demonstrates the use of Hoffmann's PeriO₃Oil in implant therapy.</p> <p>» page 12</p>		<p>Travel</p> <p>From music festivals to arcade game centres and evenings at the zoo, Amsterdam offers a lot of fun activities on weekends.</p> <p>» page 15</p>
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Session highlights global burden of periodontal disease and peri-implantitis

A symposium held at EuroPerio9 aimed to understand the effects of periodontitis and peri-implantitis on the world's population.

■ Though there has been a great deal of research focused on the detrimental effect of periodontitis and peri-implantitis on an individual's health, rarely has much consideration been given to the larger, socio-economic impacts of these conditions. As the world's population continues to age, the real cost of these diseases has increasingly come into the spotlight, inspiring a thought-provoking symposium at EuroPerio9.

"Global burden of disease: Understanding periodontitis and peri-implantitis" was presented on Thursday morning to a sizeable audience. Session chair Dr Ola Norderyd introduced the topic and spoke about its significance in considering the true effects of these diseases. Prof. Thomas Kocher was the following speaker and discussed the contentious issue of whether the prevalence of periodontitis is ultimately declining, given the increased awareness of the importance of oral health. Kocher's conclusion brought mixed blessings, for though there has generally been a decrease in caries in industrialised countries and periodontitis prevalence seems to be on the decline, the increasing number of elderly people, combined with a higher number of teeth on average in individuals, will likely result in an increased demand for treatment of this condition. "Though we have seen a somewhat dramatic improvement in oral health in some countries, thanks



▲ Prof. Jepsen announced that the European Workshop in Periodontology, run by the EFP, is planning to develop guidelines about this crucial topic in 2019.

to the introduction of systematic preventative measures, this trend can also cause a massive increase in oral treatment, since a smaller segment of the population is edentulous," stated Kocher.

Third to present was Dr Jan Derks, specialist in periodontology at Sweden's University of Gothenburg. He addressed the prevalence of peri-implantitis and the diagnostic principles behind it, and presented the results of an observational study he had conducted on this topic, the largest study of its kind. The results showed peri-implantitis to be a common condition and that several pa-

tient- and implant-related factors influence the risk of moderate and severe peri-implantitis.

Severe periodontitis is estimated to affect around 743 million people globally, making it the sixth most prevalent condition worldwide, and periodontal diseases are thought to be responsible for US\$54 billion per year in lost productivity. As the prevalence of periodontitis rises with age, its global burden is likely to increase with a growing ageing population. The EFP has acted quickly in response to this, with a call for global action on the burden of periodontal diseases issued by EuroPerio9 Scien-

tific Chair Prof. Søren Jepsen, Prof. Maurizio Tonetti, Prof. Lijian Jin and

Dr Joan Otomo-Corgel in a 2017 issue of the *Journal of Clinical Periodontology*. In addition, the current EFP President, Prof. Dr Anton Sculean, used this year's general assembly to announce his intention to raise awareness of the importance of periodontal health for those over 60 years of age.

With more and more edentulous patients opting for dental implants, peri-implantitis has become a condition that must be addressed at all points of pre- and postoperative patient care regimens. A later state of peri-implant mucositis, peri-implantitis is an inflammatory lesion of the tissue surrounding an implant, and it is often caused by the pre-existing presence of periodontal disease. Left untreated, peri-implantitis can lead to reduced osseointegration of the implant and, ultimately, implant failure. ◀

Antibiotic resistance among patients with severe periodontal disease is increasing

■ Antimicrobial resistance is on the rise among German patients with severe periodontitis according to the findings of a study—titled "Antibiotic resistance trends in human periodontitis microbiota (2008–2015)"—presented yesterday morning at EuroPerio9 by co-author Friederike Brune. As such, the ability to treat infections and heal patients with periodontitis is being compromised, with health authorities warning about a global crisis of antimicrobial resistance threatening the benefits achieved with antibiotics since the early twentieth century.

"Our aim in undertaking this study was to determine the occur-

rence of *in vitro* antibiotic resistance among samples of bacteria taken from the gingivae of periodontitis patients," said Prof. Søren Jepsen, co-author of the study. "Overall, we found that the four key bacteria selected for our study were resistant to at least one of the antibiotics tested. In the data we collected, we also found increasing resistance trends for three of the bacterial species, raising concerns over the indiscriminate use of antibiotics in the treatment of periodontal disease."

At present, most systemic periodontal antibiotic treatment is prescribed without guidance from a prior microbiological analysis. When

the targeted periodontal pathogens are resistant or poorly susceptible to the antibiotic drug selected, the risk of treatment failure increases. According to Jepsen, health professionals have a responsibility to prescribe antibiotics only when they are truly needed. Together with strategies for the rational use of antibiotics, health authorities should improve local and global surveillance of resistant bacteria. As such, next-generation sequencing methods to define relevant resistomes within the microbes are needed in order to further the design of diagnostics and therapeutics for the treatment of infections with resistant bacteria. ◀

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Preventative care is a lifelong habit—Part 2

An interview with Prof. Dr Anton Sculean, President of the European Federation of Periodontology.

■ As President of the European Federation of Periodontology (EFP), Prof. Dr Anton Sculean has announced his plans to raise awareness of the importance of periodontal health for those over 60 years of age. In the second part of an interview with *today international*, Sculean spoke at length about the reasoning behind this, as well as other important shifts in dental treatment and prevention.

How was your first European Gum Health Day as EFP President?

It was a very successful campaign, I would say. The idea of European Gum Health Day is to inform the entire population of each participating country of the importance of maintaining healthy gingivae not just for oral health but for overall well-being and quality of life. These are the

key messages that we wanted to communicate through the participating national periodontal societies, and I think we communicated them rather well.

This year's European Gum Health Day was also the first edition to go global. By this, I mean that we had several national societies of periodontology from the Caribbean, South America, Colombia and Panama participating alongside almost all of the EFP's affiliated national societies. It was great to see this commitment to spreading the message of "Health begins with healthy gums" adopted by these nations, and I hope that they will continue to participate in the future.

With the increase in popularity of patient-centred concepts such as motivational interviewing, do you see the role of the dental professional changing?

I think that's a very important point to consider. We see more and more new treatment concepts being guided by a philosophy of actively involving the patient in the treatment process. If we actively involve the patient, his or her motivation to follow through with the treatment is likely



▲ Prof. Dr Sculean, who became President of the EFP in March 2018 for the following year, at the EuroPerio9 opening ceremony on Wednesday.

to be higher and its success is thus more likely as well—without the cooperation and input of the patient, we can never achieve complete success.

In dentistry, there has been a shift away from dictating certain concepts to patients and towards involving them in the treatment process, working together to improve their oral health. This shift is a positive one, as it recognises the importance of putting patients in charge of maintaining their oral health.

At the recent EFP General Assembly, you mentioned that, though gingival health impacts the quality of life of

individuals of all ages, it could particularly affect people over 60 years of age. Why do you think this is so?

This is one of my main priorities as the EFP President. Preventative care is a lifelong habit, of course, and gingival health brings not just oral health but also overall health, well-being and quality of life over a whole lifetime, particularly for those over 60 years of age. If one looks at demographic data regarding this issue, one can see that the world's population is continuing to grow older and older. Life expectancy

is generally increasing, and many people who are over 60 are still in excellent general health. They take action to maintain their well-being and want to extend this for as long as possible. That is why I started with this programme—if one considers that the number of people worldwide who are over 60 is currently less than one billion, but that the number is predicted to rise to 2.1 billion by 2050, it's clear that we need to take immediate action to target this group.

What I want to achieve through this action is to reposition this age group as one that can maintain gingi-

val health. I want to get away from focusing on disease and instead emphasise how important maintaining and preserving their health is. I have labelled this concept "oral fitness". By this, I mean that we shouldn't just focus on the general fitness of our bodies, but instead incorporate the gingivae and the oral cavity into our understanding of what fitness can be.

Regarding some of the EFP's other programmes, like those centred on the interaction between gingival health and cardiovascular disease, diabetes and so on, they have already been established and are benefitting those individuals who suffer from, or are at risk for, these conditions. However, for the bulk of the population who doesn't have one of these conditions, maintaining their oral fitness can really benefit quality of life.

The EFP has a duty to promote gingival health, oral health and the treatment of periodontal disease. Personally, I would prefer not to have this disease in the first place and to ensure a high quality of life and high level of oral fitness for as long as possible. ◀

Editorial note: The first part of this interview appeared in the second EuroPerio9 today issue which was published on Friday, 22 June 2018.

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New classification of periodontal and peri-implant diseases and conditions

■ A new global classification system for periodontal health, diseases and conditions, as well as peri-implant diseases and conditions, was announced on Friday at EuroPerio9. The outcome of a joint workshop held by the EFP and the American Academy of Periodontology (AAP) in Chicago in the US in 2017, the updated system comes almost two decades after the last comprehensive classification of these conditions and builds upon the significant amount of new evidence and knowledge that has been gained in that time.

Chaired by Prof. Maurizio Tonetti and Dr Kenneth Kornman in front of a packed house, "News from the world workshop on classification: Critical factors in periodontology" provided attendees with an in-depth look at the findings from this workshop and their clinical implications. The workshop included over 100 experts from Europe, America, Australia and Asia who reviewed existing literature to create a global consensus that enables care to be standardised for patients around the world. Praising the experts' workflow as a "robust, inclusive and open process", Tonetti emphasised that the findings, through their unbiased nature, were intended to be as credible as possible and hopefully "project a vision that will shape the future of periodontal treatment".

Kornman highlighted how the new classification system could help to shape the direction of periodontal education and university curricula, as it recognises and debunks some common misconceptions about how periodontitis develops. "We now know that the severity of periodontitis is not just a simple function of how much plaque is on your teeth and how long it has been there, and that not everyone is equally susceptible to this disease," Kornman said.

The comprehensive classification is based upon contemporary evidence and includes a staging and grading system for periodontitis, indicating severity and extent of disease, accounting for lifetime disease experience and taking into account the patient's overall health status. Clinical health is defined for the first time in the classification, and periodontitis is described in four stages, ranging from least severe to most severe. The risk and rate of disease progression has been categorised into three grades, from lowest risk of progression to the highest. This grading takes into account risk factors like smoking and the presence of concomitant diseases such as diabetes.

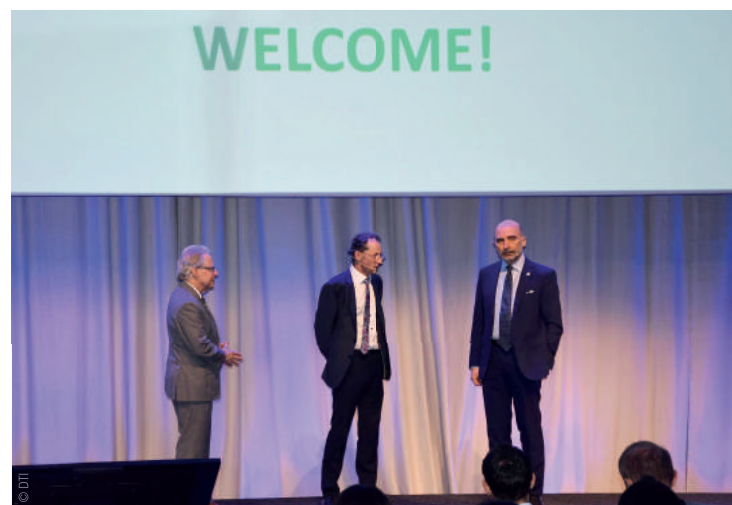
The complete review and consensus reports have been published simultaneously in the EFP's *Journal of Clinical Periodontology* and the AAP's *Journal of Periodontology*.

"The AAP and EFP are proud of this global, collaborative accomplishment," said Dr Steven R. Daniel, President of the AAP. "The result of this landmark workshop is a redesigned disease classification that guides comprehensive treatment planning and allows for a personalised approach to patient care. These proceedings will

make an indelible impact on the scientific advancement of periodontal care and practice."

"This was a huge undertaking, but one of vital importance, ensuring that an international language for clinical care, research and education is established, and updating the 1999 classification system to account for

rapid advances in scientific knowledge over the last 20 years. The new classification should provide a globally consistent approach to diagnosis and management and ultimately improve outcomes for our patients," added Prof. Iain Chapple, EFP Secretary General and co-chair of Group 1 of the workshop. ◀



◀ Dr Kenneth Kornman, Prof. Iain Chapple and Prof. Maurizio Tonetti (from left) at EuroPerio9.

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IMPLANT EXTRACTION

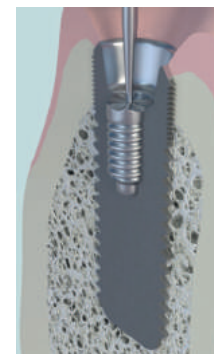
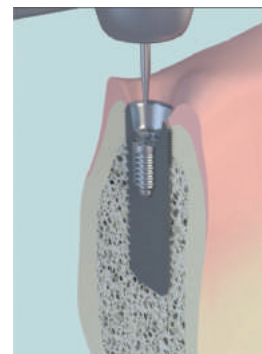
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50 per cent of our population are susceptible to periodontal disease

An interview with Prof. Nicola West, head of restorative dentistry and the Clinical Trials Unit at the Bristol Dental School, UK.

■ During a unique breakfast briefing on Friday morning, Unilever's Zendium showcased a remarkable set of data demonstrating how daily use of Zendium toothpaste improves gingival health by balancing the oral microbiome. The results are perfectly aligned with the evolving view of the pathology of periodontal disease that puts microbial balance, rather than microbial elimination, at its heart. *today international* sat down with speaker Prof. Nicola West, head of restorative dentistry and the Clinical Trials Unit at the Bristol Dental School in the UK. An expert in clinical research on the efficacy of oral hygiene products, she was the ideal conversation partner for an update on the topic.

What is the oral microbiome, and what is its significance for oral health?

The oral microbiome is the structure of the bacteria on the teeth and oral mucosa, with its proteins and natural enzymes. Ideally, the bacteria in our oral microbiome are naturally in a state of balance, that way maintaining



* Dr Mark Edwards, Unilever's Global New Opportunities Brand Director Oral Care and Prof. Nicola West at the Zendium Breakfast Briefing.

oral health and protecting us from developing disease. The vast majority of periodontal diseases are initiated by an accumulation of biofilm on the hard surfaces of the mouth: the teeth or im-

plants. If the biofilm is not disrupted on a regular basis by self-directed oral hygiene, it becomes dysbiotic, and we get the emergence of pathogenic strains, leading to gingivitis and, in susceptible individuals, periodontitis.

What are some of the dangers to a healthy microbiome?

A poor sleeping pattern or unhealthy lifestyle choices such as smoking. Pregnancy is a risk factor too, owing to the hormonal changes happening in the body, and the fact that there are hormone receptors in the mouth. Lastly, a healthy diet is very important. We should be eating and drinking more natural products instead of the processed forms we eat a lot of the time, like honey in the Mediterranean diet, to give just one example. It is important to get the physical effect of our nutrition in the mouth instead of just swallowing

it and getting the systemic reaction afterwards. Honey is actually a marvelous natural ingredient containing a lot of natural protective agents, so much so that I actually have started keeping my own bees!

You also mentioned stress as a possible risk factor. Could you explain why that is?

We know that there are stress pathways linked to the mouth. When it comes to periodontal disease, people either are or are not naturally susceptible to it. If one is susceptible, stress is one of the contributing genetic and epigenetic risk factors. All in all, 50 per cent of our population are susceptible to periodontal disease—which is huge number. When we look after patients,

we can definitely see a difference in stability in the periodontal condition between people who are stressed and those who are not. In people who do not cope well with stress, one can actually see changes in saliva production, sleeping pattern, pocket formation and so on.

Lastly, how has EuroPerio been for you so far?

I think it is a fantastic event. It is buzzing, isn't it? It is busier than the last one we had in London, and I just think this is the place to be. For me, it is an opportunity to network and exchange ideas with all the experts on periodontics from all around the world. It is very friendly and well organised, and the programme is just amazing. ◀

New book aims to make periodontology palatable

An interview with Dr Michèle Reners, EuroPerio9 Congress Chair.

■ Running two private dental practices in the Belgian city of Liège, lecturing in Belgium and France, collaborating with the University of Liège as an internship supervisor for young periodontists, and serving as Editor-in-Chief of the French dental journal *Information Dentaire*, Dr Michèle Reners has many roles. As EuroPerio9 Congress Chair, Reners

Who is the book aimed at?

Above all, the book is practical. As such, it is mainly aimed at dental students and older general dentists. The aim is to help students understand the subject better, but it is also a book to keep practising dental professionals up to date on some topics. That is why the first chapters of *Periodontology Made Easy* cover the aetio-pathology of perio-



* Dr Reners book signing took place at EuroPerio9 on Friday, 22 June.

has been key in putting together an engaging event that has attracted a record number of visitors. *today international* caught up with her at the signing of her new book, *Periodontology Made Easy*.

Your book is titled *Periodontology Made Easy*. How did the idea for the book come about?

The publishing house I normally collaborate with has a "Made Easy" series of books, every one of them being on a different subject, for example *Prosthetics Made Easy* or *Occlusion Made Easy*. When they proposed that I write a book on periodontology, I immediately accepted. Periodontology not being an unlearnable subject is a thought that I want to convey to the general practitioner. That is why the book aims to make an intimidating subject like periodontology palatable, enabling dentists to see it in a simpler way.

dontal disease, the disease's link with systemic disease, and stress as a risk factor in people with periodontitis. These are, after all, some more recent findings in periodontics. It's only been a day now, but I am pleasantly surprised at the number of people showing up at the Philips booth to get a copy.

We are almost through EuroPerio9. What will the last day of the congress still bring for you?

It seems that there will be quite a few meetings first of all. Other than that, I am moderating a session, and last but not least there is our top-secret closing ceremony. After this show, I will be looking forward to the next one in Copenhagen, of which Prof. Phoebus Madianos will be the Chair. Over the three last years, I have had a great and enthusiastic team that definitely is the secret behind this EuroPerio. Now, I will be glad to have a rest from all the preparations. ◀

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With Navident 2.0, the clinician will no longer be required to do a special extra scan. Instead, he or she will be able to use the diagnostic scan already available for the patient. The step of making a stent is not a part of the workflow because it is no longer required, saving clinicians valuable time. Known as Trace and Place, this is a game-changing development for dynamic navigation. With Trace and Place, the Navident 2.0 workflow is efficient and user-friendly and can be seamlessly integrated into daily clinical practice.

"Trace and Place is a real tipping point for dynamic navigation guidance," said user Dr George Mandelaris, a periodontist from Chicago in the US. "It has streamlined and simplified the workflow in both the diagnostic and surgical phases to allow state-of-the-art technology to be an everyday component of my surgical implant practice. I can't imagine going back!"

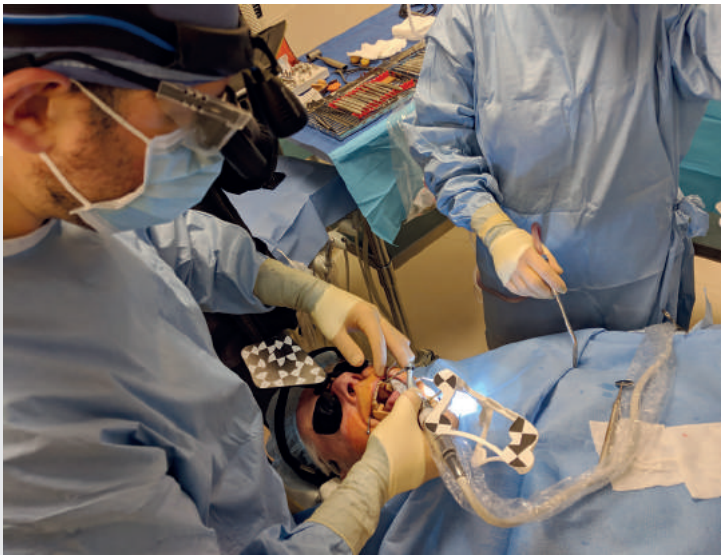
Implantology specialists who have already used Navident 2.0 have experienced negligible operator stress, improved time efficiency and an increase in patient acceptance. The accuracy the new version offers, combined with the need for minimal tissue manipulation, is conducive to a shorter and better

recovery process for patients, according to ClaroNav.

On Thursday, the team of ClaroNav invited to the Dynamic Navigation Evening at the Apollo Hotel in Amsterdam. At this unique meeting, some of ClaroNav's master clinical trainers shared their clinical experiences when using Navident. The programme included lectures on the treatment protocols of today,

including both surgical and prosthetic aspects. Finally, the programme concluded with some highlights of possible future development trends within the field of computer-guided surgery. ◀

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* Luca Caselana, Regional Sales Manager for southern Europe at Claronav, with an instrument from the company's Navident 2.0 navigation system.



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“General health awareness has increased over the past several years and today, we see a broader understanding of how oral health is linked to general health. In that context, TePe’s high-quality interdental brushes fit perfectly as part of people’s healthy oral care habits,” said Dr Anna Nilvéus Olofsson, Manager of Odontology and Scientific Affairs at TePe.

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tries. Based on the vision of healthy teeth for everyone throughout life, the company continues to develop innovative products and raise awareness of the importance of preventative oral care. TePe’s close partnership with the dental profession has been fruitful ever since its founding in 1965, resulting in a wide range of high-quality oral hygiene products. All production takes place at its headquarters in Malmö in Sweden. ◀

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NOBEL BIO CARE INVITES TO NEXT GLOBAL SYMPOSIUM IN LAS VEGAS



■ The 2019 Nobel Biocare Global Symposium is to be held in Las Vegas in the US next June. As part

of the overarching theme, “Knowledge changes everything”, this edition of the three-yearly event will

focus specially on transforming patient care and will serve as the platform for a state-of-the-art education programme. New solutions, profound innovations and groundbreaking science, which are expected to have a major impact on the field of implant dentistry, will be presented.

Over 150 specialists will lead hot topic debates, hands-on sessions, master classes and podium lectures. The scientific committee, chaired by Dr Peter Wöhrle, is developing a programme to inspire and train an expected 3,500 dental professionals. Some core subjects will include new innovations in aesthetics, advancements in full-arch solutions and first-hand experience of procedures that are becoming more straightforward than ever before.

Owing to a well-organised syllabus, dental professionals choosing just one stream can join every relevant session. Alternatively, those wishing to pick and choose between different streams can create their own individualised programme, tailored to their needs and interests. The event will also offer a dedicated programme covering the latest tools for dental technicians.

The 2019 Nobel Biocare Global Symposium will take place from 27 to 29 June at the Mandalay Bay Convention Center. Registration for the event is now open at nobelbiocare.com/global-symposium-2019. ◀

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The new Feather surgical blades, Nos. 370, 390 and 390C, which were named among the BEST Products in 2017 by the *Gordon J. Christensen Clinicians Report*, are small, shaped surgical blades that are suitable for microsurgery (fine incision). With appropriate shapes and thicknesses for fine incisions, they are easy to control and, according to the company, provide superior performance, especially in periodontal plastic and regenerative surgery. As another feature, they are compatible with the surgical blade handles commonly used in dental surgery.

In addition to the new blades, the company has other popular blades, such as the Nos. 12d and 15c, on display in Amsterdam. Visitors are invited to the Feather Safety Razor booth to view the high-quality products. ◀

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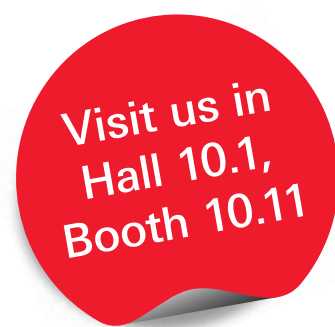
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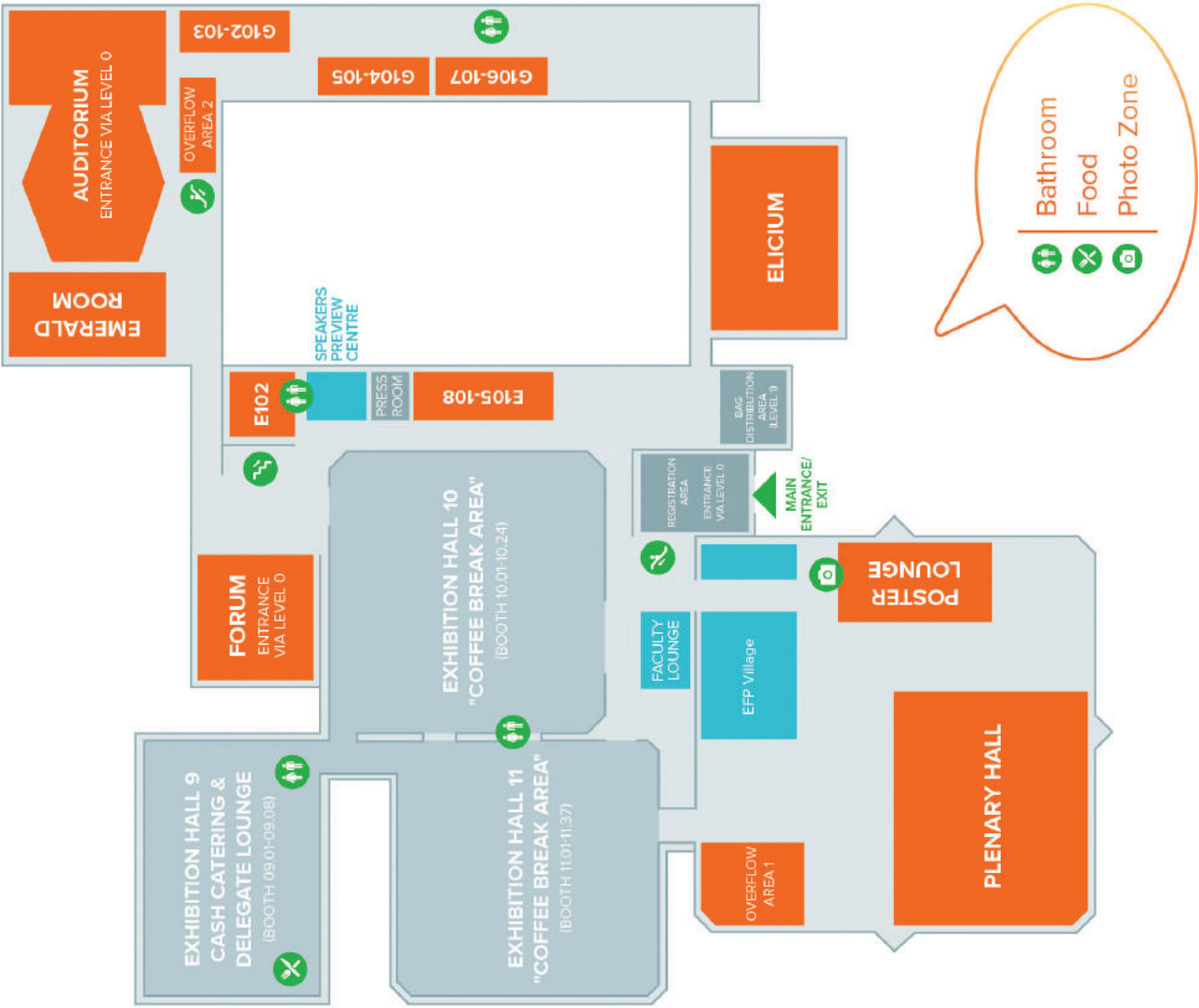
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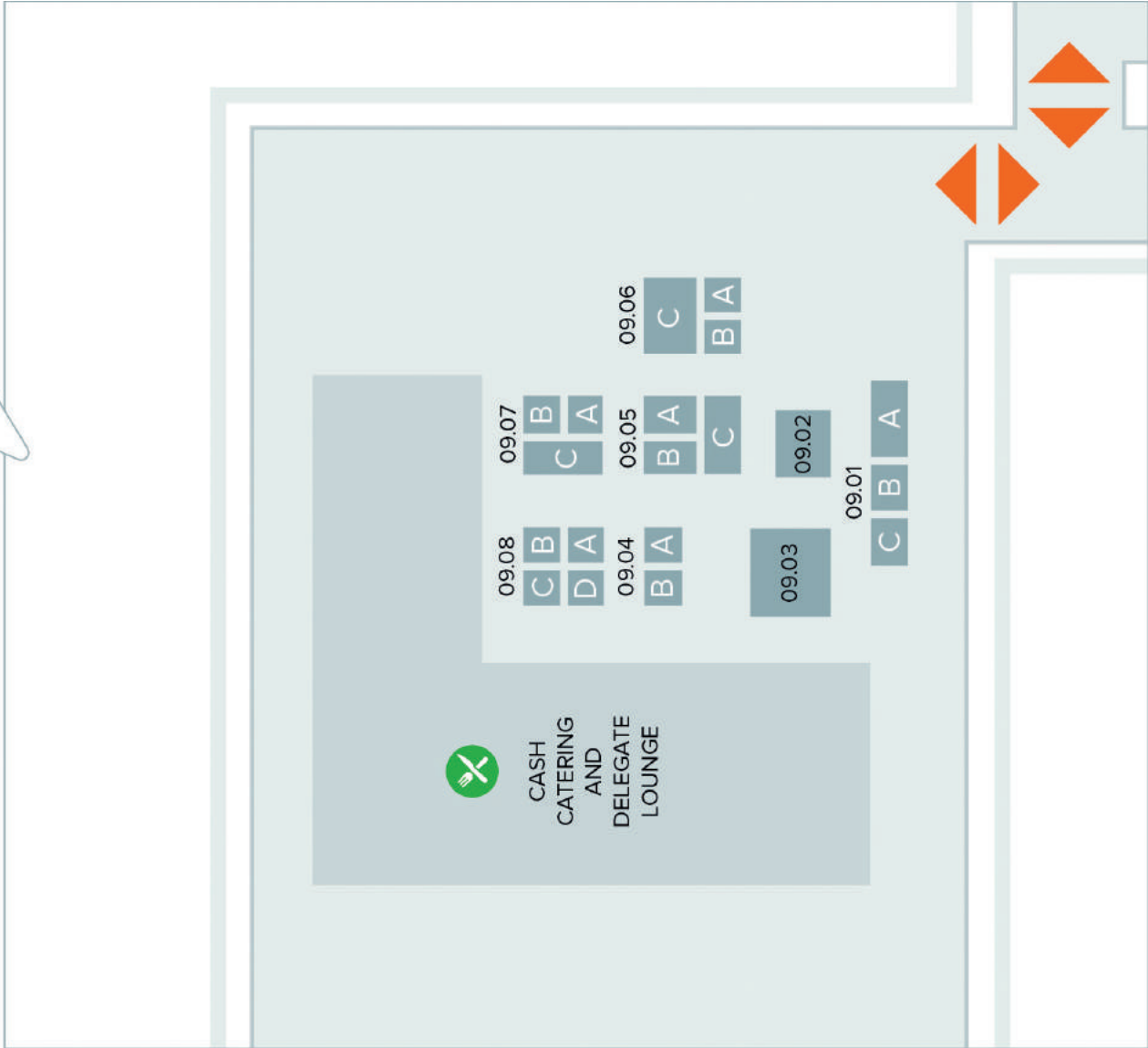
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EuroPerio9—Overview



Hall 9





Hall 10

Hall 11

