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DENTAL TRIBUNE

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Dentist who will make you laugh

Interview with Dr Abdulla Ali, a dentist and a comedian

By Dental Tribune MEA

Although he is enjoying very much performing and is busy with many activities, general dentist Dr Abdulla says that his patients still come first. Since he was 13, he wanted to do stand-up comedy, but there was no opportunity for that in the UAE.

Dr Abdulla also knew he wanted to do dentistry because he wanted to help people and be in the medical field. Dental Tribune MEA spoke with Dr Abdulla about the role of comedy and dentistry in his life.

Dr Abdulla, thank you very much for speaking with us. Could you tell us a bit about your background?

I'm an Emirati born and bred in Dubai. I went to New Zealand to study dentistry on a scholarship. Since I was 13, I had wanted to do stand-up comedy, but there was no opportunity for that in the UAE, it being a mainly American format. I also knew I wanted to do dentistry because I wanted to help people and be in the medical field. I was going to be a doctor, but my dentist uncle pointed out how depressed his brothers, all doctors, looked compared with how happy he was.

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Abdulla Ali — aka Abz Ali

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I wanted to make people laugh and smile, so dentistry and comedy were the perfect combination.

When I went to New Zealand, I had the opportunity to do some stand-up comedy there. At one stage, I believed I would quit dentistry and do comedy full-time, but I love them both so much that I couldn't stop doing either. I was in New Zealand for seven years studying, including a foundation year, and I worked there for two years after graduating.

How did you discover your talent?

I was quite lucky, not just with comedy but also with dentistry. I knew I wanted to be a dentist from when I was 15, thanks to my uncle. In Dubai in the early 2000s, we'd go to network cafes, them being great places to hang out and cheap, and I saw stand-up comedy there for the first time when I was 13. It was amazing. I had had no idea that this was a profession. I knew I wanted to take it up, regardless of whether it was well-paid or not.

Could you tell us how and when you started performing stand-up comedy?

I started when I was about 18. I had already been in New Zealand for a year and came back to the UAE for the summer holiday. A comedy festival was on in the UAE, and there were American comedians I went to listen to, and one of them suggested a short workshop. They set up a night on which 12 comedians of different nationalities living in Dubai could perform a show. I was the only Emirati and I was lucky to have been able to participate. Once we had finished the show, Aron Kader asked me to open for him the next day. I got to do these two shows back to back and literally on the third night had to go back to New Zealand. Since it had worked out well in Dubai, I just carried on in New Zealand while studying.

Do you have your own stage name that you are using?

Yes, my stage name is Abz Ali. That's how you can also find me on Instagram @iamabzali.

How do you manage being a comedian while practising dentistry?

I used to think that you had to do one or the other and then I realised that I didn't want to limit myself to one thing. It's not always easy. There are times when there's a comedy opportunity and I can't do it because I have work commitments. I try to keep the two separate. Dentistry is a passion, but it's also my main source of income. During the day, I focus on dentistry and at night on comedy. Luckily, most of the time, they don't clash.

> "I wanted to make people laugh and smile, so dentistry and comedy were the perfect combination."

© Abdulla Ali

Have you ever considered committing yourself solely to comedy or dentistry?

I'm planning to specialise in dentistry and I'm also planning to pursue comedy further. For most big-time comedians, their main profession is showbiz. I'm not interested in acting or showbiz in general, but I like dentistry.

Do you use humour with your patients?

Yes, I do. Patients are not always comfortable at the dentist. A lot of patients will say that they hate the dentist or that the dental clinic isn't their favourite place, so I try to use humour to diffuse the situation and make them feel comfortable. It's a good icebreaker. I don't tell patients that I'm a comedian, because I think that they might then wonder what kind of dentist is a comedian too.

I wanted to make people laugh and smile, so dentistry and comedy were the perfect combination.

Do you perform only in the UAE or also internationally? Who is your audience?

I used to travel a lot and did a comedy show wherever I travelled, so it would be almost like a working holiday. With COVID, it's become difficult to travel and the UAE needs all its medical staff in the country at this time. These days, I'm performing only in the UAE, but hopefully it'll be the rest of the world soon.

Do you belong to a comedic association and where do you perform in the UAE?

Comedians all know each other; we're a small community—dentistry is almost like that as well. We all perform in the same places. There're not a lot of Arab comedians. We don't have any formal association. Most comedy shows take place in Dubai, almost nightly. I prefer performing in Abu Dhabi, since I live there, but shows aren't as frequent, taking place about three times a month. On my Instagram page, I usually post when my shows are happening and other updates about my comedy career.

What topics do you talk about during your performances?

I don't talk about politics or religion. I talk about everything else, like relationships, mainly real-life situations, my life abroad in New Zealand and my life in the UAE and how they're different.

What advice would you give to other dentists when it comes to expressing themselves?

Don't feel like dentistry is your whole life. It's nice to fix smiles, but it's also important to make yourself smile too.

Thank you for the interview. DT

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Part 1: Sustainable dentistry in 500 words or more

By Dr Sanjay Haryana, Singapore

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The idea of writing an article series on sustainable dentistry originated from an article titled "A guide to eco-friendly dentistry" that provided many aspects and opinions regarding sustainable dentistry, but from which it was clear that there is no real consensus or extensive framework for sustainable dentistry. This first article will briefly introduce FDI World Dental Federation's new initiative regarding sustainable dentistry.

In March 2021, FDI published a press release regarding a new initiative to "lead the charge on sustainability in dentistry" by uniting sustainable leading dental industry partners around common future aims. FDI's long-term aim is to create a sustainability code of practice that will offer guidelines to green practice, including procurement and the practice of dentistry.

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Sustainability is a broad and complicated subject and not the area of focus of clinicians; therefore, it is of great value that FDI is mapping out future strategies and offering solutions for clinicians to implement in day-to-day practice.

The three main goals are:

- to increase awareness of the need to implement sustainable actions in the dental community;
- to develop a guide for oral health professionals to identify actions that can lead to environmentally sustainable outcomes; and
- to conduct a review of the current literature to identify the current research and guidelines and to identify any gaps in the literature regarding sustainability in dentistry.

FDI has also included four domains of dental care in its sustainability framework, and these are the heart of clinical dentistry: preventive care, operative care, integrated care and ownership of care.

Sustainable dentistry or green practice can be briefly summarised in the following way:

- Aim to procure sustainably by working with suppliers that constantly improve their sustainable work throughout their entire supply chain—including sourcing of raw materials, production, and transport of ready products.
- Practise green by doing what you do best, clinical dentistry. Preventive dentistry, together with high-quality dental care, is the most efficient way to minimise carbon dioxide emissions and waste. A series of papers by Duane showed that close to 65% of all carbon dioxide emissions were related to travel by patients and staff. A successful preventive care programme before, during and after treatment not only minimises the likelihood of disease, but also decreases the number of visits to the practice. By default, this will result in less travel, less material use, less waste production, and less carbon dioxide emissions. Preventive care does not eliminate oral disease. Patients will still have, for example, caries, periodontitis, devitalised teeth, and fractures. Working in a clean mouth gives us the opportunity to provide the highest standard of care, not only to ensure duration of the treatment outcome for as long as possible, but also to improve the quality of life for the patient. All dental work will fail, but we as a profession have the power to decide when.
- Waste management should cover all areas of the dental practice, including the reception, waiting room, sterilisation, treatment room and staff room. Examples are going paperless, recycling, and separating the normal waste from clinical waste. These are easy actions to implement, but also requires supervision and ownership by someone in the practice. Waste management is also dependent on a reliable waste management company to take care of the waste so that it enters the right facilities to continue the sustainability cycle.

FDI taking the lead on creating a manual with clear targets and action points will be a good first step and provide a code of conduct for global use and adaptation to the different environments we operate in. Over the next year, we will dive deeper into sustainability, specifically regarding procurement, green practice, and waste management, while incorporating updates from FDI and its progress. DT

About the author:

Dr Sanjay Haryana *is an Education and Odontology Specialist at TePe Oral Hygiene Products.*

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DT MEA named official partner for 18th ISLD World Congress in Cairo

By Dental Tribune MEA

Dental Tribune MEA is pleased to announce that it has been named the official media partner of the upcoming International Society for Laser Dentistry (ISLD) World Congress in Cairo, Egypt that will take place from 26 to 28 May 2022. The event will give the participants an exclusive opportunity to explore the world of laser dentistry.

Be a part of the 18th World Congress in Laser Dentistry 2022 in Cairo! Get a chance to hear the most prominent researchers in the field of laser dentistry and participate in enlightening workshops and conversations. This year, the orgenisers are expecting even more participants this time.

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Dental bleaching: fundamental knowledge. How to treat even the most complex cases

14 May 2022
Dr Rafael Beolchi, Brazil
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27 May 2022
Prof Christian Pierre Makary, Lebanon
Sinus grafting, GBR and narrow ridge reconstruction: State of the art surgical techniques using piezosurgery

28 May 2022
Prof Christian Pierre Makary, Lebanon
Narrow ridge treatment revolutionized – the Piezo Implant

10-11 June 2022
Dr Faysal G. Succaria, UAE
Ceramic veneers: Planning, smile design, preparation, provisionals and cementation

23-24 Sep 2022
Prof Paul A. Tipton, UK
Occlusion concepts introduction into every day practice

25 Sep 2022
Prof Paul A. Tipton, UK
Post and core - Modern techniques

26 Sep 2022
Prof Paul A. Tipton, UK
How to restore root filled posterior teeth - Practical concepts

29-30 Sep 2022
Prof Paul A. Tipton, UK
Bridge design – Making bridges aesthetic and increasing longevity

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Prof Paul A. Tipton, UK
Articulator selection in restorative dentistry

02 Oct 2022
Prof Paul A. Tipton, UK
Porcelain inlays & onlays

13-14 Nov 2022
Prof Paul A. Tipton, UK
Minimally invasive veneer preparation, cementation & smile design masterclass

15 Nov 2022
Prof Paul A. Tipton, UK
TMD, diagnosis and treatment protocols with occlusal splints (Michigan and T-Splints)

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Prof Paul A. Tipton, UK
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"Thank you so much for your support, it's a real pleasure to have Dental Tribune MEA as our congress media partner" said Dr. Youssef Sedky from Misr International University (MIU), organising chairman of the upcoming ISLD congress in Cairo.

The ISLD is a nonprofit organization. It promotes professional excellence in the use of laser dentistry through scientific research and education. It is striving to enrich the knowledge of its members and to elevate the scientific and technical standards of lasers dentistry research, practice and teaching to its highest levels. It is motivated to cultivate and foster international professional relationships and cooperation with scientific organizations.

Professor Norbert Gutknecht Research Award

In memory of its late president, Prof. Norbert Gutknecht, who passed away in July 2021, the ISLD has announced the establishment of the "Professor Norbert Gutknecht Research Award" which will offer €1,000 to a young researcher in the field of laser dentistry starting from ISLD Cairo 2022. Dental professionals would like to participate, may read the research proposals instructions and submit their application and a short CV to info@isldlaser. com. DT

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From body positioning to ergonomic instrumentation, here are a few options to help relieve pain

By HuFriedyGroup

Dentistry has always been a taxing profession both on the mind and the body. And dentists and hygienists who scale by hand instead of using ultrasonics may be noticing a few more physical aches and pains, especially if hand scaling.

That pain is also not just in the hands, wrists, and arms; hand scaling can also take a toll on the back, neck, shoulders, and legs. Dentists and hygienists are at risk for conditions such as carpal tunnel syndrome, repetitive motion injuries, and even chronic headaches. This pain can strike at any point during a hygienist's career: Between 64% and 93% of dental professionals experience general musculoskeletal pain. In fact, musculoskeletal disorders are the leading reason for early retirement among dental professionals.

Musculoskeletal pain—cause

Average everyday hand scaling leads to repetitive motions, often in awkward positions, a recipe for pain and physical disorders that can derail a career.

Musculoskeletal pain—prevention

During hand scaling, you can avoid pain and repetitive stress injuries with the following tips:

Better positioning for doctors and patients

The less bending, hunching, twisting, craning, leaning, or reaching you do, the less tension you'll put on their muscles, joints, and bones.

The proper position for working with a patient is seated, with the spine in a neutral position and shoulders relaxed. Working as close to the patient as possible avoids overextending the arms or back and always facing the patient.

You should also keep their feet flat on the floor and adjust the stool's height so the thighs slope slightly downward. Weight should be evenly distributed between each foot and your buttocks, similar to a tripod.

If the procedure calls for a better view of the patient's oral cavity, you can ask the patient to turn their head and use high-definition mirrors to improve visibility. Keeping instruments at roughly arm's height and within a 21-inch radius is ideal.

The patient's body position also has a tremendous impact on ergonomics. According to *RDH* magazine, the patient should ideally be positioned supine for treating the upper arch and semi-supine for the lower arch, but this practice is often impractical due to time constraints.

Instead, they recommend positioning the back of the patient's chair at a 10- to 15-degree angle from the floor. Then, use a contoured dental neck cushion to achieve the proper orientation of the occlusal plane.

You should be sure to ask your patients to position their heads at the end of the headrest to eliminate the need to reach over the empty space on the headrest.

Ergonomic instruments and equipment

Ergonomics should be a key consideration when choosing dental instruments and equipment.

The operator stool

From an ergonomic perspective, the operator stool is the most important chair in the treatment room. Proper positioning begins by adjusting the stool first and the patient second.

A stool should be adjustable, with adequate lumbar, thoracic, and arm support. It should allow for a space of three finger-widths behind the knee. If the stool has a tilting feature, tilt the seat forward between 5 and 15 degrees. (If not, use an ergonomic wedge cushion.)

Saddle-seat stools may be the ideal option for dental hygienists – especially shorter people. This type of stool maintains the pelvis in a neutral position and allows the optimal curve of the spine.

Lighting

Another helpful piece of ergonomic equipment is a loupe with a built-in headlight. Loupes provide magnification, so you don't have to bend to see the patient's oral cavity better. Headlights move with the head, eliminating the need (and annoyance) to continually readjust the overhead light.

Instrumentation

Instruments can also make a significant difference. You should look for an instrument with an ideal weight and large diameter that provides a textured grip surface. These instruments will be easier to maneuver and cause less hand fatigue while probing, scaling, and root planing.

The science behind ergonomic design matters too. The new Harmony Ergonomic Scalers and Curettes are a good example.

The result of a cutting-edge iterative research and development process that analysed over 2.8 million data points, the Harmony Scalers and Curettes reduce pinch force up to 65% and pressure on the tooth by 37%. The handle features a recessed double-helix texture for optimal tactile sensitivity with less tactile fatigue. The silicone grips are extended by 30% to provide a secure and nimble grasp.

Another essential factor in instrument ergonomics is the sharpness of the blade. Sharp scalers require less force to do the same amount of work, which can help both clinician and patient be more comfortable. Harmony Scalers and Curettes feature EverEdge 2.0 technology with working ends that are 72% sharper out-of-the-box than the next leading competitor and remain 50% sharper after 500 strokes.

Simple wellness exercises

Before undertaking any physical activity—from a morning run to a day of treating patients—it's always a good idea to warm up the joints and muscles. Daily stretches and regular yoga practice can help maintain fitness for work without attending in-person classes to reap the benefits. Countless high-quality yoga videos are available for free online.

Musculoskeletal pain is not rare nor even uncommon. There's no shame in feeling pain as a dental professional, as it is fairly common to experience this. The good news is that a few changes to your working routine, posture, instruments, or fitness regimen can do wonders for the body and can potentially extend your careers by years of injury-free practice. DT

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New Neo Spectra ST flow – the simpler, more versatile aesthetic flowable composite

The SphereTEC revolution continues

By Dentsply Sirona

Dentsply Sirona's new Neo Spectra ST flow extends the benefits of novel SphereTEC filler technology to flowable composites. Excellent chameleon blending enables five shades to cover the full VITA* range, and flow-on-demand handling provides versatility across all traditional flowable indications.

Dentsply Sirona's latest innovation in composite filler technology, SphereTEC, was introduced to the dental industry in 2015. Over 14 million composite restorations later, Dentsply Sirona introduces an expanded portfolio with SphereTEC technology. Clinicians will now be able to enjoy SphereTEC benefits in all composite cases with the comprehensive Neo Spectra ST portfolio. 'Neo', meaning 'new' or 'revived' emphasizes the modern, cutting edge approach taken to optimise our composite portfolio. The 'Spectra ST' part of the brand explains the

portfolio's coverage of the full range or 'Spectra' of handling preferences and aesthetic needs optimised with SphereTEC (ST) technology.

Designed to perfectly complement Neo Spectra ST universal composite, new Neo Spectra ST flow is characterized by its cutting-edge filler technology, SphereTEC - like with its universal composite counterpart, SphereTEC technology enables Neo Spectra ST flow composite to excel in the areas that matter most to dentists: handling, aesthetics, and durability. SphereTEC fillers, proprietary to Dentsply Sirona and Neo Spectra ST Composites, arespherical-shaped, pre-polymerised fillers created from sub-micron barium glass. Spherical-shaped filler particles allow for excellent adaptation to cavity surfaces, and work together with smaller irregular-shaped filler particles in the material to achieve versatile, flow-on-demand-handling. Precise match of SphereTEC filler to the Neo Spectra ST flow resin matrix creates an excellent chameleon shade blending effect, and a perfect match to Neo Spectra ST universal composite shades. The unique structure of SphereTEC fillers maximizes composite strength and durability, while their sub-micron primary particle size ensures excellent aesthetics and polishability.

The new Neo Spectra ST flow composite uses five universal CLOUD shades A1 to A4 to cover the entire VITA* Classic range, streamlining flowable composite inventory and ensuring highly aesthetic clinical results thanks to their distinct chameleon effect. Neo Spectra ST flow composite also offers one bleach shade (BW), two opaque dentin shades (D1 and D3), and one translucent enamel shade (E1) to accommodate less frequent case demands.

For further information about the new Neo Spectra ST flow composite available from Dentsply Sirona, visit dentsplysirona.com/NeoSpectraST-flow. DT

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1) Compared to other leading scaler designs. Data on file. Available upon request.

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