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INTERVIEW

Dental Tribune Asia Pacific had the opportunity to speak with Prof. Hien Ngo about the concept of "life-long oral health" and the major demographic change in ASEAN countries. [▶ Page 03](#)



"FROM A PATIENT TO A FAN"

W&H Marketing Director Anita Thallinger talks about the background, objectives and challenges of her company's new image campaign. [▶ Page 10](#)



HIGHLY AESTHETIC TREATMENT

A clinical case involving an interdisciplinary orthodontic, microsurgical and restorative procedure. [▶ Page 12](#)

Children are not getting dental check-ups early enough, global survey shows

By DTI

GENEVA, Switzerland: Maintaining a healthy mouth is crucial to keeping it functioning correctly and to maintaining general health and well-being. Ahead of World Oral Health Day, celebrated annually on 20 March to raise global awareness of the prevention and control of oral disease, the FDI World Dental Federation asked parents around the globe how they cared for their children's oral health growing up. Their responses suggested room for improvement.

The survey, carried out online in ten countries and completed by 11,552 adults in total, found that only 13 per cent of parents with children aged 18 and under had taken their child to the dentist before their first birthday—the recommended age for the first dental visit. Most parents first had taken their child to the dentist when he or she was between 1 and 3 years old (24 per cent) or between 4 and 6 years old (22 per cent). Alarmingly, 20 per cent of parents reported never having taken their child for a dental check-up.

"It's worrying to learn that most children are not getting a dental check-up at the recommended age," said FDI President Dr Kathryn Kell. "Good oral health habits start early. Parents should visit the dentist after their child's first tooth starts erupting as a preventive measure to avoid risk of developing early childhood caries. Oral disease can impact every aspect of life and is associated with many general health conditions. This World Oral Health Day, we want people to make the connection between their oral health and general health and understand the impact that one has on the other. Knowing how to protect your mouth and body at all ages contributes to a better quality of life."

Half of the parents who had taken their child to the dentist identified the reason as being a regular dental check-up. However, while this was the most frequent

answer in the UK (82 per cent), Sweden (77 per cent), Argentina (65 per cent), France (63 per cent), the US (63 per cent), Australia (56 per

cent) and China (34 per cent), the most reported response for having gone to the dentist in Egypt, the

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Philippines and Morocco was pain or discomfort in their child's mouth (56 per cent, 43 per cent and 38 per cent, respectively).

More than 43 per cent of the parents said that they personally ensured that their child's teeth were brushed before bedtime to avoid oral disease—a key message promoted by the FDI. The survey also found that 40 per cent of parents supervised their child's toothbrushing

twice a day, and 38 per cent of them said they limited sugary foods and drinks in their child's diet to prevent oral disease. Only 26 per cent reported personally having cleaned their child's teeth from as soon as the first tooth erupted, and just 8 per cent mentioned having encouraged their child to wear a mouth guard when playing sport.

The FDI recommends practising good oral care, avoiding risk

factors such as an unhealthy diet—particularly one high in sugar—and having regular dental check-ups to protect oral health and general health at all ages. Parents should start cleaning their child's teeth before bedtime with the eruption of the first tooth, supervise toothbrushing twice a day with a small amount of fluoride toothpaste, and schedule regular dental check-ups, starting no later than the first birthday.

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“The oral environment becomes more hostile with age”

An interview with Prof. Hien Ngo

Professor Hien Ngo has extensive experience in private practice, research and education. Over the last 30 years, he has been active as an international speaker on cariology, minimal intervention and restorative dentistry. At present, his focus in research revolves around the clinical management of caries, especially in elderly and medically compromised patients and the interactions between glass ionomers and the oral environment. Dental Tribune Asia Pacific had the opportunity to speak to him prior to his presentation at IDEM 2018 in Singapore about the concept of “lifelong oral health” and the major demographic change in ASEAN countries.

There is a global phenomenon of population ageing on an unprecedented scale. What is the situation in South East Asia?

Ageing is universal and there is no exception among ASEAN

countries. It is expected that the percentage of the population aged

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Prof. Hien Ngo

Dental Tribune Asia Pacific: The term “lifelong oral health” was used by the FDI World Dental Federation in one of its policy statements. What does it mean?

Prof. Hien Ngo: Previously, edentulous among older individuals was accepted as a norm. However, with recent advances in preventive and restorative dentistry, the FDI stated, “The goal of reaching old age with a full set of teeth is feasible if preventive measures and oral healthcare are accessible throughout life.”

The key term here is “throughout life” because a good oral health foundation in childhood is the key determinant of oral health at a later stage in life.

Lifelong Oral Health was the title of a policy statement that was adopted by the FDI General Assembly in August 2017. It identified the four pillars supporting lifelong oral health as oral health promotion, risk assessment, disease prevention and early diagnosis and intervention at all stages of life. These four pillars will form the framework for discussing clinical cases during the Silver Wave symposium at IDEM.

“Ageing is universal and there is no exception among ASEAN countries.”

over 60 will more than double in the next 30 years. By 2050, 2 out of 10 people in the region will be aged over 60. However, the pace of

change is much faster in Singapore than in neighbouring countries. It is predicted that by 2050, 4 out of 10 Singaporeans will be

over 60 while this ratio will be 2 out of 10 in Indonesia and approximately 3 out of 10 in Thailand and Vietnam.

What are the consequences of this demographic change for oral health professionals?

If you are working in the private sector, it means that a higher portion of your clientele base will be older individuals and most of them will be dentate. As they belong to the baby boomer generation and were born between 1946 and 1964, they grew up during a period of rising living standards after economic prosperity, so their expectations are different from previous generations.

The Australian Institute of Health and Welfare proposed a broad classification for this group: active and capable, limited activity and capability and very limited activity and capability. For the last two groups, you may need to modify your practice to allow accessibility, or there is the option of referring them to specialised public institutions and specialists.

For clinicians, the care pathways for elderly patients are more complex, as damage to their dentition is accumulative, so its manifestation is much more severe later in life. The oral environment also becomes more hostile with age. Root caries, which are rare in younger individuals, are common in the older patients.

“...the care pathways for elderly patients are more complex...”

When these conditions are coupled with either severe health or mental illness, then referral to a specialist in geriatric dentistry could be required. Gerodontology is now a recognised dental specialty; however, specialists in this field are still not common in ASEAN countries. The engagement of international bodies such as the FDI and WHO on the concept of lifelong oral health will encourage healthy discussions and policy developments to ensure that preventive measures and oral healthcare are accessible.

What is happening in this field during the IDEM conference in Singapore?

Singapore recognised the importance of this major demographic change and has made large investments to ensure that lifelong oral health is delivered to its population.

With the Silver Wave Symposium at IDEM 2018 on Saturday 14 April, there will be a full day dedicated to managing the ageing population and patients. Six international speakers and clinicians will be brought together to discuss the management of oral health issues, of the ageing population, and of older individuals. The day will start with discussions on the changes that were made in the public health and education institutions, then move on to clinical issues. The day will be clinically oriented and discussions will be patient focused. The symposium will be supported by *The Silver Wave booklet*, which will be distributed during IDEM.

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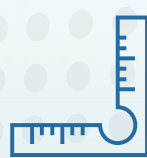
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ADIA and BDIA to sign agreement and strengthen ties

By DTI

SYDNEY, Australia: Seeking to strengthen existing ties, the Australian Dental Industry Association (ADIA) and the British Dental Industry Association (BDIA) have signed a cooperative agreement in March. Formalising their informal working relationship of more than 50 years, the new agreement is intended to aid in mutual interests through the sharing of information, working with regulatory offices and promoting their respective members' products overseas.

"The dental industry in Australia and Britain jointly understand the importance of the role that industry has in supporting dental professionals to deliver optimal oral health. This is achieved

As part of their collaborative work, both organisations will be hosting national pavilions at key

international dental trade shows, such as the International Dental Show in Cologne in Germany and

the International Dental Exhibition and Meeting in Singapore. The agreement was signed at

ADX18 Sydney, Australia's premier dental event and the nation's largest healthcare trade show.

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through the investment by dental product manufacturers in new and innovative patient treatment options and in this area there is so much that the ADIA and BDIA membership can learn from each other," said ADIA CEO Troy Williams.

ADIA and the BDIA share the policy objective of achieving convergence of the regulations for the market approval of medical devices. According to ADIA, given that in Australia and in Britain the regulatory framework for the approval of medical devices is based upon that of the European Union, the two organisations will benefit owing to a broad understanding and different perspectives on the same regulatory approach.

"In the context of Brexit it's likely that, in many respects, Britain's dental product regulatory framework may eventually look increasingly like that of Australia. We expect that in the coming years, just like in Australia, the regulations will be based heavily upon those of Europe but with some opportunities for important changes that reflect local conditions," said BDIA Chief Executive Edmund Proffitt.

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By VladMiVa



Employees of VLADMIVA company

VladMiVa, a large Russian holding company that unites a number of Belgorod-based companies and is invested in the development and manufacturing of materials, tools and equipment for dentistry, celebrated its 25th anniversary in 2017.



General Manager Vladimir Chuev

VladMiVa's activities and products have not only been recognised nationally and by the Commonwealth of Independent States (CIS) countries, but also in the global dental market, the company is known as the largest manufacturer of dental materials and instruments in Russia. On the night of the anniversary, we interviewed the founder and general manager of VladMiVa, Vladimir Chuev, who is also a doctor of technical sciences and a professor and the head of the Department of Medical and Technical Systems at Belgorod State University (BSU).

Prof. Vladimir Chuev, tell us the story of how your enterprise began.

Prof. Chuev: The critical moment when people are "on the edge" is often a decisive moment. Someone drops his hands and someone

starts to act despite of their fears, difficulties and an uncertain future. In 1992, the state funding for the laboratory that I directed was stopped, but our developments were of an applied nature, so we could try to find use for them. I decided to create a commercial enterprise, invested my own savings in it and convinced almost all my colleagues to stay and work with me. Our first development was very successful. In the same year, 1992, we received a silver medal from the USSR Exhibition of Achievements of the National Economy for the technology we developed to manufacture amalgam fillings. The next important step was the development of a technology for the production of dental cements for the Voronezh-based enterprise, Raduga-R. Our first success inspired our small team.

VladMiVa consists of a group of companies. What kind of companies are they and which idea unites them?

We very quickly realised that focussing only on technological development is not very promising business. Therefore, in 1994, the commercial department began its work. We started with direct sales on 2 m² of exhibition space—that seems ridiculous today—but we managed to find our customers and see a clear picture of real consumer demand. In 1998, JSC «VLADMIVA» EXPERIMENTAL PLANT was opened.

The idea of "Development—Production—Realisation", upon which we laid the foundation of the company's activities, was soon realised. Between 2001 and 2002, we mastered the production of dental equipment and diamond burs and by 2009 we had produced more than two hundred kinds of products. In 2004, we opened our own dental centre, which was not only a place to confirm the high quality of our materials, but also a prime example of a world-class

dental centre. The holding company today also includes Trade House, our own transport company with branches across Russia.

Over the past 25 years, the number of employees has grown from four to four hundred, we produce more than three hundred kinds of products and our consumers are not only in Russia, but also in more than 50 countries around the world. The main activities of the company today include the development and manufacturing of medical products for dentistry, providing raw materials for their development, pharmaceutical production, the production of modern disinfectants for medical institutions, developing veterinary medicine and consumer services.

Do you participate in programs with state support? What is the role of science and education in your work?

The first aid that we received from the state was a small grant from the Foundation for Assistance to Small Innovative Enter-

prises in Science and Technology. Since 1997, we have participated in many programs of the foundation and are very grateful to its leadership for their assistance. Participation, together with the BSU, in the federal project on government's resolution of the RF No. 218 became an interesting experience and has led to the emergence of the first Russian certified nanocomposite, DentLight as well as the creation of two small innovative enterprises, NANOAPATIT and Keramos-BSU.

We also actively cooperate with leading scientific centres, such as the Federal State Institution Central Research Institute of Dental and Maxillofacial Surgery, Dmitry Mendeleev University of Chemical Technology of Russia, Moscow State University of Medicine and Dentistry, Samara State University, I.M. Sechenov First Moscow State Medical University and Tula State Medical Academy. By 2010, the employees of VladMiVa have among them received four PhD degrees as well as a doctoral thesis.

Furthermore, at the Department of Medical and Technical Systems at BSU, the nominal audience of VladMiVa was opened and five scholarships were awarded to the best students. Our dental centre is also a clinical base for these students. We want to realise one more idea, which is to further educate our young employees.

What about your employees today? How do you solve their social problems?

Today, our companies employ a total of 400 people of different professions. Of course, like any other company, we experience a shortage of skilled employees, such as technologists, but this does not diminish the quality of our work. We value each of our employees. Even in the most difficult times of crisis, we do not delay the payment of wages. We also never refuse payments on sick leave or on paid leave. We have developed a corporate program of material assistance to employees who are in difficult socioeconomic situations.



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For 25 years, we have formed corporate traditions, such as joint holidays and excursions where the families of our employees participate and we can enjoy children's performances and competitions.

We try to create a comfortable environment for all our people. We have built a chapel, planted flowers and always aim to provide good production and living conditions. We respect our veterans. We also love our city Belgorod and participate in its development.

VladMiVa products have a high quality. Can they keep up with, or even replace, the imported goods?

In 2011, our production received a Certificate of Compliance with the requirements of International Standards (ISO 13485:2003).

Later, we obtained the right to label our products with the mark of European conformity (CE), which means compliance with EU standards. In 2014, JSC «VLADMIVA» became one of the first 25 enterprises that have the right to label their products as "Russian nanotechnological products", which is a confirmation of the high quality of our products.

Out of our three hundred products, more than 190 are in demand on the foreign market. In Russia, we have to overcome the

phenomenon of "Westernism" in dentistry and persuade consumers through systematic participation in exhibitions, conferences and seminars that "Made in Russia" means quality.

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