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Samaranayake speaks
An interview with the dean
of HK's only dental school

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Restoring missing
mandibular incisors

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Global trends in focus of World Dental Forum Dental laboratory giant invited to Mainland China and Macao

Daniel Zimmermann
DTI

HONG KONG/LEIPZIG, Germany: Affiliates of Modern Dental Laboratory (MDL) have recently met during the World Dental Forum in Shenzhen and Macao in China. The event also saw more than 200 dentist from Europe, North America and Asia gathering for three days of learning and discussing new trends in the global dental industry. Chinese dental industry representatives and other professionals including the dean of Hong Kong's Faculty of Dentistry Prof. Professor Lakshman Samaranayake attended the meeting.

MDL is one of the largest providers of dental restorations in China and pioneer for the outsourcing of manufacturing which has become an increasing trend in Europe and even more in the United States.

According to Chinese lab consultant Ma Yun Xiu, there are now more than 8,000 dental labs of different sizes in China alone of which 100 are able to



Modern Dental Laboratory manufacturing facility in Shenzhen, China. (DTI/Photo courtesy of Evado PR, USA)

provide qualified services for clients in overseas. MDL has been producing ISO 13485:2003 certified dental work for dentists and patients in the US from its main lab in Shenzhen since 1976. The company also says to maintain the largest dental technology school worldwide with a staff of 3,000.

"It was thrilling to bring a group of dentists from the US to Modern Dental Laboratory during the World Dental Forum, allowing them to see firsthand how worldwide dentistry is positively reaching US dentists and patients today," said Patrick Tessier, CEO of Modern Dental Laboratory USA. "Many of the doctors told

me that what stood out for them during the tour is that there is a quality check after every process, not just at the final restoration."

MDL said that the company will held its next Forum in conjunction with the centennial celebrations of the University of Hong Kong in 2012. [D]

Indian edu standards under scrutiny

Daniel Zimmermann
DTI

HONG KONG/LEIPZIG, Germany: Dental education in India faces a major overhaul, as the Dental Council of India (DCI) is considering the revision of current regulations. In a public note released in September, the organisation, which regulates dentistry and dental education, urged dental professionals nationwide to review a number of suggestions regarding the manner in which to raise educational standards, including the reduction of seats in dental colleges and reviewing the clinical acumen of dentists every ten years.

The number of private dental colleges in India has skyrocketed lately, which has raised concerns about falling standards and the employability of future dental graduates. The DCI previously rejected applications for over 40 new colleges and requested state health ministers halt registration or reduce the number of seats at these colleges according to vacant positions available. [D]

AD



European Commission President José Manuel Barroso (left) listening to remarks of Laotian Prime Minister Bouasone Bouphavanh. European and Asian leaders met in October in Brussels to discuss new measures against counterfeit products. (DTI/Photo courtesy of the Council of the European Union, Belgium) ► ASIA NEWS page 3

First Afro-American takes presidency

The American Dental Association has elected Dr Raymond F. Gist, a dentist from Flint, Michigan, as their new president. Gist is the first African-American to hold the organisation's highest elective office. He announced to focus on membership outreach and advocacy efforts that will have special appeal to young dentists. [D]

India, Malaysia agree to free trade

India and Malaysia have agreed on a new free trade deal that will take effect in mid-2011. The Comprehensive Economic Cooperation Agreement covers trade in goods and services, investment and economic cooperation. It is expected to be signed by end of January next year, according to a joint-statement. [D]

Displaced dental workers given help

The Filipino Department of Labor and Employment has announced that it will provide financial and livelihood assistance to the 50 dental technicians left unemployed by the closure of a Manila lab in August. It also said to have teamed up with the National Association of Dental Prosthetic Laboratories, Inc. to seek training opportunities and possible future employment for the rest of the 400 workers in other dental laboratories in the country.

The facility concerned was closed after the US owner, who also runs operations in Vietnam, declared bankruptcy and left with unpaid debts. The lab has been producing dental replacements, including crowns, bridges and dentures for clients in the Philippines and abroad since 1995. [D]



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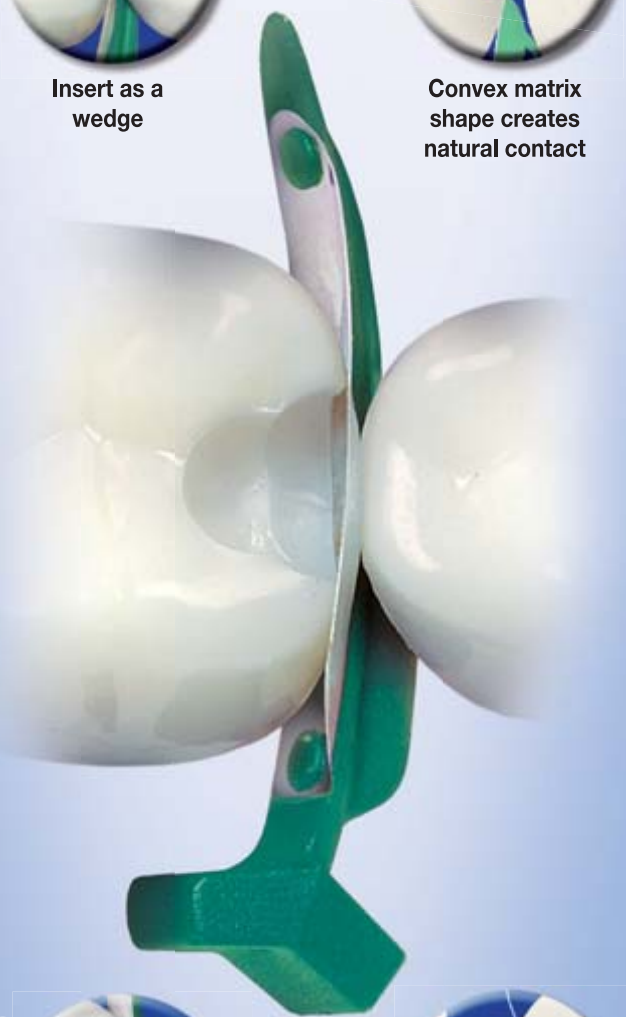
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“A well-recognised health profession”

Prof. Lakshman Samaranayake talks about the University of Hong Kong Faculty of Dentistry

Established in 1980, the University of Hong Kong's Faculty of Dentistry is not only one of the youngest but also fastest growing dental schools in Asia. Recently, the school opened a new Centre for Advanced Dental Care that aims to provide higher clinical training to students and visiting dentists. At the Open Day in November, *Dental Tribune Asia Pacific* spoke with the Dean, Prof. Lakshman Samaranayake, about the Faculty and what makes studying Dentistry at the University of Hong Kong unique.

Dental Tribune Asia Pacific: *Since 1997, Hong Kong has been administered by the People's Republic of China. Did this have an influence on the Faculty and Hong Kong dentistry in general?*

Prof. Lakshman Samaranayake: The handover had a major impact on our relations with the key academic institutes in Mainland China. In collaboration with the Beijing University School of Stomatology, for example, the Faculty initiated the Mainland's first ever joint international clinical programme in advanced Periodontology in 2007. We have also initiated joint Annual Fellowships in Advanced Dentistry together with the Chinese Stomatological Association and established the Wah-Ching China Dental Sciences Development Project.

Where do the majority of your students come from and do you cooperate with other universities abroad?

The vast majority of our undergraduate students are local, and only a minority come from Mainland China or the region. However, we are proud to say that we have over 200 postgraduate

students from over 30 nations registered in the Faculty right now and at least the same number of agreements with major universities overseas to promote academic research and cultural exchange. In the last two years, the Faculty has been also regular host to dental school representatives from around the world, and signed academic and research collaboration agreements with dental schools in Thailand, Finland and the US, amongst others.

gainful employment in the field of dentistry shortly after graduation. In 2009, all Bachelor of Dental Surgery (BDS) graduates found jobs or pursued further studies within the first six months of graduation. Let me add that more than 50 per cent of dentists in Hong Kong are alumni of our Faculty.

You rival with other dental schools in Asia. In your opinion, what makes dental training in Hong Kong unique?



Professor Saramayanake (right) applauds the opening of the Faculty's new Centre for Advanced Dental Care. To his left Dr Rita Fan Hsu Lai Tai, from China. (DTL/Photo courtesy of University of Hong Kong, Hong Kong)

How many Dentistry students graduate from the Faculty each year and what are their overall job prospects?

Each year, around 50 dentists graduate from our school. They are able to pursue a career in private general or specialist practice, hospital dentistry, government dental services, or teaching or research.

Dentistry is a well-recognised health profession in Hong Kong and dental graduates have the benefits of a high professional status, as well as an above-average income. Dental graduates from the Faculty normally secure

Our training is unique for a number of reasons but I think one of the main things that makes us different is that we use English as main instructional language. Our teaching staff also comes from more than ten different countries and they enrich the courses with international knowledge. The Faculty is also one of the best equipped in Asia, with students having the latest digital technology at their disposal.

Last, we are the only dental education facility in Asia that offers Problem-Based Learning (PBL) programmes for undergraduates. → **DT** page 4

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Asian experts discuss implants at German meeting

Daniel Zimmermann
DTI

LEIPZIG, Germany: Over 180 dentists from Asia, Germany and the UK recently discussed new concepts in restorative implant dentistry at a joint symposium held at the University of Tübingen in Germany. Japanese scientists led by Prof. Takashi Miyazaki from Showa University presented new research

on utilising spark erosion for the improvement of implant surfaces. The technology is currently being used in other industrial fields for cutting metal using high voltage electronic discharges.

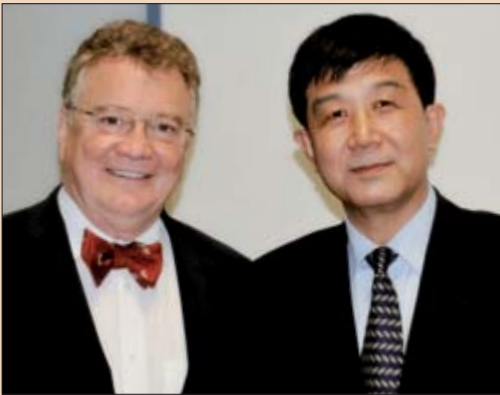
Dental implantology has seen an upswing in countries like Korea and China, where more than 80 of all dentists are now able to place implants.

According to Prof. Yen Lin of the School of Stomatology at the Beijing University in China, who also attended the meeting, between 2,000 and 3,000 implants are placed in the clinic's Department of Implantology each year.

Industry reports predict that the market will grow to over US\$125 million by 2013, reflecting a compound annual growth

rate of more than 30 over the next four years.

The symposium, chaired by Clinical Director Prof. Heiner Weber, was organised by the Department of Prosthodontics at the University of Tübingen. Since the 1980s, the university has been educating dentists, technicians and dental students from different parts of Asia in dental surgery. [DTI](#)



Prof. Heiner Weber (left) poses with Prof. Yen Lin. (DTI/Photo courtesy of University of Tübingen, Germany)

AD

Asia, Europe take on fake drugs

Daniel Zimmermann
DTI

LEIPZIG, Germany: Politicians and business leaders participating in the Asia-Europe Summit ASEM 8 in Brussels in Belgium have decided to strengthen trans-regional cooperation in health care services between Asia and the European Union. They have also called for improved intervention policies on counterfeiting, including the recognition of Good Manufacturing Practice certification by Asian countries.

Counterfeit goods, including medical products, account for US\$200 billion or 2 per cent of the world's trade, according to figures from the Organization for Security and Co-operation in Europe. Many of them originate in countries like India and China, where restrictions against counterfeiting are ineffective. Amongst others, the US Food and Drug Administration had to recall tons of counterfeited Colgate toothpaste in 2007, which were produced in China and contaminated with a chemical compound commonly used in antifreeze.

"Counterfeit medical products are not only of concern to dentists and the dental industry. They represent a threat for all medical professions," Friedrich A. Herbst, Executive Director of the Association of International Dental Manufacturers told *Dental Tribune Asia Pacific*. "The spread of counterfeit products can only be reduced when each and every individual along the distribution chain is committed to ensuring that the product or good he is offering, distributing or selling comes from a reliable source which is known for its personal integrity and ethical standards."

Herbst added that the World Health Professions Alliance, a non-governmental body representing over 600 health organisations around the world, recently announced a public health alert on the prevalence of falsified medical products. The organisation also provides resources on their website (www.whpa.org) for physicians and dentists seeking more information on the matter, he said. [DTI](#)

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Dear reader,



Daniel Zimmermann
DTI

There is no doubt that counterfeiting has become a serious problem not only for the industry but consumers alike. Fake medicine, originating mainly from countries like India, China or South Africa, even poses a increasing threat to public health, according to the World Health Organisation.

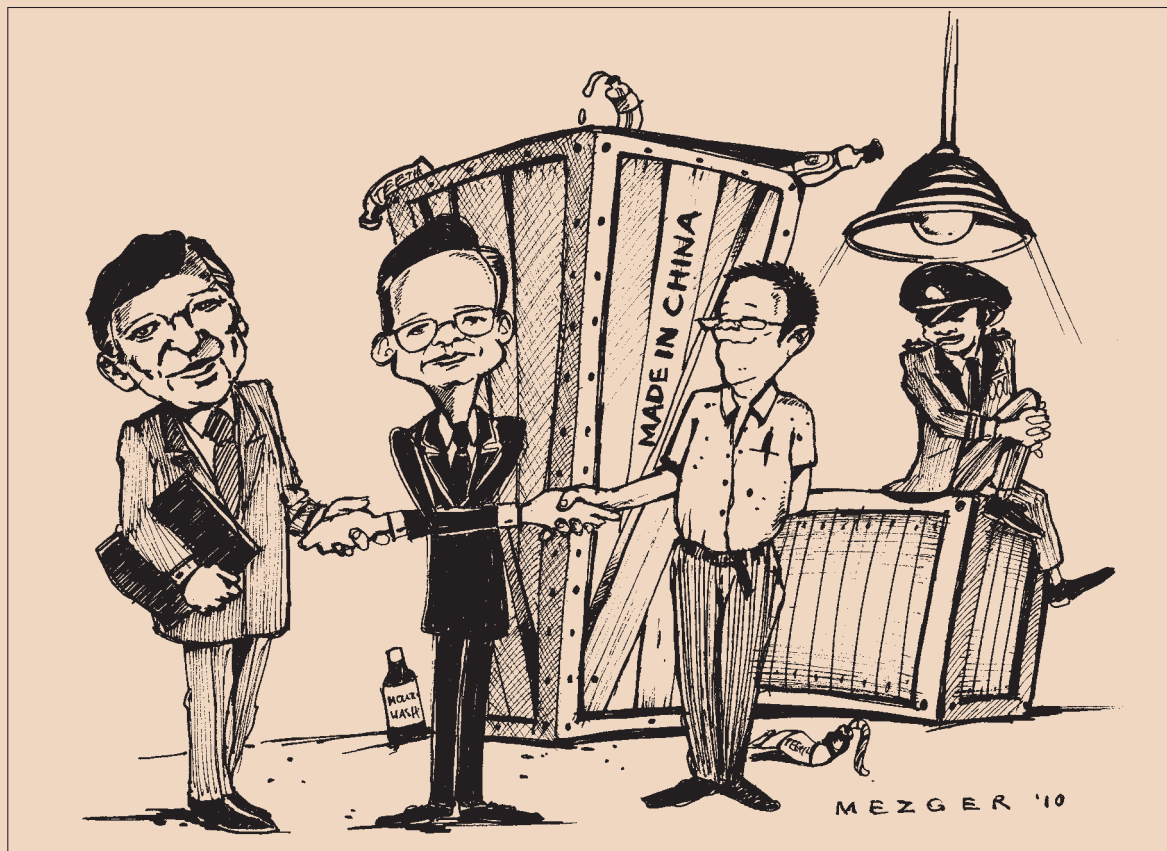
Despite a few tons of fake toothpaste and mouth wash, dentistry has long been spared by the problem of counterfeiting but the trend in the globalised dental industry for outsourcing production to low-wage countries has made it more difficult for dental professionals to determine exactly where their products come from.

To make things more complicated, patients usually put a lot of trust in their dentist and leave critical thinking outside practice doors.

The dental community has to be aware of this relationship and that what they sell or put in patient's or consumer's mouth can significantly impact their overall well-being. Therefore, the fight against fake products has to be fought not only on a political level but, up and foremost, in every single dental practice. **DT**

Yours sincerely,

Daniel Zimmermann
Group Editor
Dental Tribune International



Clinical controversies in implant dentistry

Lisa Townshend
DT UK

More than 3,000 dentists, dental clinicians and implant specialists from around the world met in Glasgow to discuss some of the very latest techniques in implant therapy at the 19th annual scientific congress of the European Association for Osseointegration (EAO).

With a truly international flavour, the four-day congress focused on the science related to dental implants. The range of topics covered was extremely varied and very multi-disciplinary, discussing aesthetics, use of CAD/CAM, quality of life factors, imaging, periodontal therapy, prosthodontics etc. Saturday morning's session was even fo-

cused on 'controversial issues' including implant placement adjacent to and within endodontically infected sites or when and how to connect implants to teeth.

In addition to the main sessions, there was a comprehensive parallel session programme, short oral communication sessions and more than 350 poster presentations covering six topics such as implant therapy outcomes, surgical aspects, tissue augmentation and material research.

The Association itself had much to celebrate as it unveiled its new identity to better reflect the advanced scientific knowledge and cutting edge technology of its members and the profession. The EAO showcased

a bright new logo and distinctive colour scheme, designed to project a more dynamic feel to the association. The conference seemed to be buzzing from the start, with many delegates commenting on the new branding and the high quality of the speakers.

The EAO is now looking forward to its 20th annual conference next year, to be held in Athens, Greece 13-15 October 2011. **DT**

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← **DT** page 2

Could you explain this concept to our readers?

The Faculty introduced the PBL concept to the undergraduate curriculum in 1999. Instead of attending traditional lectures, students participate in regular small-group discussions during which they are presented with a series of real-life clinical situations. Each student actively contributes to the learning process during group discussions. This approach allows us to expose students to all sciences (dental, biomedical, behavioural and social) linked with dental surgery.

We believe that these principles, evident in other components of the BDS programmes, make it easier to acquire and retain knowledge across different disciplines, instil life-long learning habits, as well as foster teamwork skills and train students to deal with complex real-life situations. The PBL-based dental curriculum aims to prepare graduates in such a way that they will be able to serve the community effectively and contribute to the advancement of knowledge.

The Faculty will be having an Open Day in November. Why should visitors come and see what you have to offer?

The Open Day will be held on 21 November 2010 and showcase the activities, services, programmes, and facilities of the Faculty. Aimed at the general public, dental practitioners, para-dental staff and prospective students, it will offer demonstrations, presentations, Q&A sessions, as well as guided tours of the facilities. Staff members and students of the Faculty will share information and answer questions on a wide range of topics, including the undergraduate curriculum and learning, postgraduate programmes and clinical services.

Thank you very much for the interview. **DT**

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Athens hosted World Congress in endodontics

Daniel Zimmermann
DTI

ATHENS, Greece/LEIPZIG, Germany: New findings in evidence-based endodontics were recently discussed at the World Endodontic Congress in Athens in Greece. The event, which took place in early October and was organised by the International Federation of Endodontic Associations (IFEA), also saw new

products launched, including a number of newly improved reciprocating files that are said to be more tolerant to circular fatigue.

Speakers included experts from Europe and the Middle East, as well as North and South America, who lectured on current issues in the field such as effective root-canal debridement and disinfection tech-

niques that improve the success of root-canal treatment. Other presentations explored the use of 3-D imaging and microscopes during endodontic procedures. Dr Gabriela Martin, a clinician from Argentina, and many others presented new evidence for regeneration of the pulp. Until now, pulp revascularisation has been largely considered impossible owing to the presence of bacteria in the root canal.



IFEA is an umbrella organisation comprising 26 national endodontic associations worldwide. According to its statutes, the organisation aims to promote endodontic education on a global scale through congresses and lectures. The organisation's World Congress is held every three years. [DTI](#)

AD

UK dental students face higher fees

Lisa Townshend
DT UK

LONDON, UK: Members of the House of Lords have recommended an increase in university tuition fees in the UK. Reports in the media also suggest that the new coalition government aims to cut university budgets by £82 million (US\$150 million) next year and that the number of student places available is to be halved.

The proposed changes hold far greater implications for dental and medical students, as their courses are significantly longer than the usual three years. Recently, figures of £7,000 (US\$11,050) per year have been mentioned; however, there is also talk of an unrestricted annual fee to be determined by individual universities. Should these changes be effected, then students would potentially leave university with a staggering amount of debt.

As it stands, many students struggle to find a job after graduation owing to the economic climate, resulting in their being burdened by ever-increasing debt on their student loans. Thus, increased loans as a result of increased fees and no certain way off paying such debt off will undoubtedly put off prospective students. A decrease in the number of future dental and medical university students however could result in a sudden shortage of trained professionals in the future and ultimately affect economic growth. Figures suggest that, in the UK between 2000 and 2007, the increase in employed university graduates accounted for six per cent of growth in the private sector.

It is believed that were the proposed changes to be implemented, elite universities, where students compete for places, would end up charging higher fees for the privilege. However, in the case of dental and medical students, it appears to be common opinion that they are guaranteed a job that is well paid and because of this they leave university in a better position to pay back their fees. [DTI](#)

(Edited by Daniel Zimmermann, DTI)



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DTI/Photo Mayer George Vladimirovich

Xerostomia, not such a dry subject

Dry mouth and hyposalivation discussed at EAOM Meeting in London

Lisa Townshend
DT UK

LONDON, UK: The 10th Biannual Meeting, held in London, was a truly collaborative effort. Organised by the European Association of Oral Medicine and the three London dental schools (King's College Lon-

don; Queen Mary, University of London; and University College London's Eastman Dental Institute) and supported by GSK, the conference highlighted the importance of oral medicine in diagnosing and treating conditions such as xerostomia and hyposalivation. The opening plenary session of the main

part of the conference was dedicated to this topic.

After opening remarks by Baroness Gardner of Parkes and Chief Dental Officer for England Dr Barry Cockcroft, it was time to turn over the session to the two Chairs, Prof. Isaac van der Waal (Head of the Department of Oral and Maxillofacial Surgery and Oral Pathology of the VU University Medical Center/ACTA Dental School, Amsterdam) and Prof. Crispian Scully CBE (Director of Special Projects at the UCL Eastman Dental Institute, and Professor of Special Care Dentistry, University College London). After setting the scene for the session, they introduced the first speaker, Prof. Stephen Porter.

Prof. Porter is Director and Professor of Oral Medicine at the UCL Eastman Dental Institute. In his presentation, *Hyposalivation: Prevalence, assessment, differential diagnosis and quality of life impact*, he gave a general overview of the condition of xerostomia in terms of prevalence. He discussed the age factor in the condition, as well as issues such as immunosuppressant disease and drug/radiotherapy treatments. He also looked at the issue from the point of view of the patient, whose quality of life may be affected because of reduced sleep and impaired eating function.

Next to speak was Dr Jackie Brown, specialist in Oral and Maxillofacial Radiology. She is Consultant in Dental and Maxillofacial Radiology at Guy's and St Thomas' NHS Foundation Trust; and is Senior Lecturer at King's College London Dental Institute, of Guy's, King's College and St Thomas' Hospitals, and at the UCL Eastman Dental Institute. In her presentation, *Contemporary imaging in salivary gland disease diagnosis*, she considered the role of imaging in the distinguishing and identifying diseases affecting the salivary glands. She discussed the various imaging equipment available, including ultrasound and CBCT, as well as their advantages and disadvantages.

Then it was the turn of Prof. Gordon Proctor (Professor of Salivary Biology and Head of Salivary Research Unit, Department of Clinical Diagnostic Sciences, King's College London Dental Institute), who discussed *Drug-related hyposalivation: A review of physiology and sites of drug action*. Prof. Proctor highlighted the relationship between drug therapy and salivary flow rates. He discussed the findings from various studies looking at this relationship, including one specific paper by Wolff *et al.*,

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Major salivary gland output differs between users and non-users of specific medication categories (published in *Gerodontology* 25/04, 2008).

Speaking just before the coffee break was Prof. Jennifer Webster-Cyriaque (Associate Professor, Departments of Dental Ecology and Microbiology and Immunology, Schools of Dentistry and Medicine, University of North Carolina at Chapel Hill). In her presentation, *Viral infections of salivary glands resulting in hyposalivation*, she examined various viral infections that can affect saliva production, including HIV, herpes and polyomaviruses (such as BKV). One of the main challenges, according to Prof. Webster-Cyriaque, is determining the manner in which viruses access and infect the salivary cells.

Following the coffee break, during which delegates had the opportunity to network and discuss the morning's presentations, Prof. Roland Jonsson, Vice-chairperson of the Gade Institute at the University of Bergen, gave a presentation on *Immunopathology resulting in hyposalivation*. He focused mainly on Sjogren's syndrome, stating that it is a condition that is not easy to diagnose in its early stages. He stressed that biopsies are very important for the diagnosis and understanding the pathogenesis of the condition. Detailing various studies, Prof. Jonsson hypothesised that a virus might trigger the inflammation.



(DTI/Photo S. Borisov)

Also focusing on Sjogren's syndrome, Dr Elizabeth Price followed Prof. Jonsson's presentation with *Systemic disease associations of hyposalivation*. Dr Price has a specialist interest in Sjogren's syndrome and runs a specialist Sjogren's clinic at the Great Western Hospital in Swindon. She discussed the condition in more detail, and highlighted that along with dry eyes and mouth, tiredness and fatigue are common symptoms. She also discussed the condition's association with thyroid disease and osteoarthritis.

Next, Prof. Sue Lightman (Medical Research Council Senior Clinical Fellow, Senior

Lecturer at the Institute of Ophthalmology and Consultant Ophthalmologist at Moorfields Eye Hospital in London), considered *Ocular associations of hyposalivation*. She detailed the manner in which dry eyes can rapidly arise and the way in which conditions such as Sjogren's syndrome originate.

The final speaker of the session was Dr Philip Fox, Visiting Scientist at the Department of Oral Medicine, Carolinas Medical Center in Charlotte,

USA, and an independent biomedical consultant primarily in the area of clinical trial design and analysis. This was the practical part of the session, as it focused on the treatment of patients suffering from xerostomia. According to Dr Fox, clinicians must remember that their primary aim is to treat patients. To this end, clinicians can encourage patients to chew and stimulate the masticatory function.



Dr Fox also considered different ways of managing xerostomia, including different formulations, such as Biotene, produced as gels, gums and mouth rinses. He concluded by reminding the audience that their patients and what makes the mouth feel moist and comfortable for them

are the most important issues for clinicians.

This session offered a very detailed examination of some of the causes of xerostomia and hyposalivation and allowed delegates to gain a better understanding of the manner in which these conditions affect salivary flow. It also offered delegates an update regarding the rationale for many of the products clinicians could recommend to patients for relief. DT

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“Foreign markets are very important to us”

An interview with Olaf Sauerbier, CEO of VOCO GmbH, Cuxhaven, Germany



Aerial view of the VOCO headquarters in Cuxhaven in Germany.

VOCO, based in Cuxhaven on the northern coast of Germany, is an established international provider of high-quality dental materials. In addition to products for restorative dentistry, it offers a wide range of materials and preparations for the fields of prosthetics and prophylaxis. *Dental Tribune* Group Editor Daniel Zimmermann spoke with Olaf Sauerbier, CEO and chief of Marketing and Sales, about new products and aesthetic trends in restorative dentistry.

Daniel Zimmermann: *The Association of Dental Dealers in Europe (ADDE) has recently predicted growth rates above three per cent for most European dental markets. Do you see any signs of recovery in your company?*

Olaf Sauerbier: To be honest with you, the recession never really caught us. We usually tend to perform slightly better than the overall market and expect to be no different for this business year. The year 2010 started off better than last year ended, and we saw some significant growth

in most of our business segments in the first and second quarters.

Although we have invested significantly in our German businesses by extending our sales team by 15 new employees, foreign markets are very important to us. At the moment, we are expanding our existing businesses worldwide, especially in North America. It will be a while before we are able to take full advantage of the enormous potential this market has to offer.

Did the products you introduced two years ago at IDS Cologne meet your expectations?

The most important product we introduced at IDS in terms of sales was definitely the non-run, non-drip NDT syringe. This new delivery

demand for aesthetic restorations of exposed necks of teeth increasing owing to demographic changes and people ageing.

almost ideal properties for a filling material and exhibits the same physical properties as natural tooth substance. All our

the end, it is the dentists who decide which product they prefer.

Do aesthetics play a more prominent role in the development of a composite like GrandioSO?

The primary goal is function. There is a place for aesthetics too, but it must not compromise functionality or the stability of the filling. There are different points of view in dentistry regarding this matter right now but for us the primary goal cannot be highly opaque teeth that might be currently *en vogue* amongst Hollywood stars. In the US, for example, we found that dentists were using the white opaque shade of our

flowable composite Grandio Flow for anterior restorations, as this is the typical shade of highly bleached teeth in the US. Normally, we recommend it only be used to whiten dark spots or in cases in which dentists absolutely need an opaque layer.

This is not the direction we wish to take. Teeth have a natural translucency and we want to keep it that way. I believe that with our current portfolio we offer dentists viable solutions to achieving long-lasting and natural aesthetic restorations.

Some European companies develop their products especially for the North American market. Do you do the same?

We sell exactly the same products in North America as we sell in Europe. Usually, most products are launched there six months after they have been placed on the European markets. The only difference is the type of shade. In Germany, for example, the majority of dentists use Shade A3.5, which does not play any significant role in markets like the US, where Shade A2 is more common.



Olaf Sauerbier (left) in talks with DT Group Editor Daniel Zimmermann. (DTI/Photo Antje Kahnt, DTI)

Those who have highly aesthetic requirements will find it hard to pass this product by.

competitors are moving towards this ideal but I see us far ahead. We have been working with nanotechnology since the early 2000s and based on the results of this launched our first nano-

“There are plenty of new and innovative filling materials on the market right now.”

form helped us to increase sales of most of our highly flowable materials like Grandio Flow, Grandio Seal and Ionoseal. Our gingiva-shaded restoration system Amaris Gingiva has also shown good performance. We have to admit that the market for such a product is still small but, on the other hand, we see the

Another bestseller has been the one-component, light-curing, nano-reinforced, self-etch bond Futurabond M that we launched in SingleDose and in a three-bottle value pack. Not to forget the Rebuilda Post System, an award-winning complete system for placing 15 posts in post-endodontic treatment, that sold successfully in Germany and abroad within a short amount of time.

Some segments in dentistry, dental implants in particular, have shown decreasing sales. What is the situation in the market segments you are involved in?

The recession might have had devastating effects on companies offering upscale materials and equipment but the situation in restorative and preventative dentistry looks far more promising. In the segments in which we are actively involved, such as prosthetics, prophylaxis or dental cements, we have been able to achieve growth rates between 10 and 20 per cent.

Filling materials did not perform very well owing to increased market competition. There are plenty of new and innovative filling materials on the market right now and we have to invest a great deal in order to stay ahead with new developments and products.

What current trends have you observed in the industry?

All manufacturers are striving for a product that offers



hybrid composite Grandio in 2005. This product is still in high demand in Germany and many other markets.

But we did not stop there. With GrandioSO, we are now able to present another nano-hybrid composite to the dental community that has outperformed our original expectations. In terms of its physical properties, it is probably the most tooth-like material on the market.

“Teeth have a natural translucency and we want to keep it that way.”

When and where will it be available?

It is already available in Germany and other selected European markets. Like its predecessor, GrandioSO is universally applicable but a little more translucent, so it can be used for restorations in the maxillary anterior region.

We will still offer Grandio to our customers worldwide. In

Will GrandioSO be the main focus of your presentation at IDS next year and are you planning to introduce more products there?

GrandioSO will indeed be the main focus of our IDS presentation, but there are other products that we plan to launch this month and at IDS 2011.

Thank you very much for the interview. □

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A word from Jérôme Estignard, FDI Interim Executive Director

Mr Jérôme Estignard has been appointed Interim Executive Director by the FDI Council during the 2010 FDI Annual World Dental Congress held in Salvador da Bahia. He will manage the FDI head office during the search for a permanent Executive Director.

Mr Estignard has been with the FDI since November 2009 as Finance & Operations Director. His prior experience includes five years as Senior Auditor at PriceWaterhouseCoopers in France and twelve years at SITA in France, Germany and Switzerland, including Head of Financial Reporting at SITA, Switzerland, from 2004 to 2008.

Mr Estignard holds an MBA from International University in Geneva (Switzerland), a degree in Accounting and Finance from the ICS Business School in Paris (France) and a degree in Busi-



Mr Jérôme Estignard

ness Economics from the University de Sceaux (France).

"Last month FDI hosted another Annual World Dental Congress in Salvador da Bahia, bringing together close to 10,000 participants worldwide. Striving towards better oral health never stops and we are now focusing on building a solid foundation for the work ahead of us.

FDI is a membership organisation and as such, we are seeking to enhance services for our members, taking into account advices and opinions from all members, National Dental Associations and stakeholders.

I am privileged with a trust that the FDI Elected have placed in me and am very enthusiastic about our future. With the support of the FDI Council, numerous volunteers, head-office staff and our partners, FDI is continuing its journey towards the vision of optimal oral health for all.

The FDI head office stays at your disposal and service. We welcome your questions and feedback, especially on the FDI's new projects, launched at the recent FDI Congress in Salvador, such as Data Mirror and VOX. Both tools are developed with one goal—to better serve our members." FDI

2010 FDI/Unilever Poster Award Competition

The six winners of the 2010 FDI/Unilever Poster Award Competition were announced during the VIP reception at the 2010 Annual World Dental Congress on 2 September. They are:

- Comparison of resin based sealers 2seal and AHPlus Cytotoxicity on cell lines MG-63 and Saos-2. *Maryam Ehsani*, Ebrahim Zabihi (Iran)*
- Prostaglandin-E2 induces receptor activator of nuclear factor kappa B ligand expression in human periodontal ligament cells via EP2 receptor. *Nawapat Sakornwimon*, Auspreeya Rujirachotiwat, Prasit Pavasant (Thailand)*
- Prevalence / distribution of Porphyromonas gingivalis fimbriae subtypes in patients with severe periodontitis. *Patrick Frank*, Sigrun Eick, Chong-Kwan Kim, Peter Eickholz, Ti-Sun Kim (Germany)*
- Activity of plant extracts from the Brazilian Pantanal against Streptococcus mitis. *Fernanda Lourenção Brighenti, Marcos José Salvador, Alberto Carlos Botazzo Delbem, Ádina Cléia Botazzo Delbem, Cristiane Yumi Koga-Ito (Brazil)*

- Tooth loss and oral health self-perception of adults covered by health strategy for the family in Salvador, Bahia, Brazil. *Mércia Sacramento Dos Santos, Gimena Melo Santos, Fabiana Raynal Floriano, Maria Isabel Pereira Vianna, Maria da Conceição Nascimento Costa (Brazil)*

- Sickle cell disease, oral health status and socioeconomic conditions of children in the state of Bahia—a cohort study. *Felipe Fagundes Soares, Thaís Régis Aranha Rossi, Maria Isabel Pereira Vianna, Maria Cristina Teixeira Cangussu (Brazil)*

More than 120 submissions were received by the FDI for the competition this year. The best posters were selected as finalists prior to the congress and they were then invited to present their posters and research to a panel of judges, followed by a question and answer session at the congress. All winners received a free registration to a future FDI Annual World Dental Congress and 1,500 € towards his or her participation in the congress.

Information on the 2011 contest will be posted on the FDI website once it becomes available. FDI

National Dental Associations rally to help rebuild Haiti's oral health infrastructure

When Chantal Noël, National Liaison Officer of the Association Dentaire Haïtienne, spoke at the General Assembly and at the NLO Forum in Salvador, she expressed enthusiasm to work with VOX, the FDI new communication platform, in the quest to rebuild the oral health capabilities of her country. Eight months after an earthquake devastated Haiti, many of the dental offices are still in ruins.



Chantal Noël

Chantal Noël plans to enlist the support of NDAs worldwide in the rebuilding and re-equipping efforts. She will use VOX to communicate with all FDI members about the equipment that is needed by Haitian dentists. Chantal gave insight into the benefit that such a tool can bring to a National Association which has been affected by a natural disaster.

Already engaged, the American Dental Association is raising

funds for Haiti through a campaign called "Adopt-a-Practice; Rebuilding Dental Offices in Haiti". The ADA will use VOX to promote this campaign and is urging other National Dental Associations to participate. Without help, most Haitian dentists will not be able to rebuild their practices. The campaign aims to raise \$350,000 by the end of 2010. For more information or to donate go to: www.ada.org/4412.aspx. FDI

FDI successfully launches new communication platform—VOX

VOX, the voice connecting the oral health world, was successfully launched in Salvador da Bahia, Brazil, during the FDI AWDC 2010.

The platform was presented to members in both the FDI General Assembly and National Liaison Officers forum, following online access being made available to members.

This new FDI web-based membership communication platform comes in response to requests from FDI members, and it is tailored to meet their diverse needs.

VOX aims to unify FDI members, governance and staff online contact through an intuitive application that provides information about FDI Members, facilitates FDI member-to-member relation-

ships, enhances visibility of oral health leaders and encourages knowledge sharing.

After the launch, Members have been actively exploring VOX and communicating their feedback:

- "Congratulations on the creation of VOX...I have added VOX to my Favourites list" *Robert Boyd-Boland NLO Australian Dental Association*
- "Thank you!!!! I will begin using VOX regularly...Outstanding platform!" *Kathleen Roth, NLO American Dental Association*



The launch of VOX marks the completion of phase I, development and testing, and now FDI members are invited to use the platform themselves to make it a success. Meanwhile, ongoing development of the tool will continue to provide FDI and its members more advantageous functions, such as personalised web pages for each member and online International Directory. FDI