

ORTHO TRIBUNE

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NESO & PCSO EDITION 2016 — Vol. 11, No. 3

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Calling East Coast and West Coast orthodontists



Times Square in New York. Photo/James Farmer, www.freeimages.com



The skyline of Seattle. Photo/Dyango Chavez Cutino, www.freeimages.com

NESO takes over Times Square in New York from Oct. 7 to 9

By Sierra Rendon, Managing Editor

The Northeastern Society of Orthodontists will host its annual meeting, “NESO NYC 2016,” from Oct. 7–9 at the Times Square Marriott Marquis.

NESO states that this is a premier professional development and networking

event for orthodontists in the northeastern United States and Canada.

For three days, orthodontists can take part in lectures and workshops and check out the exhibit hall, featuring industry-leading partners and sponsors.

Here is a sampling of the sessions and speakers you will find available this year:

► See NESO, page 3

PCSO annual session heads to Seattle Oct. 13 to 16

By Sierra Rendon, Managing Editor

The Pacific Coast Society of Orthodontists will host its 80th annual session from Oct. 13–16 in Seattle at the Washington State Convention Center.

The PCSO states that its goal for this year's event is to provide a stellar list of speakers, an up-to-date center conducive to learning and networking, a sold-out exhibit hall full of the latest technology and products, and social events that will offer attendees and guests plenty of opportunity to relax, enjoy and experience the best Seattle has to offer.

Each day, there are sessions aimed at doctors, clinical staff and administrative staff. Do not hesitate to bring your whole team, as everyone is bound to find a session that is appropriate!

Here is just a sampling of the sessions you can take part in:

- “Surgically Facilitated Orthodontic Therapy (SFOT): The Direction is Clear” with Dr. Rick Roblee
- “The Secret to Success in Today's Orthodontic Practice” with Dr. Aaron Molen
- “Aligners = Braces: Are We There Yet?” with Dr. Sean Holliday

• “CBCT Do's and Don'ts” with Sarah Pompa

• “Moving Beyond Sleep Dentistry: Interdisciplinary Resolution Strategies for Our Airway Patients” with Dr. Jeff Rouse

• “How to Use TADs Efficiently to Treat Open Bite: Cases and Clinical Tips” with Dr. Tae Woo Kim

• “Treatment Planning to Optimize Outcomes for the Interdisciplinary Patient: An Orthodontic Perspective” with Dr. Vince Kokich Jr.

Networking and exhibitors

Be sure to check out all of the social events that will help you connect with your colleagues, including the Orthodontic Educators Breakfast, the New & Younger Member Committee Breakfast, the PCSO Welcome Party and the PCSO Appreciation Dinner.

To get involved in future events, visit the 2017 Spring Training Committee Meeting or the 2016/2017 Planning Committee Meeting and Luncheon.

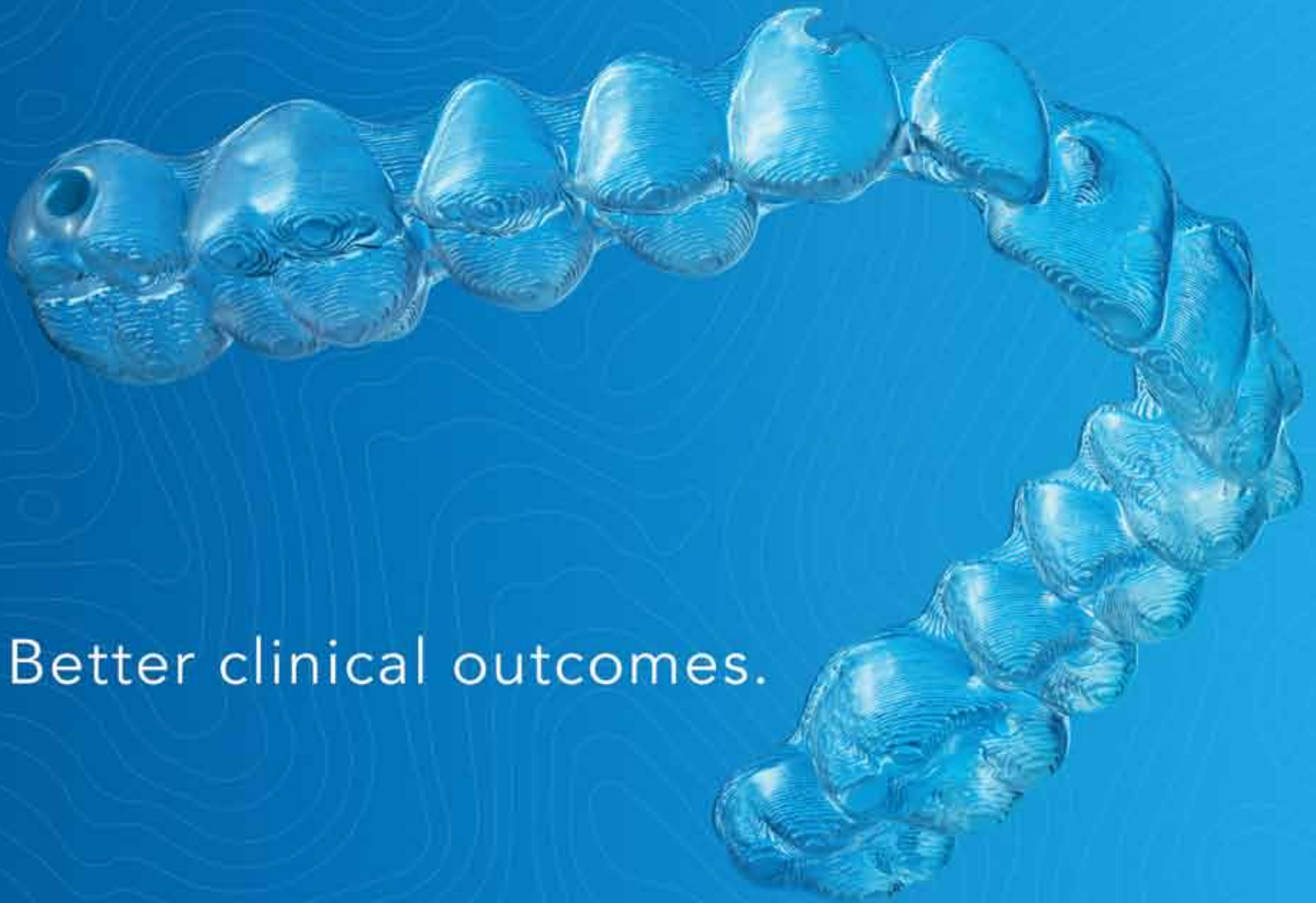
In addition to all of the educational sessions, be sure to save time to visit the exhibit hall. More than 100 vendors are on hand with specials you can find only at the PCSO meeting.

For more information, please visit www.pcsortho.org.

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For dentists, the era of advanced degrees: Part I

By Dennis J. Tartakow,
DMD, MEd, EdD, PhD, Editor in Chief

Today, it is more common than ever before for dentists to go back to school for advanced degrees. Why? Until the 1990s, most doctors were content to have only one advanced degree and never step foot in a school again. So why are so many individuals going back to school for advanced degrees, and is advanced education really worth the effort?

Many doctors viewed the idea of continued learning more as a need, rather than a desire, to become more educated as clinicians, educators and/or leaders. This obviously has become a reality. Then with the coming of state-required mandatory C.E. credits for licensure, Internet courses began springing up, and schools and private institutions viewed this as a new way of increasing revenue.

In 2002, 22 dental schools offered dual-degree programs. Dental schools in the United States and Canada were not encouraging potential dental scientists to follow career paths that dental education desperately needed; some dental students view dentistry only as



a technical discipline, while others who are interested in teaching and research careers might pursue research degrees (PhD).

Today in 2016, almost all postgraduate orthodontic programs range from two to four years in duration; some offer certificates in orthodontics, and others confer MS and/or PhD degrees. With the progressive emphasis on evidence-based dentistry and the ongoing shortage of dental faculty, dental schools became instrumental in training future dental faculty.

Some dental schools offer clinical and

graduate training concomitantly, but there are far more institutions where research training is not a priority or an easily accessible option. A concept of "dental scientist" has been described for individuals who have completed fundamental dentistry as well as rigorous formal research education leading to the PhD degree.

Adult education popularity has definitely become a reality. The need for continuing education with regard to adults in general, but especially working professional adults, is going to become even more pervasive in the future; it is more than just an intellectual exercise.

With the demand for education for adults, it is important for administrators to know how to plan for, market and accommodate this student population.

A key challenge for program planners will be to match organizational goals, delivery methods and institutional policies with the actual educational needs of adult students.

Thus, *alea iacta est*, the die has been cast for dentists to earn multiple graduate degrees but how, when and why?

Editor's Note: Look for Part II in the next issue of Ortho Tribune!

- NESO, Page 1

Friday

- "The Contemporary Blend of Esthetic Smile Design and Case Presentation"

Corrections

Ortho Tribune strives to maintain the utmost accuracy in its news and clinical reports. If you find a factual error or content that requires clarification, please report the details to Managing Editor Sierra Rendon at s.rendon@dental-tribune.com.

Tell us what you think!

Do you have general comments or criticism you would like to share? Is there a particular topic you would like to see articles about in Ortho Tribune? Let us know by emailing feedback@dental-tribune.com. We look forward to hearing from you!

with Dr. David Sarver

- "A New Era in Class III Correction" with Dr. Luis Carriere (sponsored by Henry Schein Ortho)

- "The Cost of Imaging vs. the Benefits Derived: X-rays and the Images They Produce" with Dr. Rolf Behrents

- *Symposium:* "Women in Orthodontics" with Dr. Ann Gorczyca and Dr. Donna Galante (hosted by American Orthodontics)

- *Hands-on workshop:* "Camera, Lights, Action! Patient Photography Made Easy" with Rita Bauer

Saturday

- "Efficient and Effective Uses of Dento-facial Orthopedics in Everyday Practice" with Dr. Lorenzo Franchi and Dr. Jim McNamara

- "The Development, Etiology and Treatment of Skeletal Open Bite Cases" with Dr. Peter Buschang

- "Comprehensive Treatment with Clear Aligner" with Dr. Ken Fischer (sponsored by ClearCorrect)

- *Staff session hands-on workshop:* "Hands-On Digital Impression: Learning How to Scan (Scanners)" with Rita Johnston (sponsored by 3M Oral Care)

Sunday

- *Doctor panel discussion:* "Treating Open Bites Panel" with Dr. Lee Graber and panelists Drs. Lorenzo Franchi, Peter Buschang, Jay Bowman and Lysle Johnston

In between sessions, be sure to check out the Office of the Future (OOTF), a constructed space located in the exhibit hall. The OOTF replicates an orthodontic office and showcases new and innovative goods and services.

While you're in the exhibit hall, don't forget that Happy Savings Hour takes place from 3:30 to 5 p.m. Friday and Saturday. Each company in the exhibit hall will place an item on sale during this 90-minute time period only.

For more information about the NESO NYC 2016, please visit www.neso.org.

AAO expands its Donated Orthodontic Services program to include more children

Pro bono care to be offered nationwide to qualified patients

The American Association of Orthodontists (AAO) has announced it is expanding its Donated Orthodontic Services (DOS) program nationwide to provide opportunities for low-income children across the country to receive pro bono

orthodontic treatment. The program previously operated in nine states.

"Every child should have the opportunity to have a healthy, beautiful smile that will have a positive impact throughout their lives," said Morris N.

Poole, DDS, past president of the AAO. "Thanks to the generosity of AAO member orthodontists who donate their time and talents to the program, more young patients will have the opportunity to achieve a functional bite, an attractive smile and good oral health."

The DOS program is designed to provide orthodontic treatment to economically disadvantaged children who lack insurance coverage or who do not qualify for other dental health assistance where they live.

DOS is administered by the Dental Life Line Network (DLN), an organization that helps match patients who need care with doctors who can provide it. Applications are available at www.mylifemysmile.org/#dos. Qualifying criteria include a low-income threshold and an examination by a general dentist to assess overall oral health.

Applicants must be patients of record of a general or pediatric dentist or a dental clinic. Poole notes that many accepted patients come into the program as a result of a referral from their family dentist.

"We are working hard to make the program as inclusive as possible," Poole said. "A \$200 program administration fee is required at the time of application. While it's a relatively low fee, we appreciate that it may be a stretch for some families. To that end, provisions are in place to provide assistance, which is reviewed on a case-by-case basis."

DOS typically advises that patients who have special needs seek orthodontic care through medical insurance or state-funded programs such as Medicaid.

As the DOS program builds its network of volunteer orthodontists nationwide, it expects to offer free treatment to 250 young patients in the coming year. Since 2009, nearly 500 patients have been treated in Illinois, Indiana, Kansas, New Jersey, North Carolina, Rhode Island, Tennessee, Michigan and Virginia.

Mindful of children who do not live near a volunteer orthodontist, the DLN will attempt to identify a nearby orthodontist who is willing to offer them pro bono treatment.

In states with two or more pro bono programs, Poole recommends that families apply for only one program at a time, leaving the option open to apply for alternative programs in the future if an application is declined.

Dental industry partners supporting Donated Orthodontic Services include DENTSPLY GAC International and Align Technologies.

(Source: American Association of Orthodontists)

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Skip the roughening and the sandblasting with Assure Plus

By Reliance Staff

Four years ago, Reliance released a revolutionary product, Assure® Plus. On top of bonding to every artificial surface found in the mouth, one of the most attractive features of Plus, according to the company, is the ability to eliminate the intraoral use of hydrofluoric acid to etch ceramic crowns.

To the naked eye, all “ceramic” substrates look similar intraorally. The unfortunate fact is a “ceramic” surface can potentially be fabricated from lithium disilicate, porcelain, layered zirconia, monolithic zirconia and so on. In previous years, bond strength values were very poor if porcelain conditioner was applied to a zirconia surface; thus the clinician had to be confident the substrate was porcelain.

According to Reliance, there is news on the ever-developing situation of bonding

to ceramic crowns. Extensive tests have shown that roughening or even sandblasting are no longer needed when using Reliance Porcelain Conditioner and Assure Plus. Furthermore, the task of differentiating zirconia from porcelain is unnecessary.

When confronted with bonding to a crown (porcelain or zirconia), the steps are as follows:

1. Prophyl, rinse and dry
2. Apply one coat of Reliance Porcelain Conditioner, wait 60 seconds and air dry
3. Apply one coat of Assure Plus, air dry and light cure
4. Apply bracket with paste and cure

Far too often we take for granted the benefit of a thorough prophylaxis. If adapting the above bonding modality, a thorough prophyl is absolutely imperative to an acceptable bond strength. The air drying of the active ingredient in Reliance Porcelain Conditioner now allows the clinician to skip the substrate identification. If the substrate is porcelain, the silane will bond to the glass filler. If



When using Reliance Porcelain Conditioner and Assure Plus, roughening or even sandblasting might no longer be needed, according to Reliance.

Photo/Provided by Reliance

the surface is zirconia, the drying and 60-second wait time allow the silane to go unutilized without interfering with Assure Plus.

Artificial but not ceramic? The remaining substrates (gold, amalgam, stainless steel, composite, acrylic) are handled with the following protocol:

1. Prophyl, rinse and dry
2. Sandblast, rinse and dry
3. Apply one coat of Assure Plus, air dry and light cure

4. Apply bracket with paste and light cure

Much like Assure regular, Assure Plus built its foundation on being the only primer to bond to wet or dry, normal or atypical surfaces. According to the company, atypical enamel (hypocalcified, fluorosed, aprismatic, etc.) presents a serious challenge if the clinician is not

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Introducing TitanMoly Titanium Molybdenum arch wires

By G&H Orthodontics Staff

G&H Orthodontics, which says it is recognized as one of the world's best manufacturers of premium archwires, introduces TitanMoly™ Titanium Molybdenum arch wires.

According to the company, TitanMoly's greatest advantage for orthodontists is



the easier and faster archwire sequencing, which can reduce treatment times and patient discomfort.

"Orthodontists recognize our smoother wire," Brandon Bernacchi, vice president of manufacturing, said. "The state-of-the-art diamond drawing process we use when combined with our proprietary mechanical polishing technology ensures a smoother surface for improved sliding mechanics and a more attractive

finish. It's important to note that independent laboratory tests have validated this comparison for G&H."

Orthodontist Kristine S. West, DDS, MS, said that, "TitanMoly is the most effective titanium molybdenum archwire I have found. It is easily adaptable without breakage and enhances my treatment plans."

According to the company, TitanMoly is the perfect bendable, nickel-free wire. It has enough recovery force and bendability without breaking. It is the preferred wire over stainless steel for a wide range of cases. Using TitanMoly means clinicians will have nearly twice the working range of stainless-steel wires, with 45 percent less deflection recovery force than stainless steel.

TitanMoly is a great wire for nickel sensitive patients because it contains no nickel, the company states.

To learn more about the features and benefits of TitanMoly, please visit GHOrthodontics.com/TitanMoly.

"The clinical advantages of titanium molybdenum archwires have been well documented," said Howard A. Fine, DMD. "TitanMoly wires offer all the advantages plus reduced friction."

About G&H Orthodontics

G&H Orthodontics is a leading provider of clinical solutions for the orthodontic community, serving customers for more than 41 years in more than 90 countries. G&H manufactures a full line made in the United States, including brackets, bands, tubes, wires, springs, elastomers and other orthodontic supplies. G&H Orthodontics is a privately held company headquartered in Franklin, Ind.

To learn more about G&H Orthodontics breadth of products, visit GHOrthodontics.com.

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using Assure or Assure Plus. On top of all the artificial surface bonding capabilities above, the variable reducing properties on enamel are the reason offices with the lowest bond failure rates utilize Assure Plus as a full-time, everyday primer, according to Reliance.

There are only two cases where any etching step is necessary: amalgam or composite restorations. Clinicians need to eliminate the idea that phosphoric acid will simply "clean" the work surface. The reasons are two-fold: chairside efficiency and primer interference.

If there is no enamel present, etching is a waste of time and money. Furthermore, etching can be detrimental to the bonding process when bonding to zirconia. If phosphoric acid is applied to a zirconia crown to "clean the surface," the phosphate ions will attach to the substrate and subsequently repel the primers.

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