

IMPLANT TRIBUNE

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Vancouver is the site of the 2010 BIODENIX Implantology Forum. (Photo/stock.xchng)

BIODENIX forum to focus on teamwork

Event takes place in Vancouver from July 23–24

By Sierra Rendon, Managing Editor

The 2010 BIODENIX Implantology Forum, “Dental Implants: From Osseointegration to Aesthetic Excellence,” will take place July 23 and 24 at the Westin Bayshore Hotel in Vancouver, Canada.

The event aims to bring together leading experts from each of the respective fields in implant dentistry to create a social and stimulating learning environment for all, said event organizers.

Guidance on creating public awareness for clinicians who are passionate about implant dentistry will also be offered.

Dr. Art Hister from Global TV (“Health Headlines,” “The Health News” and “Medical Minutes”) will be the standing forum moderator. Hister will use his knowledge and medical insight to mediate with forum presenters.

Speakers include Dr. Bill Dorfman on “Aesthetics in Implant Dentistry,” Dr. Ziv Mazor on “Latest Advances in Piezo-Assisted Bone Grafting and Sinus Lift Procedures,” Dr. Bill Blachford on “Flourishing Your Dental Implant Practice,” Dr.

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Nobel Biocare hosts symposium in N.Y.

By Fred Michmershuizen, Online Editor

Nobel Biocare welcomed more than 1,500 periodontists, general practitioners, prosthodontists, lab technicians and other dental professionals to the Waldorf Astoria hotel in New York City for its global symposium, a three-day event offering valuable education, technology and networking. The meeting was held June 24–25.

The symposium was opened by Domenico Scala, CEO of Nobel Biocare, and by Jonathan Ferencz, chairman of the scientific committee, who announced the five key educational themes for the following three days: immediate function; soft-tissue health and long-term predictability; new technologies for prosthetic success; treatment for edentulous patients; and advanced treatment planning.

The format of the meeting consisted of main programs in the grand ballroom, along with parallel sessions, master classes and hands-on training. Between sessions, attendees were able to walk through the exhibit area and view products and demonstrations and to meet with representatives from Nobel Biocare who specialize in particular products.

Attendees at the meeting also had the opportunity to visit the training and manufacturing plant



Domenico Scala, CEO of Nobel Biocare, welcomes meeting attendees to New York City. (Photos/Fred Michmershuizen, Online Editor)

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BioHorizons files for \$100M IPO

Dental implant maker BioHorizons filed a registration statement in late June for an initial public offering worth up to \$100 million.

The Birmingham, Ala., company makes products such as tooth prosthetics, implants, abutments and bone and tissue grafts. It also sells medical instruments.

The company uses lasers to cut tiny grooves into its Laser-Lok implants, and the company asserts those grooves attract connective tissue and reduce bone loss around the implant.

BioHorizons did not disclose how many shares it might sell or when it might go public. Its proposed ticker symbol is “BHZN.”

The company’s main business was founded in November 1995, and BioHorizons was incorporated in May 2006. Private equity firm HealthpointCapital LLC bought its primary business in August 2006.

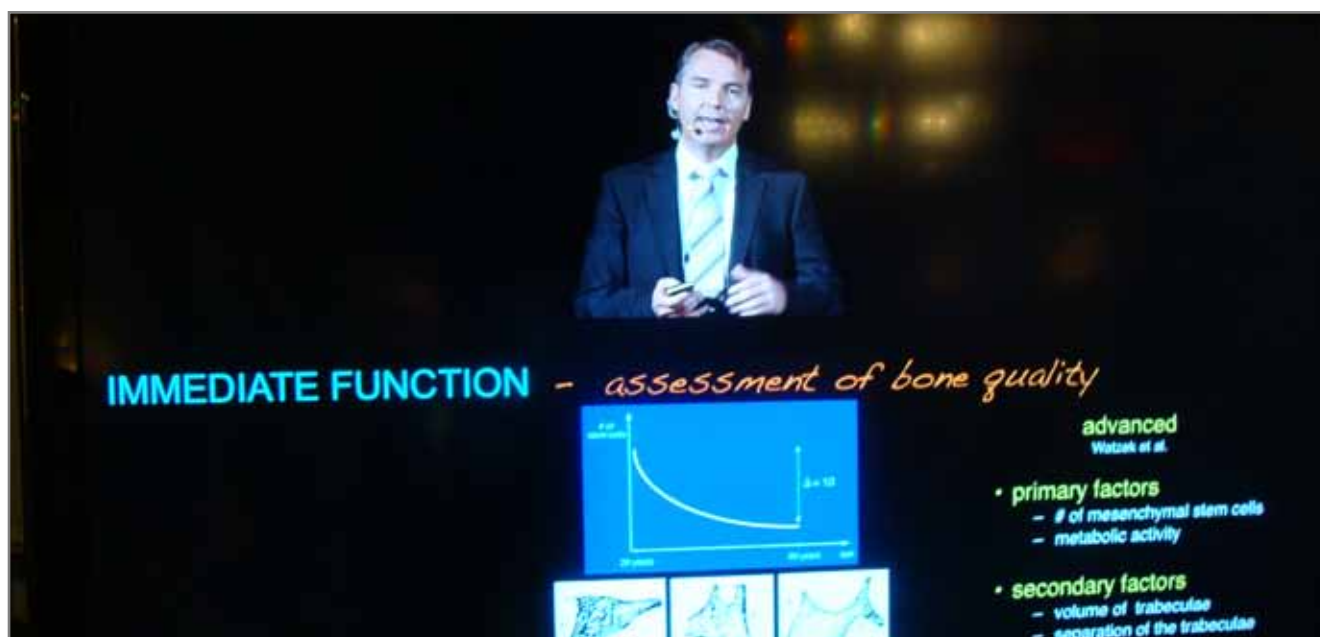
BioHorizons reported an operating loss of \$6 million in 2009 on \$69 million in sales. It said its revenue grew 15 percent in the first quarter of 2010 to \$19 million.

The company currently markets

its products through a direct sales force of more than 70 representatives in North America and through offices in Australia, Chile, Germany, Spain and the United Kingdom. Through a network of third-party distributors, BioHorizons sells its products in more than 80 countries.

Last year, the company was the sixth-largest dental implant company based on sales in North America, according to market researcher iData Research.

The company’s competitors include BIOMET 3i, Zimmer Dental, DENTSPLY and Astra Tech. ■



A scientific presentation at Nobel Biocare's Global Symposium in New York City.

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in Mahwah, N.J., where assembly lines are capable of producing crowns 24 hours a day. (The company also operates two other such facilities in Stockholm and Tokyo.)

Attendees at the site visit were able to learn from the assembled global brain trust behind NobelPro-era, witness the assembly process — and even use the software to design an actual crown and send it into production.

Participants used optical scanners featuring conoscopic holography technology to input an image of a tooth impression. Then, using software installed on laptop computers, participants learned how to create a file for a crown.

The software was so easy to learn that attendees were able to get up and running in minutes. Files were then sent to the production facility in the adjoining room. It was a rare opportunity for meeting attendees to observe firsthand the manufacturing process itself.

The next Nobel Biocare Global Symposium will be held in August 2011 in Tokyo. IT



Between sessions, meeting attendees were able to take the opportunity to learn more about products.

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Bob Horowitz on "Aveolar Augmentation — Clinical and Histological Evaluation of Socket, Sinus and Ridge Enhancement," Dr. David Bridger on "Bone Grafting and Membrane Placement," Michael Racich on "Considerations for Implant Success" and Dr. Robert Miller on

"Past, Present and Future of Dental Implantology."

Past attendees have had hearty praise for the event:

- "Great presentations delivered in a format that encouraged discussion," said Dr. Lyle Pidzarko.

- "Good variety of topics related to implants and nice short lectures," said Dr. Grant Woo.

- "A wide diversity of subjects were presented that will enhance my dental implant practice. Nice social function," said Dr. Bob Kiniburgh.

For more information on the BIODENIX Implantology Forum, see www.biodenix.com.

Next year's event will take place Sept. 22–24 in Venice, Italy. IT

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 more articles about? Let us know by e-mailing us at feedback@dental-tribune.com. If you would like to make any change to your subscription (name, address or to opt out) please send us an e-mail at database@dental-tribune.com and be sure to include which publication you are referring to. Also, please note that subscription changes can take up to 6 weeks to process.

IT Corrections

Implant 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.

IMPLANT TRIBUNE

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Soft-tissue collar around implants: A periodontal compromise or not?

By Dr. Nilo Hernandez

How many times have you seen a case during an examination where the soft-tissue collar was less than you would like to have? How many times has this happened on one of your own cases?

Well, it has happened to all of us at one time or another. The perfect analogy to use and consider, especially when speaking to patients, is the outer surface of the hand versus



Fig. 1: Initial treatment



Fig. 2: Initial treatment



Fig. 3: Pre-op

the palm of the hand. Both are skin, but which one is tougher? Obviously, the palm is.

That same analogy can and should be used when speaking to patients in order for them to understand the

greater need of an additional treatment modality for the creation or recreation of the quality and type of soft-tissue drape.

For years this was a very complex and difficult procedure, usually only attempted by the very best of periodontists and with mixed results. Later, with the inclusion of certain tissue-derived products, these alternatives have become simpler and more available to the masses. These materials have proven to be very effective and they have been redeveloped over time as the manufacturers and processors continue in their attempts at the very best and most reliable materials.

The most common of these materials are Alloderm by BioHorizons, and Dermis by Zimmer and Tutogen. These materials have been around for quite some time and provide good results. Each has some drawbacks, though, such as tearing and tissue odor during the healing phases.

The “new kid on the block” is Grand Dermis by CK Dental Industries. This human allograft product seems to have handled the previous drawbacks and has also shown no foul odor, which patients enjoy over the previous product.

The techniques and product improvements are designed for the dental surgeon to have better predictability and ease of use. The practitioner can use this product in simple or complex cases.

For instance, use it as a membrane in socket-grafting procedures. It will protect the graft better than traditional membranes; it is able to be sutured and will not tear. After healing, the tissue quality and quantity will also be improved. The product offers all of these benefits while being less expensive than most membranes of similar size.

Case No. 1

This case was a 15-year-old implant and crown restoration done during the early years of implant restoration. It was a very long implant, firmly embedded and showing no signs of pathology.

The patient's concern was mostly esthetics and the “black line” visible near the neck.

Upon closer inspection, I also noticed a thin mucosa at the cervical

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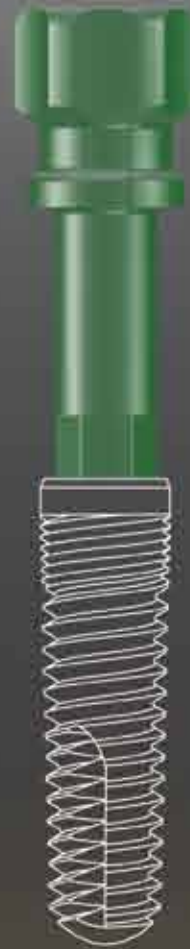
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Cost Savings	46%	51%	53%	58%	44%	22%	33%	36%	7%	49%	N/A

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⁴Sig Hansson. The Implant Neck...Smooth or Provided with Retention Elements. A Biomechanical Approach. Clin Oral Implants Res. 1990;10:394-405

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Fig. 4: Two weeks post-op. Sutures removed.



Fig. 5: Six weeks post-op.



Fig. 6: Twelve weeks post-op.



Fig. 7: Final case restored.

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with a slight depression.

Corrections included:

- 1.) New crown with a slightly longer margin.
- 2.) Cervical tissue bio-type improvement and plumping with Grand Dermis.

Case No. 2

This case was of a young woman with failing lower right dentition from fear and poor dental choices. The patient accepted treatment under sedation. Extraction of root tips took place with bone grafts and Grand Dermis overlay was done at the same time.

Tissue tacks were used in this

case to better support and immobilize the tissue cover. Notice the minimal connective tissue around the root tips and the thin bio type.

Corrections included:

- 1.) Extraction and graft of all sockets using CK Dental mineralized bone allograph.
- 2.) Grand dermis overlay and tack down.

- 3.) Implant and crowns as final restorations.

Conclusion

These cases are typical of daily cases seen or avoided in many clinical settings across the country. No longer does this or should this go on.

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In my opinion, Grand Dermis has improved an already wonderful product and treatment option.

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— Photos/Provided by Dr. Nilo Hernandez

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IMPLANT UPDATES -- 2010

Marriott at McDowell Mountains, Scottsdale, AZ
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PROGRAM

7:00 AM Registration and Deluxe Continental Breakfast

8:00 AM: Welcome: Sheldon Winkler, President

Mahmoud F. Nasr, Past President and Meeting Moderator

M. Joe Mehranfar, Session General Chairperson

8:15-9:15: Systemic Implications of Oral Disease and its Relationship to Oral Implantology: Robert Braun, DDS, MPH, Professor of Oral and Maxillofacial Pathology, Medicine and Surgery, Temple University, Philadelphia, PA.

9:15-10:15: Occlusal Considerations in Implant Prosthodontics: Peter Neff, McLean, VA. Dr. Neff was formally Professor and Chairman, Department of Occlusion, Georgetown University, School of Dentistry and author of TMJ Occlusion and Function.

10:45-12:00: Five Decades of Dental Implants: Leonard Linkow, DDS, DMS, Fort Lee NJ. Dr. Linkow is considered by many of his colleagues as the "Father of Implant Dentistry". In 1992 NYU created the first endowed chair in implantology in perpetuity with Dr. Linkow as the recipient.

12:00-1:15: LUNCH

1:15-1:45: Lateral Bone Condensing and Expansion for Dental Implant Placement: Azfar Siddiqui, DMD, BDS, MS, Glendale AZ. Dr. Siddiqui is a full-time faculty member at Midwestern University College of Dental Medicine, Glendale AZ.

1:45-2:15: Recent Advances in Implant Research: Harold Morris, DDS, MS, Canton, MI. Dr. Morris was formerly the Director of the Dental Implant Clinical Research Group and the Ankylos Clinical Research Group, and Clinical Professor of Prosthodontics at Temple University, Philadelphia, PA.

2:15-2:45: New Implants for Old Fixed Protheses: Clement Guarlotti, DDS, Greensburg, PA. Dr. Guarlotti is past president of the AAIP.

3:00-5:00: G.K. Mangelson, CFP, Cincinnati, OH. Advanced Lawsuit Protection and Tax Reduction Strategies.

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Check our website @ www.aaipusa.com for additional meeting information.

About the author



Dr. Nilo Hernandez has been a well-respected dentist for many years and has long been involved in helping dentists improve their practices by training and assisting in many different ways. This help has included both clinical and administrative ways of improving their daily practice of dentistry.

For many years, he helped develop many different implant practices and training centers across the United States. Dentists call his practice on an almost daily basis for assistance.

A graduate of Creighton University School of Dentistry in Omaha, Neb., Hernandez is a general dentist in private practice in Miami. He has been involved with implant dentistry since 1990 and has performed several thousand dental implant procedures.

For additional information or comments, contact Hernandez at niloh@idecseminars.com.

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