



## CENTRAL DETAILS

Anamaria Muresan, DMD, outlines how a 27-year-old patient's smile was renewed with an esthetic Obsidian crown.

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## IMPLANT TRIBUNE

### RESEARCH LINKS GUM DISEASE, LUNG CANCER

Oral bacteria thought to contribute to development of cancer cells in lungs.

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# In Boston: Four days of general dentistry C.E.

*Hot-topic courses, Academy of General Dentistry Foundation events and more on deck at AGD 2016*

The Academy of General Dentistry's 2016 annual meeting, AGD 2016 in Boston, July 14–17, features four days of continuing education for dentists and dental team members highlighted by clinical and practice management lectures, hands-on courses and live patient demonstrations.

### C.E. opportunities

Lecture and participation courses on many of the hottest topics in dentistry will be presented by some of the industry's foremost speakers, including Todd B. Engel, DDS, founder and director of the Engel Institute.

Engel is scheduled to present "Implant cases tailor-made for the general dentist" from 9:30 a.m. to 1:30 p.m. on Thursday, July 14, at Boston's Hynes Convention Center, site of the meeting. The following day, from 8:30 a.m. to 12:30 p.m. he will present "Predictable

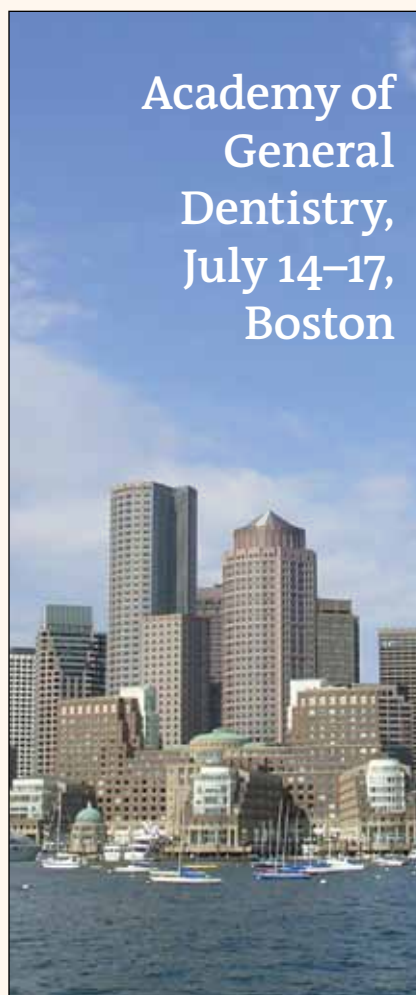
socket grafting for the general dentist."

Engel recommends that AGD 2016 attendees attend both of his lectures. "Do they go hand-in-hand?" he asked. "Much of the time, they do. Sometimes they're done separately. Sometimes they're done without each other. But no matter what, it's a baseline of understanding that the GP has to know."

Another course highlight is "Oral cancer: The silent killer in your practice," with AGD Foundation President Gerald J. Botko, DMD, MS, MAGD, FACD, to be held from 1 to 4 p.m. on Friday, July 15. During the lecture course — sponsored by the AGD Foundation — Botko will discuss how early diagnosis is essential to increase oral cancer survival rates.

"As dentists, we know how devastating oral cancer can be if it is not diagnosed and treated in its early stages,"

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Attendees of AGD 2016 in Boston have the opportunity to explore attractions such as the Freedom Trail, the New England Aquarium and Fenway Park. Photo/Dave DiCello, www.freeimages.com

Academy of General Dentistry, July 14–17, Boston

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## IMPLANT TRIBUNE

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- Study: Periodontal disease may increase lung cancer risk
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# Volunteers to provide oral cancer screenings July 15–16

Early detection of oral cancer is essential to improving treatment options for individuals who are diagnosed with this disease, and general dentists serve as a first line of defense. This is why Academy of General Dentistry (AGD) member dentists will provide free oral cancer screenings on July 15 and 16 for the general public during its annual meeting in Boston. Screenings will take place from 7 a.m. to 1 p.m. EDT both days at the Hynes Convention Center at 900 Boylston St. Interested individuals can simply walk in.

According to the American Cancer Society, more than 48,000 people in the United States will be diagnosed with oral

cancer this year, and more than 9,500 people will die from it — that's about one person every hour. Oral cancer is typically discovered in its late stages, which leads to a higher death rate. The disease can develop and grow without the patient noticing any obvious symptoms, reducing the chances that it will be diagnosed in the early stages.

To bring attention to this deadly disease, the AGD Foundation, the philanthropic arm of the AGD, annually hosts oral cancer free screenings, which take only a few minutes.

(Source: AGD)

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Botko said. "I treat oral cancer patients in my practice. Unfortunately, many patients we treat are in stage III and stage IV, which requires radical head and neck dissection, postoperative radiotherapy and/or chemotherapy. Their quality of life is decreased, and their survival rate is decreased."

### AGD Foundation oral cancer screenings

The AGD Foundation has committed to focus its community outreach on oral cancer awareness, risk factors and prevention and diagnosis by trained general dentists — and it's bringing its mission to Boston.

During AGD 2016, the AGD Foundation will provide free oral cancer screenings for the public from 7 a.m. to 1 p.m. at the Hynes Convention Center, Second

Level, Hall C, pre-function area. Approximately 50 volunteers will provide their services for the event, screening an expected 250 people for oral cancer.

Volunteers will examine AGD 2016 attendees, exhibit hall personnel and members of the public for sores, discoloration, lumps or irregular tissue changes in the neck, throat, cheeks and mouth.

### Explore Boston

AGD 2016 attendees are encouraged to explore Boston during their downtime. Recommended don't-miss tourist destinations include The Freedom Trail ([www.thefreedomtrail.org](http://www.thefreedomtrail.org)), New England Aquarium ([www.neaq.org](http://www.neaq.org)) and Fenway Park ([boston.redsox.mlb.com/bos/ballpark/tour.jsp](http://boston.redsox.mlb.com/bos/ballpark/tour.jsp)).

"The true Boston experience wouldn't be complete without a trip to Fenway Park," said Courtney L. Brady, DMD, vice

president of the Massachusetts AGD and a member of AGD's Scientific Meeting Council.

"America's oldest Major League Baseball ballpark is home to the Boston Red Sox, (and it) offers tours daily," Brady says. "Selfies with the 'Green Monster' behind you are sure to impress your Facebook friends."

### Connect with AGD

You can visit the AGD by going to its Facebook page at [www.facebook.com/generaldentists](http://www.facebook.com/generaldentists). Also, attendees who are planning to tweet about their AGD 2016 experience can include #AGD2015, and tweet @AGDEvents!

For AGD 2016 registration details and to find more information about the meeting's courses, lectures and social events, you can visit [www.agd2016.org](http://www.agd2016.org).

(Source: AGD)

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# National Dental Association to meet July 22-26 in Atlanta

*Product and resource center will feature discounts; scientific sessions offer something for everyone*

The National Dental Association (NDA) will hold its 103rd Annual Convention from July 22 to 26 at the Atlanta Marriott Marquis in Atlanta.

The meeting features timely continuing education classes, a broad mix of speakers, various special events and an abundance of networking opportunities. A product and resource center will feature show-special discounts and door prizes.

Among the meeting's many highlights, at the NDA Presidents' Luncheon on Sunday, July 24, two winning NDA chapters will each receive an engraved plaque and \$1,000 awards through the Colgate Bright Smiles, Bright Futures® competition. For the 24th year, Colgate and the NDA will recognize NDA chapters for their outstanding contributions to community outreach and oral health scholarships.

This year's NDA convention will provide a wide variety of scientific sessions with something for everyone. Subject matter experts will provide attendees with successful methods to optimize access and deliver comprehensive patient care, achieve health equity and improve total patient health; increase productiv-

ity and grow small businesses in underserved communities; understand the complexities and successfully navigate dental Medicaid programs; and advocate for policy and influence/reform laws that directly impact vulnerable populations and the providers that care for them.

And, of course, there will be some opportunities to explore Atlanta, with the Atlanta Marriott Marquis located in the heart of downtown and just steps away from some of the city's most popular attractions, such as: the Georgia Aquarium, World of Coca-Cola, Fernbank Museum of Natural History, Stone Mountain Park and Centennial Olympic Park.

### NDA-HEALTH NOW

Also in conjunction with the convention, NDA will launch its signature program NDA-HEALTH NOW® on Thursday, July 21, at the Andrew & Walter Young Family YMCA, 2220 Campbellton Road SW, from 8:30 a.m.-2 p.m.

NDA-HEALTH NOW is a grassroots, community-based effort to increase access to oral health in underserved populations. The event will be hosted for the YMCA's Summer Camp children, their families and the surrounding commu-



At the Atlanta Marriott Marquis, host site of this year's National Dental Association annual meeting, you can ride on high-speed elevators that provide sweeping views of the hotel's towering 47-story atrium. Photo/ Provided by Marriott International

nity. The project is made possible with funding from the W. K. Kellogg Foundation and The Coca-Cola Foundation. Key collaborators for this event are: Colgate, Morehouse School of Medicine, the Georgia Dental Society and the North Georgia Dental Society. Other community partners include WellStar Health System, Mobile Expressions Inc., Georgia State University Perimeter College, Wholistic Stress Control Institution Inc., Center for Black Women's Wellness, Atlanta Technical College, Starbucks Camp Creek, Crystal Waters, Atlanta Chapter of the Links Inc., Wellcare, C.H.O.I.C.E.S. and Fulton County Department of Health and Wellness. NDA national corporate partners

are: Sunstar Americas Inc., Henry Schein Cares, Aetna, General Electric, A-dec, ADI-MOBILE, Patterson Dental, and Crest + Oral-B.

### About the NDA

The National Dental Association promotes oral health equity among people of color by harnessing the collective power of its members, advocating for the needs of and mentoring dental students of color, and raising the profile of the profession in its communities.

To learn more about NDA and the meeting, you can visit [www.ndaonline.org](http://www.ndaonline.org).

(Sources: NDA, VOCCO)

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Fig. 1: A 27-year-old male patient presents with an old PFM crown on tooth #9, which had undergone endodontic treatment about 10 years prior to address decay. A darkened margin, visible due to gum recession on the facial, posed a distinct problem for this anterior case. In addition, the esthetics of the PFM crown were noticeably inadequate. Fig. 2: Obsidian Pressed to Metal crown masks the darkened stump shade at the gingival third while also blending in with the overall smile. Photos/Dr. Anamaria Muresan, Provided by Glidewell Laboratories

# Central details: Smile renewed with esthetic Obsidian crown

By Anamaria Muresan, DMD, ME, CDT

In the anterior region where esthetics are paramount, certain complications can preclude the use of all-ceramic material. The task then becomes finding a material worthy of the anterior with the durabil-

ity to meet precise standards. Obsidian® Lithium Silicate Ceramic Pressed to Metal (Prismatik Dentalcraft Inc.; Irvine, Calif.) puts an innovative spin on PFMs, with traditional porcelain passed over for lithium silicate ceramic. The result is five times the strength and more than two times the chip resistance of traditional PFMs.

A 27-year-old male patient presented with an old PFM crown on tooth #9, which had undergone endodontic treatment about 10 years prior to address decay. A darkened margin, visible due to gum recession on the facial, posed a distinct problem for this anterior case. In addition, the esthetics of the PFM crown

were noticeably inadequate.

To achieve an optimal outcome in the face of these difficulties, the first task in the treatment plan was to match the gingival height of tooth #9 to #8. Choosing Obsidian for the new crown was impor-

► See OBSIDIAN, page A5

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# Edentulism: Implant prosthesis therapies designed to optimize function, esthetics

By Dr. Massimo Pasi, Prof. of pathology and odontostomatology, University Vita-Salute San Raffaele, Milan, Italy

Total or even partial edentulism is a serious handicap for those who are affected. As we have often seen, responsibility

for the edentulism often lies with the sufferer — a reminder to dental professionals of the importance of educating patients (especially younger patients and their families) on healthy lifestyle choices (personal hygiene, nutrition, physical activity, regular dental check-ups).

The moment a person becomes eden-

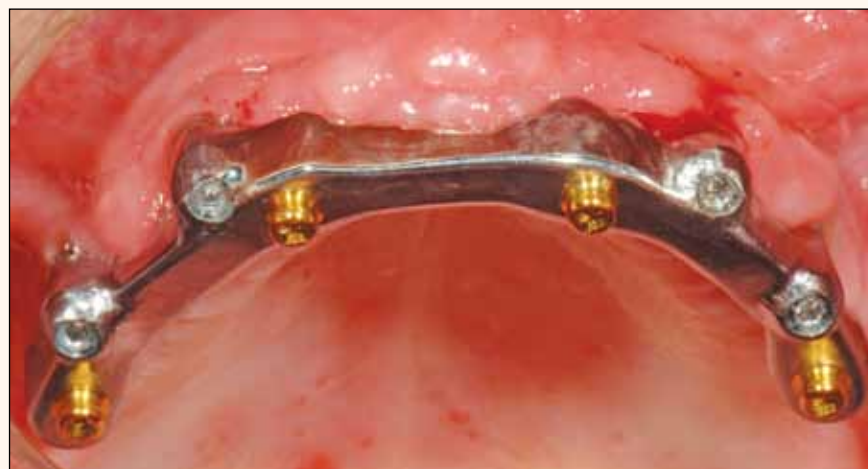


Fig. 1: The bar screwed on the implants on the upper jaw with the four OT Equator attachments. Photos/Provided by Dr. Massimo Pasi

tulous, however, it is our duty to try to improve the quality of his life by restoring proper chewing function (without further jeopardizing health) and to im-

prove social life (not compromising psychological health). For many patients, re-

▶ See EDENTULISM, page A7

◀ OBSIDIAN, page A4

tant in providing esthetics, as all-ceramic materials were eliminated from consideration due to the dark gingiva of the tooth in question.

In relation to the rest of the patient's smile, the PFM crown on tooth #9 does not offer harmonious shade and contours and fails to mirror the natural translucency and character of tooth #8. I used a gingivectomy on tooth #9 to improve contours, which was completed with a Picasso™ Lite diode laser (AMD Lasers; Indianapolis, Ind.).

To improve visibility of the gingival contours, I used hydrogen peroxide to scrub away the charred tissue tags. The gingival height of teeth #8 and #9 is now more symmetrical while avoiding violation of the biological width. In order to approach a normal cervical contour with the provisional and the final restoration, it is important to mirror the CEJ of the other central. Otherwise, the restored tooth will have a narrow form and will not look esthetic.

With retraction cords in place and Capture® medium- and heavy-body impression materials at the ready, a two-cord impression technique can be carried out. This case features a shoulder preparation to ensure enough thickness for the ceramic labial margin to block the darkness of the preparation at the gingiva.

A temporary crown provides a preview of how the new anterior restoration can blend in with the overall smile. Photos of the mocked-up temporary were included in the information provided to the lab technician.

After sandblasting the inside of the restoration, the Obsidian Pressed to Metal crown is ready to be cemented with RelyX™ Luting Plus (3M™ ESPE™, St. Paul, Minn.). The Obsidian Pressed to Metal crown successfully masks the darkened stump shade at the gingival third while also blending in with the overall smile.

Previously, a PFM was the common restorative choice for a case involving a darkened stump shade. Fortunately, today's clinicians have Obsidian Pressed to Metal, which outperforms traditional PFMs. Natural-looking esthetics and proven strength propel Obsidian Pressed to Metal past its predecessors.

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# New generation of core buildup material

## Visalys Core uses 'Active Connect Technology'

Visalys® Core, from Kettenbach LP ([www.kettenbachusa.com](http://www.kettenbachusa.com)), represents the next generation of core buildup materials, according to the company. The most recent addition to the Visalys family is a dual-curing core buildup material with unique Active-Connect Technology (ACT) to ensure a reliable bond with all common adhesives — without an additional activator. The product was unveiled at the 2015 International Dental Show (IDS) in Germany.

Visalys Core is the first core buildup material from Kettenbach. The fluoride-containing, dual-curing composite was developed for the fabrication of radiopaque core buildups and core fillings and for cementing root posts.

According to the company, the Active-

Connect Technology, unique in the market, enables the material to bond actively with all common light-curing and dual-curing, single-step and multistep adhesives, without an additional activator. The advantage for users is that it enables them to use the bonding agent they are used to — whether it is light-curing or dual-curing — or a single- or multi-bottle system.

### Firm foundation

According to the company, the technology simply provides a firm foundation — stable and precise. The company reports that Visalys Core ensures easy and reliable handling with “excellent positional stability.” At the same time, it exhibits good flowability and low extrusion force. The compressive strength results in a sta-



Visalys Core uses 'Active-Connect Technology,' which according to Kettenbach enables the buildup material to bond actively with all common light-curing and dual-curing, single-step and multistep adhesives — with no additional activator. Photo/Provided by Kettenbach

ble monoblock and a secure bond.

Optional light-curing allows the procedure to be continued immediately. Reliable self-curing provides for dependable strength even on the cavity floor and in root canals. Excellent polishing characteristics ensure precise preparation; even without light-curing, the smear layer is minimal. The product is also free of Bisphenol A and its derivatives.

Visalys Core is available in dentin and white shades in a 5 ml double syringe and in a 25 ml cartridge.

For detailed information about Visalys Core, visit the Kettenbach website at [www.kettenbachusa.com](http://www.kettenbachusa.com).

### About Kettenbach

Kettenbach (Huntington Beach, Calif.) is

the exclusive U.S. distributor for Kettenbach GmbH & Co. KG (Eschenburg, Germany). Founded by August Kettenbach in 1944, Kettenbach GmbH was created for the development and marketing of medical and dental products. Today, the company is one of the leading international producers of dental impression materials and is also known in other surgical areas of medicine. Brands include Panasil VPS Impression Material, Identium VSXE Impression Material, Futar Bite Material, Silginat Alternative Alginate, Visalys Temp Material, Mucopren Resilient Liner and Visalys Veneers. For more about Kettenbach products, you can call (877) 532-2123 or visit [www.kettenbachusa.com](http://www.kettenbachusa.com).

(Source: Kettenbach)

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- “The Do’s and Don’ts of Porcelain Laminate Veneers” with Gerard Kugel, DMD, MS, Ph.D.
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# Location, location, location

*As in real estate, moving to the right place can be key to enjoying dentistry*

In real estate, it's all about location, location, location. In dentistry, it's also about location, and that certainly was the case for Dr. Monica Garnache.

Many dentists who own or work with an Aspen Dental-branded practice join Aspen after getting a taste of private practice. But Garnache took a different route on her way to owning multiple Aspen Dental practices.

Garnache knew she wanted to be a dentist at a young age. She had a childhood dentist who inspired her to work in health care. Dentistry appealed to her because of the instant gratification. As a dentist, she imagined being able to immediately help people and see quick results – whether giving a patient some pain relief or a new smile.

After attending Tufts University School of Dental Medicine in Boston, Garnache became a temporary dentist. She joined an Aspen Dental practice in New England as an associate doctor before becoming a lead dentist in that office. She then opened a new Aspen office in New Hampshire. She loved working in an Aspen practice, with the support of Aspen Dental Management Inc., the dental support organization that handles the business side of things. She wanted to become a practice owner right away.

Due to family reasons, however, Gar-

nache had to relocate to California after only two years with Aspen. Since there are currently no Aspen practices in California, she couldn't fulfill her dream of ownership with Aspen. Instead, she purchased a traditional private practice in the San Francisco Bay Area. Even though there are close to 900,000 people in that area, there are also more than 8,000 dentists, making the area highly competitive for practicing dentists because there is no shortage of dental care. When Garnache discovered this, she knew she had to make a change.

"One morning, my office manager came to me and said, 'Doc, you need to find two crowns to do today so we can pay the bills,'" Garnache recalls. "This was a complete shock. I never heard that when I was working with Aspen Dental. We always had plenty of patients who truly needed my help without me having to 'look' for dentistry."

Around the same time, Garnache heard that Aspen had expanded into the Pacific Northwest, so she sold her practice in California and moved to Oregon, where she opened her first Aspen office as a practice owner. Just a few years later, she now owns three Aspen practices, has been able to build strong and engaging teams, and has a steady flow of patients who desperately need dental care.



Dr. Monica Garnache, below, and, at left, with some of her team members, sold her traditional, practice in California and moved to Oregon expressly to open her own Aspen Dental office (and, ultimately, two more). Photos/Provided by Aspen Dental



With Aspen Dental, dentists can work their way up – in just a few years – from an associate dentist right out of college to an owner of multiple practices. Although Garnache is now an accomplished dentist and practice owner, her path to success required her to be open to relocation and new adventures in order to achieve her childhood dream. Luckily, the Aspen model provides dentists with the opportunity to relocate for a variety of reasons.

If you or someone you know is interested in relocating or joining an Aspen practice, you can send the company an email at [recruiting@aspental.com](mailto:recruiting@aspental.com).

(Source: Aspen Dental)

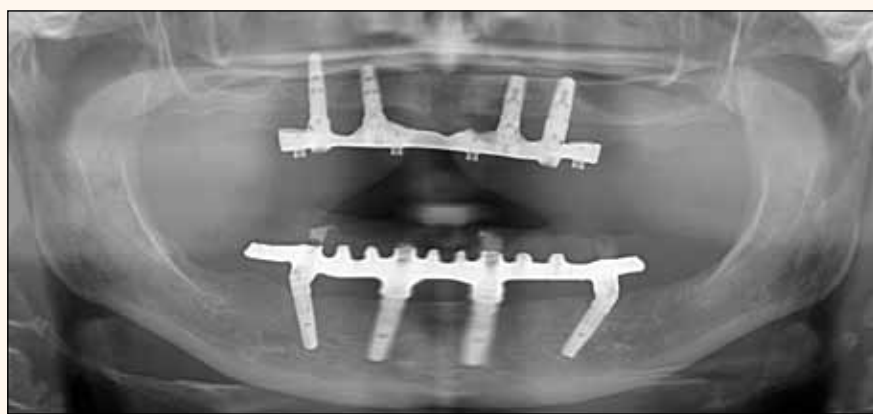


Fig. 2: Orthopantomography control after six months of the end of rehabilitation.

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placing missing teeth in the maxilla with a full denture may be an appropriate solution. But a full denture in the lower arch is absolutely incongruous: It does not allow sufficient chewing efficiency; it does not address instability due to poor tissue support; it results in movement of the tongue and cheeks that often creates soreness and contributes to stress in social settings. Therefore it is necessary to inform people facing mandibular edentulism that they can regain comfort and masticatory function with insertion of two implants to stabilize the prosthesis.

A big step forward in treatment of edentulism has been achieved with acceptance of the "all-on-four" protocol, which

is fast, minimally invasive and financially less burdensome for the patient. This solution, however, is not appropriate in all cases because patients must have adequate manual dexterity to maintain proper oral hygiene. The protocol also can have functional and esthetical limitations. In such cases, the best therapy is often an overdenture stabilized by four implants, especially in the maxilla and/or when the patient is unlikely to accept the time, expense and surgical invasiveness of regenerative therapies.

**Read more**  
The full version of this article is available at [www.dental-tribune.com](http://www.dental-tribune.com) under the same title.

AD

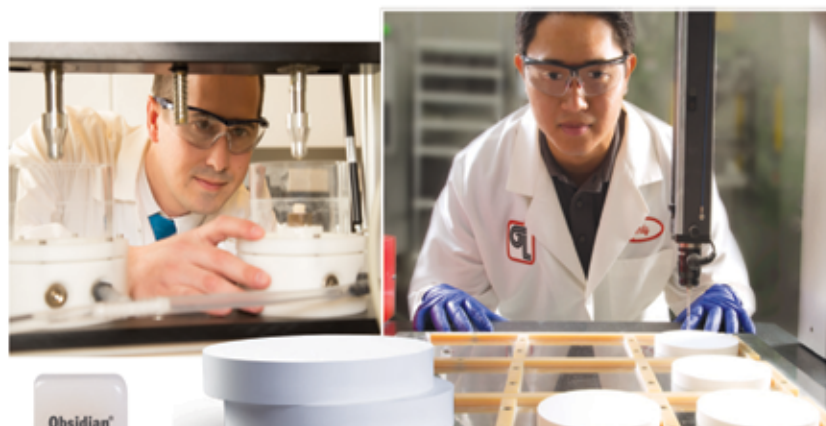


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