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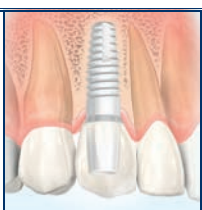
EuroPerio9 Amsterdam • 20-23 June 2018



Interview

An interview with W&H Marketing Director Anita Thallinger gives insight about the company's new image campaign.

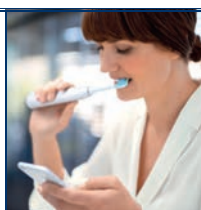
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Business

Nobel Biocare harnessed the evolution of ceramic implant solutions with NobelPearl, which is unveiled at EuroPerio9.

» page 16



Products in focus

Philips launched its DiamondClean Smart to help achieve improved results in plaque control and whitening.

» page 20

Hot topics in periodontics to be discussed at EuroPerio9

Thousands of dental professionals are attending the world's biggest scientific meeting devoted to periodontics.

■ EuroPerio9 is the place to be for the latest news about periodontal health and its impact on overall health. Today, the world's leading congress in periodontics and implant dentistry kicked off at the RAI congress centre in Amsterdam in the Netherlands. The triennial event is taking place from 20 to 23 June and is expected to welcome around 10,000 congress attendees from over 150 countries.

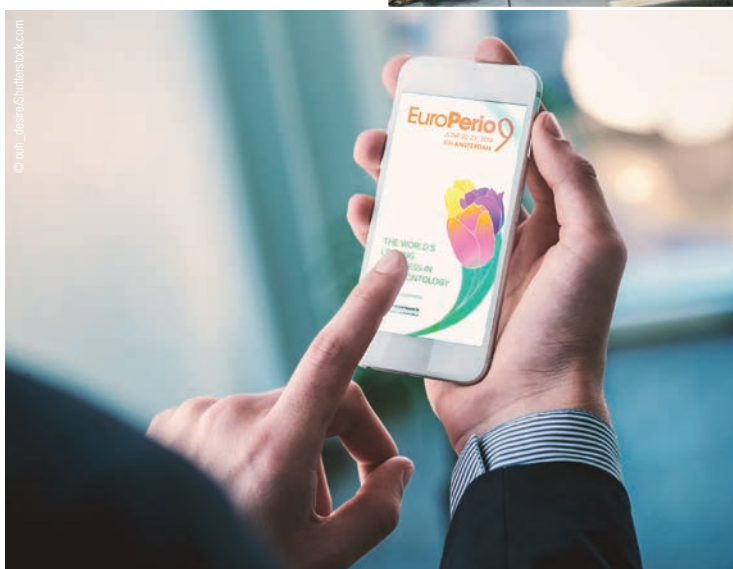
The organiser, the European Federation of Periodontology (EFP), has announced an extensive list of important topics to be discussed, including oral piercings and periodontal health, oral health and its impact on sport performance, and the role of nutrition in periodontal health. The scientific programme offers sessions on genetics, the oral microbiome, the role of artificial intelligence in disease modelling, trends in antibiotic resistance, new diagnostic tools and minimally



needs substantial and continuous efforts both from professional organisations and from the population. The EFP has the vision of periodontal health for a better life, and we are happy to share it with everybody interested. I am convinced that, together, we can attain it," said President of the EFP Prof. Anton Sculean.

To make navigation as easy as possible, the EuroPerio9 app has been developed and is integrated in the EFP society app. With the app, participants can create personal programmes, view all abstracts, chat with peers, vote in sessions, ask questions and much more. The EFP app can be downloaded from the respective app stores. Once installed, most functions are usable offline.

The EFP is an umbrella organisation of 30 national scientific societies devoted to promoting research, education and awareness of periodontal science and practice. ◀



invasive therapies, among others. The lectures will be delivered by some of the top experts in periodontics.

More than 1,720 studies will be presented in Amsterdam, including oral presentations, poster discussions and e-posters. The programme includes the EFP Perio Contest, for which single case reports were submitted, and the first EFP Photo Contest, with prizes to be awarded.

With presenters from Turkey, Brazil, Germany, France, Italy, Spain, Russia, Japan, the UK and China, among other countries, EuroPerio9 is a truly international meeting, where attendees can learn about the latest advances in periodontal treatment, discuss clinical challenges with experts and peers, and share best practices in order to improve patient care.

"EuroPerio is the 'temple' of periodontology and everybody must have a chance to express their views and to exchange their experience," said Dr Michèle Reners, chair of the organising committee for EuroPerio9. "For the young generations, it is a unique opportunity to create a network with peers coming from all over the world and we want to stimulate this!"

"We tend to forget that keeping our gums healthy is extremely important for our general wellbeing and aesthetics, and that it therefore substantially influences our quality of life. We need, however, to be aware that preserving gum and oral health cannot not be taken for granted and



▲ Three years ago, the world of dentistry met at ExCeL London in the UK for EuroPerio8.

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Diet not solely to blame for tooth erosion

■ Together with dental caries and periodontal disease, dental erosion ranks among the top three most prevalent dental conditions. According to a review paper by researchers in London, the reason some people suffer more from erosive tooth wear than others depends not only on their diet, but also on how they consume acidic beverages and foods.

The researchers, from King's College London Dental Institute, aimed to identify how different behaviours increased the risk of developing severe tooth erosion. Their research drew on a previous study at Guy's Hospital in London that compared



the diet of 300 people with severe erosive tooth wear and of 300 people without.

The Dental Institute researchers found that those most affected were not those that simply consumed acidic drinks or food, but those who did so between meals. People who drank acidic drinks like soft drinks or fruit-flavoured teas twice a day

were 11 times more likely to have moderate or severe erosion compared with those who did not. Among the groups with high potential for tooth erosion are wine drinkers, long-distance drivers and video gamers, all of whom continually expose their teeth to acidic drinks by swishing or rinsing the liquid around or holding it in their mouths, the researchers said.

“It is well known that an acidic diet is associated with erosive tooth

wear; however, our study has shown the impact of the way in which acidic food and drinks are consumed,” said lead author of the study Dr Saoirse O’Toole, clinical lecturer in prosthodontics. She continued that, with the prevalence of erosive tooth wear increasing, the preventable aspects, such as reducing dietary acid intake for the purpose of delaying progression of tooth erosion, have to be addressed. The risk from soft drinks, for example, can be halved when such beverages are consumed during meals.

In countries like the UK, currently over 30 per cent of adults are estimated to suffer from tooth erosion, which can lead to severe loss of enamel and dentine over time.

The study, titled “The role of the diet in tooth wear”, was published online in the *British Dental Journal* on 23 February 2018. ◀

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Periodontitis-causing bacteria could trigger cancer

■ Researchers in Finland have investigated the role of a bacterium strongly associated with periodontitis in the development of oral and certain other cancers. In a second study, they also found a link between periodontitis and cancer mortality at the population level.

The first study has for the first time proved the existence of a mechanism at the molecular level through which a bacterium associated with periodontitis, *Treponema denticola*,

took part in this ten-year follow-up study.

“These studies have demonstrated for the first time that the virulence factors of the central pathogenic bacteria underlying gum disease are able to spread from the mouth to other parts of the body, most likely in conjunction with the bacteria, and take part in central mechanisms of tissue destruction related to cancer,” said Prof. Timo Sorsa of the University of Helsinki.



may also contribute to carcinogenesis. The researchers found that the primary virulence factor of *T. denticola*, chymotrypsin-like proteinase, occurs also in malignant tumours of the gastrointestinal tract, for example in pancreatic cancer. According to another study finding, the enzyme has the ability to activate the enzymes that cancer cells use to invade healthy tissue. At the same time, the proteinase diminished the effectiveness of the immune system by, for example, inactivating molecules known as enzyme inhibitors.

In the second study, it was proved that periodontitis is clearly associated with cancer mortality at the population level. An especially strong link to mortality due to pancreatic cancer was found. Some 70,000 Finns

The researchers concluded that low-grade systemic inflammation related to periodontitis facilitates the spread of oral bacteria and their virulence factors to other parts of the body. They pointed out that the prevention and early diagnosis of periodontitis are very important, both for patients’ oral health and their overall well-being.

The first study, titled “*Treponema denticola* chymotrypsin-like proteinase may contribute to orodigestive carcinogenesis through immunomodulation”, was published online on 16 November 2017 in the *British Journal of Cancer*. The second study, titled “Periodontitis and cancer mortality: Register-based cohort study of 68,273 adults in 10-year follow-up”, was published online on 11 January 2018 in the *International Journal of Cancer*. ◀

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Middle-aged tooth loss linked to increased coronary heart disease risk

■ Losing two or more teeth in middle age is associated with increased cardiovascular disease risk, according to preliminary research. The findings were presented at the American Heart Association's 2018 Epidemiology and Prevention | Lifestyle and Cardiometabolic Health Scientific Sessions, a premier global exchange of the latest advances in population-based cardiovascular science for researchers and clinicians.

In a collaborative research effort between the Tulane University School of Public Health and Tropical Medicine in New Orleans and Harvard T.H. Chan School of Public Health in Boston, US, a team of researchers analysed the impact of tooth loss in two large studies of adults. In the studies, the participants, aged 45 to 69 years, were asked to report on the numbers of natural teeth they had, then in a follow-up questionnaire, report on any recent cases of tooth loss. The adults in this analysis did not have cardiovascular disease when the studies began. The researchers prospectively studied the occurrence of tooth loss during an eight-year period and followed an incidence of cardiovascular disease among people with no tooth loss, one tooth lost and two or more teeth lost over 12 to 18 years.

It was found that, among the adults with 25 to 32 natural teeth at the respective study's start, those who lost two or more teeth had a 23 per cent increased risk of cardiovascular disease, compared with those with no tooth loss. The increased risk occurred regardless of reported diet quality, physical activity, body weight and other cardiovascular risk factors, such as high blood pressure, high cholesterol and diabetes. There was not a notable increase in cardiovascular disease risk among those who reported losing one tooth during the respective study period. Cardiovascular disease risk among all the participants (regardless of the number of natural teeth at the respective study's start) increased 16 per cent among those who lost two or more teeth during the respective study period, compared with those who did not lose any teeth. Adults with less than 17 natural teeth, compared with 25 to 32 at the respective study's start, were 25 per cent more likely to have cardiovascular disease.

Study author and Professor of Epidemiology at Tulane University Dr. Lu Qi added: "Previous research has also found that dental health issues are associated with elevated risk of cardiovascular disease. However, most of that research looked at cumulative tooth loss over a lifetime, which often includes teeth lost in childhood due to cavities, trauma and orthodontics. Tooth loss in middle age is more likely related to inflammation, but it hasn't been clear how this later-in-life tooth loss might influence cardiovascular disease risk."

"In addition to other established associations between dental health

and risk of disease, our findings suggest that middle-aged adults who have lost two or more teeth in the recent past could be at increased risk for cardiovascular disease. That's regardless of the number of natural teeth a person has as a middle-aged adult, or whether they have traditional risk factors for cardiovascular

disease, such as poor diet or high blood pressure," Qi said.

The findings have not yet been published as a peer-reviewed paper. The abstract, titled "Changes in dental health and coronary heart disease risk: Two prospective cohort studies in men and women," was published in the *Circulation* journal, 20 March 2018. ◀



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We have worked hard to put together a high-quality programme with the latest research in the field

An interview with Prof. Søren Jepsen, Scientific Chair of EuroPerio9.

■ This year's EuroPerio, the world's leading congress in periodontology and implant dentistry, is expected to attract up to 10,000 periodontists and members of the dental team to learn about the latest in periodontal research and clinical practice, in June in Amsterdam in the Netherlands. In this interview, Prof. Søren Jepsen, past President of the European Federation of Periodontology (EFP) and Scientific Chair of EuroPerio9, outlines the event's scientific programme, which features more than 100 top-level speakers and many innovations. The detailed programme is available at www.efp.org/europerio9/programme/scientific.

Why should a dentist or a hygienist consider attending EuroPerio9?

Because EuroPerio9 is their opportunity to obtain the best insight on periodontology and implant dentistry available in the world until 2021—when EuroPerio10 takes place. EuroPerio9 has gathered the best pool of talented speakers from Europe and around the world for an audience that is increasingly global too. We'll enjoy a great venue in a city as attractive and well-connected as Amsterdam. And then there are the events of the networking programme, the fact that all happens in only four



Prof. Søren Jepsen

days and the choice between four parallel tracks of presentations according to the attendee's interests. All in all, attending EuroPerio9 is the most enjoyable and cost-effective way to be fully updated on the best in periodontology and implant dentistry available today.

Will EuroPerio9 be similar to EuroPerio8 (London, UK, 2015) and EuroPerio7 (Vienna, Austria, 2012)?

It will be definitely unique! We have created the Team Session track, which is more inclusive than the

We have arranged sessions in such a way that many more dental professionals will be able to present their short oral presentations and posters for discussion. We have included the well-established stars in the specialty and have more women speakers and young speakers than ever before. We have built on the best of our successful experiences and we have added a number of new formats.

What are those new formats?

We have designed eight new formats. First, on the opening day, we

will have a special double session track for dental hygienists. We have added more sessions on the afternoon of Wednesday, 20 June, to take better advantage of the time before the official opening ceremony.

will have a special double session with the Japanese Society of Periodontology, one on biofilm and anti-infective therapy, the other on regenerative periodontal and implant therapy. Second, the Perio Talks will offer fresh, TED Talk-style presentations given at the first EFP Alumni Symposium. Third is a lively debate about the use of antibiotics, led by Profs. Andrea Mombelli and David Herrera, in which attendees will be able to use their smartphones as voting devices. Fourth, for the first time, a live surgery session will take place at a EuroPerio congress. A new, rarely performed procedure with implants will be carried out by Prof. Giovanni Zucchelli and Dr Martina Stefanini at the Academisch Centrum Tandheelkunde Amsterdam dental school and broadcast in real time.

The fifth major innovation is the interdisciplinary treatment planning session, in which cases will be shown

and the audience will choose between different options for treatment. Sixth is a 3-D session with Dr Pierpaolo Cortellini and Prof. Stefan Renvert on reconstructive surgery on teeth and implants, in a large auditorium. Seventh is the EFP Perio Contest, for which presentations will be judged not only by an expert panel but also by social media voting before the congress. The three final contestants will be invited to present their work on stage on the last day of the congress. Eighth is the Nightmare Session, in which Drs Mario Rocuzzo, Giulio Rasperini, Jean-Louis Giovannoli and Caroline Fouque will explore treatments that went badly.

Being Scientific Chair of EuroPerio9 sounds like quite a challenge. How has the experience been?

It is, indeed, an incredible challenge, but also an opportunity to work with a wonderful team of periodontists and professional organisers. Together, we have worked hard to put together a high-quality programme with the latest research in the field, the best professionals and the new formats I mentioned. I hope that EuroPerio9 will provide attendees with a fruitful and unforgettable experience! ◀

“We are now aiming at personalised dentistry”

By Dr Monique Danser, Netherlands



Monique Danser

■ One of the World Health Organisation's main goals is to reduce tooth loss (edentulism) and increase the number of people who retain their natural dentition in later life. Over the past decades, the evidence of oral health playing an important role in general health

has increased. There is more awareness now of the associations with various systemic diseases, such as diabetes, cardiovascular disease, rheumatoid arthritis and obesity.

Periodontitis is a multifactorial disease with at least five different domains of risk factors that simultaneously play an important role. These are environmental factors, such as the subgingival bacterial biofilm; genetic risk factors; lifestyle factors; systemic diseases, such as diabetes; as well as other lesser known factors that are all tooth-related.

The most widely accepted concept for a person developing periodontitis is that he or she is genetically susceptible and has an aberrant immune response and/or tolerance for some Gram-negative bacteria. Thus, a hyperactive inflammatory process or the lack of resolving capacity creates a favourable ecological niche in which proteolytic bacteria thrive. However, not everyone is equally susceptible to periodontitis. Nowadays, we focus more on the individual lifestyle habits of the patient instead of just the initial therapy involving or not involving surgery. Although bacteria play a key role in the development of periodontitis, the severity of the disease is not entirely related to the sum of the duration of the presence or quality of the bacteria and the host. Therefore, we increasingly pay attention to nutrition and



give dietary advice (e.g. intake of vitamin C, D and flavonoids), as a healthy lifestyle and thus healthy diet contribute significantly to the treatment process. Although we cannot change the genetics of the patient, we can at least enhance his or her immune system by means of probiotics and nutrition, among other things.

Most patients suffering from periodontitis can be treated successfully and maintain their health. The group that does not respond well to therapy is actually rather small. Nevertheless, we are working on better diagnostic tools, such as blood and saliva

tests, and collecting big data, with which we can improve our treatment. The number of parameters we can test is growing. We are now aiming at personalised dentistry.

As periodontists, we increasingly have to treat cases that are more complex. In the future, we hope to better predict and identify patients who are more susceptible to the development of the disease. With all the information we hope to collect, we should be able to work on a positive outcome of the treatment for each patient and thereby reduce the individual risk of not responding well to therapy.

While the percentage of healthy people has grown during the last decade, severe periodontitis has remained at almost 10 per cent despite the fact that we have better healthcare and screening systems, as well as invest in more prevention. New techniques for the surgical treatment of periodontitis, such as regeneration methods, tooth transplantation and dental implants, are currently in development.

Every year, we encounter more cases of peri-implantitis. A good diagnosis and indication for tooth replacement are therefore essential. Apart from no tooth loss, the ideal situation would be to have a tooth replaced by another natural tooth through stimulation of the periodontal ligament with growth factors or even with stem cell transplantation. Similar to the medical field, guidelines are in development for helping practitioners to treat the patient optimally.

A team approach is also essential. As healthcare professionals, we need to offer prevention, lifestyle coaching and dental treatment at the same time in order to have happy patients. This can only be accomplished by a professional team. ◀

Dr Monique Danser is President of the Nederlandse Vereniging voor Parodontologie [Dutch society of periodontology] and a member of the EuroPerio9 organising committee.

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Are your workflows perio-friendly and efficient?

An interview with dentist Dr Annika Meyer, Germany.



■ Ahead of EuroPerio9, the editorial team of CAMLOG Biotechnologies sat together with Dr Annika Meyer to talk about the characteristics of a perio-friendly and efficient workflow. Meyer, who studied dentistry at the Humboldt University in Berlin and previously worked in dental education and product management for several international dental businesses, also touched on implant products manufactured by the Swiss company based in Basel that make these workflows possible.

Dr Annika Meyer, it seems you are always up to date when it comes to significant trends in implantology regarding clinical research. From your point of view, what can you tell us about the emerging trends in implantology?

^ Dr Annika Meyer is a dentist with broad experience in dental practice, education and product management. After her residency at clinics in Berlin and stay at the University of Münster's periodontology department, she worked in dental education and product management for several international dental companies.



^ The Camlog implant system is available with two different machined collar heights and an option for platform-shift for the implants with a 0.4mm machined neck.

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Dr Annika Meyer: For me, as a scientifically oriented clinician, flashy claims from implant manufacturers trying to set trends with colourful pictures are not at all interesting. What is important and attractive to me is getting clinical data, clinical results, on the most significant developments affecting the treatment outcomes for our patients. Can we see a clinical benefit? If so, under what conditions? Now, faster than ever before, we are able to collect more data from completed clinical trials. This allows us to implement the acquired knowledge for decisive developments in implantology.

Why is implementing the acquired knowledge for decisive developments in implantology important?

Today, we are even more capable than before of establishing consensus on the benefits of particular workflows and developments. This gives clinicians the necessary guidelines.

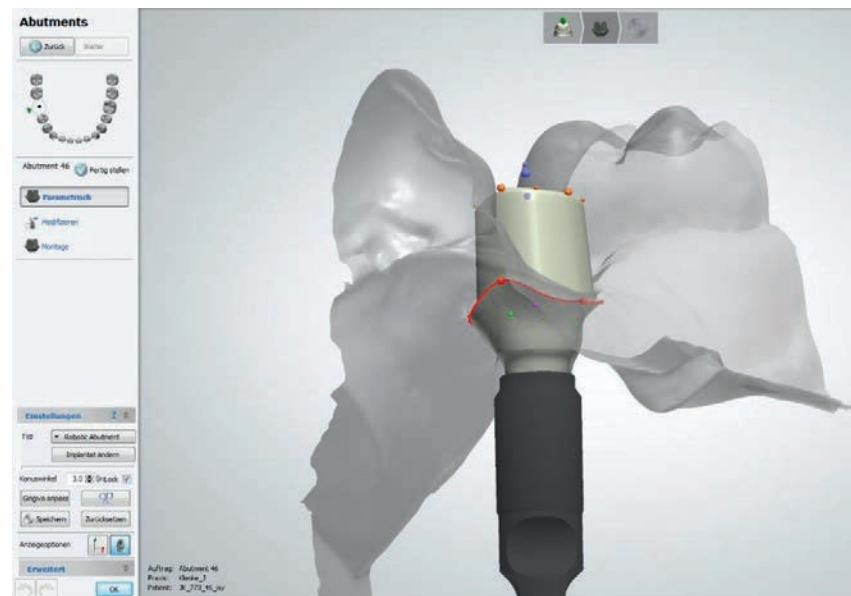
So what are the decisive developments of the past that have made implant treatment workflows perio-friendly?

Developments in CAD/CAM technology are progressing very rapidly. We tend to forget that providing a custom-made abutment with an individual emergence profile was a time-consuming and expensive way to obtain a perio-friendly restoration. Now, perio-friendly structures are easy to achieve with individual abutments from DEDICAM. With DEDICAM abutments, an individual emergence profile allows the clinician to define the optimal position of the cervical margins—be it for aesthetic reasons or for easier removal of excess cement for proper cementation margins.

For many of those attending EuroPerio9, the advantages of individual CAD/CAM abutments are well known. Nowadays, such abutments can be an integral part of the general dentist's offering without any further investment—making this process perio-friendly and efficient.

The lab designs the individual abutment and the dentist receives

today ▶ page 8



^ Design of a titanium abutment with modelling of the peri-implant soft tissue and iso-gingival placement of the margin. (Image: Jan Klenke, Germany, iSy Implant system)

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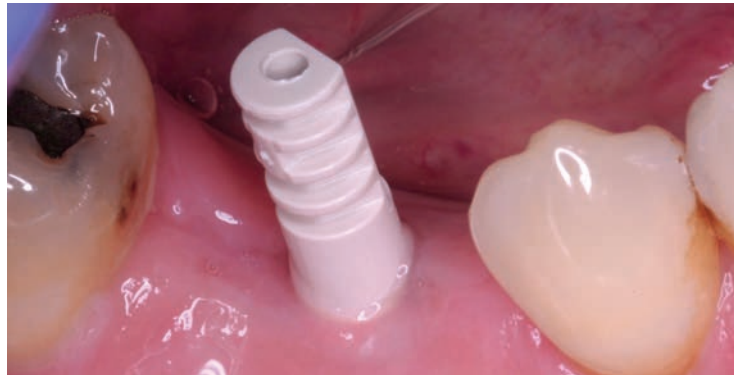
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today ◀ page 6

the ready-to-use titanium abutment within two days. In some countries, even a scan and design service is available, facilitating the work of the dental technician too.

What other developments do you consider perio-friendly?

Well, I almost daren't say it, because implants that have this attribute have been described as old-fashioned, but machined necks on implants are definitely gaining a re-



▲ With the iSy Implant system, the multi-functional cap on the implant basis serves as impression post, in the lab it serves as scan post. (Photo: Jan Klenke, Germany)

surgent importance regarding perio-friendly products.

What are the clinical advantages of CAMLOG implants with machined necks and platform shifting?

CAMLOG products with machined necks have been included in several *in vivo* studies and international clinical studies. The data showed less bacterial adhesion on machined implant surfaces. This indicates that the reported risk of peri-implant microbial adhesion and tissue inflammation can be reduced

by using implants with a machined collar.

The CAMLOG Implant System is available with two different machined collar heights and an option for platform shifting for the implants with 0.4 mm machined necks. If one places the implants correctly—the Oral Reconstruction Foundation (formerly the CAMLOG Foundation) provides a consensus report containing guidelines—then one has a clinically proven advantage.

Is platform shifting an option?

Yes, the CAMLOG Implant System with the Promote plus surface (0.4 mm machined surface) does have the option to perform platform shifting. The clinician can decide whether platform shifting is suitable for the specific clinical situation, offering him or her a certain level of flexibility and the safety of the machined collar. The CONELOG Implant System offers integrated platform shifting and surface roughness up to the platform, a concept that has also proven to be perio-friendly, as it leads to stable soft-tissue levels and less crestal bone loss.

What are the trends regarding efficiency?

Everything that allows for transmucosal healing makes the surgery easier to perform. Randomised clinical studies have shown that the disassembly and reconnection of the abutment might have an influence on changes in bone level, with a subsequent negative effect on the soft tissue around implants.

In several studies, transmucosal and submerged healing were compared and no superiority of one or the other healing method was found. Therefore, depending on the indication, several advantages can be seen using transmucosal healing (i.e. it is time-efficient and therefore cost-effective for the surgeon, and it addresses the patients' desire for less surgery and a shorter treatment time).

A good example is the iSy Implant System. As the pre-mounted implant base remains on the implant right from the beginning, one works on abutment level from the start. The implant and superstructure can integrate and the soft tissue can stabilise during the healing process.

Another factor that drives efficiency is a reduced number of instruments in an implant system. The iSy Implant System has achieved this objective, not only with the lean drilling surgical protocol but above all with the use of multifunctional abutments. The multifunctional cap can be used intraorally as an impression post, and in the lab, it has the additional function of a scan post. As they like to say at CAMLOG, "digital dentistry made iSy". It's designed as a system to optimise access to individualised CAD/CAM restoration. The clinician can choose to work chairside or with a lab or use an external CAD/CAM service provider. ◀◀

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