

IMPLANT TRIBUNE**AO STUDY CLUB
MILESTONE**

Greater Washington, D.C., group marks first year of successful programming.

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**HYGIENE TRIBUNE****HYGIENISTS GETTING
TOGETHER IN FLORIDA**

Teledentistry and seniors' oral health among topics at ADHA 2017 gathering.

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**ENDO TRIBUNE****AT THE AAE ANNUAL
SESSION**

Dr. Frederic Barnett receives the Edward M. Osetek Educator Award.

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Researchers: Poor oral health is major factor in older-adult malnutrition

University of North Carolina School of Medicine researchers led a study to determine risk factors associated with malnutrition among older adults receiving care in the emergency department. The study, published in the Journal of the American Geriatrics Society, suggests that food scarcity and poor oral health are major risk factors for malnutrition that leads an older adult — already at high risk of functional decline, decreased quality of life and increased mortality — to land in the emergency department.

Tim Platts-Mills, MD, senior author of the study, said, "For patients who don't have enough food at home, the solution is pretty obvious and likely much less expensive than paying for the medical care that results from malnutrition: There is an existing national system of food assistance programs, such as Meals on Wheels, and we believe we can use the emergency department to link patients in need to those programs.

"Even though such programs are relatively inexpensive — about \$6 per individual per day — many programs are underutilized and under-funded. We need to link patients to these programs and fund these programs," added Platts-Mills, who is also co-director of the Division of Geriatric Emergency Medicine

at the UNC School of Medicine.

The study included 252 patients age 65 and older seeking treatment in emergency departments in North Carolina, Michigan and New Jersey. Participants were screened for malnutrition and asked about the presence of risk factors.

The overall prevalence of malnutrition in the study sample was 12 percent, which is consistent with previous estimates from U.S. emergency departments and about double the prevalence in community-dwelling adults (those who are not hospitalized and do not live in an assisted-living facility). Of the three sites, patients receiving care in the North Carolina emergency department had the highest rate of malnutrition, 15 percent. The researchers note that North Carolina also has one of the highest rates of older adults living below the poverty line (ranked third out of 50 states).

Largest impact: Poor oral health

Of the risk factors studied, poor oral health was found to have the largest impact on malnutrition.

More than half of the patients in the study had some dental problems, and those patients were three times as like-

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ADHA Annual Conference, June 14–17, Jacksonville, Fla.



Aerial view of downtown Jacksonville, Fla., which is hosting the American Dental Hygienists' Association Center for Lifelong Learning at the 94th Annual Session. Photo/ Ryan Ketterman for Visit Jacksonville

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Dental lab adds new 3-D printer technology

Glidewell Dental has expanded its partnership with Structo, a Singapore-based dental 3-D printing solutions provider, with an investment in two of Structo's newly launched DentaForm 3D printers.

After running three Structo OrthoForm printers in production over the last year, Glidewell decided to further integrate Structo's Mask Stereolithography (MSLA) technology-equipped printers to expand the company's production capabilities. By adding two of the newly released DentaForm printers, Glidewell Dental is now operating a total of five Structo machines in its production facilities.

"Structo's unique MSLA technology is just the type of innovation the industry needs," said David Leeson, director of engineering at Glidewell Dental. "We are very excited to continue this partnership with Structo and improve our production efficiency by adopting the newly launched DentaForm 3D printer."

A Glidewell Dental news release reports that after a comprehensive evaluation of expanding production needs, the company purchased two DentaForm 3-D printers instead of a larger number of printers from a competing manufacturer, favoring Structo's high throughput capabilities. "Operating two of Structo's new printers is not only sufficient to replace a number of our existing printers, but also allows us to increase capacity overall," Leeson said, adding that the company anticipates further expansion with more DentaForm

printers in the second half of this year.

The Structo DentaForm is capable of printing up to 30 dental models in approximately 90 minutes. Launched in February at the Association of Orthodontists Singapore Congress, the Structo printer continues to make waves in the industry by partnering with some of the world's largest dental laboratories, according to the company.

"Despite being halfway across the world in Singapore, we are extremely pleased with the support provided by the entire team at Structo," said Cory Kolb, head of support at Glidewell Dental. "We are constantly in touch with their engineering team to exchange ideas and provide feedback, which is crucial in ensuring that our machines constantly operate at an optimum level."

Huub van Esbroeck, one of Structo's founders, said: "Having one of the leading dental labs in the world place its trust in our technology shows that our solution is addressing a very critical need in digital dentistry. David and his team have been providing us with a lot of feedback that has contributed to new features and design elements of the DentaForm printer. We are really excited to continue this partnership with Glidewell to help them expand their capacity."

About Structo 3D

Using proprietary MSLA technology, Structo designs, develops and builds 3-D

printers tailored for dental applications.

According to the company, MSLA 3-D printers are able to achieve speeds much higher than conventional SLA printers and are revolutionizing the field of digital dentistry with higher throughput and lower costs — all without compromising on print quality. Structo also builds control systems and software and formulates its own photopolymer materials tailored specifically to each use in a range of dental 3-D printing applications.

For more information, you can visit www.structo3d.com.

About Glidewell Dental

Based in Newport Beach, Calif., Glidewell Dental is a privately owned corporation with more than 45 years of history as a provider of dental products, high-quality restorations and lab services to dental professionals worldwide. Its CAD/CAM processing capabilities are recognized as among the industry's most advanced.

According to the company, its industry-leading role is driven by innovative dental technology, an experienced R&D department and dedication to providing free or affordable clinical and technical education to promote industry growth.

To view the large selection of Glidewell Dental clinical videos, continuing education courses, and products and services, you can visit www.glidewelldental.com.

(Source: Glidewell Dental)

◀ **MALNUTRITION**, page A1

ly to suffer from malnutrition as those without dental problems.

Ten percent of patients experienced food insecurity — the definition of which was based on responses to questions regarding not having enough food, eating fewer meals and going to bed hungry. Food insecurity was also strongly associated with malnutrition.

Other factors associated with malnutrition that may contribute to the problem include isolation, depression, medication effects and limited mobility.

Collin Burks, a UNC medical student and the study's lead author, said, "Improving oral health in older adults will

be more challenging but also important. Medicare does not cover dental care. Fixing dental problems not only makes it easier for these individuals to eat but also can improve their self-esteem, quality of life and overall health. We need affordable methods of providing dental care for older adults."

Platts-Mills's research group is devel-

oping and testing interventions to link malnourished older patients identified in the emergency department to food assistance programs in the community.

This research was funded through a research training grant from the National Institutes of Health.

(Source: UNC School of Medicine)

‘Fixing dental problems not only makes it easier for these individuals to eat but also can improve their self-esteem, quality of life and overall health.’

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New: Micro 2.5x loupes, Mini WireLess headlight

By Designs for Vision Staff

Designs for Vision's new LED DayLite® WireLess™ Mini headlight frees you from being tethered to a battery pack. The simple modular designs uncouple the headlight from a specific frame or single pair of loupes. Prior technology married a cordless light to one pair of loupes via a cumbersome integration of the batteries and electronics into the frame. The compact design of the LED DayLite WireLess Mini headlight is independent of any frame/loupes.

Less than 1 ounce

The LED DayLite WireLess Mini weighs less than 1 ounce, and when attached to a pair of loupes, the combined weight is half as much as the weight of integrated cordless lights/loupes. The LED DayLite WireLess Mini produces over 27,000 lux and the spot size of each of the LED Day-Lite WireLess headlights will illuminate the entire oral cavity.

The WireLess Mini is powered by specialty rechargeable lithium-ion cylindrical cells, and the headlight comes complete with three batteries. The charging cradle allows you to independently recharge two batteries at the same time and shows the progress of each charge cycle.

The Micro Series loupes from Designs for Vision are fully customized and use proprietary lens coatings for the greatest light transmission. The Micro 2.5x loupes weigh as little as 1.2 ounces and are 23 percent smaller than other loupes. The Micro 2.5x magnifies the entire oral cavity while providing high resolution, true 2.5x enhancement.

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Left, the WireLess Mini headlight is powered by specialty rechargeable lithium-ion rechargeable cylindrical cells, and it comes complete with three batteries. Right, the Micro 2.5x loupes weigh as little as 1.2 ounces. Photos/Provided by Designs for Vision

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Sulzer Mixpac 1 ml system delivers big on flexibility

By Sulzer Mixpac Staff

Sulzer Mixpac has developed a new one-component system for hygienic dental applications: the 1 ml system. The product has a standard Luer Lock, which provides a highly secure connection because of its screw-thread design. And it comes with three different, bendable and rotatable cannulas.

The company reports that its 1 ml application system has an innovative, flexible cannula, which is available in three different gauges: 18, 20 and 22.

"The metal cannula on our Luer Lock tip is 360-degree rotatable and can be bent up to 180 degrees without reducing the inner diameter and the material flow. This allows an individual and safe application of low-viscosity to gel materials in difficult clinical situations," said Anja Stouten, the company's head of product management/dental.

Reliable quality

The metal cannula is rounded by a vibratory finishing process. Because of this special surface treatment, the metal is deburred, and therefore the cannula is optimally prepared to use on the patient, according to the company.

For the production of the 1 ml system, only high-quality, FDA-listed materials are used. This is the case for the plastic materials as well as for the medical stainless steel of the cannula.

Easy and safe handling

The application process is described by the company as being "intuitive."

The ergonomic design of the 1 ml cartridge ensures a stable and precise application.

The coated silicone O-ring facilitates application and reliably seals the system. The cartridges are available in white, black and transparent and thus suitable for different dental materials.



The metal cannula on the Luer Lock tip is 360-degree rotatable and can be bent up to 180 degrees without reducing the inner diameter and material flow. Photo/Provided by Sulzer Mixpac

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OT Equator and Smart Box

Removable attachment system works even with bone loss

Rhein83, which produces attachments for removable prosthesis, describes its OT EQUATOR as being the smallest dimensional attachment system on the market. The system employs a reduced vertical profile of 2.1 mm with a 4.4 mm diameter. According to the company, the attachment is compatible with all implant systems and brands and provides superior stability and retention for the prosthesis.

Features include:

- The smallest dimensional implant abutment available on the market.
- Manufactured to be compatible with all implant brands and platforms.
- Available in eight different gingival heights.
- Titanium coating procedure used to increase the attachment's hardness and durability.
- Variety of elastic retentive caps available.
- Smart Box system now available to enable corrections of more than 50 degrees in implant divergence.
- Single castable and threaded titanium attachment systems available.
- Customized ordering based on implant brand, diameter and gingival height.
- ISO 9001 – ISO 13485 valid certificates.
- Patent validated by FDA, CE, Russia, Canada, Japan, Korea and other countries.

For additional information, you can visit www.rhein83.com, send an email to marketing@rhein83.it or telephone internationally at 003 (905) 124-4510.

Smart Box

Rhein83 also has developed Smart Box, which can be used with the OT Equator in cases of extreme divergencies between the implants. The Smart Box has an inner tilting mechanism that enables a passive insertion with divergent implants up to 50 degrees.

An expert's opinion

Roberto Scarscia, DDS, is a prosthodontist specializing in bone regenerative surgery. He has written numerous clinical articles for publications in Italy and throughout the world (Roberto.scarscia@gmail.com). Following are his comments about his use of the OT Equator attachment system and the Smart Box:

In the implant prosthetic rehabilitation with an overdenture, the choice of the retentive systems is a crucial moment; it is fundamental to analyze and evaluate carefully the options provided by the market in order to avoid problems that may occur at an early stage or during the treatment.

Before the Smart Box, there was little chance (of being able to take advantage of the) performances of the OT Equator when there were severe divergences of the implants due to the lack of bone because of resorption in the jaws of older patients. In situations like these, a low-profile attachment is often the preferable solution, because it provides good stability and all the space for an esthetic denture.

Thanks to the innovative and original

mechanism of the Smart Box, we can extend the limit of usability of the OT Equator attachment without losing any of its performances and qualities.

The Smart Box, with its tilting mechanism, allows and facilitates the smooth insertion of the prosthesis, a positive feature of the OT Equator by Rhein83. Smart Box is a new product that provides us a good opportunity to enhance the solutions we can offer to our patients in our everyday work.

(Source: Rhein83)



The Rhein83 OT Equator and Smart Box attachment system. Photo/ Provided by Rhein83

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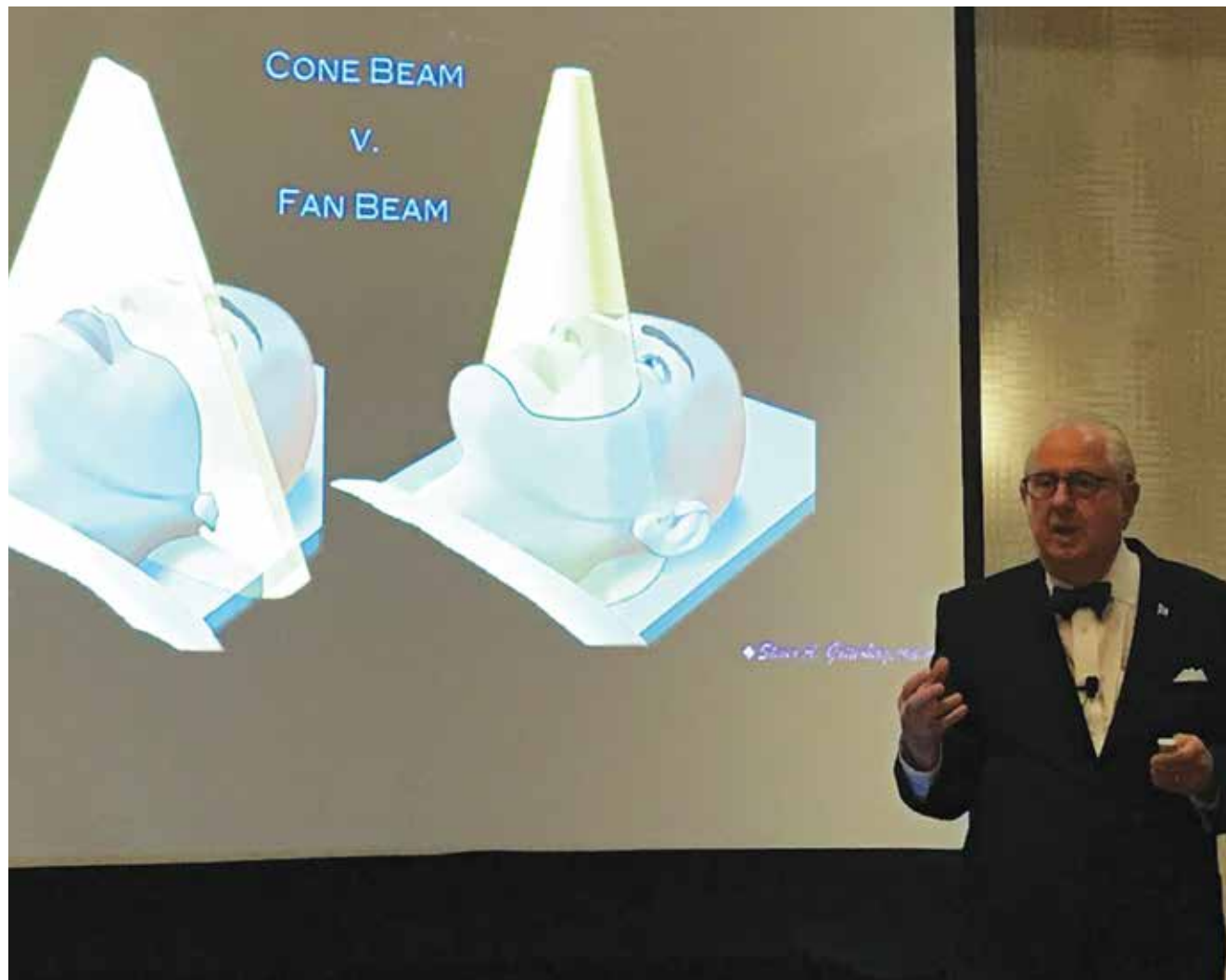
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Dr. Steven Guttenberg, an oral and maxillofacial surgeon, presents at the Greater Washington D.C. Academy of Osseointegration Study Club's anniversary meeting. Photo/Provided by the AO

AO Study Club celebrates milestone

Greater Washington group commemorates first year of successful programming

By AO Staff

Initiating one year ago as a pilot project, the Greater Washington D.C. Academy of Osseointegration Study Club (GWDOASC) is celebrating its success of becoming a model AO program to facilitate local collaboration, education and networking.

Held on April 20, the study club's recent one-year anniversary meeting included a presentation by Steven Guttenberg, DDS, MD, an oral and maxillofacial surgeon. Guttenberg was the first clinician to incorporate cone-beam CT radiol-

ogy in a private practice setting, according to the AO.

The GWDOASC is the culmination of a persistent, three-year effort of the AO Membership Committee initiated under chairman Dr. Jeffrey Ackerman, who serves as the study club's president. Other instrumental key organizers of this effort include Dr. Clarence Lindquist, former AO and Osseointegration Foundation (OF) president, and GWDOASC vice president, and Dr. Douglas Dompkowski, vice-chair of the AO Membership Committee, who serves as treasurer.

One of the major goals of GWDOASC is to allow AO members to utilize the organization's myriad online resources as part of a study club curriculum. These include webinars, e-posters, education modules, recordings from annual meetings and articles from the International Journal of Oral and Maxillofacial Surgeons (IJOMS).

The study club model also takes advantage of local AO experts to provide a curriculum for success and acts as an added membership value. Given its extremely successful performance, it's very likely this program will serve as a model to attract AO membership and be expanded to other parts of the country and the world.

"The greater Washington D.C. area is rich in resources and there are so many world-class local and visiting AO members who can present to the study club," Ackerman said.

However, he continued, this level of success may not as easily be achieved in every locality. According to Dr. Mehrdad Favaghi, a local periodontist and secretary of this group, an online forum is proposed to be included as a core piece of the study club curriculum for all AO members and

► See MILESTONE, page B3

AAP announces first recipient of SUNSTAR grant

By AAP Staff

The American Academy of Periodontology (AAP) is pleased to announce that member Yvonne Kapila, DDS, PhD, is the first recipient of its new SUNSTAR Innovation Grant (SIG). The \$30,000 research grant, a component of the AAP's recent partnership with oral health and technology company SUNSTAR, provides support to an AAP member whose research endeavors show significant potential to advance the science and practice of periodontics.

Kapila's research project, "Natural Bacteriocins as Pre/Pro-Biotics to Promote Oral Health and Prevent Periodontal Disease," was selected out of 15 grant submissions. This project aims to build a foundation for using pre- or pro-biotics containing nisin (commonly used as a food preservative) or nisin-secreting bacteria to promote the maintenance of a healthy oral microbiome and to prevent the formation of pathogenic biofilms associated with periodontal disease.

"The SUNSTAR Innovation Grant will allow our team of clinicians and scientists to explore nisin's effects on oral biofilm composition using both in vitro and in vivo model systems. Nisin has a long history of safety and broad range of biomedical applications, and it could add value in our understanding of periodontal health and periodontal disease prevention," said Kapila, professor and vice chair of the University of California, San Francisco, division of periodontology. "I am so pleased and honored that this important project was chosen by the AAP and SUNSTAR to receive additional funding."

► See GRANT, page B2



Dr. Yvonne Kapila

GRANT, Page B1

As part of the Innovation Grant program, SUNSTAR has committed to awarding six research grants to select AAP members over a three-year period beginning in 2017. The AAP's Research Submissions Committee examines all abstracts against criteria established by SUNSTAR and the academy.

"The SUNSTAR Innovation Grant not only provides generous support to innovative studies, but it also extends the reach of the academy's scientific agenda," said Terrence J. Griffin, DMD, president of the AAP. "By cultivating the clinical research of our members, the grant, in turn, provides avenues for enhancing overall patient health and wellbeing."

SUNSTAR fully supports Kapila's selection as the grant's inaugural winner. "SUNSTAR and the AAP share a common interest in innovative treatments and

'By cultivating the clinical research of our members, the grant, in turn, provides avenues for enhancing overall patient health and wellbeing.'

research that serve to alleviate the high burden of periodontitis in the U.S.," said Aaron Pfarrer, senior director, professional relations. "We are confident that Dr. Kapila's study will lay the groundwork for novel methods of periodontal disease prevention. We look forward to many important updates on this groundbreaking research."

Kapila will present the results of her study at a future AAP Annual Meeting.

The academy encourages members who are actively conducting scientific research in a clinical setting to submit research abstracts and proposals for consideration of future grant awards. Applications will be accepted in the fall.

For more information on the SUNSTAR Innovation Grant, contact Scientific Affairs Manager Stephanie Heffner at stephanie@perio.org.

About the AAP

The American Academy of Periodontology (AAP) represents more than 8,000 periodontists, specialists in the prevention, diagnosis and treatment of inflammatory diseases affecting the gums and supporting structures of the teeth, and in the placement of dental implants. Periodontics is one of the nine dental specialties recognized by the American Dental Association. Learn more at perio.org.

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AAID selects new executive director

By AAID Staff

The board of trustees of the American Academy of Implant Dentistry unanimously selected Cheryl Parker, CAE, to be the new executive director of the academy effective May 1.

Parker has a very strong background in the dental world, having most recently served for more than 10 years as director, academics, regulatory affairs and advocacy for the American Academy of Periodontology. She previously worked for nearly seven years for the American Dental Association. She was manager of the Tripartite Grassroots Membership

Initiative and manager of the Allied Dental Program Reviews/Dental Laboratory Technology Education (CODA). She has also earned the certified association executive designation from the American Society of Association Executives.

"I'm excited to become executive director of an organization that I have admired for years," Parker said. "We will continue to offer a variety of benefits and services that assist members in providing high-quality patient care and tools to enhance practice management."

Dr. Shankar Iyer, president of the AAID, speaking on behalf the leadership of the academy said: "By almost every measure, the AAID is the most successful organi-

zation in implant dentistry. We are very lucky that Cheryl was available at the time we decided to seek new leadership."

A graduate of the University of Illinois at Chicago, Parker is currently pursuing a master of science in public services at DePaul University. When weather permits, she enjoys biking along the lake front bike path. In her spare time, she is researching her family tree. She has discovered that one great-grandmother was a Civil War nurse and her great-grandfather, a member of the Union Army, was wounded in the battle of Antietam. "I'm trying to confirm my suspicion that they met while my grandfather was recuperating from his wound," Parker said.



Cheryl Parker

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as a mechanism to help serve members in remote areas. Furthermore, he added the GWDCAOSC intends to utilize AO research submissions, e-posters and other online learning modules as part of its curriculum and to increase research, e-poster and innovations submissions by featuring selected submissions as part of the curriculum.

The GWDCOAOS is an effort representative of AO's roots, as it was founded 30 years ago as a local study club in the Greater New York area, said AO board member Dr. Jeffrey Lloyd, who serves as the study club's liaison. "A level of independence from special interests and commercialization along with a strong commitment to science, education and collaboration among members, industry and other organizations has made the AO brand very appealing, and will allow AO to continue its growth as the world's premier dental implant organization.

"A worldwide network of local AO-affiliated study clubs will ensure a bright future for AO and its members — and ultimately for the patients who will benefit from the gift of osseointegration," he concluded.

Since its inaugural meeting on April 21, 2016, in McLean, Va., the GWDCAOSC has held seven meetings. Future programming for 2017-2018 is scheduled to include presentations by Dr. Peter Hunt, Dr. Charles Fields, Dr. Vincent Prestipino, Dr. Clarence Lindquist, Dr. Brian Mahler and Dr. Neil Starr, who recently presented at the AO 2017 Annual Meeting.

AO members interested in learning more about initiating a local AO study club should contact either Dr. Dompkowski at dompkowskidds@verizon.net or Dr. Favagehi at mfavagehi@yahoo.com.

About the Academy of Osseointegration

With nearly 6,000 members in 70 countries around the world, AO is recognized as a premier international association for professionals interested in implant dentistry. AO serves as a nexus where specialists and generalists can come together to evaluate emerging research, technology and techniques; share best information; and coordinate optimal patient care using timely, evidence-based science and methods. Follow on Facebook and Twitter @AcademyOsseo.

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