

# DENTAL TRIBUNE

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PSOMP  
Conference

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for reliable and  
predictable ...

CLINICAL IMPLANTOLOGY

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## Dr Arif Alvi becomes 13th President of Pakistan



DT Pakistan Report

**K**ARACHI - Dr. Arif-ur-Rehman Alvi was voted the President of Islamic Republic of Pakistan on September 5th 2018, and assumed office on September 9th. President Dr Arif Alvi, a close ally of PM Imran Khan, was one of the founding members of Pakistan Tehreek-e-Insaf (PTI), the winning political party of General Elections Pakistan 2018. After Fatima Ali Jinnah, he is the first dentist to make a name in Pakistani politics, and the second ever dentist to become the president of a country.

President Alvi was born in a well-educated family on August 29th 1949, in Karachi, where his father had settled with family post-partition. He split his time between several locations on account of the different places he travelled to for his education. He received his early education in his home town, in

Karachi. For his degree in Bachelor of Dental Surgery, Alvi got enrolled in the University of Punjab, in Lahore. He acquired his Master's degree in Prosthodontics after undergoing two years of postgraduate training at the University of Michigan Ann Arbor, in 1975. For his second postgraduate programme he earned a Master of Science in Dentistry (MSD) in Orthodontics from the University of Pacific San Francisco, in 1984. Later, he went on to become an acknowledged and esteemed contributor of the global dental community. In 1995, he was awarded Diplomate American Board of Orthodontists and became one of the ten Asians with this level of qualification. His achievements are recognized and appreciated worldwide. On being elected as Pakistan's president, Dr Alvi received congratulatory messages from various dental associations

globally, among which were Pakistan Dental Association, Asia Pacific Dental Federation, and Turkish Dental Association. This year, FDI in its annual meeting, World Dental Conference, held in Buenos Aires, Argentina, honoured Dr Arif Alvi for his many contributions to the dental community and on being elected as Pakistan's President.

Dr Arif Alvi inherited his passion in dentistry from his father, Dr Habib-ur-Rehman Elahi Alvi, who is known to be the dentist of India's first Prime Minister, Jawaharlal Nehru. After partition, and migration to Pakistan, Dr Elahi established a Dental Clinic in Saddar, Karachi. The Alvi clan claims to be in the profession of Dentistry for over a century, since 1880 to be precise. It does not come across as shocking, given that his father, his uncles and aunts, Alvi

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FDI WDC 2018

Dr Kell: The absolute meeting point for the oral health profession

DT Pakistan Report

**B**UENOS AIRES, ARGENTINA - From 5th to 8th September, the capital of Argentina was the meeting point for dental professionals from around the world. According to FDI, close to 8000 participants from 130



countries travelled to South America to make use of the numerous opportunities to learn and network at the 106th World Dental Congress (WDC). Among the highlights were papers by key opinion leaders and the state-of-the-art dental technology on display at the industry exhibition. In total, over 150 speakers held lectures across the four days of congress.

In order to facilitate accessibility, most lectures were simultaneously interpreted or available on screen in both English and Spanish. The event officially opened with traditional dances, speeches and a warm welcome by FDI President Dr Kathryn Kell.

Vice chairman APDF, Dr Asif Niaz Arain and Professor Dr. Fazal Ghani, Head of Prosthodontics Department, Dean Postgraduate Dental Sciences and Coordinator Dental International, Peshawar Dental College (Pakistan), who was awarded the FDI's Travel Grant'18 was present at the event as the

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PAKISTAN DENTAL ASSOCIATION ADVISORY NOTE

Restricting the use of dental amalgam in children under 15 years, and pregnant women

By Dr. Mahmood Shah

Dental amalgam is a commonly used restorative material, which is comprised of approximately 50% mercury. Numerous data related to dental mercury toxicity are available, which suggest that children are most susceptible to its toxic effect. Mercury toxicity in children is likely to cause neurological, reproductive, and renal problems, which are long-term. These problems are most likely to adversely affect their health, education and well-being. In many countries, the use of dental amalgam has already been banned, restricted or discouraged for children below 15 years of age & women that are pregnant or breastfeed their infants.

Worldwide recognition of the serious impact of mercury pollution led to the Minamata Convention on Mercury, which was named after Minamata city in Japan, where major industrial release of mercury waste took place during 1930s to 1960s. The Convention was adopted in 2013, and

has been agreed upon and signed by almost 130 countries ever since, including Pakistan. The aim of the Convention is to reduce the trade and supply of mercury by preventing its unnecessary use in products and manufacturing processes, with the overall objective of reducing environmental mercury pollution and the consequent risk to human health. The Minamata Convention on Mercury also requires that participating countries phase-down their use of dental amalgam.

Subsequently, the European Commission Regulation on Mercury was adopted by Member States on 17 May 2017 to ratify and enforce the Minamata Convention. It was decided in the regulation that from 1st July

2018, Dental Amalgam shall not be used for dental treatment of Deciduous Teeth, of Children under 15 years, and of Pregnant or Breastfeeding Women, except when deemed strictly necessary by the Dental Practitioner based on the specific medical needs of the patient.



PMDC Adhoc Committee meets with CJP

DT Pakistan Report

ISLAMABAD - Pakistan Medical and Dental Council 's (PMDC) Ad hoc committee, headed by Chairman, Justice (Retd) Mian Shakerullah Jan, scheduled a meeting with the Chief Justice of Pakistan (CJP), Mian Saqib Nisar.



Attorney General of Pakistan, Mr. Anwar Mansoor Khan was also a part of this meeting. The adhoc committee notified the Chief Justice regarding the progress and draft rules of the council.

The committee members also expressed their gratitude towards the CJP, for showing concerns over the grave national issues of healthcare and education.

This particular adhoc panel came into being after the Council was dissolved on the orders of Supreme Court, over the lapse of a Presidential Ordinance promulgated for its creation.

Though the panel headed by former Supreme Court Judge, Shakerullah Jan, it is still instructed to stay put, until the government replaces it with a nominated or elected Council.

38th International Dental Show (IDS), Germany

The upcoming IDS is being held on March 12th-16th 2019 in Cologne, Germany. The aim is to comprehensively present the cutting-edge technological advancement in the field of dentistry, with the thought of encouraging collaboration between dentists and the dental technicians.

In the past decade, digital technology mushroomed at a remarkable pace, proliferating all kinds of practices, including the ones that were thought of as staying conventional, or connected to their traditional roots. One of the areas that has been more than welcoming to the concept of advancing technology is dentistry. Among other medical fields, dentistry has the potential to relish the most benefits from digitalization, due to its diverse nature that is gravid with a tight-knitted combination of medicine, technology, and

aesthetic. Gesellschaft zur Förderung der Dental-Industrie mbH (GFDI) organizes a biennial event: The International Dental Show.

These events strive to promote advancement in dental practice, by demonstrating futuristic possibilities, cultivating constructive discussions, and, educating the participants with valuable advices and guidelines. "Here digital systems, planning tools, different production options and their application within the team can be experienced close-up and in a diversity that cannot be found anywhere else," said Dr. Markus Heibach, Executive Director VDDI.

An important goal of this year's IDS is to spread the realization of, and respect for the fact that the considerations given to material and production departments should

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**References:** 1. Collins LMC, Dawes C. *J Dent Res.* 1987;66:1300-1302. 2. Fine DH, Sreenivasan PK, McKiernan M, et al. *J Clin Periodontol.* 2012;39:1056-1064. 3. Data on file. Data analysis from reference 2: analysis of antimicrobial effect of 3 toothpastes on teeth, tongue, cheeks and gums. Reductions shown represent ≥ 50% bacterial reduction on 100% of mouth surfaces.



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## 1ST INTERNATIONAL PSOMP CONFERENCE

# Oral pathology an emerging specialty

DT Pakistan Report

**K**ARACHI - The first international conference under the aegis of Pakistan Society of Oral and Maxillofacial Pathology (PSOMP) was held at Ziauddin Hospital, Karachi. The conference attracted a huge response, and people from all over Pakistan attended the event. Both national and international speakers participated in the conference. The event started with recitation from the Holy Quran followed, by presentations from distinguished speakers including Prof. Dr. Mervyn Hosein, Dean Faculty of Dentistry, Prof. Dr. Shahid Pervaiz, HOD Pathology Department, AKUH, and Prof. Dr. Talat Mirza, Prof. of Pathology and Director Research. Dr Mervyn M. Hosein's presentation on 'Oral Cancer; Disease Burden and Challenges' provided a lot of insight into OSF incidence in Pakistan.

The conference covered multiple topics including in-depth knowledge on progression of head and neck cancer, its epidemiology, etio-pathogenesis, molecular progression, and latest advancements. Prof. Arshad Malik presented on 'Trigeminal Neuralgia and Related Oro-facial Pain'.

Under graduate and post graduate poster competition was held which was won by FJDC and LCMD, 2nd Position went to Ziauddin University, and 3rd position was grabbed by DIDC, DUHS.

Pakistan Society of Oral and Maxillofacial Pathology (PSOMP) came into being in 2013 through the efforts of Dr. Nauman Rauf Khan, who is currently the chairman of the society. Executive council included Dr. Asifa Iqbal and Dr. Joharia Azhar from Lahore and Islamabad, respectively. Dr Nauman Khan nominated Prof. Dr. Arshad Malik as the First President of the council. Later regional councils were constituted in KPK, Federal, Punjab, Baluchistan, and Sindh. Regional Council meetings and seminars are held annually. Karachi got the privilege of holding the first international PSOMP conference, at Ziauddin University (Clifton Campus), Karachi.

The event also witnessed central council elections. All five provincial presidents participated in the ballot. Dr. Saima Chaudhry from Punjab, Dr. Sultan Zeb from KPK, Dr. Nabiha Farashat from Baluchistan, Dr. Salik Rasool from Sindh, and Dr. Beenish Zubair from federal council were the



candidates for the post of central council President.

Dr. Sultan Zaib Khan, President KP Council won after a tight competition with Dr Saima Chaudhry, and was elected as the new president of the society. Society also awarded PhD faculty with honorary fellowship at the convocation to Prof. Arshad Malik, Dr. Sultan Zaib Khan, Dr. Saima Chaudhry, Dr. Farhat Kazmi, Dr. Erum Khan, and Dr. Sadia Iqbal, Prof. Dr. Arshad Malik was also awarded as

President Emeritus by all regional council presidents. A tribute was given to late Prof. Abdul Qadir Khehro for his services to Sindh council, and to Prof. Dr Arshad Malik for his tireless effort for the society. Dental News was also awarded a gold medal for the services rendered to the profession.

The event was well managed and highlighted the fact that Oral pathology is an emerging specialty that has a lot of scope in Pakistan.

## One dental surgeon running an entire tertiary care hospital

DT Pakistan Report

**L**ARKANA - The largest tertiary-care hospital of rural Sindh, is currently being run by only one Senior Dental Surgeon of BPS-18, which indicates towards the condition of governance in Sindh.

Earlier, it was revealed that, 02 dental surgeons were catering patients with dental ailments of not only the entire district of Larkana, but were also dealing with medico-legal cases; and recently, one of them retired.

In this connection, the Medical Superintendent, Chandka Medical College Hospital (CMCH), recently sent an urgent letter to the Director General, Health Services, Sindh, Hyderabad,

requesting him to increase posts of Dental Surgeons in the SNE.

The letter also shed light upon the issue of handling Medico-Legal cases and Maxillofacial Surgeries, which cannot be dealt with by a single doctor. Due to the immense amount of workload, one dental surgeon cannot well.

It must be mentioned here that, a 30-bedded Dental Department was established in CMCH in 2015, costing millions of rupees but uptil now, no patient has been admitted due to scarcity of proper doctors. The machinery, equipment and instruments costing approximately Rs 20 million have gone to waste, as nobody is available to use them for the benefit of poor patients.



Private clinics of specialist doctors, who work under Benazir Bhutto Medical University are flourishing. OPD operated under and by the dental surgeons of Bibi Aseefa Dental College (BADC) is working, but CMCH 's OPD was closed down arbitrarily after opening of BADC, causing issues for needy patients. At BADC, patients have to pay for various treatments, whereas

at CMCH services were provided free of cost.

Moving onto the matter of BADC doctors handling Medico-Legal cases, they have refused to examine or operate on such cases, to avoid making frequent appearances in courts.

Sources disclosed that, District Hospital, Shikarpur has 09 posts of dentists and dental surgeons, Nawabshah has 07 posts, Jacobabad 06

posts, Liaquat University Hospital has 12 posts and they are demanding creation of 30 more posts due to rush of patients, but CMCH has constantly been ignored for unknown reasons by the Government during their past 10 years rule, despite the fact that indisposed people of more than 12 districts reach out to this particular health facility to get medical treatment and undergo surgeries.



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# FDI World Dental Congress 2018 welcomed the world of dentistry to South America

**B**UENOS AIRES, ARGENTINA - Thirty years after it was first held in the country, this year the FDI World Dental Congress (WDC) returned to Buenos Aires. Despite the three decades that had passed, FDI's aim to make its annual congress "the absolute meeting point for the oral health profession" remained unchanged. The event was officially opened with traditional dances, speeches and a most warm welcome by FDI President Dr. Kathryn Kell.

After a very busy first day, congress attendees, FDI delegates and industry officials met in the general assembly hall at La Rural to celebrate the official opening. A big round of applause met Kell's entering of the stage, where she greeted the audience and thanked everyone for travelling from near and far to take part in the 106th flagship event of FDI.

"Together we can celebrate being part of FDI's rich network and local communities who are committed to improving our overall well-being worldwide. I wish you an excellent congress, and from all of us at FDI thank you for being here," said Kell.



At the 2018 World Dental Congress opening, Dr. Kathryn Kell, President of the FDI World Dental Federation, welcomed attendees with a stirring address. (Photograph: Monique Mehler; Dental Tribune International)

In his address, Dr. Guillermo Rivero, President of the Argentine dental association (Confederación Odontológica de la República Argentina), added: "We have achieved

an excellent scientific program which will provide excellent opportunities to learn new and develop existing skills at this multifaceted congress." He furthermore highlighted the

importance and positive influence meetings like the WDC had on the reputation and development of emerging countries such as Argentina.

After the speeches, the audience was treated to rich cultural performances, with a spectacular tango, followed by the traditional flag ceremony in which the whole audience passionately engaged, and an entertaining Argentine gaucho dance show.

Thousands of dental professionals from all around the world appeared to attend the four-day WDC, which was organized by Istanbul-based company evronas events and the Argentine dental association. More than 160 lectures and presentations, as well as other events related to oral disease prevention and management were planned for the congress. In addition, local and global manufacturers were to showcase their latest products and

services at the exhibition in the green and yellow pavilions. From September 5th until 8th, Buenos Aires was to be the world capital of dentistry- **Dental Tribune International**

## FDI Women Dentists Worldwide gathers for forum

**B**UENOS AIRES, ARGENTINA - On 7 September, an international group of female dentists and opinion leaders in several specialties met for the FDI Women Dentists Worldwide Forum. The session was titled "Leading technologies-Impact of knowledge to clinical practice" and consisted of papers presented by three women dentists who are all part of Women Dentists Worldwide.

Moderator of the session and Women Dentists Worldwide Chair Dr. Vesna Barac-Furtinger led the audience, which consisted of men and women alike, through the program. She explained that FDI Women Dentists Worldwide exists to coordinate the activities of the national groups, promote the collection of information about women dentists and their pattern of working, and address inequalities where they exist. Furthermore, it aims to facilitate contacts between women and enhance their full participation in all branches of the profession on a worldwide basis.

Before introducing the first speaker of the morning, Barac-Furtinger welcomed honorary guest FDI President Dr. Kathryn Kell, who joined the forum for the lectures and networking opportunities. As a dentist, Kell has been a longtime member and



Women Dentists Worldwide Forum attendees got together for a group photo with FDI President Dr. Kathryn Kell. (Photograph: Monique Mehler; Dental Tribune International)

supporter of Women Dentists Worldwide. Dr. Nermin Yamalik, who is a periodontist and professor at Hacettepe University in Ankara, Turkey, gave the first lecture, titled "Evidence based dentistry (EBD) and critical thinking." She pointed out that EBD and critical thinking are crucial from both a scientific and dental practice viewpoint. This is due to their potential impact on the outcome of dental treatment and the success of the dental practice, she said.

The second speaker was orthodontist Dr. Simona Dianiskova from Bratislava, Slovakia, where besides working in her own practice, she teaches at the Slovak Medical University. Her lecture "Digitalisation in orthodontic practice" addressed

how modern technology has simplified her everyday work. At the end of her lecture, Dianiskova thanked FDI for providing women from all over the world with a platform for learning, sharing and networking.

Lastly, American board-certified orthodontist Dr. Jina Lee Linton presented her paper, "3D digital-CCO System, scale up in orthodontics." Linton lives and works in Seoul, South Korea. During her lecture, she introduced 3-D biodigital diagnosis and treatment planning. Furthermore, she explained what the Complete Clinical Orthodontics System is, and how to accomplish speedy, efficient, predictable, and stable outcomes using it. - **Dental Tribune International**



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# Dynamic navigation for reliable and predictable flapless implant placement

By Dr David Burgess

A 52-year-old female patient was concerned about the appearance of her smile. Her upper right first molar and second premolar had been missing for several years (Figs. 1 and 2). She was otherwise a fit and healthy non-smoker. The patient was unwilling to consider a denture and was not keen for the symptomless adjacent teeth to be prepared for bridgework, particularly the upper right first premolar, which was unfilled. She did not wish to have any form of removable prosthesis. She chose to have implant-supported crowns, as she wanted the final restoration to be as close as possible to having natural teeth.

**Clinical examination and planning**

before implant surgery. A NaviStent was fabricated and a fiducial marker attached, prior to the CBCT scan. Fabrication of the NaviStent is quick, easy and takes place chairside, using a unique thermo-plastic material which is moulded directly onto the patient's existing dentition. The NaviStent is designed and fabricated to ensure a high level of stability, while providing unrestricted access to the planned implant sites.

The scan was taken with a Morita 3-D CBCT system, which provides high definition, distortion-free images for accurate diagnosis and planning. Radiographic and CBCT examination revealed approximately 9 mm of bone depth, from the crest of the ridge to the floor of the maxillary antrum, in the upper right second premolar site,

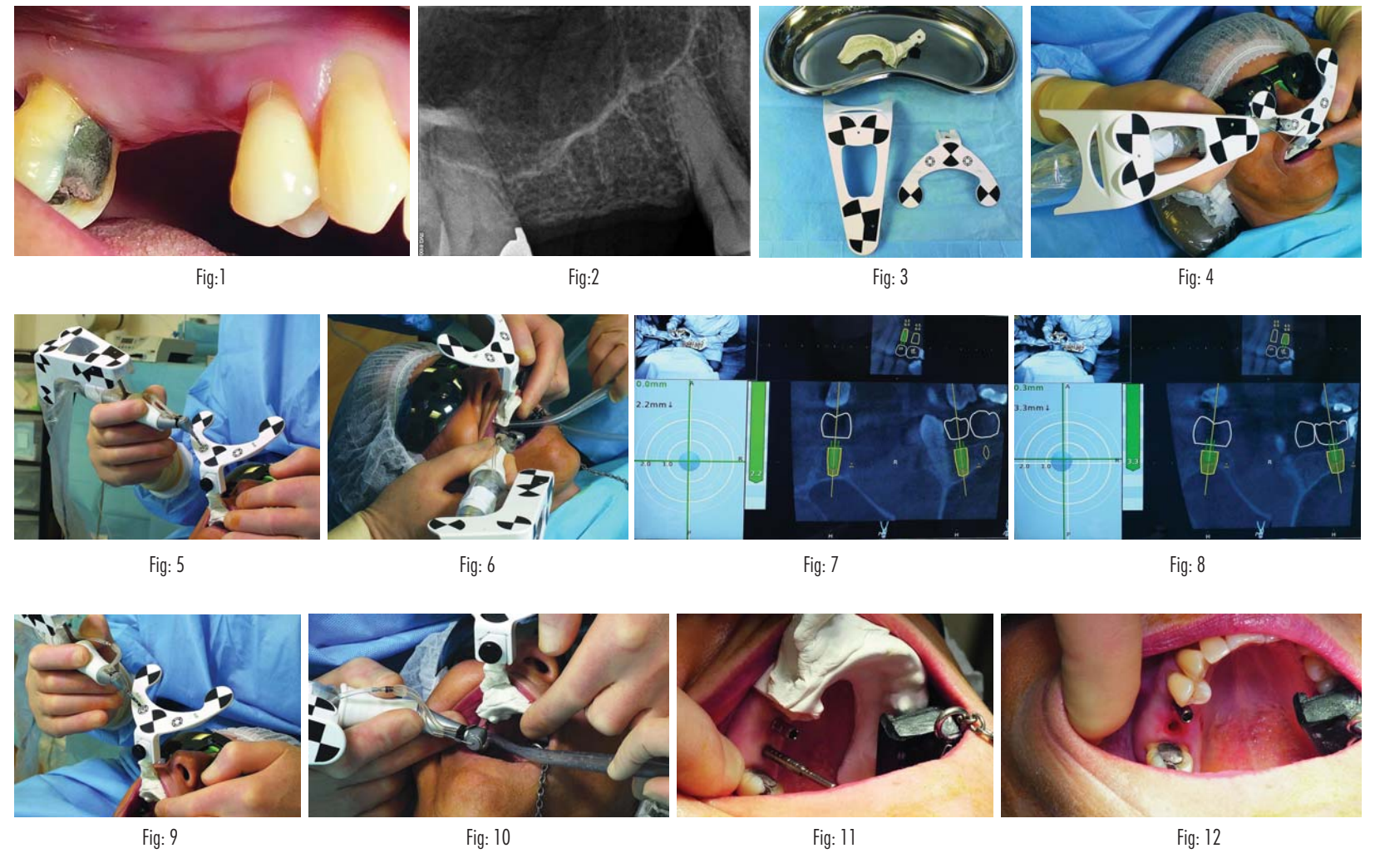
crowns were planned prior to treatment and the consequent position of the implants determined, so that the optimum restoration could be achieved.

Due to the limited bone depth in the first molar site, augmentation of the ridge was planned by utilising the internal sinus lift (or Summer's) technique. The minimally invasive procedure allowed placement of dental implants in a site with reduced bone depth, without causing iatrogenic sequelae through damaging an intact Schneiderian membrane.

**Flapless procedure**

Treatment was carried out under local anaesthesia. The flapless procedure resulted in minimal trauma to the gingival tissue overlying the ridge. The previously constructed

the sinus lift. Navident provided visual confirmation of the position of the drill tip to accurately gauge the correct depth (Fig. 8). Preparation continued using a 3.5 mm drill bit, which, again, was calibrated and verified before use (Figs. 9 and 10). A 3.5 mm diameter and 8 mm length Dentsply Ankylos C/X implant was placed 1 mm subcrestally in the upper right second premolar site. A guide pin was placed in the upper right first molar site to check the depth and alignment (Fig. 11). The NaviStent was removed and the site was prepared for the sinus lift osteotome (Figs. 12 and 13). The osteotome was tapped gently with a surgical mallet until the remaining thin layer of bone fractured and was elevated (Fig. 14). The Schneiderian



Clinical examination suggested that the bucco-palatal width of the maxillary ridge was wide enough to consider flapless surgery. This had added appeal, as the patient was travelling a great distance for the treatment, so wished to minimise the number of appointments and the potential for postoperative complications.

Computer-guided dynamic navigation with Navident by ClaroNav was used in the preparation of this case. Scanning and planning took place during the assessment visit, 48 hours

and no more than 5 mm bone depth in the first molar site. Planning took place immediately after the scan, with the patient present, so she could see the proposed treatment on the Navident software. She felt reassured by the care being taken to achieve optimum implant positioning, with minimal risk of potential complications, and was extremely impressed with the technology.

The Navident planning software allowed the placement of the implants to be restoratively driven. The size, shape and position of the intended

NaviStent, and the drill tag and jaw tag supplied by ClaroNav, were prepared immediately prior to surgery (Fig. 3). In accordance with the Navident protocol, the axis of the drill and tip of the pilot drill were calibrated (Figs. 4 and 5) and verified before site preparation commenced (Fig. 6). Using computer-guided surgery, the pathway of the drill could be followed clearly on the computer screen positioned in front of the patient (Fig. 7). Approximately 1 mm of bone was left intact in the upper right first molar site ready for

membrane was carefully raised through manipulation with the osteotome and a heterogeneous bovine bone graft material (Bio-Oss, Geistlich) was introduced into the implant site (Fig. 15). A 4.5 mm diameter and 6.6 mm length Ankylos C/X implant was then placed 1 mm subcrestally (Figs. 16 and 17). Both implants had good primary stability on placement. Ankylos Balance posterior sulcus formers were fitted, without the need for additional closure with sutures (Fig. 18).

Continued on page 12



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