

ROUTINE FULL PROSTHESIS ON IMPLANTS

Detailed case study documents overdentures as viable choice among restoration options for edentulous patients.

► page A6



CAD/CAM FOR ANTERIOR RESTORATIONS

CAD/CAM expert Dr. Dhaval Patel demystifies using the technology to achieve esthetic anterior restorations.

► page A8

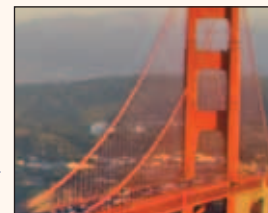


IMPLANT TRIBUNE

ICOI SUMMER IMPLANT SYMPOSIUM

International Congress of Oral Implantologists will be in San Francisco, Aug. 14–16.

► page B1



Protein that helps suppress oral cancer diminishes with age

Researchers at UCLA have found that a protein that serves as a suppressor of cancer diminishes in skin and mouth epithelial cells as the human body ages.

Dr. No-Hee Park, dean of the UCLA School of Dentistry, and his research team have been studying p53, a tumor suppressor protein known as “the guardian of the genome” because of its involvement in DNA repair, cell cycle regulation and cellular deterioration.

“Looking at ways to maintain levels of p53 as one ages may provide a therapeutic clue to preventing cancer development,” said Park, who is also a distinguished professor in the departments of dentistry and medicine at UCLA.

Previous studies have shown that p53 accumulates in large quantities as connective tissue cells, called fibroblasts, age and stop dividing. It has been believed that the accumulation of p53 causes cells to stop dividing, which prevents out-of-control cells from growing into tumors.

In a paper published online by the journal *Aging Cell*, the researchers found that in epithelial cells lining the skin and the mouth, the level of p53 is reduced, rather than enhanced, when cells age.

Epithelial cells line the major cavities of the body, including most organs, such as the mouth, stomach, small intestine, kid-

ney and pancreas. These cells have a set level of p53 that provides protection from environmental factors. With less p53, older epithelial cells have a harder time maintaining the integrity of their genetic material when they encounter carcinogens, which allows cancer to develop.

Park and his team reported that in humans, the level of p53 in skin and mouth epithelial cells decreased with age by epigenetic (external and environmental) factors, not by the changes of the p53 DNA sequence. “Inasmuch as approximately 90 percent of human cancers are originated from epithelial cells, we suspect this may have to do with the increased incidences of skin and oral cancers in elderly patients,” said Dr. Reuben Kim, an associate professor at UCLA Dentistry and a co-corresponding author of the study.

The study’s other authors are Drs. Mo Kang, Terresa Kim, Paul Yang, Susan Bae, Drake Williams, Samantha Phung, Ki-Hyuk Shin and Christine Hong, all of UCLA Dentistry. The study was supported by the National Institute of Dental and Craniofacial Research of the National Institutes of Health and by the University of California Cancer Research Coordinating Committee and the UCLA Chancellor’s Office.

(Source: UCLA)



The iconic Royce Hall on the UCLA campus. Researchers at the university’s school of dentistry recently determined that a known cancer-suppressing protein in skin and mouth epithelial cells decreases with age because of external and environmental factors. The research team wants to learn why — with the goal of revealing therapeutic clues to preventing the development of skin and oral cancers as people age. Photo/Provided by UCLA

EVENTS

A2

- New meaning to being green in Vancouver: 2016 Pacific Dental Conference to incorporate St. Patrick’s Day festive spirit
- Interest growing in bio-emulation: Attendance at 2015 Bio-Emulation Colloquium, July 4 and 5 in Berlin, more than doubles last year’s

INDUSTRY NEWS

A4–A5

- Market’s smallest dimensional attachment system is compatible with all implants: Rhein’83 OT Equator has reduced vertical profile of 2.1 mm and diameter of 4.4 mm
- Interested in owning a practice? Check out Wiley Publishing’s papers on ownership, courtesy of Aspen Dental
- Oral Health America and Little League Baseball and Softball team up for competition that educates youth on dangers of spit tobacco
- September Dental Tribune Study Club live webinar: Three secrets to esthetic anterior CEREC CAD/CAM restorations

LAB INDUSTRY CLINICAL

A6–A8

- Implant-supported total prosthesis in the daily routine

AD

Are you juggling with MULTIPLE BONDS?

FUTURABOND U can do it ALL!

The ONLY bond for ALL your adhesive dentistry, without the need of any extra primers or activators.

Futurabond U
Dual-Cure Universal Adhesive

www.vocoamerica.com

Call 1-888-658-2584

PRST STD
US Postage Paid
Permit No. 1239
Bellmawr, N.J.

Dental Tribune America
116 West 23rd Street
Suite #500
New York, N.Y. 10011

New meaning to being green in Vancouver

2016 Pacific Dental Conference to incorporate St. Patrick's Day festive spirit

With opening day of next year's Pacific Dental Conference falling on St. Patrick's Day, attendees will get to experience the Irish holiday with a Western Canada flavor — while also earning C.E. credits.

The PDC, which typically attracts more than 12,500 dental professionals, will be from March 17–19 in Vancouver.

More than 130 local, North American and international speakers will present 150 open sessions and 36 hands-on courses covering a variety of topics. Attendees also will be able to explore Canada's largest two-day dental tradeshow (with more than 300 exhibitors), getting the year's first chance in Canada at seeing the latest in dental equipment and services.

For most attendees, C.E. credit is given for general attendance (up to five hours) and individual courses (up to 20 C.E. credits).

Online registration opens Oct. 15 at www.pdconf.com. Special hotel rates are available now.

(Source: Pacific Dental Conference)



It's not just the roof of the Vancouver Convention Centre that will be green at the next Pacific Dental Conference. Because the 2016 PDC opens on St. Patrick's Day, attendees will get the chance to experience Western Canada's take on the Irish holiday.

Photo/Provided by the Vancouver Convention Centre

DENTAL TRIBUNE

The World's Dental Newspaper - US Edition

PUBLISHER & CHAIRMAN

Torsten Oemus t.oemus@dental-tribune.com

PRESIDENT & CHIEF EXECUTIVE OFFICER

Eric Seid e.seid@dental-tribune.com

GROUP EDITOR

Kristine Colker k.colker@dental-tribune.com

EDITOR IN CHIEF DENTAL TRIBUNE

Dr. David L. Hoexter feedback@dental-tribune.com

MANAGING EDITOR U.S. AND CANADA EDITIONS

Robert Selleck r.selleck@dental-tribune.com

MANAGING EDITOR

Fred Michmershuizen
f.michmershuizen@dental-tribune.com

MANAGING EDITOR

Sierra Rendon s.rendon@dental-tribune.com

PRODUCT/ACCOUNT MANAGER

Humberto Estrada h.estrada@dental-tribune.com

PRODUCT/ACCOUNT MANAGER

Will Kenyon w.kenyon@dental-tribune.com

PRODUCT/ACCOUNT MANAGER

Maria Kaiser m.kaiser@dental-tribune.com

BUSINESS DEVELOPMENT MANAGER

Travis Gittens t.gittens@dental-tribune.com

EDUCATION DIRECTOR

Christiane Ferret c.ferret@dtstudyclub.com

ACCOUNTING COORDINATOR

Nirmala Singh n.singh@dental-tribune.com

Tribune America LLC
116 West 23rd St., Ste. #500
New York, N.Y. 10011
(212) 244-7181

Published by Tribune America
© 2015 Tribune America, LLC
All rights reserved.

Dental Tribune strives to maintain the utmost accuracy in its news and clinical reports. If you find a factual error or content that requires clarification, please contact Managing Editor Robert Selleck at r.selleck@dental-tribune.com. Dental Tribune cannot assume responsibility for the validity of product claims or for typographical errors. The publisher also does not assume responsibility for product names or statements made by advertisers. Opinions expressed by authors are their own and may not reflect those of Tribune America.

EDITORIAL BOARD

Dr. Joel Berg
Dr. L. Stephen Buchanan
Dr. Arnaldo Castellucci
Dr. Gordon Christensen
Dr. Rella Christensen
Dr. William Dickerson
Hugh Doherty
Dr. James Doundoulakis
Dr. David Garber
Dr. Fay Goldstep
Dr. Howard Glazer
Dr. Harold Heymann
Dr. Karl Leinfelder
Dr. Roger Levin
Dr. Carl E. Misch
Dr. Dan Nathanson
Dr. Chester Redhead
Dr. Irwin Smigel
Dr. Jon Suzuki
Dr. Dennis Tartakow
Dr. Dan Ward

Tell us what you think!

Do you have general comments or criticism you would like to share? Is there a particular topic you would like to see articles about in Dental Tribune? Let us know by sending an email to feedback@dental-tribune.com. We look forward to hearing from you!

If you would like to make any change to your subscription (name, address or to opt out) please send us an email at c.maragh@dental-tribune.com and be sure to include which publication you are referring to. Also, please note that subscription changes can take up to six weeks to process.


AD

Live Webinar on www.DTStudyClub.com

Demystify Anterior CEREC®: 3 Secrets to Esthetic Restorations


**Thursday, September 3, 2015
5:00PM (PST)**

**Dhaval Patel, DDS
1 CE Credit**




Dhaval Patel, DDS
PDS®-Supported
Multiple-Office Owner Dentist

Free for DTStudyClub members
Register for FREE on
www.DTStudyClub.com



**PACIFIC
DENTAL SERVICES®**



ADA CERP® | Continuing Education
Recognition Program

ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply endorsement of credit hours by boards of dentistry.

Interest growing in bio-emulation

By Dental Tribune International

The 2015 Bio-Emulation Colloquium, held July 4 and 5 in Berlin, more than doubled in attendance compared with its premiere last year in Santorini, Greece. More than 300 dentists and dental technicians attended the 16 lectures and 13 workshops on biomimetics in dentistry.

The event was organized by Dental Tribune International in collaboration with the Bio-Emulation Group.

Key opinion leaders in adhesive and restorative dentistry provided insights on the latest methods in a histo-anatomical approach to emulating nature and achieving high esthetic standards.

Attendees learned about mechanical and optical properties of natural teeth and gained knowledge on techniques and materials. Many of the workshops, such as Dr. Pascal Magne's session on dental morphology function and esthetics, were fully booked. More than 95 percent of attendees completing evaluation surveys said they would "definitely recommend" the event.

The colloquium was held at the European School of Management and Technology, a historical site in the center of Berlin, next to the office of the German Ministry of Foreign Affairs. The landmark building was refurbished in 2004 and 2005, transforming into the private business school.

Dental manufacturer GC Europe was the event's main sponsor, and Shofu Dental Corp. was the official partner. Other sponsors/supporters were Ivoclar Vivadent, CROIXTURE, American Dental Systems, anaxdent and Velopex International.

“My personal journey at LVI taught me the most cutting edge techniques in dentistry. It taught me how important it is to work on my business and most of all to **love what I do** and provide my patients with life changing dentistry.”

Dr. Conchi M. Sanchez-Garcia, Miami, FL



**LOVE WHAT YOU DO.
DO WHAT YOU LOVE.
LVI CAN SHOW YOU HOW.**

888.584.3237 | LVI Global.com | concierge@lviglobal.com



Changing Dentistry. Changing Lives.

ADA CERP® | Continuing Education Recognition Program



Las Vegas Institute for Advanced Dental Studies, LVI Global is an ADA Recognized Provider ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education. ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to ADA CERP at www.ada.org/goto/cerp.

Academy of General Dentistry Approved PACE Program Provider FAGD/MAGD Credit Approval does not imply acceptance by a state or provincial board of dentistry or AGD endorsement 6-1-15 to 5-31-19 Provider ID 208412

Market's smallest dimensional attachment system is compatible with all implants

Rhein'83 OT Equator has a reduced vertical profile of 2.1 mm and diameter of 4.4 mm

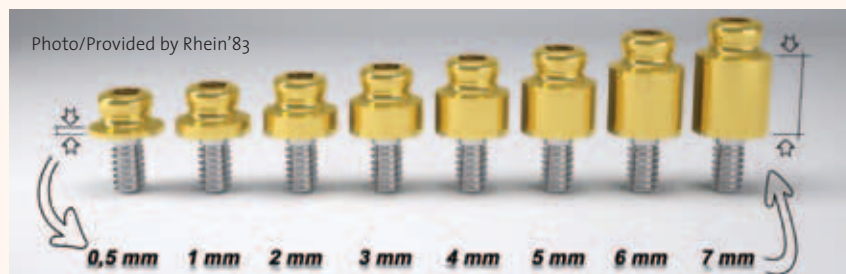
Rhein'83, a global producer of precision attachments on removable prosthesis, describes its OT Equator as the smallest dimensional attachment system on the market. It has a reduced vertical profile of 2.1 mm and diameter of 4.4 mm (metal housing included). It is compatible with any implant brand.

Because of its shape, Equator provides superior stability when compared with

traditional attachments, according to the company. It corrects divergence of up to 25 degrees, the company reports. Functionality is guaranteed by coupling of attachment and cap.

Caps are available in four colors, based on levels of retention — from a minimum of 0.6 kg to a maximum of 2.7 kg.

Caps should always be used with metal housing.



To learn more about OT Equator, you can contact the company by email at info@rhein83usa.it or by telephone at (877) 778-8383.

You can visit the company online at

www.rhein83usa.com to learn more about all of its products and services, including the OT Equator.

(Source: Rhein'83)

AD



CAD CAM THREADED ATTACHMENTS





RHEIN83USA

Imported and Distributed By
American Recovery

877-778-8383
www.rhein83usa.com
info@rhein83usa.com

Competition educates youth on dangers of spit tobacco

Oral Health America (OHA) has launched its 14th annual NSTEP® (National Spit Tobacco Project) slogan contest. Teaming up with Little League® Baseball and Softball, the contest calls on players ages 8-14 to create a compelling 10-word phrase describing the dangers of spit tobacco for a chance to win a trip to the Little League Baseball World Series.

In addition to its long history with baseball, spit tobacco is used more frequently by young people — almost half (46 percent) of new users start before age 18. Spit tobacco is linked to cancer of the mouth, throat, tongue, stomach and esophagus, mouth lesions, receding gums, tooth decay and tooth loss. Through the slogan contest, OHA and Little League reach tens of thousands of young people each year with the message that spit tobacco is dangerous and should be avoided.

“Little League is committed to providing proper health and wellbeing for children throughout the world,” said Stephen D. Keener, president and CEO of Little League Baseball and Softball. “Smokeless tobacco has no place whatsoever in the lives of our youth. We applaud Oral Health America’s effort in keeping children away from smokeless tobacco and starting the conversation with so many parents about the dangers associated with its use. The NSTEP Slogan Contest is a great way to engage children and their families and educate them on the risks associated with smokeless tobacco.”

“Every summer we hear from parents across the country who use the slogan contest as an opportunity to talk to their children about spit tobacco for the first time,” said OHA President and CEO Beth Truett. “All tobacco products are harmful, and we look forward to reaching even more young people with this important message.”

For the first time, contest participants will be able to submit their slogans online

Interested in owning a practice? Check Wiley's papers on ownership.

Aspen Dental has teamed with Wiley Publishing, the leading source of academic materials for professionals, to offer free educational articles on the business of dentistry.

Attracting new patients is becoming more challenging every day. And while expert marketing tactics may not be your specialty, the latest Wiley paper will show you how to attract and retain a steady flow of patients. Download "Generating new patients," the sixth chapter in Aspen's ongoing series to learn how.

In addition to the latest chapter, Wiley chapters 1 through 5 cover a wide variety of topics regarding ownership, such as:

- Planning and preparation;
- Financial management and profitability;
- The six critical factors for success;
- The Ppros and cons of different practice models; and
- Managing a practice.

Visit AspenDentalJobs.com/Wiley to download them all.

Aspen Dental is the fastest growing network of independently owned dental practices, with more than 500 practices nationwide. The administrative, market-

ing and business aspects of running a practice are taken care of, so dentists can focus solely on patient care and achieve a better work/life balance, according to the company. You'll receive the support and development you need to hone your skills, advance your career and own your own practice.

To learn more, you can visit online at www.aspendentaljobs.com.

(Source: Aspen Dental)



Aspen Dental provides its affiliated dentists with the support and development needed to hone dentistry skills and advance professionally as dental practice owners. Photo/Provided by Aspen Dental

AD

← TOBACCO, page A4

by filling out a simple form.

The winner will receive an all-expense paid trip to the Little League Baseball World Series in Williamsport, Pa., and a \$500 cash prize. In addition, OHA will make a \$500 donation to the player's Little League organization.

For more information about the contest or to submit a slogan, you can visit the contest website, www.nstep.org/contest.

Oral Health America

OHA's mission is to change lives by connecting communities with resources to drive access to care, increase health literacy, and advocate for policies that improve overall health through better oral health for all Americans, especially those most vulnerable.


Through Smiles Across America®, which serves 460,000 children annually, the Wisdom Tooth Project®, which reaches tens of thousands of older adults, and the Campaigns for Oral Health Equity, which prioritize oral health alongside other chronic diseases, OHA helps Americans of all ages to have a healthy mouth and to understand the importance of oral health for overall health. For more information, visit www.oralhealthamerica.org.

Little League Baseball and Softball

Little League Baseball and Softball is the world's largest organized youth sports program, with nearly 2.4 million players and 1 million adult volunteers in every U.S. state and scores of other countries. To learn more, visit www.LittleLeague.com.

(Source: Oral Health America)

SAVE THE DATE





January 27 - 31, 2016

Exhibits: January 28 - 30, 2016

Boston Convention & Exhibition Center

2016

NAVIGATING OUR FUTURE

CONNECT WITH US  

yankeedental.com | 877-515-9071

Presented by the Massachusetts Dental Society in cooperation with the Dental Societies of Connecticut, Maine, New Hampshire, Rhode Island and Vermont

Implant-supported total prosthesis in the daily routine

By Dr. E. Veralli and Odt. Luca Ruggiero

In this clinical case, we demonstrate how the use of overdentures are a viable choice among the restoration options for edentulous patients. The clinician must carefully assess the suitable number of implants to support an overdenture to identify the ideal restoration solution.

A systematic review of the literature reveals a lack of information about the ideal number of implants for a removable restoration in an edentulous patient; however, most studies propose to insert two to four implants in the mandible.

We will illustrate all laboratory clinical stages according to Prof. Gerber's methods. These steps will lead to the production of an overdenture with OT Cap attachment and OT SpheroBlock abutments on four implants in the lower jaw and complete prosthesis with mucous support for the upper.

Introduction

In a total edentulism, the prosthesis with a mix of implant support and mucous support represents the boundary between the resilient prosthesis (mucosal supported) and the rigid prosthesis (implant supported).

The prosthesis retained with OT Cap attachments or OT Equator is a hybrid prosthesis that must comply with a set of parameters typical of traditional prostheses. Numerous scientific studies demonstrate that two implants are sufficient to stabilize mandibular complete dentures and to improve significantly the edentulous patient's quality of life. Four implants can noticeably improve the prosthesis retention.

Clinical case

In an initial interview, the patient asked for a more stable and esthetic prosthesis that would help improve social- and private-life interactions by removing the

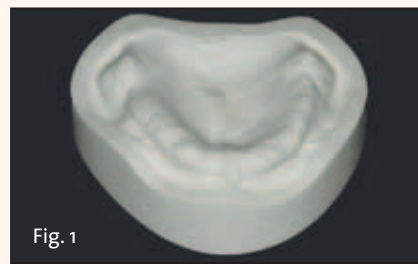


Fig. 1



Fig. 2

Figs. 1, 2: Upper and lower master models. Photos/Provided by Dr. E. Veralli and Odt. Luca Ruggiero



Fig. 3



Fig. 4

Figs. 3, 4: Wax rims leveled and individually adapted.

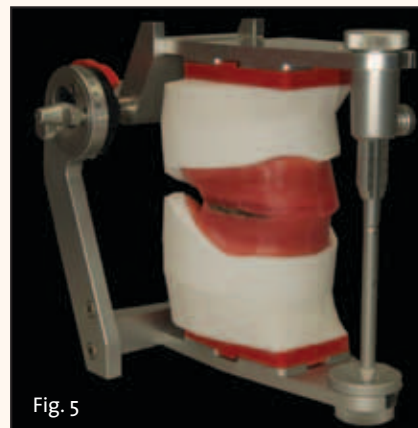


Fig. 5



Fig. 6



Fig. 7

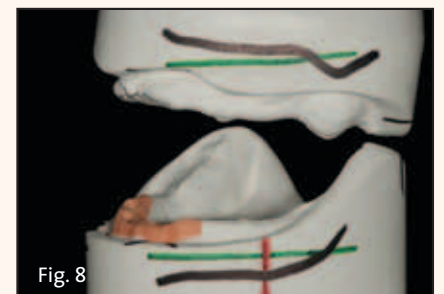


Fig. 8

Fig. 5: Mounting of models in the articulator

Figs. 6-8: Analysis of the edentulous ridges vestibular masks.

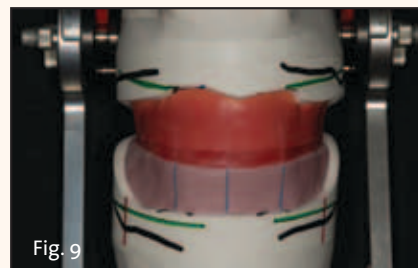


Fig. 9

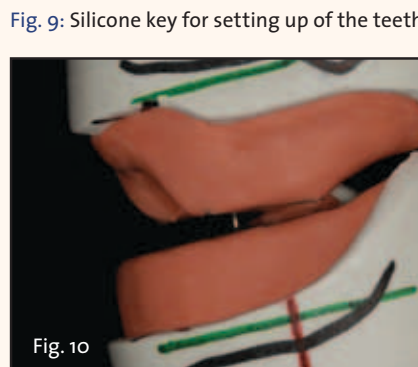


Fig. 10

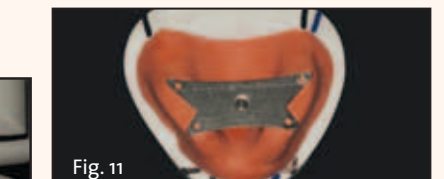


Fig. 11

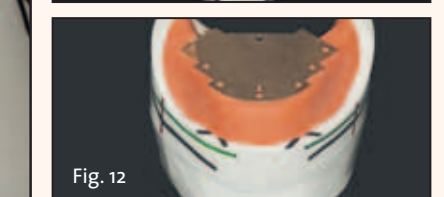


Fig. 12

Figs. 10-12: Set Candulor CRS 10.



Fig. 13



Fig. 14

Fig. 13: Basis for the face bow.

Fig. 14: Intraoral registration recorded in the dental office.



Fig. 15

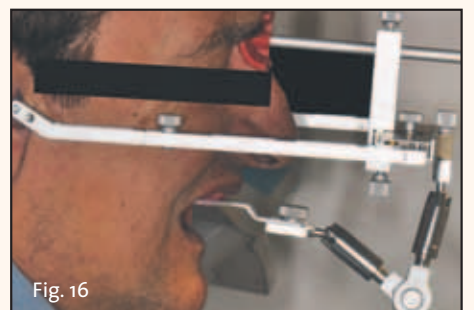


Fig. 16

Fig. 15: Blocking final centric relationship.

Fig. 16: Registration with the face bow.

AD

RecordLinc

Encrypted Email Made Easy...

Send HIPAA-compliant Emails Securely and Easily

RecordLinc allows dental professionals to securely and easily send electronic referrals, patient transfers, and track treatment plans between dental practices in a HIPAA compliant portal.

Connect your practice
Think "LinkedIn for Dentists"

Simplify Referrals
Save time & stay compliant

Grow your practice
with more referrals

www.RecordLinc.com
Sales@RecordLinc.com
(415)749-1444

CLAIM YOUR FREE PROFILE TODAY
UPGRADE TO PRO FOR \$47/MONTH

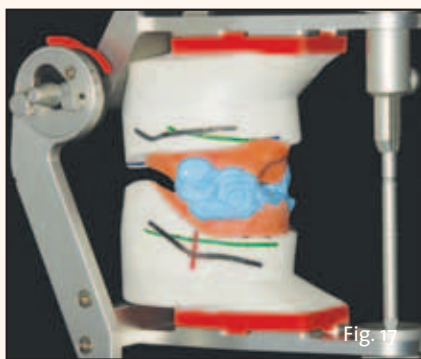


Fig. 17: The final set up in the articulator.



Fig. 18: Assembling group upper front.

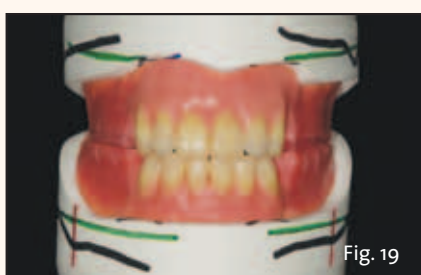
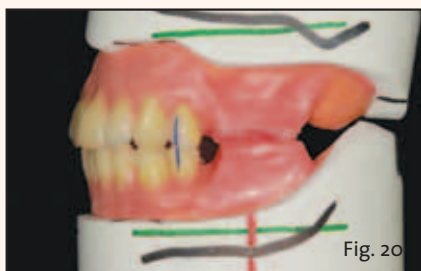


Fig. 19: Assembling group inferior frontal.



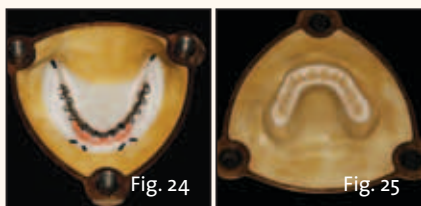
Figs. 20, 21: Mounting diatoric areas.



Fig. 22: OT Sferoblock micro on the model.



Fig. 23: Steel housings for OT cap micro.



Figs. 24, 25: Prosthesis in the flask.



Fig. 26: Prosthesis cured.

fear that the lack of teeth — or the prostheses — would be noticeable.

After evaluating with the patient the costs and benefits of the various therapeutic options, we chose a solution with SferoBlock Abutments. Two implants of 3.5 mm and two of 3.0 mm diameters convinced us to abandon the option of a bar because of insufficient implant support.

We placed four implants in the mandibular arch; and after osteo-integration, the clinician proceeded with the preliminary and final impressions.

After the master models (Figs. 1, 2) were created, in the laboratory two resin basis with occlusal rims were used for registration of intermaxillary relations.

In the dental office, the occlusal rims were leveled and adapted individually, establishing a first provisional DVO with the use of conventional methods (Figs. 3, 4). Then the models were mounted in

the articulator, taking as reference the Bonwill and Balkwill triangles (Fig. 5).

We analyzed the shape of the jaw, as well as the three-dimensional interalveolar relationships, as is usually performed for a full dental prosthesis with mucous support.

We traced on the exterior face of the model the trend of the ridge, to ensure proper implant placement according to the method of Prof. Gerber, using rulers and a compass profilometer. With the latter we also drew the trend of both upper and lower wax rims (Figs. 6–8).

A silicone key was used to record all information concerning the position and dimensions of the upper wax rim, previously set up in the office (Fig. 9). Only with the silicone key complete were we ready to remove the wax from the basis.

Using the CRS 10 set, we decided to give support to the basis with the same self-curing resin (Figs. 10–12). Our concern

was that recording the intraoral relation with conventional hard wax could introduce minor deformations. We delivered this set to the dental office together with a new upper rim basis for taking of the face bow (Fig. 13).

The patient's movements of protrusion and laterality were tracked on the bottom plate, which was smeared with a suitable marker to record the relative trajectories (Fig. 14). With appropriate material, we blocked the final centric relationship (Fig. 15), and we placed the face bow (Fig. 16) for the orientation of the models.

The articulator was mounted with the universal face bow accessory (KaVo, Quick, Ivoclar, Sam).

We first fixed the upper model and then the lower (Fig. 17). Next, guided by the silicone keys, we assembled the teeth respecting the upper front esthetic refer-

► PROSTHESIS, page A8

Pacific Dental Conference

Save these Dates! **March 17-19, 2016** Join us in Vancouver, BC somewhere under the rainbow!

- Three days of varied and contemporary continuing dental education sessions are offered (something for your whole team)
- Over 130 speakers and 150 open sessions and hands-on courses to choose from, as well as the Live Dentistry Stage in the Exhibit Hall
- Over 300 exhibiting companies in the spacious PDC Exhibit Hall
- Lunches and Exhibit Hall Receptions included in the registration fee
- Fantastic shopping, beautiful seawall access within blocks of your hotel, and great spring skiing and golfing

Online registration and program information at... www.pdconf.com

IN CONJUNCTION WITH
Pacific Dental Conference
 CANADIAN DENTAL ASSOCIATION

AD

← PROSTHESIS, page A7

ences and phonetic (Fig. 18).

Particular attention was given to the lower front teeth to ensure a tooth-to-tooth relationship starting from the canines to enable mounting of the posterior teeth according to the method of Prof. Gerber (Fig. 19).

We drew a vertical line in the upper premolar, which started at the mesial fossae and continued on the vestibular surface. We drew a vertical line on the lower premolar that started at the cuspid and continued to vestibular. The two lines needed to overlap one another perfectly. (Fig. 20).

We completed the assembly of the molars, and the prostheses (Fig. 21) were sent to the dental office for routine checks.

We chose four OT micro Sferoblock with the appropriate transgingival height (Figs. 22, 23), and the lower model



Fig. 27: Particular of the attachments.



Fig. 28: Prostheses finished and polished..

was duplicated with the OT Cap's analogues.

The prostheses were then cured with resin using traditional techniques and the flasks JST (Figs. 24, 25), eventually placed in the articulator for selective grinding (Fig. 26).

The prostheses were finished and polished (Figs. 27, 28), the abutments screwed and prosthetic delivered to the patient (Figs. 29, 30).



Fig. 29



Fig. 30

Figs. 29, 30: Sferoblock positioned and patient with new prostheses.

Conclusion

Dentures with mucous support and retained by attachments still must respect all of the prescriptions and principles followed to create the rational basis of a conventional full denture.

Materials and equipment: Candulor articulator; Teeth Physio set ct and ct Condyloform Candulor; flasks JST Candulor; Resin C-plast Candulor; Esthetic resin Candulor; CRS set Candulor; OT Sferob-

lock micro Rhein'83; Cuff Height measurer Rhein'83; OT Cap micro Rhein'83; Parallelometer key for OT Cap Rhein'83; Waxlectric Renfert; Waxprofi Renfert.

AD



START PERFORMING ONE OF THE MOST COMMON PROCEDURES IN DENTISTRY WITH CONFIDENCE

MINI-RESIDENCY SERIES

September 12-13, 2015 Los Angeles, California

Live Surgical Training
Date: September 12-13, 2015
Credits: 26 CE Hours: ADA CERP - AGD PACE

Curriculum - Day 1&2
7:30 am - 8:00 am: Check-In
8:00am - 9:30am: Lecture and Orientation
9:30am - 7:00pm: Live Surgical Course
12:00pm - 1:00pm: Lunch

All Inclusive (\$5500) Service

- Hands-on 2-day Course (Live Patients)
- All Materials, Instruments, and Supplies
- Breakfast, Lunch & Group Dinner
- Online Course Series
- Hotel Included For Distant Travelers

Please bring:

- Proof of Malpractice Insurance
- Proof of CA License
- A Fresh Mind!

For more details visit www.ExtAcademy.com
 Email: c.ferret@dtstudyclub.com Phone: + (504) 909-0099

Faculty



Dr. Thomas Wiedemann
D.D.S., Ph.D., M.D.



Dr. Gregory Greenwood
D.M.D., Ph.D., M.C.S.D.



Dr. Kianor Shah
D.M.D., F.C.I.R.A.D.F.E., M.C.O.F.



Dr. Charles Zahedi
D.D.S., Ph.D.



Joseph Krajekian
D.M.D., M.D.



Dr. Eric Schuetz
D.D.S.



Dr. Arash Hakhamian
D.D.S.












Three secrets to esthetic anterior CEREC CAD/CAM restorations

Live Sept. 3 webinar shows how to achieve optimal restorations

Most dentists regularly using CAD/CAM technology in their practice become proficient with posterior restorations. But anterior restorations are more chal-



CEREC CAD/CAM expert Dhaval Patel, DDS, presents 'Demystify Anterior

CERECs: 3 Secrets to Esthetic Restorations,' at 8 p.m. ET, Sept. 3, at www.dtstudyclub.com. Photo/Provided by Pacific Dental Services

lenging in terms of line angles, incised edges, emergence profile, texture and characterization. This has led many dentists to avoid or dread anterior restorations with CAD/CAM technology.

Esthetic results combined with the convenience of same-day dentistry leave patients thrilled with their experience, promoting loyalty and referrals to your practice. In a live webinar, "Demystify Anterior CERECs: 3 Secrets to Esthetic Restorations," you'll learn all the design methods available with CEREC software for anterior restorations and how to select the correct technique.

Once you've selected the right design technique, results can be enhanced with post-mill contouring. You'll learn techniques that can be done quickly and efficiently to contour restorations post mill for producing the most realistic results.

Finally, the most esthetic results can be achieved through polishing or staining and glazing. Every case is different, and you'll learn when to stain and glaze and when just polishing will provide the most life-like appearance. Techniques covered in this webinar will help you feel more confident using CAD/CAM for anterior restorations and produce same-day results that your patients will love.

(Source: Pacific Dental Services)

CALASEPT® Endo-line

CALASEPT®
Irrigation needles
Double side vent

NEW

CALASEPT Irrigation Needles

- * Double side vented
- * With luer lock hub
- * Bendable
- * High quality stainless steel
- * Sterile and disposable
- * Easy for cleaning out the canals
- * Container packed



CALASEPT® Plus
Calcium Hydroxide

NEW

CALASEPT PLUS

- * More than 41% calcium hydroxide
- * Optimal calcium release
- * Strong bactericidal effect pH 12.4
- * Flexi-needle for precise and deep application



**Call Wykle Research for a Free sample
of our Calasept products 800-859-6641**

Distributed by:

Made by:



**WYKLE
RESEARCH, INC.**

2222 College Parkway,
Carson City, NV 89706
Tel. 800-859-6641
Fax. 888-329-9955
www.wykleresearch.com