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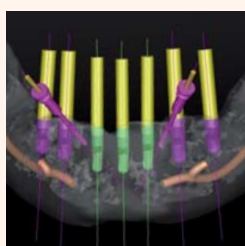
VOL. 13, No. 12



INTERVIEW

Sirona CEO Jeffrey T. Slovin about the merger of his company with DENTSPLY and its impact on the global dental market.

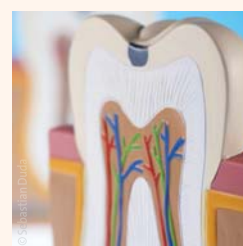
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FULL-MOUTH RECONSTRUCTIONS

How dental providers can provide extraction, grafting and implant placement within one appointment at one location.

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Read the latest news and clinical developments from the field of endodontics in our specialty section included in this issue.

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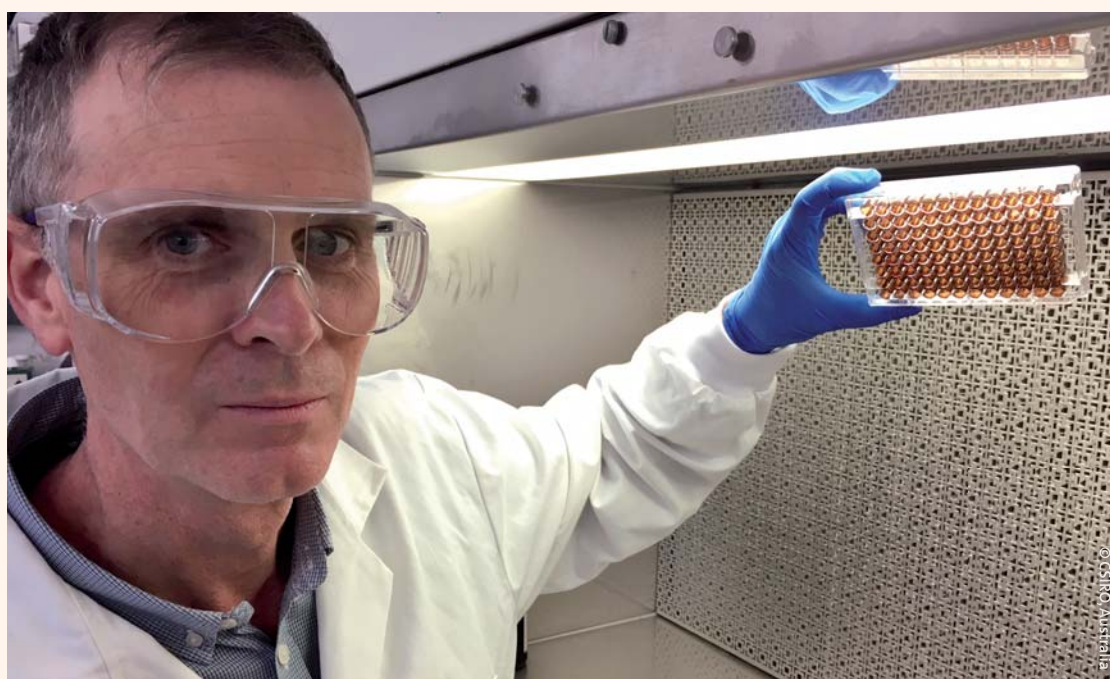
Aussie scientists develop new coating to improve implants

By DTI

MELBOURNE, Australia: Prebiotic compounds, whose origin can be traced back billions of years, have been studied intensively since their discovery several years ago. Now, a team of researchers in Australia has found that these prehistoric molecules can be used to modify surfaces of medical implants, reducing the risk of infection and rejection.

The new coating method was developed by the Commonwealth Scientific and Industrial Research Organisation (CSIRO) in collaboration with microbiologists at Monash University.

Although surface modification methods span a wide variety of applications, ranging from solar cells to implantable medical devices, there are very few simple generic aqueous coating methods that are both robust and versatile, as well as easily applicable over a range of substrate



Dr Richard Evans has helped develop a coating for medical devices using prebiotic molecules.

materials, the researchers reported in their paper. Therefore, they exam-

ined the suitability of the aminonitrile polymerisation process

for the formation of coatings on a range of substrate materials. ► Page 3

NZ heli crash

By DTI

WELLINGTON, New Zealand: Last month, the wreck of a helicopter was found in a crevasse on Fox Glacier, a glacier on the west coast of New Zealand's South Island. Although it is still unclear what caused the crash, the New Zealand Police have confirmed that the pilot and the six passengers died. On board the aircraft were a retired dentist from the UK and his wife.

West Coast police released the names of the people assumed to have been on the helicopter when it crashed. Among the victims were Britons Nigel Edwin and Cynthia Charlton from Hampshire. As reported online by the Daily Mail, the 66-year-old man was a retired dentist and his 70-year-old wife used to work in a dental surgery in Totiton in the UK.

The 28-year-old pilot, two young women from New South Wales, and another couple in their fifties from Cambridge in the UK also died in the crash.

Victims of Pompeii had excellent teeth

By DTI

NAPLES, Italy: To this day, researchers have not been able to scan and analyse the world-famous plaster casts of the people and animals of Pompeii who died in the volcanic eruptions of Mount Vesuvius in AD 79. Now, with the help of a 16-layer scanner, an interdisciplinary team was able to create digital 3-D reconstructions of the skeletons and

dental arches of the volcano's victims for the first time.

Among other things, the scientific tests, which included the use of a special multi-layer CT scanner, laser imaging and DNA sampling, revealed that the city's inhabitants had nearly perfect teeth.

"We discovered the absence of cavities in the teeth. This is very interesting and not that surprising, because we all know about the healthy Mediterranean diet and this has really shown up in the early analyses," said Massimo Osanna, superintendent at the archaeological site.

According to the experts, the lack of sugar in the Pompeian diet and the high levels of fluorine in the air and water near the volcano are all account-

able for the perfect state of their teeth. In addition to an excellent oral health, the researchers found that most of the victims still had all their teeth.

However, the scans further showed that the teeth wore away, because they were used for cutting, orthodontist Dr Elisa Vanacore said.

The interdisciplinary research project that began in April brought together archaeologists, restorers, radiologists, anthropologists and many others. According to Osanna, many more findings will emerge from the analyses on most of the known 86 Pompeian casts: "It will reveal much about the victims: their age, sex, what they ate, what diseases they had and what class of society they belonged to. This will be a great step forward in our knowledge of antiquity."



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“The global dental industry is in the midst of a transformation”

An interview with Sirona President and CEO, Jeffrey T. Slovin



Jeffrey T. Slovin.

In September this year, DENTSPLY International and Sirona Dental Systems announced that they have entered into a definitive merger agreement, creating probably the world's largest dental manufacturer, DENTSPLY SIRONA. *Dental Tribune* spoke with Sirona President and CEO, Jeffrey T. Slovin, who will assume the role of CEO of the newly combined company, about the merger and its impact on the global dental market.

Dental Tribune: Both Sirona and DENTSPLY have been operating successfully in the dental market for several decades. Why did the companies decide to join forces and how will the companies benefit from the merger?

Jeffrey T. Slovin: I am really excited about the merger and so are the dental professionals, distributors, patients and employees from around the world to whom I've spoken.

As you know, the global dental industry is in the midst of a transformation. The market is moving toward more integrated solutions and practitioners across the globe. Furthermore, many practitioners in new emerging markets are rapidly adopting digital dentistry. Combining DENTSPLY and Sirona will create the world's leading manufacturer of professional dental products and technologies, strengthening our collective ability to be at the forefront of key industry trends, help dental professionals improve patient care and grow our business.

DENTSPLY and Sirona both have strong commitments to innovation and research and development. In fact, we have collaborated very successfully on product development with DENTSPLY in the past. This merger is about harnessing those shared strengths to create new products with the aim of advancing patient care. Additionally, Sirona's technology and equipment offerings are complementary with DENTSPLY's consumables platform, enabling us to offer a more robust product platform to dental professionals and distribution partners.

Together, we will drive better, faster and safer dentistry around the world.

The new company will be the world's leading manufacturer of professional dental products and technologies. How will this affect the global dental industry?

After the merge, DENTSPLY SIRONA will be a stronger and larger global company with a broader product platform, deeper focus on innovation and the largest sales and services infrastructure in the dental industry. When you

consider how much the global dental industry has recently changed, it should be expected that dentistry would continue its rapid evolution. Today, general practitioners are taking on more specialized procedures that require integrated workflows with consumables and equipment that enhance their efficiency and patient care offering. You're also seeing an increasing demand for dental care from developing and emerging markets. We expect these needs to continue evolving and that DENTSPLY SIRONA will provide solutions to address their continuous needs.

With our combined focus on innovation and research and development, DENTSPLY SIRONA is very well positioned to meet both the current demands of the global dentistry industry, as well as anticipate and address future demands. Coupled with the largest sales and services infrastructure in the dental industry and supported by leading dental distributors and a direct sales force, we will be able to serve the dental industry more effectively worldwide. The merger is truly a win for everyone involved.

The merger is expected to be completed in the first quarter of 2016. Which regulations or closing conditions could still prevent a definitive merger?

The transaction is currently on track with the aim to complete the process in the first quarter of 2016. There are, as with any transactions, certain regulatory approvals and other customary closing conditions that we must achieve first. These include anti-trust clearance in the US, Europe and other countries, all of which are outlined in our SEC filings. We are confident that we will receive these approvals and the approval of our shareholders and we look forward to closing the transaction. Until then however, both DENTSPLY and Sirona will continue to run their business as usual as separate entities.

Are you looking into opportunities to acquire other dental companies?

Right now we are focused on continuing to run the business and execute our Sirona strategy successfully, while also working toward closing the merger with DENTSPLY. Our future is full of opportunity and we are working hard to deliver on that promise to our employees, patients and the entire dental community.

Thank you very much for this interview.

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Deviation between implant positions found

By DTI

HANGZHOU, China: In measuring the effect of surgical templates on the accuracy of implant placement, a Chinese study recently found that actual and planned implant positions varied significantly. According to the researchers, errors in computer-guided implant surgery are caused by either the operator during surgery or the surgical template preoperatively.

In order to evaluate the effect of surgical templates on the accuracy of implant placement, jaws from 16 patients were scanned using cone beam computed tomography (CBCT). Fifty-three implants were planned in a virtual 3-D environment, of which 35 were placed in the mandible and 18 in the maxilla.

For the analyses, a stereolithographic surgical template was cre-

ated. The template was then fitted on a plaster model and both were scanned with a CBCT device. The

images obtained were matched to images of the virtual planned implant position. The actual implant

position was acquired from the registration position of the surgical template.

In comparing the data, the researchers found significant deviation between actual and planned positions caused by the surgical template. The mean central deviation at the hex and apex was 0.456 mm and 0.515 mm, respectively. The mean horizontal de-

viation at the hex was 0.193 mm and at the apex was 0.277 mm. The mean vertical deviation at the hex was 0.388 mm and at the apex was 0.390 mm. The mean angular deviation was 0.621°.

The results of the study indicate that clinicians should not rely solely on the safety of surgical templates in seeking to avoid critical anatomical structures.

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They found that this polymerisation, carried out in buffered aqueous solutions, can be used to coat a wide range of organic and inorganic substrate materials.

The coating is biofriendly and cells readily grow on and colonise it and could therefore be applied to medical devices, such as dental implants, catheters and pacemakers to improve their performance and acceptance by the body, according to the researchers.

"The non-toxic coating is adhesive and will coat almost all material, making its potential biomedical applications really broad," said lead research Dr Richard Evans. "This research opens the door to a host of new biomedical possibilities that are yet to be explored."

As the coating process is very simple and uses methods and substances that are already available, biomedical manufacturers can produce improved results more cost effectively compared with existing techniques.

CSIRO is the first organisation to investigate practical applications of this kind using prebiotic chemistry. It is currently seeking to partner with manufacturers to exploit this technology.

The study, titled "Prebiotic-chemistry inspired polymer coatings for biomedical and material science applications", was published online on 13 November in the *NPG Asia Materials* journal.

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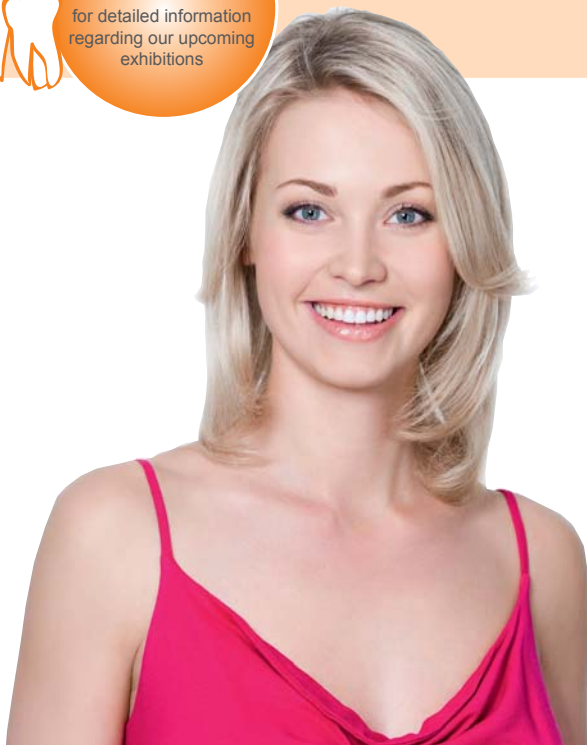
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Study confirms CBT to be successful in reducing dental phobia

By DTI

LONDON, UK: The latest government figures estimate that one in ten people in the UK suffer from dental anxiety. New research from King's College London involving pre-treatment use of cognitive behavioural therapy (CBT) has shown that the method is largely effective in helping patients overcome their fear of treatment.

In a study involving patients suffering from high levels of dental phobia, the researchers found that the overall majority were able to undergo treatment without sedation after having undergone therapy at the Dental Institute Health Psychology Service at Guy's and St Thomas' NHS Foundation Trust. Only six per cent of the patients surveyed had to be treated with sedation.

"Our study shows that after on average five CBT sessions, most people can go on to be treated by the dentist without the need to be sedated," said Tim Newton, lead author and Professor of Psychology as Applied to Dentistry.

A short-term therap, CBT has been shown to help with depression and a number of anxiety-related disorders, such as obsessive-compulsive disorder and bulimia. Typically, over six to ten sessions, a therapist aims to help patients change their feelings and behaviours by restructuring their thinking and breaking negative thought cycles.

According to the researchers, the most common anxiety-inducing factors in the study were identified as drilling and having an injection.

Newton recommended that, despite the positive outcome, CBT should be viewed as complementing sedation services rather than as an alternative, the two together providing a comprehensive care pathway for the ultimate benefit of patients. Furthermore, patients should be carefully assessed by trained CBT practitioners, since they could be suffering from additional psychological conditions.

Over one-third of those patients surveyed in the study showed signs of general anxiety, while one in ten had depression or suicidal thoughts.

"CBT provides a way of reducing the need for sedation in people with a phobia, but there will still be those who need sedation

because they require urgent dental treatment or they are having

particularly invasive treatments," Newton said.



With CBT a therapist aims to help patients change their feelings and behaviours by restructuring their thinking and breaking negative thought cycles.

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“Dentists can use social media as a very powerful tool”

An interview with book author Sara Natt och Dag, Sweden

Just as social media has become a part of everyday life, so too has it entered the health sector. With patients blogging about dental visits and practitioners promoting their business on Facebook, a number of legal and ethical issues arise. *Dental Tribune* had the opportunity to speak with book author and health counsellor Sara Natt och Dag about the possibilities and risks entailed in the use of social media in health care.

Could you describe how social media has found its way into the health sector over the last several years?

Sara Natt och Dag: In Europe, social media began to influence

health care maybe seven or eight years ago, whereas in the US it started maybe ten years ago, and its importance is growing exponentially. It has become normal for health care and social media to be interlinked. In Sweden, for example, the e-health sector already plays an important role. From scheduling a doctor's appointment to ordering medication, one can do virtually everything online.

However, the dental industry appears to have been a bit slower than the rest of the sector. The importance of social media in dentistry has exploded in the last year especially. Although



Sara Natt och Dag

A blog can offer support and comfort to terminally ill people, but this frankness certainly poses new challenges for health care professionals. I meet many sick people who run blogs and always advise them not to write when they are upset or disappointed. Instead, I tell them to talk to the doctor or the nurses about their feelings instead of posting it online.

In other areas, as I mentioned earlier, health topics are starting to overlap with lifestyle topics. One can find review videos for whitening strips on YouTube, people talking about their latest dental appointment on Facebook and so on. For many young people, it is natural to share their personal experiences. Medical professionals can take advantage of this as a way to better understand and familiarise themselves with what patients are doing and thinking.

there is probably no such thing as private dental blogs, dental topics are creeping into the lifestyle industry with people writing about orthodontic and aesthetic treatments to a large extent.

So, there is a great deal of information—both professional and personal—available on the Internet?

In the Western world, most people have access to the Internet at home and virtually everywhere. Thus, they have access to unlimited information from all over the world. However, regarding health

Would you agree that this trend has great potential, both positive and negative?

Yes, absolutely. If a lifestyle blogger writes about his or her dental appointment, with the name of the dentist tagged, and does that several times, the den-

“It is all about standing out from the crowd and showing some personality.”

topics a lack of boundaries may be a matter of concern. Take cancer blogs, for example. In Sweden, there are many of these types of personal blogs, where patients share everything about their diagnosis, treatment plan, medication, set-backs, feelings—everything. I have followed some of these patients until their death on their blogs. They share their personal disease progression with the whole world and that is a bit crazy, I think.

As a counsellor at Karolinska University Hospital, you have met many of these disease bloggers and even written a book, *Den bloggande patienten* [The Blogging Patient] (2013), on the subject. What is it that makes people turn to the Internet with their health issues?

tist will rank higher in search engines. Even one person can make a difference—is that not crazy?

A Swedish lifestyle blogger just recently wrote about her dental treatment and how fantastic her dentist is. She has about 200,000 readers, so you can imagine what happened. The dentist, in turn, published a link to her posts on the clinic website, because he was proud of being mentioned by an online “celebrity”. This demonstrates the interconnectedness of social media channels—which can be very good and also very bad for one's reputation, depending on what was written online.

Focusing on the advantages: how can dentists use social media most effectively to promote their busi-

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ness or to stay in touch with the dental community?

Social media is a fantastic way to promote a business, but every dentist must be aware of the risk and most importantly be familiar with the legal regulations. In most countries, patients' rights are very strongly protected by law. Practitioners will not be able to provide patient information, such as name, age and treatment details, online, let alone case photographs. Even

"Dental topics are creeping into the lifestyle industry with people writing about orthodontic and aesthetic treatments to a large extent."

if practitioners do have permission from the patient, they cannot share case details online, not

in health care. At least, it is illegal in Sweden.

What should be taken into account then? What is your advice for practitioners?

It is as simple as thinking before publishing online. Dentists who remain aware of their professional status at all times can use social media as a very powerful tool.

But if dentists are not allowed to discuss cases and patients in particular, what could they write about online?

They should promote themselves instead. Introduce themselves (including their education), their practice and the staff. It is all about standing out from the crowd and showing some personality. They could write about their travels to conferences, for example, send out Merry Christmas wishes, introduce new tools that they have bought for the practice; basically, it is about staying in touch with patients. One does not have to post daily, but if one writes regularly, maybe once a week, it can be an excellent way to promote one's business.

Still one has to draw a definite line between one's professional and private lives. One's business page is not the place to discuss one's children, one's last holiday, or feelings or personal opinions regarding one's patients. In social media, just like with any professional doctor-patient relationship, it is all about defining boundaries and maintaining them.

How should health care professionals best respond when patients cross these boundaries and write harmful comments online?

I am sure some people choose to ignore these instead of confronting the writer. Personally, I would rather address the matter directly. However, I know many colleagues who rather not respond. From a legal point, it can be difficult to erase negative comments from Facebook or the Internet in general, so maybe it is best to settle the issue privately. But, as I said, people choose to deal with such situations in different ways.

In the US, many dentists publish dental news, research data and practice information on their personal blogs too. Do you think Europe will follow that lead in the future?

I do not necessarily like that approach, but I think Europe will eventually follow suit. Bloggers have already started to do just that and further changes towards an "Americanisation" of sorts can be expected.

Thank you very much for the interview.

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