

today

92nd EOS Congress • Stockholm, 11-16 June 2016



Science & Practice

Contributor Aws Alani, Kings College Hospital, about the emergence of short-term orthodontics and its future implications in general practice.

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Dental products in focus

The 92nd annual congress of the EOS will be an excellent opportunity to see the most up-to-date technologies and achievements in the field of orthodontics.

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What's on in Stockholm

Owing to its rich cultural and culinary scene, the city offers something for everyone. Here are some tips how to spend your time off in the capital of Sweden.

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EOS annual congress returns to Sweden

Historic event to be held from 11 to 16 June at Stockholmsmässan



Orthodontists from around Europe are gathering in Stockholm this week for the annual congress of the European Orthodontic Society. Being held over five days at Stockholmsmässan, the city's premier conference and exhibition venue, the specialist meeting will once again present the latest research and innovations in the field.

This year will be the fifth time that the historic meeting is held in Sweden. According to congress chairman Jan Huggare, an orthodontist and professor at Karolinska Institutet's Department of Dental Medicine in Stockholm, the programme will cover traditional orthodontic topics, as well as focus on medically compro-

whether orthodontics should be conducted with or without orthognathic surgery or whether archwise distraction is possible in alveolar distraction osteogenesis. The presentations will concentrate on the adult patient, as well as the orthodontic treatment of children and adolescents with lingual appliances.

The Sheldon Friel Memorial Lecture, honouring the organisation's past president and honorary member, will be held by University of North Carolina at Chapel Hill adjunct professor Sheldon Peck and deal with the search for orthodontic truth.

Also, the winners of the W J B Houston Research Awards, the Beni

community, which links the traditions cherished and refined by past Presidents of the Society with the challenges of meeting the expectations of the younger members of our Society," Huggare said.

Founded in 1907 with the goals of advancing all aspects of orthodontics and its relations with the collateral arts and sciences for the public bene-

fit, as well as of seeking the furtherance of orthodontics among all branches of the dental profession working in private practice, hospitals and universities throughout Europe, the EOS currently has members from 24 countries, including Sweden, Germany, Austria, France and the UK. Its first meeting took place in Berlin in 1910. The congress was previously

held in Sweden in 1956, 1965, 1981 and 1993. The meeting is open to members and non-members alike. Those who wish to attend the five-day programme are still able to register on-site, but will have to pay a fee, the organiser said.

More information can be found on the meeting's official website, www.eos2016.org. ◀



mised patients and patients' treatment experiences, among other subjects. A number of internationally distinguished clinicians will share their expertise on a wide range of topics, including the factors that determine

Solow Award and the award established in memoriam of the late Prof. Francesca Ada Miotti will be announced.

"It is a great honour to host this annual meeting of our orthodontic

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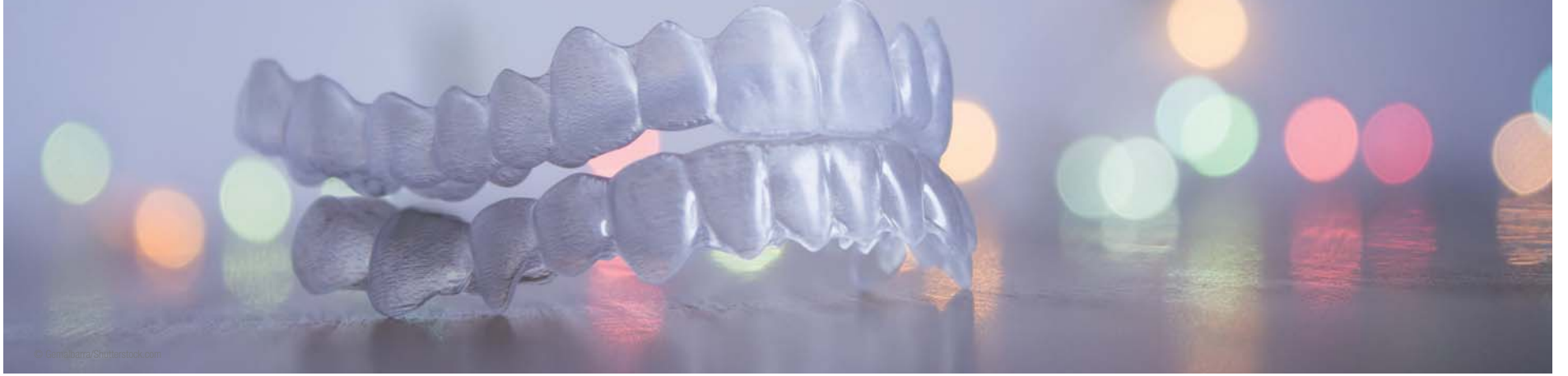
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Invisible braces market to grow rapidly over next five years



■ According to a recently published report, the global invisible braces market is expected to grow at a 12.16 per cent compound annual growth rate from 2016 to 2021. The report analyses the development of the ceramic, lingual and clear aligners segment in ten major countries and further shows that the process will be mainly driven by technolog-

ical innovations and increasing demand for invisible braces among the adult population with aesthetic concerns about fixed orthodontic appliances.

Over the past decade, improved technological advancements, particularly digital technologies, and increasing awareness of aesthetic alternatives to conventional braces

have led to growing demand for orthodontic treatment with aligners.

In addition, rising disposable income has resulted in increasing per capita health care expenditure, which has further led to a growing focus on health care, thereby increasing the demand for invisible braces specifically among the adult population.

While the market has witnessed a strong foothold in North America and Europe, rapid growth in the demand for invisible braces is expected to be fuelled by the emerging markets in Asia Pacific and Latin America through India and Brazil, whereas rising dental tourism in Mexico and Thailand will continue to contribute towards the invisible braces market.

Among the leading companies operating in the market are Align Technology, Ormco, DENTSPLY International, 3M and ClearCorrect.

The 152-page report, titled "Global invisible braces market: Trends, opportunities and forecasts (2016-2021)", was published on 1 February. It can be purchased at www.rnrmarketresearch.com. ◀

Barcelona forum invites professionals to witness the future of orthodontics

European Carriere Symposium to take place on 22-24 September in Spain

■ The 2016 European Carriere Symposium, presented by Henry Schein Orthodontics, will take place from 22 to 24 September in Barcelona in Spain, at the five-star seaside hotel W Barcelona. Designed by world-famous architect Ricardo Bofill and shaped like a large mirrored sail, the spectacular venue is situated on the coastline with direct access to the

Additional featured symposium speakers will include a host of visionaries in the field, such as Drs Sean Carlson, Louis Chmura, Scott Frey, Francesco Garino and John Kaku.

As testimony to the relevance and value of the European Carriere Symposium, after last year's event, attendee Dr Zvi Kennet praised the symposium: "The clinical presenta-



beach and boasts 360° panoramic views.

Under the theme of "The future of orthodontics", the highly-anticipated premier event will feature lectures on the most progressive topics in today's orthodontic industry. The programme will begin with a welcome reception and dinner, an opportunity for participants to meet and socialise with the speakers and other dentists who are attending. Dr Luis Carrière will present a paper titled "Innovations in self-ligation orthodontics" and will discuss the many benefits of Carriere Motion appliances.

The programme chairman, Dr David Paquette, will give a lecture titled "An inside view of orthodontic products of the future".

tions were excellent and I was surprised at how much I learnt despite the fact that I was already a Carriere Motion user. I can't wait to implement the new procedures based on what I have learnt this weekend. Great job in organizing the meeting!"

"We've brought together some of the best, most progressive minds in orthodontics today for this enlightening event," remarked Don Tuttle, Vice President and General Manager of Henry Schein Orthodontics. "We look forward to joining our attending colleagues to share exciting ideas and solutions."

Attendees are encouraged to arrive a day or two prior to the symposium to experience La Mercè, a dazzling cultural event held each year in Barcelona. Throughout the week of 18-24 September, the city celebrates in honour of its patron saint, the Virgin of Mercy. On each day of this



exciting festival, elaborate parades fill the streets with amazing papier mâché giants, mythical creatures, fire runners, Castellers forming tall human castles, traditional drumming, and a synchronised musical fireworks display.

Dental professionals can register online and obtain more information at www.carrieresymposium.com. Those wishing to take part in La Mercè are urged to register as soon as possible to secure hotel rooms for the earlier dates. ◀



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Passive Self-ligation/
Class II & Class III
Correction



Dr. Scott Frey
Injectables in
Orthodontics



Dr. Francesco Garino
How to Increase Efficiency
in Class II Treatments with
Aligners in Adults & Teens



Dr. John Kaku
Class II Correction
with Aligner Therapy



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World-class orthodontic experts to gather in Brighton

■ To be held at the Brighton Centre from 23 to 25 September, the annual congress of the British Orthodontic Society boasts an impressive line-up of speakers that includes world-famous orthodontists Prof. Lysle Johnston from the US and the UK's own Prof. Kevin O'Brien (Manchester). Both will share their views on contemporary orthodontic trends with congress attendees.

There will also be papers by a number of international experts, like Dr Adrian Becker from Israel and Prof. Hans-Peter Bantleon from Austria, as well as the best the UK has to offer in the field, including Prof. Anthony Ireland, who will be delivering the prestigious Northcroft lecture. Also presenting in Brighton will be Hertfordshire experimental psychologist

Prof. Richard Wiseman. The congress will further see the introduction of a number of hands-on sessions called "skill studios", with limited attendance, which are a further development of the highly successful master classes.

According to the BOS, the programme for this year's event has been developed with the entire dental team in mind. "We will be developing the

successful team lectures focusing on some non-clinical skills of benefit to the whole team," chairperson of the BOS organising committee Richard Jones said. "This includes Dr Guido Sampermans, a highly innovative and inspirational orthodontist from Vienna who shares his vision of the patient journey and how the whole team can work together to deliver this."

More than 1,000 attendees are expected for the congress in September. As a first, it will be held alongside the Orthodontic Technicians Association's annual conference. Registration will open during the course of this week on the BOS website at www.bos.org.uk. More information about the extensive programme can also be found there. ◀

AD

New ortho magazine launched

■ The orthodontic segment has grown significantly within the past 20 years owing to new technologies and products, as well as an increase in adult patients requesting orthodontic treatment. In response to this trend and to update dentists on the most significant developments in the field, Dental Tribune International (DTI) has added *ortho-international magazine of orthodontics* to its portfolio. The 2016 issue includes articles on clear aligners, vibration therapy and rapid maxillary expansion, as well as the latest product information and event previews.

The new high-gloss English-language magazine adopts an interdisciplinary approach involving orthodontics, oral surgery, periodontics and restorative dentistry, and aims to serve as an educational tool, providing comprehensive knowledge and information on the newest technology that can profitably be integrated into treatment concepts. The publication, which will be distributed at all major international orthodontic congresses and exhibitions, presents the latest research and case studies, as well as trends in procedures and techniques.

In order to connect with orthodontic specialists, the DTI team is scheduled to attend a number of orthodontic events around the globe in 2016, including the annual congress of the British Orthodontic Society in Brighton, which will take place between 23 and 25 June in Brighton in the UK; and the fourth Scientific Congress for Aligner Orthodontics, to be held on 18 and 19 November in Cologne in Germany. DTI will be providing comprehensive live coverage of these and other events on its website. In addition, e-newsletters about the respective events will be sent to orthodontists worldwide.

From 2017, a new issue of the *ortho* magazine will be published twice a year with a print run of 4,000 copies. An e-paper edition of the magazine is available free of charge via the DTI on-line print archive. ◀



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Short-term gains...long-term problems?

The emergence of STO and its future implications in general practice. By Aws Alani, UK.

■ The provision of orthodontics can be a life-changing experience for young patients whose “crooked” teeth can affect their confidence and self-esteem. Indeed, where mature patients present with a history of malalignment, equally beneficial and fulfilling results can be achieved. In government-funded systems, patients with congenital abnormalities receive treatment that is essential to their ongoing oral health. Restorative dentists work closely with orthodontists, who can appreciate how small details can aid in achieving positive restorative outcomes.



*Aws Alani is a Consultant in Restorative Dentistry at Kings College Hospital in London, UK, and a lead clinician for the management of congenital abnormalities. He can be contacted at awsalani@hotmail.com.

As a young dentist, I corrected a tooth in crossbite with a simple T-spring appliance. It was enjoyable and brought a different type of delayed gradual satisfaction to the more cerebral but tenuous molar endodontics or the more artistic and instant composite build-up. I was not a specialist, but I managed to do some orthodontics. In contrast to my experience, general dental practitioners are now more routinely providing tooth movement with the emergence of short-term orthodontics (STO). This has resulted in some conjecture as to the methods of achieving “straighter” teeth. Indeed, some may consider STO as an emerging entity competing with specialist orthodontics, but should it be?

The specialist training pathway for orthodontics involves a competitive-entry three-year full-time course linked with the achievement of a master’s level qualification that many may feel daunted by. Indeed, navigating the pathway from start to finish can be difficult academically and financially when factoring in fees and loss of earnings during training. Once qualified, the majority of these specialists reside, like the majority of all specialists, in the south-east of England. With this skewed distribution of specialists and assumed need for access, it might seem prudent for general dental practitioners to contribute to meeting the need for orthodontics.

Indeed, the long-cited managed clinical networks have yet to be fully realised, although all planning and documentation related to managed clinical networks identify general dental practitioners as integral to the function of the network. The number of orthodontic therapists has gradually increased over the last ten years

or so since inception of the first courses in Wales and Leeds. Therapists are allegedly more cost-effective to train and employ in a large orthodontic practice; however, unlike their hygiene or therapy colleagues, they cannot practise without a spe-


cialist’s treatment plan and supervision.

Patients who qualify for orthodontic treatment under the UK government-funded system need to be assessed according to the index of orthodontic treatment need. There will

be an obvious shortfall of adults or adolescent patients with minor malocclusions who do not meet the criteria who would like their teeth straightened. This cohort may have to seek treatment privately from orthodontic specialists or general dental


practitioners. As such, these minor or straightforward cases may be managed in a number of different settings utilising various techniques with the advent of STO. This may have resulted in some territorial paranoia between the two camps of traditional or-

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thodontics versus STO systems. Conversely, it may be that differing scientific, technical and ethical ethos on managing the same problem is the source of the debate.

Quick and easy?

Commercialisation has modified the provision of orthodontics in the UK. Indeed, there are now orthodontic brands with courses attached and a faculty of individuals who promote their particular product. Companies tend to boast that their product is the best with limited complications and treatment being low risk, predictable and easy. Somewhat surprisingly, courses are being run on how to convert patients into orthodontic clients. There are books describing strategies on promoting and increasing revenue. They outline detailed strategies on attracting more patients than one's local competitor—or is that colleague? Sounds more like capitalism than commercialism to many interested observers.



The rapid development of STO has not escaped the venture (or some may say vulture) capitalists. In the same vein as DIY whitening and sports guards, one can now have

one's teeth straightened via online companies using products delivered by Her Majesty's Royal Mail and so cut out the middleman (i.e. the dentist). To my knowledge, STO has yet to

make it on to the price list of Samantha's, a beauty salon in Peckham.

What may cause fear and worry is that the provision of tooth movement set against a backdrop of a focus on increasing revenue and patient conversion may detract from the real reasons we are providing the treatment. The risk and benefit of treatment must remain balanced or be rebalanced in favour of the patient.

The best things in life are rarely quick, easy and without reflection. While learning or training, one gains stature from one's mistakes and learns by way of osmosis from those of individuals one hopes to emulate. Becoming an expert in many a field requires time, effort and experience. Orthodontics is a complicated discipline that is difficult to deliver optimally and efficiently. Treatment planning should be performed in person not only to appreciate the challenges the patient presents with but also to develop a lasting patient rapport. Equally important, patients need to be diligent during treatment and forever more for purposes of retention. Is it possible that a one- or two-day course with a treatment plan lasting half a year or less can provide equally optimal results to a specialist orthodontist utilising traditional means?

In any case, placing a time limit on any treatment could be considered contentious. Patients ask me all the time 'How long is this treatment going to take Doc?' I always reply 'I'll tell you when it's finished'. As such I am rarely wrong.

Advertising cosmetic treatments the fair dinkum way

The Australian health ministry recently examined the provision of cosmetic procedures and in particular the modes of promoting the treatments. The working group found that advertising and promotion more often than not focused on the benefits to the consumer, downplaying or not always mentioning risks. The group went on to identify advertising practices that were not driven by medical need and where there was significant opportunity for financial gain by those promoting these. They identified the need to regulate promotion and advertising ethically with factual, easily understood information from a source that is independent of practitioners and promoters. This is unfortunately not always readily available. In some Australian jurisdictions, there are specific guidelines that need to be adhered to for promotion of cosmetic treatments and they specifically cover before and after treatment adverts, which we know in the UK is a popular practice among the cosmetically driven. This is commonly one ideal, perfect case showcased on the front end of the practice website with no mention of any problems, either acute or chronic. Another aspect of the report detailed prohibition of time-limited offers or inducing potential customers through free consultations for the purposes of treatment uptake. The latter is something that has seen STO promoted by way of voucher deals on the Internet or

via smartphone applications. Others may consider such a practice as loss leading; one could ask who is losing and who is gaining and at what price?

One important aspect of the report identified the wider social impact of cosmetic procedures in that people may become increasingly dissatisfied with themselves and their appearance, culminating in deeper concerns for the person and reducing scope for individuality. Many dentists throughout the country may have a slipped contact here, a rotation there or a space distal to a canine who are unlikely to be waiting in earnest for the next voucher deal alert on their iPhones. Inducing misgivings or raising concerns about the patient's tooth position where the teeth are otherwise healthy and the patient presents with no concerns could be considered unethical and worryingly dishonourable.

Relapse of confidence

In a recent publication from an indemnity provider, orthodontics was identified as an emerging area for claims against their clients. This is likely to be the tip of the iceberg, whose size will probably continually grow as more and more orthodontics is provided and the repercussions of which may only become apparent gradually in the future.

In the now highly litigious arena of UK dentistry, the failure of orthodontic treatment against the backdrop of *Montgomery v. Lanarkshire Health Board* is likely to result in increased litigation. The movement of teeth into what the patient and the dentist feel is the correct position may be possible in the short term, but in the long term complications may arise owing to a variety of soft- and hard-tissue factors that cannot accommodate this new and supposedly "right" position. Indeed, orthodontics requires the appreciation of detail where symmetry and alignment are "king", but long-term stability is the likely "empress". Relapse of position is a common complaint and where patients have paid handsomely for a result they may have been happy with at the time of the cheque clearing, over time tiny tooth shuffles can result in disproportionate and vehement dissatisfaction. Where teeth are moved indiscriminately, recession in the labial segment is a complication difficult to explain and remedy in the high lip line of a conscientious and ambitious corporate female patient. Indeed, more haste, less speed may result in a case being etched longer in the memory of the patient and the clinician for the wrong reasons.

Clear steps to business building

A cornerstone of a successful business is the repeat customer who values the dentist and his or her service and returns with no qualms or misgivings about what the dentist feels should be provided. A successful business relies on patients returning in the long term owing to their positive experiences. Focusing on short-term gains without due consideration of quality or reliability of the treatment provided has potential repercussions for patients, the business of dentistry and perception of the profession. ◀

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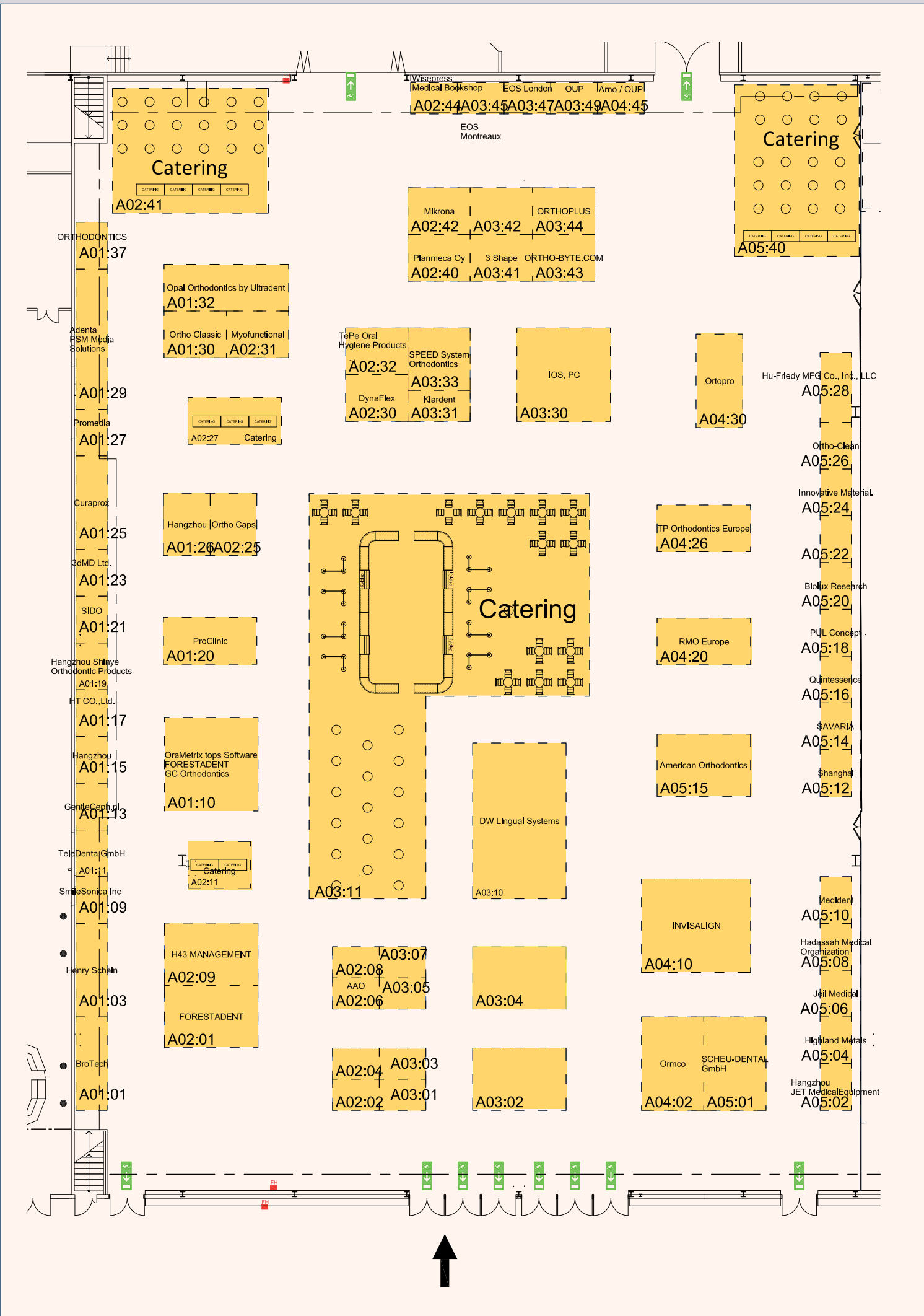
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Adenta GmbH	A01:29	BroTech AB	A01:01	DynaFlex	A02:30	G&H Orthodontics	Medical Equipment Co., Ltd.	A05:02
American Orthodontics	A05:15	Curaprox	A01:25	DW Lingual Systems	A03:10	GC Orthodontics Europe GmbH	Hangzhou Shinye	
		Dental Monitoring	A02:09	EOS London	A03:49	GentleCeph.nl	Orthodontic Products Co., Ltd.	A01:19



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Medical Apparatus Co., Ltd.	A01:15
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