

DENTAL TRIBUNE

The World's Dental Newspaper • United Kingdom Edition 

PUBLISHED IN LONDON

www.dental-tribune.co.uk

VOL. 9, No. 6 + 7



CURADEN DENTAL CLINIC

Dental Tribune paid an exclusive visit to the first UK-based practice of the international franchise in London.

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BISPHOSPHONATES

Theoretical reasoning and experimental data suggest that local application of the drugs is safe and effective.

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ENDO TRIBUNE

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

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Large national gap identified

Private dental fees vary significantly throughout Britain, according to report

By DTI

DUBLIN, Ireland: Private fees for dental services have seen another 30 per cent increase in the last few months. A new survey conducted by Irish health care website *WhatClinic.com* has now found that patients in some parts of the UK have to pay up to twice as much for check-ups and other dental services than do patients in the rest of the country.

Among all areas surveyed, Milton Keynes stood out as the most expensive, with dental check-ups costing an average of £62 compared with only £31 charged by dentists in Birmingham, for example.

Other cities with high average fees in the same category were London (£53), Glasgow (£50) and Cardiff (£45). However, in Cambridge (£32), Manchester (£34) and Southampton (£35), patients pay the least for a dental check-up.

The national average for a dental check-up is £46, according to *Whatclinic.com*. However, over 80 per cent of all of the cities and towns surveyed charge less than that, the results indicate.



Patients in some parts of the UK have to pay up to twice as much than do patients in the rest of the country.

The nationwide survey was conducted among 13,000 private dentists across Britain.

In addition to basic services like dental general check-ups, it compared average prices for four different speciality treatments, such as root canal therapy and implants.

For such treatments, patients in cities like London and Cambridge generally pay the most, while the rest of the country showed no distinguishable geographic pattern regarding the fees charged.

For example, root canal therapy costs the least north of the border in Glasgow and Edin-

burgh, as well as in Manchester and Belfast, where dentists also use to charge the least amount for implant treatment and tooth whitening procedures.

Fees for both of these treatments were also found to be at the lower end in Liverpool, Newcastle upon Tyne and Glasgow

Cancer toolkit launched

By DTI

LONDON, UK: Cancer Research UK has launched a new oral cancer toolkit in partnership with the British Dental Association and the British Dental Health Foundation. It is aimed at helping dental professionals and general medical practitioners identify the disease earlier.

In addition to images of signs and symptoms of the condition, the free toolkit outlines how health professionals should refer patients for further testing. By completing the toolkit, professionals are eligible for continuing professional development credits, the organisations said.

Despite measures like Mouth Cancer Action Month, oral cancer in the UK continues to rise. New figures released by Cancer Research UK in November indicate that cases have almost doubled, with 7,300 people diagnosed in 2012 compared with 4,500 in 2002. Currently, up to 2,000 people die from the disease per year.

According to a 2015 study conducted by King's College London researchers, insufficient knowledge and training among dentists was identified as a significant factor in lack of oral cancer awareness.

AD

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Professional footballers score low in oral health survey



A significant percentage of England's footballers are affected by dental diseases.

By DTI

LONDON, UK: The previous season saw Premier League revenues soar to a new record of more than £3.5 billion. It seems that little of this money is

spent on dental care, however, as a new study by researchers at UCL Eastman Dental Institute has revealed that many players throughout England's three top-tier divisions present with various forms of oral disease.

According to the paper published in the latest edition of the *British Journal of Sports Medicine*, over one-third of players who underwent oral health examinations were found to have dental decay and every second player exhibited signs of tooth wear. Periodontal disease was less prevalent, with one in 20 suffering from severe or moderate forms of the condition.

The study involved 184 players from the Premier League (including record champion Manchester United), as well as Championship and League One. The researchers examined the teeth and gingivae of 90 per cent of members of each senior squad and asked the players how they think oral disease affects their quality of life and overall performance. The majority of players surveyed regarded dental or gingival problems as having little influence on their overall performance on the pitch. One on five players, however, responded that oral health-related pain has affected their quality of life.

"Oral health is an area where many athletes have greater prob-

lems than the general population so it has been a massive achievement for so many professional football clubs to collaborate with each other to help us understand the scale of this problem better," commented West Ham United's Head of Medical and Sports Science Stijn Vandenbroucke, whose club participated in the study. "Being part of this study has also helped us as a club to implement tailored interventions to treat and prevent further problems."

West Ham regularly conducts preventive interventions with a dentist in the off- and pre-season.

"We are pleased that clubs such as West Ham are already embracing the findings and building on their existing interventions by placing oral health care at the forefront of their medical agenda," Dr Ian Needleman, Professor of Restorative Dentistry and Evidence-Informed Healthcare at UCL Eastman Dental Institute, said. "We hope that other teams follow their lead and introduce robust oral health screening and promotion as a routine element of their programmes."

Paediatric dentistry expert scoops Scottish Health Award

By DTI

EDINBURGH, UK: Since its first publication in 1997, Paediatric Dentistry by Prof. Richard Welbury has become the standard textbook for all dentists working

with children in the UK and Ireland. For this and other contributions to the field, the former paediatric dentistry professor from Glasgow received the first ever Scottish Health Award in the category "dentist".

Welbury beat fellow nominees Drew Gibson of Bearsden Dental Care and Roger Levie from Hamilton in Lanarkshire in the new category, which was announced this year. "I didn't even know I had been nominated until I got the call

saying I was a finalist," he told the *Daily Record* newspaper.

Organised annually in partnership with NHS Scotland and the Scottish government, the Scottish Health Awards have been held since 2010. They recognise individuals in categories such as "innovation" and "healthier lifestyle". Sixteen professionals were acknowledged with this year's awards, which were celebrated at the Corn Exchange in Edinburgh on 4 November.

In addition to his achievements as an author, Welbury was recognised for his work on guidelines on protection of children against abuse. He recently retired from his position of Professor of Paediatric Dentistry at Glasgow Dental Hospital that he held since 2001. Prior to that, he worked as a regional consultant and senior clinical lecturer at Newcastle University, his alma mater.

Welbury has served as president of both the British Society of Paediatric Dentistry and the European Academy of Paediatric Dentistry.

In July, he chaired the 25th Congress of the International Association of Paediatric Dentistry, which was held in Glasgow.



Prof. Richard Welbury accepting his award.

IMPRINT

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Published by DTI.

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The World's Dental Newspaper - United Kingdom Edition

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A new dental destination

Dental Tribune paid an exclusive visit to the new Curaden Dental Clinic in London

Curaden Dental Clinic that recently opened in Mayfair is seeking to do exactly that. Conveniently located right in the heart of the city, only a 5-minute walk from Oxford Street, it is ready to take the city by storm with a holistic prophylaxis approach called "Prevention-One".

The brainchild of Ueli Breitschmid, founder and CEO of Swiss preventative product specialist Curaden, and Zurich dentist Rolf Kufus, this practice branding concept involves not only a comprehensive product range, including toothpaste and -brushes under the well-known CURAPROX brand, but also tailored teaching programmes developed to help dentists better communicate the importance of oral health prevention to patients.

"There is a great deal of talk about prevention nowadays and how



The clinic opened in October.

important it is, but the reality is that teeth are often extracted unnecessarily and replaced with an implant, for example," said clinic manager Patricia Adam. "With Prevention-One, in contrast, patients are intended to be healthier and happier with their smiles."

Adam knows exactly what she is talking about. As a trained dental hygienist, she learnt all about the unique concept when working at Kufus's dental practice in Switzerland for several years. While the offer to develop and manage the first Curaden-branded practice in the UK initially came as a surprise for the native German, she soon adapted to the idea, despite the challenges that came with moving to another country and transforming an existing dental practice that did not meet the requirements for the new clinic.

"We certainly had to deal with a lot of regulations during the last few months, but we are happy that it all came together in the end," she explained.

According to Adam, it took almost a year to bring the site up to standard, culminating in a much-anticipated public opening in October, during which old and new patients had the first look at the now sleek and modern premises, defined by a simple but atmospheric colour scheme.

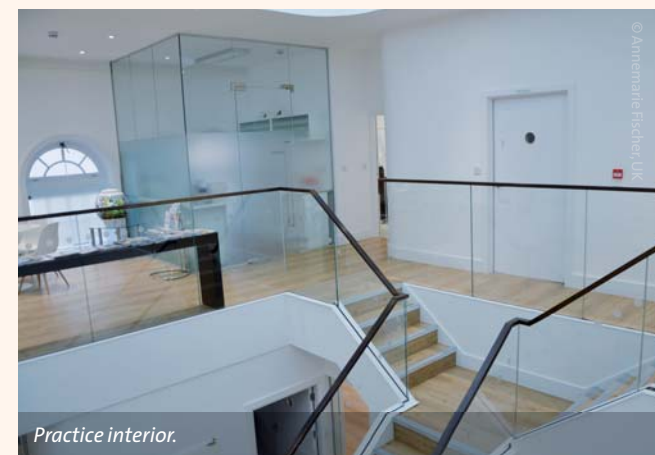
"A highlight of the CURAPROX product range is the new white and black toothpaste and we wanted to see that contrast reflected in the practice interior," Adam said. "At the same time, we wanted to maintain a bit of Curaden's heritage; therefore, we also incorporated the company's characteristic blue, as well as the Swiss cross, here and there."

In order to accommodate the busy lifestyles of most Londoners, the clinic is open until late and on certain Saturdays. According to Adam, the last few weeks have

seen many former patients returning and starting to recommend the practice to their family, friends and colleagues.

"We have also seen many patients presenting for a second opinion on their dental problems," she said.

All staff members, from the receptionists to the practitioners, undergo Curaden's iTop training on a regular basis, a three-level programme on the demonstration and explanation of prophylaxis as more than just fluoridation. In the long run, the concept is intended to change the role of the dental practice, moving away from restoration towards prevention, while ensuring the practice remains profitable.



Practice interior.

"Therefore, it is important that every member of the staff be able to explain the principles and products of our philosophy to the patient," Adam emphasised.

The clinic offers the complete spectrum of dental treatment, ranging from check-ups to implant therapy. A separate whitening room is to be established in the months to come, although whitening procedures, according to Adam, are already part of the clinic's extensive offering.

Located at 73 New Bond Street in London, the Curaden Dental Clinic is open Monday to Friday from 9:30 to 18:00 (except Thursdays, from 10:30 to 19:00) and on the first Saturday of the month. More information is available at www.curaden.clinic and via e-mail (newbondstreet@curaden.clinic) or telephone (+44 20 7499 9806).



Clinic manager Patricia Adam.

By DTI

LONDON, UK: Maintaining a dental practice on the high street can be

a complex endeavour, particularly in the capital, where setting one's practice apart from the rest is often key to long-term success. The new

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“Consumers are pushing dentists toward metal-free implantology”

An interview with Dr Sammy Noubissi, founder of the International Academy of Ceramic Implantology



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structure and could not survive the demands of the oral environment. Then came the use of polycrystals and in the early 2000s yttria-stabilized zirconia bioceramic emerged as the material of choice for metal-free intrabony implantation in dental implantology.

How did you become involved in research on ceramic dental implants?

My interest in ceramic implants came about in two ways. First, on a personal level, when I discovered that the metal fillings and implant I had in my own mouth were determined to be the source of some of the health problems I had experienced. Second, on a professional level, where a few of the patients to whom I had provided metal implants returned for check-ups or more implants, and upon reviewing their medical and dental history, it was also determined that the implants were at least in part responsible for the health problems they were experiencing. I then began to actively look for alternatives and at



Dr Sammy Noubissi

two decades had established themselves in both medicine and implant dentistry as the most bio-inert implantable material available. In 2011, two colleagues and I decided to create the IAOCI.

What is the primary aim of the IAOCI?

Associations and academies exist around various types of trades and industries. The common purpose of such groups is to organise and create a supportive environment for those involved in the respective area. The IAOCI was created with the same spirit, not only to organize metal-free implantology but also to provide the profession as a whole with quality and high-level continuing implant education on bioceramics as implantable materials. The IAOCI is also a resource for the public seeking practitioners who have experience with ceramic implants.

In your opinion, what are the dangers of metal implants?

Metal and most particularly titanium implants have been very successful. Their use has grown exponentially and with that manufacturers have multiplied, as well as manufacturing protocols. As a result, we have observed a steady increase in the alloy elements mixed with titanium during the manufacturing process. The problems begin when the metal implant highly alloyed or not, once placed is subjected to functional stresses, galvanism, body fluids and the harsh oral environment. The combination of mechanical, chemical and electrical events induces cracks and pitting of the metal, as well as breach in the oxide layer, and the implant undergoes corrosion attack. The corrosion attack, which is essentially an oxidation process, leads to the release of metal ions that studies have shown to be found in the surrounding bone, lymphatics, spleen, liver and in some cases crossing the blood-brain barrier.

What alternatives to metal dental implants are currently available on the market?

A great deal of progress has been made in terms of materials, techniques and design of dental implants since the beginnings of modern implantology over 50 years ago. While titanium and titanium alloys have always been in use, the search for metal-free implantable materials began in the late 1960s and early 1970s, and during the last decade, zirconia has emerged as the most reliable implantable bioceramic. The International Academy of Ceramic Implantology (IAOCI) is an organisation entirely dedicated to ceramic and metal-free alternatives to metal implants. It was founded in 2011 by Dr Sammy Noubissi, with whom *Dental Tribune* had the opportunity to speak about the mission and vision of the IAOCI, as well as the state of ceramic implantology today.

Dental Tribune: Dr Noubissi, could you please provide some background information on the development of ceramic implants?

Dr. Sammy Noubissi: The use of dental implants to replace teeth has increased very rapidly in the last 15 or more years. With this increase in dental implant procedures, the number of manufacturers has increased too. Also, we have witnessed the introduction of various alloys of titanium over time.

Now, just like with any pharmaceutical or medical product, the increase in demand and changes in production methods come with problems and challenges. Although initially anecdotal, reports of titanium and titanium alloy intolerance have increased and are increasingly being investigated and demonstrated in the scientific dental literature. Based on the body of research available today, this intolerance of implant alloys can in great part be attributed to the release of metal ions

in the host bone and surrounding tissue as a result of the breakdown and corrosion of metal alloys in the

In the late 1960s, pioneers in ceramic implantology and notably Professor Sami Sandhaus began the

“...reports of titanium and titanium alloy intolerance have increased and are increasingly being investigated and demonstrated in the scientific dental literature.”

presence of body fluids and the oral environment in particular. Such facts have been established and widely recognized in orthopedics.

search for modern non-metal implantable ceramic materials. However, many of the early ceramic implants were monocrystalline in their

the scientific literature, including case reports in both medical orthopedics and dental implantology. It was clear that bioceramics in the last



Dr Sammy Noubissi presenting clinical cases at the recent Annual World Dental Congress in Bangkok.

Today, the well-researched and proven alternative material to metal for dental implants is zirconium dioxide, also known as zirconia. This is also a well-proven fact in medical orthopedics. Zirconia is the crystal phase of zirconium and as such it is not a metal. There are different manufacturing protocols for zirconia for dental implantation and they all lead to a variety of polycrystal bioceramics, such as zirconia-toughened alumina, hot isostatic-pressed zirconia and yttria-stabilized zirconia. The common and most important properties of these bioceramics are inertness in the bone and oral environment, structural stability, absence of electrical activity, extremely low plaque retention and superior aesthetics.

Is the success rate of metal-free implants comparable with that of titanium implants?

In the early days, there were challenges. The materials were monocrystalline with very highly polished and glassy surfaces, which made the early implants prone to fracture, poor attachment of bone-forming cells and low bone-implant contact. The manufacturing protocols, design, surface modification techniques and technologies of zirconia implants have evolved to a point where bone integration is ensured and comparable results are obtained.

Are ceramic alternatives the future of dental implantology?

Every industry projection one sees about implants signals good news for the future. Implants are now and will continue to be widely accepted by patients and the profession. Both groups agree that this is state-of-the-art treatment. However, owing to technology, the public is much more informed about health issues and therapies. We are in a similar situation today to that of Invisalign braces a few years back, in that consumers are pushing dentists toward metal-free implantology for the most part. In five years' time, I believe that the number of ceramic implants being placed will double.

Bio-inert materials are the future of any type of implantable device. I believe bioceramics have taken hold and will be around for a long time because there has been a strong shift toward providing health care with the minimum risk and invasiveness over the last few years, as well as in a way that is more integrated, natural and biological. Furthermore, manufacturers have rapidly evolved and adapted the material and implant designs to clinical needs and demands. We now have a wide variety of implant designs, surface microstructures, components and prosthetic connections, making ceramic implants applicable to an extensive range of tooth replacement situations.

Dentists may have concerns about the reliability of ceramic implants. How does your organization address this?

Even within specialties, there is a need for organized groups because

in today's world research and application of discoveries are moving at lightning speed compared with 20 years ago. Therefore, once one has an environment in which much of the time and energy is spent tracking, learning and sharing innovative techniques and materials, members have a forum where they can obtain the information, training and skills to deliver the best of care to their patients in an evidence-based and organized manner.

As a matter of fact, our membership has doubled in the last two years and when prospective or new members are asked why they want to join or joined the academy, the most common response is that they are seeking a forum where they can obtain structured information and training.

Another frequent reason is that dentists have had patients challenge or inform them on the use and occasionally the existence of ceramic

implants. Through technology and the ease of access to information, the public obtains information faster than we busy clinicians.

The IAOCI will be hosting its Fifth Annual Winter Congress in Montego Bay, Jamaica. What can people expect from the event?

The theme in 2016 will be the last decade in ceramic implantology. We will have 14 speakers from seven different countries who will share their experiences with a variety of

ceramic implant systems over the last ten years. One of our guest speakers has over 15 years of documented experience with zirconia implants. We will also have workshops on different implant systems, ceramic regenerative products and revolutionary soft-tissue- and hard-tissue-enhancing protocols proven to optimize implant integration and long-term stability.

Thank you very much for the interview.

AD

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Planmeca moves its UK base to Coventry

Global dental equipment manufacturer opens new head office inside Ricoh Arena

By DTI

COVENTRY & BIRMINGHAM, UK: For almost a decade, the Ricoh Arena has been unsuccessfully waiting for Premier league football to return to Coventry. Besides being the home of one of Europe's most progressive rugby teams, the complex was extended in recent years to host a number of different events including concerts and exhibitions. In October, a new attraction was added, as global dental equipment manufacturer Planmeca opened its new headquarters for the UK and Ireland inside the complex as part of a new marketing campaign to heighten awareness of its brand throughout markets in the British Isles.

With Planmeca's Senior Vice President Tuomas Lokki from Finland attending as a special guest, the company's representatives, partners and associates celebrated the opening together during the BDIA Dental Showcase.

"This is a new era for Planmeca UK and our new home is one of the most important foundations from



Showroom with Planmeca dental unit.

which success can be built upon. This new facility offers the perfect environment to discover our range of digital imaging solutions, world class CAD/CAM system and our range of highly innovative digital dental units," Lokki said.

According to Planmeca UK Managing Director Karl O'Higgins, to whom *Dental Tribune* had the opportunity to speak in Birmingham, the new facilities will offer improved logistics for distribution and training. A new customer ex-

perience centre will feature a dedicated CAD/CAM training zone alongside a full range of 3-D imaging machines showcasing the latest in the field.

The showroom will also include Planmeca's range of digital dental units, which are all combined through the comprehensive and modular Romexis software. It can be quickly transformed into a small conference and event facility capa-

ble of hosting courses for up to 40 delegates, O'Higgins said.

"Planmeca hasn't exploited its opportunities across the UK and Ireland for many years," he commented on the opening, "With the new office we wanted to emulate our global headquarters in Helsinki but with a size that is appropriate to the market."

cated digital dental unit or putting an AD system into the ceiling. The final result has clearly exceeded our expectations," O'Higgins added.

Plans to relocate the company's UK headquarters to Coventry took shape earlier this year. Prior to that, Planmeca had operated from its former headquarters in Stevenage in Hertfordshire. At the end of last year, the company parted with its



Karl O'Higgins.

"Our team put in a lot of hard work and hours into the new office, whether it be building a sophisti-

consumables business, Plandent, which was acquired by Henry Schein UK.

Something to celebrate

Nobel Biocare event series reaches final point with London meeting



Nobel Biocare CEO Richard Laube.

By DTI

LONDON, UK: Celebrating the 50-year anniversary of the first successful osseointegrated implant ever placed in a patient, experts from all around the globe recently gathered in East London for the Nobel Biocare Team Conference. In addition to the achievements of the last decades, they discussed future concepts and prospects in the field of dental implantology.

Held in The Brewery, the former site of the Whitbread brewery, the

event was the latest in a series of international expert symposia that Nobel Biocare has held in cities around the world this year, including Los Angeles, Hong Kong and Monaco. According to UK marketing manager for Nobel Biocare Glenn Rhodes, up to 400 professionals from the UK and abroad attended the symposium in London, which also saw an appearance by Nobel Biocare CEO Richard Laube who acknowledged the achievements of his company this year, particularly

in view of its transition into the Danaher group. He said that Nobel Biocare will continue to provide innovation in the future. "There is definitely more to come," Laube promised.



Up to 400 attended the two-day event.

"Being a part of such a big dental platform in the UK, we are already starting to see the benefits of that cross-working," Rhodes added. "There is a lot of potential here with new opportunities to deliver more solutions to more professionals, to help our customers treat more pa-

tients better and in turn improving the quality of life of more patients."

US health conglomerate Danaher acquired the Swiss Implant specialist at the end of last year. Following the transition, Nobel Biocare introduced a number of new products in the UK market this year, including new complete posterior solutions

for posterior restorations, as well as fantastic restorative possibilities in the aesthetic zone," Rhodes said.

Attendees of the conference were able to experience and discuss these and the company's other latest innovations, such as new additions to the wide-platform NobelActive and the All-on-4 treatment concept with zygomatic implants, in London. The two-day event also offered a number of lectures, master classes and workshops on a wide range of topics, including peri-implantitis and immediate implant placement. Overall, the meeting gathered 26 leading speakers for the conference, according to Scientific co-chair Prof. Daniel van Steenberghe from Belgium, who also invited attendees to participate in the Foundation for Oral Rehabilitation, an independent, international initiative, founded in 2013 and endowed by Nobel Biocare.

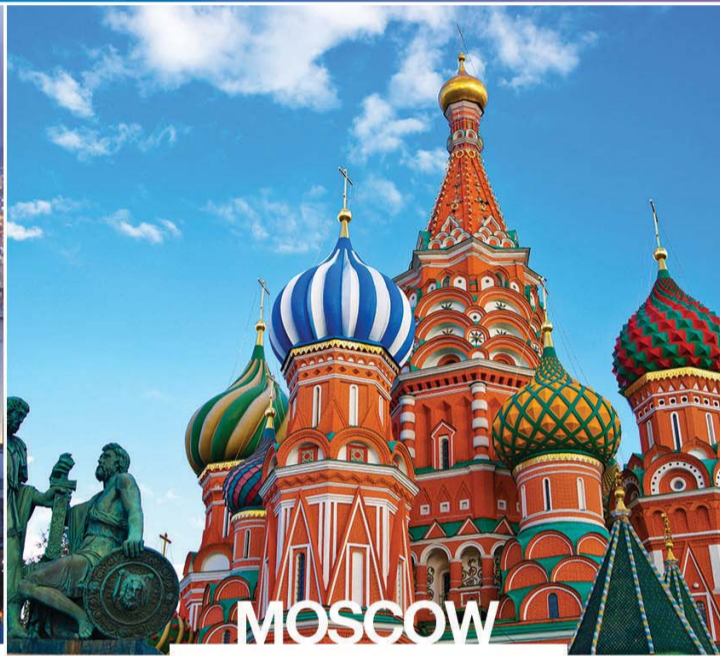
with the NobelParallel Conical Connect (CC) and the NobelActive Wide Platform (WP) implant systems.

"The Angulated Screw Channel (ASC) abutment and Omnigrip tooling is also flying off the shelves, because it offers enhanced access

"The energy from the recent conference shows that the profession is really behind Nobel Biocare and the solutions we offer. With this and so much more to offer the profession, we will continue striving for excellence and look forward to what we will achieve in the future," Rhodes concluded.

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