

IMPLANT TRIBUNE

— The World's Dental Implant Newspaper • U.S. Edition —

OCTOBER 2012 — Vol. 7, No. 10

www.dental-tribune.com

Look who's 40



Participants flow through the exhibit hall at the ICOI World Congress in Florida this September. (Photo/Anna Kataoka-Wlodarczyk, Dental Tribune)

ICOI celebrates milestone with a look at implant dentistry's innovations, complications and controversies

For 40 years, the ICOI has been educating clinicians on implant dentistry, along with all the innovations, complications and controversies that go with it. During its recent ICOI World Congress, the organization honored that history and took a look back at where this once fledgling "study club" came from.

What once was run from the office of ICOI co-chair Dr. Kenneth Judy now occupies an entire floor of an office building in Upper Montclair, N.J. What once started as a small group of clinicians has now grown to encompass more than 13,000 dues-paying members and spans all continents except for Antarctica.

September's World Congress XXIX was

► See ICOI, page B4

JOI study: Surgical techniques compared for reconstructing the jaw for dental implants

For a successful dental implant, the first step for some patients is reconstructive surgery of the jaw. A bone graft to augment the upper jaw can now be achieved by several methods. To assess these methods, their risk of sinus perforation and the best evaluation technology, researchers put these procedures to the test on 20 human cadaver specimens.

The Journal of Oral Implantology presented a pilot study comparing transcrestal techniques for maxillary sinus floor elevation. This is a surgical procedure that increases bone volume and prepares the upper jaw for dental implants. The study sought to determine if any of the techniques carried a greater risk of surgical complications.

Perforation of the sinus membrane is the most common surgical complication associated with maxillary sinus floor el-

evation. Perforations have been linked to acute or chronic sinus infection, edema, bleeding, loss of bone graft material and failure of the implant.

The conventional method for this procedure is the lateral approach, which gains surgical access through the zygomatic bone bordering the maxillary sinus cavity. While this is an invasive technique, there is a low incidence of complications.

A less invasive procedure uses a crestal approach through the osteotomy prepared for dental implant placement. However, this is a sensitive technique that restricts the surgeon's direct visual examination.

The current study used 20 human cadaver specimens with 40 intact sinuses, as test subjects for three transcrestal surgical techniques. One experimental group used the DASK kit, which features

specially designed surgical drills to apply mechanical and hydraulic pressure. Another experimental group received a surgical protocol that permitted entry into the sinus through crestal bone that had been eliminated during site preparation. A control group was treated with the osteotome/crestal sinus membrane elevation, or OCSME, technique.

Postoperative assessment of the specimens determined whether membrane perforation had occurred. Direct visual endoscopy, cone-beam computerized tomography, and periapical radiographs were used.

While the study found endoscopy to be the preferred form of detecting membrane perforations, no significant differences were found in the rate of perforations among the surgical techniques used.

Full text of the article, "The Incidence of

Maxillary Sinus Membrane Perforation During Endoscopically Assessed Crestal Sinus Floor Elevation: A Pilot Study," Journal of Oral Implantology, Vol. 38, No. 4, 2012, is available at www.joionline.org.

About Journal of Oral Implantology

The Journal of Oral Implantology is the official publication of the American Academy of Implant Dentistry and of the American Academy of Implant Prosthodontics. It is dedicated to providing valuable information to general dentists, oral surgeons, prosthodontists, periodontists, scientists, clinicians, laboratory owners and technicians, manufacturers and educators. The Journal of Oral Implantology distinguishes itself as the first and oldest journal in the world devoted exclusively to implant dentistry. For more information, visit www.aaaid-implant.org/index.html.

ITI Congress Canada: Analyzing the risks and benefits of emerging technologies

This year's International Team for Implantology (ITI) Congress Canada took place in September in Toronto.

Close to 250 professionals in implant dentistry attended the congress that undertook to analyze the risks and benefits of emerging technologies in implant dentistry and scrutinize them against the backdrop of current best practices. The two-day congress included top-class lectures given by specialists from Canada and abroad.

The first day was devoted entirely to Urs Belser and Daniel Buser (Switzerland), who presented an evidence-based rationale for early implant placement

and contour augmentation, handling of esthetic failures, fixed implant restorations in the esthetic zone, treatment planning principles for the esthetic zone, the use of provisionals on final esthetics and more.

The second day brought together Canadian clinicians from across the country and beyond to discuss topics ranging from technology transfer to each and every step along the digital workflow. For the first time, the ITInet Global Forum came into play for the question period after each session.

"We were extremely gratified by the response of the attendees, all of whom

were very satisfied knowing that we had provided them with a superb encapsulation of emerging technologies, put them under the microscope and provided the tools to evaluate them," said Robert Carmichael, education delegate of the ITI section Canada.

The ITI Congress Canada was also the setting for the presentation of the André Schroeder Research Prize 2012 to Dr. Cornelius von Wilmsowky, a PhD dentist, oral surgeon and researcher at Friedrich Alexander University of Erlangen-Nuremberg, Germany. The ITI's 13,000th member, Dr. Adam Kaplan, was also welcomed during the congress.

AD

IMPLANT DENTISTRY
Debating the Options
for Practical Solutions

AAID 61st AAID Annual Meeting
AMERICAN ACADEMY OF IMPLANT DENTISTRY
Washington DC October 3-6, 2012
Practical Education for the Practicing Implant Dentist
www.aaid.com

IMPLANT TRIBUNE

PUBLISHER & CHAIRMAN
Torsten Oemus t.oemus@dental-tribune.com

CHIEF OPERATING OFFICER
Eric Seid e.seid@dental-tribune.com

GROUP EDITOR
Robin Goodman r.goodman@dental-tribune.com

EDITOR IN CHIEF IMPLANT TRIBUNE
Sascha A. Jovanovic, DDS, MS
sascha@jovanoviconline.com

MANAGING EDITOR IMPLANT TRIBUNE
Sierra Rendon s.rendon@dental-tribune.com

MANAGING EDITOR SHOW DAILIES
Kristine Colker k.colker@dental-tribune.com

MANAGING EDITOR
Fred Michmershuizen
f.michmershuizen@dental-tribune.com

MANAGING EDITOR
Robert Selleck, r.selleck@dental-tribune.com

ACCOUNT MANAGER
Humberto Estrada h.estrada@dental-tribune.com

ACCOUNT MANAGER
Gina Davison g.davison@dental-tribune.com

MARKETING DIRECTOR
Anna Wlodarczyk-Kataoka
a.wlodarczyk@dental-tribune.com

C.E. DIRECTOR
Christiane Ferret c.ferret@dtstudiesclub.com

Dental Tribune America, LLC
116 West 23rd Street, Suite 500
New York, NY 10011
Phone (212) 244-7181
Fax (212) 244-7185

Published by Dental Tribune America
© 2012 Dental 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 Sierra Rendon at s.rendon@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 Dental Tribune America.

EDITORIAL BOARD

Dr. Sascha Jovanovic, Editor in Chief
Dr. Bernard Touati
Dr. Jack T. Krauser
Dr. Andre Saadoun
Dr. Gary Henkel
Dr. Doug Deporter
Dr. Michael Norton
Dr. Ken Serota
Dr. Axel Zoellner
Dr. Glen Liddelow
Dr. Marius Steigmann
Dr. Pankaj Singh

Corrections

Implant 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 report the details to Managing Editor Sierra Rendon at s.rendon@dental-tribune.com.

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 Implant Tribune? Let us know by e-mailing feedback@dentaltribune.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 e-mail at database@dental-tribune.com and be sure to include which publication you are referring to. Also, please note that subscription changes can take up to 6 weeks to process.

SOME IMPLANTS ARE OKAY WITH "ALMOST" COMPATIBLE.



Mention this advertisement and for a limited time purchase two implants

Get one FREE*

REALLY?



Compatibility.

Uses the same drills, drivers, and prosthetics.

Confidence.

Knowing your referrals already have the right components.

Cost.

Only \$145.99 per implant, why pay more?



ACE Surgical Supply Co., Inc.
1034 Pearl Street, Brockton, MA

1.800.441.3100 • acesurgical.com



* Implants must be on the same invoice. Limit of 1 (one) free implant per new user.



THE SYNTHETIC SOLUTION TO BONE REGENERATION

NOVABONE®
DENTAL PUTTY

BUY ANY SIX GET

1 FREE*

LIMITED TIME OFFER

Mix & Match, lowest priced item is FREE

NovaBone® is the only dental bone graft putty that is completely synthetic with excellent and reliable bone formation characteristics. It is indicated primarily for implant related surgeries including but not limited to sinus elevation surgeries, extraction sockets, ridge augmentations, etc. Putty does not require mixing as it is dispensed in a pre-mixed state ready for implantation!

NovaBone Dental Putty is available in multiple delivery mechanisms including syringes, shells & cartridges. The consistency and formulation of the putty is identical in the various delivery systems.

NOVABONE DENTAL PUTTY CARTRIDGE SYSTEM

A NA3620	0.5cc Cartridges	2/pkg	\$225.00
A NA3640	0.5cc Cartridges	4/pkg	430.00
B NA3621	1.0cc Cartridges	2/pkg	410.00
C NA3600	Cartridge Dispenser	each	99.99

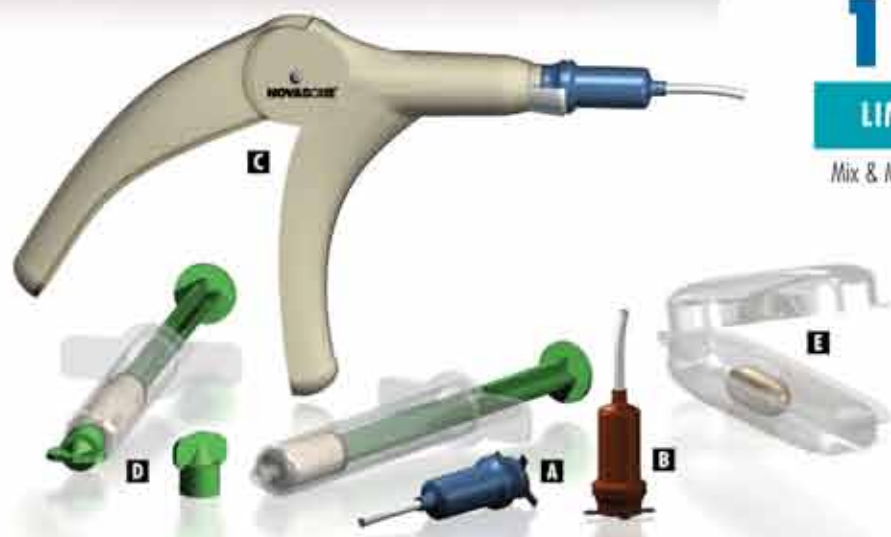
NOVABONE DENTAL PUTTY SYRINGE

D NA1610	0.5cc Syringe	1/pkg	\$105.00
D NA1611	1.0cc Syringe	1/pkg	190.00
D NA1612	2.0cc Syringe	1/pkg	335.00

NOVABONE DENTAL PUTTY CLAM SHELL

E NA0610	0.5cc Clam Shell	1/pkg	\$90.00
E NA0660	0.5cc Clam Shell	6/pkg	439.49
E NA0611	1.0cc Clam Shell	1/pkg	170.00
E NA0622	1.5cc Clam Shell	2/pkg	391.99

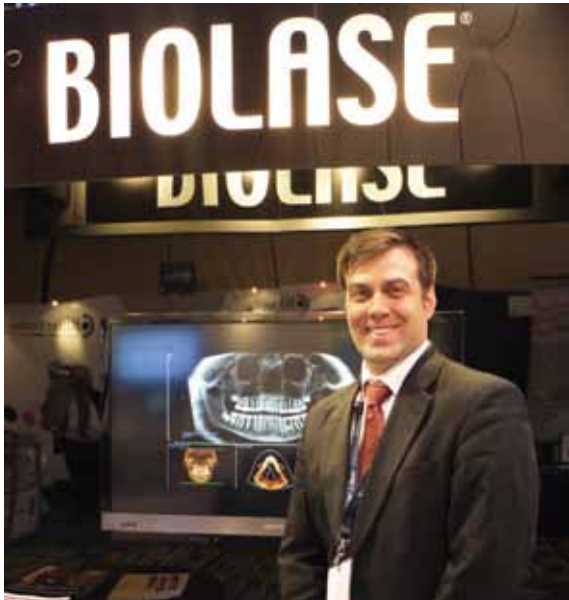
Buy 6 get 1 FREE Offer, must mention this ad • Offer expires October 31, 2012.



ACE Surgical Supply Co., Inc.
1034 Pearl Street, Brockton, MA

1.800.441.3100 • acesurgical.com





Biolase's Nathan Layman talks lasers at the ICOI's World Congress in Florida.



Michael Vilardi and Jenny Hotaling are on hand at the Dear Doctor booth.



Ray Diaz meets visitors to the Exactech booth with a big smile at the World Congress.

AD



Academy of Osseointegration 28th Annual Meeting

March 7-9, 2013
Tampa Convention Center • Tampa, Florida



Moving Forward: Evidence, Experience, Excellence

- Opening Symposium: *Quality Evidence – Quality Treatment – Quality Outcomes*
Featuring: Edward Alan; Daniel Buser; Lyndon Cooper; Richard Roblee; Clark Stanford & Robert Winter
- 36 Corporate Forum Presentations
- Commercial Exhibits
- Emerging Treatment Option Sessions (New)
- Limited Attendance Lectures
- Lunch and Learn Presentations



osseo.org

- Poster Presentations
- Round Table Clinics
- Restorative & Surgical Tracks
- Social Events
- Treatment Approaches
- Closing Symposium: *Where Are We Today and What Does the Future Hold?*
Featuring: Urs Belser; David Garber; Joseph Kan; Henry Salama; Maurice Salama; & William Scarfe



ADA CERP® Continuing Education Recognition Program



Consult Pro's Fabrizio Savarino and Jason Pardo are on hand to discuss patient education.



Fred Widarsson, Bill Maricic and Kyle Armstrong of the DENTSPLY Implants North America Division welcome visitors to the booth.

Photos/Anna
Kataoka-
Wlodarczyk,
Dental Tribune

-ICOI, Page B1

created and prepared by Dr. John Russo and includes a diversified and international faculty. Some of the topics covered included cone-beam CT diagnosis and treatment planning; the use of growth factors including stem cells; digital impressions from the perspectives of the clinician and the laboratory; and diagnosis, prevention and treatment of soft-tissue esthetic complications.

In addition, more than 100 implant dentistry-related exhibitors brought to the ICOI exhibit hall the newest and most advanced products and technology available on the market.

IMPLADENT LTD PROUDLY INTRODUCES AN AFFORDABLE ALTERNATIVE



OSTEOMEND®XTD BOVINE COLLAGEN

- * Absorption Time: 4-6 months on average
- * Derived from Achilles Tendon
- * Excellent Handling Characteristics
- * Strong and Predictable Absorption
- * Sizes: 15mm x 20mm and 25mm x 30mm



COLLAFORM®SINGLES BOVINE COLLAGEN

- * Absorption Time: 4-6 weeks on average
- * Absorbable Collagen for Tissue Preservation
- * Maintains Graft in Extraction Site for Ridge Preservation
- * Socket Grafting without Primary Closure allowing Keratinized Tissue Preservation
- * Size: 12mm x 20mm x 3mm each



COLLAFORM®PLUG BOVINE COLLAGEN

- * Absorption Time: 4-6 weeks on average
- * Absorbable Collagen Wound Dressing
- * Economical - Easy to Handle
- * Size: 10mm x 20mm each

OSTEOGEN® IS A NON-CERAMIC OSTEOCONDUCTIVE SYNTHETIC BIOACTIVE RESORBABLE GRAFT

Artzi reports "What is important is the implant success rate over time, as reported by the Sinus Consensus Conference, a 98% cumulative success rate over 5 years has been found with pure alloplast OsteoGen®." Artzi further noted that "OsteoGen® is physicochemically and crystallographically equivalent to human bone making it a pure alloplast. The spaces between the crystal clusters facilitate cellular and tissue proliferation within the grafted material, thus enhancing faster osseointegration." *

* Artzi Z, Nissimovitz CE, Dreyer D. Nonceramic hydroxyapatite bone derivative in sinus augmentation procedures: Clinical and histomorphometric observations in 10 maxillary cases. Int J Periodontics Restorative Dent 2001; 23:381-389. Faganaro PA, Vignoli L. Int J Oral Maxillofac Implants 1998; 13:121-30.

OSTEO TAPE® PREFORMED POROUS BONE GRAFT SHAPES TO ENHANCE BLOOD AND CELL ANGIOGENIC INFILTRATION



FAST EFFECTIVE DELIVERY SOLUTIONS
FOR PERIODONTAL AND MAXILLOFACIAL SURGERY

REPAIR INFRABONY DEFECTS AND IMPLANTS
RIDGE PRESERVATION
SINUS AUGMENTATION
BUCCAL ONLAY GRAFTING
GBR TECHNIQUES
TOOTH EXTRACTIONS

NON-CERAMIC
NON-PYROGENIC

Make 2 mm holes and
use medullary blood to
build better bone



SIMULATES NATURAL COLLAGEN
MATRIX AND MINERAL STRUCTURE
OF HUMAN BONE

RADIO LUCENT DAY OF SURGERY
NEW BONE SHOWS RADIO PAQUE

CUT AND DELIVER DRY TO SURGERIZED SITE FOR BETTER ADAPTABILITY AND CONTROL

SURGICAL TECHNIQUE TO ACHIEVE REGIONAL ACCELERATORY PHENOMENON



Holes are made through the cortex. Defect cavities are grafted with OsteoGen®. Modeling is attained by securing OsteoTape® strips dry over graft with 1.5 mm Self-Drilling screws.



After cortex perforation, buccal implant concavity is filled with OsteoGen® to slightly above level of cortex. OsteoTape® is secured over the graft with 1.5 mm Self-Drilling screws.



Ridge height and width modeling requires 1.5 mm to 2.0 mm cortical perforations to maintain vascularity over a longer period of time. On x-rays at 4 to 5 months, defect site will show radiopaque.

MINIPLATE™ STARTER KIT BONE GRAFT FIXATION SCREW AND TITANIUM MESH SYSTEM 5 IN 1 STERILIZATION CASSETTE



BUILD YOUR OWN CASSETTE

YOUR CHOICE OF 15 SCREWS AND TEXTING SCREWS

STARTER SYSTEM INCLUDES:

- 1.5 MM SELF-DRILLING TACK-SCREW
- 2.0 MM SELF-TAPPING SCREW
- 1.5 MM TEXTING SCREW
- SCREWDRIVER HANDLE AND BLADE
- MANUAL TWIST DRILL BIT
- 1.5 GRAM OSTEOGEN® GRAFT
- 2.0 CC OSTEODEX™ BONE
- TITANIUM MESH (CHOOSE FROM 2 SIZES)



Debridement and cauterization of buccal region was followed by perforating the cortex in marrow using 2 mm round bur. Bleeding was controlled, and the defect cavities were grafted with OsteoGen®.

OsteoGen® and OsteoDemin® were mixed with 4 ml blood. Titanium mesh cage was secured lingually with 2 screws. Bone graft mixture placed on ridge and mesh. Cage was secured buccally with 2 screws.

5-6 Months Post-Op. Screws were removed and the cage reflected revealing restoration of 10 mm vertical bone height by 7 mm thickness. Two 4 mm diameter implants were placed in the restored site.

OSTEOGEN® non-ceramic crystal clusters Synthetic Bioactive Resorbable Graft (SBRG)

- Physicochemically, OsteoGen® is like trabecular bone
- Radiolucent today ... Radiopaque in 4-6 months



800.526.9343

fax 718.464.9620

www.impladentltd.com

See us in Los Angeles at the AAP Annual Meeting Booth #925 and
Washington DC at the AAID Annual Meeting Booth #417



Chelsea Chapin explains to ICOI attendees about the KAT Implant System.



Q-Optics' Brent Downs and Corless Wiley show off the company's quality loupes and LED lighting.



Osteogenics's Russ Rowan talks to an ICOI attendee about the company's bone-grafting materials.

AD

You know how important photographs are to your practice, but you don't know who to turn to for advice. PhotoMed understands your **need**s and can help you choose the right camera. We also include **a** support and loan equipment program for the life of the camera so you have someone to turn to if you have questions.

PhotoMed dental cameras feature the best digital camera equipment available. The Canon G12, Rebel T3i and T4i are great choices.



Visit the PhotoMed booth at these upcoming meetings:
 ICOI, Orlando - #107
 AAP, Los Angeles - #1107
 AAID, Wash. DC - #531
 ADA, S. Francisco - #6455
 ACP, Baltimore - #101

Choosing a quality **dental** system for your practice doesn't have to be difficult. Call the experts at PhotoMed and we'll help you with all of your **camera** questions.

PhotoMed www.photomed.net • 800.998.7765



Materialise Dental's Matt Tedrow, Matt Garis and Carole Brown are on hand to offer information about 3-D digital implantology.



Nicole Lee shows off the company's products at Ultralight Optics' booth.



Matt Powell offers information to an ICOI attendee at the ZEST booth.



Zimmer Dental's Jeff Walker and Steve Craft greet visitors at the company's ICOI booth.



WHILE DENTISTS WORLDWIDE
HAVE APPLAUDED ZEST LOCATOR'S
OUTSTANDING PERFORMANCE,
YOUR REQUESTS HAVE
DRIVEN OUR NEXT ACT.



CATCH THE PREVIEW.

Log onto www.zestanchors.com/sneakpeek/it and
raise the curtain to see our new innovative product.

Tired of Price Increases on Over-Priced Implants?

It's Time for a Reality Check. Choose Implant Direct for...
Innovative Products. Great Value. Highest Customer Satisfaction¹

Legacy™3 Implant

All-in-1 Packaging includes implant, abutment, transfer, cover screw & healing collar
\$175 vs \$621² from Zimmer Dental

✓ **Reality Check**
Zimmer Customers
Save \$446 with Legacy3



SwishPlant™ Implant

All-in-1 Packaging includes implant, straight abutment/transfer, cover screw & healing collar
\$200 vs \$705² from Straumann®

✓ **Reality Check**
Straumann Customers
Save \$505 with SwishPlant



ReActive™ Implant

All-in-1 Packaging includes implant, abutment, transfer & cover screw
\$200 vs \$694² from Nobel Biocare™

✓ **Reality Check**
Nobel Customers
Save \$494 with ReActive



Implant Direct's New Las Vegas Training Center

Implant Direct offers an extensive list of educational opportunities at its Las Vegas Training Center with computers at each desk for Image Guided Surgical Training, models/mannequins for hands-on training and a four chair dental office for live surgical demonstrations.

Next Course: November 30-December 2

For information on courses and dates, both in Las Vegas and throughout the US, visit Implant Direct's website or use your smart phone to link directly to our Educational Section.



EARN 2 CE CREDITS FREE: View Online Lecture with 3D Graphic Videos & Answer 13 Test Questions



The Changing Reality of Implant Dentistry

Presented by Dr. Gerald Niznick

Technological advances and economic factors have shifted the implant industry toward affordable care.

Intro Offer: Make the switch & receive three FREE implants³

Continuing education credits may not apply toward license renewal in all states. It is the responsibility of each participant to verify the requirement of his/her state's licensing board(s).

Live surgical demonstrations not available at all times.

All trademarks are property of their respective companies.

¹Satisfied among Current and Former Users, by Company US Q313 Millenium Research Group A Decision Research, Inc. Company.

²Price comparisons based upon US list prices of comparable items as of February 2013.

³Terms and conditions apply.

⁴Implant Direct 2011; 20: 13-18 (v190); PPSN-6A009PSI-346 (v17) Reports available at www.implantdirect.com

Designed For Success, Packaged For Value



Five Year Warranty³

98% Success in Sinus Elevation Cases⁴

99% Success in Immediate Load Maxillary Cases⁵

Customer Service & Technical Support



ReActive™ Implant



Cover Screw

RePlant® Implant System Advantages:

Nobel Biocare-Compatible Internal Tri-Lobe

Prosthetic compatibility with Nobel Biocare's NobelReplace™ Implant

Surgical Compatibility between RePlant & NobelReplace™

No need to change surgical protocol or tools

Three Implant Designs & Packaging Options

Allows for selection based on price, packaging or thread design

RePlant: \$150 includes cover screw, temporary abutment/transfer

RePlus: \$175 includes cover screw & "snappy" abutment/transfer

ReActive: \$200 includes cover screw & preparable abutment/transfer

Micro-Threads

Reduce crestal stress for improved initial stability

Coronal Bevel on RePlus & ReActive

Allows for use of platform switching technology

Titanium Alloy

Offers superior strength to pure titanium

RePlant®

Body Dimensions Match NobelReplace™

RePlus®

Body Taper for Bone Expansion

ReActive™

Buttress Threads for Increased Surface



	Laboratory Abutment	Straight Snap-On	Straight Contoured	15° Angled Contoured	Gold/Plastic Abutment	Zirconia/Ti Abutment	Plastic Temporary Abutment	Ball Attachment	GPS™ Attachment	Angled GPS™ Attachment	Multiple-Unit w/Cap & Transfer	Multiple-Unit Angled
Our price	\$75	\$85	\$85	\$85	\$100	\$120	\$35	\$107	\$100	\$120	\$85	\$100
Nobel Biocare™	\$145	\$186	\$170	\$225	\$216	\$285	\$72	\$217	\$149	N/A	\$229	\$274