

#### Inside today

You will find an overview about the UAE International Dental Conference and Arab Dental Exhibition—AEEDC Dubai 2016, new developments and trends in the world of dentistry as well as information on dental products and the industry.

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#### **Reassessing risk factors**

Since the 1960s, the dental profession has blamed patients' poor oral hygiene for periodontal breakdown and dental caries while often failing to diagnose and treat other contributing causative factors. An overview by Prof. Crawford Bain, Dubai.



#### **Dental products in focus**

The UAE International Dental Conference and Arab Dental Exhibition—AEEDC 2016 will be an excellent opportunity to see the most up-to-date technologies and achievements in the field of dental medicine

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# Anniversary dental meeting starts in Dubai

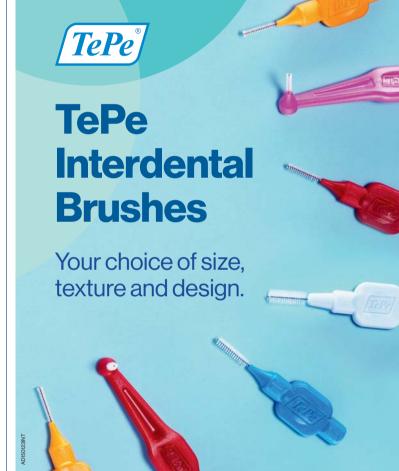
40,000 expected for UAE International Dental Conference and Arab Dental Exhibition

■ For the 20<sup>th</sup> consecutive time, the doors of the Dubai World Trade Centre will open this week to welcome

dental professionals from all over the globe to the next UAE International Dental Conference and Arab Dental Exhibition (AEEDC Dubai 2016), Held for the first time in 1997. the event has become one of the largest and most important dental meetings worldwide, attracting tens of thousands of clinicians, scientists and the industry representatives each year.

According to AEEDC Dubai Executive Chairman Dr Abdul Salam Al Madani, this year's edition has increased in size again and will occupy more 60,000 sqm exhibition space. Up to 800 manufacturers and dealers from the MEA region and beyond will showcase their latest product innovations and developments to visitors from the region. More than 40,000 participants are expected for the show, which will also feature one of the largest scientific programmes ever in the history of the event. Over the next









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#### today «page 1

three days, internationally renowned experts from almost every field of dentistry will update participants on the latest clinical developments and techniques. In addition to the main programme, a number of specialty events are held including the AEEDC Dubai World Oral and Maxillofacial Surgery 2016 Conference and AEEDC Dubai World Orthodontic 2016 Conference. A number of special session are targeted at French-speaking participants again. Other highlights include the GCC Preventive Dentistry Conference, AEEDC Advanced Specialty Courses, Poster and Oral Poster Presentations, the 7th AEEDC Student Competition with the participation of six universities, the Global Scientific Dental Alliance Meeting, as well as the AEEDC  $\,$ Dubai Awards.

Boasting such a large offering, Al Madani said that AEEDC Dubai is now considered the premier annual choice for much of the global oral health professionals.

"In 1997, we had a vision of establishing the first leading international oral health platform to serve the community and the dental profession in the region," Al Madani commented. "Year after year, AEEDC Dubai has continuously shown outstanding growth and quality in its delivery of education and showcasing technology."

"Our greatest achievement is having AEEDC Dubai ranked number one in the MENASA region and ranked second worldwide."



Dr Abdul Salam Al Madani

The first edition of AEEDC took place in 1997 with only 35 exhibitors and 200 visitors. Since then the show has continuously increased in size and quality, reflecting the development of dentistry in the region as a whole.

"Without doubt, AEEDC has helped in lifting the level of dental care provided in the region. Today, the technologies used and experts operating in this region rivals those in other far more advanced countries," AEEDC Scientific Vice Chairman Dr Mohammed Abedin said.

A part of the World Dental Exhibitions Alliance, the UAEInternational Dental Conference and Arab Dental Exhibition is annually under the patronage of his Highness Sheikh Hamdan Bin Rashid Al Maktoum, Deputy Ruler of Dubai, Minister of Finance and President of the Dubai Health Authority. This year's edition takes place from 2–4 February. ••

## Eklund Foundation for Odontological Research and Education

TePe donates SEK50 million to support international research

■ Swedish oral hygiene company TePe (Booth 41) has announced that it has donated SEK50 million (€ 5.3 million) to its newly founded Eklund Foundation for Odontological Research and Education. The foundation will primarily distribute funds for research and education in oral health and is open for international applications from 1 May.

The Eklund Foundation for Odontological Research and Education was founded in celebration of TePe's 50<sup>th</sup> anniversary in 2015. "We, in the owner family, are very pleased to establish this

foundation in line with the vision of good oral health for everyone, which is central to us," said TePe CEO Joel Eklund on the occasion.

"For 50 years, TePe has had a rewarding collaboration with universities, institutes and  $% \left( 1\right) =\left( 1\right) \left( 1\right)$ 



The Eklund Foundation aims to support knowledge and development in the field of dentistry mainly by awarding funds to selected received a dentistic property.

dental care professionals around the world. The foundation is a way for us to show our appreciation and create something that will contribute to knowledge and development within the odontological field for many years to come," Eklund stressed.

International applications for funding will be accepted from 1 to 31 May and awarded in autumn 2016, the company told *Dental Tribune*. A website detailing the application process will be launched in March. In the meantime, more information is available at

www.tepe.com.

TePe is a privately held company founded in 1965. Headquartered in Malmö, the company has subsidiaries in Germany, Italy, the Netherlands and the UK. ◀



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today AEEDC will appear at the 20th UAE International Dental Conference & Arab Dental Exhibition in Dubai, 2-4 February, 2016.

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today news AEEDC Dubai 2016

## ROOTS SUMMIT 2016: Premier global forum for endodontics takes place in Dubai

■ This year's ROOTS SUMMIT, which has drawn dental professionals to various locations all over the world in the past decade, will take place from Nov. 30 to Dec. 3 at the Crowne Plaza Dubai hotel in

the United Arab Emirates. Aimed at updating participants about the latest in endodontic treatment, an unparalleled series of lectures and workshops will be held by global opinion leaders in the field. Although the meeting will focus exclusively on the latest techniques and technologies in endodontics, the organizers have strongly encouraged not only dentists specializing in the field to at-

tend but all who have an interest in endodontics, including general dentists and manufacturers and suppliers of endodontic products. Overall, about 700 attendees are expected.



Over the past 15 years, the ROOTS SUMMIT has grown significantly. The community originally started as a mailing list of a large group of endodontic enthusiasts in the 1990s. After the establishment of a dedicated Facebook group three years ago, membership increased from 1,000 to more than 20,000. Today, the group is composed of members from over 100 countries.

Previous ROOTS SUMMITS have been held in Canada, the US, Mexico, Spain, the Netherlands, Brazil and last year in India. These meetings have been known for the strength of their scientific programs and their relevancy to clinical practice. The lectures, workshops and hands-on courses scheduled for this year's meeting will be no exception. More than 15 distinguished experts are presenting during the conference.

For the summit in Dubai, the organizers have partnered with Dental Tribune International (DTI) and the Dubai-based Centre for Advanced Professional Practices (CAPP) for the first time. With its international network, composed of the leading publishers in dentistry, DTI reaches more than 650,000 dental professionals in 90 countries through its print, online and educational channels, as well as a number of special events. Over the past decade, CAPP has been able to establish first-class standards for continuing dental education programs not only in the UAE but also across the Middle East. Since 2012, CAPP has been affiliated with DTI as a strong local partner in the Middle East.

Based on the successes of previous ROOTS SUMMITS, the organizers anticipate a large turnout for this year's meeting. Various sponsorship opportunities are available, including booth space, as well as sponsorships of workshops, hands-on courses, meeting bags and social events.

Online registration for the ROOTS SUMMIT is now open at www.roots-summit.com. ◀



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## The role of the hygienist in the twenty-first century

By Victoria Wilson, UAE

■ Since the recent launch of the Emirates Dental Hygienists' Club in the UAE, it could not be a more appropriate time to discuss the growing role of the hygienist in the twenty-first century. The preva-

## YOUNG

lence of preventable dental disease within the region prevails, and the need for a focus on the core strategy to overcome such disease needs to be addressed.

The dental hygiene profession was founded over 100 years ago by Alfred Fones in the US for the promotion of oral health and prevention of disease. The fundamental ethical responsibility of the dental hygienist is the pursuit of the promotion and restoration of oral health. The dentist's role certainly encompasses the promotion of oral health and prevention of disease in

diagnosis and operative care; however, it is important to highlight that the main difference is that the scope of practice for a dentist is far greater than for a dental hygienist. This is where the significance lies in the strengths and key focus of these dental care professionals and the key role of both in overall sustainable oral health care for every patient in serving the public.

In a recent survey carried out among dental professionals in the UAE, it became evident that a very small percentage of dentists actually work with dental hygienists. It found further that a limited number of dentists are proactive about integrating hygienists into their practice model. This highlights the potential requirement to further incorporate dental hygiene into dentistry if the existing inequalities of oral disease are to be overcome. This will require an extended workforce of dental hygienists, the expansion of educational facilities and further efforts towards including dental hygienists in existing practices in both public and private health care.

Another recent survey carried out in the region asked dentists how many of their patients are healthy. Regrettably, only a very small percentage reported having patients with good oral health. This again highlights the need for the skill set of the dental hygienist in oral health promotion and prevention of disease.

According to the findings of a further survey in the region, dental hygienists felt that very little of their total skill set was being utilised. This reflects the further need to ensure current dental hygienists' skills are being used to the maximum potential.

In a European report, it has been identified that the UK, Spain, Sweden and Switzerland are ranked as

the healthiest in Europe in relation to the low prevalence of severe periodontal disease, supporting the role of the dental hygienist in countries where a facilitative medico-legal framework exists to allow the inclusion of dental hygienists in effective periodontal care. It has also been identified in an international report that oral health needs and the delivery of care are partly mismatched, indicating a further need for the development and integration of the role of the dental hygienist. It has been proposed that advancing education in dental hygiene will achieve better oral and overall health for more people, by transforming the way dental hygiene graduates are prepared for the future to serve the health and wellness needs of society. Increasing clarity on the identity of the profession will affect how it is perceived by the public. In order to reach this point, every member of the dental team needs to be fully on board regarding the role of the dental hygienist and invest time in achieving the optimal success.

A global re-evaluation of requirements is needed to ensure that there is greater utilisation of hygienists in the provision of dental care with efficient and effective use of health care resources. Through evaluating the dental profession's ability to provide care within the core skill sets, it is mandatory that the necessary steps be taken to ensure maximum effectiveness of an integrated dental and health care profession to optimise on reducing the prevalence of preventable dental disease.

It has been advised in a recent extensive report that future public health care policies will be orientated towards recommending behavioural support and adopting



Victoria Wilson currently lives in Dubai working as a Dental Hygienist at Dr Roze & Associates Dental Clinic. She is also founder and president of the first official Dental Hygienists Organisation in the Middle East under the Emirates Medical Association and Dubai Dental Society. She will be presenting a paper as part of the official congress programme on Wednesday, 09:45–10:45, in Hall A.

the common risk factor approach for oral health promotion. Dental hygienists in public health care settings can positively affect patients by offering preventive care outreach services. Improvement in the quality of life for individuals was noted through improved health outcomes.

In light of the growing profession, it is reassuring to know that companies supporting the profession of dental hygiene, such as Young Dental, will now be accessible to hygienists in the region. Accessibility to certain resources has previously been limited, and it is of key importance that the profession be supported and have access to quality products in the innovation of dental hygiene. Young Dental partners with hygienists in order to understand their everyday needs and develops products that meet the requirements of the profession, such as Vera Advanced Bright Prophy Paste.

Young Dental is kindly sponsoring my lecture and at AEEDC can be found in Hall 6, Booth CO9. ◀





## Discover the Turkish dental market at IDEX 2016

■The Istanbul Oral and Dental Health Apparatus and Equipment Exhibition (IDEX) is one of the largest trade fairs in Turkey and offers leading companies in the dental industry the opportunity to present their products to customers from all over the world. With 30 years' experience, CNR Expo will be organising IDEX for the 13th time from 14 to 17 April 2016. Located just across the international airport and with a rebook $ing \, rate \, of \, over \, 90 \, per \, cent, the \, CNR$ Expo centre offers a favourable platform for exhibitors. The number of exhibitors and visitors at IDEX has multiplied over the last four years.

As a showcase of technology and innovations in dental equipment with both local and global brands represented, IDEX has recently become the most significant exhibition in Eurasia.

In 2014, 325 exhibitors presented their products at IDEX, including 51 international and 274 national companies. Over 9,000 visitors, including almost 800 guests from abroad, attended the exhibition.

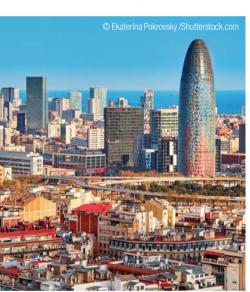
Health and dental care are among the most import-dependent industries in Turkey. The dental equipment import rate is 2.5 times higher than the export rate, amounting to US\$50 million (€44 million) per year. The overall dental market in Turkey is currently valued at US\$170 million (€150 million) and is growing steadily at a rate of 6-7 per cent annually. The number of dentists in Turkey has

science & practice

increased significantly within the last five years. In 2014, there were about 25,000 dentists and 38 universities in Turkey had dental faculties. Turkey is also considered an emerging market for medical tourism. Total health care spending in Turkey is forecast to reach US\$69 billion (€61 billion) by 

## Call for clinical case submission

■ In anticipation of its global conference, to be held from 26 to 29 May 2016 in Barcelona, dental implants manufacturer MIS Implants Technologies has announced an opportunity for young clinicians to present clinical cases and techniques focusing on challenging situations in implantology. The best cases submitted will be presented on the first day of the conference.



Clinicians up to the age of 40 may submit their case documentation in English via e-mail by 15 February 2016. All submitted cases will be reviewed and pre-approved by the conference scientific committee and the best case presentations will be awarded.

The first-prize winner will be in vited to a course by implant specialist Dr Eric Van Dooren, including flights and accommodation.

The 2016 MIS Global Conference, subtitled 360° Implantology, aims to expand knowledge and introduce true innovation under the theme of "VCONCEPT: Set the volume of bone and soft tissue", and will include lectures, clinical case presentations and hands-on work-

Experienced professionals will explore the VCONCEPT by providing a broad background on the current evidence-based therapeutic trends in implant dentistry and presenting the latest treatment modalities that fulfil MIS's philosophy of "Make it Simple", particu-



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## Plaque, sugar, obesity, diabetes and smoking

## Reassessing risk factors for periodontal disease

By Crawford Bain, UAE

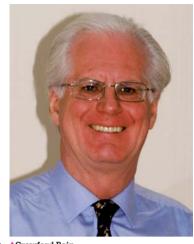
■ Traditionally, dentists have been taught that both dental caries and periodontal disease develop and progress as a direct result of patients' over-frequent consumption of refined sugars and patients' fail-

ure to remove bacterial plaque effectively. Miller's acidogenic theory of caries development and the non-specific plaque hypothesis based on Loe's work in the 1960s allow dentists to present a simple

cause-and-effect explanation to patients.

Since then, the dental profession has blamed patients' poor oral hygiene for periodontal breakdown and

dental caries while often failing to diagnose and treat other contributing causative factors. Unfortunately, while plaque is generally a necessary ingredient of common dental diseases, the explanation contained in



\*Crawford Bai

these theories of its pivotal role is simplistic given current knowledge. This brief article will attempt to put the more significant risk factors in context.

#### **Plaque**

Gingivitis is a natural bodily response to bacterial accumulation and as such is non-specific. Effective plaque removal will generally reverse gingivitis. The concept of inevitable progression from gingivitis to destructive periodontitis if oral hygiene is not good is, however, flawed. Figure 1 shows a 46-year-old patient with non-existent oral hygiene over several years. Figure 2 shows the same patient one month later after around 90 min of scaling and polishing by a student dental hygienist. He had no active caries and no more than 10% bone loss.



Fig. 1: Patient at presentation (he requested extraction of all mandibular teeth).



Fig. 2: The same patient one month after scaling and polishing (he asked how he could maintain the teeth in this condition).

It has become increasingly evident that while some patients are "susceptible" to periodontal breakdown, others are more "resistant". Common among these host-based factors leading to greater breakdown are the presence of diabetes and a smoking habit.

### **Diabetes**

Several authors have demonstrated a clear relationship between degree of hyperglycaemia and severity of periodontitis, and the risk of cardio-renal mortality (ischaemic heart disease and diabetic nephropathy combined) is three times higher in diabetics with severe periodontitis than in diabetics without severe periodontitis.1 Javed et al. showed that scaling and root planing in prediabetics reduced glycated haemoglobin (HbA<sub>1c</sub>) by 1% at three months,<sup>2</sup> and reductions in  $HbA_{1c}$  of 0.3-1% have been confirmed in several other studies in both Type 1 and Type 2 diabetics. There are estimated to be 745,940 diabetics in the United Arab Emirates. In 304,000 of those cases, the condition has not been diagnosed, and 934,300 people have impaired glucose tolerance, a prediabetic state





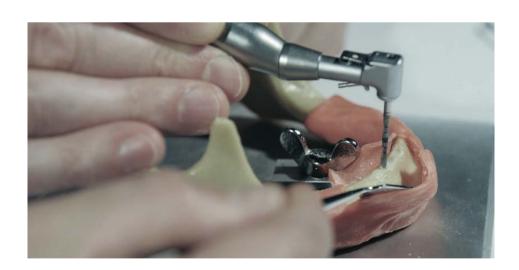
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