

# today



**Meet the DTSC Symposia speakers!**

What to expect from each of their sessions and why you'll want to be sure to attend.

»starting on page 14



**Off to the exhibit hall**

Before you are faced with 1,500-plus booths, read our guide to the new products on the market and the ones that might just change your practice.

»starting on page 50



**Get out and sightsee!**

There is more to New York City than the convention center, and we have a list of places you'll be really glad you decided to check out.

»page 54

## DTSC Symposia returns for third year

From ortho to endo, there's something for everyone each day of the show

■ For the third year, Dental Tribune is partnering with the organizers of the Greater New York Dental Meeting to offer four days of symposia in various areas of dentistry.

Each day will feature five individual one-hour lectures led by experts in the field. The final day will feature the Osseo University Summit, a program dedicated to implantologists.

Participants in all of the sessions not only earn C.E. credits but also gain

»see DTSC, page 10



• Wollman Rink in Central Park. (Photo/Courtesy of NYC and Company)

**By Jayme S. McNiff, GNYDM Education Coordinator**

■ Welcome to New York and to one of the largest and most comprehensive dental meetings in the United States.

Whether it's your first time here or your 50th, you will find something to interest you – from the latest technologies to resources and education designed to keep your dental practice current, competitive and rock solid.

The exhibit floor and the diverse continuing education programs are the centerpiece of this annual expansive meeting. Organizers coordinate

»see OPEN, page 6

AD

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# DTSC presents the first Osseo University Summit

■ On Wednesday, join Dental Tribune and the Dental Tribune Study Club to learn about implant-driven dentistry from a true collection of masters, carefully selected from across the globe.

Dr. Kenneth Serota, founder of [www.OsseoUniversity.com](http://www.OsseoUniversity.com), helped to design the Osseo University Summit for dentists who are interested in better preparing themselves to determine which treatment option is most appropriate for each individual implant patient.

The summit promises to benefit dentists seeking C.E. by offering great relevance to their daily work while letting them learn from a world-class, experienced faculty.

The program, which is moderated by Dr. Benedict Bachstein, offers you a collection of the hottest topics in implantology today.

## Course No. 1: 12:45–1:30 p.m.

*“Utilizing Patient Specific Abutments to Achieve Exceptional Results” with Dr. Ethan Pansick, United States*

This course will describe the indications and contra-indications of the different types of implant abutments available for use today.

## Course No. 2: 1:35–2:20 p.m.

*“Microscopic Management of Alveolar Bone Defects in Fresh Socket Implants” with Dr. Enrique Merino, Spain*

For both inexperienced and advanced clinicians, all possible treatment options in fresh socket implants under the microscope are presented in detail.



• Dr. Ethan Pansick

## Course No. 3: 2:25–3:05 p.m.

*“Implants and Bisphosphonates, Osteonecrosis, Osteoporosis, Esthetics” with Dr. David Hoexter, United States*

This lecture presents bone grafts, sinus lifts and implants in patients taking oral bisphosphonates, leading to restoring vertical dimension as well as the creation of a bright youthful esthetic smile.

## Course No. 4: 3:10–3:55 p.m.

*“Contemporary Concepts in Tooth Replacement: Paradigm Shift” with Dr. Dwayne Karateew, Canada*

This multimedia presentation, which incorporates video, animations, computerized graphics and clinical images, will help broaden the understanding in the philosophy and science behind the new and excit-



• Dr. Benedict Bachstein

## Attend this course

Additional program details can be found at [www.DTStudyClub.com/gnydm](http://www.DTStudyClub.com/gnydm). Please register for free at [www.GNYDM.com](http://www.GNYDM.com) with course No. 6080 and earn four C.E. credits.

ing horizons currently being investigated.

## Course No. 5: 4–4:45 p.m.

*“Balancing the Art, Science and Business of Dentistry” with Dr. Jeffery Hoos, United States*

The challenge for the dentist is to provide the patient with a functional, comfortable prosthesis. This lecture will explain how we can take this challenge and make it a positive and productive experience.

# Help celebrate DVI clinic's 30th anniversary at international gala

■ The American Friends of Dental Volunteers for Israel (DVI) will host an international gala dinner and celebration tonight at the Museum of Jewish Heritage in New York City.

The event, which begins at 6 p.m., will celebrate the 30th anniversary of the DVI Trudi Birger Dental Clinic.

Stan Bergman, CEO of Henry Schein Inc.; Dr. Amid Ismail, dean of the Maurice H. Kornberg School of Dentistry at Temple University; Sen. Joseph Lieberman (I-Conn.); Dr. Gordon Christensen; and Dr. D. Walter Cohen are serving as honorary chairmen.

They will be on hand as the American Friends of DVI honors Dr. Alan Helfer, American Friends of DVI president; Steve Kess, vice president, glo-

bal professional relations for Henry Schein; and Ran Tuttnauer, CEO of Tuttnauer and DVI board member; for their dedication and support to the mission of bringing free dental care to indigent children in Jerusalem of every race, religion and ethnicity.

For more information on the event or to register, visit the organization's website at [www.americanfriendsofdvi.org](http://www.americanfriendsofdvi.org). Complimentary bus transportation will be provided from the Jacob K. Javitz Convention Center.

## About DVI

Dental Volunteers for Israel was founded by Trudi Birger in 1980. A survivor of the Holocaust, Birger devoted her life to preventing the

suffering of children. Through her efforts over the past three decades, thousands of underprivileged children have received needed dental treatment. In September 2003, the clinic was renamed the Trudi Birger Dental Clinic in her memory.

DVI operates the only free dental clinic of its kind in the Middle East. It looks after the needs of Jerusalem's poor children, regardless of their religious and cultural backgrounds. It is staffed by dedicated volunteer doctors from around the world in addition to the general director, Dr. Roy Petel, who is a full-time pedodontist. In 2009, President Shimon Peres awarded DVI the President's Award for Volunteerism.

**today** About  
the Publisher

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# Sunday at the show: what to know

## Where is the Greater New York Dental Meeting?

The Jacob K. Javits Convention Center is on 11th Avenue between 34th and 39th streets. The 42nd Street Crosstown Bus (M42) and the 34th Street Crosstown Bus (M34) run east-west with stops on every block and outside the center.

Fare is \$2.25 in exact coins or you can use a MetroCard. Shuttle buses departing from all congress hotels are available today-Wednesday.

## When and where do I register?

Registration takes place in the Upper Level of the Javitz Convention Center. Registration hours are as follows:

- **Today-Tuesday:** 8 a.m.-5:30 p.m.
- **Wednesday:** 8 a.m.-5 p.m.

## What are the dates and times for the exhibit hall?

- **Today-Tuesday:** 9:30 a.m.-5:30 p.m.
- **Wednesday:** 9:30 a.m.-5 p.m.

## Can I still buy tickets to any of the paid functions?

Yes. Tickets for all still-available functions can be purchased at all general registration booths located in the reg-

istration area on the Upper Level of the convention center. You must pay by cash or credit card.

## What about food during the meeting?

Full-service and specialty cafes, food carts and restaurants are located throughout the convention center. Options include a variety of hot and cold sandwiches, salads, snacks and beverages.

## What if I'm an international visitor?

The GNYDM has a hospitality center just for international visitors. Find it in the registration area in the Crystal Palace. The center is open whether you want to relax or join colleagues for a cup of coffee. The hours are as follows:

- **Today-Tuesday:** 8 a.m.-5:30 p.m.
- **Wednesday:** 8 a.m.-5 p.m.

## What if I want to bring my kids?

Children are allowed to attend the meeting. However, baby strollers are not permitted on the exhibit hall floor. A limited number of baby carriers are available in the Exhibits Office.

Today, an offering of children's programs are available.

Up on the Fourth Floor Galleria, there will be a magic show from 10:30-11:30 a.m., face painting from 11:45 a.m.-1:45 p.m. and a carnival from noon-2:30 p.m.

Also in the same place, from 11:30 a.m.-2:30 p.m., will be a child identification program.

The Grand Lodge of Free and Accepted Masons of the State of New York sponsor this free, five-minute child identification program. They will offer the following:

- Digital photos, which can quickly be distributed to the media in case of an emergency
- Digital fingerprinting
- Personal information, including photos and fingerprints, burned on to a CD

## What are some of the highlights of today's education sessions?

You won't want to miss the Live Dentistry sessions, which are just that: dentistry on live patients, in a 300-seat theater with 18 high-definition, 60-inch television screens.

What's even better than watching

world-class clinicians work in real time? That tuition to these events is free, so come early to Exhibit Floor Aisle 5400/5500 if you don't want to stand.

For a detailed schedule of the Live Dentistry sessions, see Page 9.

You also won't want to miss the Dental Tribune Study Club Symposia. This program takes place on the exhibition floor in Aisle 6000, Room No. 3 and will feature the following agenda for today:

- **10-11 a.m.:** "Beautiful: Go with the FLOW" with Dr. Howard Glazer
- **11:20 a.m.-12:20 p.m.:** "Light Cured Adhesive Dentistry - Science and Substance" with Dr. John Flucke
- **12:50-1:10 p.m.:** "Exciting New Tools for Superb Impressions" with Dr. Marc Gottlieb
- **1:20-2:20 p.m.:** "A Simplified Approach to Multi-Layer Direct Composite Bonding" with Dr. Martin Goldstein
- **2:40-3:40 p.m.:** "Digital Impressions: Are they for me?" with Dr. Richard Rosenblatt
- **4-5 p.m.:** "Total Facial Esthetics for Every Dental Practice" with Dr. Louis Malcmacher

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**28 NOV**

10:00 - 11:00 Dr. Howard Glazer, DDS, FAGD  
**BEAUTIFUL: GO WITH THE FLOW**

11:20 - 12:20 Dr. John Flucke, DDS  
**LIGHT CURED ADHESIVE DENTISTRY - SCIENCE AND SUBSTANCE**

12:50 - 1:10 Dr. Marc Gottlieb, DMD  
**EXCITING NEW TOOLS FOR SUPERB IMPRESSIONS**

1:20 - 2:20 Dr. Martin Goldstein, DMD  
**A SIMPLIFIED APPROACH TO MULTI-LAYER DIRECT COMPOSITE BONDING**

2:40 - 3:40 Dr. Richard Rosenblatt, DMD  
**DIGITAL IMPRESSIONS: ARE THEY FOR ME?**

4:00 - 5:00 Dr. Louis Malcmacher, DDS  
**TOTAL FACIAL ESTHETICS FOR EVERY DENTAL PRACTICE**

5:10 - 5:30 Dirk Gieselmann  
**HOW AMMP-8 TESTING CAN CHANGE A DENTAL OFFICE**

**29 NOV**

10:00 - 11:00 Mrs. Noel Brandon-Kelsch  
**ECO-FRIENDLY INFECTION CONTROL-UNDERSTANDING THE BALANCE**

11:20 - 12:20 Dr. Gregori Kurtzman  
**INCORPORATING NEW ADVANCES IN DENTAL MATERIALS AND TECHNIQUES INTO YOUR RESTORATIVE PRACTICE**

12:50 - 1:10 Dr. Marc Gottlieb, DMD  
**A GAME-CHANGING APPROACH TO DIFFICULT CL II COMPOSITES**

1:20 - 2:20 Dr. Damien Mulvany  
**OPTIMIZING YOUR PRACTICE WITH 3D CONE-BEAM TECHNOLOGY**

2:40 - 3:40 Dr. Edward Katz  
**IMPROVING PATIENT CARE WITH 3D CONE BEAM COMPUTERIZED TOMOGRAPHY**

4:00 - 5:00 Dr. Fay Goldstep, Dr. George Freedman and Dr. Edward Lynch  
**SOFT TISSUE LASERS AND CARIES DIAGNOSIS**

5:10 - 5:30 Dirk Gieselmann  
**HOW AMMP-8 TESTING CAN CHANGE A DENTAL OFFICE**

**30 NOV**

10:00 - 11:00 Dr. Fay Goldstep, Dr. George Freedman and Dr. Edward Lynch  
**SOFT TISSUE LASERS AND CARIES DIAGNOSIS**

11:20 - 12:20 Dr. Lou Chmura, DDS, MS  
**SOFT TISSUE LASERS ADJUNCTIVE TO ORTHODONTIC TREATMENT**

12:50 - 1:10 Dr. Marc Gottlieb, DMD  
**THE ART AND SCIENCE OF AIR ABRASION**

1:20 - 2:20 Dr. Dov Almog, DMD  
**INTRODUCTION TO CBCT: PREVENTION OF FAILURES IN ORAL IMPLANTOLOGY**

2:40 - 3:40 Dr. Bettina Brasani  
**CLEANING AND SHAPING WITH NEW TECHNOLOGY**

4:00 - 5:00 Dr. Dwayne Karateew, DDS  
**CONTEMPORARY CONCEPTS IN TOOTH REPLACEMENT**

5:10 - 5:30 Dirk Gieselmann  
**HOW AMMP-8 TESTING CAN CHANGE A DENTAL OFFICE**

**1 DEC**

10:00 - 11:00 Mr. Al Dube  
**MERCURY AMALGAM WASTE AND OSHA AND REGULATORY ISSUES AFFECTING DENTISTS**

11:20 - 12:20 Dr. Glenn van As  
**HARD AND SOFT TISSUE LASERS**

12:30 - 5:00 Dr. Ethan Pansick, Dr. Marla Ryan, Dr. Enrique Merino, Dr. David Hoexter, Dr. Dwayne Karateew, Dr. Jeffery Hoos, Dr. Benedict Bachstein  
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# Raising the bar again

## Derma fillers and Botox/Dysport sessions highlight this year's meeting

By Jayme McNiff, GNYDM Education Coordinator

In an effort to stand out and leap forward and to expand dental esthetic office procedures, the Greater New York Dental Meeting (GNYDM) is again offering educational programs such as Botox/Dysport and dermal fillers at this year's event.

The GNYDM is presenting programs by CEO Dr. Bruce Freund and President Dr. Zev Schulhof, co-founders of the American Academy of Facial Cosmetics. These unique hands-on workshops will introduce procedures on actual patients to teach attendees how to use Botox/Dysport and dermal fillers. Both clinicians are renowned educators and have extensive experience in this specialty field.

Dr. John Halikias, general chair of the GNYDM, said: "Facial dermal fill-



A woman receives an injection during a 2009 Botox/dermal filler session. (Photo/Provided by GNYDM)

ers can greatly enhance the esthetics of anterior dental restorations. These injectables can alter the appearance of the lip, especially in those with 'smoker's' lines around the oral cavity."

### Here at the GNYDM

"Dermal Fillers Hands-On Workshop" will be held from 9:45 a.m.-12:45 p.m. and from 2-5 p.m. Sunday and Tuesday. "Botox/Dysport Hands-On Workshop" will be held from 9:45 a.m.-12:45 p.m. and from 2-5 p.m. Monday and Wednesday. Both sessions take place in Exhibit Floor Front Aisle 5400/5500 and cost \$1,500.

Attendees will learn about the different types of facial fillers, such as Restylane, Perlane, Juvéderm and Radiesse, which produce immediate results.

"There is some scientific evidence that certain TMJ pain symptoms can be alleviated with Botox/Dysport injections, which are neuromuscular relaxers," Halikias said.

"Therefore, dentists should be aware of these alternative treatment modalities."

The GNYDM will accommodate the expected popularity of Botox/Dysport and dermal filler facial

injectables by offering two Botox/Dysport programs and two dental filler programs during the course of the meeting.

Botox/Dysport and dermal fillers are on the "up and up" and gaining more publicity across the United States and worldwide, said Dr. Robert Edwab, executive director of the GNYDM.

"Participants will learn to use Botox/Dysport facial injectables for facial therapeutic and esthetic treatments, as well as to improve the appearance of the skeletal profile and lips to match the smile and dental esthetics of the individual patient," Edwab said.

"The hands-on workshops are particularly unique from other programs and courses at dental meetings because they offer a live, up-close view of procedures right on patients at the exact moment they are happening."

This year, the GNYDM has added a second high-tech live dentistry arena to the mix. In total, two live dentistry arenas offer 16 programs.

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# The emphasis on periodontics

By Jayme S. McNiff, GNYDM Education Coordinator

■ The Greater New York Dental Meeting's periodontal program focuses on the most important topics concerning periodontists by incorporating more seminars and workshops each year.

Periodontal disease has become one of the most prevalent conditions affecting adults today. Estimates show that 50 percent of American adults suffer from periodontal disease and are therefore twice as likely to suffer from heart attacks.

"Non-surgical Periodontal Treat-

ment," by Drs. Neil Gottehrer and Jack Martin, will review oral body inflammatory connection and its impact on cardiovascular and periodontal disease as well as periodontal risk assessment (PRA). The seminar is today from 9 a.m.-noon.

Dr. Lee Silverstein's hands-on workshop is also this morning from 9:45 a.m.-12:45 p.m., and will explore the how, why, what and when of socket grafting.

Following in the evening are two workshops from 2-5 p.m. Dr. Frank Milnar incorporates minimally invasive concepts to prevent sensitivity

through the usage of glass ionomer while Dr. Silverstein discusses "Suturing for the Dental Practitioner and Surgical Staff."

"The Future of Periodontal Care" is on Monday from 2-5 p.m. with Drs. Gottehrer and Martin. This seminar will discuss the medical risks related to periodontal disease, increased risk of heart disease and the reversal of atherosclerosis following nonsurgical periodontal treatment.

Dr. Jim Grisdale's "Concepts and Procedures for Predictable Crown Lengthening Techniques" is designed for the general practitioner and

focuses on the different techniques utilized in crown extension. The seminar emphasizes soft- and hard-tissue surgical approaches and takes place on Tuesday from 2-5 p.m.

Soft- and hard-tissue complications can lead to unsatisfactory results for the patient, including unacceptable tooth morphology, poor phonetic skills and lack of confidence.

On Wednesday, Grisdale's hands-on workshops focus on "Predictable Soft-Tissue Grafting" in the morning, followed by "Predictable Bone Grafting and Guided Tissue Regeneration" in the afternoon.

## Open from page 1

more than 300 full- and half-day seminars, essays and hands-on workshops.

Among the specialty programs are topics including orthodontics, endodontics, cosmetic dentistry, pediatric dentistry and implant dentistry.

## Celebrity luncheon

Join the GNYDM at Monday's celebrity luncheon with featured speaker, an American culture icon, Joan Rivers. As a comedian, TV host and CEO, Rivers is also a bestselling author, Emmy award-winning talk show host, Tony-nominated actress, *Celebrity Apprentice* winner, writer, director and savvy businesswoman.

## Exhibit hall

This year, there will be more than 1,500 booths representing more than 500 exhibiting companies. Smart buyers are looking for a maximum return on investment when they shop for cutting-edge equipment and innovative products. There are extensive tax advantages for making your purchases in 2010.

## Two live dentistry arenas

The GNYDM offers two modern and high-tech, free, live dentistry arenas daily from Sunday through Wednesday. The interactive live program features clinicians performing dental procedures on real patients from a stage before 300 attendees on either side of the exhibit floor.

Topics include orthodontics, esthetics, endodontics, pediatrics, implants, oral surgery, lasers and a hygiene program. Arrive early as seating is limited to 300 in each arena.

## Greater New York Smiles

The Greater New York Smiles Children's Program invites New York City public school students from all five boroughs to attend this oral health program from Monday to Wednesday. More than 1,500 third- and fourth-grade students will be taught how to effectively brush their teeth.

The program is sponsored in part by Colgate Palmolive Company, the



• A boy practices his brushing skills during the 2009 Greater New York Smiles. (Photo/Provided by GNYDM)

United Federation of Teachers and DentaQuest.

Along with the help and dedication of the coordinators and volunteers from New York University, Hostos Community College and New York City College of Technology, the children learn about proper nutrition and eating habits that lead to a happy and healthy smile.

During this field trip, the students will have the opportunity to visit different "stations," consisting of an educational film, an exhibit on nutrition, a "How to Brush" instructional demonstration and Colgate's "Bright Smiles, Bright Futures Van" where those students who are granted parental permission will have their teeth screened by a dentist.

Other volunteers are from the Dental Hygienists' Association of the City of New York and the New Jersey Dental Hygienists' Association.

## 25th anniversary General Practice Residency Fair

The General Practice Residency Fair provides dental students an opportunity to gather information regarding general practice residency and advanced education in general dentistry programs in an informal atmosphere. The 25th annual fair is today

from 9:30 a.m.-noon. Admission is free.

## Luncheon and Learning Program

Tuesday's Luncheon and Learning is a free program that includes a complimentary lunch ticket.

The panel will discuss how dental technology can help to maintain a patient's physical health and possibly help reduce the risk of cardiac disease. Sponsors of the program are ChaseHealthAdvance, Electro Medical Systems, Hiossen, Sirona and Captek. Pick up your free tickets at any of their booths on Sunday, Monday and Tuesday.

## Partner with Invisalign

The Greater New York Dental Meeting is partnering for the third year with Align Technology to offer the Invisalign Expo. These educational courses extend for four full days, beginning today.

Taught by the most seasoned team of Invisalign specialists, dental professionals will learn the logistics of tooth alignment and other abnormalities.

Invisalign Clear Essentials I is scheduled today and Tuesday. Attendees can also complete Clear Essentials II on Monday or Wednesday.

## Implant dentistry

Educational courses in implant dentistry are offered all day through Wednesday. Speakers in workshops, seminars and essays will discuss topics including surgery, restoration and partially edentulous implants.

In addition, attendees will have a chance to visit the free live patient demonstrations in implant dentistry, offered each day from Sunday to Wednesday.

## Orthodontic programs

A diverse selection of orthodontic programs is offered from today through Wednesday. At this exclusive series, attendees will learn from world-class clinicians about continuing and upcoming treatments and technologies in orthodontics.

The New York State Academy of General Dentistry Mastership workshop program in orthodontics is today. Drs. Elliott Moskowitz and Laurance Jerrold will host "Orthodontic Essentials for the General Practitioner: Learn It Today, Do It Tomorrow." This hands-on, full-day workshop focuses on the practical utilization of various removable and fixed orthodontic appliances within a general or pediatric dental practice.

Various speakers from New York University's College of Dentistry and Orthodontic Alumni Association, on Tuesday and Wednesday, will present a selection of innovative anchorage applications and auxiliaries for various malocclusions.

## Pediatrics program

Nowadays, parents demand the restorations of their children's teeth to be not only functional but esthetically advanced. Glass ionomers, resinomers, composites and various types of crowns are illustrated on children and adolescents at Dr. Fred Margolis's workshop on Tuesday. Attendees will learn to integrate both function and esthetics to maximize a complete pediatric restoration.

Early childhood caries (ECC) is the most common chronic disease of early childhood. Multiple essays in pediatric dentistry will explore this issue today from 9:45 a.m.-12:45 p.m.

Dental pain can make anyone edgy

With Articadent<sup>®</sup> DENTAL,  
everyone can sit back and relax



**4% Articadent<sup>®</sup> DENTAL**  
(articaine HCl 4% with epinephrine 1:100,000 injection)  
**The confident choice for comfort**



Articadent<sup>®</sup> is indicated for local, infiltrative, or conductive anesthesia in both simple and complex dental procedures. Articadent<sup>®</sup> with epinephrine 1:100,000 is preferred during operative or surgical procedures when improved visualization of the surgical field is desirable. Reactions to Articadent<sup>®</sup> (pain and headache, for example, or convulsions or respiratory arrest following accidental intravascular injection) are characteristic of those associated with other amide-type local anesthetics. Articadent<sup>®</sup> contains sodium metabisulfite, a sulfite that may cause allergic-type reactions including anaphylactic symptoms and life-threatening or less severe asthmatic episodes in certain susceptible people. **Accidental intravascular injection may be associated with convulsions, followed by central nervous system or cardiorespiratory depression and coma, progressing ultimately to respiratory arrest.** Dental practitioners and/or clinicians who employ local anesthetic agents should be well versed in diagnosis and management of emergencies that may arise from their use. Resuscitative equipment, oxygen, and other resuscitative drugs should be available for immediate use. Articadent<sup>®</sup>, along with other local anesthetics, is capable of producing methemoglobinemia. The clinical signs of methemoglobinemia are cyanosis of the nail beds and lips, fatigue and weakness. If methemoglobinemia does not respond to administration of oxygen, administration of methylene blue intravenously 1-2 mg/kg body weight over a 5-minute period is recommended.

Please see Brief Summary of Prescribing Information on adjacent page.

## 4% Articadent™ DENTAL with epinephrine 1:100,000 (articaine hydrochloride 4% (40 mg/ml) with epinephrine 1:100,000)

## 4% Articadent™ DENTAL with epinephrine 1:200,000 (articaine hydrochloride 4% (40 mg/ml) with epinephrine 1:200,000)

### BRIEF SUMMARY. [See Package Insert For Full Prescribing Information]

#### USE

Articadent™ is indicated for local, infiltrative, or conductive anesthesia in both simple and complex dental procedures. For most routine dental procedures, Articadent™ with epinephrine 1:200,000 is preferred. Articadent™ with epinephrine 1:100,000 is preferred during operative or surgical procedures when improved visualization of the surgical field is desirable.

#### CONTRAINDICATIONS

Articadent™ is contraindicated in patients with a known history of hypersensitivity to local anesthetics of the amide type, or in patients with known hypersensitivity to sodium metabisulfite.

#### WARNINGS

**Accidental intravascular injection may be associated with convulsions, followed by central nervous system or cardiorespiratory depression and coma, progressing ultimately to respiratory arrest. Dental practitioners and/or clinicians who employ local anesthetic agents should be well versed in diagnosis and management of emergencies that may arise from their use. Resuscitative equipment, oxygen, and other resuscitative drugs should be available for immediate use.**

Intravascular injections should be avoided. To avoid intravascular injection, aspiration should be performed before Articadent™ is injected. The needle must be repositioned until no return of blood can be elicited by aspiration. Note, however, that the absence of blood in the syringe does not guarantee that intravascular injection has been avoided.

Articadent™ contains epinephrine that can cause local tissue necrosis or systemic toxicity. Usual precautions for epinephrine administration should be observed.

Articadent™ contains sodium metabisulfite, a sulfite that may cause allergic-type reactions including anaphylactic symptoms and life-threatening or less severe asthmatic episodes in certain susceptible people. The overall prevalence of sulfite sensitivity in the general population is unknown. Sulfite sensitivity is seen more frequently in asthmatic than in non-asthmatic people.

**Articadent™, along with other local anesthetics, is capable of producing methemoglobinemia. The clinical signs of methemoglobinemia are cyanosis of the nail beds and lips, fatigue and weakness. If methemoglobinemia does not respond to administration of oxygen, administration of methylene blue intravenously 1-2 mg/kg body weight over a 5 minute period is recommended.**

The American Heart Association has made the following recommendation regarding the use of local anesthetics with vasoconstrictors in patients with ischemic heart disease: "Vasoconstrictor agents should be used in local anesthesia solutions during dental practice only when it is clear that the procedure will be shortened or the analgesia rendered more profound. When a vasoconstrictor is indicated, extreme care should be taken to avoid intravascular injection. The minimum possible amount of vasoconstrictor should be used." (Kaplan, EL, editor: Cardiovascular disease in dental practice, Dallas 1986, American Heart Association.)

#### PRECAUTIONS

**General:** Resuscitative equipment, oxygen, and other resuscitative drugs should be available for immediate use (see **WARNINGS**). The lowest dosage that results in effective anesthesia should be used to avoid high plasma levels and serious adverse effects. Repeated doses of Articadent™ may cause significant increases in blood levels with each repeated dose because of possible accumulation of the drug or its metabolites. Tolerance to elevated blood levels varies with the status of the patient.

Debilitated patients, elderly patients, acutely ill patients and pediatric patients should be given reduced doses commensurate with their age and physical condition.

Articadent™ should be used with caution in patients with heart block.

Local anesthetic solutions, such as Articadent™, containing a vasoconstrictor should be used cautiously. Patients with peripheral vascular disease and those with hypertensive vascular disease may exhibit exaggerated vasoconstrictor response. Ischemic injury or necrosis may result. Articadent™ should be used with caution in patients during or following the administration of potent general anesthetic agents, since cardiac arrhythmias may occur under such conditions.

Systemic absorption of local anesthetics can produce effects on the central nervous and cardiovascular systems. At blood concentrations achieved with therapeutic doses, changes in cardiac conduction, excitability, refractoriness, contractility, and peripheral vascular resistance are minimal. However, toxic blood concentrations depress cardiac conduction and excitability, which may lead to atrioventricular block, ventricular arrhythmias, and cardiac arrest, possibly resulting in fatalities. In addition, myocardial contractility is depressed and peripheral vasodilation occurs, leading to decreased cardiac output and arterial blood pressure.

Careful and constant monitoring of cardiovascular and respiratory (adequacy of ventilation) vital signs and the patient's state of consciousness should be performed after each local anesthetic injection. It should be kept in mind at such times that restlessness, anxiety, tinnitus, dizziness, blurred vision, tremors, depression, or drowsiness may be early warning signs of central nervous system toxicity.

*In vitro* studies show that about 5% to 10% of articaine is metabolized by the human liver microsomal P450 isoenzyme system. However, because no studies have been performed in patients with liver dysfunction, caution should be used in patients with severe hepatic disease.

Articadent™ should also be used with caution in patients with impaired cardiovascular function since they may be less able to compensate for functional changes associated with the prolongation of A-V conduction produced by these drugs.

Small doses of local anesthetics injected in dental blocks may produce adverse reactions similar to systemic toxicity seen with unintentional intravascular injections of larger doses. Confusion, convulsions, respiratory depression and/or respiratory arrest, and cardiovascular stimulation or depression have been reported. These reactions may be due to intra-arterial injection of the local anesthetic with retrograde flow to the cerebral circulation. Patients receiving these blocks should be observed constantly. Resuscitative equipment and personnel for treating adverse reactions should be immediately available.

Dosage recommendations should not be exceeded (see **DOSAGE AND ADMINISTRATION** in package insert).

#### Information for Patients:

- The patient should be informed in advance of the possibility of temporary loss of sensation and muscle function following infiltration and nerve block injections.
- Patients should be instructed not to eat or drink until normal sensation returns.

**Clinically Significant Drug Interactions:** The administration of local anesthetic solutions containing epinephrine to patients receiving monoamine oxidase inhibitors, nonselective beta adrenergic antagonists or tricyclic antidepressants may produce severe, prolonged hypertension. Phenothiazines and butyrophenones may reduce or reverse the pressor effect of epinephrine. Concurrent use of these agents should generally be avoided. In situations when concurrent therapy is necessary, careful patient monitoring is essential.

**Carcinogenesis, Mutagenesis, Impairment of Fertility:** Studies to evaluate the carcinogenic potential of articaine HCl in animals have not been conducted. Five standard mutagenicity tests, including three *in vitro* tests (the nonmammalian Ames test, the mammalian Chinese hamster ovary chromosomal aberration test and a mammalian gene mutation test with articaine HCl) and two *in vivo* mouse micronucleus tests (one with Articadent™ with epinephrine 1:100,000 and one with articaine HCl alone) showed no mutagenic effects. No effects on male or female fertility were observed in rats for Articadent™ with epinephrine 1:100,000 administered subcutaneously in doses up to 80 mg/kg/day (approximately two times the maximum male and female recommended human dose on a mg/m<sup>2</sup> basis).

**Pregnancy:** Teratogenic Effects-Pregnancy Category C.

In developmental studies, no embryofetal toxicities were observed when Articadent™ with epinephrine 1:100,000 was administered subcutaneously throughout organogenesis at doses up to 40 mg/kg in rabbits and 80 mg/kg in rats (approximately 2 times the maximum recommended human dose on a mg/m<sup>2</sup> basis). In rabbits, 80 mg/kg (approximately 4 times the maximum recommended human dose on a mg/m<sup>2</sup> basis) did cause fetal death and increase fetal skeletal variations, but these effects may be attributable to the severe maternal toxicity, including seizures, observed at this dose.

When articaine hydrochloride was administered subcutaneously to rats throughout gestation and lactation, 80 mg/kg (approximately 2 times the maximum recommended human dose on a mg/m<sup>2</sup> basis) increased the number of stillbirths and adversely affected passive avoidance, a measure of learning, in pups. This dose also produced severe maternal toxicity in some animals. A dose of 40 mg/kg (approximately equal to

the maximum recommended human dose on a mg/m<sup>2</sup> basis) did not produce these effects. A similar study using Articadent™ with epinephrine 1:100,000 rather than articaine hydrochloride alone produced maternal toxicity, but no effects on offspring.

There are no adequate and well-controlled studies in pregnant women. Animal reproduction studies are not always predictive of human response. Articadent™ should be used during pregnancy only if the potential benefit justifies the potential risk to the fetus.

**Nursing Mothers:** It is not known whether articaine is excreted in human milk. Because many drugs are excreted in human milk, caution should be exercised when Articadent™ is administered to a nursing woman.

**Pediatric Use:** In clinical trials, 61 pediatric patients between the ages of 4 and 16 years received Articadent™ with epinephrine 1:100,000. Among these pediatric patients, doses from 0.76 mg/kg to 5.65 mg/kg (0.9 to 5.1 mL) were administered safely to 51 patients for simple procedures and doses between 0.37 mg/kg and 7.48 mg/kg (0.7 to 3.9 mL) were administered safely to 10 patients for complex procedures. However, there was insufficient exposure to Articadent™ with epinephrine 1:100,000 at doses greater than 7.00 mg/kg in order to assess its safety in pediatric patients. No unusual adverse events were noted in these patients. Approximately 13% of these pediatric patients required additional injections of anesthetic for complete anesthesia. Safety and effectiveness in pediatric patients below the age of 4 years have not been established. Dosages in pediatric patients should be reduced, commensurate with age, body weight, and physical condition. See **DOSAGE AND ADMINISTRATION** in package insert.

**Geriatric Use:** In clinical trials, 54 patients between the ages of 65 and 75 years, and 11 patients 75 years and over received Articadent™ with epinephrine 1:100,000. Among all patients between 65 and 75 years, doses from 0.43 mg/kg to 4.76 mg/kg (0.9 to 11.9 mL) were administered safely to 35 patients for simple procedures and doses from 1.05 mg/kg to 4.27 mg/kg (1.3 to 6.8 mL) were administered safely to 19 patients for complex procedures. Among the 11 patients ≥ 75 years old, doses from 0.78 mg/kg to 4.76 mg/kg (1.3 to 11.9 mL) were administered safely to 7 patients for simple procedures and doses of 1.12 mg/kg to 2.17 mg/kg (1.3 to 5.1 mL) were safely administered to 4 patients for complex procedures.

No overall differences in safety or effectiveness were observed between elderly subjects and younger subjects, and other reported clinical experience has not identified differences in responses between the elderly and younger patients, but greater sensitivity of some older individuals cannot be ruled out.

Approximately 6% of patients between the ages of 65 and 75 years and none of the 11 patients 75 years of age or older required additional injections of anesthetic for complete anesthesia compared with 11% of patients between 17 and 65 years old who required additional injections.

#### ADVERSE REACTIONS

Reactions to Articadent™ are characteristic of those associated with other amide-type local anesthetics. Adverse reactions to this group of drugs may also result from excessive plasma levels (which may be due to overdosage, unintentional intravascular injection, or slow metabolic degradation), injection technique, volume of injection, hypersensitivity, or may be idiosyncratic.

The reported adverse events are derived from clinical trials in the US and UK. Table 1 displays the adverse events reported in clinical trials where 882 individuals were exposed to Articadent™ with epinephrine 1:100,000 and Table 2 displays the adverse events reported in clinical trials where 182 individuals were exposed to Articadent™ with epinephrine 1:100,000 and 179 individuals were exposed to Articadent™ with epinephrine 1:200,000.

**Table 1. Adverse Events in controlled trials with an incidence of 1% or greater in patients administered Articadent™ with epinephrine 1:100,000.**

Body System	Articadent™ with epinephrine 1:100,000 N (%)
Number of patients	882 (100%)
Body as a whole	
Face Edema	13 (1%)
Headache	31 (4%)
Infection	10 (1%)
Pain	114 (13%)
Digestive system	
Gingivitis	13 (1%)
Nervous system	
Paresthesia	11 (1%)

**Table 2. Adverse Events in controlled trials with an incidence of 1% or greater in patients administered Articadent™ with epinephrine 1:100,000 and Articadent™ with epinephrine 1:200,000.**

Number of patients exposed to drug	Articadent™ with epinephrine 1:100,000 (N=182)	Articadent™ with epinephrine 1:200,000 (N=179)
Number of patients that reported any Adverse Event	35	33
Pain	14 (7.6%)	11 (6.1%)
Headache	6 (3.2%)	9 (5.0%)
Positive blood aspiration into syringe	6 (3.2%)	3 (1.6%)
Swelling	5 (2.7%)	3 (1.6%)
Trismus	3 (1.6%)	1 (0.5%)
Nausea and emesis	0 (0%)	3 (1.6%)
Sleepiness	1 (0.5%)	2 (1.1%)
Numbness and tingling	2 (1.0%)	1 (0.5%)
Palpitation	2 (1.0%)	0 (0%)
Ear symptoms (earache, otitis media)	2 (1.0%)	1 (0.5%)
Cough, persistent cough	2 (1.0%)	0 (0%)

The following list includes adverse and intercurrent events that were recorded in 1 or more patients, but occurred at an overall rate of less than one percent, and were considered clinically relevant.

**Body as a Whole:** abdominal pain, accidental injury, asthenia, back pain, injection site pain, burning sensation above injection site, malaise, neck pain.

**Cardiovascular System:** hemorrhage, migraine, syncope, tachycardia, elevated blood pressure.

**Digestive System:** constipation, diarrhea, dyspepsia, glossitis, gum hemorrhage, mouth ulceration, nausea, stomatitis, tongue edemas, tooth disorder, vomiting.

**Hemic and Lymphatic System:** ecchymosis, lymphadenopathy.

**Metabolic and Nutritional System:** edema, thirst.

**Musculoskeletal System:** arthralgia, myalgia, osteomyelitis.

**Nervous System:** dizziness, dry mouth, facial paralysis, hyperesthesia, increased salivation, nervousness, neuropathy, paresthesia, somnolence, exacerbation of Kearns-Sayre Syndrome.

**Respiratory System:** pharyngitis, rhinitis, sinus pain, sinus congestion.

**Skin and Appendages:** pruritus, skin disorder.

**Special Senses:** ear pain, taste perversion.

**Urogenital System:** dysmenorrhea.

Persistent paresthesias of the lips, tongue, and oral tissues have been reported with use of articaine hydrochloride, with slow, incomplete, or no recovery. These post-marketing events have been reported chiefly following nerve blocks in the mandible and have involved the trigeminal nerve and its branches.

#### OVERDOSAGE

Acute emergencies from local anesthetics are generally related to high plasma levels encountered during therapeutic use of local anesthetics or to unintended subarachnoid injection of local anesthetic solution (see **WARNINGS, PRECAUTIONS; General and ADVERSE REACTIONS**).

**Management of Local Anesthetic Emergencies:** The first consideration is prevention, best accomplished by careful and constant monitoring of cardiovascular and respiratory vital signs and the patient's state of consciousness after each local anesthetic injection. At the first sign of change, oxygen should be administered.

The first step in the management of convulsions, as well as hypoventilation, consists of immediate attention to the maintenance of a patient airway and assisted or controlled ventilation as needed. The adequacy of the circulation should be assessed. Should convulsions persist despite adequate respiratory support, treatment with appropriate anticonvulsant therapy is indicated. The practitioner should be familiar, prior to the use of local anesthetics, with the use of anticonvulsant drugs. Supportive treatment of circulatory depression may require administration of intravenous fluids and, when appropriate, a vasopressor.

If not treated immediately, both convulsions and cardiovascular depression can result in hypoxia, acidosis, bradycardia, arrhythmias and cardiac arrest. If cardiac arrest should occur, standard cardiopulmonary resuscitative measures should be instituted.

#### HOW SUPPLIED

Articadent™ (articaine HCl 4% with epinephrine 1:100,000 or 1:200,000 injection) is available in 1.7 mL glass cartridges, in boxes of 50 cartridges. The product is formulated with a 15% overage of epinephrine.

NDC 66312-602-16 4% Articadent™ with epinephrine 1:200,000 Box of 50 cartridges  
NDC 66312-601-16 4% Articadent™ with epinephrine 1:100,000 Box of 50 cartridges

Manufactured for:

DENTSPLY Pharmaceutical by  
Novocol Pharmaceutical of Canada, Inc.  
Cambridge, Ontario Canada N1R 6X3



# Two are better live than one

This year's Greater New York Dental Meeting doubles the live arenas

By Jayme S. McNiff, GNYDM Education Coordinator

As the leading dental convention and event in the United States, the Greater New York Dental Meeting (GNYDM) continues to grow and reach for new innovative programs in hopes of attracting the most renowned clinicians and dental professionals from around the world.

In 2009, the GNYDM registered 59,166 attendees from all 50 states and 124 countries, an increase from the previous year. The GNYDM organizers feel their event must contain programs to inspire the entire dental team to excel in their profession. Thus, this year's meeting has expanded to include two Live Dentistry arenas to incorporate more cutting-edge, oral health-care programs.

This year, the GNYDM is offering an innovative live hygiene session, where for the first time, dental hygienists and assistants will learn and see the latest materials and equipment available on the market to advance their skills and knowledge.

Dr. John Halikias, general chairman of the GNYDM, said, "The 'Live Dentistry' arena is a place where the most prominent and respected clinicians can share breakthrough technology and techniques, allowing dental professionals the chance to learn the most about innovative dental products, technology and procedures."

In these two modern, high-tech arenas, attendees will watch procedures on numerous 60-inch, high-definition LED screens, which project up-close views of live procedures right on the exhibit floor.

Due to its immense popularity,

the arenas fill up quickly, so be sure to arrive early to obtain a seat at one or all of the tuition-free sessions. In 2009, the GNYDM not only filled the arena's seating for 300 attendees during the entire four days, but also had an additional 100 attendees watching from outside the arena.



• It was standing room only at the Live Dentistry sessions during the 2009 Greater New York Dental Meeting. (Photo/Provided by GNYDM)

Live Dentistry Arena No. 1			
a.m. session		p.m. session	
Today	Monday	Tuesday	Wednesday
VOCO America	VOCO America	Discus Dental	Nobel Biocare
Ultradent Products	Ultradent Products	Kodak Dental Systems	OrthoTAD and implants

Live Dentistry Arena No. 2			
a.m. session		p.m. session	
Today	Monday	Tuesday	Wednesday
DENTSPLY	Discus Dental	Luncheon for Learning	AMD LASERS
3M ESPE	Biolase Technology, GC America and Kuraray America	Hygiene program	Implants

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