New research links oral health and weight issues

By DTI

GOTHENBURG, Sweden: Having children eat healthily can be a tricky task. However, having found an association between the prevalence of cariogenic bacteria and a high body mass index (BMI) in children, research by a doctoral student at the Sahlgrenska Academy of the University of Gothenburg has pointed to a possible new approach.

The thesis on children’s diet, BMI and well-being has suggested that discussions with parents and children about what foods are good or bad for the teeth may help to reduce the risk of obesity. “Weight can be a sensitive subject, but if you talk about eating behaviours alongside dental health, you’re looking at the issue from a different angle,” said the author of the thesis, Louise Arvidsson.

In one of her sub-studies, Arvidsson reviewed the eating behaviour, BMI and dental health of 271 preschool and primary school children in Sweden. She compared the children’s height, weight and food intake over one day with the prevalence of cariogenic bacteria in saliva and discovered a link. The children who had higher amounts of the bacteria also had a significantly higher BMI and less healthy eating habits, such as eating more frequently and consuming more foods rich in sugar.

The researcher emphasised that more studies are needed to investigate the mechanism behind the association between BMI and cariogenic bacteria count. However, she suggested that improving children’s eating habits by reducing intake of sugar-rich foods and beverages and limiting intake frequency (specifically of unhealthy snacks) may provide multiple benefits in preventing both dental caries and the development of childhood obesity.

Furthermore, Arvidsson believes that, with the right collaboration between dentists, child health care specialists and schools, there is a good opportunity to help those most at risk, specifically in Sweden, where children visit the dentist from a young age.

Arvidsson also pointed to the link found in the study between healthy food and a higher self-esteem, better relationships with friends and fewer emotional problems. “We know that adults with depression feel better if, in addition to other treatment, they also meet with a diettitian. The question is whether a healthy diet can have effect also in young children. There has been a lot of focus on physical activity and mental health in children, but diet is an increasingly recognised aspect,” said Arvidsson.

The fast way to esthetic perfection.
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The thesis, titled Diets of European Children, with Focus on BMI, Well-Being, and Families: The IDEFICS/I.Family Cohort, was based on data from a European study aimed at identification and prevention of dietary- and lifestyle-induced health effects in children and infants.
“Machines will never replace the human hand…”

An interview with Dr. Stavros Pelekanos, assistant professor at the School of Dentistry of the University of Athens, Greece, and faculty member of the Global Institute for Dental Education, Los Angeles, USA

By DTI

What is the role of aesthetics in dental implantology today?

Dr. Stavros Pelekanos: Implantology in the 1980s and 1990s was bone-driven. The Albrektsson criteria for a successful implantation back in 1986 did not even refer to esthetics and were followed for many years to come. Nowadays, prosthodontists start the treatment and perform backwards planning, always keeping in mind the correct positioning of the tooth or teeth to be replaced. Patients’ expectations regarding aesthetic results are growing with the emergence of new technologies and materials. However, have these innovations truly arrived in every dental office?

Well, in continuation of my response to your first question, there are two major problems that the dental community has been facing in recent years, incorrect implant positioning and peri-implantitis both being difficult to resolve. As patients become more aware of these complications, they expect and demand more esthetics and predictable results. New technologies such as high-resolution CBCT, CAD/CAM abutment manufacture, abutments produced using new zirconia technologies, and digital planning are already widely in use in everyday dentistry, minimizing risks, as well as enhancing esthetics and treatment workflow.

Have digital solutions changed the way dental restorations and full-mouth rehabilitations in particular have been performed over the past several years?

Digital planning, intra-oral digital impressions and CAD/CAM technologies have certainly had an impact on the way dental restorations and full-mouth rehabilitations have been performed. The ability to create virtual models of the patient’s mouth allows for more precise planning and better communication with the patient. However, there are still challenges to overcome, such as the cost of equipment and training for clinicians, and the need for continued research to improve these technologies. Overall, digital solutions have certainly changed the way implantology is performed today.
"...digital technology is a very helpful tool, especially for the novice dentist, for implementing these rules and simplifying the treatment workflow."

Dr. Stavros Pelekanos received his DDS in 1993 and his doctoral degree in 1993. He runs a private practice in Athens specializing in prosthodontics, implantology and aesthetic dentistry. He is an assistant professor at the School of Dentistry of the University of Athens, Greece, and a faculty member of the Global Institute for Dental Education, Los Angeles, CA, USA. Dr. Pelekanos lectures internationally and gives hands-on courses on implants, aesthetics and restorative procedures. To date, he has published over 20 articles in peer-reviewed journals and has chapters in books.

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Walking among giants
Marketing dentistry in the global connected economy

By Chris Barrow, UK

In an information rich world, the wealth of information means a dearth of something else: a scarcity of whatever it is that information consumes. What information consumes is rather obvious: it consumes the attention of its recipients. Hence a wealth of information creates a poverty of attention. These prophet-like lines were shared by Nobel laureate and social scientist Dr. Herbert Simon in 1971. It seems incredible to think that his words predate the internet by 20 years. Simon lived in a world in which advertisers tried to gain our attention with billboards, newspaper advertisements and television commercials. At the same time, the local ma-and-pa business prospered through convenience and human interest.

The connected economy and growth in population have created statistics that are beyond our comprehension. There were 60 trillion websites at the last count and every year the internet grows by eight million new songs, 16,000 new films, 30 billion blog posts and 12 billion photons. Google handles 35 billion e-mails every day alone, and 1.8 billion tweets. IBM tells us that we are “a world awash in data”, 80 per cent of which is currently invisible to our computers, however, with the IBM Watson project, the company intends to use cognitive computing to bring that data into a usable domain. With global health care data expected to grow by 99 per cent in the next 12 months, the search is on to find a new unified theory that will bring all of this information to the fingertips of government, business and individuals.

The question is, can we cope with this? In his book Homo Deus: A Brief History of Tomorrow, author visualizes a completely connected world in which “Data-ism” dominates. There he writes: “Sapiens evolved in the savannah thousands of years ago and their algorithms are not built to handle 21st Century data flows. We might try to upgrade the human data processing system, but this might not be enough. The Internet-of-all-things may create such huge and rapid data flows that even upgraded human algorithms won’t be able to handle it. When can replaced the horse-drawn carriage, we didn’t upgrade horses—we retired them. Perhaps it is time to do the same with Homo Sapiens.”

A rather grim and ominous suggestion perhaps, but by joining our sensibilities, Humankind makes us pause for thought. Let us narrow our field of vision from these impossible numbers and facts. Pandixi suggests that you and I are interrupted by advertising and brand experiences 5,000 times in an average day and mentally register around 350 of these. We note 350, think briefly about 80 and pause at 12 to think about whether they are relevant to us at this time. Thus, the challenge facing the dental marketer is how to become one of 12 of 5,000 at the right time, on the right day, for the right person.

Big business has a simple solution to this problem, it is called big money. Whether it is a Super Bowl television commercial, a giant billboard on a motorway or, nowadays, massive expenditure on internet visibility via paid media, those with the deepest pockets offering the best products and services are the winners in the race to attract that poverty of attention first mentioned in 1971. Simon in 1971 wondered where does this place the independent owned dental practice? You are a mouse, wandering between the legs of a herd of bull elephants, all trumpeting their mating call. No matter how loudly you squeak, at best your sound will be drowned out and at worst you may be trampled in the rush.

I have watched the world of digital marketing in dentistry very carefully over the last five years and have reached some conclusions that are likely to land me in trouble with traditional digital marketers. However, I did not get where I am today without stepping on the fenced-off grass every day and then, running along the side of the swimming pool and tearing up the rule book. So, here is my recommended list of actions to be taken by the independent dental practice in order to gain attention:

1. Use good search engine optimisation (SEO) to optimise your position in Google’s organic search. SEO is a technical skill that has to be delivered by the right people.

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Template for end-of-treatment protocol

So Mr Patient, now that we have arrived at the end of your course of treatment, I’d like to ask a couple of questions:

1. Are you happy with the clinical outcome?
2. Are you happy with the customer service that the team delivered?

If so, I’d like to ask some favours:

1. We are growing the practice at the moment and we would like to see more people like you, because we like you! Would it be OK to give you three of my referral business cards to pass on to any family, friend or colleague who may be interested in visiting our practice?
2. We have noticed that online reviews are growing in importance and would like to invite you to submit a review of your experience on Google, Facebook or any other review site that you may be connected to.
3. We love to collect testimonials from happy patients. They are great for our marketing and can give confidence to other patients who may be nervous. We find that 90% of those who do consent to a testimonial prefer a written commentary, as they are uncomfortable with a video camera recording, whereas 10% are happy to be filmed and photographed. May I ask, are you a 90%’er or a 10%’er?
4. If a 90%’er, I’d love to organise a written testimonial from you.
5. If a 10%’er, we would like to invite you to one of our quarterly video testimonial evenings here at the practice. Every three months, we set aside some time early evening and invite four to six of our 90%’er clients to come along for some light refreshments and to have their photographs taken professionally (at our expense) and to be filmed for four minutes or so. The questions we ask on video are:

   How did you find us originally? What was it that had you looking? How was your customer service experience? What difference did the treatment make? It would be lovely to invite you to our next event. The dates are...
Google changes its own goal posts regularly and the savvy SEO guru will know that and take appropriate action quickly.

2. Massively encourage the collection of Google reviews, user reviews via Facebook and critic reviews via proprietorial sites like WhatClinic.com, NHS Choices and Compare-the-treatment.com in the UK. In September 2016, Google changed the rules twice, first by including external reviews alongside its own in searches and second by altering its own search criteria to favour businesses with in excess of 100 Google reviews. It is necessary that your marketing activity be adjusted to reflect such changes.

3. Connect to your patients through a well-maintained social media channel like Facebook or Twitter (and deliver daily human interest content). Remember that those 1.8 billion photograph uploads per day include the inevitable selfies. Many of my clients now take a patient selfie at the end of a course of aesthetic dental treatment. To quote again from Harari’s new book: “If you experience something—record it. If you record something—upload it. If you upload something—share it.”

4. Build a website that engages the visitor through video and visual testimonials. Your most powerful marketing collateral is the stories that your patients can tell about the difference that you have made to their lives.

5. Collect visitors’ e-mail addresses and consent (via e-mail) via white paper marketing. A coffee shop, hotel or airport exchanges free Wi-Fi access for an e-mail address and permission to keep one informed. You can do the same by exchanging useful information (free guides).

6. Nurture long-term relationships with patients and prospects by publishing a monthly human interest e-mail newsletter.

7. Deal with initial enquiries directed through the Internet, by telephone or in person in a polished manner.

8. Create a memorable new patient experience from initial consultation all the way through to treatment delivery.

9. Employ a strict end-of-treatment protocol to capture reviews, testimonials and social connections (as well as plan membership).

I have given you nine marketing actions designed especially for the smaller business. Actions that should be avoided by the independent dental practices are seeking to gain attention by paying through the nose for Google or Facebook advertising, broadcasting non-human interest material or selling services on price, discount or special offer. This is because every week I hear from dentists and their marketing teams that advertising to strangers, using jargon and cutting prices at best attract nobody and at worst attract bargain-hunters, priceshoppers and messers.

“A wealth of information creates a poverty of attention.” We end where we began. The challenge is for the mouse to gain attention without competing with the bull elephants. You can only do that by stepping away from the herd of elephants and delivering your story in a different way and a different place. For me, that means human interest, personal service and recommendation, and so when I am working with clients on their marketing plans, we focus on and mobilise their most valuable asset: the goodwill of their existing patients.

Editorial note: This article first appeared in Dental Tribune United Kingdom Edition 8/16.

Chris Barrow is the founder of Coach Barrow consultancy practice. An active consultant, a trainer and a coach to the UK dental profession, he regularly contributes to the dental press, social media and online. Chris Barrow can be contacted at coachbarrow@me.com.
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From organic electronics to social robots: Digital pioneers illustrate the future

By DTI

LINKÖPING, Sweden: The digital future—or what it could possibly look like—came alive in the present at the Knut and Alice Wallenberg Jubilee Symposium at Linköping University (LTH). Held earlier this autumn as one of six symposia to celebrate the Knut and Alice Wallenberg Foundation’s 100th anniversary in 2017, the event featured pioneering research and prototypes in the field of digital technology that are poised to shape and change people’s lives in the near future.

Among the novel achievements presented was a thin, pressure-sensitive material that aims to mimic human skin, in both appearance and functionality. “We are on the threshold of an era in which electronics will become part of our bodies,” said Prof. Zhenan Bao, who is from Stanford University in the US and part of the Stanford Wearable Electronics Initiative.

According to Bao, the research in this field, which she called elastonics, requires expertise from many different disciplines and could one day enable the creation of self-healing materials, among other innovations.

Breakthrough research was also presented by local scientists. LiU researchers Prof. Magnus Berggren and Dr Eleni Stavrinidou described how they had been successful in connecting organic electronics and human nerve cells. As one of the many examples of how this technology could be used, they demonstrated a tiny ion pump used to disrupt pain signals. Further developed, the technology may find application in the relief of chronic pain, the researchers said.

Presenting the latest in robotic technology was Prof. Nadia Thalmann, who works at the University of Geneva in Switzerland and the Nanyang Technological University in Singapore, where she interacts with visitors. “No-one is afraid of Nadine. Children who visit the exhibition can’t get enough of her: they don’t want to leave,” Thalmann said. Further research will experiment with different types of speech synthesis and models of personality. Right now, the researchers are working on a male robot, Charlie.

In the future, robots with social functions such as Nadine could be used for looking after and stimulating elderly people and patients with dementia. In dentistry, the MEDi robot developed by US company RxRobots has already been successfully used in the paediatric dental setting since 2015. The robot helps distract children with initial anxiety and fear, thereby enabling the dental team to continue with their work without interruption.

Celebrating its 100th anniversary this year, the Knut and Alice Wallenberg Foundation is one of Europe’s largest private research funders. The jubilee symposium in Linköping was received enthusiastically by both the audience and the organizers alike. “Today has given me a great deal of inspiration. It’s not often that I can sit and listen for a full day, but this has been truly interesting and exciting,” commented LiU Vice Chancellor Prof. Helen Dannetun on the successful event.

“I am impressed and fascinated by research that leads to discoveries that we didn’t even know that we were looking for,” said Peter Wallenberg Jr, Chairman of the Knut and Alice Wallenberg Foundation. “Some Swedish universities are exceptional, and Linköping is one of them. This is a relatively small university which focuses on a few areas, and is doing an excellent job with limited resources,” he added.
EuroPerio and Dental Tribune
International renew collaboration

By DTI

AMSTERDAM, Netherlands/LEIP - International renew collaboration ZIG, Germany:

The Rheinisch-Westfälische Technische Hochschule Aachen (RWTH) is the largest technical university in Germany, with 43,000 students and more than 13,000 employees. The RWTH Aachen University recently held its award ceremony for the 2017 exhibition, which is to be held in Amsterdam in June.

The organisations first worked together for EuroPerio8, which was held in London in the UK in 2015. For 2018, DTI will again produce a special edition of its show newspaper title today international on each of the three days of the event. In addition, DTI editors will provide daily coverage on EuroPerio9 from the Amsterdam RAI Exhibition and Convention Centre on its news website and social media channels.

With its congress newspaper, DTI already provides daily news on all significant global dental congresses and exhibitions, including the International Dental Show in Germany, the FDI World Dental Congress and the Annual Scientific Meeting of the European Association for Osseointegration.

First held in Paris in France in 1994, EuroPerio is organised every three years by the European Federation of Periodontology, a professional body representing over 70 organisations, with 14,000 members, worldwide.

The last edition saw a record attendance of 12,000 visitors, including some of the most high-profile experts and scientists in the field.

For the upcoming edition in Amsterdam, the organiser is anticipating a similar number. Highlights will include a live surgery as part of the Master Clinician/Pedodontal Specialist Forum and a number of sessions aimed at the various members of the dental team. The scientific programme will be accompanied by a large trade exhibition, which will feature the latest innovations from leaders in the field, such as CURAPROX, EMS and Philips.

“I think that the combination of the location, the scientific programme and our marketing strategies will create a very interesting meeting,” congress chair Dr Michele Beneris commented. “Even with such a large attendance, everybody can have the benefit of and experience EuroPerio in a positive way.”

More information about the event can be found on the official website. Anyone wishing to make advertisement enquiries is invited to download the today EuroPerio9 rate card or contact one of DTI’s media sales managers.

Students help teach good oral health in South Africa

By King’s College London

Final year dental students Karolyn John and Jack McSweeny spent three weeks teaching children about oral health in the villages surrounding Cape Town in South Africa as part of the dental elective programme King’s College London’s Dental Institute.

The students helped teach oral health and hygiene on behalf of the Dental Wellness Trust, a charity that aims to promote general dental wellness to less fortunate communities around the world. They joined after-school programmes in small towns with the goal of teaching children the importance of brushing their teeth and washing their hands. The programmes are run by trained volunteers known as ‘Mamas’ but there are never enough volunteers.

Karolyn and Jack wanted to help spread messages to more children, and managed to reach out and recruit more volunteers, increasing the classes covered from 4 to 17.

“It was extremely challenging logistically to ensure there were enough toothbrushes for everyone. With about 500 children brushing at the same time, monitoring their technique was initially quite a task! However their abundant enthusiasm made the entire operation a thoroughly pleasant experience.” Dental student, Karolyn John

Ceremony awards fellowship in laser therapy includes MEA delegate

By Dental Tribune MEA / CAPPmea

AACHEN, Germany: The Rheinisch-Westfälische Technische Hochschule Aachen (RWTH) recently held its award ceremony in The Netherlands for the fellowship in laser therapy on 12th October 2017.

The RWTH Aachen University recently held its awarding ceremony for the fellowship in laser therapy in dentistry on 12th October 2017 in The Netherlands.

Various groups of dental delegates gathered from countries across the world including Argentina, Lebanon as well as United Arab Emirates. Amongst the delegates was Dr Shaleen Verma, currently practicing in the UAE who was honored to receive the fellowship.

Dr Shaleen Verma is currently practicing in Dubai, UAE and is head of the dental department of Majid Al Futtaim group, City Center Clinic and has been in clinical practice for over 21 years.

The unique ceremony was held at the Bloemenvalt Vaux Hotel, The Netherlands where the event continued for over four hours included a presentation and certificate awarding by Prof. Norbert Guirguchi.

Group photo
Oral Anatomy, Histology & Embryology
40th Anniversary

By King’s College London

The latest edition of the now-classic Oral Anatomy, Histology and Embryology continues to provide readers with all the information required to ensure a full understanding of these essential subject areas as they relate to current dental practice.

Now entering its 40th anniversary, the fifth edition of Oral Anatomy, Histology and Embryology has been thoroughly overhauled, updated and augmented to meet the needs of dental students worldwide. Maintaining the clear writing style and popular atlas-style format that characterized the phenomenal success of earlier editions, the fifth edition is written by dentists for dentists – authors, including King’s College London’s Barry Berkovitz – who know exactly what students need for safe clinical practice.

The “Best book worldwide on oral anatomy” contains a wealth of new illustrations, many of them previously unpublished. Chapters now also come with helpful overviews to summarize the topic and place it into a wide context while learning objectives help students focus on key areas.

Now available with new pedagogic features and an enhanced illustration program, Oral Anatomy, Histology and Embryology 5th edition also comes with a free online program containing a wide selection of MCQs and additional learning exercises to allow readers to test and reinforce their knowledge.

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• Explores bone structure and remodelling – including potential bone atrophy following tooth extraction, its relevance to orthodontic treatment and implantology, trauma and malignancy
• Rich with over 1300 images including schematic artworks, radiological images, electron-micrographs, cadaveric and clinical photographs, all specially selected to make learning and recall as easy as possible.

Barry Berkovitz is Emeritus Reader in Dental Anatomy, King’s College London, United Kingdom. Oral Anatomy, Histology and Embryology is founded on knowledge acquired over 40 years of teaching and research experience.

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