• Gain an understanding of the mechanisms through which the Er:Cr:YSGG laser in the management and treatment of Advanced periodontitis for the management of periodontitis. This webinar course is a clinical overview of the use of the Er:Cr:YSGG laser technology.

This webinar course is a clinical overview of the use of the Er:Cr:YSGG laser in the management and treatment of Advanced Chronic Periodontitis and Aggressive Periodontitis. Traditional methods to treat such cases usually involve extensive periodontal surgery, along with the use of regenerative bone substitutes to manage the disease process, at the same time resulting in prolonged side effects of sensitivity, pain and recession, as well as the inevitable need for systemic antibiotics. This lecture will take you through an overview of aetiology and risk factors associated with periodontal disease, provide you with an overview of available and current treatment modalities, and demonstrate a minimally invasive technique using Er:Cr:YSGG lasers to achieve favourable outcomes with minimal adverse side effects.

Learning objectives:
• Gain a better understanding of how lasers work on soft tissues and bone.
• Gain an understanding of the use of Er:Cr:YSGG laser in periodontics for the management of periodontists.
• Gain an understanding of the mechanisms through which the Er:Cr:YSGG laser can be effective in the periodontal pocket.
• Gain an understanding of the criteria needed for periodontal regeneration, and how the Er:Cr:YSGG laser can help to achieve this goal.
• Be able to describe laser periodontal treatment to their patients.

UPCOMING WEBINARS

17 DEC
AN OVERVIEW OF MINIMALLY INVASIVE Periodontal Surgery Using Er:Cr:YSGG Laser Technology
Dr. Rana Al-Falaki
01:00 PM (EST)

This webinar will cover clinical tips in day to day restorative dentistry. It will systematically discuss, new materials, and their impact on operative dentistry and crown and bridge. Some of the topics covered will be:
• Universal Adhesives – Why should I switch to these type of adhesives?
• The newest era of flowable composite.
• The ten minute bonded post and core
• Esthetic splinting of periodontally involved teeth.

13 FEB
TIPS AND TRICKS FOR MAXIMUM SUCCESS
Ron Kaminer, DDS
08:30 PM (EST)

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Aussi study claims dentists are prone to visual illusion

LISMORE, Australia: Objects in a mirror appearing to be farther away than they are is a common illusion encoun-tered by car drivers around the world every day. Misleading visual perception of an object could also be the reason that dentists sometimes drill larger cavities than necessary to fill a tooth or prepare a root canal, a team of psychologists and dental researchers from Australia and New Zealand has suggested.

In clinical field tests involving eight practising endodontic specialists from New Zealand and conducted in 2002 and 2006, the researchers found that dental professionals tend to fall trap to the Delboeuf illusion, which makes enclosed areas appear smaller than they actually are when seen in a larger context.

In their case, a cavity drilled into a tooth appeared to be smaller than the actual cavity when the surrounding tissue was removed too much healthy tissue. In their case, a cavity drilled into a tooth appeared to be smaller when the surrounding tissue was in range of the parameters of the illusion, leading to more healthy tissue being removed at the ex-

The researchers said in the report that it remains unknown whether dentists are aware of this when drilling but recom-
mended that their findings be incorpo-rated into the early stages of clinical training to decrease the risk of pruning or perforating the root end due to having re-

moved too much healthy tissue. It should also be extended to other fields of health-care treat-
ment that could be affected by visual illusions, they added.

“When operating, health-care providers try to save as much healthy tissue as possible. It is important to know that their eyes can deceive them into re-

moving more healthy tissue than necessary,” lead author of the study and psychology expert from the University of Southern Cross in Australia Prof. Robert O’Shea commented.

Named after its creator, Joseph Reni Leopold Delboeuf, a Belgian scientist, the illusion was first doc-
umented in 1865. It has been re-
ported to be used by restauran-
to trick customers regarding the size of their dishes by using smaller plates, among other things.

For the latest study, more than 20 extracted and root-filled teeth were treated by each participant, who had not been informed about the parameters of the il-

lusion. The participants were asked to remove as little tissue as possible when preparing the teeth and to use their usual hand instruments.
DT Asia Pacific

CANBERRA, Australia: The Australian Ministry of Health has refused claims by the Australian Dental Association to delay the introduction of the Child Dental Benefits Scheme in January 2014. They agreed, however, to conduct a timely review of the programme, which is intended to subsidise dental care for over three million children.

In the organisation’s letter, ADA president Dr Karin Alexander said that dentists feel largely unprepared for the introduction of the programme and firstly need to be fully briefed about its details. She said that there is still a grey area around the administrative requirements of the scheme which, she said could force dentists into making mistakes once it is introduced next month.

According to ministry officials, information leaflets are currently in preparation and will be sent to dentists this month in order to provide further details of the programme. Furthermore, an e-learning module and telephone hotline for dental provider inquiries will be available on the ministry’s website soon. They said that there will also be a national campaign to inform parents of the eligibility requirements.

A part of the former government’s National Dental Health Reform, the scheme entitles children between ages 2 and 17, who are on income support or whose parents receive certain tax benefits, to treatment costs of AUS$1,000 for basic dental procedures like examinations or extractions over a period of two calendar years. It will replace the current Medicare Teen Dental Plan which was launched under the Labour government back in 2008. An estimated AUS$3 billion will be provided this way to children in need for dental care over the next two years.

According to recently published figures of the Australian Bureau of Statistics in Canberra, access to dental care services remains limited in the country, particularly for children from low income households.

SINGAPORE: With the introduction of its diagnostic digital sensor Gendex GXDP-700, dental equipment manufacturer KaVo offers dentists a more economic entry into the world of 2-D and 3-D diagnostics. According to the dental equipment manufacturer, various diagnostic problems can be competently solved through the large selection of 12 panoramic and five remote X-ray modes. With the optional volume extension to 60 x 80 mm, it is also possible to cover the whole mandibular arch with just one image. Both radiation dose and the time taken to effect diagnosis are reduced owing to indication-related volume selection, the company said. KaVo also highlighted the benefit of the Intelligent SmartLogic technology, whereby the most frequently used mode and preselect are automatically saved for use with the next image.

The Gendex GXDP-700 comes with a 10 inch wide touch panel and a system for fast, easy and effective patient-positioning. The software solutions Invivo 5D and VixWin 2D allow not only integration into almost any practice management software, but can also be used for diagnostic purposes, processing and further use of images.

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