DTI publishers meet for tenth anniversary in Italy

By Dental Tribune International

TURIN, Italy: Over the last three days, Dental Tribune International (DTI) has held its tenth annual publishers’ meeting. This year, the meeting drew over 50 licence partners from the US, Latin America, the Middle East and many other countries from all over the world. Meeting attendees learnt about a number of new projects for the upcoming year and discussed strategic approaches for future development.

At the meeting, DTI CEO Torsten Oemus reviewed the impact of DTI’s various print, online and world. Meeting attendees learnt about a number of new projects for the upcoming year and discussed strategic approaches for future development.

Sirona presents “CEREC Desert Fest 2014”

By Sirona

The latest findings in digital dentistry, live demonstrations, and an exciting social program: Sirona and the Centre For Advanced Professional Practices (CAPP) invite you to the “CEREC Desert Fest” conference. The event held in Dubai from September 12-13 is aimed at potential CAD/CAM users and experienced CEREC users.

In front of breathtaking scenery at the Palace Downtown Dubai, Sirona presents the “CEREC Desert Fest” for the very first time. On September 12 and 13, dentists and dental technicians can share their experience with the most used CAD/CAM system with colleagues from all over the world. The event features a number of expert presentations followed by panel discussions as well as live demonstrations of CEREC in various areas. Dr. Joachim Pfeiffer, Vice President CAD/CAM Systems and Chief Technology Officer at Sirona, says “this first-class event combines specialist knowledge with user experiences. We expect this interesting conference to contribute greatly to the further development of CEREC.”

The panel show focuses on presentations by experts on the use of CEREC. Dr. Todd Ehrlich, a master CEREC trainer who has been teaching dental CAD/CAM technology for a number of years, provides an
The Ebola virus epidemic: A concern for dentistry?

By Prof. I. Samaranayake

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wenty-two years ago, a seminal report from the Institute of Medicine (IOM) in the US, titled “Emerging Infections: Microbial Threats to Health in the United States”, warned of the dangers of so-called newly emerging and re-emerging diseases. The concept of “emerging infectious diseases”, introduced then by the IOM is now well entrenched, and to our chagrin we have witnessed many such diseases over the last two decades. These include vari- ant Creutzfeldt-Jakob disease/bovine spongiform enceph-

aloophy, severe acute respiratory syndrome, and Middle East respiratory syndrome, and above all the pandemic of acquired immune deficiency syndrome (Aids), which has claimed millions of lives the world over. The re-emerging infectious diseases we have seen include diseases caused by metacillin-resistant Staphylococcus aureus, and multi-drug-resistant and extensively

interestingly, the concept of “emerging infectious diseases” is not new. Indeed ancient Greek, Roman and Persian writers doc-

umented the emergence of many new epidemics. In more recent times, the scientist Robert Boyle presciently observed in 1695 that “there are ever new forms of epidemic diseases appearing [...] among [them] the emergent va-
iety of exctick and hurtful [...].” Arguably though, the most note-

worthily relatively new emerging infectious diseases with the greatest impact on the dental profes-

sion has been the human immu-

nodeficiency virus and Aids.

And now we have a severe epi-
demic of Ebola virus infection. It is back with a vengeance, this time in West Africa, with over

508 cases and a 69% case fatality ratio at the time of writing. The culprit is the Zaire ebolavirus species, the most lethal Ebola virus known, with case fatality ratios up to 90%.

According to the IOM report, there are many reasons that new diseases emerge and re-

emerge. These include health care advances with the attendant problems (e.g. transplantation, immunosuppression, antibiotic abuse, and contaminated blood and blood products) and human

close contact with the blood, se-

cretions, organs or other bodily fluids of infected animals. Hu-

man-to-human transmission is through direct contact (through broken skin or mucous mem-

branes) with the blood, secre-
tions, organs or other bodily fluids, such as saliva, of infected people, and indirect contact with environments contaminated with such fluids. Transmission through the air has not been documented in the natural en-

vironment, nor have there been any case reports of transmission

through saliva contamination. Infection in health care settings has been due to health care workers mistaking patients with suspected or confirmed EVD, especially when infection con-

trol procedures are not strictly practised. Reports indicate that those who recovered from the disease, many of whom were discharged through their semen for up to two months after recovery.

EVD is a severe acute illness characterised by the sudden onset of fever, intense weakness, muscle pain, headache and sore

throat. This is followed by vom-

iting, diarrhoea, rash, impaired kidney and liver function, and then internal and external bleedin-
g in some cases. Oral manifesta-
tions, such as acute gingival bleeding, have been reported. The mortality rate of EVD is very high and 50–60% of patients die owing to the profound systemic haemorrhage or its complica-
tions. The incubation period of EVD is 2 to 21 days.

Up to now, there have been no reported cases of transmission of EVD in any dental settings. How-

ever, the fact that it is transmit-
ted through human secretions, which contains saliva, and the incubation period could last up to 21 days implies that den-
tal care workers in the endemic areas of the virus, such as West Africa and sub-Saharan Africa, may run the risk of acquiring the disease if strict standard in-

fection control measures are not routinely followed.

In dentistry, we are constantly exposed to these emerging and re-emerging infectious threats and we cannot afford to let our guard down. Vigilance, awareness and good clinical practice with standard infection control at all times are fundamental to prevent its transmission. As we are frequently exposed to new diseases surely lie in wait. Although we have made spec-
tacular technical and scientific advances since the release of the original IOM report some two decades ago, it appears that hu-

mans are still defenceless in the face of the relentless march of our microbe foes. drug-resistant tuberculosis.

Malaysia provides dental records for MH17 investigation

By DT Asia Pacific

PUTRAJAYA, Malaysia: The Health Minister of Malaysia has confirmed that the dental records of all the Malay-

sian victims of Malaysia Airlines Flight 17 have been collected and sent to the Netherlands for foren-

sic identification. According to Datuk Seri Dr Subramaniam s/o K.K. Sathasivam his ministry has also provided DNA samples and fingerprints of the deceased passengers of the flight, which was bound for Kuala Lumpur on 17 July, to an Interpol disaster re-

sponse team.

Forty-three Malaysian pas-

sengers, including 15 crew mem-

bers, were on board the Boeing, which is believed to have been shot down by pro-Russian rebels over Donetsk in Ukraine three weeks ago. Since access to the crash site remains difficult owing to on-going conflict in the re-

gion, only 20 coffins containing the remains of the victims have been collected and sent to the Netherlands so far, according to Dr Subramaniam. He told the New Straits Times newspaper in Kua-

la Lumpur that the first results from the identification process, which is currently underway at a military facility in Heemskerck near Amsterdam, are expected to be available within the next two weeks.

A total of 208 passengers, most of whom were of Dutch descent, were killed in the incident, which is still under investigation by inter-

national organisations, such as the Organization for Security and Co-operation in Europe (OSCE) and Co-operation in Europe (OSCE)

Cloudy Jenny (Malaysia) — News:

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Implant Real-time Imaging System (IRIS-100)

By EPED

Implant Real-time Imaging System (IRIS-100) features the utilization of optical tracking systems to visualize instantly the implant handpiece and drill with a CBCT image. With the aid of this intra-bone GPS function, users can see the position of the drill and data such as bone quality, nerve, sinus location and more. This critical data can assist the implantologists to navigate and give real-time guidance during implant surgery. Similar to a car navigation system, the system is set up to visualize the destination and helps to guide the preplanned placement of implants, avoiding dangerous areas, reducing risk and increasingly the likelihood of successful implant surgery.

IDS 2015: Digital technology determines daily routine in modern dental practice

By Dental Tribune International

COLOGNE, Germany: Digital dental procedures are increasingly becoming an essential part of the daily routine in the modern dental practice. They render patient management and treatment planning processes more economical and increase time efficiency. At the upcoming International Dental Show (IDS), digital technologies will thus form a core subject, with many exhibitors presenting their latest product solutions in the field.

At IDS 2015, the digital technology offerings available for dental practices will form a focal point for all visitors in the fields of dentistry and dental technology. The product ranges to be exhibited contribute to simplifying workflows and, as a result, to reducing treatment times. They create synergies with the digital range for dental laboratories, yielding positive implications for practice management and therapeutic procedures. That is why the state of the art in digital technology for dental practices will be a major topic at IDS 2015, said Dr. Martin Riecker, Chairman of the Association of German Dental Manufacturers.

Products presented will include software for efficient patient management and integrated treatment planning, as well as digital imaging devices, including CBCT and CT, which have been used alongside conventional radiographic techniques in recent years.

IDS 2015 will also give special attention to digital scanners, which offer a wide range of advantages for patient-specific restorations and implant planning. In particular, intra-oral scanners will be in the spotlight, as they have contributed significantly to making prosthetic treatment workflows simpler and more precise.

Overall, both patients and dentists benefit from the use of digital technologies. They help shorten treatment time and reduce the number of work stages, and enable the dentist to immediately examine and explain preparations on screen. Furthermore, the data gained through digital procedures can be quickly processed in the dental practice and sent to dental laboratories.

The 56th IDS will take place from 11 to 13 September in Cologne. According to the latest figures provided by IDS organisers Koelnmesse, 1,400 exhibitors from 46 countries have already confirmed their participation.

Many manufacturers will be exhibiting their latest innovations in digital dental technology at IDS 2015. (Photograph courtesy of Koelnmesse)

Dental Tribune Toothy Tooth Grows in Man’s Nose

By Dental Tribune International

DHAHRAN, Saudi Arabia: Surgeons in Saudi Arabia have found a white bony mass inside the nose of a 22-year-old. They said that the mass was an extra tooth growing in the young man’s left nasal cavity. The patient had suffered from nosebleeds once or twice a month for the past three years, the doctors reported.

The patient was admitted to King Fahd Military Medical Complex in Dhahrain owing to recurring nosebleeds and tinnitus. Close examination of the young man’s nasal cavity found a 1 cm-long white cylindrical bony mass arising from the floor of the nose, according to the case report.

A consultant dentist made the diagnosis of intranasal eruption of a supernumerary tooth. The prevalence of such teeth is not known, as they usually remain asymptomatic in many patients and the mechanism of eruption is poorly understood. “One theory is that there is a defect in the migration of neural crest derivatives destined to reach the jawbones. A more plausible explanation is multistep epithelial and mesenchymal interaction,” the surgeons stated.

While supernumerary teeth are usually asymptomatic, patients may present with a variety of symptoms, including nasal obstruction, headache, nosebleed, and external nasal deformities. They may be associated with conditions such as cleft palate. The surgeons further said that such teeth can be easily detected using nasal endoscopy, panoramic radiographs, and CT scans.

In the present case, the patient underwent endoscopic extraction of the supernumerary tooth with its surrounding granulation tissue under general anaesthesia. After three months, the area was completely healed and the patient did not experience further nosebleeds.