Align Technology and Ormco end patent dispute, plan to collaborate

Align Technology, manufacturer and marketer of Invisalign, has reached a settlement with Ormco, a subsidiary of Danaher, to end all pending litigation between the parties and to begin a new strategic collaboration.

As part of the settlement, Align will make a cash payment of approximately $15 million to Ormco and issue approximately 7.6 million shares of Align’s common stock to Danaher, that after issuance will be equal to approximately 10 percent ownership interest in Align.

The value of the shares is approximately $77 million (based on the closing price of Align’s common stock on Friday, Aug. 14).

Align and Ormco have also agreed upon an exclusive collaboration over the next seven years to develop and market an orthodontic product that combines the trademarked Invisalign system with Ormco’s trademarked Insignia orthodontic brackets and arch wires system to treat the most complex cases.

Each party will retain ownership of its pre-existing intellectual property, and each party will be granted intellectual property licenses in their respective field for jointly developed combination products.

“We are pleased to resolve this ongoing litigation with Ormco and to begin a new relationship that meets our shared goals of providing innovative products and excellent service to our orthodontic customers,” said Thomas M. Prescott, president and CEO of Align Technology, in a news release.

“This collaboration with Ormco, a fellow innovator in digital orthodontics, gives us the ability to compete for a segment of the market that is difficult to treat with Invisalign alone and accelerates our long-term plan for a combination product.”

(Sources: Align Technology and Danaher Corp.)

Local anesthesia is truly effective only when injected

A painful truth in dentistry today is that for most dental procedures, local anesthesia is truly effective only when injected. The problem, of course, is that both the insertion of the needle and the injection of the anesthetic fluid itself can cause discomfort.

Dentists have been using topical anesthesia to reduce the pain involved in needle insertion and fluid injection for decades, and they have tried to use finer-gauge needles in the belief that they cause less pain. However, recent research has shown that needle gauge has no effect on perceived pain level.

Topical anesthesia can be useful for minimizing the pain associated with needle insertion, but it has not been proven to address pain associated with the actual injection of the local anesthetic solution.

A recent study in Anesthesia Progress examined the effectiveness of topical anesthesia in reducing pain associated with needle insertion separately from the pain associated with injection of the anesthetic. Results were investigated after different intervals (two, five and 10 minutes) to determine the time for optimal efficacy of the topical anesthetic.

In a double-blind, placebo-controlled study, responses from 85 people showed that the topical anesthetic was statistically and significantly more effective compared to the placebo for reducing the pain caused by needle insertion alone at all time points (two, five and 10).

However, it had no effect on perceived pain intensity associated with injection of the local anesthetic solution at any of the time intervals.

At all time lengths, patients reported the same degree of pain from anesthetic solution injections in topically anesthetized and placebo locations.

Therefore, the minimum two-minute period appears to be sufficient for the topical anesthetic application, as a five- or 10-minute delay has no added benefit in reducing the pain of needle insertion.

To read the entire study, “Effect of Time on Clinical Efficacy of Topical Anesthesia,” visit www.allenpress.com/pdf/anpr-56-02-03.pdf.