Greater New York Dental Meeting or bust!

By Robin Goodman
Group Editor

Get ready to sink your teeth into the Big Apple in a way that only the Greater New York Dental Meeting can provide. With a myriad of new programs on and off the exhibit floor as well as seminars and workshops, you’ll want to plan your time carefully. Here is a taste of what awaits you.

Witness “Live Dentistry” on the exhibition floor where you can watch procedures that showcase the latest in dental technologies and materials. Also on the exhibit floor, in glass-enclosed areas, you can attend workshops that will present a broad spectrum of up-to-date, hands-on procedures. You can even earn one hour of C.E. credit for walking the expanded exhibition floor as you enter the convention center from Nov. 5 to Wednesday Dec. 3 where you can learn all you need to know about “getting started in” endodontics, implantology, cosmetic dentistry or digital dentistry.

Dental Tribune America is the official media partner of the meeting, so look for our show daily editions as you enter the convention center from Nov. 50 to Dec. 5. For more in-depth coverage about the Invisalign Educational Expo and Ortho Specialty Programs, please see pages 11 and 12.

Are you a ‘cutting edge dentist’?

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Dr. Martha Cortes, current president of the American Academy of Cosmetic Dentistry New York Chapter and former co-chair of dentistry with the American Society for Laser Medicine and Surgery, took some time to talk about lasers with Dental Tribune.

What is the state of lasers in dentistry today?

Dental lasers are state-of-the-art technologies. Every dentist should own one and use it as an integral part of his or her practice, especially as they are much more affordable than they were 15 years ago when I got my first laser; I had the Duopulse by Excel Quantronix, which has two separate lasers in one unit: a holmium and neodymium laser. I still have this unit in my office and use it as a backup laser to my newer ones. Lasers can be used by themselves or as an adjunct tool as they are versatile and precise. A simple diode laser can be used to disinfect tooth structure, in crown lengthening, frenectomy, biopsies, periodontal disease and gingival sculpting, etc.

There are lasers like the PerioLas MVP-7, which are specifically built around a patented soft-tissue technique for periodontal — laser assisted new attachment procedure (LANAP). There are hard-tissue (modifies lasers) as well as soft-tissue (modifies lasers) and there are lasers available today that combine both a soft and hard tissue laser in one unit. It all depends on the practice one has, or the one that you want to develop. Bottom line is that you cannot consider yourself a dentist on the cutting edge if you do not have and use a laser as part of your daily regimen regardless of what type of dentistry you practice.

How about lasers and soft tissue such as gum and pulp?

I have developed a direct pulp capping technique involving a laser and the immediate placement of a porcelain restoration [CEREC], which has a great success rate as the laser can reach places that antibiotics and antimicrobials cannot reach because of their shallow penetra-
Don’t miss Randy Danahoo’s lecture at the Dental Tribune Symposium during the Greater N.Y. Dental Meeting at 1:30–3:30 p.m. on Dec. 2.

This course will provide you with an opportunity to see for yourself how the benefits of “heads-up” dentistry can enhance your practice. Experience first hand the Dental Procedure Scope, a life-changing device that provides increased magnification, superior lighting and imagery beyond what is possible with your current handpiece.

Dr. Danahoo will cover the benefits of using the Dental Procedure Scope in such areas as:

- \textbf{Root Canal Therapy:} No more “touching up” of root canals, improved visualization of the root canal space, better understanding and visualization of the root anatomy.

- \textbf{Endodontic Surgery:} More accurate maneuvering of the surgical instrument, increased visualization of the bone and soft tissues.

- \textbf{Appointment Efficiency:} Minimizes prep time for repeat visits.

- \textbf{Instructor Feedback:} Immediate feedback for improving surgical technique.

Don’t miss Dr. Jesse’s and Dr. Kamioner’s lecture at the Dental Tribune Symposium during the Greater N.Y. Dental Meeting at 3–4 p.m. on Dec. 1.

Topics to be discussed include the following:

- \textbf{Caries Management by Risk Assessment:} Current concepts in cariology; minimally invasive endodontics; bonded fiber posts; dental lasers; minimally invasive periodontics; current advances in tooth whitening; bonding agents: separating the truth from the hype; and much more. This program will introduce concepts that will change the way you practice forever.

Using 3-D X-ray imaging and planning to increase patient treatment acceptance

Dr. Patel will share a practical perspective of cone beam technology and its multiple uses in “real world” private practice. He will shed light on what the future has to offer and give insight into the impact of CBCT technology can have from a business standpoint — return on investment (ROI)! By the end of the presentation, attendees should:

- Understand how 3-D technology can benefit the modern dental practice.
- Learn how state-of-the-art 3-D digital dentistry is being done today.
- Acquire the tools for implementing 3-D X-ray imaging and software in their practice.

Enhancing your dentistry: Get out of dental surgery alive!

Lasers can be used for the delicate surgery of neoplasms, teeth and bone. Nd:YAG’s and diodes are great for sculpting the gingival tissue in crown lengthening, smile makeovers and removal of defective composite materials; however, they cannot be used on metal or porcelains, as these cannot be cut by a laser.

Metals and porcelains must first be removed using the drill; however, once they are removed the laser can be used directly to remove any underlying caries. If the caries are very deep, the erbium laser can be used in a direct/indirect pulp-capping technique with the immediate placement of a CEREC 3-D porcelain restoration.

An erbium laser like the Waterlase MD by Biolase can also be used in the direct treatment of root canals as it has laser endodontic tips that are used post instrumentation for cleaning and disinfecting the canal.

What are your thoughts on a connection between heart disease and periodontal disease?

I love it when patients tell me that they are fit and in good shape except, of course, for the severe gum disease they have. Unfortunately, we have grown up with faulty medical/dental health models that describe the body as distinct and disconnected units, and this shows up in how we view disease and the body. Severe infection in the body is dangerous as it can spread, especially to vulnerable organs.

Periodontitis is a bi-directional manifestation of disease. It can be seen as a manifestation of systemic disease such as diabetes, cutaneous disease, joint disease and osteoporosis. It can also be seen separately from systemic ones as its own complete disease with the great potential of releasing bacterial emboli into the blood system that can travel to the heart, lungs and other major organs. It has been linked to cardiovascular disease since the late 1990s and rightly so, as oral bacteria are not contained but spread and are particularly dangerous for heart patients who are vulnerable to endocarditis, especially before open-heart surgery.

An Nd:YAG laser can reduce microbial colonies that inhabit periodontal pockets by 97 to 100 percent, as the laser is precise, site specific and does not rely on secondary or tertiary effects to kill microbes. It destroys microbes and their colonies on contact without any side effects.

Editor’s Note: Please see Cosmetic Tribune in this edition for a clinical article by Dr. Cortes and her contact information.

‘The article is titled, “High-Tech Pulp Capping Using Laser and CAD/ CAM, Dental Economics,” was published by Penwell.’