Latest research at CDA Presents

Dental school presentations return after 10-year break; newest products and services fill exhibit hall

Approximately 575 companies will occupy the 130,000 square feet of exhibit space at CDA Presents the Art and Science of Dentistry in Anaheim, Calif., May 12–14. And as has been the case in previous years, a number of those companies will use the California Dental Association meeting to launch new products and services.

Nonmember dentists who want to explore the exhibit hall can register on site for a one-day pass on Saturday, May 14. The cost is $175, and is for Saturday exhibit hall hours only. It is not valid for continuing education courses. To register, you can go to the membership counter during on-site registration hours on Saturday, May 14.

The exhibit hall hours are from 9:30 a.m. to 5:30 p.m. on Thursday and Friday and from 9:30 a.m. to 4:30 p.m. on Saturday. Family hours are each day from 9:30 a.m. to noon. Children age 10 and younger may be in the exhibit hall during family hours at no cost. Just stop by registration for a youth pass. Children age 11 and older may be registered as a guest and have access to the exhibit hall.

Educational opportunities abound throughout the exhibit hall, anchored by The Spot, an educational theater that features the Smart Dentist Series of free one-hour lectures.

Dental schools cover latest research
Attendees who want to learn about current research taking place at California’s dental schools will have the opportunity to hear it directly from those doing the research themselves.

The Dental School Track is a set of lectures that will be presented by four of California’s dental schools: the Herman Ostrow School of Dentistry of USC, the College of Dental Medicine at Western University of Health Sciences, the Loma Linda University School of Dentistry and the UCLA School of Dentistry.

Faculty members or students in master’s programs will present material or research and show dentists what may be changing in the profession in the coming years. This program hasn’t been featured since 2006 to allow for some turnover in the generation of researchers.

Get details about the meeting and registration by visiting cdapresents.com.

(Source: California Dental Association)
Happy 90th birthday, Dr. Len Linkow!

By Dr. David L. Hoexter
Editor in Chief

Dr. Len Linkow celebrated his 90th birthday recently in a big birthday bash hosted by his beautiful daughter, Sheree. Fellow dentists and other friends came from all over the world to honor, celebrate and share the moment. Prominent among the attendees were his grandchildren. A photo of his recent great-granddaughter brought glowing smiles to everyone. To be asked to sit at the head table next to him was an honor for me and my wife. Better yet, seeing Len so vital, alert and sharp was a delight.

Going around the room, Len exchanged vignettes about each of the attendees with humor and aplomb, and the attendees reciprocated. Len is known as the father of oral implantology. As Dr. Carl Misch related to us by video, Len never claimed that he invented implants, but he championed the field, and he is known by this title. He has devoted his professional life to implantology and has written 22 educational books on it. In earlier years, he tirelessly traveled all over the world promoting the concept of implantology, carrying with him boxes of Kodachrome slides. That’s right, slides! Not the easier computer visuals of today, but boxes of slides to show dentists in countries that did not have the opportunity to visualize the actual possibilities. What some may not know, too, is that Len was one of three doctors who formed the first esthetic dental society. It was a very happy day for me to celebrate Len’s birthday with him, and I am looking forward to celebrating his 100th. Happy birthday, Len!
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CHANGING DENTISTRY. CHANGING LIVES.
Pediatric dentists gathering in Alamo City

American Academy of Pediatric Dentistry scientific session will be from May 26–29 in San Antonio, Texas

The fun and history of Alamo City combine with top speakers and high-value C.E. at the American Academy of Pediatric Dentistry (AAPD) 2016 annual session. The event will be held from May 26–29 at the Henry B. Gonzalez Convention Center in San Antonio, Texas.

Online registration is open via www.aapd.org. You can use AAPD’s online itinerary planner to find details on the scientific program, social events and other events in San Antonio.

Barbecue, hoedown, carnival rides
The welcome reception on Friday, May 27, will feature a family-friendly fiesta San Antonio style, with barbecue, southern hoedown and carnival rides for the kids.

The keynote speaker on Friday, May 27, will be Erik Wahl, an internationally recognized graffiti artist known for his high-energy, inspirational live performances. The best-selling author of the business book "UNThink" uses his on-stage painting as a visual metaphor to communicate his core message: encouraging organizations to achieve greater profitability through innovations and superior levels of performance.

Because attendees must register for the meeting prior to making meeting-block hotel reservations, attendees are encouraged to register early. There are a number of hotels in the AAPD block, including the Marriott Rivercenter (headquarters hotel), the Marriott Riverwalk, the Grand Hyatt San Antonio, the Hilton Palacio del Rio, the Residence Inn Alamo Plaza and the Westin Riverwalk. As you can tell from the hotel names, the convention center and hotels string the city’s famed River Walk and its many restaurants, bars, shopping and entertainment venues.

A wide variety of other popular destinations are just blocks away in the heart of downtown San Antonio. All of the meeting’s scientific sessions will take place at the Henry B. Gonzalez Convention Center.

The AAPD 2016 app is available
New this year, the conference app, online itinerary planner, interactive floor plan and ePoster Gallery are all linked. After registering, you can sign in to your account using your email and registration confirmation ID. You will then be able to browse sessions, speakers, exhibitors, social events and more. You also can create your own personalized schedule in the app before even getting to San Antonio.

You can learn more about the app, online itinerary planner and the complete scientific program by visiting www.aapd.org/annual.

(Source: AAPD)
Buffering Simplified™

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Booth #238

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VISA | DISCOVER | AMERICAN EXPRESS
The Journées Dentaires Internationales du Québec, the annual meeting of the Ordre des Dentistes du Québec, will be held in Montréal from Friday, May 27, through Tuesday, May 31.

The meeting typically attracts more than 12,000 delegates from around the world. Organizers describe the event as being the “world’s most highly attended bilingual convention.” The JDIQ offers a scientific program with more than 125 lectures and workshops presented in both English and French.

Featured speakers for this 46th edition of the meeting include Drs. Véronique Benhamou, Philippe Martineau, Marina Branieste, Matthieu Schmittbuhl, Gordon J. Christensen, Marie-Andrée Houle, Samer Abi Nader, Maude Albert and Nadia Zirkalla.

Session topics include cone-beam computed tomography, endodontics, lasers, dental photography, dentures, composites, challenging implant cases, advanced local anesthesia, dento-alveolar surgery, conservative dentistry, sleep apnea and embezzlement protection for practices.

More than 225 exhibitors will span 500 booths in the exhibit hall, which will be open on Monday and Tuesday, May 30 and 31. A continental breakfast will be available to early risers on both days, and a wine and cheese reception will close out each of the two days.

Many of the workshop courses have already sold out. Prospective attendees are encouraged to register as soon as possible at www.odq.qc.ca/convention.

You can download the free mobile app, JDIQ 2016, to your smart phone or tablet via the App Store or Google Play. Or you can access the app via the QR codes on the meeting website.

The meeting organizers look forward to seeing attendees in Montreal at the end of May, with their usual promise of beautiful summer weather.

(Source: JDIQ)

JDIQ is May 27–31 at the Montréal Convention Centre (Palais des congrès de Montréal). Photo/MTTQ/Marc Cramer, Tourism Montréal

AGD features many exhibit-hall-based education options

Reflecting its host location, the theme of this year’s Academy of General Dentistry annual meeting is “Revolutionary changes in dentistry.” AGD 2016 will be from Thursday, July 14, through Sunday, July 17, in Boston at the Hynes Veterans Memorial Convention Center and Sheraton Boston Hotel.

The meeting features four days of continuing education for dentists and dental team members, highlighted by clinical and practice management lectures, hands-on courses and live-patient demonstrations.

In the exhibit hall, dental professionals, students and service providers will have numerous ways to connect at daily networking events and demonstrations of new dental products and services. Educational opportunities in the exhibit hall include the “Transitions Program Learning Labs,” designed to assist attendees in transitioning through various career stages, whether you just graduated or you’re preparing to open your own practice. Learning Labs also will cover a range of topics such as marketing, CAD/CAM and dental photography — of benefit to the entire dental team. Early sign-up early is encouraged because these complimentary courses tend to sell out quickly.

Advanced registration deadline is 7 p.m. CDT, May 19. Online registration ends at 5 p.m. CDT, June 30. Onsite registration opens at 3 p.m., July 13. Learn more and register at www.agd2016.org.

(Source: AGD)

MIXPAC™ S-Dispenser II Precise and ergonomic performance in style

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Congratulations: Komet USA
dental student essay winners

Contest focused on women who inspired and guided career choice

By Komet Staff

Komet USA recently announced the top three entrants in its “Women in Dentistry” dental student essay contest. Komet received entries from throughout the country. All entrants will receive recognition and the company plans to continue working with dental students on this topic and others as it progresses in its own work in the field of dental rotary instruments. The third-place essay entrant, Caroline Zeller (University of Missouri-Kansas City School of Dentistry), will receive a three-month (up to $250) supply of dental burs and a specially engraved custom bur block.

The second-place essay entrant, Erica Boyd (University of Nebraska College of Dentistry), will receive a six-month (up to $500) supply of dental burs and a specially engraved custom bur block.

The first-place entrant is Rebecca Tom (University of California, San Francisco School of Dentistry). Tom will receive a one year (up to $1,000) supply of dental burs and a specially engraved custom bur block.

Below is Tom’s entry to the essay contest. Other entries will be published over time on the Komet USA Facebook site in recognition of how all of the essays contribute a unique vision regarding the influence of women in the field of dentistry.

First-place essay

From daughter to DDS

By Rebecca Tom
University of California, San Francisco School of Dentistry

Growing up, everyone would always tell me how much I looked like my mother. I hated it. I wanted to be my own individual without growing up in my mom’s shadow. Now, don’t get me wrong, my mom is a wonderful person! However, living in a community where my mom is a relatively well-known dentist who has looked into the mouths of my classmates, teachers, and school administrators, everyone would look at me, the only daughter of Burbank’s friendly local female dentist, and automatically think that I was going to do everything she does.

Maybe I sound like I went through a crazy rebellious adolescent phase, but I don’t think I did. In fact, it was because I looked up to my mom so much that I wanted to make a good name for myself on my own accord. I wanted to meet the expectations and high achievements my mother made without needing to copy her. However, the circumstances that usually occur in our lives often tend to be very different than we anticipate.

My mother attended UCLA for her undergraduate education, so I obviously had to go to Los Angeles’s rival school, USC. I remember in my senior year of high school when I was applying for college, even then I felt the pressure of needing to have my future completely planned out. It seemed as if the first question of any adult’s mouth would be, “What are you doing after high school? What are you going to study? Are you going to be a dentist like your mom?” It was extremely hard for me to believe that at the young age of 17 I should already know the trajectory of my life, and I also wanted to avoid taking the easy road of saying “yes, I’ll be a dentist like my mom” by default.

By the time I was in my freshman year of college, I quickly learned that undergrad was a lot harder than I originally anticipated. Unprepared for the giant competitive lecture-based courses, I was nearly failing some of my classes. I did what any new college student would do: I called my mom. I remember being so nervous that she would be disappointed with me, and I didn’t want to let her down.

I had no reason to be anxious about that phone call. My mom completely empathized with me, remembering how hard undergrad classes were, especially when first transitioning into them. She encouraged and reassured me, reminding me that she was supporting me the whole way, even and especially when things got tough. Needless to say, I did survive that semester, and I know I couldn’t have done it without the support of my mom.

A few months later, I was at home for summer vacation when my mom came home with a huge smile on her face. “Rebecca,” she told me, “I got this cool letter in the mail, sent to me by one of my patients! For the longest time, this woman was unhappy with the way her teeth looked. She would keep her mouth closed while smiling, and she would cover her mouth when she talked, but she was scared of getting any treatments done to fix it. Then, when she was planning on flying to go to a large reunion, she finally decided to give it a shot and get veneers. Today in the mail, I got these pictures of her with a huge smile on her face with all her friends. She said that they all kept mentioning how beautiful she looked, and it was the happiest she had felt in a long time.” That story resonated with me, and I honestly believe it contributed to my view of dentistry, even through today. Dentistry is a healing profession, in more ways than simply treating physical disease; dentists are able to change the way that people view and express themselves and facilitate those relationships that are so important for the way that we live as social creatures. However, the incredible thing about our role as dentists also lies in the opportunity to use our own abilities and strengths to provide care to our patients.

I began seeing how the unique personality traits I’ve seen of my mom as her daughter contributed to the way she acts as a dentist. Similar to the way that she was understanding with me as I struggled in my freshman year of college, she nurtures and sympathizes with her patients and truly listens to their concerns. It is with that heart that she is able to develop deep relationships with her patients and help them out of their own compassion, and that is something I find deeply inspiring about my mom.

It was then that I realized that being in my mom’s shadow meant a lot more than just following the same career path as her. It was about how the things that I appreciated and admired the most about my mom—the same qualities that she exemplifies daily as a dentist caring for patients—are incorporated in everything she does. I slowly realized my heart was changing. I shouldn’t be looking at the prospect of also coming a dentist to mean I was going up and just following my mom’s footsteps, rather, I could carve my own path alongside her with her new transitioning into a professional mentor to look up towards every step of the way. Even in dental school now, I know it isn’t easy. But in those times when I am frustrated with my outline form not being perfect or the amalgam setting too quickly in my typodont, I can stop and remember how I was inspired by my mom’s love for her patients to bring me to dental school and how this training will prepare me to do the same—and I am so excited for that.
‘A shot that patients, practitioners love’

By Anutra Medical Staff

‘I didn’t even know you gave me a shot,’ Barb said as Dr. Kelly picked up his handpiece and went to work immediately. For decades, the idea of getting a dental injection has terrified patients. Quite frankly, the uncertainty, unpredictability and long onset time of local anesthetic equally terrifies the practitioner.

The Anutra Local Anesthetic Delivery System redefines local anesthetic delivery, according to the company. It radi-cally enhances patient experience and comfort while transforming a practitio-ner’s efficiency, profitability — as well as the profundity and predictability of local anesthetic.

Age-old science made simple

Buffering is an age-old science that has been used in the medical community for decades. Buffering is simply taking something acidic, mixing it with something more basic to neutralize the acid. Why does this matter in dentistry? Lidocaine with epinephrine has a low pH, meaning it is extremely acid-ic. In fact, its pH is close to that of citric acid, which is found in limes and lemons. Could you imagine injecting lemon juice into someone’s mouth? We simply would not do that.

Much of the burning and stinging sensation comes from the fact that local anesthetic is very acidic. The Anutra Local Anesthetic Delivery System makes buffering simple. By loading an Anutra Cassette at the beginning of the week, clinicians can simply buffer anesthetic for every patient by twisting the knob on the Anutra Dispenser. It could not be easier.

Can also deliver powerful topical anesthetic effect prior to injection

What adds to the power of buffered anesthetic is a topical effect that is a result of a CO₂ microbubble that is formed when local anesthetic is mixed with sodium bicarbonate. Many practitioners report dropping a small amount on the mucosa prior to injecting for a very powerful topical anesthetic.

Not only is patient comfort increased with buffered anesthetic, a practitioner’s efficiency is dramatically optimized. Since buffered anesthetic is raised to physiologic pH, the anes-thetic crosses the nerve mem-brane more readily, meaning a patient can reach pulpal anes-thesia in as little as two min-utes, even with blocks.

Additionally, anywhere from 4,000–6,000 times the active molecules of anesthetic will cross the nerve membrane, making it more profound than normal lidocaine as well as increasing the predictability that a patient will get numb the first time, even on those hard-to-numb patients.

Disposable, multidose, one-handed

Not only does the Anutra Local Anesthetic Delivery System provide a simple platform for you to buffer in your prac-tice, it also introduces the first-known, FDA-approved, multidose, one-handed aspiration syringe that is fully dispos-able.

So what does that mean? It means that you can hold up to 6 mL of anesthetic in one single syringe. There is no need to reload cartridges; one syringe can hold the equivalent of at least three tradi-tional 1.8 mL dental cartridges.

According to the company, with its affordable cost, revolutionary new syringe, simple dosing system and long shelf-life, the Anutra Local Anesthetic is a no-brainer for every dental practice.
To simplify the daily work of clinical staff in terms of the mixing, dosing and dispensing of single- and two-component materials, the Swiss company Sulzer Mixpac develops optimally coordinated systems solutions: dispenser, cartridge, mixing cannula and application nozzles, all from one source. Quality and the patient’s safety are prime concerns. Martina Strasser, head of sales/health care at Sulzer Mixpac, summarizes the products as follows: “Our MIXPAC™ products are convincing because of their ergonomic and user-oriented design, their safe application, and precise as well as reproducible results.” As leading manufacturer of primary packaging systems, Sulzer Mixpac manufactures all components under strict cleanroom conditions.

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**INDUSTRY NEWS**

A new generation of core buildup material

Visalys® Core, the new product from Kettenbach LP (www.kettenbachusa.com), represents the next generation of core buildup materials, according to the company. The most recent addition to the Visalys family is a dual-curing core buildup material with unique ActiveConnect Technology (ACT) to ensure a reliable bond with all common adhesives — without an additional activator. The product was unveiled at the 2015 International Dental Show (IDS) in Germany.

Visalys Core is the first core buildup material from Kettenbach. The fluoride-containing, dual-curing composite was developed for the fabrication of radiopaque core buildups and core fillings and for cementing root posts.

According to the company, the ActiveConnect Technology, unique in the market, enables the material to bond actively with all common light-curing and dual-curing, single-step and multistep adhesives, without an additional activator. The advantage for users is that it enables them to use the bonding agent they are used to — whether it is light-curing or dual-curing — or a single- or multi-bottle system.

**Firm foundation: Stable and precise**

According to the company, the technology simply provides a firm foundation — stable and precise. The company reports that Visalys Core ensures easy and reliable handling with “excellent positional stability.” At the same time, it exhibits good flowability and low extrusion force. The compressive strength results in a stable monoblock and a secure bond.

Optional light-curing allows the procedure to be continued immediately. Reliable self-curing provides for dependable strength even on the cavity floor and in root canals. Excellent polishing characteristics ensure precise preparation, even without light-curing, the smear layer is minimal. The product is also free of Bisphenol A and its derivatives.

Visalys Core is available in dentin and white shades in a 5 ml double syringe and in a 25 ml cartridge. For detailed information about Visalys Core, visit the Kettenbach website at www.kettenbachusa.com.

About Kettenbach

Kettenbach (Huntington Beach, Calif.) is the exclusive U.S. distributor for Kettenbach GmbH & Co KG (Eschenburg, Germany). Founded by August Kettenbach in 1944, Kettenbach GmbH was created for the development and marketing of medical and dental products.

Today, the company is one of the leading international producers of dental impression materials and is also known in other surgical areas of medicine. Brands include Panasil VPS Impression Material, Identium VSXE Impression Material, Futar Bite Material, Silginat Alternative Alginate, Visalys Temp Material, Mucopren Resilient Liner and Visalys Veneers.

For more information about Kettenbach LP products, you can call (877) 532-2123 or visit www.kettenbachusa.com.

(Source: Kettenbach)
New intraoral camera sleeves offer custom fit at economical price

By Flow Dental Staff

Flow Dental, exhibiting in booth No. 660, is introducing exciting new products at this year’s CDA Presents in Anaheim.

The new Perfect Fit is the first fully adjustable intraoral camera sleeve to hit the market. Perfect Fit sleeves enable you to create a custom-fit sleeve for virtually any size camera. It’s fast, easy to use and economically priced, according to the company.

You can easily adjust horizontal and vertical tension to achieve a custom-like fit — so your sleeve will stay on every time, and the area above your lens will always be wrinkle free. Nothing fits your camera like new Perfect Fit from Flow Dental, according to the company.

Flow Dental representatives report that the Perfect Fit sleeves are 30 percent less expensive than other custom-fit camera sleeves.

Flow also is introducing All Bite, a universal bitewing holder for all size sensors. Not only does All Bite flex to hold all sizes, but its unique snap-on/snap-off bite block enables you to switch on-the-fly in seconds from a horizontal to a vertical bitewing — at chairside. All Bites are economically priced, too, according to the company.

Finally, Flow also will have its new Deluxe Cushies at CDA Presents. Apply your Deluxe Cushie to the long or short side of your sensor, PSP plate or film to create a soft, cushiony surface that your patients will appreciate. The unique key-way design makes positioning Deluxe Cushie quick and easy too, according to the company.

Flow Dental President William Winters said, “We understand imaging from a workflow and case-management perspective. Our goal is to enhance yet simplify any aspect of the process that we can, by whatever degree we can. We make products that are easy to use, easy to adapt — and that are a benefit to both the patients and the practitioners.”
Wireless and unconnected

Cut the cord without sacrificing any light

Cordless, compact LED DayLite WireLess can work with all of your loupes and frames

Designs for Vision’s new LED DayLite® WireLess™ not only frees you from being tethered to a battery pack, but the simple modular design also uncouples the “WireLess” light from a specific frame or single pair of loupes. Prior technology married a cordless light to one pair of loupes via a cumbersome integration of the batteries and electronics into the frame. The compact design of the DayLite WireLess is independent of any frame/loupes.

The patent-pending design of the LED DayLite WireLess is a new concept: a self-contained headlight that can integrate with various platforms, including your existing loupes, safety eyewear, lightweight headbands and future loupes or eyewear purchases.

The LED DayLite WireLess is not limited to just one pair of loupes or built into a single, specific eyeglass frame. The LED DayLite WireLess can be transferred from one platform to another, expanding your “WireLess” illumination possibilities across all of your eyewear options.

Half the weight of integrated cordless systems

The LED DayLite WireLess weighs only 1.4 ounces and, when attached to a pair of loupes, the combined weight is half the weight of integrated cordless lights/loupes. The LED DayLite WireLess produces more than 40,000 lux at high intensity and 27,000 lux at medium intensity. The spot size of the LED DayLite WireLess will illuminate the entire oral cavity. The function of the headlight is controlled via capacitive touch.

The LED DayLite WireLess is powered by a compact, rechargeable lithium-ion power pod. It comes complete with three power pods. The charging cradle enables you to independently recharge two power pods at the same time and clearly displays the progress of each charge cycle. Designs for Vision has been showing the Micro Series together for the first time this winter. The Micro 3.5EF Scopes use a revolutionary optical design that reduces the size of the prismatic telescope by 50 percent and reduces the weight by 40 percent, while providing an expanded-field full-oral-cavity view at 3.5x magnification.

The new Micro 2.5x Scopes are 23 percent smaller and 36 percent lighter than traditional 2.5x telescopes, and enlarge the entire oral cavity at true 2.5x magnification. The Micro Series is fully customized and uses the proprietary lens coatings for the greatest light transmission.

You can “See the Visible Difference™” by visiting the Designs for Vision booths, No. 1204 or No. 846, at CDA Presents the Art and Science of Dentistry in Anaheim, May 12–14. Or arrange a visit in your office by calling (800) 345-4009 or emailing info@dvimail.com.

(Notes: Designs For Vision)

‘The company invests in demanding and innovative safety procedures.’

The company invests in demanding and innovative safety procedures. “Users of our components do not only avoid unnecessary risks, they can also trust the consistent and reliable quality of compatible components and our experience in dental medicine,” Strasser said.

Original MIXPAC products can be identified by their logo, the specific retaining rings of the mixing tip, and the six typical colors. The Clinicians Report Foundation® and the Dental Advisor awarded Sulzer’s MIXPAC T-Mixer in the categories “Best Product” and “Best Value” for the first and third time, respectively.

The experts emphasized the significant saving of dental material while ensuring consistent mixing quality and compatibility with the existing MIXPAC-products.

(Notes: Sulzer MIXPAC)
Seven simple steps to implant success

Approaching a straightforward, single-unit implant case involving a tooth that has fractured or otherwise failed

By Paresh B. Patel, DDS

Implant therapy is an accessible mode of treatment that can be executed with a high degree of predictability by following some simple steps and techniques. A common source of straightforward, single-unit implant cases are patients who present with a tooth that has fractured or otherwise failed after receiving endodontic treatment. The treatment protocol to place and restore an implant in these situations is quite approachable and can be broken down into seven simple steps.

Step 1: The tooth should be resected*—moved—atraumatically, taking care to preserve as much of the buccal plate and surrounding bone as possible. After using a very fine diamond bur to trace around the root, periosteomies can be situated between the root and the bone to aid atraumatic removal.

Step 2: To simplify the eventual placement of the implant, it is important to preserve the bone by grafting the socket. Any granulation material should be carefully removed from the socket. The site should be irrigated and the walls scraped to initiate some bleeding. The socket is then filled up to the crest of bone with grafting material and sutured.

Step 3: The extraction socket is allowed to heal for approximately four months. During this time, the grafting material helps maintain the bone volume that is essential to a simple, predictable implant placement procedure and an esthetic, functional outcome.

Step 4: After the socket site has healed, the patient returns for placement of the implant. The site can be evaluated intraorally, radiographically and with a periodontal probe to verify sufficient bone volume for implantation and determine the diameter of the implant.

The flapless implant placement is an excellent, minimally invasive option for many of these cases. To begin the flapless surgical procedure, a tissue punch is used to create an opening for the osteotomy, noting that the implant should be situated 1.5 mm from the adjacent teeth, with 1.5–2.0 mm of bone on the facial aspect.

The osteotomy is created following the manufacturer-recommended sequence of surgical drills for the diame ter and length of implant being placed, with proper angulation and positioning confirmed radiographically during the procedure.

It is advantageous to place an implant with a pronounced thread design like the Hahn™ Tapered Implant System, which helps the clinician maintain directional control during insertion and establish high primary stability. A tapered implant design is also beneficial, as the tooth-root-like shape is easier to situate within the available bone.

The implant is first threaded into the osteotomy site using a handpiece driver and then a torque wrench so stabil ity of the implant can be determined.

Step 5: After verifying adequate primary stability, a healing abutment, rather than a cover screw, can be delivered at the time of implant placement. Delivering a healing abutment is advantageous as it helps contour the soft tissue to form a healthy, esthetic transmucosal emergence as the implant integrates and avoids the need for a second surgical procedure to uncover the cover screw.

Step 6: Approximately three months after implant placement, the patient returns for the final impression. After removing the healing abutment, an impression coping is connected to the implant and a closed-tray impression is taken using a vinyl polysiloxane material, such as Capture® (Glidewell Direct, Irvine, Calif.). The dental lab fabricates the definitive restoration based on the final impression.

Step 7: BruxZir® screw-retained crowns are esthetic, predictable, extremely durable, easily retrievable and avoid the task of cementing the restoration over an abutment. After removing the healing abutment, the screw-retained crown is seated, the prosthetic screw is tightened, and the access hole is filled with Teflon tape and sealed using composite.

Conclusion

With so many patients requiring single-unit extractions presenting for treatment, the properly trained general dentist has every reason to provide implant treatment to such patients directly. This expands the services and quality of care offered by the practice and gives the patient a better long-term solution to the problem of a missing tooth.

By Paresh B. Patel, DDS

Dr. Paresh Patel is a graduate of the University of North Carolina at Chapel Hill School of Dentistry and the Medical College of Georgia/AAD MaxiCourse. He is cofounder of the American Academy of Small Diameter Implants and a clinical instructor at the Reconstructive Dentistry Institute. Patel has placed more than 2,500 small-diameter implants and has worked as a lecturer and clinical consultant on mini implants for various companies. He belongs to numerous dental organizations, including the ADA, North Carolina Dental Society and AACD. He also is a member and president of the Iredell County Dental Society in Mooresville, N.C. Patel can be contacted at pareshpateldds2@gmail.com or www.dentalminiimplant.com.

(CDA Booth No. 1470)

‘The properly trained general dentist has every reason to provide implant treatment to such patients directly’
The industry’s first book dedicated to combined restorations and removable prostheses was released in October. Its title: “Techno-clinical aspects of fixed removable prosthesis.”

The book helps illustrate how the combined prosthesis now offers the edentulous or partially edentulous patient comfort that was unthinkable a few years ago. The combined prosthesis is a valuable solution but only if done by experts in the field of clinical dentistry working with dental technicians with in-depth knowledge of clinical anatomy, occlusion, gnathology and dental materials.

The idea for the book came from a desire to provide guidelines to all those who want to learn this branch of dentistry and who want to deepen their knowledge of techniques and protocols. To create the book, a team of dentists and dental technicians skilled in multiple solutions and techniques were invited to contribute. The result is a resource previously unavailable in a single text.

The book involved 27 authors and 23 cases. The introduction was written by three professors from three Italian universities: Siena, Milan and Turin. The book is intended to be read by an international audience; it has been written in Italian, English and Spanish.

The authors are Prof. Andrea Borracchini, University of Siena; Dr. Alessio Casucci and Prof. Gianfranco Gassino, University of Turin; Dr. Massimo Fasi, University of Milan; Dr. Luca Ortensi, Dr. Caterina Perra, Dr. Ugo Torquati Gritti, Dr. Daniele Vrespa, Dr. Gabriele Rosano, Dr. Riccardo Stefani, Dr. Gerardo Schiatti, Dr. Mauro Colombo, Dr. Umberto Ferone, Dr. Eugenio Guidi, Dr. Marco Montanari, Dr. Massimo Pedrinazzi, Dr. Alessandro Iorio Siciliano, D.T. Luca Buggiero, D.T. Giuliano Bonato, D.T. Armando Buongiovanni, D.T. Carlo Borromeo, D.T. Vittorio Cazzulo, D.T. Salvatore Chimenz, D.T. Rodolfo Colognesi, D.T. Davide Nadalini, D.T. Marco Ortensi and D.T. Giancarlo Riva.

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(Source: Rhein83)
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TAUB Products innovative as ever

TAUB Products has been a pioneer of industry materials for the dental lab and dental practice. The company started as George Taub Dental Ceramics Laboratories in the 1930s, specializing in the design and creation of bridgework and porcelain crowns. Today, according to the company, TAUB Products is a hybrid company cross-serving two dental markets and understanding the needs of communication and association between the dental laboratory and dental practice during treatment planning. Some recent highlights in innovation:

2014
• FUSION-Zr™ cements offer self-adhesive properties for permanent cementation of all-ceramic restorations, zirconia, lithium disilicate, CAD/CAM materials, veneers, crown and bridge, inlays/onlays, FFM, metal, titanium and fiber posts. Bonding agents can be used but are not required. FUSION-Zr cements offer self-adhesive strength to zirconia and other restorative substrates. According to the company, practitioners will enjoy highly favorable handling characteristics and color stability, while producing a remarkably fast and easy clean-up. Trusted by renowned clinicians, FUSION-Zr cements are implemented into lectures and educational curriculums.

2015
• ZERO-G is a dual-cure implant cement and is recommended for intermediate to long-term cementation of implant-retained restorations. This cement can also be used for traditional crown and bridge restorations. The company reports that light-curing for 20 seconds enables complete margin curing. Self-cure working time is 1 minute and 45 seconds. Set time is 2 minutes and 30 seconds.

According to the company, ZERO-G provides excellent radio-opacity for good visualization after cementation to document complete clean-up, as well as diagnostic examination upon follow-up. ZERO-G implant cement is retentive and easily allows removal of excess cement, where it may occur. Unique color has highly visible contrast to gingival tissue to create easy visualization. That also makes it easy for clinicians to precisely see and detect excess cement, according to the company.

• Impulse Crown and Bridge Remover is made of medical grade stainless steel and is available in satin or polished finishes. The Impulse comes with two quickly interchangeable tips for the removal of crowns, provisional and bridges/splints. The Impulse and tips can be sterilized separately by any method.

“The Impulse is very easy to use,” said Ed Matthews, TAUB’s vice-president of sales. “It was redesigned with patient comfort in mind. The crown can be removed by breaking the seal of the cement as opposed to pulling with a hard force, so patients have a much easier experience. The procedure is painless, even without local anesthesia. In most cases, metal-ceramic crowns and bridges can be removed with no damage.”

2016
• Ca-Lok Flowable Adhesive Calcium Base/Liner is a light-cured, calcium-filled resin with adhesive properties to dentin and seamless compatibility to other restorative materials. Ca-Lok is radiopaque and releases fluoride. It is used as a protective liner and can be placed under restorative materials and cements for all deep cavity preparations. With its flowable viscosity and hydrophilic/hydrophobic properties, precise placement and control is achieved once light cured.

According to the company, Ca-Lok creates adhesion that seals out micro-leakage and eliminates sensitivity. Larry Taub, one of the original members of the TAUB team, said, “I am pleased to see the advancements made in the use of resin-modified calcium adhesive base/liners. TAUB is still at the forefront of this important dental technology.”

Liquid Magic™ is a light-cured, resin barrier for implant and cosmetic dentistry. According to the company, Liquid Magic is recommended for filling and protecting abutments as an alternative to having to use multiple products for the same result. The company reports that Liquid Magic can be used to protect the screw head from cements and composite restoratives — and to seal the screw access hole on abutments and screw-retained restorations. It also can be used on screw threads and internal implant components to provide temporary protection during recall and debriding. When cured, Liquid Magic is a flexible, soft material allowing for easy removal when desired, often in a single piece, making clean-up fast and complete, according to the company.

Tomorrow
Taub Products reports that it diligently continues to work on new innovative products, and it encourages practitioners to watch for new products coming soon.

(Source: TAUB Products)
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NuSmile celebrates 25 years with 20 percent discount

Pediatric restorative dentistry company offers discount at AAPD 2016 meeting

By NuSmile Ltd. Staff

NuSmile Ltd. is celebrating its 25th anniversary by offering a “25th Anniversary 20 Percent Discount” to the customers who have made its quarter-century of pediatric restorative dentistry leadership possible. Any U.S. dental practice placing an order with the company at the upcoming American Academy of Pediatric Dentistry (AAPD) 2016 Annual Session in San Antonio, Texas, will receive the discount. “We’re the only company in the world that can say our crowns have been selected for use in more than 4 million aesthetic pediatric-crown restorations,” said NuSmile founder and CEO Diane Johnson Krueger. “We take great pride in being able to say that, but we wouldn’t be able to if it weren’t for many thousands of talented, caring and loyal customers.”

Krueger credits NuSmile’s customers for more than choosing NuSmile products—she credits them for being the inspiration behind the unprecedented quality and innovation of those products, according to the company. “All of our products were developed and refined based not only on our in-depth understanding of dental materials science, but on the insights we’ve received from the dentists who use our products every day,” she said.

For example, when exploring entry into the market for pediatric zirconia crowns, Krueger and other NuSmile team members conducted an exhaustive investigation of published and internal research while also asking pediatric dentists what they most wanted in a zirconia crown. Many dentists said they were concerned about the fact that saliva and blood contamination occur 100 percent of the time when the zirconia crown is placed on the tooth during the trial fit stage. These informed dentists realized that the phosphates in saliva strongly adhere to zirconia, significantly impairing cement bond strength and risking cementation failure.

NuSmile’s unique solution: The NuSmile ZR zirconia pediatric crown system, featuring reusable pink Try-In crowns that are identical in size and shape to the actual zirconia crowns. Try-In crowns eliminate the need to place the zirconia crowns in the mouth prior to cementation.

“The first time our NuSmile ZR crown enters the patient’s mouth is also the last time, which makes blood and saliva contamination impossible,” Krueger said. “Prior to our introduction of this system, the clinician’s only option was to use the actual zirconia crown for trial fitting, which adds time-consuming cleaning steps or risks cementation failure. Listening to our customers’ concerns was critical to our ability to solve this dilemma with our unique Try-In crown system.”

Dental practices can take advantage of NuSmile’s 20 percent discount by placing an order at the company’s booth (No. 201) at the AAPD 2016 Annual Session, May 27-29, in San Antonio, Texas. Also, you can stop by the booth at 4 p.m., Saturday, May 28, for an event commemorating the 25th anniversary.
Single-bottle adhesive self-cures with no light activation

Futurabond M+ needs only one coat and 35 seconds

By VOCO Staff

VOCO recently introduced Futurabond M+, a universal single-bottle adhesive. Futurabond M+ versatility enables it to be used in self-, selective- or total-etch mode without any additional primers on virtually all substrates. Futurabond M+ achieves total-etch bond strength levels with all light-, self- and dual-cure resin-based composites, cements and core buildup materials. With a dual-cured activator, Futurabond M+ will self-cure without any light activation, which, according to the company, offers a big advantage for endodontic applications such as post cementation where it avoids the pooling effect, a problem with light-cured adhesives. Futurabond M+ also adheres well to metal, zirconia and ceramic, making extra primers unnecessary. Futurabond M+ needs only one coat and takes 35 seconds from start to finish. Its low films thickness of 9 microns makes bonding margins invisible (i.e. no “halo” effect) and prevents pooling problems. Additionally the material does not need to be refrigerated. Further Futurabond M+ benefits include its indication as a desensitizer for use under amalgam restorations or on hypersensitive tooth necks, as a protective varnish for glass ionomers as well as an intraoral repair of ceramic restorations. For more information on Futurabond M+ you can visit the VOCO website at www.voco.com.

Photo/Provided by VOCO

Calcicur: A ready-to-use radiopaque water-based calcium hydroxide paste

High pH for anti-microbial effect, promotion of secondary dentin formation

By VOCO Staff

VOCO recently introduced Calcicur, a radiopaque water-based calcium hydroxide paste. According to the company, Calcicur is an ideal material for direct pulp capping and after pulpotomies as well as indirect pulp capping in cases of deep decay. Containing 45 percent calcium hydroxide, Calcicur provides high pH values (12.5) for an anti-microbial effect and the promotion of secondary dentin formation. Calcicur’s high pH values also allow for the indication of temporary root canal fillings, the disinfection of root canals and the lining of cavities to prevent exposure to acid media when using cements. Calcicur’s endo tip makes root canal treatment easy, minimizing time and effort. Calcicur can be applied immediately and underneath any lining or restorative material and is available in a ready-to-use 2.5g syringe that prevents moisture loss.

Photo/Provided by VOCO

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Testing toothpastes, toothbrushes

Improving dental hygiene products through virtual brushing

Designing toothpastes and toothbrushes is a time-consuming process involving the production and testing of numerous samples. Using a new type of simulation, various parameters such as bristle shape and abrasive particle size can be modified with just a click. This enables manufacturers to improve the quality of new dental care products and bring them to market more quickly.

When we wake up in the morning, there is a fur-like coating on our teeth: this is a biological film that forms overnight. Over time, this can lead to the development of caries—which is why it is critical that we remove this “rug” using a toothbrush.

There is a large selection of dental hygiene products on the market, including brushes whose bristles are rounded, pointed, hard, and soft. There are also brushes with bristles of varying lengths. Until now, to determine which ones clean the most thoroughly while doing as little damage to the tooth enamel as possible, manufacturers have had to conduct experiments. This was also the case when selecting the right abrasive particles to be used in toothpastes.

Various toothpaste formulations had to be mixed and then tested on artificial tooth enamel models—a laborious task. Another drawback to this approach is that the brush, paste, and enamel can be analyzed only as a complete system, which means that manufacturers have a difficult time determining which effects observed in these experiments are derived from which of the various parameters.

Help has arrived in the form of a new type of simulation developed by researchers at the Fraunhofer Institute for Mechanics of Materials IWM in Freiburg, Germany. “With our procedure, manufacturers of dental hygiene products can determine the cleaning effectiveness of each individual parameter in a fast, economical and reliable manner,” says IWM scientist Dr. Christian Nutto. “Unlike in real-world experiments, the individual parameters in the simulation can be easily modified—be it the size, shape, and quantity of abrasive particles in a toothpaste, or the material from which they are made, or the shape and elasticity of the bristles.”

Simulated tooth brushing

Researchers can increase the scope of the experiments far beyond what is possible in real-world testing, and that makes a noticeable difference in the quality of the products. What effects do the shape and stiffness of the bristles have when brushing? How do the different abrasives or toothpaste viscosity affect the enamel, and how do they affect their intended target, the biofilm on the teeth? Simulation testing can deliver reliable answers to questions such as these, and it does so long before the manufacturer ever mixes the toothpaste.

Nutto relies on SimPARTIX® simulation software developed at the IWM, which uses the Smoothed Particle Hydrodynamics (SPH) particle simulation method. “We specify characteristics for the abrasive particles such as density, shape and fill factor,” he says. Even parameters for the tooth enamel are included. The virtual toothbrush bristle is then rubbed over the tooth enamel, with the simulation providing data on how the scrubbing particles interact with the elastic bristle. It also calculates cleaning effectiveness, as well as the aggressiveness of the abrasives against the tooth enamel. Here, the team from the Powder Technology, Fluid Dynamics group can vary the speed at which the bristles pass across the enamel as well as their pressing force. The SimPARTIX team, together with the Fraunhofer Institute for Algorithms and Scientific Computing SCAI, designed an additional software tool to integrate the particle simulation into standardized simulation programs.

But do the findings correspond to reality? The comparative experiments were conducted by Dr. Andreas Kieseow and his staff at the Fraunhofer Institute for Micro-structure of Materials and Systems IMWS in Halle as well as at the MikroTribologie Centrum µTC in Karlsruhe. In the tests, a brush bristle was placed in a fastener and brushed at a constant speed across an artificial tooth enamel model onto which toothpaste had been applied. It was concluded that the simulation can precisely predict how the toothpaste and bristles will affect the tooth enamel. At a later stage, it will also be able to predict the effect of the toothpaste suspension on the enamel.

Some 2,000-plus attendees are expected at the American Dental Hygienists’ Association Center for Lifelong Learning (CCL) at the 93rd Annual Session. The event will be from June 8–14 at the David Lawrence Convention Center in Pittsburgh. The program will feature a diverse offering of continuing education programs within six different tracks.

Follow a track, or plot your own

Attendees can choose from 30 C.E. programs and elect to follow a specific track, or diversify their selections based on interest and educational requirements.

New this year, the ADHA’s Institute for Oral Health is hosting the In Motion: 5K Run/Walk/Fun. Taking place on Thursday, June 9, at 8 a.m. along Pittsburgh’s riverfront, the event will enable attendees to participate in a unique fundraising activity to support the institute’s commitment to empowering, supporting and developing education and research opportunities for dental hygiene professionals.

“ADHA’s CCL at the 93rd Annual Session is a one-of-a-kind, all-encompassing event for dental hygiene educators and students,” said ADHA President Jill Rhethman, RDH, BA. “Each year, this signature event offers outstanding opportunities that include excellent educational content, fun networking events and a rewarding community outreach project.

With the introduction of the In Motion: 5K Run-Walk-Fun, we’re engaging dental hygienists to participate in an exciting event that supports overall health and wellness. In addition, this event promotes opportunities for dental hygiene research and education by benefiting the ADHA’s Institute for Oral Health.”

This year’s CCL again features a community service day on June 8, plenary sessions slated for June 9 and 11, and an two-day (June 10–11) exhibition hall showing more than 125 companies involved in oral health and dental hygiene.

“CCL is an event that offers a unique opportunity in the oral health and dental hygiene community,” said ADHA CEO Ann Battrell, MSDH. “All of our attendees benefit from not just the education but the experience, the networking, the engagement. They have the opportunity to interact with their peers, corporate sponsors and mentors in the field to build their knowledge in oral health and create new career opportunities.”

To learn more about the ADHA’s CCL at the 93rd Annual Session, you can visit www.adha.org/annual-session.

(Source: ADHA)
Barrier protection critical with any dental-care glove

While caring for their patients, dental and health care professionals are constantly exposed to bodily fluids that may carry viruses and other infectious agents. It is therefore critical that the gloves these professionals use provide the best possible barrier protection.

Natural rubber latex is effective

Many types of gloves are available today, but it is important to know that not all gloves have the same barrier capability, depending on the type of material used.

For example, natural rubber latex gloves have long been acknowledged for their very effective barrier properties, while non-latex gloves, such as vinyl (polyvinyl chloride), have inferior barrier capability as has been shown by numerous studies.

Other synthetic gloves, such as nitrile and polysyndiene, perform much better than vinyl but are more costly, especially polysyndiene gloves. Using gloves with inferior barrier capability could expose both the patient and user to harmful infections.

Quality, safety top priorities

Malaysia is the world’s largest medical gloves exporter (latex and nitrile). Both quality and users’ safety are of top priority to the nation’s glove industry. To this end, a quality certification program (the Standard Malaysian Gloves, or the SMG) has currently been formulated for latex examination gloves.

All SMG-certified gloves must comply with stringent technical specifications to ensure the gloves are high in barrier effectiveness, low in protein and low in allergy risks, in addition to having excellent comfort, fit and durability – qualities that manufacturers of many synthetic gloves are trying to replicate.

Natural, sustainable resource

Latex gloves are green products, derived from a natural and sustainable resource, and are environmentally friendly. (You can learn more online by visiting www.smg-gloves.com or www.latexglove.info.)

The use of low-protein, powder-free gloves has been demonstrated by many independent hospital studies to markedly reduce the incidence of latex sensitization and allergic reactions in workplaces.

More importantly, latex allergic individuals donning non-latex gloves can now work alongside their coworkers wearing the improved low-protein gloves without any heightened allergy concern. However, for latex-allergic individuals, it is still important they use appropriate non-latex gloves, such as quality nitrile and polysyndiene gloves, that provide them with effective barrier protection.

Extensive array of brand, prices

Selecting the right gloves should be an educated consideration to enhance safety of both patients and users.

For decades, gloves made in Malaysia have been synonymous with quality and excellence, and they are widely available in an extensive array of brands, features and prices.

They can be sourced either factory direct (www.mrepc.com/trade and click “medical devices”) or from established dental product distributors in the United States.

(Source: Malaysian Rubber Export Promotion Council)
Protect your game face: A mouthguard PSA

For this year’s National Facial Protection Month (April), five of the nation’s top dental associations joined forces to remind athletes and recreational sports players to wear mouthguards to protect their teeth. Mouthguards are an essential piece of athletic gear and can help prevent serious, painful facial injuries that affect the mouth and teeth.

The dental experts at the Academy for Sports Dentistry (ASD), American Academy of Pediatric Dentistry (AAPD), American Association of Oral and Maxillofacial Surgeons (AAOMS), American Association of Orthodontists (AAO), and the American Dental Association (ADA) urge parents, caregivers, athletes and coaches to be proactive about staying safe by using a mouthguard.

The five associations pooled together the following mouthguard-related statistics to keep in mind as spring sports season begins:

- 3 – Types of mouthguards: Custom-fitted mouthguards are made by your dentist for you personally. Stock mouthguards come pre-formed and may offer a bulky fit. Boil and bite mouthguards are softened in boiling water and then inserted and allowed to adapt to the shape of your mouth.
- 5 – The number of top dental associations that encourage athletes and recreational sports players to wear mouthguards to keep their teeth and smiles intact.
- 7 to 11 – The ages during which children are most vulnerable to sports-related mouth injuries.
- 60 – The number of times that athletes are more likely to suffer harm to the teeth if they’re not wearing a mouthguard.
- All – How many sports during which you should wear a mouthguard. Collision and contact sports may be high-risk for the mouth, but you can still experience a dental injury from other sports such as gymnastics or skating.

(Source: American Association of Oral and Maxillofacial Surgeons)

New mouthguard has athletes smiling

Keystone Industries, the U.S-based company that manufacturers some of the world’s top mouthguard products, has launched the latest product in its Pro-Form Mouthguard line — the PF2 mouthguard.

Unlike laminated mouthguard products that require a dentist to custom fit to the patient, the PF2 mouthguard is a do-it-yourself guard that provides an accurate custom fit without any need to take impressions of the teeth.

With the elimination of dentist appointments and impressions, the price of this guard is significantly lower than custom-fit mouthguards while still providing high-impact protection, according to the company. The PF2’s unique design also enables it to be re-fit by the user multiple times. “Being a leader in this field means we need to set the bar high for new products and innovation,” said Michael Prozzillo, vice president of sales for Keystone. “The PF2 will change the way athletes buy mouthguards, but also how the dentist sells them.” The PF2 mouthguard is available in either black or white. The company reports that there will be bulk purchasing available in the near future, which will include a display piece and literature on the product suited for dental offices.

Multiple color options will also be available soon, similar to the Pro-Form line of color options, according to the company.

Custom fit in less than a minute

“You won’t be able to get ahold of another mouthguard that can be custom fit in under a minute and provide the same beneficial features,” said Derek Keene, Keystone’s vice president of marketing and product development. “We’re excited to watch PF2 take off and provide significant value to our customers and athletes across the country.”

To keep up to date on the PF2 and Keystone, go to www.keystoneindustries.com. You also can follow the company on all the major social media platforms.

(Source: Keystone Industries)
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