Results of new survey revealed on occasion of National Smile Month

By DTI

LONDON, UK: Brits may not like to show their smiles very often, according to research, but when it comes to ranking them, most consider Londoners, Yorkers and Liverpudlians to have the nicest smiles. All three cities scored highest in a recent poll commissioned by the Oral Health Foundation as part of National Smile Month.

The foundation asked more than 2,000 Brits where they thought the best smiles in Britain are, out of 45 of the country’s most populous urban areas.

While the capital and the two northern cities came out top, smiles in Salford, Wolverhampton and Lichfield were rated the lowest. Overall, the North of England scored significantly higher in the survey with cities like Manchester, Leeds and Newcastle all ending up in the top 10. However, southern cities like Bath, Bristol and Cambridge also came out high on the list.

“London may have a reputation for being a place that is very short on smiles but this couldn’t be further from the truth,” remarked Dr Nigel Carter, OBE, Chief Executive of the Oral Health Foundation.

Londoners have the best smiles in all of Britain, according to a new survey. Smiles in Salford, Wolverhampton and Lichfield were rated the lowest.

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“London may have a reputation for being a place that is very short on smiles but this couldn’t be further from the truth,” remarked Dr Nigel Carter, OBE, Chief Executive of the Oral Health Foundation.

Smile Month, the UK’s largest and longest running charity campaign initiative, celebrates this year for the 40th time and held until 16 June, it is aimed at increasing awareness of the importance of oral health by highlighting key messages, such as the benefits of regular toothbrushing and visiting a dentist in order to develop and maintain a healthy mouth.

Thousands of individuals and organisations take part in the initiative every year which takes place over the course of four weeks. This year’s campaign runs from 16 May to 16 June, the foundation has announced.

“A simple smile can make others around you feel at ease. It is highly contagious and plays such an important role in our lives that we should make our oral health top priority," Carter added. “It is an incredibly powerful tool and worth remembering it is one we all possess.”

Bristol researchers receive funding for super-chlorhexidine

By DTI

BRISTOL, UK: A University of Bristol spin-off has been awarded almost £1 million to bring a new technology to the market that could help to fight infections in the mouth and body.

An enhanced form of chlorhexidine, the substance, named Pertinax, is said to offer improved properties compared with those of the original substance.

Overall, Pertinax Pharma has received around £900,000 from southern England technology investor Mercia Fund Management, Innovate UK (through its Aid for Start-Ups scheme) and an unnamed private investor.

The company’s founder and chief scientific officer, Dr Michele Barbour, who is also a senior lecturer in biomaterials at the university’s School of Oral and Dental Sciences, said that the company will focus on the development of applications in dentistry first, where the technology already has relevance to a number of areas. Further uses in medicine will follow in time.

“We’re very excited about Pertinax’s potential,” she said.

A proven antimicrobial agent, chlorhexidine has been used in a wide range of products and treatment processes to prevent and treat bacterial infections. Since it is a new formulation of the substance, Pertinax is reported to possess the same antibacterial properties, but without some of the shortcomings of the original formulation, such as short efficacy time. Possible future applications are its use in cements to reduce the failure rates of dental fillings, for example.

“With a strong management team and innovative product, Pertinax Pharma has the potential to take its product from dental tool to a must-have anti-infective across a wide range of industries, from veterinary care, to cosmetics and even home appliances,” Investment Manager at Mercia Fund Management Dr Brijesh Roy commented.

Mercia Fund Management recently provided funding for another oral health care-related project by the University of Manchester.

Dr Michele Barbour
“C’mon lads…pull harder!”

Promising oral care tech launched by Queen Mary spin-off

By DTI

LONDON, UK: With the BioMin Technologies CEO Richard Whatley said A launch in high-street stores, however, is anticipated for the end of this year.

For users who do not want to brush with a fluoride toothpaste, a fluoride-free version is currently in development. Whatley further added that his company is in talks about licensing the product for use in other dental products, including polishing pastes, varnishes and restorative dental materials.

“Our aim is for the BioMin brand to become synonymous with the treatment of tooth sensitivity in the eyes of both the dental professional and the general public,” he said.

In 2013, the promising invention received the Armourers and Brasiers’ Venture Prize, an annual award given to breakthrough innovations in materials science from the UK. A breakthrough, it has been developed to adhere to tooth structure through a special polymer, from where it slowly dissolves ions that form fluorapatite, a mineral also found in shark teeth, over an 8–12-hour period to make teeth more resistant to acids from food.

According to BioMin founder and Queen Mary Director of Research Prof. Robert Hill, the process has been proven to be more effective than the use of fluorides in conventional toothpastes or professional prophylaxis materials, which are washed away and lose their effect more quickly.

In addition, the fluorapatite formed from brushing with BioMin toothpaste has shown to effectively reduce dentine hypersensitivity by sealing open dentinal tubules in in vitro studies at Queen Mary.

The team now intends to conduct long-term studies on the effects of the materials over the course of the next two years.

New Ortho magazine launched

By DTI

LONDON, UK/LEIPZIG, Germany: The orthodontic segment has grown significantly within the past 20 years owing to new technologies and products, as well as an increase in adult patients requesting orthodontic treatment. In response to this trend and to update dentists on the most significant developments in the field, Dental Tribune International (DTI) has added ortho—international magazine of orthodontics to its portfolio. The 2016 issue includes articles on clear aligners, vibration therapy and rapid maxillary expansion, as well as the latest product information and event previews.

The new high-gloss English-language magazine adopts an interdisciplinary approach involving orthodontics, oral surgery, periodontics and restorative dentistry, and aims to serve as an educational tool providing comprehensive knowledge and information on the newest technology that can profitably be integrated into treatment concepts. The publication, which will be distributed at all major international orthodontic congresses and exhibitions, presents the latest research and case studies, as well as trends in procedures and techniques.

In order to connect with orthodontic specialists, the DTI team is scheduled to attend a number of orthodontic events around the globe in 2016, including the 42nd Congress of the European Orthodontic Society, which will take place between 11 and 16 June in Stockholm in Sweden, and the annual congress of the British Orthodontic Society in Brighton, 23–25 September. DTI will be providing comprehensive live coverage of these and other events on its website. In addition, e-newsletters about these respective events will be sent to orthodontists worldwide.

From 2017, a new issue of the ortho magazine will be published twice a year with a print run of 94,000 copies. An e-paper edition of the magazine is available free of charge via the DTI online print archive.
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“The bejewelled bus of privilege has left”

An interview with dental consultant Chris Barrow, 7connections

Dentistry in the UK is going to change significantly in the next ten years, according to dental consultant Chris Barrow. At his presentation in Birmingham as part of the Dentistry Show’s Dental Business Theatre, he recently discussed the most important developments that UK dentists can likely expect in the not-so-distant future. Dental Tribune had the opportunity to speak with him in advance.

Dental Tribune: Mr Barrow, in your speech, you are going to address some of the trends that dentists in the UK will have to look out for in the years to come. What are the most important developments that will change how dentistry is run, in your opinion?

Chris Barrow: The first important issue in my opinion is that £5 per cent of NHS dentistry will be delivered by larger corporates. The mirror image of that is that the number of small practices will continue to decline. I am predicting that the number of small independently owned NHS and mixed practices will dramatically reduce, as we have seen in the pharmaceuticals and other health care industries.

We will also see procedures being increasingly delivered by auxiliary dental care professionals. This trend is going to be supported by the Department of Health, because of the economics involved in having lower-cost people provide more dental services. So I think those with a dental qualification are going to find that more and more of their historic scope of practice will be moved down the line to less-qualified people.

Where do you see the private sector heading?

At a conservative estimate, we can expect the private dentistry market to reach £5 billion before 2026. Once again, I am suggesting that maybe two-thirds of that market share will be delivered by larger organisations. This will include a number of retailers, supermarkets and other private health care groups. It will very be that patients buy dental care in department stores and supermarkets, as you can now in House of Fraser or Sainsbury’s.

However, that still leaves 40 per cent of that £5 billion market delivered by smaller private independently owned practices. That is still the same size as the NHS budget for the whole country today. A positive perspective. There will be still plenty of business around.

What will the most likely effects of this development be?

It is estimated that there are currently around 10,000 independently owned practices in the UK and my prediction is that this number will be reduced to 2,000, many of which will aggregate to smaller private micro-corporates. This is a trend that we are already seeing.

I also see the development of a new type of career pathway for the young dentist coming out of the foundation years, who will serve a significant amount of time as a salaried apprentice in a practice before receiving the opportunity to become an associate.

This apprentice dentist will spend four days a week in a practice seeing his or her own patients and one day a week shadowing the principal. The principal is his or her clinical director and mentor, teaching him or her dentistry and how to communicate with the patients. Many of my clients are already advertising apprenticeships.

Innovation in dentistry is increasingly technology driven. What will the impact of digital dentistry on dental practice be?

More and more of the manufacturing processes within dentistry are going to move into a digital environment, as is the supply of dentistry. Already, we have digital equipment that guides the placement of implants, for example.

Barrow presenting at the Dentistry Show in Birmingham last month.

Looking at the dental care professionals. This is a trend that we are already seeing. I also saw the development of a new type of career pathway for the young dentist coming out of the foundation years, who will serve a significant amount of time as a salaried apprentice in a practice before receiving the opportunity to become an associate.

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Innovation in dentistry is increasingly technology driven. What will the impact of digital dentistry on dental practice be?

More and more of the manufacturing processes within dentistry are going to move into a digital environment, as is the supply of dentistry. Already, we have digital equipment that guides the placement of implants, for example.

At the moment, that guidance is given from one machine to another. Scientifically, some may argue that is going to produce a consistently more accurate result.

Digital dentistry in the UK is slower on the uptake than the rest of the world. Unfortunately, one of the legacies of the McCarthyism that has been going on in the General Dental Council over the last few years is that the number of early adopters and innovators in dentistry has been drastically reduced.

There are dentists in the UK who are innovating in the digital segment, but they are few and far between. The regulatory cloud will pass and innovation and early adoption in the UK will regain its rhythm. I am working with practices that are innovating in the digital marketing segment and I predict massive growth resulting from that.

Considering all the predictions you have made, what are the most important future recommendations for anyone thinking about going into dentistry?

My first advice would be that in ten years there will be no such thing as a general dentist with a full dental qualification. The objective of having a dental qualification will be to become a specialist and if you do not want to become a specialist, you might as well qualify as an auxiliary dental care professional.

Secondly, and I am borrowing the words of Russell Brand (with acknowledgment to my friend Dr Colin Campbell), the bejewelled bus of privilege has left. Going into dentistry in order to finance your property portfolio, to buy a Porsche, to get rich in general is going to become less attractive to graduates. Dentists in the private sector are going to be paid well but not as well as in the first decade of the twenty-first century. Entering the private sector will be the privilege of the few.

My last recommendation is that you had better go digital—which I observe is easy for many young dentists because they are digital natives by demographic.

On a general note, I am optimistic about the future of independent private practice in the UK. I would say that if you are interested in delivering complex and skilful care in an excellent environment to an appreciative audience of patients, utilising the very latest digital technology, there is a fantastic opportunity in the next ten years. I am looking forward to being a part of that.

Thank you very much for the interview.
World-class orthodontic experts to gather at BOS 2016 congress in Brighton

By DTI

BIRMINGHAM, UK: Registration for the upcoming congress of the British Orthodontic Society (BOS) is now open, the organisation told Dental Tribune at the Dentistry Show in Birmingham. To be held at the Brighton Centre from 23 to 25 September, the event boasts an impressive line-up of speakers that includes world-famous orthodontists Prof. Lysle Johnston from the US and the UK’s own Prof. Kevin O’Brien from Manchester. Both will share their views on contemporary orthodontic trends with congress attendees.

There will also be papers by a number of international experts, like Dr Adrian Becker from Israel and Prof. Hans-Peter Bantleon from Austria, as well as the best the UK has to offer in the field, including Prof. Anthony Ireland, who will be delivering the prestigious Northcroft lecture.

Also presenting in Brighton will be Hertfordshire experimental psychologist Prof. Richard Wiseman.

The congress will also see the introduction of a number of hands-on sessions called “skill studios”, with limited attendance, which are a further development of the highly successful master classes.

According to the BOS, the programme for this year’s event has been developed with the entire dental team in mind “We will be developing the successful team lectures focusing on some non-clinical skills of benefit to the whole team,” chairperson of the BOS organising committee Richard Jones said. “This includes Dr Guido Sampermans, a highly innovative and inspirational orthodontist from Vienna who shares his vision of the patient journey and how the whole team can work together to deliver this."

More than 1,000 attendees are expected for the congress in September. As a first, it will be held alongside the Orthodontics Technicians Association’s annual conference. More information about the registration process and the extensive programme can be found at the organiser’s website (www.bos.org.uk).
By DTI

KUOPIO, Finland: Competent leadership from a motivated workforce is important, especially in the demanding health care sector. Aiming to understand the reasons for which some dentists in leading positions become frustrated and leave, whereas others thrive, researchers from the University of Eastern Finland have investigated factors that influence work satisfaction and associated career choices of dentist leaders.

In order to investigate factors associated with the likelihood of a dentist staying in or leaving a leadership position, the researchers utilised the method of empathy-based stories, through which the participants peered five years into their imaginary future. In their essays, Group 1 imagined a situation in which they were planning to quit their management role, while Group 2 imagined staying in their leadership position.

According to the researchers, participants in both groups regarded working as a leader as a positive challenge and a good opportunity to supplement or compensate for clinical work. Moreover, education seemed to be a very important factor in determining the intention to take up a leadership position.

Enervating and intent-to-leave factors named were stress, the excessive number of duties, the loneliness of the leadership position, the lack of support, and staff-related difficulties. In contrast, supporting factors that motivated individuals to seek and remain in leadership positions were enthusiasm for leadership supported by education, the possibility of achieving meaningful impact, a positive working community and the opportunity to promote oral health care as part of health care.

While both groups were hopeful that conditions would improve in their organisation in the future, participants generally expressed major concerns about ongoing changes, mainly the uncertainty and instability in the health care sector and the status of oral health care.

Based on the findings, the researchers concluded that it is essential to provide dentist leaders with necessary education, support and time for leadership in order to motivate individuals to seek and stay in demanding and challenging leadership positions and achieve personal satisfaction and fulfilment.

Of the 25 participants in the study, the mean experience as a dentist was 20 years and as a dentist leader was 2.5 years.

The study, titled “Factors associated with staying or leaving a dentist leader’s position—A qualitative study”, was published online on 16 April in the BMC Oral Health journal.
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At the beginning of 2016, Hans Geiselhöringer took over as president of global dental implants manufacturer Nobel Biocare. Dental Tribune recently had the opportunity to interview the dental technician by training, who has held a number of important management positions in the dental industry for the past 20 years, about this significant step in his career and the future development of Nobel Biocare, as well as the dental implant market in general.

**Dental Tribune: Mr Geiselhöringer, you have been leading Nobel Biocare’s research and product development for over six years now. What are the greatest challenges of becoming the president of one of the global leaders in dental implants?**

**Hans Geiselhöringer:** Leading a company with the heritage of Nobel Biocare is a great privilege that comes with great responsibility. Maintaining the pioneering spirit and momentum of innovation that the company has shown over the past 50 years is an immense challenge, but one that I embrace.

At the same time, we must ensure that we are not innovating for the sake of it, but for meaningful improvement in patient care and clinical predictability. Our solutions must solve the problems that dental professionals face every day. As a former Nobel Biocare customer myself, this is something I am extremely passionate about.

Nobel Biocare is an ambitious organisation. I am confident that, with the talented global team we have in place, challenges will soon become successes.

**At the end of 2014, Nobel Biocare was acquired by US science and technology conglomerate Danaher. How has this affected your business and customers?**

Our integration into Danaher’s dental group has gone well, and our business has already seen a great deal of positive change. Both parties are learning from one another, and this is driving continuous improvement in our processes.

I believe our customers have felt very little difference. They experience the same dedication to helping them treat more patients better that has been the foundation of our success for many years.

Looking ahead, our customers can only benefit from the improvements that will come from Nobel Biocare joining forces with the companies at KaVo Kerr Group. In combining our highly skilled global teams, we are creating a powerhouse of digital dentistry that will keep our customers at the forefront of patient care.

The dental implant market is a competitive one, with an increasing number of manufacturers in the value segment on the one hand and mergers of large companies, like Dentsply Sirona, on the other. What is the best strategy for survival in such a competitive environment, and how will the dental implant industry develop in the future?

When a customer buys a product from Nobel Biocare, we see it as the end of a transaction, but the start. This is something that sets us apart from many others in the industry. Our model has long been about partnership, offering customers not just superior products and solutions, but also the tools and training to help them to grow their business and reputation, all the time closely supported by our accomplished sales force.

Of course, from a product perspective, innovation is key, and I am excited about our innovation pipeline for the months and years to come. One of Nobel Biocare’s most important strengths is our ability to offer complete solutions that are designed and tested to ensure they work in harmony. This is essential for improving treatment outcomes just as an example, and a concern that is underestimated by many, unfortunately, is any mismatch between the abutment and implant. This can lead to extreme load and stress conditions that may cause the components or even the whole system to fail. Opting for low-cost products to restore even high-quality implants can lead to very expensive mistakes and, in the end, it is the patient who suffers.

In terms of the future, digital dentistry will play an ever-increasing role. That is why our digital solutions are developed to work in harmony, just like our implant components. Nobel Biocare’s integrated treatment workflow continues to evolve, allowing smarter diagnostics, better treatment planning and improved communication with all members of the treatment team, including laboratories, and patients as well.

According to the World Health Organization, about 30 per cent of people aged 65–74 worldwide have no natural teeth. Over the past decade, awareness regarding implant solutions has increased and the number of implants placed worldwide is expected to double over the next five years. In your opinion, what are the consequences for the dental industry and, more importantly, for dental professionals?

This, of course, represents a huge opportunity for the dental community to improve quality of life on a large scale. However, more patients must not mean lower standards of care. Patients deserve the best possible treatment, which I believe comes only from using evidence-based products and solutions.

However, these products are of little use in the wrong hands. That is why we are further developing our global training and educational offering. We want to help ensure that those new to implantology and those who wish to develop their skills for treating cases that are more complex have both the products to provide optimal treatment for these patients and the clinical expertise to do so safely.

Digital technologies have gained increasing importance in today’s dental market. How has this development changed the way dentistry is performed in dental practices and laboratories in your opinion as a trained dental technician, and how well has Nobel Biocare addressed this trend?

Technology has opened the door to improved efficiency, flexibility and results for laboratories and clinicians alike. Nobel Biocare’s integrated treatment workflow is industry leading when it comes to helping dental professionals take advantage of the opportunities presented by digital dentistry, and together with our partners at KaVo Kerr Group, our focus in this area will significantly expand.

Take, for example, the SmartFusion technology in NobelClinician Software. It merges and aligns medical imaging from CT and CBCT scans taken by the clinician and the data derived from the model and diagnostic set-up scanned by the NobelProcera 2G System in the laboratory. This improved collaboration allows diagnosis and planning based on accurate intra-oral tissue information, the underlying anatomy and the proposed prosthetic outcome. The fusion of data is a truly visual experience that helps the clinician not only design his or her treatment plan, but also communicate the proposal to the patient.

From 23 to 26 June, Nobel Biocare will be holding its Global Symposium at the Waldorf Astoria in New York. What new products will be introduced?

The tag line for the event is “Where innovation comes to life” because we will have a number of exciting new products and solutions to present. I wish I could say more, but you will just have to wait until we unveil them in New York.

Places are filling up, so I would advise anyone who wants to be among the first to learn about these developments to sign up fast. The educational programme features the field’s leading experts on stage and a very enticing and comprehensive line-up of hands-on sessions. Add the networking opportunities and you have all the ingredients for an unforgettable event.

Thank you very much for the interview.

**“Nobel Biocare’s integrated treatment workflow continues to evolve...”**

**“Our integration into Danaher’s dental group has gone well...”**

**“Challenges will soon become successes”**

An interview with Hans Geiselhöringer, president of Nobel Biocare
Dentistry Show, Dental Technology Showcase did what it said

By DTI

BIRMINGHAM, UK: With more opportunities to discover and learn about new products and technologies than ever before, this year's editions of the Dentistry Show and Dental Technology Showcase once again attracted thousands of dental professionals from all over the UK to Birmingham. Held over three halls of the National Exhibition Centre, the shows saw a number of new market launches by more than 400 manufacturers and dealers, allowing attendees to be the first to try them out.

Among others, Software of Excellence introduced Version 12 of its popular practice management software EXACT which, in addition to the proven features of its predecessors, has new modules aimed at helping practitioners manage their marketing efforts, as well as their online reputation. A new app was also introduced by dental unit manufacturer A-dec that allows dealers to tailor the dental chair design for the individual dentist, providing a more extensive range of individual equipment solutions.

Philips had a new version of its highly popular electric toothbrush brand on display: sonicare for Kids Connected is equipped with Bluetooth wireless technology and comes with a mobile coaching app to help children with their brushing. Available in the UK as the first market outside the US, it will hit retail stores later this year, as the company said.

As a first, Danish dental equipment manufacturer 3DSCC presented its compact and fast phosphosphorus plate reader from CCR Dental and FireCam HD intra-oral camera, which offers one of the highest resolutions on the market with its 5 megapixels.

Providing easier, faster and smarter scanning capabilities, the new CS 3600 intra-oral scanner from Carestream is said to deliver more-accurate 2-D and 3-D images in high resolution and true colour for defined margins and enhanced diagnostics and treatment planning processes.

New or improved materials and consumables were also on display, including the Ketac Universal Aplacacap glass ionomer from 3M ESPE and GC’s G-Premio BOND, a one bottle light-cured universal adhesive that is claimed to achieve outstanding performance with all etching modes and in all situations.

Orthodontics was also in focus, particularly the growing field of short-term orthodontic treatment. At the Invisalign booth, specialists and general dental practitioners had the opportunity to learn about how best to use the Invisalign Lite and 17 Solutions for aesthetic corrections, for example. With Cerezen, an alternative device for treating temporomandibular dysfunction, as well as Bruxlab, the show also saw the introduction of a number of innovative solutions for addressing oral parafunctional habits.

Everything for dental technicians and laboratory staff was again presented at the Dental Technology Showcase, which was held in a new dedicated area on the show floor. Particularly the extended conference programme, which was supported by a number of professional organisations, including the Dental Technologists Association and British Association of Clinical Dental Technology, received much interest.

In addition to changes to the consistency of the product, MTA Repair HP contains a radiopaque filler in the form of calcium tungstate, according to the company, in order to prevent staining of the root or dental crown. It comes in single-dose capsules and single-use vials, packaged in an exclusive case. As Angelus believes that innovation is realised not only in products of information and advice, ensuring an instructive and entertaining experience for all.

With this year's successful editions, preparations have now begun for the next Dentistry Show and Dental Technology Showcase in 2017. The combined events will be held from 12 to 13 May, again at the NEC, according to the organisers. Dental professionals are invited to visit the shows' official websites at www.thedentistryshow.co.uk and www.rhe-dts.co.uk for more information.

New mineral trioxide aggregate available from Angelus

By DTI

LONDRINA, Brazil: Brazilian manufacturer Angelus has recently introduced its new MTA Repair HP and the product is now available to specialists in the UK. Based on the successful MTA Angelus, which has been manufactured by the company since 2001, it offers the same chemical and biological properties, as well as performance and indications, of its predecessor, but with higher plasticity, which allows perfect handling and placement of the restorative cement into the cavity.

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MTA Angelus was introduced to dental markets 15 years ago for the purpose of reversing some clinical cases in which teeth were considered to be unsalvageable, such as in root perforations and fracture defects. Nowadays, it has been established that MTA Angelus can be used for a much broader variety of indications. According to the company, this product is widely recognised by the academic community and its results and effectiveness have been proven by substantial scientific research.

Based in the city of Londrina (Little London), Angelus has been operating in the dental industry for over 20 years. It is the first Brazilian dental product manufacturer to have registered a patent in the US market, a result of its dedication and commitment to science. Currently, the company exports to over 80 countries worldwide.
The future is digital with Henry Schein

By DTI

LONDON, UK: With the introduction of ConnectDental in 2013, Henry Schein has positioned itself at the forefront of the growing digital dentistry movement. In celebration of its achievements and to discuss the future of this rapidly expanding field as a whole, the world’s largest provider of dental products and services welcomed dentists and dental technicians from all over the UK in May to its first Digital Symposium, held at the Grange St Paul’s Hotel in London.

Based on previous, smaller CEREC Forums, the meeting saw over 280 participants come together with Henry Schein partners and affiliates for two days of networking and education. In addition, to the latest technology on display at an industry exhibition supported by key market competitors, it featured a number of clinicians focused presentations by internationally prominent experts in the field, including US dentist Dr Daniel Vasquez and dental technician Frankie Acosta, who in the opening lecture showed how the integration of dental CAD/CAM has changed the way they have run their business in recent years.

Subjects like intra-oral scanning, implant planning, smile design and practice marketing were also discussed. UK digital dentistry pioneer and expert Dr Julian Caplan from Aviva Dentistry in St Albans hosted the programme.

“With an increasing number of dentists now using ORCT for diagnostics and implant planning and intra-oral scanners replacing traditional impression taking, there has never been a more important time for dentists to develop a fully integrated digital workflow relationship between themselves and their laboratory. Henry Schein’s ConnectDental offers practices and laboratories a fully integrated digital solution combining workflow optimization, education, expert advice, service and support, all delivered by one provider.”

Henry Schein has invested a great deal in its digital business model since the launch of ConnectDental in 2013. According to Chief Marketing Officer at Henry Schein

BIRMINGHAM, UK: Wrights and Bien-Air Dental last week announced an exclusive partnership at the Dentistry Show in Birmingham in the UK. The British dental supplier now exclusively distributes the Swiss company’s entire product portfolio in the UK.

“Bien-Air is well known for working only with the best distributors worldwide. We are delighted to announce the partnership between Bien-Air and Wrights. Customers from the UK are now able to discover the very best of Swiss technology through this leading dental products and service provider,” said Carl Wood, General Manager at Bien-Air UK. “As a supplier of leading dental brands, we are delighted to partner with Bien-Air to offer an even greater range of unrivaled solutions for every dental practice,” commented Gerry Dolan, Brand Manager for Bien-Air at Wrights, on the partnership.

Bien-Air Dental, a leading Swiss medical technologies company, presented a range of new products at the Dentistry Show, including the EVO.15 contra-angle electric handpiece and the iOptima system. Equipped with CCOOLTOUCH heat-arresting technology, EVO.15 is known to be the only contra-angle proven never to exceed human body temperature, thereby protecting both the patient and the clinician. Additionally, EVO.15 features a considerably smaller and lighter shockproof head and premieres various technological innovations, including a new spray and illumination system, as well as an improved bur-locking system. With iOptima, a traditional pneumatic system can be transformed into a modern electric unit equipped with a brushless and sensorless microcontroller and controlled by an innovative app for iPod Touch. Using iOptima, restorative and endodontic interventions can now be easily pre-programmed.

Wrights is one of the leading dental suppliers in the UK and the oldest established full-service supplier of dental products, services and equipment, with over 100 years of experience. During the Dentistry Show, the company exhibited the latest innovations from leading brands, including prostheses, ceramics, composites, CAD/CAM systems, wax and moulding products, consumables and equipment.

Wrights boasts seven showrooms and service centres around the country, supporting over 30,000 products. It is also known for having one of the most modern factories in the world.
1. BRITISH MUSEUM
The world-famous British Museum exhibits the works of man from prehistoric to modern times, from around the world. Highlights include the Rosetta Stone, the Parthenon sculptures and the mummies in the Ancient Egypt collection. Entry is free but special exhibitions require tickets.

2. NATIONAL GALLERY
The crowning glory of Trafalgar Square, London's National Gallery is a vast space filled with Western European paintings from the 13th to the 19th centuries. In this iconic art gallery you can find works by masters such as Van Gogh, da Vinci, Botticelli, Constable, Renoir, Titian and Stubbs. Entry is free but special exhibitions require tickets.

3. NATURAL HISTORY MUSEUM
As well as the permanent (and permanently fascinating!) dinosaur exhibition, the Natural History Museum boasts a collection of the biggest, tallest and rarest animals in the world. See a life-sized blue whale, a 40-million-year-old spider, and the beautiful Central Hall. Entry is free but special exhibitions require tickets.

4. TATE MODERN
Sitting grandly on the banks of the Thames is Tate Modern, Britain’s national museum of modern and contemporary art. Its unique shape is due to it previously being a power station. The gallery’s restaurants offer fabulous views across the city. Entry is free but special exhibitions require tickets.

5. THE LONDON EYE
The London Eye is a major feature of London’s skyline. It boasts some of London’s best views from its 32 capsules, each weighing 10 tonnes and holding up to 25 people. Climb aboard for a breathtaking experience, with an unforgettable perspective of more than 55 of London’s most famous landmarks – all in just 30 minutes!

6. SCIENCE MUSEUM
From the future of space travel to asking that difficult question; ‘who am I?’, the Science Museum makes your brain perform Olympic-standard mental gymnastics. See, touch and experience the major scientific advances of the last 300 years; and don’t forget the awesome Imax cinema. Entry is free but some exhibitions require tickets.

7. VICTORIA & ALBERT MUSEUM
The V&A celebrates art and design with 3,000 years’ worth of amazing artefacts from around the world. A real treasure trove of goodies, you never know what you’ll discover next: furniture, paintings, sculpture, metal work and textiles; the list goes on and on… Entry is free but special exhibitions require you to purchase tickets.

8. TOWER OF LONDON
Take a tour with one of the Yeoman Warders around the Tower of London, one of the world’s most famous buildings. Discover its 900-year history as a royal palace, prison and place of execution, arsenal, jewel house and zoo! Gaze up at the White Tower, tiptoe through a medieval king’s bedchamber and marvel at the Crown Jewels.

9. ROYAL MUSEUMS GREENWICH
Visit the National Maritime Museum - the world’s largest maritime museum, see the historic Queen’s House, stand astride the Prime Meridian at Royal Observatory Greenwich and explore the famous Cutty Sark: all part of the Royal Museums Greenwich. Some are free to enter; some charges apply.

10. MADAME TUSSAUDS
At Madame Tussauds, you’ll come face-to-face with some of the world’s most famous faces. From Shakespeare to Lady Gaga you’ll meet influential figures from showbiz, sport, politics and even royalty. Strike a pose with Usain Bolt, get close to One Direction or receive a once-in-a-lifetime audience with Her Majesty the Queen.
Whether you are in the final stages of your career or just starting out, the need for a succession plan and exit strategy is equally important. You may be a sole practitioner or partner within a partnership or own shares in an incorporated dental practice, or it may be that you are contemplating the purchase of your first acquisition—one thing you need to ensure is that provision is made for a future sale or the circumstance of a sudden death.

While, admittedly, leaving the business may seem a long way off and a succession plan is something that will most probably not be foremost in your mind while you are busy running your practice portfolio, by planning now for the future, you will save yourself a great deal of potential costs and legal wrangling further down the line.

It is very important to specify who would take over your practice should you decide to sell or should you unexpectedly pass away. In running a practice, you will invest much time and money building up the business and will probably have the goodwill of a loyal and long-standing group of patients, so it is essential you know your successor will build on your hard work. This will also make the transition smoother for the business and patients after your departure. One way to do this is by bringing in an associate who will become an integral part of the business, learn how everything operates and establish a rapport with patients. This will reduce some of the issues that may arise when a stranger takes over a practice and will put your mind at rest that the practice will be in safe hands moving forward.

Another major consideration in succession planning, for NHS practices in particular, is the NHS contract. Even if a practice is mainly private, there could still be an NHS children’s contract, in which case consideration has to be given as to how this contract would be affected. At present, a practice may have a general dental services (GDS) contract or a personal dental services (PDS) contract. While the first can be transferred as part of the sale of a dental practice, the other cannot. If you are considering selling your practice and have a PDS contract, you need to be aware that the process will involve transferring it to a GDS contract, which involves an application to the NHS.

If you are a sole trader, or a partner, and hold a GDS contract, the process is not as straightforward as transferring the contract straight to the buyer, as NHS England prohibits GDS contracts from being directly transferred. A temporary partnership will need to be set up between the retiring dentist and the buyer. Once the sale has been completed, notice must be given to NHS England that a new partnership has been formed. Within a certain period after the sale, the seller will then formally retire from the partnership. Notice must be given to NHS England. The GDS contract is then left in the name of the buyer.

If you are an incorporated company and hold a GDS contract, the easiest way of transfer is the sale of the entire issued share capital to the buyer. It is important to note that if this is the way in which the contract will be transferred, there are certain provisions within GDS contracts held by limited companies regarding change of control that require NHS England’s permission for the contract to be transferred.

Your initial plans may be to sell your practice and then retire completely—although one good way of ensuring that the goodwill of the practice is protected is for the seller to continue to work at the practice as an associate after completion of the sale and slowly phase out his or her involvement. If the seller is happy to
do this and the buyer is happy for the seller to stay on, an associate agreement should be drafted as part of the sale process. If the seller is adamant that he or she wants to retire immediately after the sale, the practice could send a joint letter from the seller and buyer explaining to the patients that the practice has been sold. However, this may affect the goodwill of the practice if the seller leaves abruptly, so it is worth considering the sale of your practice a good while before you actually retire.

If you are a sole practitioner with a GDS contract considering utilising the 24-hour retirement policy post-completion, it may also be worth noting that you are specifically not entitled to this benefit as a sole practitioner, as there is no one to take over your GDS contract and therefore the contract is effectively brought to an end and can be put out to tender.

In a sale agreement, it is common to include restrictive covenants, which prevent the seller from working at another dental practice within a certain radius and for a specific period after the sale has been completed. There also tend to be provisions preventing the seller soliciting patients, suppliers and employees. These sorts of provisions will apply even when a seller stays on as an associate after the sale and subsequently leaves a number of years later. The main reason for these provisions is the protection of the goodwill of the practice, but they can be very restrictive on the seller, depending on post-completion plans. If the seller wishes to practice at a domiciliary hospital or work as a locum after the sale, the restrictive covenants may prevent him or her from doing so. Therefore, it is important for the seller to carefully review any such restrictions within the sale agreement.

It is also important that you have a will in place, to make provision in the event of an unexpected death. It is important too that clear instructions are given to contact the local area team (LAT) within 24 hours after the death. In the case in which a sole practitioner has a GDS contract and dies unexpectedly, the contract will be terminated 28 days after his or her death, unless his or her personal representative notifies the LAT of the death. It can then extend the period from 28 days up to six months. If clear instructions are not given to the personal representative, it can result in the deceased’s estate not being able to benefit from the goodwill the deceased built up in the practice. It is vital that the importance of notifying the LAT be stressed to the personal representative, especially if it is a family member, as dealing with the deceased’s business may fall to the bottom of the list when that family member is grieving. It is important that this extra time be secured, to allow the estate to decide how best to dispose of the business.

If you are a partner in a practice, it is worthwhile making provision in the agreement to cover the circumstance of a partner dying, as well as making specific provision within your own will. The partnership agreement may give the remaining partners the option of purchasing the deceased’s share of the practice or may provide that they are to cooperate with the sale of the deceased partner’s interest in the practice. Either way, it creates certainty as to what will happen after the death of a partner and can make the process much easier for the family and personal representative of the deceased. The 28-day period in which the LAT has to be informed of the death still applies for the case in which the deceased was in partnership, however, it is possible for the remaining partners to undertake to perform the deceased’s units of dental activity, which can take the pressure off all involved while a decision is made as to how best to deal with the deceased’s share of the partnership.

Amanda Maskery is one of the UK’s leading dental lawyers. She is Chair of the Association of Specialist Providers to Dentists (ASPD) in the UK and a Partner at Sintons law firm in Newcastle. Amanda can be contacted at amanda.maskery@sintons.co.uk.

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“Cerezen has impacted everyone I have treated with it”

An interview with Dr Lance Knight, BUPA dental centre Manchester

The most widely prescribed treatment for temporomandibular disorder (TMD) has been an intra-oral stabilisation splint. With Cerezen, however, a new and more palatable alternative has recently found its way into the UK market from the US. Dr Lance Knight from the BUPA dental centre in Manchester has been one of the first prescribers in Britain. In this interview, he talks about the device and why he has been an enthusiastic early adopter.

Dental Tribune: Dr Knight, do you find a significant number of your patients present with TMD?

Dr Lance Knight: TMD as a condition is under-recognised. As professionals, we are aware that many patients who suffer with TMD do not always present in a way that allows the condition to be easily diagnosed. However, I would say I see patients with obvious signs of bruxism about once or twice every day.

What are the most common TMD symptoms you encounter in your practice?

Tooth grinding and clenching are something that we see a great deal of in the practice, but patients may also complain of jaw and/or neck pain, as well as unexplained headaches occasionally.

What has your typical solution for TMD sufferers been?

Historically, I have turned to intra-oral stabilisation splints to treat TMD sufferers. With them, I have had mixed success. For some patients, bite guards have been fantastic, and all that is needed to relieve the pain of TMD. Unfortunately, not all patients get on well with them, and for some who have strong gag reflexes they are just impossible to wear. Some patients may benefit from splints during the day; however, this is not always a practical option for them, as splints can affect speech, and of course one cannot eat with them in.

I have found splints to be reasonable in some cases, but they have not provided certain prospective success, meaning I have not been confident of the outcome patients will have.

How did you hear about Cerezen?

My Renew Health representative was the first person to make me aware of Cerezen. She came into the practice and explained about how Cerezen was a device that is inserted into the patient’s ear canal, close to the temporomandibular joint (TMJ). The ear canals change shape when the jaw is opened or closed, and Cerezen uses this anatomical change to provide a unique near-field treatment for TMD. Cerezen encourages the patient to return to the open-bite position, by applying subtle pressure to the walls of the ear canal, and thus minimises the tendency to clench the jaw and tense the surrounding muscles.

At first, I was sceptical—it sounds strange when one first hears that one is able to offer a patient a jaw treatment through the ear—but when she explained the science and provided a demonstration it made sense. I was particularly interested in the fact that the treatment is, like a splint, totally reversible. If it does not work, patients can simply remove it. With occlusal equilibration, which had always been another option for seeking to treat TMD, there is no going back, and here I was being presented with a second reversible option. I was keen to make my own evaluation of the product and was invited to test it on one of my patients, with which I had great success.

Did you feel confident engaging with patients presenting with TMJ pain before learning about Cerezen?

Before Cerezen, my knowledge of TMD was not to the level it is now. Cerezen provides courses that broadened my knowledge significantly and allowed me to offer practical advice and solutions to patients. The Cerezen courses added massively to my confidence in prescribing, as I felt that I was able to seamlessly apply the theory and knowledge Cerezen had shared with me, in my practice to my patients.

What results have you obtained with Cerezen?

Cerezen has impacted everyone I have treated with it. For some, it has been subtle—the treatment is not an overnight wonder cure; it takes time for patients’ jaws to relearn the position they should be in during the day. Several months after treatment, patients predominantly report that they have had a reduction in pain—some have even reported an improvement in sleep!

What are the greatest benefits of Cerezen for both the patient and the prescriber?

For the patient, it is clear that Cerezen offers a significant improvement in comfort compared with traditional splints. It is provided at a good price point and is cost-effective, and can offer change to the patient’s quality of life.

For the practitioner, the support from the company—the knowledge, the support and training—is second to none. The product is quick and easy to prescribe, and I firmly believe that one achieves more successful outcomes for patients with TMD, and this increases my confidence in treating patients.

What is your overall assessment of the Cerezen device?

Cerezen has been a game changer for me in the way I look to treat TMD. My experience with the device has been remarkable. It is a fantastic tool to have to offer to TMD sufferers and is definitely my first option as a treatment for their condition. I am confident of prescribing it and of the outcome it will have for patients. It is such a good feeling to be able to offer patients a potential solution to their problem that does not pose an oral health risk (no more occlusal equilibration) or burden their pocket (the manufacturers of Cerezen offer a money-back guarantee).

The support from Cerezen for the practice has been amazing. Implementing a new treatment can often be complex and expensive, as well as a massive change to the practice. With Cerezen, it is seamless.

The only real cost to practitioners is the time to learn about the device. Cerezen has the potential to be highly profitable for practices, maximising the treatments that can be offered in-house and reducing the number of patients who have to be referred out. The even greater reward has been the difference I am now able to offer my patients whom I struggled to help before.

Thank you very much for the interview.

...a significant improvement in comfort compared with traditional splints.
Growing a successful dental implant clinic

By DTI

In April 2016, Dr Ian Lane, a managing partner at Queensway Dental Clinic, together with Richard Elliot, practice manager, Director of Queensway's Dental Laboratory, presented a webinar to a global audience, over 1,000 dentists, giving their insights into what they feel have been the most fundamental factors of growing a successful dental implant clinic.

Queensway Dental Clinic (www.queensway.co.uk) was founded in 1993, when Dr Paul Aleyre took over the north-eastern clinic. At the time, it was at the heart of an area where the population's oral health was significantly lower than that of the national average. Over the next 23 years, the practice grew into the award-winning business it is today - a journey that Lane believes would not have been possible without the partners, specialists, nurses, managers, technicians and therapists who have invested their time and passion in every step.

Between 1998 and 2013, Queensway Dental Clinic was the largest referral centre for conscious sedation in the region, and the clinic treated over 100,000 patients during that time. However, as of 2011, the business model started to change and the partners turned their attentions to expanding the private side of the clinic. By applying the same principles learnt from building a successful NHS practice, Queensway Dental Clinic grew from a four-surgery practice into a 25-surgery practice over time.

Lane suggested that this success can largely be attributed to the Queensway ethos with its patient-centred approach to dentistry. “We focus on holistic care, meaning there is real choice for the patient, as well as ensuring that shared decisions are made, over which patients have full control.”

“We have always invested in our team,” continued Lane. “Indeed, the strong foundations of our clinic have been built on the knowledge and experience of our team. To build a truly successful implant clinic, it is vital to have the right team in place.”

With Gold Standard Investors in People accreditation, it is clear that Queensway Dental Clinic understands the importance of nurturing the skills of its team. Investing heavily in the continuing professional development (CPD) of every single member, the practice has seen its nurses progress through the Nobel Biocare basic and advanced nursing courses, as well as attend the dental implant nursing qualification from King's College London—and all are experienced to some degree with the All-on-4 treatment modality.

Indeed, owing to the training provided by the Kois Centre, as well as the benefits of Nobel- Clinician Software, the team at Queensway has managed to streamline their case assessment and treatment planning process. “We’re all speaking in the same language now,” said Lane. “We can provide effective risk assessments for our patients, deliver effective and reliable treatment plans for implant treatments, design our patients’ smiles, provide diagnostic assessments with models and photos, and review cases with the entire team present.”

Vital to all this, Lane went on to explain, are communication and working alongside colleagues who all have the same skill and experience. “This is why,” he said, “we take our training and education seriously at Queensway.”

Of course, it is not just the clinical skills that contribute to the success of an implant practice. Queensway Dental Clinic has striven to improve the training of its front-of-house staff to ensure that patients receive only the very highest standard of service from the moment they enter the practice. This has included sending the team on lunch-and-learn sessions with Nobel Biocare representatives, having cue cards developed to act as prompts on the phone, and giving each of the staff the necessary understanding of implant treatment options in order for them to communicate this effectively to prospective and current patients.

Furthermore, Queensway understands the importance of investing in the skills of its partners and takes great pride in the individual achievements of its team members. Indeed, the partners at Queensway Dental Clinic have all graduated from the Kois Centre in Seattle in the US—five of only 15 practitioners in the UK to have done so.

“The skills we have learnt at the Kois Centre have transformed the way we practise,” said Lane. As well as improving the outcomes we can achieve for our patients. Seeing many patients who have suffered from many different problems with their teeth, it’s vital that we have the skills—like those that the Kois Centre teaches so well—to be able to manage the complexity of these cases in a reliable way. Without a doubt, these skills have also enabled us to reassure our patients that they are being treated with the most up-to-date and predictable procedures and techniques.”

Elliott too graduated from the Kois Centre and was the very first technician in the UK to have done so. This significant achievement is mirrored in the way Queensway invests in the skills and CPD of its laboratory technicians, representing recognition of the importance of technicians in the provision of implant therapy.

It is also down to the implant provider. Since 1993 (with the exception of a very short departure in 2009), Queensway Dental Clinic has used Nobel Biocare implants. “It’s the mix of quality service and quality products,” explained Lane. “We don’t use cheap products and Nobel Biocare doesn’t provide them. In all, it helps us minimise the risk to our patients and enables us to achieve excellent results.”

Working with Nobel Biocare allows the Queensway team to use a variety of different techniques, including immediate loading, and provides the opportunity to scan and plan treatments in full 3D. It also allows the clinical staff of Queensway to liaise effectively with the laboratory staff, expediting and improving the process from start to finish.

This kind of professional knowledge, when brought together effectively with clinical, technical and management skills, has been one of the greatest contributing factors to the success of Queensway’s implant business. “It’s been a challenge,” admitted Lane, “and it requires excellent communication from all aspects of our business, but it has certainly paid dividends—and it certainly would not have been possible without the relationship we share with Nobel Biocare.”

This relationship seems in no way likely to end soon, indeed, the team at Queensway Dental Clinic have already found working with Nobel Biocare so effective that it has seen an 87 per cent increase in spending on Nobel clinical products, as well as a 250 per cent increase for laboratory items since 2011. “Having a single provider in every single interaction with colleagues and experts across the globe - a growing database of scientific articles and case reports - ADA CERP-recognized credit administration - education everywhere and anytime - live and interactive webinars - more than 3,000 archived courses - a focused discussion forum - free membership - no travel costs - no time away from the practice - archiving of members, experts and and anytime for free www.DTStudyClub.com

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company solution in our busy practice has been incredibly useful in boosting our business,” said Lane.

The figures speak for themselves. Since 2011, Queensway Dental Clinic has experienced an increase in its implant turnover of 220 per cent with up to 50 per cent of all of its private activity originating from its provision of implants. There has also been a concurrent growth of 125 per cent in its laboratory business and this can be directly linked to its implant success.

However, having the knowledge and the products is just one part of achieving success. Putting everything into practice represents the greatest struggle for a large and busy centre like Queensway Dental Clinic. For this reason, the team strives to follow five essential tenets to ensure success.

Firstly, it is important to provide one point of contact. Lane explained that having so many disciplines together under one roof has created a service in which patients can feel confident. Rather than being passed around between different teams, patients at Queensway can conveniently be treated by one dedicated and well-trained team.

Furthermore, Queensway invests in progressive treatment protocols. The team works hard to ensure patients’ teeth can be restored in the shortest predictable time. This includes adopting new technologies and techniques, as well as learning to communicate effectively with all necessary services to ensure the optimum result can be achieved in the shortest, safest and most non-traumatic manner.

While Lane emphasised the importance of communication within the Queensway team, he also stressed how important it is to communicate effectively with patients. By conducting applicable and in-depth research of the patient demographic in the area, the Queensway team can target its treatments to those who need them most. This information can then be transferred to tried-and-tested marketing campaigns, such as those used on the practice website, through Google or via social media. Queensway also utilises local advertising, which can often be the most successful method of reaching patients in the area.

Lane explained how crucial it is to invest in a good website. “As one of the main points of contact for most patients, a website has to be responsive; it has to be image led and easy to navigate. Our website is both smartphone and tablet friendly, in recognition of the massive usage of these two devices. All of the images on our website are of our own patients as well—no stock images are used.”

Another key factor of Queensway’s success is its ability to accept high-end treatments at any time. This means that whenever an enquiry is made about any treatment, it can be answered succinctly and accurately by a member of the team who understands precisely what is needed. Queensway Dental Clinic has a highly trained treatment adviser who can answer these queries, and the clinic offers a free 30-minute consultation with an implant dentist.

Lastly, Queensway Dental Clinic recognises the importance of delivering patient satisfaction and encouraging patients to recruit others. According to Lane, “At Queensway, approximately 80 per cent of all new patient enquiries are made through word of mouth or recommendations.”

Everything the Queensway team does is geared towards ensuring that patients receive a service they cannot help but recommend. By carrying out monthly patient surveys, running patient forums and open evenings, taking testimonials and Google reviews, and building up a strong referral network, the Queensway team can collect, review and build upon patient feedback to ensure that its service always reaches a high standard.

In conclusion, by investing in exceptional training, by communicating effectively, by working with high-quality and supportive companies, and by maintaining high levels of service, Queensway Dental Clinic has achieved a great deal over the last 20-plus years. The dedication and hard work shown by its team are a testament to its past and continued success and serve as a shining example of what an implant business can achieve today and tomorrow.
Manchester welcomes UK dental professionals to next BDA conference

Five thousand expected for three days of learning and networking

By DTI

LONDON & MANCHESTER, UK: The next edition of the British Dental Conference and Exhibition is set to return to Manchester this month. Being held again at the Central Convention Complex in the city’s up and coming Deansgate–Petersfield district, the event will present everything that dentists need to know about their profession in 2016. More than 5,000 visitors are expected for the conference and industry exhibition, which will both take place from 26 to 28 May.

According to the British Dental Association (BDA), this year’s conference programme features more than 130 sessions, presented by speakers from all around Britain and elsewhere, on a wide range of clinical aspects, such as implant maintenance, facial aesthetics and oral cancer management. Topical issues, such as the prototypes for a reformed NHS dental contract, will be discussed too. Christopher Orr, Gary DeWood, Linda Greenwall, Subir Banerji and Finlay Sutton are among the experts sharing their experience this year.

A president’s lecture on Friday afternoon, held by Welsh psychologist Cliff Arnall on behalf of incoming BDA President Stuart Johnston, will reflect upon stress, its negative impact on well-being and achieving a calmer, more fulfilling life. ‘Cliff’s lecture ‘Dental mental: The psychology of passion, flexibility and stress’ will not only offer insight into dealing with some of these complexities but promises to be entertaining as well,’ Johnston said.

Overall, dental professionals will be able to gain up to 15 hours of verifiable continuing professional development (CPD) at the event. Credits can also be earned from attending sessions at the Speakers’ Corner, as well as the advice and workshop zones that will be open to exhibition pass and conference pass holders throughout the convention centre. Sessions that cover the recommended General Dental Council’s core CPD subjects are marked in the official programme. For a concise overview, the BDA also provides an application for iOS and Android mobile devices that can be downloaded free from the App Store and Google Play.

New products that aim to improve clinical outcomes and practice management workflows will be on display in the exhibition hall. Over 150 manufacturers and distributors from the UK and abroad have announced their participation in the event. Among others, a new product will be launched by the event’s main sponsor, Oral-B, which will be given away free to both conference and exhibition pass holders at Booth C04. Other launches include state-of-the-art equipment, such as intra-oral scanners, as well as new system solutions for treatment planning and practice management. A large number of service providers will also be on-site to provide attendees with financial or legal advice on a variety of issues.

“Dentistry remains a challenging profession in many ways and here at conference the BDA can help you address many of those challenges,” Johnston added.

Professionals can register for this year’s event either online or at the registration counter during the three days of the congress. Discounts are given to BDA members and dental students. More information and the detailed programme can be found on the official website at www.bda.org/conference.
Conference Programme, 26–28 May

Thursday, 26 May

10:00–10:30
Child and adult safeguarding: what should you do if you have concerns?
(Personal Development Theatre)
Speaker: Carol Richardson

10:30–10:45
Key tips for restoring implants
(Demonstration Theatre)
Speaker: Pareet Shah

10:15–11:15
How the general dental practice team can improve outcomes for oral cancer patients
(Charter Room 2+3)
Speaker: Simon Rogers

10:40
MDFS and beyond: Career development opportunities for the whole dental team with the Royal College of Surgeons of Edinburgh
(Charter Room 4)
Speakers: Will McLaughlin, Claire Curtin and Sarah Manton

10:00–10:30
Optimum pain management of the dental patient (Exchange Auditorium)
Speaker: Taru Renton

11:00–11:30
CQC: What to expect when we inspect
(Personal Development Theatre)
Speaker: John Lynam

11:30–12:15
Medical emergencies (Demonstration Theatre)
Speaker: Peter Whiteford

12:00–12:30
Using hypnosis in dentistry: Its role in reducing fear and phobia
(Personal Development Theatre)
Speaker: Christine Macleavy

12:30–13:30
The drugs don’t work: treating the emergency dental patient
(Charter Rooms 2+3)
Speakers: Susie Sanderson OBE, Wendy Thompson and Julie Burke

12:30–13:30
Top tips to avoid trouble
(Charter Room 1)
Speaker: Abhi Pal

12:30–13:30
An introduction to inheritance tax planning
(Charter Room 4)
Speaker: Neil Richardson

12:30–13:30
Accessing root canals—saving time and dentine
Demonstration theatre)
Speaker: Alyn Morgan

12:15–13:15
Interactive Q&A forum. Associates—how to negotiate a better agreement
(Exchange Room 9)
Speakers: Richard Birch and panelists

12:45–13:45
Healthy gums, healthy mouth, happy patient, happy dentist—ways to improve your perio management Techniques
(Exchange Hall)
Speaker: Nik Pandya

13:00–13:45
How to legally and ethically offer your patients whiter teeth
(Exchange Hall)
Speaker: Andrew Chandrapal

14:00–14:30
Tips for effective communication in the dental practice
(Personal Development Theatre)
Speaker: Nicki Pandya

14:00–14:30
Use of dental acupuncture for relaxation and prevention of gagging
(Demonstration Theatre)
Speaker: Christine Macleavy

15:00
Teeth and dental implants: a common preventative approach to care?
(Charter Room 4)
Speaker: Craig Barclay

14:30–15:45
Special tips for special patients
(Charter Room 1)
Speakers: Caroline Graham, Yvonne Rooney, Ruth Edwards and Louise Foster

14:30–16:00
Interactive panel session: Can we agree to disagree? Treatment planning in dentistry—part I
(Exchange Auditorium)
Speakers: Peter Briggs and 7 panelists

14:45–15:45
An endodontic-focused career in dentistry
(Charter Rooms 2+3)
Speaker: Mark Hunter

15:00–15:30
How to deal with practice conflicts
(Personal Development Theatre)
Speaker: James Goldman

15:30–16:15
Use of dental acupuncture for relaxation and prevention of gagging
(Demonstration Theatre)
Speaker: Christine Macleavy

16:00–16:30
Are you leading your team to success?
(Personal Development Theatre)
Speaker: Nicki Pandya

16:30–17:30
Diploma in Implant Dentistry—career development opportunities
(Exchange Hall)
Speaker: Miguel Stanley

16:45–18:00
Aesthetics Mi way (Exchange Hall)
Speaker: Brian Miller

17:00–17:30
The professional approach to dental social media (Personal Development Theatre)
Speaker: Mark Oborn

Friday, 27 May

08:10–09:30
Designing an occlusion (For advanced practitioners only/Charter Room 4)
Gary DeWood

09:30–10:45
Interactive Q&A forum. The career paths in dentistry you might not know about!
(Exchange Room 9)
Speakers: James Goldsmnd and panelists

09:45
Clinical management of pathological oral tooth wear in general dental practice
(Exchange Hall)
Speaker: Suhil Banerji

09:45–10:45
The management of sharps injuries in a dental healthcare setting
(Charter Rooms 2+3)
Speaker: Noha Seoudi

10:00–10:30
Using conscious sedation to help phobic patients
(Demonstration Theatre)
Speakers: Carol Boyle and David Craig

10:00–11:00
Improving patient safety: An multifaceted approach
(Exchange Auditorium)
Speaker: Alex Sakoena

10:50
Government address
(Exchange Hall)
Speaker: Rt Hon Alastair Burt MP

11:00–11:30
Using NLP techniques to improve your patient and internal communication
(Personal Development Theatre)
Speaker: Heather Dallas

11:15–12:00
Impression taking (Demonstration Theatre)
Speaker: Rev Littlermore

11:45–12:45
How to manage and prevent patient tooth wear caused by dietary acids
(Charter Room 1)
Speaker: Rupert Austin

13:30
How to boost your income from facial aesthetics
(Charter Room 4)
Speaker: Harry Singh

16:45–18:00
Interactive panel session: Can we agree to disagree? Treatment planning in dentistry—part II
(Exchange Auditorium)
Speakers: Peter Briggs and 7 panelists

17:00–17:30
The professional approach to dental social media (Personal Development Theatre)
Speaker: Mark Oborn

17:45–18:00
The future of dentistry and orthodontics
(Specialist Orthodontics Room 1)
Speaker: Mark Oborn
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Evidence based advice: Re-evaluating preconceptions and habits (Charter Rooms 2+3)
Speaker: Fotinos Paraskevopoulos
10 years of history on dental practice values and the process of selling (Exchange Room 10)
Speaker: Anne Barker
12:00–12:30
Be the best you can be—using lifelong learning to improve your knowledge, skills and competences (Personal Development Theatre)
Speaker: Jane Dalgarno
12:00–13:00
Dementia and dental care, problems and practicalities (Charter Rooms 2+3)
Speaker: Heather Dallas
12:15–13:30
An eye for an A, a tooth for a tooth: endodontics and implants, what is the truth? (Exchange Auditorium)
Speaker: Ans Alani
12:15–13:30
Recognising occlusal problems (Exchange Hall)
Speaker: Karolin Krell
14:00–14:30
Maximise your energy and improve your time management (Personal Development Theatre)
Speaker: Leticia Casanova
14:00–14:30
Application of rubber dam with an overview of the different systems available (Demonstration Theatre)
Speaker: Christine Macleavy
14:15
How can we ensure future generations are free from dental decay? Less sugar—more fluoride! (Exchange Auditorium)
Speaker: Sandra White
14:15–15:15
Dental mental: The psychology of passion, flexibility and stress (BDA President’s Lecture/Charter Room 1)
Speaker: Cliff Arnall
15:00–15:30
How to manage and monitor underperformance (Personal Development Theatre)
Speaker: Shaolina Ishaq
15:30–16:15
Success with complete dentures (Demonstration Theatre)
Speaker: Pranay Sharmar
16:00–16:30
Managing the stress of dental practice (Personal Development Theatre)
Speaker: Tim Newton
16:15–17:15
How to manage your oral surgery patients effectively in a primary care setting (Charter Room 1)
Speaker: Richard Moore
Prototypes and commissioning guidelines: What will be the future of the NHS? (Charter Room 4)
Speakers: Henrik Overgaard Nielsen, Richard Emmas and David Cortum
16:15–17:15
Conquering tooth decay: how sugar-free gum can help reduce the cost burden of oral disease (Exchange Room 9)
Speaker: Liz Kay and Lindsay Claxton
16:45–18:00
Dentine hypersensitivity: How sensitive are your teeth? (Exchange Hall)
Speaker: Nicola West
Saturday, 28 May
09:30–10:30
Complaints and confusion (Charter Room 1)
Speaker: David Hartoch
Latest innovations to make your everyday dentistry easier! (Charter Room 4)
Speaker: Jansen van Rensburg
10:00–10:45
Self-care in perioper patients: It’s what really matters (Exchange Room 9)
Speaker: Phil Ower
09:30–10:45
Inlays, onlays and endocrowns: Is it time to say goodbye to traditional posterior crown preparations? (Exchange Hall)
Speaker: Chris Orr
16:45–18:00
Self-care is really matters (Exchange Room 9)
Speaker: Phil Ower
11:15–12:15
Success is a funeral: Identification in mass fatality incidents (Charter Room 1)
Speaker: John Robson
11:15–12:15
Periodontology—the last 50 years—or so! (Lindsay Memorial Lecture/Charter Room 4)
Speaker: Iain Chapple
Predictable technique and material selection for the aesthetic and functional rehabilitation of tooth surface loss (Exchange Room 9)
Speaker: Dominic Haskell
13:30–12:15
Splinting of luxated teeth (Demonstration Theatre)
Speaker: Peter Vine
11:30–12:30
Lateral thinking—the restoration and replacement of the maxillary lateral incisor (Charter Rooms 2+3)
Speaker: David Pitt
11:30–12:30
My Fitness to Practice case and other more important matters (Exchange Hall)
Speaker: Colin Campbell
12:00–12:30
Scope of practice and extended duties for DCPs (Personal Development Theatre)
Speaker: Christine McIvor
12:45–13:30
Impression taking (Demonstration Theatre)
Speaker: Bev Littlemore
13:15–14:30
Ethics not fear: Cosmetic dentistry in the 21st century (Charter Room 1)
Speaker: Bertie Napier
Interactive Q&A forum: Associates—how to negotiate a better agreement (Exchange Room 2+3)
Speakers: Richard Bird and panellists
The 10 rules of patient marketing (Charter Room 4)
Speaker: Bill Starkie
13:30–14:30
Achieving excellence in anterior composites (Charter Rooms 2+3)
Speaker: Dipesh Parmar
13:30–14:45
Periodontal health for a better life (Exchange Hall)
Speakers: Ian Needleman, Iain Chapple and Rajiv Patel
14:00–14:30
Would you love to have your own practice, would you really like to? (Personal Development Theatre)
Speaker: Maggie Jackson
14:15–15:00
Do we need to treat elite athletes as a special case when considering their dental needs? (Demonstration Theatre)
Speaker: Peter Vine
15:00–15:30
IRMER update and the role of DCPs in dental radiography (Personal Development Theatre)
Speaker: Bev Littlemore
15:00–16:00
If it’s broken—fix it! Modern management of dental trauma (Exchange Room 9)
Speaker: Serpil Dilemal
Prevention and management of medical emergencies in the dental practice: Being prepared for the unexpected (Charter Room 1)
Speaker: John Buchanan
15:15–16:15
Skill mix in dentistry: A paradigm shift? How can it benefit practice in reality? (Charter Rooms 2+3)
Speaker: Phil Connell
15:15–16:30
Clinical tips for improved endodontics (Exchange Hall)
Speaker: Mike Waplington
09:30–10:30
How to manage and monitor underperformance (Personal Development Theatre)
Speaker: Bill Starkie
14:15–15:30
The 10 rules of patient marketing (Charter Room 4)
Speaker: Phil Ower
The DTI publishing group is composed of the world’s leading dental trade publishers that reach more than 650,000 dentists in more than 90 countries.

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Take it easy with Carestream

By DTI

STEVENAGE & MANCHESTER, UK: Visitors at the British Dental Conference and Exhibition in Manchester can experience the full range of new intra-oral scanners, practice management software and CBCT technology at the Carestream booth (A38). Designed specifically to make professional life easier, the company’s portfolio of products can enhance everything from diagnostics to treatment planning and the final outcome.

The new CS 3600 intra-oral scanner, for example, provides easier, faster and smarter scanning capabilities and enables a continuous workflow. The intelligent matching system allows addition of missing data at any time. Another feature is the auto-location function: users can jump to any position in the mouth without indicating an exact position to the system or following a specific direction.

In addition, Carestream’s CS 8100 3D imaging system harnesses the power of 3-D imaging while using a minimal radiation dosage and freeing time to treat more patients.

And ensuring complete integration between all technologies, the CS R4+ practice management software also monitors practice performance in real time, so dentists always know exactly how their business is doing.

BDA offer by SoE

By DTI

Manchester, UK: Software of Excellence will offer complimentary Patient Marketing Consultation at the upcoming British Dental Conference & Exhibition in Manchester. Attendees are invited to reserve their preferred time in advance and find out how the company and its latest EXACT practice management software can help them to attract more new patients and boost practice revenues in 2016.

Version 12 of EXACT now allows dentists to manage their online reputation comprehensively. In addition, the update provides a number of tools to conduct and monitor marketing activities, the company announced at the Dentistry Show in Birmingham in April. With the new Marketing Manager module in EXACT V12, practitioners will be able not only to target specific patients with treatments and track results, but also to accurately monitor results and calculate their return on investment, the company said. This way, they can easily identify where and why a certain campaign has been effective.

Additionally, via the Channel Track module, campaigns can be allocated a specific telephone number to record calls once a campaign has been launched.

In order to address the increasing importance of online reviews, the latest version of the software further allows practitioners to manage their reputation on search engines like Google better by automating the processes that collate positive testimonials and communicating them widely in the shortest possible timescale through a partnership with reputation.com, a leader in the field of online reputation management. The new Reputation Manager module includes a sophisticated scoring algorithm that reviews gathered data from existing testimonials and compares it to those of other practices, delivering a reputation score against which a practice can benchmark its performance compared with both the industry average and top performers.
Swiss dental company Curaden is one of the few businesses in the industry that adopt a holistic approach to dentistry. The company combines high-quality dental products, pioneering training systems and prophylaxis concepts for long-term oral health. In this interview, CEO Ueli Breitschmid talks about new concepts and optimal preventive care as key to good oral health, as well as prevention programmes that both promote patients' health and offer practices financial success.

Dental Tribune: Mr Breitschmid, Curaden aims to offer more than just dental care products. You advocate comprehensive training in the field of dental prevention. Why is this issue so important?

Ueli Breitschmid: Curaden is the only company that, in addition to manufacturing products, provides patients with the necessary knowledge and skills, in cooperation with trained instructors, to take control of their oral health themselves. We have developed our knowledge and products with the aim of teeth remaining healthy for a lifetime. Our corporate philosophy combines the innovative CURAPROX products, our dental educational system iTOP and the practical Prevention-One program. Our goal is to reduce the prevalence of gingivitis, periodontitis and tooth loss. Therefore, we support comprehensive soft-tissue prophylaxis. Finally, gingival problems are still the most common cause of poor oral health. We support prophylaxis to this end with our great interdental toothbrushes, our iTOP seminars and other services.

In any oral health discussion, it is always important to look at the combination of a high-quality product and the trained application thereof. The product alone without a trained user changes little or nothing. Therefore, so percent of people in developed countries have gingival diseases, because nobody has shown them proper oral hygiene. Only a well-trained person can motivate and instruct someone else.

How can control and continued motivation be achieved?

Patients and dentists should follow a regular schedule concerning both treatment and training. Today's approach of a once or twice-yearly dental visit is no longer appropriate. Going to the dentist or the dental hygienist should not be an annual event, but more frequent. Just think how often we enjoy a beauty treatment or a pleasant massage. White and well-kept teeth are part of the modern concept of body awareness, much like a trip to the fitness centre.

Every dentist knows how little is taught in dental schools about prevention. There are long-established and financially attractive prevention concepts for the entire office staff, including Prevention-One. Today's digital solutions offer a painless and quick prophylactic therapy. The future of dentistry is digital and focused on prevention, and the dentist of the future as a preventive physician is responsible for patients' overall health.

So you envision dentists and doctors working more closely?

Dentistry and medicine will certainly continue to move closer together, as the interaction between the oral tissue and other organs is now better understood. Slowly but surely, dentists will be recognised for their role in medicine. They are the gatekeepers of health, because the mouth represents the basis of almost all chronic diseases. In time, dentists will measure blood pressure and take saliva samples or blood samples. It will become possible to decrease the prevalence of chronic diseases, including cancer, Alzheimer's disease, cardio-vascular diseases and diabetes, through better oral health. At the same time, medicine of the future will be able to detect signs of gingivitis or periodontitis.

We Breitschmid, you focus on holistic oral health prevention rather than restoration. What concepts does Curaden offer in this regard?

We focus on optimal prophylaxis for patients and dental professionals. Individually trained oral prevention (ITOP) is our international, educationally well-known educational system. For this purpose, we have been working together with established dentist Dr Jiri Sedelmayer. He has revolutionised the approach to teaching, motivation and control of individual prophylaxis for long-term dental health. This approach includes regular training, the proper tools and a good dose of motivation. First, we begin with the dental professionals, who pass their new knowledge and skills directly to patients. All our iTOP seminars are supervised by independent dentists and dental hygienists who have completed the training themselves.

“The future of dentistry is digital and focused on prevention”

An interview with Curaden CEO Ueli Breitschmid

With iTOP for students, Curaden is targeting students and young dentists. Why does Curaden place so much importance on the early training of students? First, students should maintain their teeth for perfect oral health; only then can they treat their patients. The dentist and patient should always have the regular care of their own teeth with good toothbrushes, toothpaste and interdental brushes in common. This allows the aspiring dentist to become familiar with how the damage to be repaired arose. Early on, we convey the principle of touch to teach— the proof is in the pudding.

How can dental professionals better apply your iTOP concept for the benefit of the patient and practice? We offer them a financially attractive service package for the long-term dental health of their patients, called Prevention-One. Prevention-One is our innovative treatment approach to prophylaxis services. The plan includes regular dental cleaning and dental procedures, as well as CURAPROX products. We believe strongly that Prevention-One represents the future of dentistry.

No matter the product, whether Prevention-One or CURAPROX, we strive to be accessible to patients. In 2015, we founded the first Curaden Clinic, in the heart of London. The practice offers top facilities and, of course, all the products and concepts of Curaden.

Thank you very much for the interview.

Mr Breitschmid, you focus on holistic oral health prevention rather than restoration. What concepts does Curaden offer in this regard?

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“ITOP addresses one of the major issues in every dental practice: how to motivate and instruct patients to brush perfectly, with good outcomes. Through iTOP we offer individual training with regular monitoring and correction of the learnt prophylaxis techniques. We use the latest technologies and modern cleaning techniques; in short, the right mechanical plaque control. Of course, the seminars are open to those dental staff with years of experience too. There are always new ways to brush teeth and gaps properly.”

How long is the iTOP programme?

The iTOP programme is structured consecutively. We offer multi-day seminars for both beginners and advanced participants, as well as for prospective iTOP trainers. Our recall seminars enhance knowledge and provide additional motivation. iTOP also teaches communication strategies. Communication with the patient and with the team too are key to dental health. A further advantage of iTOP is the global coverage of our educational programme. Whether in Europe, Asia or North America, dental staff can benefit from the comprehensive solutions of our iTOP training.

I would like to recommend our iTOP workshop on 23 June in Basel in Switzerland to all dental hygienists. This is being held as part of the 2016 International Symposium on Dental Hygiene. We have invited top speakers from Ireland, South Africa, Canada and Switzerland to talk about their experiences with iTOP in their respective fields and how it has helped them to achieve sustainable oral health in their patients.