Implant pioneer Niznick returns to the market

By John Hoffman, Dental Tribune

Dr. Gerald Niznick is back in the market for dental implants. On October 1, his new company, Implant Direct LLC, received Food and Drug Administration approval to market its Spectra-System of eight implants, and Dr. Niznick expects the company to grab a sizeable share of the $2 billion implant market.

Dr. Niznick formerly owned Paragon Implant Company, which he sold to SulzerMedica for $102 million in 2001. When he sold his former company, Dr. Niznick signed an agreement not to compete in the implant market for five years. In 2004, Dr. Niznick formed his new company and rescued the former Paragon factory after the lease held by Zimmer Dental, which acquired SulzerMedica, expired.

Implant Direct hired 50 former Paragon and Zimmer machinists, engineers and quality control specialists, and this year, when Dr. Niznick’s agreement not to compete expired, Implant Direct’s team had grown to 85 and featured 26 new machines operating full time.

Dr. Niznick started his career by introducing the Core-Vent implant system in 1982. In 1986, he developed the Tapered Advent for one-stage surgery and the Screw-Vent for two-stage surgery and this year, when Dr. Niznick’s agreement not to compete expired, Implant Direct’s team had grown to 85 and featured 26 new machines operating full time.

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In an exclusive Dental Tribune interview, Dr. Niznick outlines his goals for Implant Direct and plans to capitalize on the rapid growth of dental implants, a market that is increasing at a 17 percent annual rate in terms of units sold and an even faster 25 percent clip in terms of dollar value.

From Oct. 3-7, approximately 5,000 oral and maxillofacial surgeons, guests, exhibitors and industry experts gathered in San Diego, Calif., to attend the 88th annual meeting of the American Association of Oral and Maxillofacial Surgeons.

“Attendees were enthusiastic about the educational program, the sold-out exhibition and the networking events,” said AAOMS Executive Director Dr. Robert C. Rinaldi, PhD, CAE.

The AAOMS offered a wide variety of scientific sessions, practice clinics and abstract sessions, in addition to hundreds of exhibitors with innovative and newly FDA-approved technologies.

Oral and maxillofacial surgeons from across the United States and Mexico made the trek to the event’s beautiful location of San Diego Convention Center and the San Diego Marriott Hotel & Marina. The event also attracted guests from Africa, Argentina, Australia, Austria, Bahamas, Belgium, Brazil, Canada, Chile, China, Colombia, Costa Rica, Egypt, England, Finland, France, Germany, Greece, Guatemala, India, Israel, Japan, Korea, Mexico, Netherlands, New Zealand, Panama, Philippines, Qatar, Saudi Arabia, Scotland, South Africa, Spain, Turkey and Venezuela.

For many of the attendees, it was an opportunity to meet up with old colleagues and friends.

“It’s wonderful to see my old friends here and have the opportunity to gather and be together,” said Dr. Robert “Bob” Christensen, DDS, FADMRE, of TMI Implants Incorporates, who has the little-known history of being the first to hold an implant patent.
For most, however, it was the draw of learning new and innovative procedures or discovering cutting-edge technologies that brought them to the meeting.

“The pre-conference Anesthesia Update was extremely popular, as were the Sim Man hands-on sessions offered throughout the meeting,” Dr. Rinaldi said. “Also popular were the keynote address by Capt. Gerald Cofalini, of the U.S. Navy, and the clinical sessions on bisphosphonate-related osteonecrosis of the jaw, dental implants and maxillofacial reconstruction.”

Scientific sessions, of course, focused on dental implant issues such as “Minimally Invasive Techniques for Dental Implant Reconstruction” by Dr. Michael Block and “Esthetic Zone Reconstruction: Synergy of Interactive CT/Hard and Soft Tissue Grafting” by Dr. Michael A. Pikos.

Practice clinics ran the gamut from “Advanced Coding Principles: Ensuring Accurate Reporting of Dental Care” by Dawn Jackson, MAEd, CCA-F, to “Benchmarking An Oral and Maxillofacial Surgery Practice” by John S. Bauer, MBA, FACPME, and Eric Haney, DDS of UCSF.

Two of the more notable sessions were:

• Periodontal plastic surgery for the implant patient: This session, by Anthony Sclar, DMD, of Miami, Fla., focused on items like the anatomic basis for periodontal plastic procedures; clinical relevance of Biologic width; principles of oral soft tissue grafting; and soft tissue grafting techniques. He also discussed the advantages and disadvantages of the VIP-CT flap, the advantages and disadvantages of Alloderm and his philosophy of care. “When the esthetic concerns in implant therapy demand inconspicuous dental and periodontal esthetics, the surgical site development procedures are by definition ‘plastic and reconstructive by nature.’” His special treatment planning considerations include dental history, periodontal biotype, the implant patient’s confidence!” she said.

Always an organization to look to for the future, the AAMOS had hula dancers on hand to invite doctors to next year’s meeting – in Hawaii! The event will take place Oct. 8-15 in Honolulu.

“We anticipate another exciting educational program and a full exhibition in a setting that can’t be beat,” Dr. Rinaldi said. “Information about the 2007 meeting will be posted on aaoms.org, the AAOMS Website, www.aaoms.org, as it becomes available.

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• The role of the implant coordinator in the oral and maxillofacial surgery practice: Donna Breeyear of the Washington Institute for Mouth, Face and Jaw Surgery spoke to a packed room about how an “implant coordinator” can greatly benefit any practice. Breeyear explained that the role of an implant coordinator includes: training and education of the clinical and clerical staff; patient (and significant others) education; training and education of the referring dentists’ staff; helping referring dentists to feel comfortable with implant therapy; inventory control; and interaction with implant manufacturers and their representatives. She described a four-level process that would help a practice develop this role. Benefits of having someone in this position included saving the doctor from expending time and energy that could be spent more productively; polishes of the image of the practice; promotes all aspects of the practice; raises the empowerment of the entire staff; increases profit of the practice; and increases money to be shared with personnel. “Your staff’s competence builds a patient’s confidence!” she said.

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