AO set to celebrate the big ‘30’

AO President Dr. Joseph Gian-Grasso offers sneak peek of the group’s 30th annual meeting

By Sierra Rendon, Managing Editor

A

O President Joseph Gian-Grasso, DMD, recently visited the site of Academy of Osseointegration’s 30th Annual Meeting and shares with Dental Tribune International highlights of what’s in store for attendees.

Where will this year’s meeting be?
The academy will return to San Francisco’s Moscone West Convention Center, a premier meeting location, for our 30th annual meeting from March 12–14. After making a recent visit to the site, I can assure you we could not have a better venue for this historic meeting. The center is adjacent to the Intercontinental Hotel and across the street from our headquarters hotel, the Marriott Marquis. For those who attended the 2004 annual meeting, it will be familiar — though updated and enhanced.

What’s the theme for this year’s meeting?
The theme for the 2015 annual meeting is “Science, Collaboration and Clinical Excellence for 30 Years.” The program will examine what the academy has learned during its 30-year history and summarise the evolution of root form implants from their introduction into
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Bioactive and Resorbable

OsteoGen® is a bioactive & resorbable calcium apatite crystal that is physicochemically similar to human bone.[1,2] The production process yields a unique Ca/P ratio that is NOT a β-TCP and NOT a dense ceramic HA, nor is it a biphasic mixture of the two.

Composition

Bioactivity

Structure

Radiodensity

Hydrophilic Crystal Cluster Structure

The crystallographic structure and geometry of a bone graft matters. OsteoGen® non-ceramic crystal clusters intertwine to form a hydrophilic 3D matrix leading to the immediate absorption of blood flow. This is critical for the initiation of bone formation, early angiogenesis and bone bridging even across 8.0mm critical size defects.[3,4]

Radiolucent to Radiopaque

The x-ray reveals when sufficient bone has formed and the site is ready for implant placement. OsteoGen® non-ceramic crystals are radiolucent on the day of placement & radiopaque in ~4-6 months following resorption and host bone formation.[5,6]

30 Years of Bioactivity

The OsteoGen® bioactive & resorbable crystal clusters control migration of connective tissue and form a strong bond with newly growing bone. This intimate contact results in better bone formation for implant support.[1,4]

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Radiographs courtesy of German Mulas DDS, ABS/ID
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rize current recommendations to address the most challenging conditions in implant dentistry. Annual Meeting Program Chair Dr. Donald S. Clem and his committee have created a storehouse of programs that will take what the profession has learned and show how we can apply these concepts in new ways to solve clinical conditions and dilemmas.

Keynote speaker for the annual meeting will be Dr. Daniel Alam, who was a member of the multidisciplinary team of doctors and surgeons at the Cleveland Clinic that performed the first near-total face transplant in the United States. More details about these individual presenters, as well as all sessions and speakers, are available on our website at www.aoseo.org. Take a few minutes to see for yourself the outstanding program that is in store for you in San Francisco.

Which country will be featured in a single-country symposium this year? South Korea. This symposium will be moderated by AO members Drs. David M. Kim and Brian M. Chang. All three organizations specializing in implant dentistry in South Korea — the Korean Academy of Oral & Maxillofacial Implantology (KAOMI), the Korean Academy of Implant Dentistry (KAID) and the Korean Academy of Osseointegration (KAOI) — have provided speakers for the AO Symposium.

It was my pleasure as AO president to travel to South Korea with Dr. Kim to plan the symposium. Our busy itinerary included visits with all the symposium speakers, as well as three outstanding dental schools and the leaders of the three South Korean organizations specializing in implant dentistry. We also visited excellent dental product companies and toured two very interesting private practices. The schools, the companies, and the practices were world-class.

Tell us about AO’s new E-Poster format. The academy’s annual meeting will feature the new E-Poster format for more than 310 e-Posters. The new format will allow the submitters to display their posters on the AO website and meeting app, in addition to presenting a poster during the poster sessions onsite. We are all very excited to be going digital.

In addition to the e-Posters, we had a record number of more than 75 submissions for oral clinical research presentations. Our judges are in the process of choosing the best submissions to be featured in one of the dental clinical and oral scientific sessions.

Are you excited about the AO President’s Reception? You bet! It’s complimentary to all registered guests and will take place Friday evening at the Exploratorium, founded by physicist and educator Frank Oppenheimer. The Exploratorium has been described by the New York Times as the most important science museum to have opened since the mid-20th century. Wikipedia describes it as ‘a mad scientist’s penny arcade, a scientific funhouse and an experimental laboratory all rolled into one. The participatory nature of the exhibits and its self-identification as a center for informal learning has led to it being cited as the prototype for participatory museums around the world.’

I know we’ll all have fun strolling through the galleries, tinkerimg with the interactive exhibits, while enjoying live entertainment as well as food and beverage stations displayed in various locations around the facility.

Any tips for those looking to enjoy San Francisco before or after the meeting? The academy has contracted with a local tour company to provide a tour desk available throughout the meeting and conveniently located in the Moscone West Convention lobby for attendees and guests to book specially discounted tours within the San Francisco area.

After the meeting, bring your family and journey north into Napa and Sonoma Valley, two of the most prized wine regions of Northern California, and enjoy wine tasting and exclusive estate tours. Stroll through 1,000-year-old ancient Redwood trees towering 250 feet at the famous Muir Woods National Monument and, on the way back before crossing the Golden Gate Bridge, stop at beautiful Sau- salito and stay for a few extra hours, and take the return ferry back to San Fran- cisco.

Of course, your trip to the Bay wouldn’t be complete without walking through Fisherman’s Wharf with its many fine dining establishments and unique shopping. It’s also where you can book a ferry to Alcatraz, formerly a maximum-security penitentiary and a great deal of interaction between AO’s new members and AO directors. I believe our younger clinicians will also really enjoy checking out “Young Clinicians” social event.

An evening at the Exploratorium, founded as the most important science museum to have opened since the mid-20th century. The Exploratorium has been described by the New York Times as the most important science museum to have opened since the mid-20th century. We’ve designed the 2015 annual meeting to include a large selection of sessions and activities to choose from, so you can customize a meeting experience that best suits you and your staff. Take a look at all events and register early to take advantage of discounted rates. Also, remember that certain sessions offer limited attendance — don’t wait to secure your place in these very popular sessions!

And please don’t forget to follow AO on Twitter and Facebook to keep up-to-date on new details and opportunities.

West Convention lobby for attendees and guests to book specially discounted tours within the San Francisco area.

Enjoy exploring San Francisco and Northern California in conjunction with the AO Annual Meeting.

*To see page 1.*
Canine study finds implant-abutment interface configuration may influence crestal bone changes

This study was published in the September/October issue of the International Journal of Oral and Maxillofacial Implants (JOMI), the official journal of the AO

Background
Current implant protocols require not only osseointegration but also high levels of soft-tissue stability and esthetics. Crestal bone changes and their impact on soft-tissue architecture are the most unpredictable and undesirable consequences of implant therapy, especially in the anterior maxilla. Hypotheses about the etiology of crestal bone remodeling around dental implants can be categorized into three main proposals: 1) mechanical factor that will disturb the surrounding tissues when occlusal forces are transmitted through the prosthetic component to the implant; 2) peri-implant inflammatory cell infiltrate caused by bacteria located at the implant/abutment microgap that will trigger crestal bone changes; and 3) adaptive response of the biologic width to the local condition not related to stress factors or inflammatory factors.

Key point
In this study, prototype test implants were fabricated to combine all current microgap and abutment profile variables. All implants integrated and there were no biologic or technical complications. The one-piece nonsubmerged implant design with a straight profile demonstrated the least crestal bone remodeling. Implant-abutment connections with a concave profile established crestal bone levels immediately apical to the concavity, regardless of the microgap variable.

Author
Dr. Santiago J. Caram, Department of Prosthodontics, Dental School, National University of Cuyo, Mendoza, Argentina, and colleagues

Purpose
Scientists aimed to evaluate the peri-implant tissue response around different implant-abutment interface configurations when compared side-by-side. Two different soft-tissue adaptation variables and three different microgap interface variables were analyzed.

Materials and methods
Six different experimental implant abutment design groups (A to F) were evaluated in six mixed-breed dogs: (A) straight/matching; (B) straight/nonmatching; (C) straight/one-piece; (D) concave/matching; (E) concave/nonmatching; and (F) concave one-piece. After three months of healing, standardized radiographs were taken and preformed titanium crowns were screw-retained to the top part of the abutments. Radiographs were taken every month for a period of six months. Dogs were fed a soft diet and implants were cleaned once each week with chemical and mechanical plaque control.

Results
All implants (72) integrated successfully and remained stable during the entire study period. When comparing radiographs of groups with straight profiles, crestal bone remodeling in Group C (one-piece design) was significantly less than in Group A (matching diameters) and Group B (nonmatching diameter) implant Group C (one-piece design) showed the least crestal bone remodeling of all groups. When comparing radiographs of groups with a concave profile but different microgap configurations, all three designs demonstrated bone loss with no significant differences among the three groups.

More information
For a complete copy of the study and the JOMI September/October “Table of Contents,” visit www.osseo.org/NEWJOMI.html. To join AO and begin receiving JOMI (bi-monthly) or obtain online access to JOMI, visit www.osseo.org/NEWmembershipApply.html.
Misch Institute offering two of its most popular courses in one weekend

By Misch International Institute Staff

The Misch International Institute has put together two of its most popular courses to create one great weekend at the fabulous Paris Hotel and Casino in Las Vegas on March 19-21.

This annual weekend course coincides with one of the most attended weekends in Vegas: the 2015 NCAA Basketball Final Four kick-off weekend.

CBCT (March 19)

Did you know:
• In a recent study, only 10 percent of patients who suffered nerve damage after implant placement had a CBCT prior to treatment?
• The average CBCT scan has approximately 3.2 incidental findings per scan?
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Learn about all of this and more at one of the most extensive, comprehensive courses on CBCT scans in the industry. The importance of understanding how to integrate CBCT scans into your practice is invaluable in today’s implant practice.

This course will give a thorough understanding of:
• Normal CBCT anatomy
• Interpretation of pathologic conditions
• Anatomic variant anatomy (i.e. anterior loop, sinus variants)
• Identifying mandibular nerve
• Treatment planning for surgical guides
• Surgical protocol for surgical guides
• CBCT-based immediate surgical guides
• Para-nasal sinus anatomy and pathology

Dental implant complications (March 19-20)

Dental implants have become the most common area of dental malpractice litigation in dentistry. Thus, it is imperative today for the implant dentist to have a full understanding of the complexities of implant dentistry. The dental complications course at the Misch Institute is composed of four areas over a two-day period: 1) Surgical complications, 2) prosthetic complications, 3) periodontal and failing implant treatment and 4) legal considerations in implant dentistry.

Topics include:
• Malpositioned implant placement
• Intra-operative complications
• Medical/medication/treatment-planning issues
• Ailing/failing implant
• Nerve impairment protocol
• Prosthetic complications (fixed and removable)
• Bone grafting
• Sinus grafting
• Legal implications

Don’t miss these two informative courses held in one entertaining location. Enroll in either course (discount for enrollment in both courses). Call (248) 642-3199 or visit online at www.Misch.com.
New from Impladent Ltd.: The TriStar Bone-Graft Fixation System offers the precision screw kit, titanium mesh and bone graft at affordable price

By Impladent Ltd. Staff

Impladent Ltd. introduces the innovative TriStar™ Bone Graft Fixation System featuring a unique self-drilling screw design and a number of bone-grafting accessories. Each starter kit includes the choice of 15 screws, three pieces of titanium mesh and two vials of bone graft, giving the clinician the most complete bone-graft fixation system available at a price point that is below many of the leading screw kits on the market.

There are a number of unique features that set the TriStar System apart from other fixation screw kits. First is the Impladent tapered SquareLock connection. The tapered square design on the screw head provides an ultra-secure fit that reduces slippage and allows the user to pick up and deliver the screw using only one tool, according to the company.

All of the screws in the TriStar system are self-drilling, eliminating the need to pre-drill a hole in the host bone. The longer titanium alloy screws feature a partially unthreaded and tapered section that serves two purposes: securing bone blocks and as an adjustable tenting screw. Blocks secured by fully threaded conventional screws will not properly compress the block against the host while the tapered design allows the clinician to adjust the height from 1-3 mm in tenting procedures.

Included in each kit is OsteoGen® Bioactive Resorbable Calcium Apatite and OsteoDemin™ Demineralized Human Allograft. OsteoGen and demineralized allograft have been successfully combined for more than two decades (first reported by Whitaker/Lozada).

OsteoGen controls migration of connective tissue and provides a slowly resorbing scaffold while the demineralized allograft provides the potential for osteoinductivity yielding an optimal environment for bone regeneration (Spivak 1990, Rucci 1992, Valen 2002, Whitaker 1989).

Each starter kit comes complete with 15 screws, three pieces of titanium mesh (18 x 25 x 0.1 mm) and two vials of bone graft — a real benefit considering that the complete kit has a retail value at or below many of its competitors, according to the company.

For more information and introductory specials on the TriStar Bone Graft Fixation System, visit www.impladentltd.com or call (800) 526-9343.

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At a glance

- Fixation of membrane with titanium pins
- Removal of pins made simple with pin holder
- Easy pin placement even in dense cortical bone

*Kit complete with 54 pins

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