The International Congress of Oral Implantologists (ICOI) will host its 2015 Winter Implant Symposium in Orlando, Fla. The venue for this symposium will be the commodious Orlando World Center Marriott Hotel. The dates for the annual symposium are Jan. 22-24.

The theme for this conference, as designed by Scientific Chair Dr. Avi Schetritt, is “Lessons Taught — Lessons Learned.” The faculty includes the following international lecturers: Drs. Jeffrey Babushkin, Joseph Carpentieri, Gordon Christensen, Mohamed Sherine El Attar, Scott Ganz, Rick Ferguson, Larry Grillo, Joseph Kan, Dwayne Karateew, Bach Le, Alan Meltzer, Michael Moscovitch, Ady Palsi, Michael Pikos, Mitra Sadrameli, Nigel Saynor, Gerard Scortecci, Marius Steigmann, Christian Stohler and international motivational speaker and retired professional hockey player Ryan Walter.

The educational objectives of this conference are many and varied. However, upon completion of this symposium, attendees will:

• Discuss the evolution of root form implants from their introduction into the profession today.
• Recognize impact of digital technologies on the practice of dentistry and dental education.
• Learn an extra treatment modality that avoids extensive surgery, both with immediate and delayed loading.
• Identify and discuss controversies in dental implants.
• Review the management of difficult implant situations.
• Understand how to achieve improved predictability for dental implant placement.
• Explore clinical attributes of screw-retained vs. cement-retained provisional implants.

Complementing the doctors’ program will be a two-and-a-half day program for staff members given by ICOI’s component, the Association of Dental Implant Auxiliaries (ADIA). The valuable training offered to the staff members has become a welcome addition to ICOI’s total continuing educational programs.

On Thursday morning, Jan. 22, delegates to this winter symposium should plan to attend one of several workshops that will be given by our sponsors, such as the hands-on course offered by Dr. Andrew Spector with platinum sponsor, MIS. This limited attendance course will focus on:

• See ICOI, page B3
ASTRA TECH
IMPLANT SYSTEM

Simplicity
without compromise

The design philosophy of the ASTRA TECH Implant System EV is based on the natural dentition utilizing a site-specific, crown-down approach supported by an intuitive surgical protocol and a simple prosthetic workflow.

- Unique interface with one-position-only placement for ATLANTIS patient-specific abutments
- Self-guiding impression components
- Versatile implant designs
- Flexible drilling protocol

The foundation of this evolutionary step remains the unique ASTRA TECH Implant System BioManagement Complex.

For more information visit
www.jointheev.com
Mark your calendar now for the AO’s 30th annual meeting, set for spring ’15

Science, Collaboration and Clinical Excellence for 30 Years” will be the theme of the 30th Annual Meeting of the Academy of Osseointegration (AO), to be held March 12-14 at the Moscone West Convention Center in San Francisco.

It will be an intense, three-day learning session for dental professionals interested in gaining cutting-edge insights and continuing education from some of the world’s most notable researchers and clinicians in the field of implant dentistry.

Among this event’s top new features are “Morning with the Masters,” a day-break education session, featuring lead- ing clinicians in the field, a symposium presented in English by seven prominent speakers from South Korea, and electronic posters where, for the first time, AO-member research will be presented on large flat-screen TV monitors instead of cardboard and paper.

The event’s keynote speaker will be notable facial plastic surgeon Daniel Alam, MD, who was a member of the multi-disciplinary team of doctors and surgeons at the Cleveland Clinic who performed the first near-total face transplant in the United States.

Follow AO on Facebook and Twitter to learn more, or visit www.aoes.org/futuremeetings.html.

Why did you become involved with AO?

I became involved with the AO early in its formation because I wanted to be affiliated with a group of individuals highly trained in continuing education and clinical developments of implant dentistry. I was a speaker for the annual meeting in 1987 in Dallas, where the attending audience was approximately 100. In recent years, the membership has grown exponentially to nearly 6,000 national and international members.

That’s because more and more dental professionals are recognizing the organization’s value and share in our mission to enhance oral health globally. I enjoy being surrounded by bright, inquisitive individuals who always are energized by being together. Topics presented at the annual meeting include cutting-edge technology and techniques that are published about in the journals one to two years later.

In the midst of electronic technology, the “AO corner” meeting of mentors, researchers and master clinicians is one of the most exciting aspects of the annual meeting. I’m already looking forward to next year — our 30th anniversary — that will take place in San Francisco.

Is there something that people might be surprised to know about you?

While I am usually serious in nature and business-oriented, I do have a very good sense of humor!

To learn more about the benefits of being an AO member, visit www.aoes.org/NewBenefitsOfMembership.html.

AO is working to bring specialists and general dentists together to ensure optimal patient care. Why is that so important now?

Many times the work of specialists and general dentists can be disjointed. This results in confusion and inefficient delivery.

What insights do you have for a woman in this field? What would you tell female students who are considering this career?

At the present time, many of the women entering the field of implant dentistry are part-time practitioners. This is often described as the father of modern dental implantology, in 1984, I participated with a team of surgeons and periodontists in the initial development of the dental implant program at UCLA School of Dentistry in 1985.

Since that time, I have been active in the organization of Osseointegration, particu larly dental implant education within the dental community and developing treatment options for patients.

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Simply Smarter Surgery
Neck Matched to Major Diameter
• Seals opening at crest of ridge reducing need for bone grafting

Micro-threads and Grooves
• Micro-grooves to improve tissue attachment and micro-threads to increase stability and reduce stress in crestal bone area

Cutting Edge of Grooves
Face Clockwise
• Three long grooves for self-tapping insertion

Apical 1/3rd Tapers 2°
• Slight body taper increases initial stability without over-compression and facilitates self-tapping insertion in dense bone

Rounded Apex
• Reduces risk during insertion of implant diverging from path created by drilling and the risk of sinus perforation

Reality Check
Nobel Customers
Save $525!

All-in-1 Packaging
Includes implant, cover screw, healing collar & new fixture-mount that provides simply accurate impression taking as well as functions as a preparable abutment—$225 SSB, $250 SIACTive™ surface
NobelActive® Compatible Conical Connection\(^1\) with Significant Design, Surgical, Packaging and Price Advantages

**IQify Impression Technique**
Patent pending fixture-mount design provides:
- The ease of a closed-tray impression
- The accuracy of an open-tray impression
- The versatility to create impression at either implant-level or abutment-level

**Simply Smarter Restorations**
**Matched Concave Transgingival Profile on Abutments & Components**
- Shape soft tissue for improved esthetics

**Compatible Abutments with Longer Hex/Shorter Bevel\(^2\)**
- Reduce the need to confirm seating with X-rays

**Two Color-coded Implant Platforms for Four implant Diameters**
- Restore more implants with a smaller prosthetic inventory and easily identify the correct size

---

**Diameters (mm)**
- 3.2
- 3.7
- 4.3
- 5.0

**Platforms (mm)**
- 3.0
- 3.4

**Lengths (mm)**
- 6
- 8
- 10
- 11.5
- 13
- 16

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Reality Check Savings:
- $107
- $109
- $95
- $132
- $103
- N/A
Study exploring accuracy of impression techniques finds partial vs. complete edentulism may be a factor

This study was published in the July/August issue of The International Journal of Oral and Maxillofacial Implants (IOMI), the official journal of the Academy of Osseointegration (AO).

Background
An accurate implant impression is necessary to generate an accurate cast, which is the milestone for the fabrication of a precisely fitting prosthesis. Several clinical and laboratory variables can affect the accuracy of an implant cast, with one of the most significant being the impression procedure. Although various implant impression techniques have been used to generate a definitive cast, the body of evidence shows controversy over which technique is most accurate. Furthermore, a previous review on accuracy did not account for partially vs. completely edentulous patients but reported on them collectively.

Key point
The splinted technique was more accurate than nonsplinted for both partially and completely edentulous patients, while the open-tray technique was more accurate than closed-tray for completely edentulous patients but not significantly more accurate for partially edentulous patients. Impression materials did not affect the accuracy of implant impressions. Implant angulation greater than 20 degrees affected accuracy of impressions for both partially and completely edentulous patients. The dental literature provides insufficient data for the effect of implant connection type on accuracy and on digital impression techniques.

Author
Dr. Panos Papaspysrdakos, Division of Postgraduate Prosthodontics, Tufts University School of Dental Medicine, and colleagues

Purpose
Seeking to evaluate the accuracy outcomes of digital and conventional impression techniques for partially and completely edentulous patients separately, researchers conducted a systemic review. They also sought to assess the effect of different variables — materials, angulation and connection type — on the accuracy of implant impressions.

Materials and methods
A systemic review of the evidence was performed by searching publications indexed in the MEDLINE/PubMed, EMBASE and CENTRAL databases from Jan. 1, 1980 to Sept. 1, 2013, and supplemented with a hand search of the literature. Information extracted and assessed from the articles included: study design, edentulous jaw, implant number, impression technique, connection type, abutment angulations, accuracy method implant brand, splint method, splint material, impression material and the results of impression accuracy.

Results
Of the 88 articles selected for full-text reading, 76 studies were ultimately selected for inclusion in the research — four clinical and 72 in vitro. Studies were grouped according to edentulism status. A total of 41 studies were investigations of impressions for completely edentulous patients. For partially edentulous patients, 35 studies were found. Of the research on completely edentulous patients, most in vitro studies and three clinical studies demonstrated better accuracy with the splinted (15) vs. the non-splinted technique (1), and nine showed no difference. One clinical study and half of the in vitro studies reported better accuracy with the open-tray (10) vs. the
closed-tray technique (i), and 10 showed no difference. For partially edentulous patients, one clinical study and most in vitro studies showed better accuracy with the splinted (8) vs. the nonsplinted technique (2), and three studies showed no difference. The majority of in vitro studies showed better accuracy with the open-tray (10) vs. the closed-tray technique (i) and seven studies showed no difference. The only clinical study reported no difference.

More information
For a complete copy of the study and the JOMI July/August “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/NEWJOMI.html.

About the International Journal of Oral & Maxillofacial Implants
This journal integrates clinical and scientific data to improve methods and results of oral and maxillofacial implant therapy. It presents pioneering research, seminal studies, emerging technology, position papers and consensus reports, as well as the many clinical and therapeutic innovations that ensue as a result of these efforts. The editorial board is composed of recognized opinion leaders in their respective areas of expertise and reflects the international reach of the journal. It is published by Quintessence Publishing and is the official journal of the Academy of Osseointegration.

Do you know enough about the implant company you work with?

By DENTSPLY Implants Staff

Dental implant technology continues to evolve and grow through continued advancements in implant-to-abutment interface design, surface treatment, digital technology and patient-specific solutions. These developments have helped to simplify procedures, reduce treatment time, ensure more long-term and optimal outcomes and, ultimately, contribute to a higher level of patient satisfaction.

With these developments, new solutions and new companies are also continuing to emerge at a rapid pace, often making it more difficult to know what is the right choice for your practice and your implant patients. Some aspects to consider when choosing an implant partner may include:

• How long has the company been on the market?
• How much focus and resources does the company place on the research and documentation behind its products?
• What personnel and support are available to you in your product use and practice development?
• Is the company actively introducing new technologies and leading innovation and change?
• Will the company and products be around — not only today but tomorrow — when you need them?

These are all critical aspects to consider because, in most cases, patients will rely on you for their long-term care. In turn, you should have the confidence that your implant provider will be there for you throughout the entire journey.

DENTSPLY Implants is based on a solid foundation of 40 years of expertise, knowledge and experience in all relevant fields and technologies of implant dentistry. Its comprehensive portfolio of solutions for all phases of implant therapy is designed to support its commitment to providing simplicity to its customers and is backed by extensive documentation, according to DENTSPLY.

The convenience of a “one-stop-shop” for implant treatment is delivered through the availability of solutions for digital treatment planning (SIMPLANT®), regenerative preparation of the implant site (SYMBIOS®), implant system options that include an internal conical connection (ANKYLOS® and ASTRA TECH Implant System™) or an internal flat-to-flat connection (XIVE®), and patient-specific restorations (ATLANTIS™) for cement-, screw- and attachment-retained implant-supported prostheses.

The launch and introduction of ASTRA TECH Implant System EV is another example of the company’s innovation. The system provides many enhancements and innovations that help simplify the implant process, including a user-friendly surgical tray with three interchangeable overlay options, self-guiding impression components where only one hand is needed and a one-position-only placement design for ATLANTIS patient-specific abutments.

So what are you looking for in an implant company? If a strong history of experience and expertise, documented success, comprehensive solutions for all your implant needs and products and services of the highest quality matter to you, take a closer look at DENTSPLY Implants.
Think of us as the **tooth fairy**

*(Without the sneaking into your house part)*

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- Higher approval rates so more patients can get the treatment they need
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- Plans from 24 to 84 months for greater affordability

Plus save up to 20% a month in practice fees on No-Interest Plans!

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1. 3 out of 4 practices say our approval rates are as good to much better “than the other guys”. Based on a September 2014 Springstone Patient Financing sponsored survey of dental practices that originated multiple plans through Springstone Patient Financing in the previous six months.
2. The APR ranges from 3.99% to 17.99%. For example, a loan for $10,000 with an 8.99% APR for 72 months will have a monthly payment of $181. The APR will be determined based on the applicant’s credit at time of application. All loans made by NBT Bank, N.A., Member FDIC, Equal Housing Lender.
3. Publicly available data for other patient financing solutions as of July 2014. For example, the practice fee is only 7.9% for a 12-month No-Interest Plan, for amounts over $4,000. No-Interest Plans are no interest if paid in full within the no-interest period. For plan details, visit springstoneplan.com.