1922nd Conference

August 2018 | Volume 6 | ISSN: 2332-0702 Journal of Oral Hygiene & Health

Proceedings of

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS AUGUST 17-18, 2018 TOKYO, JAPAN

CONFERENCE SERIES LLC LTD

47 Churchfield Road, London, W3 6AY, UK

Contact: 1-650-889-4686 Email: endodontics@conferenceint.com | orthodontics@conferenceint.com

1922nd Conference

ANNUAL CONGRESS ON

ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS

AUGUST 17-18, 2018 TOKYO, JAPAN

Page 11

Keynote Forum Day 1

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, **PROSTHODONTICS AND DENTAL IMPLANTS**

AUGUST 17-18, 2018 TOKYO, JAPAN



Tuong Nguyen Nguyen

Case Western Reserve University, USA

Surg and rescue: Saving the natural implant through modern minimally-invasive, laser-assisted apical microsurgery

s dentists, our goal should always be to save the natural tooth or "natural implant." Extraction should only be the last A resort. Adequate training, experience through continual practice, and specialized equipment provide the adequate context to address cases that represent an unusual challenge. In the case of complex anatomy where the root apex cannot be properly cleaned and periapical healing cannot be obtained, the dentist or endodontist is faced with the challenges of diagnosing properly, planning adequately and executing effectively without causing unnecessary harm to the patient. In such cases, apical microsurgery is recommended to complement the orthograde endodontic treatment, with the ultimate goal of saving the natural tooth. It is unfortunately not uncommon to find general dentists and endodontists recommend against apical surgery due to lack of training or practice and therefore fear of performing apical surgery. This fear factor is enhanced even further with the concern of causing further harm to structures such as the sinus or mental foramen. In addition, apical surgery is often underestimated as to its ability to induce periradicular healing. Such concerns could be much alleviated if accuracy and effectiveness is warranted when performing such procedure. Even though CBCT is highly accurate in all 3 dimensions, its high cost deters many clinicians from owning such technology and using it in their day-to-day practice. CBCT scans improve accuracy in visualization of apical pathosis, critical anatomical structures (mental foramen, sinus) and root anatomy. Additional benefits include effectiveness in locating all main root canals, analysis of resorptive lesions and pre-surgical assessment prior to apical surgery. Effectiveness is enabled through the use of the Er,Cr:YSGG iPlus laser. Laser irradiation provides an extremely precise cut through the interaction of laser energy with the tooth surface. Its optimal zone of ablation lies within 2 to 3mm from the laser tip. Therefore, when the iPlus laser is coupled with enhanced magnification, the clinician is capable of delivering an unrivaled level of precision. In addition to precision, the iPlus is also known to be superior to mechanical methods in eradicating bacteria from dentinal tubules at a depth of 1000µm; when applied to the removal of the root apex, accelerated post-surgical healing can be attributed to the laser's ability to remove the smear layer and its excellent bactericidal potential. Fianlly, the minimally-invasive effect of the Er,Cr:YSGG iPlus laser is undeniable. The level of cell necrosis is 30:1 ratio when comparing the scalpel to the Er,Cr:YSGG laser. Diode lasers on the other hand are well known for their ability to induce biostimulation, also known as LLLT or Low Level Laser Therapy. In such process, low levels of laser energy enhance healing while decreasing the deleterious effects of inflammation and therefore unnecessarily prolonged periods of pain. In sum, the Er, Cr:YSGG iPlus and diode EpicX lasers paired with CBCT technology and the Dental Operating Microscope, should be more widely taught and used in endodontics. Unfortunately, poor training and misuse of these devices have led to misunderstanding and suspicion of their true capabilities. A combination of open-mindedness and concerted educational effort is needed from educators, researchers, clinicians and vendors to provide our patients with the modern technology that they deserve at the dawn of the 21st century. In this lecture, Dr. Nguyen will demonstrate the scientific evidence, indications, clinical step-by-step and tremendous patients benefits of laser-assisted apical microsurgery. Clinical cases and videos will be used to illustrate the principles

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS AUGUST 17-18, 2018 TOKYO, JAPAN

Upon completion of the session, attendees shall be able to

- 1. Adequately treatment plan for orthograde retreatment versus apical surgery
- 2. Understand the basic foundation of conventional apical surgery
- 3. Understand the benefits and clinical steps of laser-assisted apical surgery
- 4. Integrate the Dental Operating Microscope and CBCT as part of the endodontic surgical armamentarium
- 5. Understand Return On Investment for the Dental Operating Microscope, CBCT and laser technology

Biography

Tuong Nguyen Nguyen has earned his Bachelor's degree in Dental Sciences in 1997 from the Catholic University of Louvain in Brussels, Belgium. He subsequently earned his Certificate in Clinical Endodontics and Master of Science in Dentistry degree in 2001 from Case Western Reserve University in Cleveland, OH. He was a full-time Assistant Professor in the Department of Endodontics at the University of Maryland from 2001 to 2004 and at the Oregon Health and Science University from 2004 to 2008. He is the Founder of Polaris Dental Specialists and the Love All Foundation. He currently practices at Polaris Dental Specialists, a multi-speciality practice in Beaverton and Salem, OR, USA. He is a Master at the World Clinical Laser Institute and Adjunct Professor of Endodontics at Case Western Reserve University.

drnguyen@polarisdentalspecialists.com

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, **PROSTHODONTICS AND DENTAL IMPLANTS**

AUGUST 17-18, 2018 TOKYO, JAPAN



Kenneth K H Cheung

Morgan Street Dental Centre, Australia

Management of a challenging case involving treatment planning and restoration of an implant-supported mandibular full-arch hybrid bridge

This is a case presentation of a 70 years old male who presented at my dental clinic with the following oral complaints: History of implant failure, poor aesthetics, loose and uncomfortable existing removable dentures, failing implants. Dentistry can be full of surprise and challenges. The aim of this oral presentation is to explain the complications aroused during implant treatment for this patient and discuss how this case was managed in an evidence-based approach. List of complications encountered are presence of peri-implantitis in the existing MIS implants, maxilla and mandible atrophy, limited inter-occlusal distance, early implant failure with new Straumann implants, wrong selection in the type of dental implants, Non-parallel implants placed, challenge in impression procedure, limited parts available from the implant supplier, poor access for hygiene maintenance.

Biography

Kenneth K H Cheung maintains a private dental practice in NSW Australia, emphasizing on aesthetic, implant and restorative dentistry. After completing his Degree at University of Toronto, he completed his dental degree from University of Western Australia. He has also received his Postgraduate Certificate from University of Adelaide, Post-Graduate Diploma in Oral Implantology from University of Sydney and Masters in Aesthetic Dentistry from University of London. He has published a case report on Inman Aligner and a literature review on "treatment planning considerations for cemented versus screw-retained single tooth dental implant restorations in aesthetic zones" in the Journal of Implant & Advanced Clinical Dentistry.

Kenneth_hk1@hotmail.com

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS AUGUST 17-18, 2018 TOKYO, JAPAN

Golmoradizadeh Ali

University of Philippines, Philippines

The effect of ultraviolet photo functionalization on surface and torsional strength of different orthodontic mini implants

The mini-implants are an adjunctive device that can be inserted into specific intraoral bony structures to provide anchorage to prevent unwanted tooth movements. The use of mini-implants as temporary anchorage devices has grown to be a valuable component of orthodontic treatment. Mini-implants have expanded treatment possibilities by decreasing dependence on patient compliance, reducing unwanted tooth movements and facilitating previously unattainable or difficult tooth movements. Ultraviolet (UV)-mediated photo functionalization immediately before use, by a combination of UV-A and UV-C for aging the titanium surface, is a recently reported method of surface modification of titanium to increase its biologic capacity. It is characterized by remarkable efficacy, unique mechanisms and a simple delivery method. The present *in vitro* study was undertaken to investigate the influence of the effect of photo functionalization and its effect on the initial stability. Therefore, the aim of this study was to evaluate the effect of ultraviolet light treatment of titanium or photo functionalization on surface carbon content and on torsional strength of untreated and photo functionalized orthodontic mini implants. Also, to compare the effect of photo functionalization time on torsional strength between untreated and 7 minutes photo functionalized and 15 minutes photo functionalized orthodontic mini implants. The effectiveness of photo functionalization has been proven for all surface topographies tested. The technology does not alter the existing topography, roughness or other morphologic features of the implants and is categorized as neither an additive nor a subtractive method.

Biography

Golmoradizadeh Ali has obtained Doctor of Dental Medicine degree from Centro Escolar University in 2013 and MS Orthodontics from University of Philippines. He is a Faculty Member of University of Hormozgan, Iran, Succefully completed one-year Research Fellowship course and is an Associated Editor of *Journal of Evaluation of Medical and Dental Sciences*.

Ali2ph@yahoo.com

1922nd Conference

ANNUAL CONGRESS ON

ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS

AUGUST 17-18, 2018 TOKYO, JAPAN

Page 29

Keynote Forum Day 2

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, **PROSTHODONTICS AND DENTAL IMPLANTS**

AUGUST 17-18, 2018 TOKYO, JAPAN



Yoshiro Fujii

Shin-Kobe Dental Clinic, Japan; International College of Acupuncture and Electro-Therapeutics, USA

The influence of endodontics and prosthodontics on the whole body

There is a close rerationship between oral condition and whole body health. I would like to report the cases which dental L treatment was effective for whole body. Improvement of motor function improved by especially endodontics and prosthodontics. In terms of endodontics, focal infection (Odontogenic bacteremia) and neuroimmunology may be most common mechanism for dentistry for the whole body health. On the other hand, prosthodontics is directly effective on the whole body health bacause the normal occlusal situations is very important to keep body health or improve sports performance. I would like to share the cases of arthoritis, Parkinson's disease and other whole body sicknesses which might be cured by endodontics and extraction teeth. Prosthodontics is the main method to keep or restore the occlusal situation. I would like to share the cases that the dental treatment for Alzheimer disease, bed ridden, hemiplegia after cerebral infarction by means of the artificilal teeth, and sports dentistry.

Biography

Yoshiro Fujii is a CEO of Shin-Kobe Dental Clinic. 1985 He got Koide prize 1985 (Aichi Gakuin University) and D.D.S., 1989 Finished Graduate School and Ph.D. 2000 Start to run Shin Kobe Dental Clinic (Kobe, Japan). 2009 Fellow of the international college of acupuncture and electro-therapeutics (F.I.C.A.E). 2013, 14: 100 next era CEOs in Asia (Japan Times). 2015: 100 Next-era Leaders in Asia (Japan Times). He was a chairman of Dental meeting 2018 in Tokyo. He is an associate professor of international college of acupuncture and electro-Therapeutics, NY, USA

shin-kobe-dentalclinic@s9.dion.ne.jp

ANNUAL CONGRESS ON ENDODONTICS, ORTHODONTICS, PROSTHODONTICS AND DENTAL IMPLANTS AUGUST 17-18, 2018 TOKYO, JAPAN



Short implant

Clinical choice of the most appropriate implant therapy modality should be based on assessment of the residual alveolar bone height, width and sinus morphology with a Cone Beam Computed Tomography (CBCT) scan, current scientific evidence, surgical skills and experience of the surgeon and the patient's preferences. Following a good surgical protocol and excellent oral hygiene maintenance program are fundamental elements in achieving a successful and predictable outcome. The available evidence on short dental implants in early research was not significant comparing with the longer dental implants; the surface treatment is improving now than before for this reason. The use of short implants allows treatment of patients who are unable to undergo complex surgical techniques for medical, anatomic or financial reasons. By reducing the need for complex surgeries short implants reduce morbidity, cost and treatment time. Recently short implants offer a less invasive treatment alternative in resorbed ridge cases.

Biography

Hassan H Koshak is Consultant in Periodontics and Implant Dentistry. He is the Head of the Dental Department and Dental Educator, Director of Academic and Education Affairs at Comprehensive Specialized Polyclinic, Ministry of Interior, Security Forces Medical Services, Jeddah, Kingdom of Saudi Arabia, where he has been since 2016. He has received a Saudi Fellowship in Dental Implant from the Saudi Commission for Health Specialties (2014-2016), received a Saudi Board in Periodontics from the Saudi Commission for Health Specialties, (2012 -2014) and received his Master of Science in Dentistry (MSD) and a Clinical Certificate in Periodontics from Riyadh Colleges of Dentistry and Pharmacy (2009-2012), Riyadh, KSA. He has obtained his Advanced Education in General Dentistry (AEGD) from University of South California School of Dentistry (2006-2008) and completed his Bachelor of Dental Medicine and Surgery (BDS) from Faculty of Dental Medicine and Surgery, King Abdul-Aziz University, Jeddah, KSA.

koshak.hh@gmail.com