2016 Annual Meeting program emphasizes AO’s global reach, features innovative sessions

2016 Annual Meeting Program Chair Dr. Peter K. Moy, Los Angeles, CA, and his committee have developed a program emphasizing AO’s global reach that encourages members outside the U.S. to attend the meeting and affords our American members a rich opportunity to learn from the best practices performed in our focus country, China, and around the globe. Nearly half the speakers come from outside the U.S. and very few have appeared on recent AO programs.

Program highlights include:
• A new “Hands-on Workshop” on a new day, Wednesday afternoon, for the first time gives attendees an opportunity to arrive a day early and gain hands-on experience with the latest technologies and innovations from five of our corporate partners;
• “Focus on China Symposium,” presented in English by top Chinese practitioners in implant dentistry (and translated into Mandarin), the third of the Academy’s feature programs dedicated to a single country, follows the success of similar programs from Japan (2014) and South Korea (2015);
• A new special lecture series for young clinicians, featuring Michael Ragan, DMD, JD, Miami, FL, will provide very practical guidance on many of the medical and legal challenges new dentists face that are rarely covered in the dental school curriculum;
• An all-new program Friday featuring teams from Hong Kong, mainland China, and The Netherlands provides a global perspective on the importance of the team approach in managing the esthetic zone.

Dr. Moy and AO President Dr. Russell D. Nishimura, Westlake Village, CA, have chosen the program theme, “Globalization of Implant Dentistry: A World Collaboration,” to reflect the Academy’s goal to be world’s premier organization for exchange of scientific and clinical knowledge in implant dentistry. The Annual Meeting will be held Wednesday, February 17, through Saturday, February 20, at the San Diego Convention Center, San Diego, CA.

Dr. Moy returned from two trips to China this year deeply impressed with the quality of dental implant care available there. “Their skill levels and knowledge levels....continued on page 3
President’s Message

It is an exciting, transformational time for AO

By Russell D. Nishimura, DDS

It is an exciting and transformational time for the Academy of Osseointegration. Implant Dentistry is expanding on a global scale. Our world membership should be approaching 6,000 members from over 71 countries. The theme of the upcoming AO Annual Meeting reflects these developments: “Globalization of Implant Dentistry: A World Collaboration,” February 17-20, 2016, in San Diego, California, USA.

Dr. Peter Moy and the 2016 Annual Program Committee have assembled the leading authorities from around the world to present the latest in dental implant research and education. The Welcome Reception at the outstanding San Diego Convention Center and the President's Reception at the San Diego Air and Space Museum will provide the perfect social events to meet old friends and make new ones from around the world.

The AO Annual Meeting is a tremendous value, as the registration includes the evidence-based scientific program, expansive exhibitor’s hall, lunches on Thursday, Friday and Saturday and two great evening social events. AO membership and Annual Meeting fees are among the lowest in organized dentistry.

The ease of transportation to San Diego, restaurants, shopping and the diverse variety of recreational activities will all contribute to what I expect will be a record setting attendance. I personally invite you and any guests, if not members, to join AO and attend the Annual Meeting. It is recommend you make your registration and hotel reservations now to ensure you have the best opportunities to enjoy all of the benefits of AO membership, including attending the AO Annual Meeting in San Diego.

The Board of Directors has finalized and initiated implementation of the new strategic plan that will guide the organization over the next three years and into the future. This process exemplifies AO’s moniker of “Advancing the Vision of Implant Dentistry.” The mission of AO is to improve oral health by advancing the science, ethics, and practice of implant dentistry and related technologies, and to support the professional needs of its members worldwide. The strategic domains of education, quality, member value and patient awareness were identified and will shape the activities of AO in the coming months. This includes the planning of future annual and focus meetings, various committees being charged to initiate work on these domains, and a commitment to always improving the value of AO membership.

New and enhanced certificates have been approved to reflect quality of AO membership. AO members for three or more consecutive years as well as all AO Fellows will receive the new certificates upon verification of their personal information for the new certificates. The applications will be ready soon for the new AO Certificate in Implant Dentistry. Please look for the announcements when the certificates and applications are available.

The AO website will undergo significant upgrades and will provide benefits for both members and their patients. The member website will feature improved navigation and will be more intuitive. There will be a separate website for patients to improve access to information on dental implants and potential referrals to AO members. Future plans include increasing materials and content for posting on the websites. The AO webinars have been well received and will continue in the future.

I recently attended meetings in Korea, China, and Japan. I had the opportunity to meet with key opinion leaders, researchers, and educators. Their enthusiasm to share implant experiences were matched by the extent of their clinical care and research. As an individual limited to just one language, English, I was humbled that they extended themselves to speak English to me as a second or even third language. This is a common attribute for many AO members, whether they are from Asia, Europe, South America or anywhere outside of North America. Though English is the official language of AO, implant dentistry is multilingual and multinational. It is important that we all look past accents and minor translational nuances in our presentations or conversations and instead focus on the content and quality of the materials being discussed. Research and education are universal and provide essential links that unite our entire AO membership.

Drs. Lyndon Cooper and Donald Clem resigned as Directors and Drs. Jeffrey Lloyd and Joerg Neugebauer were appointed by the Board of Directors to serve out their terms. Drs. Cooper and Clem provided great skills and insights as Directors and have committed to serving AO whenever possible in the future. The Board of Directors and I thank Drs. Cooper and Clem for their service as Directors and welcome Drs. Jeffrey Lloyd and Joerg Neugebauer as new Directors. Jeff is an exceptional individual who has served the Academy in multiple ways, including past Chair of the Membership Committee. Joerg has also has held multiple AO positions including Chair of the Clinical Innovations Subcommittee and Continuing Education Oversight/Advisory Committee.

The Academy of Osseointegration is the premier implant organization supporting innovative activities that are both numerous and diverse. The AO committees and their chairs working with our dedicated staff are integral to our success. IJOMI is always considered one of the most valued member benefits, and Dr. Steven Eckert, Editor-in-Chief, and all of the other editors deserve recognition for their efforts as well. It has never been a better time to be a member of AO, and I urge you to take pride in being part of this dynamic organization.
AO returns to San Diego after a 7-year hiatus

By Kevin P. Smith, MA, MBA, Executive Director

On February 17-20, 2016, the Annual Meeting of the Academy of Osseointegration returns to San Diego after seven years. The 2009 San Diego Annual Meeting remains the second highest attended in the Academy’s 31-year history. Registrations for this year’s meeting are coming in very strong, as our members are excited about the program and all that San Diego has to offer.

The Annual Meeting will be held at the San Diego Convention Center, with our meeting hotels just a short block away at the Marriott Marquis San Diego Marina (Official Headquarters Hotel) or the Hilton San Diego Bayfront. Both hotels are within a few short blocks of San Diego’s downtown area, known as the Gaslamp Quarter, a 16-square-block area housing more than 100 of the city’s finest restaurants, pubs, nightclubs, and retail shops.

While attendees participate in the Annual Meeting, their families have many fine local attractions to choose from – many conveniently located within a short walking distance. Some of the most popular attractions include the Gaslamp Museum at the Davis-Horton House, the educational exhibitions at the New Children’s Museum, the U.S.S. Midway Museum (an actual World War II combat aircraft carrier) and the trendy shops in Seaport Village. A trolley provides easy access to Balboa Park and the San Diego Zoo, and Sea World is only a short distance away.

Other options include a gray whale watching excursion to see some of the 20,000 gray whales that make a 10,000 mile round-trip journey from Alaska to the lagoons of Baja California each year; a tour of local wineries; or a visit to nearby La Jolla, where there are many chic shops or you can hike through trails at Torrey Pines and explore the tide pools and coves of the La Jolla shores.

Friday night’s President’s Reception will be hosted at the exciting San Diego Air and Space Museum. This highly-anticipated event will once again provide an educational and fun-filled evening, offered complimentary to all registrants. See old friends and connect with new members as you stroll through the exhibits and stop at the many food and beverage stations located throughout the facility. The San Diego Air and Space Museum is one of only ten aerospace museums in the country to be affiliated with the Smithsonian Institution.

AO attendees will be able to guide themselves through the many exhibits by viewing the history of flight via placards and signs, as the museum is divided into many galleries with exhibits emphasizing the contributions San Diego has made to aviation. Sections include the Theodore Gildred Rotunda, Special Exhibit area, World War I Gallery, Golden Age of Flight Gallery, World War II Gallery, Modern Jet and Space Age Gallery, and the Edwin D. McKeller Pavilion of Flight. Complimentary transportation to and from the event and AO hotels will be provided.

The 31st Annual Meeting of the Academy of Osseointegration will have so many exciting educational, networking, and social opportunities that you won’t want to miss it. So mark your calendar, February 17-20, 2016, register for the meeting today, and plan to bring your family. Looking forward to seeing you in San Diego!

2016 Annual Meeting Program...continued from page 1

are just as high as ours,” Dr. Moy says. He set out to create a program that would attract attendance of non-American members and encourage American members to experience and learn from the best practices overseas.

One purpose of Wednesday’s Hands-on Workshop will be to serve the desire of attendees to improve upon their technical skills. It will add a vital new dimension to the Annual Meeting program, most of which focuses on presentation of “the latest information on all aspects of implant dentistry, emphasizing the team approach,” according to Dr. Moy.

Thursday’s keynote speaker at the Opening Session, “Risk vs. Rewards in Implant Dentistry,” will be Dr. Frank Spear, Seattle, WA, one of the premier educators in esthetic and restorative dentistry. Dr. Spear’s topic is “Globalization of Training, Education and Comprehensive Collaborative Treatment Planning in Implant Dentistry: Understanding the Risks and Rewards,” emphasizing the importance of treatment planning and collaboration between dental implant team members.

Following Dr. Spear, Opening Session programs are:

- “Risks and Rewards of Grafting with Growth Factors/Biologics”: Henning Schliephake, DDS, MD, PhD, Gottingen, Germany;
- “Risks and Rewards of Not Grafting”: Franck Renouard, DDS, Paris, France;
- “Risks and Rewards of Bone Augmentation Procedures”: Dehua Li, DMD, PhD, Xi’an, China;
- “Risks and Rewards of Guided Surgery and Prosthetics”: Alessandro Pozzi, DDS, PhD, Rome, Italy.

Drs. Pozzi and Li will also participate in “Morning with the Masters” sessions the next morning.

A recent program innovation, “Morning with the Masters,” starts the Friday program bright and early at 7 a.m., with smaller and more intimate concurrent one-hour sessions “with world-renowned experts to give you very important information you can take back to the office and use immediately,” says Dr. Moy.

“The entire 2016 program emphasizes the team approach,” says Dr. Moy, “knowing full well that some specialty...continued on page 5
The Densah® Bur is based on a new technology for osteotomy preparation that we have called “osseodensification”. Unlike traditional bone drilling technologies, osseodensification does not excavate bone tissue. Rather, it preserves bone bulk so bone tissue is simultaneously compacted and auto-grafted in an outwardly expanding direction to form the osteotomy.

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500 participate in AO’s third symposium at the 2015 FDI World Dental Congress

By Dr. Michael R. Norton, Chair, Committee on Global Program Development

The activities of the GPD committee have been less frenetic in the last few months. However, on September 23 we ran our third FDI/AO sponsored symposium at the Annual World Dental Congress in Bangkok, Thailand, titled “Current complexities in implant dentistry.” The three regional AO Members selected to speak at this year’s symposium were:

- **Takashi Sumi**, DDS, PhD, Aichi, Japan,
- **Terry Walton**, BDS, MDSc, MS, Sydney, Australia,
- **SunJong Kim**, DDS, MSD, PhD, Seoul, South Korea.

Dr. Terry Walton moderated the session, for which there was a capacity crowd of 500 people. Each speaker had a 40-minute presentation, and the session concluded with a one-hour panel discussion.

Dr. James C. Taylor, Ottawa, Ontario, Canada, AO’s Treasurer, continues to work closely with FDI to ensure that AO remains the “go-to” voice for all global matters pertaining to evidence-based implant dentistry. He has developed a campaign plan for the Board, providing AO’s future strategic formula for our ongoing close relations with FDI.

In other matters, plans for the collaborative outreach meeting in South Africa are progressing and the dates have been confirmed as November 4-5, 2016. Our esteemed 2016-2017 President, Dr. Alan S. Pollack, New York, NY, will be joined by four AO Members who will be speakers at this key regional event. They are:

- **Marco Degidi**, DDS, MD, Bologna, Italy
- **Zeev Ormanian**, DMD, Ramat-Gan, Israel
- **Robert Noelken**, DMD, DDS, Lindau, Germany
- **Mete Fanuscu**, DDS, Istanbul, Turkey

The organizing committee is led by SAAO Vice President and AO member Dr. John Bronner, BChD, MChD, MSc, Pitermaritzburg, S. Africa.

Elsewhere in the world, we are making some progress with developing a Mexican Charter Chapter, having established good dialog with Dr.

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organizations are emphasizing ‘single provider’ concepts. Even if you are moving towards this, it remains critically important for the single provider to understand the principles that guide the surgical and restorative aspects of implant dentistry,” he adds.

“Friday morning’s sessions on managing the esthetic zone feature teams from mainland China, Hong Kong, and The Netherlands, followed by an afternoon session on team management of edentulous patients.” A concurrent session Friday morning addresses when to perform surgical treatment and when to perform prosthetic treatment in highly demanding esthetic zone cases.

Friday afternoon’s session on management of edentulous patients pairs three outstanding restorative and surgical dental implant teams. Each of the teams will address a specific edentulous situation: the edentulous arch, partially edentulous patient, and the single-missing tooth patient.

Friday afternoon’s “Focus on China Symposium,” the third of the Academy’s feature programs dedicated to a single country, is titled “Implant Dentistry in China.” Presented in English (with translation in Mandarin), it will provide an overview of how implant dentistry is practiced in China and feature scientific presentations from five top speakers:

- “Clinical Outcomes with Immediate Loading of Zygomatic Implants in 188 Patients: a 10-Year Report”: **James Chow**, MBBS, BDS, Hong Kong, China;
- “Long-term Results after Lateral Sinus Floor Elevation: A Retrospective Analysis over 10 Years”: **Bo Chen**, DDS, MD, Beijing, China;
- “Dental Implant Management for Adult Ectodermal Dysplasia Patients with Extremely Atrophic Jaw”: **Yiqun Wu**, PhD, MD, Shanghai, China;
- “Modified Sinus Floor Elevation Using Lateral Mini-Window

...continued on page 7
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2016 Annual Meeting Program…continued from page 5

Approach”: Huiming Wang, DDS, MD, PhD, Hangzhou, China;
• “Immediate Implant and Restoration in Patients with Untreated Periodontitis”: Ye Lin, DDS, MD, Beijing, China.

“Overall, there are ten speakers from China presenting throughout the main program, allowing us to showcase the methods and procedures that our colleagues in China are performing,” Dr. Moy explains.

The Saturday morning program will focus on avoiding and managing complications in implant dentistry, followed by a closing symposium in which four powerhouse speakers will take “a look into the future.” Closing Symposium speakers are:

• “Orofacial Mesenchymal Stem Cell-mediated Tissue Regeneration: A Future in Implant Dentistry”: Songtao Shi, DDS, PhD, Philadelphia, PA;
• “The Emergence of ‘Tau’: A Clinically Relevant Measure of Implant Osseointegration Potential and the importance of Mesenchymal Stromal Cells”: John Davies, BDS, PhD, DSc, Toronto, Ontario, Canada;
• “Achieving Excellence with Implant Dentistry: Techniques Using Today’s Evidence-based Principles”: Joseph Kan, DDS, MS, Loma Linda, CA;
• “The Future for Osseointegration and Implant Dentistry and How Do We Prepare for the Future?”: Kenji Higuchi, DDS, MS, Spokane Valley, WA.

“Dr. Higuchi, one of the pioneers in implant dentistry, has not been on a recent AO program. A close personal friend of the late P.I. Brånemark, he has experienced the advancements…continued on page 13
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Treasurer’s Profile

Dr. James Taylor keeps watch on AO’s finances

When Swissair Flight 111, enroute from New York to Geneva, crashed into the Atlantic Ocean near St. Margarets Bay, Nova Scotia, Canada, on September 2 1998, one of the military personnel assigned to the forensic team with the grim task of identifying the victims was Dr. James C. Taylor (or “JT” as he’s better known by his AO colleagues), now AO’s Treasurer. A career officer in the Royal Canadian Dental Corps, JT was then a Major commanding the Navy dental clinic in Halifax, near the crash site.

The Swissair crash was among the many demanding and memorable experiences of a 35-year career in the Canadian military that ended when JT retired from active duty as the Chief Dental Officer of the Canadian Armed Forces in September. He has maintained a part-time clinical prosthodontic practice at the National Defence Medical Centre Clinic and the Montfort Hospital Clinic in Canada’s national capital city of Ottawa, Ontario, where he and his family have lived since 1999.

The son of a career military dental officer, JT completed his undergraduate and dental school studies at the University of British Columbia in Vancouver. Following graduation, he served at bases in Moose Jaw, Saskatchewan; Edmonton, Alberta; Valcartier, Quebec (a large Army base near Quebec City); Toronto, Ontario; and Halifax, where he served both in the shore clinic and aboard the ship HMCS Preserver.

Selected for postgraduate training in Prosthodontics, JT was posted to Walter Reed Army Medical Center in Washington, DC, where his father had done his own residency 30 years previously. He recalls that during his residency Drs. Carl Driscoll, Steve Brousseau and Mike Singer were “inspiring mentors” who then became friends and colleagues. In retrospect, he feels that he was privileged to have done his residency during a transformational era in implant dentistry when single-tooth implants were new and rapidly evolving, as was aesthetic tissue management.

One of the people he met at the 1999 AO Annual Meeting in Palm Springs was Past President Dr. Dayn C. Boitet (2002-03), a former U.S. Navy dental officer. “I saw him in uniform at the meeting and sought him out,” Dr. Boitet remembers. “He has that ‘it’ factor – a presence, when he walks into a room, people notice. And he also has a great sense of humor. I saw him as the kind of person we need to get into the AO leadership, but he had too many irons in the fire at that time, so I had to keep after him. Whenever AO needed a prosthodontist on the Board, his was the first name I’d bring up. He cares about everything he does – the epitome of military discipline. You couldn’t find a better guy.”

Prior to his ultimate position in the Canadian Armed Forces as Chief Dental Officer, JT had commanded Canada’s 1 Dental Unit, which includes all of the Canadian Armed Forces’ garrison dental clinics in Canada and Europe. During this period, he completed a Master of Arts degree in leadership, specializing in leadership theory and the qualitative side of organizational dynamics, at Royal Roads University. He is also a graduate of the Canadian Armed Forces’ Advanced Military Studies and National Security Studies programs, parallel to the U.S. military’s War College programs. This combination of education and his long experience as a senior military officer have enabled him to bring strategic level executive capability to the AO Board’s consideration of issues of globalization, governance and fiduciary responsibility.

JT brings many unique qualities to the AO Board. Fluent in French, he is one of two bilingual Board members (Dr. Tara L. Aghaloo, Los Angeles, CA, speaks Spanish). With his fellow non-American board member Dr. Norton, he has helped build AO’s global programs. JT has held governance positions at the section level of the Fédération Dentaire Internationale (FDI, also known as the World Dental Federation) and led AO’s moves to affiliate with FDI and sponsor a symposium at its Annual World Dental Congress.

“With his military background and mastery of administration, JT brings a very different perspective to Board discussions, sometimes using corporate jargon in his speech that is a different language for many of us, but the truth is his difference is a great strength,” says President-Elect Dr. Alan S. Pollack, New York, NY.

“His knowledge and analytical mind brings clarity of view on matters of regulation and oversight that is crucial to the running of the Board,” adds Vice President Dr. Michael R. Norton, London, England, UK.

He takes very seriously a Board member’s fiduciary responsibility and has “attacked” the position of Treasurer with...continued on page 13
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Identifying the most important articles in implant dentistry

By Dr. Steven E. Eckert, Editor-in-Chief, IJOMI

At the 2015 AO Annual Meeting, I was asked to give a presentation on the most important articles that have appeared in implant dentistry from my perspective as Editor-in-Chief of the International Journal of Oral and Maxillofacial Implants (IJOMI), the official journal of the Academy of Osseointegration. This was a very interesting assignment, because as an editor I find myself looking at 600 to 700 new submissions to the Journal each year. I hope that it doesn’t come as a surprise to anyone, but most of the articles that we publish are demonstrating incremental additions to our knowledge base. Few articles present information that fundamentally changes the treatment paradigms that we all follow. Identifying the most important articles in implant dentistry then becomes a bit of a subjective analysis of the objective information presented in those articles. The task is somewhat daunting, but at the same time it is an intellectual pursuit that I personally enjoy.

So where should we start in this sort of assignment? Perhaps the best answer is to start at the beginning. If we exclude implants that were unearthed in archaeological digs, and instead identify the beginning of implant dentistry as occurring in the late 1930s, we would probably say that those articles were the ones that initiated an interest in implant dentistry. The information derived from the NIH/Harvard Consensus Conference held in June 1978 provided a good background on implants up to that time. That consensus conference presented, according to the editors (Schnitman and Shulman), primarily survival data from the implants that were available at that time. The authors describe conflicting results and ultimately questioned the benefits derived by the patient, especially in those situations where an implant had failed.

The NIH/Harvard conference provided tremendous background information regarding implant dentistry, but in considering the most important articles in the history of implant dentistry, my opinion is that the proceedings of this conference did not change the treatment paradigms for the dental profession. So the search needed to continue.

To me, the seminal article in implant dentistry was the article that introduced osseointegration to the world (Adell, R., Lekholm, U., Rockler, B., Bränemark, P.I., *A 15-year study of osseointegrated implants in the treatment of the edentulous jaw*, Int J Oral Surg, Dec 1981). This article by Adell, Lekholm, Rockler and Bränemark described a 15-year study of implants in the edentulous jaws. All the implants in the study underwent, or were designed to undergo, osseointegration. Although the title suggested a 15-year study, the primary emphasis of the article was on implants that were placed from year five through year nine of this case series. Raw data were presented demonstrating a 91% implant survival in the mandible and an 81% implant survival in the maxilla with limited bone loss under functional loading. The article suggested that with the provision of osseointegration implant prostheses could be made to allow long-term successful treatment for edentulous patients.

The next article in this process was the first article published in IJOMI in 1986 (Albrektsson, T., Zarb, G., Worthington, P., Eriksson, R., *The long-term efficacy of currently used dental implants: a review and proposed criteria for success*, Int J Oral Maxillofac Implants, Summer 1986). This article by Albrektsson, Zarb, Worthington and Eriksson was a literature review designed to evaluate the implants that were commercially available at that time and also to provide success criteria for dental implants. Today, I still see these success criteria as the most frequently quoted in scientific articles submitted to the Journal. Considering how many things have changed since 1986, I think it is remarkable how well these recommendations have stood the test of time.

These two articles represented the introduction of the paradigm shift in dentistry. It would be hard to argue with the notion that the use of dental implants has provided the greatest fundamental shift in the way that dentistry is practiced since the introduction of fluoride in the water supply. The treatment approaches that can be used today allow treatment to be customized to the patients and their unique presenting conditions rather than applying the same treatment approach for everyone, regardless of their individual presentations.

Obviously, the profession has evolved since these two groundbreaking articles were published. We have come to a better understanding of implant surface and design factors, surgical approaches, prosthetic designs, loading protocols, and a myriad of other factors that influence treatment. We also have a better understanding of the complications that are observed with dental implants and are starting to better define the situations where implants may or may not be the best solution for specific patients. Likewise, we are beginning to gain a better appreciation of those situations where traditional care experiences are fundamentally improved through the incorporation of dental implants in the treatment.

There certainly were a number of other things that we addressed in the presentation to the AO meeting. Time and column space do not allow thorough description of all of them. Suffice it to say that if we put on our futuristic eyeglasses we can probably identify the eventual obsolescence of dental implants, as true biologic substitutes for teeth become clinical realities. Of course, without vaccines that prevent periodontal disease and dental caries, the true biologic substitutes may be subject to the same disease entities that caused patients to require tooth replacement in the first place. The articles documenting these upcoming paradigms have yet to be written.
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Clinical Case Example

1. Tooth #15, set to be extracted
2. The surgical site was initially debrided to induce bleeding and establish the Regional Acceleratory Phenomenon
3. Insert Large or Slim sized OsteoGen® Bone Grafting Plugs and allow blood to absorb
4. Two Slim OsteoGen® Plugs are in place. Suture over top of socket to contain. No membrane is required
5. OsteoGen® is a low density bone graft and the OsteoGen® Plugs will show radiolucent on the day of placement
6. As the OsteoGen® crystals are resorbed and replaced by host bone, the site will become radiopaque
7. The collagen promotes keratinized soft tissue coverage while the OsteoGen® resorbs to form solid bone. In this image, a core sample was retrieved
8. Implant is placed. Note the histology showing mature osteocytes in lamellar bone formation. Some of the larger OsteoGen® crystals and clusters are slowly resorbing. Bioactivity is demonstrated by the high bone to crystal contact, absent of any fibrous tissue encapsulation

Clinical images courtesy of German Murias DDS, ABOI/ID

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The Members Forum provides venue to express views, ask questions, share ideas

The *Academy News* committee introduces a new section called The Members Forum. According to the specific AO guidelines, “*Academy News* will act as a forum for sharing information with the membership on Academy activities and will offer compelling and useful feature articles that will contribute to the success of their day-to-day practices.”

The Members Forum will be a venue for members to express views, ask questions of each other, address the leadership on issues, as well as share or discuss aspects of clinical practice.

It is anticipated that this will propel the newsletter to evolve further as a medium to transmit relatively nonscientific information throughout the organization.

Your name and email will accompany submissions, and members may wish to communicate more directly with each other about a particular subject. Our goal is make the newsletter more interactive and to strengthen AO by increasing understanding and communication between members, in the process adding yet another benefit of AO membership.

Dr. James Taylor keeps watch on AO’s finances …continued from page 9

unusual zeal, according to Dr. Pollack, who preceded him in the office. “The membership of AO can feel confident and rest assured that AO’s money is well cared for and its spending carefully monitored to ensure the best value for all members,” adds Dr. Norton. AO’s Chief Financial Officer, Kevin Bragaw, CPA, calls JT “definitely the most diligent and thorough Treasurer I’ve worked with.”

JT puts aside military formalities when conducting AO business, particularly now that he is retired. Dr. Pollack calls him “definitely one of the guys” and adds that despite his primary job as a Canadian federal executive, JT has always kept up with the literature and clinical practice, and has maintained academic credentials. He is an Associate Editor of the *International Journal of Oral and Maxillofacial Implants* and a member of the editorial boards of the *International Journal of Prosthodontics* and the *Quintessence International Journal*.

A rugby and hockey player through high school and college, JT continues to enjoy equestrian activities. He played polo for a number of years and now rides recreationally with the Royal Canadian Mounted Police officers at their national stables in Ottawa. He does his regular fitness workouts at the Ottawa Athletic Club, where his routine includes the weight room, the pool, and the heavy bag.

Dr. Norton calls his colleague “a gentle giant” and says “his ability to consume vast quantities of food at AO events is well noted by his fellow Board members, but equally his charm, warm smile, and loving, caring friendly nature shine through. AO is fortunate to have such a Board Member.”

 – Richard Bragaw

2016 Annual Meeting Program…continued from page 7

achieved in implant dentistry from its very inception. He is the perfect speaker to provide us with an overview of how far we have come in 35 years and how to prepare for the future,” Dr. Moy says.

“We are giving attendees a nice balance,” he adds. “We are not just pushing the high-end procedures but also looking at what diagnostic, surgical, and prosthetic techniques we have performed in the past and whether they are becoming outdated or remain a standard of care. These are techniques that we as clinicians will be able to use on a daily basis in our practice of implant dentistry.”

The program retains many very popular features, beginning with industry-hosted Corporate Forums Thursday morning. This year’s participants are BioHorizons, Dentsply Implants, Geistlich Biomaterials, Intra-Lock, Keystone Dental, J. Morita USA, Nobel Biocare, OraPharma, Osstell, Straumann, Thommen Medical, Zest Anchor, and Zimmer Biomet.

The E-Poster Presentations Thursday afternoon will have expanded presentation times.

Saturday’s popular Lunch and Learn Sessions have been increased to 25 to give attendees a more personal experience with renowned implant specialists from around the world. Many main program speakers will be featured at these intimate gatherings, with maximum attendance of 9 in each session. “We encourage you to take advantage of this personalized experience and interact with eight of your colleagues to find the hidden treasures our speakers will share with you!” says Dr. Moy.

Dr. Moy was AO President 2011-12, but he hadn’t been program chair until this year and found the responsibility challenging. “The 2016 Annual Meeting will have so many exciting educational and networking opportunities that you can’t miss. We have created a unique and outstanding program that will stimulate all team members – the general practitioner, surgeon, prosthodontist, implant treatment coordinator, hygienist, dental assistant, and laboratory technician – appealing to experienced attendees, first-timers, and the many in between,” he says.
Editor's Editorial

How good does a counterfeit hundred have to be? How about an implant case?

By Bruce Barr, DDS, Newsletter Editor

How good do they have to be? As good as you can possibly make them. And then it depends on who is looking. By definition, counterfeiting is passing imitations. Currency counterfeiting is illegal. Only in some instances should restoring patients with implants be. Good counterfeiting, like implant cases, must match the public’s expectations. Whereas a phony hundred need only weather inspection once, our work is subjected to scrutiny each time a patient smiles or chews.

No matter the artistic skill and ingenuity of the counterfeiter, the type of printing, the quality of the paper or ink, the criminal will never manufacture a bill identical to those printed by the U.S. Bureau of Engraving and Printing. It can be argued that no matter the acumen of the dentist or caliber of his or her materials, the work can never truly duplicate nature.

Many features render the U.S. $100 dollar bill nearly impossible to duplicate. Safeguards range from magnetic strips, to holograms, to watermarks, to crisp micro printing, to light shifting three-color magnetic black green ink, to serial numbers, to random embedded blue red fibers, to the pink glow that the Benjamins cast under ultraviolet light, as well as others. As if the bill’s artistry were not daunting enough, it is the paper – 80 percent cotton and 20 percent linen – that proves most difficult to replicate. Genuine cash does not come apart in hot or cold water and, depending on the denomination, lasts approximately three to 15 years in circulation. Counterfeit bank notes last perhaps six months. Some implant cases have similar issues. The best counterfeit Francs are synthesized using intaglio printing. Pressing produces a three-dimensional result that allows both valleys and raised surfaces to be inked. Due to recent reduced costs and convenience, however, less exacting approaches such as ink jet are often implemented to achieve acceptable results. The compromise is tantamount to substituting panorex or periapicals for 3-D ct views when placing implants.

When the busy supermarket clerk rubs that pen over the bill, and it turns yellow, she places the bill in the register, knowing it is a good one, but is it? Actually, the pen is using an iodine reaction to detect starch in pulp paper that is not present in cotton fiber paper. It is easily fooled by newsprint-like paper coated with hair spray, but such a third-rate bill can never fool the discerning eye of a trained U.S. Secret Service agent, just as no radiographed implant can ever be confused for a tooth by a dentist. Counterfeit money is destructive; restoring patients with implants regenerative. Some counterfeit bills and implant cases are excellent, nearly as authentic as the real thing. That precision does not happen by accident.

Consider coming to the AO Annual Meeting in San Diego this February, where you will learn from the most talented, innovative, and experienced tooth/smile counterfeiters in the business. This gathering offers an opportunity to familiarize yourself with what to look for in a good case, as well as best practices for execution. As stated, successful counterfeiting of currency and teeth has to satisfy people’s expectations. For currency, the gauntlet is low – perhaps just a few seconds as the bill is passed. We dentists want the ruse to last for the rest of our patients’ lives.

We invest so much of our energy and lives striving to accumulate the so-called “real” hundred dollar bills – printed by the ton in the U.S. Bureau of Engraving and Printing. That these bills measure dental success, one could argue, is itself quite a counterfeit idea, since international credit markets are constantly pricing the faith and credit of the U.S. government to redeem the pieces of paper. Few can dispute, however, that embracing core AO concepts of incorporating leading scientific principles, using the most advanced techniques and materials, and collaborating with colleagues is the best route to restoring our patient’s smiles and function. Empowering someone to feel more human, more confident, and be in better health is about as real as it gets.

The Editor’s Editorial is intended to contribute to the dialogue on issues important to implant dentists. The views expressed in the editorial do not necessarily reflect the policy of the Academy of Osseointegration or its Board of Directors. Readers who would like to comment or express a point of view on the editorial are invited to write to the editor via email at implants@barrperio.com. We will endeavor to publish pertinent comments or views when space permits.

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