



Academy of
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Academy NEWS

A QUARTERLY MEMBER NEWSLETTER

Expanding AO's Oral Health Community



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ACADEMY NEWS

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President's Message

Global, multidisciplinary and evidence-based

By James C. Taylor, DMD, MA

As our 32nd President, I'm honoured to have the opportunity to lead our Academy in its global role of enabling the development, dissemination and application of knowledge in the domain of implant dentistry, for the well-being of our patients. Through this, I hope to support the evolutionary improvement of the quality of care in implant dentistry in the parts of the world where it currently exists, and a revolutionary improvement in treatment capacity and access to care in implant dentistry in the parts of the world where it currently does not. To quote our partners at the FDI World Dental Federation, "there is no health without oral health."

My philosophy on the organizational dynamics of our Academy is that it is a grand constellation of interrelated and interdependent elements, perpetually interacting to create a whole that is so much greater than the sum of its parts, and which makes AO the world's premier international academy in the domain of evidence-based and patient-centred care in implant dentistry. This constellation includes our researchers, who work tirelessly to create knowledge and share it via our *International Journal of Oral & Maxillofacial Implants*, the world's premier journal in the domain of osseointegration and implant dentistry; then there are our Industry partners, who synthesize and apply this knowledge to creating the devices, materials and technology that the global oral health professional community relies upon to deliver state of the art care around the world; then there are our Speakers, who translate this knowledge, as well as their experience in applying it in their cutting-edge clinical practices, for the global oral health professional community; then there is the AO organization itself, which is the ever-evolving body that brings these elements together on behalf of our current and future members such that they in turn can best serve its central element: our patients around the world.

Having held leadership roles in a number of other national and international organizations in the past, I can say from personal experience that it is rare to assume the Presidency of an organization that is already on a sound and successful strategic trajectory, with solid and sustainable resourcing; a highly effective and dedicated Staff; a Board of Directors and supporting Committee structure with a great diversity of profound expertise and experience, that is working in harmony toward a shared vision for our Academy; an AO Foundation supporting knowledge development, leadership development and patient care; and a group of AO Past Presidents that continue to actively contribute as the custodians of AO's corporate knowledge. I am truly blessed.

This is a trajectory that I had the privilege of helping to shape and implement during the presidencies of my predecessors; and I plan to stay that course during my presidency. And a busy course it will be, to include a number of Outreach and Charter Chapter initiatives outside North America, Regional Meetings within North America, University Programs globally, our IADR Symposium in London in July, our AO Summit in Chicago in August on Risk Factors for Predictable Osseointegration, our FDI Symposium in Buenos Aires in September, and of course our partnership with the *International Journal of Oral & Maxillofacial Implants* throughout the year. My year will of course culminate in our 2019 Annual Meeting in Washington, DC, the theme for which is "Current Factors in Clinical Excellence." Our Program Chair for 2019 is my friend and colleague from Paris, Dr. **Franck Renouard**, and he has created an outstanding scientific program. Between now and our 2019 Annual Meeting, however, I encourage all current and future members of the AO to watch our website, newsletter, social media and the *IJOMI* for notices of AO's worldwide events, and to join your AO colleagues locally, regionally or around the world for one of these excellent knowledge sharing and professional connectivity events that take place between our Annual Meetings. I shall endeavour to personally participate in as many of these as possible during my Presidential year, and shall look forward to meeting you both there and at our 2019 Annual Meeting.

And so, in closing, I thank you for the opportunity to lead our Academy, and look forward to working with you all, and indeed all elements of the grand AO constellation, to shape the present and future of global implant dentistry for the benefit of our patients worldwide.



Dr. James C. Taylor



AO President Dr. James Taylor and Program Chair Dr. Mehrdad Favagehi at their recent onsite visit at The Gaylord National Resort & Convention Center.

Washington, DC will be inaugural AO North American Regional Meeting site

By Mehrdad Favagehi, DDS, MS, Academy News Editorial Consultant

The Gaylord National Resort & Convention Center, on the shores of the Potomac River, will be the site of the inaugural AO North American Regional meeting, on September 14-15, 2018. With astonishing views of Washington, DC and old-town Alexandria, Virginia, the \$4 billion convention center and the newly developed,

neighboring, \$1.2 billion MGM National Harbor property, located on the Maryland side of the Potomac, represent one of the most elegant convention centers along the Eastern seaboard of the United States. The site features many excellent restaurants, hotels and entertainment options.

The line-up of AO Member-speakers and programs represent the richness of the Northeast region, in terms of expertise, innovation and academic excellence in implant dentistry. The two-day program will feature exceptional presenters.

September 14, 2018: Optional hands-on clinics:

Dr. **Joseph P. Fiorellini**, An AO Director, who has served as Head of the Division of Periodontology and Postgraduate Program Director of Periodontology at Harvard University and is currently Chair of the Department of Periodontics at the University of Pennsylvania, will provide a hands-on course entitled *Socket Bone Grafting, with and without Biologic Modifiers*.

Tony Prestipino, CDT, Alexandria, VA, a long-time, active AO member and master laboratory technician in the Washington, DC area, will provide a review and hands-on course entitled *Advanced Protocols for Converting Removable Dentures to Fixed Interim Prostheses*.

Saturday, March 15:

Dr. **Evanthia Anadioti**, Philadelphia, PA, Founding Director of the Post-Graduate Prosthodontics Specialty Program at the University of Pennsylvania, will provide an historical and practical overview entitled *Implant Overdentures: The Past, the Present and the Future*.

Dr. **Edgard El Chaar**, New York, NY, Post-Graduate Periodontics Specialty Program Director at New York University, will present *Innovative Strategies and Techniques in Ridge Augmentation*.

Dr. **Thomas Taylor**, West Hartford, CT, Head of the Department of Reconstructive Sciences and Chair, Division of Prosthodontics at the University of Connecticut School of Dental Medicine, will address the topic, *Occlusion and Dental*

Implants: What gives? Dr. Taylor is the executive director and a past-president of the American Board of Prosthodontics, as well as a past-president of the Academy of Prosthodontics, the American College of Prosthodontists, the International College of Prosthodontists, the International Team for Implantology (ITI) and the Greater New York Academy of Prosthodontics.

Dr. **Maria Troulis** is Chief of Oral and Maxillofacial Surgery at Massachusetts General Hospital and a Professor of Oral and Maxillofacial Surgery and Chair of the Department of Oral and Maxillofacial Surgery at Harvard University School of Dental Medicine. Her presentation is entitled *Bone Tissue Engineering*.

The program will have the same high-quality clinical and scientific presentations featured at annual AO meetings, focusing on various disciplines within implant dentistry, including the latest in surgical, restorative and laboratory technologies. Members are encouraged to invite their surgical, restorative and laboratory colleagues to accompany them to the meeting, which will serve as the promotional launch of the much-anticipated AO annual global scientific meeting in the Washington, DC area in 2019.

The Washington, DC area, conveniently located at the junction of the mid-Atlantic and Northeast regions, serves as an ideal location for the AO's inaugural North American Regional Meeting. It also carries a symbolic significance for AO, as the home of the first modern root form dental implant placed and restored in the United States over 35 years ago. A few months after the 1982 Toronto conference, in collaboration with Professor **P.I. Brånemark**, Dr. **Paul Krogh** and Dr. **Daniel Sullivan** placed and restored the first modern endosseous implant in the United States. Both the late Dr. Sullivan and Dr. Krogh were instrumental in the creation of AO and both later served as AO Presidents.

According to AO President Dr. **James C. Taylor**, "After holding very successful Osseointegration Symposia within the FDI World Dental Congress (WDC) in Istanbul, New Delhi, Bangkok, Poznan, Madrid, and also in 2017 the regional FDI Global CE Program in Shanghai, as well as charter chapter and outreach meetings around the world, we've now decided to offer regional AO meetings in North America. Washington, DC will be our inaugural such meeting. We are anticipating not only great attendance from current and future AO members in the U.S. Northeast, but also attendees from other parts of the U.S. and, indeed, other countries, as has been our experience with our charter chapter and outreach meetings."

To register for the meeting, visit the AO website: osseio.org.

AO bestows research, achievement awards

Awards honoring the highest standards of career excellence, innovative research, service to the field of osseointegration and the Academy were presented to many members of Academy of Osseointegration (AO) from around the globe at its 2018 Annual Meeting in Los Angeles. These included:

AO Certificate in Implant Dentistry

Dr. **Israel Ismaj**, a general practitioner from La Jolla, CA. This prestigious certificate represents the highest standards of excellence in implant dentistry, and distinguishes practitioners' continuing education efforts and knowledge to patients and colleagues around the globe.

Nobel Biocare Brånemark Osseointegration Award

Dr. **Kenji W. Higuchi**, an oral and maxillofacial surgeon from Spokane, WA, was the 11th recipient of this annual award bestowed by the Osseointegration Foundation, AO's philanthropic arm. Made possible by a grant from Nobel Biocare, this annual award honors an individual whose impact on implant dentistry is exemplary in any or all of the Foundation's mission categories: research, education and charitable causes.

Best Presentation Awards

Six researchers were recognized by a committee of their peers for clinical and scientific research:

Best Oral Clinical Presentation:

David French, DDS (University of Alberta, Calgary, Alberta, Canada)

Best Oral Scientific Presentation:

Rafael Siqueira, PhD (University of Michigan, Ann Arbor, MI)

First Place E-Poster: Maiko Iwaki, DDS, PhD (Tokyo, Japan)

Second Place E-Poster:

Peerapat Kaweewongprasert, DDS (Nonthaburi, Thailand)

Best E-Poster Case Presentation:

Charline Cervellera, DDS (Los Angeles, CA)

Best Clinical Innovations:

Tsutomu Tanno, DDS (Oyama Tochigi, Japan)

William R. Laney Award

Italian prosthodontist **Paolo Vigolo**, DMD, MSD, Vicenza, Italy, received this award, which recognizes the best article published in the past year in the *International Journal of Oral and Maxillofacial Implants (JOMI)*, the official publication of AO.

2018-2019 Osseointegration Foundation Research Grants

Two first-place grants of up to \$30,000 each and one second-place grant of \$15,000 were awarded. These research teams will present their results at the 2019 AO Annual Meeting, to be held March 13-16, 2019 in Washington, DC.

1st Place Basic Science

Darnell Kaigler, DDS, MS (University of Michigan)

1st Place Applied Science

Hanae Saito, DDS, MS (University of Maryland)

2nd Place Applied Science

Chia-Yu Chen, DDS (Harvard University)

2017-2018 OF Research Grants

Satheesh Elangovan, BDS, DSc, DMSc, University of Iowa; and **Binnaz Leblebicioglu**, DDS, MS, PhD, Ohio State University, the 2017-2018 OF Basic Science Grant and 2017-2018 Applied Science Grant recipients respectively, presented their research findings at the 2018 Annual Meeting.



Drs. Satheesh Elangovan (left) and Binnaz Leblebicioglu presented their research findings, made possible with grants from the Osseointegration Foundation. Pictured at center is OF Past President, Dr. Edward B. Sevetz, Jr.

Fellows

Fellowship status in the Academy is obtained by demonstrating a commitment to the field of osseointegration in both academics and service to the Academy. Recipients included:

Joan Pi Anfruns, DMD, an Assistant Clinical Professor at the UCLA School of Dentistry.

Joseph P. Fiorellini, DMD, DMSc, AO Board member and a periodontist from Philadelphia, PA.

Earl G. Freymiller, DMD, MD, an oral and maxillofacial surgeon at the UCLA School of Dentistry.

Robert A. Levine, DDS, a periodontist from Philadelphia, PA.

Christian Mertens, DDS, PhD, an Associate Professor and Assistant Medical Director for Oral Surgery at the University of Heidelberg.

Please see the 2018 Annual Meeting collage on pages 10-11 for corresponding photos.

Dr. James C. Taylor elected 32nd AO President; AO, OF elect 2018-2019 Boards

Dr. **James C. Taylor** from Ottawa, Ontario, Canada became the AO's newest President at the organization's Annual Business Meeting as part of its 2018 Annual Meeting in Los Angeles, CA. As the Academy's 32nd President, and the first from Canada, Dr. Taylor succeeds Dr. **Michael R. Norton** from London, England at the helm of AO.

"I'm honoured to have the opportunity to lead our Academy in its global role of enabling the development, dissemination and application of knowledge in the domain

of implant dentistry, for the well-being of our patients," said Dr. Taylor.

"The Academy is a grand constellation of interrelated and interdependent elements, perpetually interacting to create a whole that is so much greater than the sum of its parts, which makes AO the world's premier international academy in the domain of evidence-based and patient-centred care in implant dentistry," concluded Dr. Taylor.

2018-2019 AO Board Officers include (front row, from left): Drs. American D. Sones (Treasurer), Clark M. Stanford (Vice President), Jay P. Malmquist (President-Elect), James C. Taylor (President), Michael R. Norton (Immediate Past President), and Tara L. Aghaloo (Secretary); and Directors (back row from left): Drs. Jeffrey Ganeles, Robert C. Vogel, Hom-Lay Wang, Jeffrey D. Lloyd, Joseph P. Fiorellini, Joerg Neugebauer, and Executive Director, Kevin P. Smith.

Also elected at the 2018 Annual Meeting were officers and directors of the Osseointegration Foundation. They included (front row from left): Drs. Georgios E. Romanos (President), Edward B. Sevetz Jr. (Past President), Hans S. Malmstrom (Vice President); and (back row, from left): Drs. Edward A. Marcus (Secretary/Treasurer), Directors Andrea L. Henderson and Jeffrey Ackerman, as well as (beginning third from right), Robert R. Lemke, and Wendy M. Croll Halpern. Also pictured are 2016-2017 OF President Myron Nevins (back row, center) and Alan S. Pollack, 2017 AO Past President (back row, far right). Not pictured is Michael R. Norton (AO Immediate Past President).





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University Program looks to expand global reach

After sponsoring two recent successful university partnership meetings in the United States, AO's University Global Outreach Program has its sights set on holding more student gatherings across the globe.

Last November, the annual "Great Transitions" event was held in conjunction with the Dallas County Dental Association Partnership and Texas A&M University College of Dentistry. This function featured a panel discussion and sharing of experiences by individuals who have chosen different professional dental careers, such as private practice, corporate dentistry, public health, community health and academics. Nearly 100 dental college junior and senior students were in attendance.

AO Treasurer **Amerian D. Sones**, DMD, MS, a prosthodontist from Dallas, TX, Co-chair of AO's Global Outreach Task Force; Director, Continuing Education, University College of Dentistry; and Sammons Cancer Center maxillofacial prosthodontist in the General Dentistry Program at Texas A&M, spoke to the group about the benefits of joining AO.

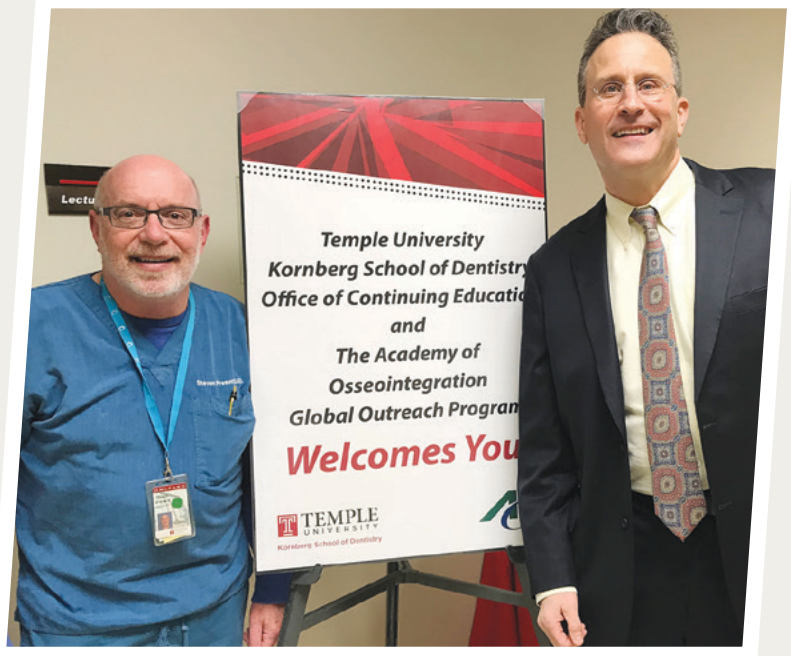
"Undergraduate students are a vital part of our University Global Outreach Program as they are commencing on their dental careers and look to their mentors for guidance and support. AO faculty member mentors who know dental education involves lifelong learning, connect with and expose students to the benefits of affiliation with a global implant organization such as AO, where advances in technology and science will govern clinical protocols for them in the future," said Dr. Sones.

At the AO Chapter Meeting at Temple University in January, more than 60 students and faculty were in attendance, according to **Steven I. Present**, DMD, a general dentist from North Wales, PA. The featured speaker was Dr. **Jeffrey Rodney**, a maxillofacial prosthodontist who focused on the application of implants in maxillofacial rehabilitation.

"I must say the support I have received has been great. There should be an AO Chapter in every dental school!" said Dr. Present, who serves as a part-time associate professor in the Department of Restorative Dentistry at Temple University's Kornberg School of Dentistry.

Dr. Present's tips for successfully organizing a University Partnership Program include:

- Offer CE credits for all attendees of the meetings, students and full-time faculty alike.
- Networking is vital – Work with your department to send emails to all students and faculty. Talk it up with the students. Work with the American Dental Education Association (ADEA) student chapter, if applicable, to



Drs. Steven Present (left) and Jeffrey Rodney

promote the meeting via social media. Communicate with other related department heads to help reach their residents.

- If you have relationships with dental or implant manufacturers, approach them to contribute funds to help pay for the speakers to help express the chapter's gratitude.

In addition to these recent events, the University Global Outreach Task Force plans to expand its efforts in 2018 by contacting and partnering with universities in the areas where AO's Global Program Development efforts will be hosted or where existing relationships exist. This will include reaching out to universities in Johannesburg in conjunction with AO's South Africa Outreach Meeting in June, Argentina in Buenos Aires with the FDI World Dental Congress that will occur in September, as well as AO charter chapter efforts in Japan, Brazil, and Israel.

Co-chairing AO's University Global Outreach Program is AO board member **Jeffrey D. Lloyd**, DDS, a general practitioner from Rancho Cucamonga, CA. "As AO continues its global outreach, students interested in expanding their implant knowledge, patient care and feeling part of a bigger whole, have an organization that is fully prepared to move them to the next level," said Dr. Lloyd. "AO's University partnerships also provide opportunities for members to get involved with their local university or alma mater, give back and stay connected to the profession."

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*Hoganson DM, Owens GE, O'Doherty EM, Bowley CM, Goldman SM, Harilal DO, Neville CM, Kronengold RT, Vacanti JP. Preserved extracellular matrix components and retained biological activity in decellularized porcine mesothelium. Biomaterials. 2010, 27: 6934-6940.



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Highlights from AO's 33rd Annual Meeting

Hollywood style, unparalleled substance

AO's 2018 Annual Meeting featured a brand new look and format changes for nearly 2,100 registrants. More than 200 e-poster presentations were on display showcasing groundbreaking dental research. AO's Exhibit Hall provided many opportunities for attendees to learn about the latest dental products and technologies. On the social side, more than 200 young clinicians packed Barcito for the annual Young Clinicians Reception. In addition, attendees danced the night away at the President's Reception in vibrant, downtown Los Angeles to the iconic songs of the Beatles by the band "Britishmania."

01 The 2018 President's Reception was one of the most festive social gatherings ever assembled by AO, held at the vibrant Microsoft Square in the LA Live area.

02 AO Board leadership officially transitioned from Dr. Michael R. Norton (left) to Dr. James C. Taylor from Ottawa, Canada at Saturday's Annual Business Meeting.

03 More than 170 exhibiting companies were on display and attracted large crowds throughout the Annual Meeting.

04 Dr. Israel Ismaj (right), a general practitioner from La Jolla, CA, was the third AO member to earn the prestigious AO Certificate in Implant Dentistry.

05 Appearances by many "celebrities" added to the excitement of the President's Reception for attendees.

06 Dr. Harold Slavkin kicked off the Opening Symposium with his keynote presentation, "Personalized Oral Healthcare and the Future of Dental Implants."

07 Three generations of Dr. Norton's family attended from England, shown here taking a breather during the President's Private Reception.

08 Italian prosthodontist Dr. Paolo Vigolo (right) received the 2018 William R. Laney Award during the Opening Symposium, presented by President Dr. Michael Norton.

09 This year's attendees included 20 inaugural recipients of the Osseointegration Foundation's Student Travel Grants.

10 One of the new and unique meeting formats for 2018 was a Reflection Panel with "The Wise," hosted by Dr. Michael R. Norton on Saturday.

11 AO's unique 2018 President's Reception was an Oscar-themed evening complete with celebrity look-alikes, with whom this group was happy to pose.

12 President Dr. Michael Norton (left) and OF President Dr. Edward Sevetz enthusiastically bestowed the 11th Nobel Biocare Brånemark Osseointegration Award on Dr. Kenji W. Higuchi.



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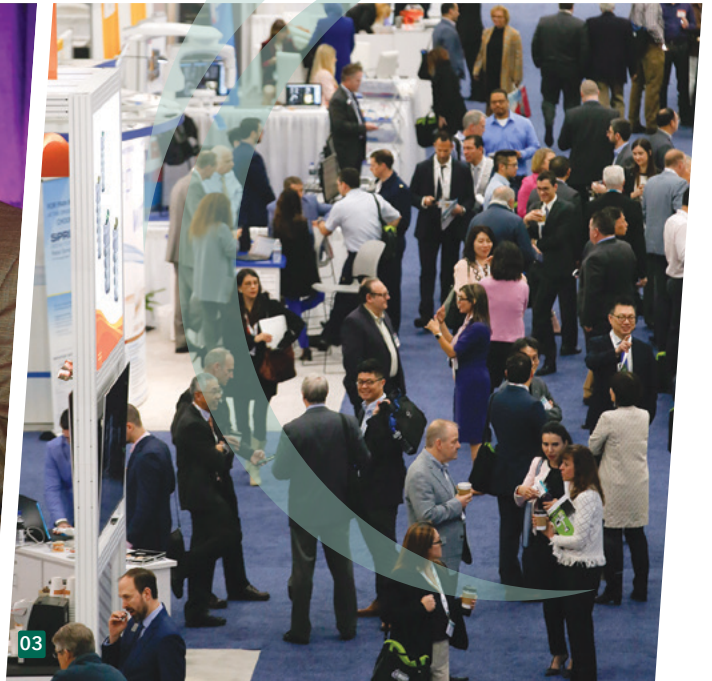
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An American view of AO's inaugural France Charter Chapter meeting

By Mehrdad Favagehi, DDS, MS, and Lourdes Ann Christopher, DDS, MS, Academy News Editorial Consultants

As part of a coordinated world-wide outreach campaign, the Academy of Osseointegration (AO) has conducted successful meetings in collaboration with FDI World Dental Congress in Istanbul, New Delhi, Bangkok, Poznan, Madrid and Shanghai. In 2018, AO will continue this partnership with FDI WDC in Buenos Aires and also through a similar partnership with International Association of Dental Research (IADR), AO will be represented at the 2018 IADR General Session in London this summer.

Another arm of this world-wide campaign has been launching Charter Chapter meetings in collaboration with regional AO Ambassadors outside North America. Earlier in 2018, AO Charter Chapter meetings took place in Columbia and France.

In January, Dr. **Phillippe Khayat** a long-time AO member and AO Ambassador, organized and hosted the inaugural AO France chapter meeting at the glamorous headquarters of Yacht Club de France on the prestigious Avenue de Foch in Paris. The event entitled,

"Advances in Implant Dentistry," was a full day of exceptional lectures from 15 general dentists and dental specialists. With some luck and an invitation from Dr. Khayat, we found ourselves in Paris able to attend and take part in the presentations.

Immediate past president Dr. **Michael R. Norton** took the bullet train from London to Paris to launch the inaugural event and present his work on insertion torque and implant stability. Dr. Norton showed off his French language skills, as he re-emphasized European links to the Academy. Having just been to China and on his way to Columbia to represent AO at another international AO chapter meeting, Dr. Norton recounted an old British phrase about an empire on which the sun never sets, to highlight the international character of the Academy of Osseointegration as the world's premier evidence-based dental implant organization.

In attendance were over 50 dentists from throughout France, as well as dentists from England, Monaco, Tunisia, and the United States. The meeting

took place in an elegant building, housing the Yacht Club de France, established in 1867 by a famous French admiral. Dr. Khayat gave a presentation on a controlled approach to full arch implant rehabilitation using sequential extractions. He also narrated an eloquent history of the Avenue Foch, its link to the French Empress Eugenie, Napoleon III's wife and her American dentist, Dr. Evans, who donated his fortune and the site of his home to the University of Pennsylvania for a dental institute and museum.

Other presenters included Drs. **Giancarlo Bianca, Philippe Bidault, Frederic Chamieh, Alex Dagba, Marwan Dass, Bruno Fissore** (Monaco), **Michel Metz, Julien Moulass**, and **Mickael Samama**. Dr. **Franck Renouard**, Program Chair for the 2019 AO Annual Meeting in Washington, DC, was on hand to promote the meeting. He also gave a compelling presentation on short implants. The presentations were evidence-based, with an emphasis on clinical relevance and time for discussion among participants.

Drs. Mehrdad Favagehi (at far right) with Lourdes Ann Christopher, Phillippe Khayat and Michael Norton.



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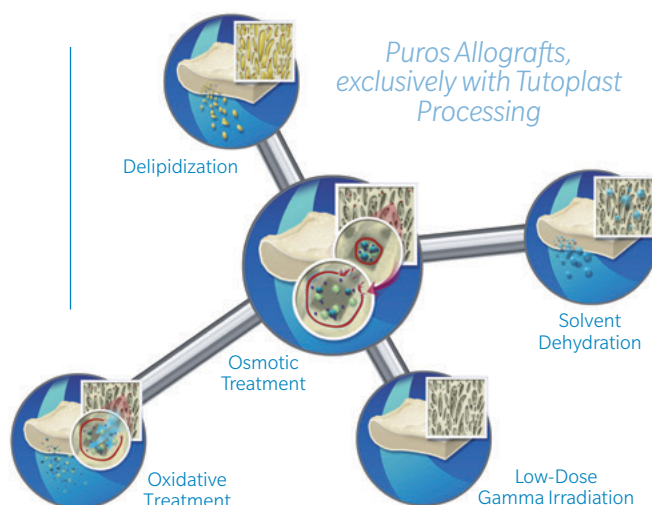
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The five things I cannot do without in implant dentistry

By Franck Renouard, DDS, Paris, France

Given that I first tackled dental implants when I was Assistant to Doctor **Jean François Tulasne**, back in 1984, I've seen pretty much every development in modern implant dentistry. Right from the start, practitioners and researchers were heavily focused on technical improvements to both implants and prosthetics. The headlong race to come up with technical 'improvements' continues apace today. However, I don't think that focusing on the technical side of things, to the exclusion of everything else, is really the cornerstone of successful implant dentistry.

The first 'thing' I would hate to have to do without is the **Cone Beam CT scanner (1)**. I remember when the very first maxilla-facial scanners were produced in France on **Paul Tessier's** request for use in craniofacial surgery. The year was 1985. Back then, patients had to be trussed up and kept motionless for the 10 to 20 minutes it would take to X-ray them. After that, you'd be up the whole night trying to patch together some kind of reconstruction of the images in 3D on the computer - with results that we'd probably find rather comical today. Fast forward to 2018, and it takes us five minutes to produce high-quality 3D CT scans in our own practices. All in all, it's a real revolution in the field of implant dentistry.

Combined with the huge advances in radiography, digital work flow will also make implant dentistry much simpler. At the same time, we need to be on the lookout for new risks that will inevitably arise from the increasingly advanced automation of certain tasks. An over-reliance on automation could result in difficulty performing older procedures should they be warranted. Outcomes could be compromised due to poor situational awareness.

Next, I'd definitely want to keep working with a **durable, reliable implant system (2)** that will withstand the test of time. It's tremendously comforting to know that I can still source components for the very first two implants I placed back in February 1987. I'm also very pleased in the knowledge that, no matter where my patients travel they'll be able to find an implant dentist who can help them should they have problems with their implants.

Another factor that 30 years' experience has taught me is very important is having **reliable teams (3)** at hand. The importance of the dental assistant's role can't be emphasized enough. A good assistant can make all the difference. Being attentive to protocols, having a calm manner, the ability to build a good rapport with patients and real dedication to the work are all qualities an assistant needs if the surgeons they work alongside are to be able to do their jobs with the minimum of stress.

Another 'thing' that I took a while to implement in my own practice, but which had a major impact on the quality of my work, is the systematic use of **checklists (4)**. Checklists may seem rather unexciting, but they are an absolutely priceless boon for making day-to-day procedures flow seamlessly. Checklists help avoid situations that can impede patient care. Examples include: proper stock-checks not being carried out prior to seeing a patient; the assistant not being aware of something; no one having checked to make sure the patient had actually followed pre-operative instructions; no one having made sure the necessary paperwork had been completed, etc. It's so obvious that check-lists just work. Once you've started using them you'll find it difficult to go back to the old ways of doing things.

Many of us think the leading lights we see on the rostrum in big conferences are good at what they do because they're skillful. I think they're good at what they do also because their general approach to organizing their work is flawless. If you don't have to deal with multiple little annoyances on a daily basis, you'll have more head-space free to exercise real flair. Naturally, attention to detail, dependability, experience and rigor are all indispensable qualities, but you should never forget the importance of monitoring and minimizing risk, as is the case in the aviation industry or, indeed, in all risky activities.

The last 'thing' that I would hate to have to do without today is the chance to learn from **expert colleagues (5)**. You won't find all the answers to your tricky clinical cases in books – and even less on Facebook. However, having the option of telephoning or writing to trustworthy colleagues is a wonderful blessing. The opportunity to discuss difficult cases during meetings with other professionals is also a key to success. We are all regularly faced with unexpected situations. Sometimes it's difficult to know the right path to take. That's when we need to be able to turn to experienced, reputable colleagues.

I see too many cases of colleagues who don't know what to do and who launch appeals for help over social networks, only to receive a mass of responses from every man and his dog. This approach has great appeal because it's so easy, but what level of trust can you have in the replies you get? It's unlikely that world experts in the field in question are going to spend their time organizing online Q & A sessions. I'm not saying that we should stop sharing knowledge and expertise on social networks, but we must acknowledge that all too often, there are absolutely no checks or quality controls carried out on these sources.

This article is part of a continuing series in which Academy News asks distinguished implant practitioners to discuss five things they cannot do without in implant practice.

Five things Dr. Renouard cannot do without:

- Cone Beam CT scanner
- Durable, reliable implant system
- Reliable teams
- Checklists
- Expert colleagues



Dr. Franck Renouard

AO events and CE calendar

June 26 – Live Webinar: "How to Manage Soft and Hard Tissue Augmentations in Implant Surgeries: Materials, Tools and Science"

Tolga Fikret Tozum, DDS, PhD

July 25 – UK Charter Chapter, London, England, UK
Hugo DeBruyn, DDS, PhD, Prof., University of Ghent, Belgium

July 26 – AO Symposium: "Optimizing Care and Managing Complications in Implant Dentistry" – Held in conjunction with the International Association of Dental Research (IADR)/ Pan European Regional Congress
ExCel London Convention Center, London, England, UK

August 23 – Live Webinar: "Dental Implant Cemented or Screw Retained Prosthesis: Clinical Radiological"

Marco Cicciu, DDS, MSc, PhD

August 29 – AO/FDI Symposium held in conjunction with the China Stomatological Association, Shanghai
Paul Pao-ying Lin, DDS, MS, Dip. Perio

September 5 – Live Webinar: "Medico-Legal Issues in Dental Malpractice"

Michael Ragan, DMD, JD, LLM

September 7 – 6th Annual AO Symposium: "Optimizing Care and Managing Complications" – Held in conjunction with FDI World Dental Congress (WDC)
La Rural, Buenos Aires, Argentina

September 14-15 – North American Regional Meeting: "Advances in Clinical Implant Dentistry"
Gaylord National Harbor Resort, National Harbor, MD

September 19 – Live Webinar: "Soft Tissue Management in the Esthetic Zone - New Thoughts for the Future"
Markus Hürzeler, DMD, PhD

September 25 – Live Webinar: "Crestal Approaches for Sinus Augmentation"
Michael Block, DMD

October 3 – Live Webinar: "Peri-Implantitis Prevention/ Implant Maintenance"
Georgios Romanos, DDS, DMD, PhD

October 11 – Live Webinar: "Post Extractive Dental Implant: State of the Art, Clinical Rationale and New Techniques"
Marco Cicciu, DDS, MSc, PhD

October 27-28 – Spain Charter Chapter, Valencia, Spain

March 13-16, 2019 – AO 34th Annual Meeting: "Current Factors in Clinical Success"
Walter E. Washington Convention Center, Washington, DC

Bone Grafting and Implant Support

Trephine Burs



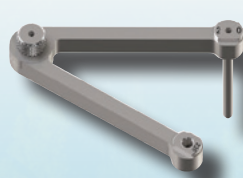
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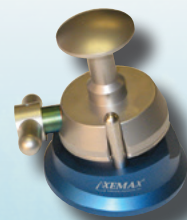
Side-cutting action is ideal for redirecting a pilot osteotomy.

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BIOACTIVITY

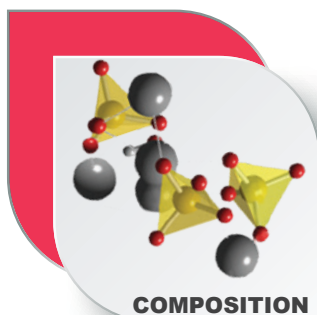
The OsteoGen[®] bioactive crystal clusters control migration of connective tissue and form a strong bond with newly growing bone as the graft resorbs. The result is predictable bone formation for general grafting & use with implants.¹⁻⁶

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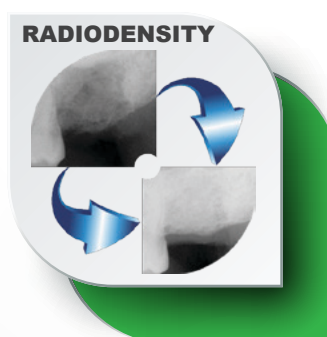
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6.0cc - \$162	(\$27.00/cc)
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RADIOPAQUE

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1. Ganz (2002) 2. Artzi (2003) 3. Valen (2002) 4. Spivak (1990) 5. Ricci (1992) 6. Jensen (1998)
Radiographs courtesy of German Murias DDS, ABO/ID



Dr. Harriet McGraw

Your hearing may be fine...but are you listening?

By Harriet K. McGraw, DDS

A recent experience with a patient reminded me of how important it is to listen and ask questions. A year ago, a Konus-type, removable mandibular prosthesis, opposing natural teeth and an implant crown, was delivered. Given the patient's severe xerostomia, lack of keratinized mucosa and knife-edge ridge, it was the only viable restorative option.

The maxillary dentition had been heavily restored and there was a high caries risk due to the xerostomia. Teeth were failing one at a time. One implant had already been placed and more were sure to follow. I recommended a proactive approach for restoring the maxilla. It involved removing teeth and positioning implants that could serve as abutments for fixed bridges, rather than replacing teeth as they failed. I thought the patient understood the logic in that approach. After the mandibular prosthesis was delivered, the patient returned to the dentist who referred her to me.

Earlier this year, the patient returned to my office for a consultation re: implant replacement of failed bicuspid and molar teeth. The periodontist, who had extracted and grafted the sites, communicated to me that the patient did not want bridges. She only wanted individual implants placed as teeth failed. At her consultation appointment at my office, she expressed the same sentiment. I just couldn't understand why she had made that decision and again went over the advantages of having fixed bridges placed in lieu of single implants. Finally, I asked the simple question "Why is it you're opposed to having bridges placed?" Her response was a real wake-up call for me. She said, "Because I don't want to have to take them in and out." In her mind, the removable mandibular Konus prosthesis was a "bridge"!

The above experience reinforced the need for clear communication and demonstrated how, sometimes, it takes more time for it to be achieved.

Communication plays a significant role in avoiding liability. A few years ago, professional liability carrier CNA reported that 80% of claims “were not alleged because of poor dentistry. Rather, they were pursued because of patient dissatisfaction arising from non-clinical issues.” Similarly, the Michigan Dental Association (MDA) Peer Review staff, plus local and state committees, noted a significant trend; there was a correlation between ineffective communication skills and the number of complaints received by the MDA from a given practice.

Some keys to being a good communicator are:

1. **Listen** to what the patient has to say. A good listener maintains eye contact, does not interrupt and most importantly, limits his/her own talking. Unhappy patients just want to be heard and have their concerns acknowledged. Do talk enough to let the patient know you are paying attention and listening to them.

2. **Ask questions.** Patients don’t always understand dental terminology. Often, their concerns have nothing to do with dental procedures, rather with how they’ve been treated by staff or the doctor.

With continued emphasis on productivity, time spent actually talking to patients is often sacrificed. With good communication, everyone benefits; patients, clinicians and the profession as a whole. Patients deserve no less than our full attention. It is our responsibility.

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 hkmcgraw@me.com. We will endeavor to publish pertinent comments or views when space permits.

EDITOR’S EMAIL BAG

Two readers share views on third party components

Editor Dr. **Harriet McGraw**’s editorial in the last edition of *Academy News* (“Be informed about companies offering ‘compatible’ implant parts...and their ‘warranties,’” Volume 29, Number 1, 2018) prompted two readers to write, sharing their views on the topic. With permission, we publish their comments here:

I really appreciate your recent editorial in the Academy News regarding third party components. This is something I have been lecturing on for many years. However, sometimes we are stuck between “a rock and a hard place.” There are times when the implant manufacturer does not have an abutment that is required for a particular restorative need. I will give you an example. A recent case involves the restoration of the maxillary anterior on three bone level implants (titanium zirconium implants). Although the case was worked up digitally with the periodontist, and surgical guide was fabricated, the screw access came out through the incisal-facial.

So here I am with a choice of either cement retained with genuine parts or screw retention with third party components. When given a choice between cement retention and screw retention, I will go with screw retention 100% of the time. I feel the risk of cement induced peri-implant disease in this case is much greater vs. the possibility of a failure from a third party. Obviously, you go with an original component if it is in the implant company’s portfolio. However, until the implant manufacturers can provide us with all the components we need, it may be necessary for us to look for solutions elsewhere. Thanks again for a wonderful editorial.

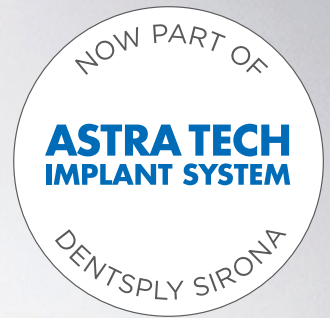
Steven I. Present, DMD, North Wales, PA
Clinical Associate Professor
Kornberg School of Dentistry
Temple University

As a former member/contributor to the AO Academy News (under Bruce Barr), I am very impressed by your latest editorial. The general dental population doesn’t really understand the problems with using other companies’ “compatible” components and how it affects the reputable companies’ warranties and guarantees. I have noted quite a few laboratories trying to cut corners using generic components that end up costing the patient and the practitioner time and money. Practitioners really need further education about this issue because, as you bring up, there are multiple issues with patent infringement and basic design principles that are not acceptable to the longevity of an implant restoration. There is still much to be learned about wear of current components and their longevity under function. Thanks again for your thoughtful and well-presented editorial.

Robert L. Schneider,
DDS, MS, Solon, IA
Former Director
of Maxillofacial
Prosthodontics
Emeritus Professor
University of Iowa
Hospitals and Clinics



FULL-ARCH THERAPY ON FOUR IMPLANTS



THEIRS

1. Attach abutment to rigid holder.
2. Bend wrist unnaturally to get proper seating angle.
3. Shake hand to restart blood flow.



OURS

1. Attach abutment to flexible holder.
2. Bend holder to get proper seating angle.

Images for illustrative purposes only.

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