



Academy of
Osseointegration
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Academy NEWS

A QUARTERLY MEMBER NEWSLETTER

Mapping the changing landscape to a new normal

*Starting the journey from a
position of strength, trust, integrity*



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ACADEMY NEWS

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President's Message

Implant Dentistry and "Bow Ties"

By Clark M. Stanford, DDS, PhD, MHA

The delivery of the very best in implant therapies relies on a range of expertise from engineers and scientists to talented generalists and specialists. Prof. **Per-Ingvar Brånemark**, MD, PhD, taught us the transformative power of science, detail, documentation, trust, integrity, and excellence. Moreover, he did it with a bow tie.

The ability of the Academy to foster the best in education, collaborative spirit and recognition acknowledges the best occurs from a team, not an individual. This is the hallmark of how we build trust and accountability. Be it the best programs at our Annual Meeting, wonderful online education, peer-to-peer mentorship, member engagement to the Academy's critically important summit meetings, all are changing the face of the profession.

We can only build our patient's trust when we trust and know our fellow AO colleagues are performing at the top of their game, every day. Integrity is then derived from this bond of trust between a patient and the provider. Integrity that the provider embraces the ethics and values of the Academy and the American Dental Association. These ethical codes define us as a healing profession and we can only build integrity through trust. If we lose that trust, we lose integrity.

Excellence in patient care outcomes, in turn, is derived by the trust our patients have in the provider being up to date, knowledgeable and using the latest evidence-based practices for the trusted care of the patient. Through a reciprocal trust and integrity between the various members of the Academy, we build excellence at multiple levels. Excellence in turn is what the Academy is and how it has always been known. One cannot have excellence without integrity, and one cannot have integrity without trust. This is how we "tie" the very best inpatient care through Trust, Integrity and Excellence (TIE).

Implant dentistry is now at an important set of changes in the patient care models that will move forward. The industry is changing with many new vendors, new products, new workflows and possibilities. There is a reality check here. The desire for patients to come to our practices following the COVID-19 Pandemic will depend heavily on our ability to mitigate aerosols, creation of safe workflows, and enhanced infection control protocols. Will they trust us? While we have had a strong blood-borne infection strategy for years, the future will cause us to utilize best practices Based on Weight of the evidence (BOW). Yes, we will have to "bow" to a new reality.



Dr. Clark M. Stanford

As a profession and Academy grounded in science, we recognize the need to balance the evidence as we support the best for our patients.

Going forward, the pronounced economic impact will alter the pace (or desires) of our patients' abilities to return to a resemblance of normal. As our practices start to equilibrate to a new normal, we each will be impacted by the need to assure our patients we are prudent, insightful and fully aware from where they are coming.

In this new future, we can document for them each of us are at the top of the profession. For instance, pursuing special recognition by your Academy, such as the new "AO Masters" and "AO Diplomat" programs, are key ways you can document your excellence and use these credentials to help you differentiate your practice. This differentiation is especially important today as the profession changes the definitions of the specialties and more providers enter the space of implant tooth replacement therapy without fully understanding the ethics, value and abilities of a highly educated, highly skilled provider who understands the power of change and bows to and embraces this spirit of change.

Each of you can rely on your Academy to provide the very best in networking, collaboration, science and education to maintain the trust, the integrity and the excellence to which we all aspire. This is the "Bow-Tie" of our wonderful AO Academy of Osseointegration.



Dr. Per-Ingvar Brånemark

Academy fondly remembers OF Past President Luis J. Fujimoto

It is with deep sadness that the Academy of Osseointegration (AO) announces the passing of AO Fellow **Luis J. Fujimoto**, DMD (New York, NY).

Dr. Fujimoto was an eloquent gentleman, caring clinician and dedicated leader with a long history of service in organized dentistry. He was an active member who served the Academy in various capacities, including president of the Osseointegration Foundation (OF) from 2013 - 2014.

Dr. Fujimoto was born in Bolivia and grew up in Peru where his father served as the ambassador for Japan. Later, Dr. Fujimoto moved to the U.S. where he received a bachelor's degree from George Washington University. He received his DMD and specialty certificate in periodontics from the University of Pennsylvania. He practiced periodontics for many years in New York, NY.

Dr. Fujimoto was a chairman and commissioner of the Joint Commission on National Dental Examinations and served as president of the American Association of Dental Boards. He held leadership positions with the Federation of Associations of Regulatory Boards, and the Noguchi Medical Research Institute. He served two terms as chair of the New York State Board of Dentistry for the New York State Department of Education.

This past January, he was installed as president of New York County Dental Society. He was also a director at the Medical Reserve Core for the New York City Department of Health and Mental Hygiene.

Dr. Fujimoto was the recipient of numerous awards and held several fellowships from multiple organizations, including the Academy. He passed away in New York on March 3, 2020 at the age of 59. Upon learning of his passing, *Academy News* staff reached out to his colleagues for their recollections.



Dr. Luis J. Fujimoto

“

I have known Luis since the early 1990's. He was always bright-eyed and energetic. No one could juggle a “dozen balls in the air” better than him. Luis was devoted to advancing the clinical delivery of implant treatment and so wanted to be involved in organized dentistry. He became an “apostle” of the Academy from day one. His crowning achievement was when he accepted a \$1 million contribution for the AO Foundation from Nobel Biocare. As president of the Foundation, he smiled from ear-to-ear on stage holding that huge check. He told me that was one of his proudest moments. I will miss his smile, his laugh, his insight. Luis left us too soon. He will be missed.

”

▲ **James H. Doundoulakis**, DMD, MS
AO Life Fellow; Academy president 2002 - 2003
OF president, 2010 - 2011

“

In a world in short supply of volunteers, Luis was unique. He could always be depended upon to step up to the plate to work hard and address issues related to excellence in dentistry, success in fundraising, governance and legislation in New York state, and the nation. His effort, energy and expertise were applied to the Academy throughout his career with his characteristic enthusiasm and trademark wide smile that all who knew him will always remember! He will be missed!

”

▲ **Joseph E. Gian-Grasso**, DMD
AO Life Fellow; Academy president, 2014 - 2015
OF board member, 2015 - 2016

“

Dr. Luis Fujimoto was a close professional AO friend and colleague. I had an opportunity to work with him while he served as Chair of the Membership Committee, a committee I later chaired. He was a hard act to follow. AO meant the world to him. He was always so cheerful and upbeat and loved to have a good laugh. Somehow he always remembered to send me a birthday greeting each year. He enjoyed toasting to a very good bottle of red wine- so Luis here's to you, my friend. Rest in peace and we will miss you so much.

”

▲ **Amerian D. Sones**, DMD, MS
AO Fellow; Academy vice president, 2020 - 2021

IN MEMORIAM

“

Luis Fujimoto was possibly the most active, enthusiastic and supportive member the Academy has ever had. His commitment to the success of AO was unparalleled, as he volunteered time after time for committee after committee to ensure that jobs were done and the Academy fulfilled its goals. The best example of his commitment was his service to the Osseointegration Foundation, which allowed him to exercise the philanthropic streak within him as an example of which we all could aspire to emulate. His untimely passing has left a huge void within the AO family and I will personally miss his unbound enthusiasm, contributions and determination.

”

▲ **Michael R. Norton**, BDS, FDS, RCS(Ed)
AO Life Fellow; Academy president 2017 - 2018
OF board member 2018 - 2019

“

When Luis took the reins of the Membership and Credentials Committee, he knew how to do so with “gusto,” even though that’s not a Japanese word. Luis did an admirable job of implementing our global initiatives which still are in effect today for AO. All of us will pass away one day. Not all of us will be remembered as having made an improvement for our having been here. Luis did. Everyone who knew him will remember he was short in stature, but a giant in personality. He was unique. He is missed. The AO is better off organizationally because of the many things Luis did on its behalf. Therefore it is fitting that we who knew him, bid him a heartfelt and thankful “Sayōnara.”

”

▲ **Edward B. Sevetz, Jr.**, DMD
AO Life Fellow; Academy president 2006 - 2007
OF president 2017 - 2018

“

I did not work with Luis when I was president of AO but I knew him well. He was at every AO function and made his desire to be involved known to all. I really got to know Luis well when we served together on the OF board. He was very eager and passionate about his responsibilities. He never shied away from a job, and if he took it, he put everything he had into it. He did this and always remained pleasant despite his many obligations. His major contribution to the OF was running the Nobel Biocare Brånemark Osseointegration Award for the Titanium Society. He did this for several years and was truly the driving force making sure all of the Society members voted and fulfilled their responsibilities. After we completed our leadership responsibilities, we stayed in touch. His untimely passing was unfortunate and he will be missed.

”

▲ **Clarence C. Lindquist**, DDS
AO Life Fellow; Academy president, 2003 - 2004
OF president, 2014 - 2015

“

Luis was the first member to congratulate me on becoming AO executive director over 20 years ago. Over the years we became good friends and I always looked forward to our annual breakfast during our annual meetings. We have a beautiful sushi dinner set displayed in our curio cabinet that Luis sent us from one of his many trips to Japan. It was sent for no special occasion, just one of his many ways of showing his appreciation for our friendship. When his weekly phone calls suddenly stopped, I knew something was wrong and learned later of his declining health. He kept it private so as not to burden anyone. He will be greatly missed.

”

▲ **Kevin P. Smith**, MA, MBA
AO executive director

Dr. Fujimoto is survived by his wife, Hsin-i “Serena” Wen. In lieu of flowers, the family has suggested donations be made to the following charities in his memory, including Saint Agnes Church (<https://stagneschurchnyc.churchgiving.com>) Saint Thomas More Church (<https://thomasmorechurch.churchgiving.com>), or The Order of Malta American Association (<https://orderofmaltaamerican.org>).

Academy elects 2020-21 board via electronic voting; OF board approved

Clark M. Stanford, DDS, PhD, MHA, prosthodontist and distinguished professor and dean, College of Dentistry, University of Illinois at Chicago, is the Academy of Osseointegration's (AO) 34th president.

Dr. Stanford succeeds **Jay P. Malmquist**, DMD, from Portland, OR at the helm of the Academy.

Approval of the Academy's 2020-21 slate of officers as submitted and approved by the board of directors was scheduled to occur at its Annual Business Meeting on Saturday, March 21, 2020 in Seattle, WA. As a result of the cancellation of the Academy's 35th Annual Meeting, the slate was instead presented for, and received, membership approval via electronic voting. This was conducted under Article V. Meeting of Members, Section 5 of the Academy's bylaws.

A director on the board since 2010, one of Dr. Stanford's most significant contributions has been serving as chair of the Academy's summits in 2014 and 2018. During his time as a member since 1994, Dr. Stanford has also served as chair of the 2011 Mini Summit and White Paper task forces, and 2011 Sponsorship of Symposia, as well as a member of the Website Education, 2014 Mini-summit Planning, Finance and Audit, and AO/OF Research Grant committees.

A new at-large director and treasurer are also among those elected to the Academy's board of directors. These include **Lambert J. Stumpel**, DDS, a general practitioner in private practice in San Francisco, CA as at-large director, and **Joerg Neugebauer**, DDS, PhD, an oral surgeon from Landsberg am Lech, Germany as treasurer, who has served as a director on the board since 2016.

Beginning with the officers, the full 2020 - 2021 Academy Board of Directors includes:

President: **Clark M. Stanford**, DDS, PhD, MHA; AO Fellow, prosthodontist and distinguished professor and dean, College of Dentistry, University of Illinois at Chicago, IL;

President-elect: **Tara L. Aghaloo**, DDS, MD, PhD; AO Fellow, oral and maxillofacial surgeon, UCLA Medical Center from Los Angeles, CA;

Vice President: **Amerian D. Sones**, DMD, MS; AO Fellow, prosthodontist, and executive director, Continuing Education Texas A&M University, College of Dentistry in Dallas, TX;

Secretary: **Hom-Lay Wang**, DDS, MSD, PhD; AO Fellow, periodontist and endowed collegiate professor of periodontology at the University of Michigan School of Dentistry in Ann Arbor, MI;

Treasurer: **Joerg Neugebauer**, DDS, PhD; AO Fellow, oral surgeon from Landsberg am Lech, Germany;

Immediate Past President: **Jay P. Malmquist**, DMD; AO Fellow, oral and maxillofacial surgeon from Portland, OR.

Directors include:

Joseph P. Fiorellini, DMD, DMSc; AO Fellow, periodontist and professor of periodontics, University of Pennsylvania School of Dental Medicine in Philadelphia, PA;

Jeffrey Ganeles, DMD; AO Fellow and periodontist from Boca Raton, FL;

Joseph Y. K. Kan, DDS, MS; Prosthodontist and professor, Department of Restorative Dentistry Implant Dentistry Program at Loma Linda University, Loma Linda, CA;

Robert R. Lemke, DDS, MD; Oral and maxillofacial surgeon from San Antonio, TX;

Lambert J. Stumpel, DDS; General practitioner from San Francisco, CA;

Robert C. Vogel, DDS; General practitioner from Palm Beach Gardens, FL.

Osseointegration Foundation (OF)

Officers and directors of the OF Board of Directors for the 2020-2021 year, brought forward by Dr. **James C. Taylor** on behalf of the OF Nominations Committee, were approved as presented at the Academy's October 2019 board meeting.

Officers:

President: **Edward A. Marcus**, DDS; Periodontist from Yardley, PA;

Vice President: **Wendy M. Croll Halpern**, DMD; Periodontist from Flowertown, PA;

Secretary/Treasurer: **Jeffrey S. Ackerman**, DDS; General practitioner from Naples, FL;

Past President: **Hans S. Malmstrom**, DDS; General practitioner from Rochester, NY;

Directors:

Andrea L. Henderson, DDS; Prosthodontist from Los Angeles, CA; At-Large Director;

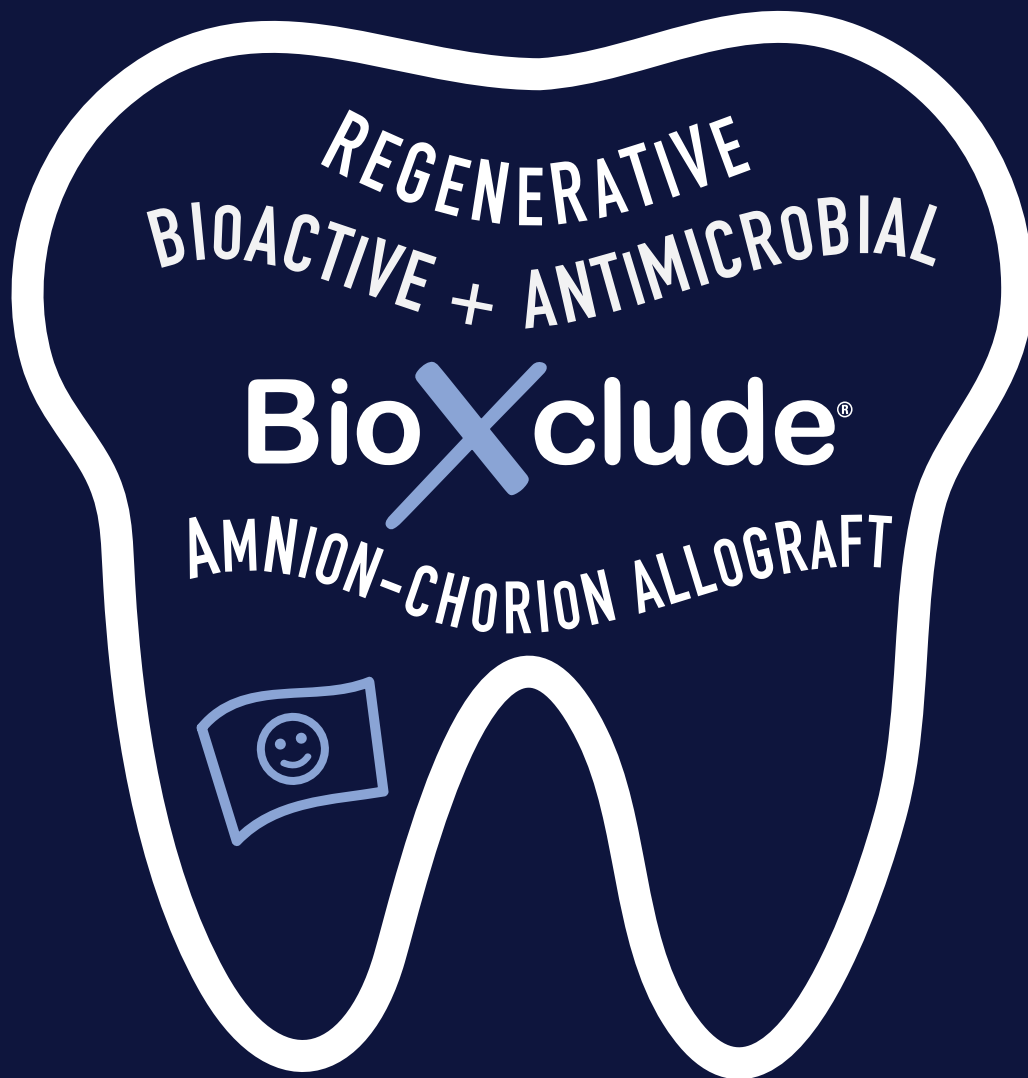
Jay P. Malmquist, DMD; AO Fellow, oral and maxillofacial surgeon from Portland, OR (one year term as AO Board liaison);

Russell D. Nishimura, DDS; AO Life Fellow, prosthodontist from Westlake Village, CA; At-Large Director;

Franck Renouard, DDS; Oral and maxillofacial surgeon from Paris, France; At-Large Director;

Hans-Peter Weber, DMD; Prosthodontist from Quincy, MA; New At-Large Director;

WHY HAVEN'T YOU SWITCHED?





Social media, student enthusiasm driving University Partnership Program

By Amerian D. Sones, DMD, MS, Academy News Guest Contributor, AO Vice President and Global University Task Force Lead

The Academy of Osseointegration's (AO) global university partnership programs have been especially robust this past fall and late winter. We are proud of our AO faculty members and student organizers for their tireless energy in initiating programs.

The Academy has always pursued post-graduate resident programs through its Membership Committee, but recently discovered the most enthusiastic group has risen from undergraduate students who want to drive more dental implant education!

At Texas A&M University, College of Dentistry in Dallas, second-year dental student, **Amin Heravi**, approached me with interest in initiating the first AO Dental Implant Study Club. Mr. Heravi recruited a speaker, and through social media, organized 140 dental students to attend an exciting lecture on implant complications by Dr. **Yahya Mansour** on February 6, 2020.

"This meeting wouldn't have been possible without social media. About two years ago, I reached out to Dr. Mansour through his Instagram page. He is very passionate about teaching and has been a great mentor," said Mr. Heravi. "I polled some students on interested topics via GroupMe. Dr. Sones fully backed and connected us with resources of the Academy, and the AO Study Club at A&M College of Dentistry was formed!"



From left: Mr. Amin Heravi, Dr. Yahya Mansour and Dr. Amerian Sones at the Texas A&M Implant Study Club.

A similar occurrence took place at the University of Connecticut, inspired by second-year dental student, **Joshua C. Kwolek**, DMD, who took the initiative during the summer of 2019 to launch an AO dental implant study club. Along with classmate, **Victor Munoz**,

and under Academy faculty sponsors Drs **Sejal R. Thacker**, DDS, MDSc (Farmington, CT) and AO Life Member **Thomas D. Taylor**, DDS, MSD (West Hartford, CT), two programs were held on October 23, 2019 and January 22, 2020, with 100 undergrad and post-grad residents and faculty in attendance.

Another student-inspired and social media driven program, publicized by **Dennis Sourvanos**, DMD under faculty advisor and AO Fellow and Board Director **Joseph P. Fiorellini**, DMD, DMSc, is taking place at the University of Pennsylvania.

"The purpose of our Instagram platform is to promote the Academy through effective branding geared towards pre-doctoral students/residents. My bottom line is that I want students to know the Academy is a great investment to them as a future dental home," says Dr. Sourvanos, graduate student representative on the executive board of the AO Study Club at Penn Dental Medicine.

AO sponsored programs at the University of Washington, the University of North Carolina, and a meeting for periodontics students at Virginia Commonwealth University were also well attended.

Successful long standing study clubs have continued at the Kornberg School of Dentistry, Temple University under **Steven I. Present**, DMD (North Wales, PA), and UCLA School of Dentistry under AO Fellows **Todd R. Schoenbaum**, DDS, and AO Vice President **Tara L. Aghaloo**, DDS, MD, PhD.

These students and residents are our leaders of tomorrow and their interest in dental implant treatment and technology is very much alive. Knowledge and skills shared by the Academy's experienced members is being made available to the next generation, who look to AO members for guidance and support. Those who are interested only need to invest a little time to spark a student's interest. They will drive the rest.

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On COVID-19: Sometimes there is no special magic

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

It is truly humbling that our initial response to the COVID-19 virus pandemic in 2020 is similar to the influenza pandemic of 1917: hand washing, social isolation and palliative care.

Until we have access to ideal Personal Protective Equipment (PPE), accurate testing, tracking and other strategies to protect us from COVID-19 virus exposure, most of us have few options other than staying home and limiting trips outside. With interim practice guidelines in place, we can take care of patients in need on a limited basis, but we're still operating well below capacity compared to the pre-COVID-19 era.

For better or worse, social isolation has resulted in a tsunami of screen time. Netflix, YouTube and TV binge-watching have helped distract us from our new reality to reduce stress. The same cannot be said about news shows. Not only because there is so much sad and disappointing news, but because the news media sometimes can be misleading. The COVID-19 pandemic is partially an enigma, but it is an infectious disease which generally follows the principles of an infectious disease.

However, the headlines report the tragic story of the beautiful 5-year-old who died of the coronavirus, the 101-year-old influenza pandemic survivor who survived a COVID-19 infection, and 59-year-old ABC news anchor George Stephanopoulos, who had no signs or symptoms, but had a positive test result. Even though the reporting is factual, the reality is mostly the elderly and those with co-morbidities are the most vulnerable to becoming severely ill from the virus¹. The outliers who become sick with COVID-19 make for better drama in the news, but this has resulted in anxiety and confusion.

As caregivers whose job it is to triage patients during this pandemic, we can't tolerate being misled or distracted. We should focus on an evidence-based approach to identify individuals at greatest risk to have COVID-19 and have poor outcomes. The elderly and those with pre-existing co-morbidities such as hypertension and diabetes have a disproportionately higher risk of a fatal outcome². We should exercise caution or postpone elective procedures for those at risk.

The COVID-19 mortality rate represents a very small percentage of the total number of people exposed to the virus. This suggests that for most of us, our immune system is adequately equipped to mount an effective defense against the COVID-19 virus. As we look to make our clinics safer, with enhanced infection control and PPE, we should also focus on strategies to enhance our immune system's ability to guard us from the virus.

To defend against a viral attack, our immune system has multiple layers of defense. The first line of defense, innate immunity, offers a general "shotgun approach" to combat viruses. The much more potent and targeted response, specific-immunity, takes seven-to-10 days to develop. This is also the same amount of time the COVID-19 virus needs to move down from the upper respiratory tract and colonize the lower respiratory system, causing lung infection.

During this tight race between the immune system and the virus, the immune response has to be well coordinated, measured and specific. Too strong of a response will result in a "cytokine storm," which contributes to edema in the lungs causing acute respiratory distress and pneumonia. Too weak a response allows the virus to replicate exponentially and colonize multiple systems. The time for the immune system to act can be extended by a few days with palliative care for those at risk.

In the absence of a vaccine, the immune system of every individual has to "reinvent the wheel" of specific immunity endogenously. Specific immunity to viruses develops as a result of a sophisticated series of orchestrated events between different immune cells. Cell-to-cell communication and coordination involves cytokines, lymphokines and interleukins acting on cell surface receptors. High blood sugar (diabetes), cortisol (stress), or smoking byproducts in the bloodstream interfere with immune cell receptors and cytokines needed for coordination of an orchestrated response.

Fortunately, to strengthen our immune systems, we don't have to fine tune the sophisticated machinery of our immune system like a molecular biologist. We should simply adopt a healthy lifestyle, including healthy nutrition, hydration and exercise. Stress management and adequate sleep in fine tuning the immune system cannot be overemphasized. It is interesting to note the bats that incubate the coronavirus are themselves mostly immune to dangerous viruses. They also sleep 20 hours a day!

As dentists, restoring and maintaining oral health is part of our overall mission to help patients maintain or reclaim a healthy living. In response to COVID-19, we should remind ourselves and our patients to focus on health, since sometimes, the best answers are found in health and not in some magic pill.



1 World Health Organization

2 <https://ourworldindata.org/mortality-risk-covid#case-fatality-rate-of-covid-19-by-preexisting-health-conditions>

Points of transformation lead to the Academy

By AO President, Clark M. Stanford DDS, PhD, MHA

Dear members of the Academy of Osseointegration: Thank you for the opportunity to serve as your 2020 - 2021 president. It would be an understatement to say, "these are interesting times we live in." They unquestionably, are. I often think of the investment advice "past returns do not predict future returns." Well, here we are.

My career is blessed with many professional friendships with some of the most amazing people in implant dentistry! I have had the opportunity to work with talented people in industry, foundations, private practice, organized dentistry, the wonderful Academy staff, along with governments at the local, state and federal levels.

Why do I believe so strongly in the mission and vision of your Academy? I firmly believe I'm better on a team than as "free agent." A "free agent" creates their own echo chambers and may drift to irrelevancy. That is not me. Your Academy represents a key ethical attribute for me, integrity. A team holds each other accountable, a team creates improvement goals, and in this way, we all improve.

Integrity derives from trust. In the mid 1980's, I was a resident in a dual National Institutes of Health (NIH) Fellowship training program undergoing my prosthodontic training and a simultaneous PhD program in molecular biology and genetics. Within weeks of starting the program, I was "asked" (well, you know how residencies are) to make dentures for a five-year-old who did not developmentally have teeth. I thought, cool! Why not?

This was my introduction to treating kids with special needs. From there, working with world experts as a first-year resident, I saw the amazing new technologies of implant therapy transforming my patient's lives. In my first year, I had **Kenji W. Higuchi**, DDS, MS (Spokane, WA) place implants on that five-year-old when I was at the University of Iowa, and I restored form and function in my prosthodontic program to that brave young man. It was a transformation. I then knew I needed to understand even harder the science of wound healing, inflammation and the application of science to medical device design.

Being heavily involved in orthopedic research, I recognized the reciprocal value of collaboration and saw the Academy of Osseointegration was a key advantage point, since this represented the best in clinician providers figuring out problems on a day-to-day basis. Again, a transformation.

As I became more involved with the Academy, I saw the amazing power of the diversity of opinions, science and the rational application to patient care. As a very "wet fingered" prosthodontist, I immersed myself especially in the rehabilitation of patients with ectodermal dysplasia and this became a wonderful, almost full-time (parallel) career, as I became chair of the scientific advisory committee to

the National Foundation of Ectodermal Dysplasias almost twenty years ago.

I was a full-time faculty member at the University of Iowa running a research lab, the clinical research center and was associate dean for research for a decade before I was recruited to the University of Illinois at Chicago (UIC). In my role, I continue to see special needs patients, complex maxillofacial patients and university administrators in my hospital-based practice at the College. I truly enjoy working with dental students and all the residents at UIC.

In the Academy, I served in the AO Summit meeting and chaired/co-chaired our 2014 and 2018 Summit meetings. Inspirational!

I must express complete gratitude to the profession and to the amazing orthodontists, oral and maxillofacial surgeons, periodontists, pediatric dentists, and yes, even endodontists, I have the privilege to work with over my career. This is a team sport. I never forget this!

Most of all, I must recognize the incredible ingenuity, intellect and support of an amazing set of master laboratory designers (they are not "technicians" in my mind). Designers understand the challenges of my complex patients and assist me in applying the latest in digital technologies creating amazing smiles. Thank you!

This collaboration only occurs because of the Academy of Osseointegration. The Academy is unique. There are no other level playing fields where the best of each dental specialty shares everything with peer colleagues. I thrive in this. Why?

A brief family history: Many may not know my father, **John W. Stanford**, PhD, worked for the American Dental Association (ADA) for 42 years. My father and his PhD mentor, Dr. **George C. Paffenbarger** (my godfather), recognized a real need to improve dental materials we take for granted today. In the past, our routine materials were simply, not good. I could use a stronger vernacular.

The ADA recognized the value to the profession of science-based decision-making and the need for the profession to define the threshold



Dr. John W. Stanford

Continues on page 18

AO awards honor career excellence, research, service, achievement

Originally scheduled for presentation at its 2020 Annual Meeting, the Academy of Osseointegration (AO) recognizes the following award recipients honoring the highest standards of career excellence, innovative research, service to the field of osseointegration and the Academy.

William R. Laney Award

Prosthodontist **Zeev Ormianer**, DMD from Tel Aviv, Israel, is the recipient of the 2019 William R. Laney Award for the best article published in the *International Journal of Oral and Maxillofacial Implants (JOMI)* in the past year. His winning abstract is entitled, "The Effect of Moderately Controlled Type 2 Diabetes on Dental Implant Survival and Peri-implant Bone Loss: A Long-term Retrospective Study," originally published in Volume 33, Issue 2, 2018. The aim of this study was to assess implant survival rates and long-term bone loss around implants in a population of patients with moderately-controlled T2DM, followed for a minimum period of 4.9 years.

"I was surprised and honored when I was notified of the award. It all started when a friend and colleague, Dr. **Jerry Kohen**, asked me to review 20 years of data of implant dentistry," recalled Dr. Ormianer. "The first result of this collaboration was published in *JOMI* in 2010, which presented a three-year follow up of immediate placed and restored maxillary implants. We noticed the number of Type 2 Diabetes patients that were restored and had long-term follow-up data. There had been a lack of information in literature, so we collected the data for publication."

AO Certificate in Implant Dentistry

Robert H. Sattler, DMD, a general practitioner in a family private practice in Southampton, PA; and **Amerian D. Sones**, DMD, MS, AO Fellow and Vice President, have earned the AO Certificate in Implant Dentistry. Dr. Sones is executive director, Continuing Education, Texas A&M University College of Dentistry in Dallas, TX, who says the AO Certificate was developed in 2014 and made available as a member benefit.

"Achieving this special award is especially meaningful to me as a long-time member and leader of the Academy, as it clearly challenged me to bring my very best," said Dr. Sones. "The four required clinical cases comprehensively questioned my knowledge and skill in dental implant treatment planning. I found it to be much more demanding and time consuming than I originally anticipated. However,

the effort devoted to applying was so worthwhile on a personal level."

Stated Dr. Sattler, "Achieving the AO Certificate is a reminder to myself and to my patients that I'm continually striving to provide them with current and the most innovative practices in implant dentistry. I have been a part of the Academy for many years and have met some incredible clinicians - many of whom have become mentors and friends. The caliber of excellence is impressive among the members and I am deeply honored to receive the AO Certificate."

Nobel Biocare Brånemark Osseointegration Award

Patrick J. Henry, BDS, MSD, DDS (hc), a prosthodontist from Chittering, Australia, is the 13th recipient of this annual award made possible by a grant from Nobel Biocare and bestowed by the Osseointegration Foundation, AO's philanthropic arm. Please see the Vol 30 No 1 2020 issue of *Academy News* for a full profile on Dr. Henry and this prestigious award.

2020-2021 Osseointegration Foundation Research Grants

Grants have been awarded by the Osseointegration Foundation in the categories of Basic Science and Applied Science. These research teams will present their results at AO's 2021 Annual Meeting.

1st Place Basic Science:

Sahar Ansari, MSc, PhD, UCLA

"A Novel Growth Factor-free Adhesive Hydrogel Delivery System for Enhanced Bone Tissue Engineering Applications"

1st Place Applied Science:

Elena Calciolari, DDS, MS(Perio), PhD, Queen Mary University of London

"Characterization of Markers from Saliva and Peri-implant Crevicular Fluid in Osteoporotic Patients Receiving a Dental Implant. An Exploratory Study"

"I am extremely grateful to the Academy and the Osseointegration Foundation for selecting my project. The grant will give my team the opportunity to exploit the potential of proteomic analysis to study the different stages of osseointegration. As a matter of fact, we will be among the first groups to perform full-proteomic analyses of saliva and peri-implant fluid and to explore the use of salivary exosomes in this field," said Dr. Calciolari.

AO Fellows

Four individuals have achieved Fellowship status in the Academy. Fellowship is obtained by demonstrating a commitment to the field of osseointegration in both academics and service to the Academy. The newest AO Fellows include:

Riad Almasri, DDS, in private practice, Dallas, TX, is also an adjunct faculty member at Nova Southeastern University College of Dental Medicine, where he received his specialty certificate in prosthodontics and served as chief resident. A member of the Academy since 2010, Dr. Almasri has served on AO's Young Clinicians, Research Submission and Allied Staff committees. He presented at the Young Clinicians' luncheon during the 2019 Annual Meeting, and provided oral scientific and oral clinical presentations in 2017 and 2018, respectively.

Gustavo Mendonca, DDS, MSc, PhD, is a clinical associate professor of dentistry at the University of Michigan School of Dentistry, Ann Arbor, MI. A member since 2008, he has served on the Research Submission, AO/OF Research Grants and E-poster committees. Dr. Mendonca has presented e-posters at annual meetings every year from 2008 through 2012 and in 2014, as well as basic science abstracts in 2008, 2009 and 2018 (all of which received AO Best Presentation awards). He was twice awarded the Basic Research Grant from the Osseointegration Foundation in 2011 and 2015, the AO/IADR Innovation in Implant Sciences Award in 2015, and the William R. Laney Award in 2011.

Alireza Moshaverinia, DDS, MS, PhD, FACP, is a tenure track assistant professor at the UCLA School of Dentistry, Los Angeles, CA. An active member since 2013, Dr. Moshaverinia has served on the Academy's E-poster and AO/OF Grant Review committees. He was also a recipient of the Osseointegration Foundation Basic Science Research Grant award in 2016, and the Best Oral Scientific Research award in 2015. Dr. Moshaverinia has been published 82 times in peer reviewed journals, books and chapters, including *JOMI*. He has presented at 50 conferences and invited seminars, including an e-poster presentation at the Academy's Annual Meeting in 2018, and an abstract presentation in 2015. Dr. Moshaverinia also holds nine patents.

Alessandro Pozzi, DDS, MSc, entitled full professor in oral sciences by the Italian Ministry of University and

Research, is adjunct associate professor at the Goldstein Center for Esthetics and Implant Dentistry of Augusta University and guest lecturer in the Continuing Education in Implant Dentistry Program at UCLA. An active member since 2012, he has served on the Academy's Website Education, Research Submission, and Membership committees. He has served as presenter during the 2016 Opening Symposium, a Morning with the Masters session, and Lunch and Learn during the Academy's 2016 Annual Meeting. Dr. Pozzi has also conducted several e-poster presentations at the 2013 and 2105 Annual Meetings, oral presentations in 2014 and 2015, and presented at the South African Academy of Osseointegration outreach meeting in 2018. He has authored or co-authored four published textbooks in addition to writing chapters on implant dentistry. He has contributed 35 articles in peer-reviewed journals including *JOMI*. Lastly, Dr. Pozzi has held 38 plenary program presentations in international academies and associations.



COVID-19 and Dentists: Reinforcing Patient Trust in Tense Times

By Ismael Khouly, DDS, MS, PhD, Academy News Editorial Consultant

Dentists, like other small businesses, face challenges related to daily operations, such as staffing, cash flow, and scheduling. They also face a moral imperative that needs to remain uppermost in mind, especially with the dissemination of massive, confusing, and often contradictory messaging from authorities and the media. As we work to return our practices to full capacity, we should be mindful about reinforcing patient trust in these tense times.

Establishing trust

After the Wuhan COVID-19 epidemic transformed into a pandemic, government officials in different countries adopted different responses. Leaders in some countries initially adopted a dismissive attitude with regard to the virus, while other countries focused on prevention or strict containment. Some governments made decisions based on economics, some on politics.

Dental professionals in many countries based their decisions on the safety of all involved and voluntarily limited their practices to emergency care even before any orders to do so were issued by government or other regulatory agencies. For dentists, the issue transcended their own financial interests and the desire to continue “business as usual.” Dentists realized that the moral argument for saving lives was clear and unambiguous.

In many countries, dental associations and societies earned the trust of the public and governments as they self-regulated and adopted higher standards, based on science, by placing public health and safety first.

Reminding public officials and/or informing patients about the prudent approaches adopted by dentistry in this pandemic can serve as a valuable resource in re-establishing trust in dentists as we look to resume dental care for patients.

Maintaining Trust

Dentists need to maintain their patients’ trust by taking steps to demonstrate that they place the health and safety of patients above all.

Steps Your Office Can Take

- **Reassure patients.** Anxieties about the safety of public places, especially medical institutions, are intense. Reassure patients that you and your staff are doing everything possible to provide a safe environment. Give staff talking points regarding your response to COVID-19 so they can tell callers about your sterilization

and disinfecting procedures. Transparency is critical in fostering doctor-patient trust.

- **Increase your patients’ options.** Patients may need more flexibility during this time. They may be struggling financially or taking care of an ill relative and may choose to forego dental treatment. Handle rescheduling requests with understanding.
- **Maintain patient communication:** Patient trust can be reinforced via updated emails, blogs, and social media posts containing helpful information about the virus. The American Dental Association and Centers for Disease Control have materials related to COVID-19. Make it discoverable for your patients.
- **Publish and update a COVID-19 infection control web page.** Give your website visitors more knowledge about your office’s efforts to maintain a safe environment: how you guard against germs, sterilization procedures for dental instruments, even detailed descriptions of your particular hand washing routine. Not only does this information maintain trust in your practice, it could provide your patients with ideas for making their own homes safer during the pandemic.
- **Keep a reasonable inventory of supplies.** PPE shortages – especially N95 respirators and facemasks – are disrupting the supply chain, which in turn disrupts scheduling in private practices. Take care to not waste them.
- **Reinforce social distancing measures.** Increase the distance between chairs in your waiting room and remove magazines or coffee machines that facilitate viral spread. Consider spacing patient appointments to reduce the number of people in your office at one time.



Dr. Ismael Khouly

Implant dentistry in Mexico: A country profile

By Jose Garcia Montemayor, DDS, Academy News Editorial Consultant

I am an active Academy of Osseointegration member from Mexico and was asked by *Academy News* to provide an update about dentistry in my country, especially since so many of my patients are international patients who come mainly from Canada and the United States.

Along the entire border between Mexico and the U.S., there are many practices that focus on medical or dental tourism. Because the cost of living is much less expensive on the Mexican side of the border, the cost of dental treatment can be significantly less. Recently, with more scrutiny at the border increasing travel times, those practices have been somewhat affected by U.S. border patrol policies with Mexico. Most patients coming to seek dental care near the U.S.-Mexican border travel strictly for dental tourism rather than tourism in general.

The situation is somewhat different in resort areas deeper inside Mexico, like Cabo or Cancun. My practice is in Los Cabos, in the southernmost tip of Mexico's Baja California Peninsula, on the Mexican Pacific coast. With year-round good weather, championship golf courses, luxury beach resorts and other tourist attractions, our native population of 250,000 people hosted over four million foreign tourists in 2019 alone; that is just the number arriving by air. In Cabo, the majority of foreigners seeking dental care aren't simply tourists. Many U.S. and Canadian citizens in the area are retired or semi-retired residents.

There are approximately 100,000 dentists practicing in Mexico and about 70% are general practitioners. To become a dentist in Mexico, one has to apply to dental school right after high school. One must attend dental school for five years, followed by a mandatory year of social service in order to receive a dental diploma. Dental training in Mexico is a total of six years post-high school. Specialty training in Mexico requires two-to-four years of additional education. Similar to what U.S. dentists are required to do, Mexican dentists typically become licensed to practice in a state after passing an examination.

With relatively few exceptions, everyone should expect a high level of quality dental care in Mexico. We utilize the same products, from the same major worldwide manufacturers of implants, and have access to great continuing education courses, provided by implant manufacturers and respected organizations, such as the Academy.

The cost of dental implant treatment can be much less in Mexico compared to the U.S. and Canada due to less expensive business costs and the relatively lower cost of dental education, also compared to its North American neighbors. Furthermore, in Mexico, it is rare to hear about large sums of money awarded in malpractice lawsuits. It is, therefore, uncommon for dentists in Mexico to

carry malpractice insurance, which also brings the cost of treatment down for patients being treated in Mexico compared to the U.S. or Canada.

Now, with the coronavirus in 2020, tourism was the first to be affected. Because people stopped traveling, many businesses lost revenues and were forced to close. In the month of April, to prevent contagion, Los Cabos closed all hotels and restaurants, and halted international flights. Now, we only have three national flights. Because tourist-related businesses have closed and the fact that Cabo is far from the rest of Mexico, there are no other types of employment available. As a result, many residents have left the area. In my private practice, I am only seeing emergencies, employing extreme protection measures. Many dental offices are closed indefinitely, and many colleagues have left town. It is anticipated that, although activities will resume worldwide, tourism will take time to return, including dental tourism.



Academy's global footprint expands in Brazil; Spain and Germany also planned

The Academy of Osseointegration's (AO) global footprint continues to expand, with its latest outreach effort an inaugural joint meeting with ABROSS, one of the largest dental implant organizations in São Paulo, Brazil.

Held in late January, this meeting sold out one month in advance with 290 dentists participating during the CIOSP 38th annual dental congress, one of the largest implant meetings in Brazil. The Academy's portion of the program featured AO Secretary **Hom-Lay Wang**, DDS, MSD, PhD (Ann Arbor, MI), and AO Fellow and Immediate Past President **Jay P. Malmquist**, DMD (Portland, OR), who presented lectures on peri-implantitis and grafting procedures for expansion of the implant platform, respectively.

As a result of this positive event, ABROSS will soon become an affiliated organization of the Academy. Dr. Malmquist is scheduled to represent the Academy and serve as the keynote speaker in this year's ABROSS annual meeting, tentatively scheduled for October 15-17, 2020.

Jamil Awad Shibli, DDS, MSc, PhD (São Paulo, Brazil), is one of the Academy's Global Program Development Committee (GPD) members and key contact for this meeting. "Implantodontics is a specialty in Brazil. Surely the association of ABROSS and AO will spread the Academy's aims to all of South America," he said.

Other Academy global outreach efforts this year included the first joint meetings with the Taiwan Academy of Osseointegration (TAOi) and the Asia Pacific Society of Osseointegration (APSO) held in January. The Academy's programming included Dr. Malmquist, and AO Fellow and Vice President **Tara L. Aghaloo**, DDS, MD, PhD (Los Angeles, CA). By a showing of approximately 150 dentists and exhibitors, each of these meetings were well received.

The new joint meetings held in 2020 are part of the GPD's effort to set a course of new geographical areas and direction for the Academy's global programming. These meetings were set up to serve as new outreach models for establishing and assessing meeting outcomes. According to Dr. Wang, who is also chair of the Global Program Development Committee, metrics for these new partnerships include how many dentists join the Academy as new members and/or attend the Annual Meeting.

Going forward as part of its global expansion plans, the Academy has established formal relationships to facilitate collaboration with two new groups: the Spanish College of Oral Implantologists (SCOI), one of the largest implant organizations in Spain, and the German Association of Oral Implantology (DGI).



Immediate Past President Dr. Jay P. Malmquist (on left) and Dr. Hom-Lay Wang, AO Secretary and GPD Chair were on hand for the sold out inaugural joint meeting with ABROSS in Brazil.

With the assistance of GPD member **Gustavo Avila-Ortiz**, DDS, MS, PhD (Iowa City, IA), the SCOI Board has approved the affiliation between AO and SCOI. At least 25 SCOI members are anticipated to join the Academy. The first AO-SCOI first joint meeting is expected to be held in February or March 2021 with Drs. Avila-Ortiz and Wang as tentative AO presenters.

AO Fellow and Germany Ambassador **Christian Mertens**, DDS, PhD (Heidelberg, Germany), has been instrumental in solidifying the relationship with DGI and a joint AO-DGI meeting to be held in 2021. This will be largest meeting in Germany since it will be a joint congress of all five German implant societies. The three speakers proposed for this meeting will be: Drs. **Jorg Neugebauer**, AO treasurer (Landsberg Am Lech, Germany), **Tiziano T. Testori** (Como, Italy) and Aghaloo in November 2021.

In addition, joint meetings with TAOi and APSO are scheduled for mid-January 2021 in Taipei, Taiwan and Hong Kong, respectively with Drs. **Clark M. Stanford**, AO Fellow and president (Chicago, IL), and **Joseph Y. K. Kan**, board director (Los Angeles, CA), as the anticipated AO presenters.

"With continuing to establish these affiliations, AO will assist regional implant organizations to provide high quality educational programs, while at the same time increase their interest in membership and participation in AO, and the exchange of ideas and learning with international colleagues that are the fabric of our organization," Dr. Wang concluded.



A PRESIDENTIAL PROFILE

(continued from page 11)

of accountability. In stepped my father. He created what is today the ADA Council of Scientific Affairs. The Council created the various "ADA Seal" programs used to assure clinical performance of our materials and devices. The Council drives science-based decision-making and my father inoculated me in this philosophy. I had the honor to chair his Council in 2006-2007. A humble honor. While my father has been gone for about a decade, the values he taught me around integrity and character are core to whom I am. I come from a family full of dentists, representing a wonderful profession.

The Academy, your Academy, also represents a strong set of "family values" focusing on the best in ethics and values. I truly believe in the Academy and am humbled to help assist in this most transformative year.

Oh yes, and that five-year-old child I made denture for? Well, he saved my life 13 years ago... A story for another day. Let just say, "never burn a bridge; you may need to cross."

Warmest regards to every member of our wonderful Academy!

AO events and CE calendar



June 4, 10:00 am ET

Live Webinar: "Zygomatic Implants: Optimization and Innovation"

James Chow, MBBS, MDS

June 9, Noon ET

Live Webinar: "State of the Art of Dental Restorative Digital Workflow: Surgical Planning and Prosthetic Solutions"

Marco Cicciu, DDS, PhD, MSc

June 11, Noon ET

Live Webinar: "Reconstructive Therapy in the Management of Peri-implantitis"

Alberto Monje, DDS

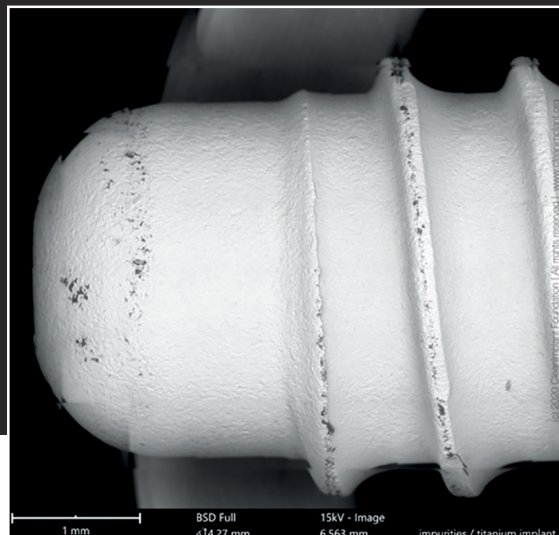
June 16, Noon ET

Live Webinar: *2020 AO Annual Meeting Presentation* "The Esthetic Zone Defect: Prosthetic Gingiva as an Alternative to Surgical Reconstruction"

Stephen J. Chu, DMD, MSD, CDT

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Let's proudly take care of our patients again

By Mehrdad Favagehi, DDS, MS, Academy News Editor

First, I would like to sincerely thank then Academy President, **Jay P. Malmquist**, DMD (Portland, OR), current President **Clark M. Stanford**, DMD, PhD, MHA (Chicago, IL), AO board members, and staff for the difficult and courageous decision made in early March to cancel our Annual Meeting in Seattle. The meeting cancellation literally saved many of our lives, as we now know the epicenter of the first major outbreak of COVID-19 in the United States was just beginning to reach exponential levels in Washington state at the exact time our meeting was to take place there.

As dental professionals during the COVID-19 virus pandemic, we joined other healthcare providers around the world to gallantly charge ahead and care for those in need. We reduced the burden on hospital emergency rooms by taking care of patients with acute dental complications. Like so many others, we acted even before we had answers about the virus or the desired Personal Protective Equipment (PPE). As former Secretary of Defense Donald Rumsfeld once said, "You go to war with the army you have – not the army you might wish you have." Our call to battle is now, when patients need us.

As we boost our PPE gear and implement additional infection control protocols in our clinics, we should never allow our vigilance in observing heightened safety protocols to diminish. In the absence of a vaccine or a cure, along with our team members, we are taking some degree of risk to our health when we see patients.

We cannot eliminate risk, but fortunately, we can work to reduce the risk of viral transmission. Going beyond universal precautions and additional safety protocols to reduce perils for our patients, we should continue to triage patients based on risks/benefits of dental care options for each patient based on their unique conditions. Taking into account patient age, comorbidities and risk for COVID-19 virus complications, we can lead our patients to treatment plan options that help them navigate these turbulent times. An important lesson learned by so many during the shutdown period of this pandemic is the importance of not delaying dental treatment. Untreated dental conditions not only place the patient's life at risk, but also increase risks to healthcare providers and our healthcare system.

As dentists, facing potential exposure to a life-threatening microbiological threat is not new. We've been here before.

Without a vaccine for HIV or Hepatitis C, we face potential risk to our daily health. Over the past 30 years, the dental community has been relentless in developing strategies to reduce exposure to disease causing agents in blood, saliva and aerosols without compromising patient care.

The COVID-19 virus spread throughout the world when we were unprepared and unprotected. We are facing unprecedented uncertainty for our families and practices, both emotionally and financially. As dentists, we are in leadership positions in our homes, practices, and professional organizations. We can be beacons of hope and rationality as we transition from a pandemic to a post-pandemic world. We will meet the challenge as the landscape continues to shift, but we are better prepared than most to be successful in returning to our profession during this new normal. As we learn more about new prevention and treatment approaches to contain the virus, ways to reduce the risks of viral transmission with more protective equipment and better anti-infection practices, we can start to refocus on treating patients, which is at the core of being a dentist.

Let's proudly take care of our patients again.

*I am grateful to the professional AO staff and Dr. **Harriet K. McGraw**, our immediate past editor, who helped produce this issue in spite of the disruptions and uncertainty associated with COVID-19.*

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. To provide feedback about this issue, or to contribute as a guest author, please contact me at mfavagehi@yahoo.com. We will endeavor to publish pertinent comments or views when space permits.



Dr. Mehrdad Favagehi

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Continued page 2



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Clinical Case Example

Clinical images courtesy of German Murias DDS, ABOI/ID

Tooth #15 is set to be extracted



The surgical site was initially debrided to induce bleeding and establish the Regional Acceleratory Phenomenon by going through the lamina dura



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As the OsteoGen® crystals are resorbed and replaced by host bone, the site will become radiopaque.



The collagen promotes keratinized soft tissue coverage while the graft resorbs to form solid bone. In this image, a core sample was retrieved



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

