IMPLANT TRIBUNE

۲

Implant Tribune



Fixed teeth in a day An interview with Dr Steven Bongard

Implant Tribune



Short Implant Placement Armin Nedjat argues the case

> pages 15-17

Laser-lok Amit Patel discusses a recent technology in implant surgery

> pages 18-20

> pages 21-23

Implant Tribune

Guided implant surgical placement with Cad/CAM CEREC Crown

Nilesh R Parmar presents a surgical case study



Fig 1. Reference body with cerec guide mill block

time. However, very few dentists in the UK are placing implants via the use of a guided surgical procedure. The reasons for this are multiple, ranging from dentists not wanting to, or not having confidence in the procedures, the increased costs of guide fabrication and the time delay and extra appointments needed to obtain a fully working and reliable surgical guide.

uided surgery has keys, which are compatible been around for a long with the guided surgical drill sets from all leading implant manufacturers. In this particular case the Astra/Dentsply Implants Facilitate system was used to place the implant.

using the Sirona AC BluCam and a proposal for the missing LL6 was created. A Galileos collimated lower jaw CBCT scan was taken with a **CEREC** Guide reference body set in thermoplastic over the edentulous area. The reference body is identified within the software and a virtual implant placement along with the CEREC crown proposal is all imported into the software. This allows the clinician to virtually place the implant, with reference to the ideal final crown position. In this case, it was deemed that a screw-retained restoration would be desirable; hence the screw access hole was positioned through the centre of the crown.



In this case study I shall be demonstrating an in-house manufactured surgical guide using the CEREC AC BluCam. These guides do not require any impressions to be sent to a third party and can be made rather cheaply in the surgery within around 30 minutes. The guide can then be used in conjunction with specific drill

Once the implant was osseointegrated the final restoration was fabricated chairside using the CEREC milling machine and an Ivoclar Vivadent e.max block.

Case Study

This young lady had lost her LL6 a few years ago and wanted an implant solution. Her medical history was clear and she had a mildly restored dentition with no current dental pathology. Her BPE scores were low, with excellent oral hygiene.

The patient was scanned

Once the implant position was decided, the information is ported over into the CEREC

۲

Fig 3: Reference body and thermoplastic surgical guide

software and using a CEREC Guide Mill Block a drill body is milled by the MCXL milling machine. Once this has been milled it will lock tightly into the thermoplastic drilling template. The surgical guide is now complete and can be used on the patient.

In this particular case an Astra 4.0 x 11mm TX implant was placed using the surgical guide. The patient is prepared using a standard sterile protocol and the area anaesthetised as one would for a regular

 \rightarrow DT page 12

12 Implant Tribune

DENTAL TRIBUNE United Kingdom Edition · January 21-27, 2013

\leftarrow DT page 11

implant placement. The surgical guide snaps firmly over the existing teeth, expanding over and undercuts, becoming a very stable platform to drill through. The Astra Facilitate soft tissue punch is used to remove the overlying soft tissue, and a standard drilling protocol using the Sirona drill keys is used.



A high primary stability of Fig 4: Reference body and thermoplastic guide in-situ prior to CBCT sean



Fig 5: CBCT with reference body and Cerec proposal overlay

NEW DENTAL IMPLANT MENTORING PROGRAM For dentists wishing to develop in a safe, caring and enjoyable environment

he word MENTOR originates from Greek mythology. Odysseus, king of Ithaca, goes to fight in the Trojan War and while he is away he leaves the care of his household, especially his son Telemachus to his trusted friend, Mentor. His last words before he leaves are

"tell him all you know". There in itself is the limitation of the more traditional mentoring. Newer methods of mentoring involve empowerment of the individual. This involves a co-journey where the mentor and mentee join together in a tailor made pathway. This approach helps create lifelong learning where the mentee is the centre of the educational pathway. Dr Soni has used this approach very successfully over the years.

This modern way of mentoring allows mutual respect to develop.

This modern way of mentoring allows both mentee and mentor to learn.

This modern way of mentoring allows all to enjoy and grow together.

The mentoring program at SoniDentalImplants is ideal for mentees who have completed or are partaking in a dental implant course and now want to start to introduce dental implants into their surgeries. The journey will include:

- Marketing to new and existing patients and fee structure
- Treatment Planning
- Staff training in asepsis techniques
- Access to all surgical and diagnostic equipment to reduce start-up costs
- Full clinical assistance with free access to treatment planning templates and consents
- Log book creation
- Full access to bi-monthly study clubs where mentees can grow together

Mentees will complete 10-15 cases through the program. The journey will include over 5 single implants (atleast 3 in the aesthetic zone), 2 implant retained bridges, over 2 immediate loading cases, 2 over denture cases and 3 full arch bridges. Treatment will include soft tissue grafting, guided bone regeneration, block grafting and sinus grafting where needed.

For an informal chat please contact Soni or Michele at: www.sonidentalimplants.co.uk

LET'S LEARN AND ENJOY TOGETHER • LET'S LEARN AND ENJOY TOGETHER

DENTAL IMPLANT MENTORING ADD Accredited Mentor

Learning through self-empowerment
Sharing 20 years of clinical experience



40Ncm was obtained, with a 4mm healing abutment placed immediately. The patient healed with no pain, no swelling and no discomfort. The post op LCPA corresponds well with the pre-surgical planning with an ideal angulation for a screw-retained crown. After

'An implant can be planned, inserted and restored all in-house, using the current available technology'

۲

Free treatment planning
 Log-book creation
 Case selection, photography
 Marketing advice
 Free staff training
 Enjoy & learn with a team with over 50 years joint experience
 sonidentalimplants.co.uk



Call 020 3292 0580 or 07950 464 276

DR MUKESH SONI MSC, BDS (MANC)

Assistant on MSc Course

۲

The final crown can be screwed directly into the implant and a final check for contacts and occlusion is made.

corresponds to the screw insertion path on the abutment.

This is finalised using a high speed diamond bur with copious irrigation. The crown is

glazed and sintered, allowed to cool and bonded to the

abutment using Vario link II.

This process shows just how far CAD/CAM technology has come. An implant can be planned, inserted and restored all in-house, using the current available technology. The final result is equal to any lab-based restoration albeit for simple units. The process does have its limits for multiple span bridges, and multiple implant placement, especially in edentulous areas. As the technology develops, with further advances being made, the scope of what's possible for the implant dentist is always expanding. m

DENTAL TRIBUNE United Kingdom Edition · January 21-27, 2013

Implant Tribune 13





Fig 6: Cerec Guide in-situ



Fig 7: AstraTEch facilitate biopsy punch used through Cerec Guide



Fig 8: Soft tissue removed

۲



osteotomy position

Introducing the New Low Cost CBCT Scanner from Gendex



OPG	from	£25,000 +VAT
OPG+CEPH	from	£34,000+VAT
OPG+CBCT	from	£51,500+VAT
OPG+CEPH+CBCT.	from	£60,500+VAT

Why Choose Gendex?

• OPG units can be upgraded to 4cm or 8cm

CBCT scans to the patient's anatomy.

diameter CBCT and/or CEPH units at any time.

• High Performance Detectors for very high resolution

Smart Scout Technology for exact positioning of the

Push-button selection of the correct scan protocol

and area of interest for both 2D and 3D scans.

UPGRADABLE AT ANY TIME!

۲

 \rightarrow DT page 14

GENDEX

Why Choose IDT Dental Products Ltd?

Experience

• Over 7 years of experience in supplying and supporting CBCT machines.

Dedication

 Supplying, installing, maintaining and supporting hardware and software for Dental CBCT scanners is our core business.

Expertise

• Our factory trained engineers look after your CBCT equipment starting before installation and continuing throughout its working life.

Referrals

or Gendex CBCT machine.

• We can help you to generate referrals for your i-CAT

۲



Fig 10: Implant placement



Fig 11: Placement of a 4mm healing abutment at stage 1

Integration

Ease of use

Upgradability

2D and 3D Scans.

Quality

Accuracy

- Easy workflow from existing patient records by linking the DP-700 into your practice management system.
 - The the mount of t

www.ctscan.co.uk IDT Dental Products Ltd, Unit GC Westpoint, 36-37 Warple Way, London W3 0RG. Tel. +44 (0)20 8600 3540 Email: info@ctscan.co.uk

Gendex is a trademark of KaVo/Gendex Dental Systems, Lake Zurich, USA. Prices were correct at time of going to press

Speak to a CBCT expert at IDT today to discuss your Gendex DP-700 options

14 Implant Tribune

DENTAL TRIBUNE United Kingdom Edition · January 21-27, 2013

← **DT** page 13



Fig 13: Standard abutment with 3mm of occlusal clearance



Fig 17: Cerec image of block

۲





۲



About the author



Dr Nilesh R. Par-mar BDS (Lond) MSc (ProsthDent) MSc (ImpDent) Cert.Ortho was Cert.Ortho was voted Best Young Dentist in the East of England in 2009

۲



Fig 18: E-max crown glaxed, stained and ready for sintering



Fig 14: Soft tissue profile after 2 months healing

۲



Fig 15: Cerec image of abutment



Fig 19:milled E-max CadCam crown with screw hole



Fig 20: Screw retained E-max crown

Fig 21: Final restoration in-situ 2

Fig 22: Final restoration in-situ

and runner up in 2010. He was short-listed at the Private Dentistry Awards in the category of Outstanding Individual 2011. Nilesh has a master's degree's in Prosthetic Dentistry from the Eastman Dental Institute and a master's degree in Clinical Implantology from King's College London. He is one of the few dentists in the UK to have a degree from all three London Dental Schools and has recently obtained his Certificate in Orthodontics from Warwick University. His main area of interest is in dental implants and CEREC CAD/CAM technology. Nilesh runs a successful five-surgery practice close to London and is a visiting implant dentist to two central London practices. Nilesh has a never-ending passion for his work and is famed for his attention to detail and his belief that every patient he sees should become a patient for life. He offers training and mentoring to dentists starting out in implant dentistry, more information can be found on his website www.drnileshparmar.com.

Twitter: @NileshRParmar Facebook: DR NILESH R. PARMAR