24th International Conference and Exhibition on DENTISTRY & ORAL HEALTH April 17-19, 2017 Dubai, UAE

Frame it

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As a dentist you must keep in mind that you are creating a piece of art with each case you are treating. 'Frame it' is a course that gives you the fundamental keys for creating a beautiful frame for your patients' teeth using Botulinum toxin A and dermal fillers. The course will cover several topics including: Facial anatomy for various cosmetic applications, Botulinum toxin A (mechanism of action, proper storage, preparation, indications, contraindications, precautions for use, proper management of complications and injection techniques), dermal fillers (characteristics of various fillers available in the market and pain management options), hyaluronic acid filling agents (indications, contraindications, precautions for use, proper management of complications and injection techniques), as well as the role of golden ratio in facial esthetics. By the end of the course, the participant should be able to manage basic cases that need a fine touch to reach optimal esthetic results.

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Are patients able to aid the early diagnosis of peri-implant complications? A new way to monitor our treatment

Simon Wright Glencairn Dental Group, UK

Dental implants are a common treatment modality to replace missing teeth, and high survival rates in several 10 years follow-up studies, which have encouraged their widespread prescription. However, with an increase in the provision of dental implants, there is an increase in the number and frequency of patients that are affected by complications. This is further complicated by different stages of treatment often being carried out by multiple clinicians. This multi-disciplinary approach is encouraged, however it makes follow up and auditing treatment outcomes more challenging. In particular, when the maintenance and review is undertaken by GDP's with little or no training in the detection of peri-implant complications and disease implant complications, both mechanical and biological can eventually lead to bone loss around the implant and ultimately implant loss. Hence it is essential to detect and treat complications early, and although the data is limited for the treatment of peri-implant complications, there is evidence that an early diagnosis will allow an early intervention and a more predictable resolution. If early signs are missed, in particular with reference to peri-implant mucositis, this will develop into peri-implantitis which is more complicated and less predictable to treat. This presentation investigates the methods, and presents Dr. Wright's research for monitoring implants in the short and the long term, and to discuss if the patient can play an active role in this monitoring programme.

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