AP NEWSLETTER

A Publication of the Academy of Prosthodontics

Volume 94, Number 1

Winter 2012

Hilton Head -In Review

Hilton Head Island or simply Hilton Head is the Lowcountry resort town located in Beaufort County, South Carolina. It is 20 miles north of Savannah, Georgia and 95 miles south of Charleston. In 1663, Captain Hilton identified a headland near the entrance to Port Royal Sound, which he named "Hilton's Head" after himself. The island has a rich history that started with seasonal occupation by Native Americans thousands of years ago, and continued with European exploration and the Sea Island cotton trade. It became an important base of operations for the Union blockade of the Southern ports during the Civil War. Once the island fell to Union troops, hundreds of ex-slaves flocked to Hilton Head, which is

still home to many 'native islanders', many of whom are descendants of freed slaves known as the Gullah (or Geechee) who have managed to hold onto much of their ethnic and cultural identity.

The island features 12 miles of beachfront on the Atlantic Ocean and is a popular vacation destination. Approximately 70% of the

by Dr. Thomas Vergo

island, including most of the tourist areas, is located inside gated communities such as Harbor Town. The meeting was held at the Hilton Head Marriott Resort & Spa.

The "In Memoriam" in the Program Book reminded us of valued colleagues and friends who had passed since our previous meeting: Dr. Carl Jerry Andres—June 16, 2010, Dr. Douglas A. Atwood—June 29, 2010 & Dr. Louis Boucher—October 15, 2010. All were remembered as exceptional prosthodontists, conscientious educators, avid researchers, and good people. They all will be missed by all

Continued on page 14



Hilton Head Marriott Resort & Spa, South Carolina

Editorial

by Brian Fitzpatrick

Issues of Bias, Prejudice and Science.



The "Science of Climate Change" is a useful yet potentially volatile topic to introduce any discussion on bias. It remains a sad truth that the global debate on climate change is reduced to one based on ideology yet the term science is liberally injected into the rhetoric that pervades this argument. We hardly need reminding that science embraces fact. Science has no motivation other than universal truth and scientists share a common bond of unbiased examination and interpretation of the natural laws and factual evidence available to all of us. Science is immune from the philosophies, religions, politics, and presuppositions of those who call science their profession. The term "ideology" was born in the highly controversial, philosophical and political debates and fights of the French Revolution and acquired several other meanings from the early days of the First French Empire to the present. The word was coined by Destutt de Tracy in 1796 to refer to one aspect of his "science of ideas" (to the study itself, not the subject of the

itself, not the subject of the study). Ideology translates to the science or study of ideas. However, ideology tends to refer to the way in which people think about the world and their ideal concept of how to live in the world. This is slightly different from philosophy in the sense that ideology encompasses the concept that one's ideals are the best way. Ideology is comprised of a body of doctrine, myth, belief and even dogma. It was once said that "ideology is a room without windows" - to be trapped forever in the comfort of our own world view. Too often a person or party's position is dictated solely by the political ground they inhabit. It is natural that we will see life through the parameters of our

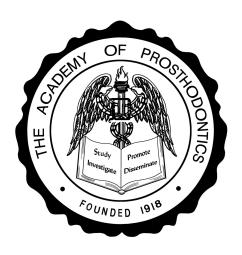
own experience but this perspective has no place within the biological sciences and within dentistry and the science that is prosthodontics in particular.

The problem is that such adherence to what we think is true can blind us to the equally valid view of those whose

Continued on page 3

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Editorial continued:

Continued from page 2

experience leads them to see things a different way. Sometimes, perhaps, it's better to consider their view rather than just dismiss it. Equally it is worth examining our own views - and why we hold them; the necessity to question in the quest for truth. Bias has many guises. Clinical bias is a prejudicial preference for a particular intervention. This can result from certain education, training and experience that culminate in a limited diagnostic ability and a limited or narrow surgical skill set. This clinical bias can be further exacerbated by a commercial bias if one has invested in new technologies and dental materials leading to a financial imperative to use this acquired device or material investment and as such can result in dentists recommending specific interventions to patients that could be construed as being dentist focused rather that patient focused. At a higher intellectual level. psychologists talk of "conviction bias". The theory holds that we will all gravitate to information that confirms our own already held belief from politics to climate change and, so it seems, to biological and dental science. Like everything else in this world,

science is affected by the ideology (doctrines and dogmas) of the scientists within the culture of the day. Peri-implantitis is such an example of conviction bias where thinking is prejudiced by virtue of clinical training and hypothetical biological disease modelling. Dental implants and teeth are presumed to conform to an identical pathogenesis. Periimplantitis is an untested and unproved hypothesis at best and an erroneous assumption at worst. This assumption has resulted in a flawed diagnostic interpretation and prescribed interventions for patients that lack scientific validity. Such clinical, commercial and conviction bias can lead to poor or bad outcomes for patients who trust and rely on professional health care providers to assist with best decision making. Patient focused decision making demands consideration of the predictability of a beneficial outcome, to minimal intervention, to longevity, to cost effectiveness and to minimize risk and morbidity. The presumption of periimplant mucositis and the unrelenting progression to peri-implantitis and the inevitable marginal bone loss have the lamentably familiar sound

of gingivitis as the precursor to the progression to destructive periodontitis and attachment loss in teeth. Zarb and Koka in their Editorial "Osseointegration: Promise and Platitudes" (Int J Prosthodont 2012;25:11-12) challenge this notion that teeth and implants share a common pathogenesis. They call for a serious debate on the topic of biological failure of dental implants in a clinically rigorous context and suggest a more meaningful discussion will follow if each respective interface were viewed in the context of a host with an entity (tooth or implant) embedded in it. Koka and Zarb "On Osseointegration: The Healing Adaptation Principle in the Context of Osseosufficiency, Osseoseparation, and Dental Implant Failure" (Int J Prosthodont 2012;25:48-52) go further by proposing a rational theory wherein host biology and implant characteristics are each viewed as separate entities expected to interface and coexist. They introduce the terms osseosufficiency to the concept of "enough" osseointegration and osseoseparation to the state of insufficiency or suboptimal osseointegration.

Continued on page 4

Editorial continued:

Continued from page 3

Many prosthodontists who have provided, maintained and observed implant supported prosthetic devices over a considerable period of time all quietly and conservatively challenge the notion of periimplantitis. It is counter to the published scientific evidence that reports long-term implant success and survival. Published within this newsletter is a proposed Mission Statement for the AP. The core strategic initiatives for The Academy of Prosthodontics support prosthodontic leadership, pursuit of ethical standards in research, clinical documentation and patient care and to be recognized as the ethical standard bearer for the specialty (Be the moral compass of prosthodontics). Possibly the hypothesis that advances peri-implantitis as a diagnostic entity responsible for marginal bone loss is a challenge that the AP could demonstrate leadership and ethical scientific support in response to this call from two of our esteemed members for informed scientific scrutiny and debate? Could peri-implantitis and marginal bone loss around dental implants form the theme or topic of a future AP Annual Scientific meeting?

Presidential Address



AP Strategic Plan

Greetings to the members of the Academy of Prosthodontics. I hope everyone is enjoying a wonderful year. As we reflect on the past year it is nice to remind ourselves how truly fortunate we are to be members of an organization like the Academy of Prosthodontics. We all know the tremendous history of this organization and we appreciate what it has done for the discipline and specialty of prosthodontics. This organization consistently provides both scholarship and fellowship to all its members. We also recognize that we cannot rest on our laurels and need instead to constantly reinvent ourselves.

In the spirit of reinvention the Executive Council of the Academy met on November 20, 2011 to discuss the current status of the Academy and to address strategies to continuously maintain the relevance of this organization. Our normal Executive Council meeting, a meeting designed to review the direction, financial health and committee activities of the Academy, was conducted in an expedient fashion. You probably noted the tardiness in distribution of committee report requests this year. To a great extent this was a planned delay in that the tight timeline made all committee reports clear and concise documents.

Continued on page 5

AP Foundation

Contributions and memorials should be made to the

Academy of Prosthodontics Foundation

and sent to:

Jim Chandler DDS 1640 Nicholasville Road Lexington, KY 40503

Presidential Address Continued from page 4

This succinct nature of these documents allowed the EC to manage the business of the Academy and still leave time for thorough discussion of the strategic plan.

During the strategic planning session it became obvious that the mission of the Academy has gradually evolved over time. Our previous mission statement and strategic plan, documents (that will be archived on the webpage) were written in 1995 and served us well over these years. Evaluation of these documents however demonstrated a need for reassessment as times have changed since their development. Published in this Newsletter you will find the EC's recommendation for a new mission statement and for the strategic plan that would be developed from such a statement

The Council worked diligently to identify the unique position that the Academy plays within prosthodontics. Rather than continuing to define itself by previous accomplishments the Council recognized that most of the accomplishments of the Academy have all developed from the Academy's position as leaders of the discipline and

the specialty of prosthodontics. Given this, the new mission statement clearly and directly identifies this unique function of the Academy. The risk in identifying an organization in such a way is that the mission may appear boastful. The reality however is that this Academy has always assumed this leadership role. Consequently our new mission of being the key opinion leaders for the specialty has been adopted.

Likewise there was a recognition that the strategic activities of the Academy have gradually evolved. Indeed there are some activities that will continue to be primary functions of the Academy. These are the presentation of a premier scientific meeting on an annual basis and the ongoing maintenance and evolution of the Glossary of Prosthodontics Terms. Beyond these, other activities need to be promoted. As the specialty has changed one wonders if any organization has taken on the role of being the moral compass of the specialty. Through the ongoing communication of issues related to dental ethics, the Academy is ready to assume this role. The Academy also recognizes that it, in the activity of being a thought leader; it has a unique position to as-

sist industry in development of products and techniques that will move prosthodontics forward. In contrast to previous collaboration with industry that allowed clinicians to be beta testers of new products, the intellectual efforts of this Academy should serve to promote product development that truly stimulates progress. Finally the Academy also recognizes that maintenance of its position as a thought leader will only occur if it mentors future thought leaders. The humble nature of the Academy has led to reluctance to create meaningful succession planning. Although the humility is laudable the risk from inactivity is too great. Consequently the Academy will enter into a new initiative to stimulate through mentoring the future generations of prosthodontists.

I hope that you will all agree that the new mission of the Academy is in keeping with the history of the Academy. Likewise I hope that you will support the strategic plan that was developed to accomplish this mission. I look forward to seeing everyone in Jackson Hole where this mission and plan will be presented in their entirety.

Steve Eckert

Secretary-Treasurer Notes

by Sreenivas Koka



So, it is with mixed emotions that I am writing my last offering to the AP Newsletter as Secretary-Treasurer of the Academy. Steve Eckert was a great help to me when I assumed this Officer position and I am sure JT will thrive when he takes over in May and establishes a new way of doing Academy business with RES Inc, our administrative partner. Working with Academy Fellows in various committee and administrative venues is wonderful as your passion for the Academy is inspiring. In particular, I would like to thank three Fellows with whom I have worked closely in the role of Secretary-Treasurer, and who have put in extraordinary effort on behalf of the Academy. Peter Stevenson-Moore goes

above and beyond constantly to keep our web site active and replete. Brian Fitzpatrick has taken on the AP Newsletter editor role and produced exemplary publications. Larry Brecht has been an amazing leader of our corporate sponsorship efforts. Peter, Brian and I hail from the British Commonwealth and Larry is married to a Brit – so you have been influenced by the

Queen's subjects for a couple of years now – could you tell? Seriously, I hope you all have enjoyed the experience. Most importantly, I would like to thank the Fellowship for the privilege of serving in this role. You have endured my foibles and I am grateful for your patience; and now on to important Academy affairs.

In Memoriam

It is with great sadness that I inform you that Janie Davis passed away recently. Janie, wife of Honorary Fellow Howard Davis, graced many an Academy meeting with her charm and effervescence. She will be greatly missed.

2012 Meeting – Jackson Hole, Wyoming

Meeting registration is OPEN!!

Please visit the Academy's web site for information regarding this year's registration. President Eckert and RES have done a great job of putting together a super social program and Peter Stevenson-Moore has been tremendous in maintaining our web site with up to date information.

http://www.academyofprosthodontics.org/2012_Jackson_ Hole.html

The location of our meeting is the Four Seasons in Jackson Hole. The meeting brochure contains valuable information regarding getting to Jackson Hole airport (JAC) and from the airport to the hotel. The weather will be highly unpredictable. We could have spectacular weather or it could be blustery and snowing – a suitcase packing nightmare! Nevertheless, if the weather is on the lousy side, I can assure you that the comforts of the Four Seasons will more

__Continued on page 7

Secretary-Treasurer Notes continued:

Continued from page 6

than make up for it. The room block (room rate is \$245 per night plus tax) remains a key point for the Academy to address satisfactorily to avoid significant financial penalties. Please make your reservations immediately.

Reservations cannot be made online – they must be made by phone. Here are the important numbers:

Phone: 307-732-5600 Phone: 1-800-295-5281

Post Meeting Tour to Yellowstone

The Jackson, WY location provides an ideal opportunity to explore the Yellowstone National Park. The AP has therefore organized an elective post conference 3-night private tour, accommodations inside the park. Details can be found on the Academy's web site along with other meeting information.

AP Financials

From my roost overlooking the Academy's financial position, we remain in relatively good order. However, the costs of the Hilton Head meeting were higher than we

anticipated and sponsorship dollars were less than in some previous years due to some purse string-tightening at various corporations. To that end, we incurred a deficit in our 2011 financial year (deficit of approximately \$70K) and I take full responsibility for this deficit. I will provide additional details in Jackson Hole. The Executive Council looked at this matter closely at the interim meeting in Chicago last November and instituted some policies that will hopefully limit the risk of continued financial deficits. To remain in good financial order, however, has highlighted our dependence upon corporate sponsorship and guest attendance. I know these are themes that every Secretary-Treasurer harps on at you about – but it is because they are beyond important; they are vital to our continued existence. Again, let me encourage you that the Academy is in good financial order, in large part, due to the good work of previous Sec-Treasurers and ECs. Please. please, please invite a guest or two to Jackson Hole. Also, please ask Larry Brecht how you can help with the Corporate Liaison committee work.

Proposed By-Laws Change

As we discussed at the second business meeting in Hilton Head, the increase in administrative support provided by RES Inc means that we no longer need a Recording Secretary Officer position. The plan we discussed is to eliminate the Recording Secretary position leaving all other aspects of the Executive Council make up and number unchanged. You will be receiving wording to reflect this change in our By-Laws in the next few weeks for review. We will then discuss and vote at the first business meeting in Jackson Hole. The gist of the change is that the EC will drop from having six officers to five (Past-Pres, Pres, Pres-Elect. VP and Sec-Treas) and that the number of councilors will remain at 4 (currently Felton, Brown, Malament and Garcia). Since this is the year when we would have elected a new Rec-Sec, there are no plans for an election this year. Another benefit of this change will be that the term on the EC will be reduced by one year.

Sreenivas Koka

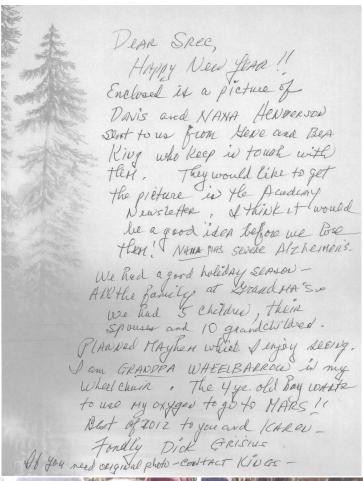
Secretary-Treasurer Notes:

Continued from page 7

Hendersons, Kings and Grisius

Recently, Dick Grisius sent me a lovely note and a copy of a picture taken by Gene and Bea King of Davis (96yrs) and Nana Henderson (95yrs) celebrating 71 years of marriage (15 June 1940). I am grateful to Gene King and Grandpa Wheelbarrow for informing me about the Hendersons and it is another reminder of the ties that bind our Academy family together. Please enjoy the photo and Dick's letter.

Sreenivas Koka





Jackson Hole, Wyoming



94th Academy of Prosthodontics Annual Meeting

Four Seasons Resort, Jackson Hole, Wyoming

Room Rates: Single or Double Rooms \$245 plus tax *1-800-295-5281*

Wednesday May 16 to Sunday May 20, 2012



Featured Speakers in Jackson Hole



Frauke Müller

Dr Müller is professor and chair for gerodontology and removable prosthodontics at the University of Geneva, Switzerland. Dr Müller served on the board of the European College of Gerodontology, Geriatric Oral Research Group of the IADR and the Swiss Society for Reconstructive Dentistry. She is President of the Swiss Society for Dentistry for handicapped and elderly persons (SGZBB). She is Associate Editor of Gerodontology. Her research activity is mainly related to gerodontology, oral function as well as complete and implant-supported overdentures.

Title: Prosthodontics in Multi-morbid Patients

Demographic developments indicate an increasing proportion of the elderly in the population as well as increasing life expectancy. Despite tooth loss occurring later in life, removable dentures are still a reality in old age. However, in the oldest frail geriatric patient, the dental treatment may follow principles of a reasonable/feasible, rather than an ideal treatment plan. The patients' motivation to enter comprehensive treatments usually diminishes and physical disabilities limit the range of interventions. This means that prosthetic replacement of missing teeth will have to be simplified, especially when using partial dentures. Duplication techniques reduce the challenge of replacement dentures. Furthermore, implants are increasingly used to stabilize lower complete dentures. Restorative measures might reverse some of the functional, psychological and psychosocial effects of tooth loss and thus increase the oral health related quality of life even late in life.



Martha Somerman

Dr Somerman has been director of the National Institute of Dental and Craniofacial Research (NIDCR) since August 2011. Dr. Somerman was dean of the University of Washington School of Dentistry, from 2002 to 2010. Dr. Somerman was on the faculty of the University of Michigan School of Dentistry from 1991 to 2002 where she served as a professor and chair of periodontics/prevention and geriatrics while simultaneously holding an appointment as professor of pharmacology at the School of Medicine.

Title: NIDCR - Maintaining the Cutting Edge

This presentation will highlight some of the many research projects supported by the NIDCR,NIH targeted at accelerating gains in dental, oral and craniofacial health. Research topics, from basic to translational to clinical, will include oral cancer, the microbiome project, salivary diagnostics, public health challenges (such as acute/chronic pain linked to temporomandibular joint disorders and associated co- morbidities and human papilloma virus-related oral cancers), cleft lip and/or palate, practice based network, inflammation, and rare and undiagnosed disease program. In addition, a review of the spectrum of NIDCR training and career development opportunities will be presented.

Continued on page 12

Featured Speakers in Jackson Hole: continued

Continued from page 11



Kenneth Kornman

Dr. Kornman is the Chief Scientific Officer of Interleukin Genetics, a molecular diagnostics company focused on developing genetic tests to guide disease prevention and treatment. Dr. Kornman is actively involved in functional genomics research and gene-environment interactions relative to common diseases of aging. He has published more than 125 manuscripts and authored three textbooks on treatment of periodontal disease. Dr. Kornman is Editor-in-Chief of the Journal of Periodontology, founding Co-Editor of Clinical Advances in Periodontics.

Title: Inflammation, Your Health, and the Health of Your Patients.



Susanne Scherrer

Dr Scherrer has 28 years of private practice experience in Geneva as a general practitioner as well as part-time teaching and researcher commitment at the Department of Prosthodontics-Biomaterials (Univ. Geneva). Her general research interests include all-ceramic materials, fracture mechanics and fractographic failure analysis.

Title: Zirconia in Prosthodontics: Options and Quality

Zirconia has been successfully used over the past 10 years in prosthetic dentistry. The current CAD-CAM technology of this material allows production of highly complex multi-unit implant supported frameworks, implants, abutments, or lately full anatomy zirconia restorations. Understanding this material is however mandatory to avoid jeopardizing its clinical longevity. Processing and handling of zirconia involves the need of high quality working standards from the manufacturer, the dental technician and the dentist. Quality control of the zirconia framework and

manufacturer, the dental technician and the dentist. Quality control of the zirconia framework and design, grinding damage and veneer chips will be discussed based on clinical cases. The course objectives are to understand differences among existing zirconia ceramics (1), the detrimental effect of grinding damages (2) and how to improve longevity (3) based on available knowledge.

Featured Speakers in Jackson Hole: continued

Continued from page 12



Jean-François Roulet

Dr Roulet is Professor and Chair of the department of Restorative Dental Sciences at the University of Florida, Gainesville. Prof. Roulet has supervised more than 150 Theseses, published more than 180 research papers and many reviewes, book chapters and books. His main subjects of interest include amalgam substitute, composites and ceramic inlays. Prof. Roulet is a member of multiple national and international professional associations and is Editor of The Journal of Adhesive Dentistry, Oral Health & Preventive Dentistry, and Prophylaxe Impuls.

Title: Minimally Invasive Esthetic Dentistry

Aesthetics has become very important, when restoring the anterior segment. Developments in dental materials and technology has enabled the dentist to make restorations indistinguishable from natural teeth. However, these options sometimes are leading the decision from a problem solving approach to a solution driven approach, which may not be the best solution for the patient. Therefore, it is important to strictly follow a treatment concept that creates oral health with minimal effort. With modern composite resins, which are color stable and retain their surface morphology and gloss, in combination with adhesive techniques it is possible to create esthetic restorations which were unattainable in the past. The first consideration should always be a minimally invasive approach.



Mike Girard

Mike is CEO and President of Diadem Digital Solutions. With nearly 40 years of experience in the dental field and with 20 years in the dental laboratory industry working with the Shaw Group of Laboratories, Mike transitioned to the dental manufacturer world and completed tenure of 8 years with Nobel Biocare. Among his accomplishments at Nobel, Mike and his team successfully built a North American start up CAD/CAM division with sales of nearly 50 million dollars by the fifth year in business. In 2001 Mike was appointed Vice President of Marketing for North America and also developed global corporate strategy for Nobel.

Title: Winds of Change

Scientific Program Schedule

Thursday, May 17

Kenneth Kornman Inflammation, Your Health, and the Health of Your Patients

Leslie Laing Green Tea, Lollipops, Licorice Root: the Sjögren's Quest

Lawrence Brecht Mandibular Reconstruction and Rehabilitation: Innovation through

the Convergence of Technology and Collaboration

Frauke Müller Prosthodontics in Multi-morbid Patients

Robert Taft The Use of Digital Technologies in Forensic Identification

Susanne Scherrer Zirconia in Prosthodontics: Options and Quality Control

Friday, May 18

Martha Somerman NIDCR – Maintaining the Cutting Edge

Gary Goldstein The NIDCR and its Impact on Academic Appointment Promotion and

Dental School Curricula

Clark Stanford Pathways to Success - The role that Prosthodontists can play in the

emerging areas of translational sciences

François Roulet Minimally Invasive Esthetic Dentistry"

Jack Gerrow Dental Education and Licensure in a "Global World": Can Compe-

tence be Measured?

Mijin Choi Ultrasound Imagery for Use in Dental Implant Site Diagnosis, Treat-

ment Planning, and during Surgery

Hiroshi Hirayama Digital Prosthodontics: Now and Future

Scientific Program Schedule

Saturday, May 19

Nelson Silva All-ceramic Systems: Laboratory and Clinical Performance

Donald Curtis Confidence and correctness in clinical decision-making

Kent Knoernschild Dental Implant Outcome Generalizations How Helpful Are They?

Jonathan Ferencz High Strength Ceramic Fixed Partial Dentures: The Nexus of

Research, Industry and Clinical Experience

Michael Girard Winds of Change

German Gallucci Dental Digital Technologies in Implant Prosthodontics

Kumar Shah Cement-retained or screw-retained implant restorations... How

about neither?

Petra Guess Minimally Invasive Treatment Concepts: Science &

Clinical Recommendations

Sunday, May 20

David Chvartzsaid The Experience of Implant Complications and Opinions

Regarding Complications among Dentists in Private Practice

Cortino Sukotjo Corrosion in Implant Dentistry, myth or fact?

Samantha Siranli Implants in the Esthetic Zone

Sreenivas Koka Osteonecrosis of the Jaw: Fact and Fiction

2013 Meeting Presentation – Maui, Hawaii

Ben Wu Intraoral Hearing Device

Carlo Ercoli Indications and Applications of Sonic Handpiece Technology in

Prosthodontics and Implant Surgery

Ichiro Nishimura NeuroEngineering: Evolution of Biopsychosocial Networks in

Humans

Continued from page 1

who had the good fortune to know them.

President Eggleston, in his President's Welcome Address, welcomed us to the 93rd Annual Meeting of the Academy of Prosthodontics. He praised the Scientific Program Committee, under the leadership of Tom Taylor, for their dedication in enlisting an outstanding group of speakers for our scientific program. He then installed fellows elected at our 2010 meeting: Dr. Mijin Choi, Dr. Leslie Laing & Dr. David Gratton were welcomed as Associate Fellows, and Dr. Francine Albert, Dr. Carl Driscoll, Dr. Keith Ferro, Dr. Debra Haselton, Dr. Harold Prieskel, Dr. Geoffrey Thompson & Dr. John Zarb were elevated as Active Fellows.

The following companies were acknowledged for their partnership and support: Meeting Sponsor—Nobel Biocare USA, Inc., Platinum Sponsor—Astra Tech, Gold Sponsors, 3M ESPE, Ivoclar Vivadent, Inc. & Straumann and Bronze Sponsors—Kuraray America, Inc., Biomet 3i, Dentsply Tulsa Dental Specialists, Keystone Dental, & Sybron Implant Solutions.

Wednesday's morning session of the scientific program started with Presiding Fellow, Dr. Sreenivas Koka, introducing the morning's Keynote Speaker, Dr. Janet Clarkson, a founding member of the Cochrane Oral Health Group. Her presentation was entitled: Getting Evidence into Practice and stressed the concept that in order to improve the experience of patients attending for healthcare, there needs to be an understanding of the effec-

tiveness of interventions and the translation of evidence into practice. Dr. Gil Alcoforado was the next speaker and his topic was Does Periimplantitis Exist, concluding that only very recently has well controlled studies been published that show what the possibilities are to rehabilitate the periodontal patient with endosseous implants by controlling the possibility of infection. After the break, Presiding Fellow Dr. Roy Yanase introduced the next speaker, Dr. Hans Peter Weber whose presentation reviewed Long-term Observations on Labial Peri-Implant Tissue Behavior after Immediate Implant Placement in Extraction Sockets. The next presentation, The UCSF Experience with Zygomatic Implants for Maxillary Defects, was given by Dr. Arun Sharma. He suggested that osseointegrated implants can provide an alternative to surgical reconstruction when obturating congenital and acquired maxillary defects in edentulous patients. Dr. Stephen Wagner's presentation reviewed the history

Continued on page 15

Academy of Prosthodontics - Office Bearers Front: Tom Taylor, Steve Eckert, H-P Weber Back: James Taylor, Dave Eggleston, Sree Koka



Page 15

Continued from page 14

of the final impression for complete dentures and presented a new prefabricated edentulous tray designed to help the clinician produce a well extended final impression in one visit. Dr. Thomas McGarry completed the morning by giving a paper entitled Resective Procedures to Reestablish the Occlusal Plane in the Debilitated Dentition- Tooth/ Implant Divergence Angle. His paper reviewed the correlation of dental landmarks with changes in alveolar anatomy to achieve predictable implant positioning.



Thursday's scientific program started with Dr. Lino Calvani presentation, Biomechanics and Biodynamics of Prosthetic Facial and Lip Support, applied to full arch implant supported fixed prosthetic reconstructions. Presiding Fellow: Dr. John Agar introduced the next speaker, Dr. Dean Morton, whose presentation placed emphasis on an interdisciplinary and current approach to prosthodontic education, planning and treatment. His discussion concentrated on the goal of graduating dentists and prosthodontists prepared for the demands of practice tomorrow by identifying and considering contemporary planning, laboratory and clinical options. Dr. Avinash Bidra next presented 3D Esthetic Planning for Maxillary Fixed Prostheses reviewing a classification system justified with clinical scenarios to determine when and why "pink prosthesis" is indicated. Restoring Partial Edentulism with Implant Supported Prostheses: Parameters for Success was the title of the next paper given by Dr. Konstantinos Michalakis. This presentation focused on the parameters which are important for a successful biologic, functional and esthetic outcome when restoring partial edentulism with implant supported prostheses. Presiding Fellow, Dr. Carlo Ercoli, continued the program by introducing Dr. Ariel Raigrodski, who discussed the mechanical as well as optical properties of zirconia. and the indications and limitations of zirconia-based restorations. Dr. Kenneth Malament continued the "ceramics" theme in his presentation entitled MetalCeramics - Does it Have to be a Chip Off the Old Block? Dr. Strub, Professor and Chair of the Department of Prosthodontics at the Albert-Ludwigs University in Freiburg, Germany, compared conventional methods, to those that employ digital technologies in the dental practice and stipulated that such technology generally results in improved accuracy in data acquisition and assessment, superior ef-

Continued from page 15

ficacy in treatment planning and more controlled and faster manufacturing process. Last, but not least, Dr. James Kelly reviewed a current prospective study conducted at the University of Texas, M.D. Anderson Cancer Center looking at survival of endosseous implants placed prior to or during non-surgical therapy.

Presiding Fellows, Dr. Kenneth Malament and Dr. Ted Jacobsen hosted the Friday presentations. Drs. David Felton and Eric Rivera lead us through an in-depth presentation focused on how to determine when a tooth is or is not restorable, when the root should be maintained with root canal therapy, and when it should be sacrificed and replaced with an endosseous dental implant. The next presentation given by Dr. Martin Freilich described a series of preclinical studies designed to develop a new implant system to guide the regeneration of alveolar bone height. Dr. Matthew Kattadiyil paper was The Anteroposterior Orientation of the Maxillary Occlusal Plane: Data and Preferences and described the important role the anteroposterior orientation of the maxillary occlusal plane plays in the assessment and creation of an esthetic smile. Dr. Dean Vafiadis' presentation maintained that CAD/CAM technology has the advantage of reduced clinical chair-time and reduced laboratory costs. He suggested that the accuracy of these techniques has improved to the point where they are now comparable to conventional techniques. In Dr. Danielle Layton's presentation, Lost but Not Forgotten, she suggests that patients who return for dental review are survivors or failures; however, unknowns are simply that.... unknown. Failure to account for "unknowns", or failure to consider reasons for our "unknowing" hinders, undermines and precludes rational conclusions regarding prostheses outcomes. Dr. Charles Goodacre show the clinical steps used to clinically record the morphology of the intaglio and cameo surfaces of complete dentures and then can be scanned and imported into a 3D virtual tooth arrangement program where the prosthetic teeth can be arranged and articulated using CAD/ CAM technology.

The last day of the scientific program started with Dr. David Gratton continuing the "digital" theme with his presentation, Digital Prosthodontics: Are You Impressed Yet? Next, Dr. Cornell Lee, presented: Evolving Treatment Philosophies for Single Anterior Implant Crowns. Presiding Fellow, Dr. HP Weber introduced Dr. Brian Vence next, who demonstrated his collaborative approach through ongoing re-evaluation and continual dialogue as an interdisciplinary team member with other team members and the patient. He emphasized the benefit of this approach is a committed patient with realistic expectations, less treatment, less invasive restorations, reduced costs and the ability to phase treatment with more ideal esthetic and functional outcomes. Dr. Steve Parel use the current literature and recent clinical experience as the basis for suggesting a method profiling patients who are at greatest risk for implant and prosthetic complications in his paper entitled Immediate Loading for the Full Arch Maxilla: Critical Considerations and Profiling. The last three speakers of the meeting, Dr. Kent Ochiai, Dr. George Priest & Dr. Jonathan Wiens were introduced by Presiding Fellow: Dr. Lily Garcia. Dr. Ochiai's lecture reviewed the concepts of cephalometric facial form and skeletal analysis, the method of

Continued from page 16

assessment and the potential impact of different forms types on restorative treatment outcome, and their functional assessments. Dr. Priest's presentation discussed contemporary designs for fixed and removable prostheses for edentulous mandibles and maxillae. And lastly, Dr. Wiens' presentation, Occlusal Stability?, discussed parameters in diagnosing occlusal changes and how to create a treatment plan that will improve the functional stability of the patient's re-established occlusion.

The social events gave all that attended time to refresh old acquaintances, make new friends and just have fun—a true compliment to the scientific program! The social events started on Tuesday evening with the Welcome Reception and Louis Blatterfein Dinner held on Basshead Deck and the event was sponsored by 3M ESPE. The evening gave us the opportunity to MEET & GREET members, spouses and guest. The Get Acquainted Breakfast, sponsored by Ivoclar Vivadent Inc., made sure we all had a hardy breakfast before the start of the scientific program. The Spouses/Guest Outing, sponsored by 3M ESPE, was a Dolphin Cruise on the Vagabond out of Harbour Town in the protected waters of Calibogue Sound. The Vagabond did a "cruise-by" of the fabulous mansions on the very private Daufuskie Island and then back to the scenic Waterfront Café for lunch.

The Social Outing & Dinner took us to Rose Hill Mansion. In the days following the election of President Abraham Lincoln, South Carolina Gov. William H. Gist was characteristically



Continued on page 18

Continued from page 17

blunt: "The only alternative left, in my judgment, is the secession of South Carolina from the Federal Union." Rose Hill Plantation State Historic Site interprets the life and legacy of the man history has come to know as the "Secession Governor." The son of a Charleston merchant, Gist rose from modest beginnings to be elected governor of South Carolina in 1858. By then he had come to accept the belief that South Carolina could protect slavery only by withdrawing from the Union. The sprawling grounds were framed by 500 year old oak trees covered in Spanish moss, and the tour of the plantation home gave us an idea of times past. The event was toppedoff with AP Fellow Rainer Bergmann giving us a "miniconcert" on the magnificent,

full size, antique grand piano in the mansion. This outing was sponsored by Nobel Biocare USA. Our social events ended with the President's Reception, Sponsored by Nobel Biocare USA, and Installation Banquet, sponsored by Astra Tech - a fitting end to a week of sharing, leaning and friendship.

As we left Hilton Head, we said our "goodbyes" until we meet again this May in Jackson Hole, Wyoming with the opportunity to extend our stay in nearby Grand Teton National Park, Yellowstone National Park, and the National Elk Refuge as a great incentive to attend the meeting. See you there!!!!



Rose Hill Mansion

Academy Fellows in the News



The Members of the Council for the American Board of Prosthodontics are pleased to announce that Dr. David Felton has been elected as the new examining member of the American Board of Prosthodontics. Dr. Felton has served as Graduate Prosthodontics Program Director (1990-'93, 2001), and Chair of Prosthodontics (1992-2002) at UNC. He became a Diplomate of the American Board of Prosthodontics in 1996, and served as President of the American College of Prosthodontists (2001-02). Professor Felton is Editorin-Chief of the Journal of Prosthodontics since 2003 and in August, 2011, he was appointed Dean of the West Virginia University School of Dentistry. Congratulations.

'One-on-One' featuring Julie Holloway





I grew up on a farm in Northwest Ohio, where all the neighboring houses belonged to my relatives. While it was an incredibly "safe" environment in which to grow up, it may also explain my rebellious "punk" undergraduate days at Ohio State in the early 1980's...

I look back at the warm summers spent at my Grand-parent's vegetable/fruit stand, listening to a little transistor radio with great fondness. Some of things from that time that still make me smile are: my awesome bike with a banana seat and playing cards in the spokes, the smell of bushels of ripe peaches, the feel of the soft, warm infield dust between my toes

during our pick-up barefoot softball games, our horse's love of cinnamon toast, and lack of a mortgage (or two). What got you involved in Prosthodontics?

My father was a general dentist and early in my life, I saw his long hours and weekend emergencies as a deterrent to pursuing dentistry as a career. I was naïve about this aspect of my father's practice, as his patients respected him and have returned his kindness many times over. I was also naïve to the fact that my father's aftershave was not eugenol. I didn't find out until high school that my friends recognized the clove smell that I associated with my father's return home each night as "dentist office smell." We had a workbench at home that held a grinder, a shotgun shell-reloading machine and a broken-arm casting machine. When I was nine, I helped my father cast my own occlusal gold inlay for tooth #30 in our garage. That started my interest in dentistry; my love of prosthodontics grew in dental school under the tutelage of many caring mentors. The image of that open flame hovering near (mostly empty)

cans of gunpowder while making a cast restoration in our garage is a great analogy the excitement I feel in our specialty. I think that unique combination of willingness to try the unproven paired with respect of possible consequences characterizes many prosthodontists I hold in high esteem.

As far as influences in my life, there are personal and professional ones. Personally, it has to be my father – I wouldn't have even applied to dental school without his encouragement. Professionally, I consider Anthony Gegauff, Greg Wall, and Dale Cipra as the guiding forces during my prosthodontics training. My thanks to all of them for their patience and support! I have been partnered with Isabelle Denry for 20 years. It has been a great time of personal and professional growth for us both. Each evening, the drive home from work is a brainstorming session of the day's disappointments and triumphs. We have a pet, Hedvig, who is the most darling cat in the world. We spend as much time as we can with our families in Ohio and France. What are you Hobbies and

"One-On-One"-Julie Holloway AP Mission:

Continued from page 17

Pastimes?

As far as hobbies, I love to cook, especially ethnic foods, I like to do labwork in my basement lab, I love to remodel when I have the time – tile, woodwork, most anything involving power tools, I love music and play brass instruments, string and electric bass, and the occasional bagpipe chanter. I also enjoy getting to know people from around the world and their customs.

AP Mission: To provide key knowledge and leadership in.... prosthodontics

Strategic Initiatives:

- The Academy of Prosthodontics will be recognized as the ethical standard bearer for the specialty (Be the moral compass of prosthodontics)
- Provide an advisory board to the prosthetic dental industry
- Be the mentors to emerging prosthodontics leaders
- Maintain and expand the Glossary of **Prosthodontic Terms**
- Present a premier prosthodontics meeting

Goals:

- 1. The Academy of Prosthodontics will be recognized as the ethical standard bearer for the specialty (Be the moral compass of prosthodontics)
- Dedication to ethics in research, documentation of outcomes and treatment of patients
- b. Establish moral and ethical goals in the evolving prosthodontic practice
- Communication of ethical concerns c.
- Documentation of anticipated outcomes to assist in treatment planning based upon these outcomes
- Provide an advisory board to the prosthetic dental industry
- Offer industry access to selected academy members in brainstorming sessions conducted during the annual session
- 3. Be the mentors to emerging prosthodontics leaders
- Be the organization in prosthodontics that develops through mentoring the next generation of leaders of the specialty
- 4. Maintain and expand the Glossary of **Prosthodontic Terms**
- Remain the organization that finalizes the ongoing editions of the GPT

AP Mission: Continued

Continued from page 20

5. Present a premier prosthodontics meeting

- a. Promote the art and science of prosthodontics to the profession and the public
- b. Disseminate knowledge concerning prosthodontics throughout the profession
- c. Encourage study and investigation of the various phases of prosthodontics and related subjects

Objectives and Timelines:

- 1. Academy of Prosthodontics will be recognized as the ethical standard bearer for the specialty (Be the moral compass of prosthodontics)
- a. Provide the Academy with the accepted definitions of terms that provide the basis for medical/dental ethics (GPT)
- b. Identification to the prosthodontic community of ethical issues in research, clinical documentation and patient care (annual session)
- c. Discuss issues of disclosure and conflict of interest specifically as this relates to the dental industry

- i. Timeline: May 2012 will provide guidelines to speakers to include discussion of anticipated outcomes when clinical presentations are given
- ii. Timeline: June 2012 possible inclusion of definitions for terms autonomy, non-malfeasance and beneficence

2. Provide an advisory board to the prosthetic dental industry

- a. Offer industrial supporters access to selected academy members in brainstorming session(s) conducted during the annual meeting
- i. Timeline: Conceptual introduction May 2012 and ongoing

3. Be the mentors to emerging prosthodontics leaders

- a. Maintain ongoing leadership development programs such as the Associate Fellow breakfast and the Associate and Life Fellow luncheon
- i. Ongoing

- b. Create opportunities for direct communication with current and past leaders of the Academy
- i. Program initiated but not yet operational, anticipate timeline of Summer 2012

4. Maintain and expand the Glossary of Prosthodontic Terms

- a. Leadership in the creation and editing of current and future versions of the GPT
- i. Next edition due Summer 2012

5. Present a premier prosthodontics meeting

- a. Provide a scientific session that meets or exceeds standards for prosthodontics meetings that will include issued related to ethics, evidence based dentistry and modern prosthodontics practices
- i. May 2012 and ongoing

Social Program Schedule



Wednesday, May 16

6:00-10:00 Welcome Reception and Louis Blatterfein Dinner

Thursday, May 17

7:00-8:00 Get Acquainted Breakfast

10:00-3:00 Spouses/Guests Outing: Jackson Tour

1:00-5:00 First Business Meeting and Luncheon (AP Fellows Only)

Friday, May 18

5:00-9:00 Group Social Outing: Wildlife Expedition (and Dinner)

Saturday, May 19

10:00-12:30 Spouses/Guest Outing: Culinary Demonstration
1:15-3:00 Executive Council Meeting/Luncheon

6:00-7:00 **President's Reception**

7:00-10:00 Installation Banquet (hors d'oeuvres, dinner, awards and dancing)

Social Program Schedule

Sunday, May 20

12:30-3:30 Second Business Meeting and Luncheon (AP Fellows Only)

Sunday, May 20 – Wednesday, May 23

Yellowstone National Park Post-Conference Tour

A private two day tour of USA'a first National Park. Day one you will visit the Mammoth Hot Springs, the Upper and Lower Falls at the Grand Canyon and the Fountain Paint Pots. Day two will include a tour of the Old Faithful Geyser Basin and the Midway Geiser Basin which contains the Grand Prismatic Spring (the world's largest hot spring).

Sunday May 20th Depart Four Seasons Hotel 4:00pm and arrive at the Old Faithful Inn 7:00pm **Wednesday May 23rd** Depart Old Faithful Inn at 7:00am and arrive JAC Airport at 10:00am



Page 24