

ΠΡΟΓΡΑΜΜΑ ΕΠΙΣΤΗΜΟΝΙΚΟΥ ΣΥΜΠΟΣΙΟΥ ΕΛΛΠΕ

12 & 13 ΜΑΪΟΥ 2018

Σάββατο 12/05/2018

09:00 – 10:00 Εγγραφές

10:00 – 10:30 Έναρξη – Εισαγωγή.

10:30 – 11:30 **Brian Millar: “Managing tooth wear MI way”**

11:30 – 12:00 Διάλειμμα - Καφές

12:00 – 13:00 **Stefen Koubi: “New options for designing a smile: from analogic to digital...
but guided!!!”**

13:00 – 14:00 Γεύμα

14:00 – 16:00 **Συζητώντας με τους ειδικούς: «Και αν δεν υπάρχει αρκετός χώρος για
αποκαταστάσεις; Συζητώντας τις λύσεις.»**
Συντονιστής : Γιώργος Παπαβασιλείου.

Κυριακή 13/05/2018

9:00 – 10:00 **Stefano Lombardo: “Fixed Prosthetic Rehabilitation: Man and Machine
together to achieve success”**

10:00 – 11:00 **Marco Nicastro: “New trends in fixed prosthodontics, adhesion, and new
hybrid materials”**

11:00 – 11:30 Διάλειμμα - Καφές

11:30 – 13:00 **Ed McLaren / Τηλεματική διαδραστική συνεδρία:** “Predictable laminate veneer preparation: mock-up, preparation, impression”

Συντονίστρια αίθουσας: Φώφη Καμποσιώρα

13:00 – 13:15 Απονομή βραβείων ΕΛΛΠΕ / Κλήρωση δώρου

13:15 – 14:00 Γεύμα

14:00 – 15:00 **Paul Weigl:** “Brilliant and sustainable pink aesthetics : Part I. Immediate and minimally invasive shaping of the peri-implant soft tissue. Part II. The Socket Chamber Concept. Clinical Outcomes.”

15:00 – 16:00 **Marko Jakovac:** “Esthetic Dentistry: Digital and Analog Approach”

ABSTRACTS

Brian Millar: “Managing tooth wear MI way”

This lecture course covers the aetiology and management of all types of tooth wear, from diagnosis and prevention through monitoring and management. Techniques for intervention use the latest range of adhesive aesthetic materials as well as traditional methods. My way includes Minimal Intervention strategies to preserve valuable tooth tissue while Maximising Income for the clinician. Treatment of localised and generalised tooth wear will be discussed based on methods carried out on our clinics for the past decade.

Stefen Koubi: “New options for designing a smile: from analogic to digital... but guided!!!”

Everyday dentistry must be simple, esthetic, and guided to be popular. In the esthetic zone the practitioner is faced to a lot of challenges according to the initial situation. Whatever is the difficulty of the case, the dentist should think as an architect to plan the case. A full guided protocol will be presented for extreme worn dentition and severe esthetic defect case where implants are needed. Analogic treatment planning using latest press technologies will highlight the treatment of the severe worn dentition. A full digital workflow associated with CAD CAM material and technologies will be presented to fix the implant case. In both cases all the clinical steps are driven by the final design in order to predict precisely the final outcome. Every day dentistry becomes simple, guided, esthetic and more and more digital.

Stefano Lombardo: “Fixed Prosthetic Rehabilitation: Man and Machine

together to achieve success”

Each natural and implant-prosthetic rehabilitation requires several important decisions to achieve long-term success: from the selection and care of natural prosthetic abutments to the choice of the ideal fixture; from the different kind of surgery approach to the prosthetic development of soft tissues; from the choice if cemented or screw-retained to doubt as to the most suitable prosthetic material; from the choice of dental technician processing method to the developments of modern CAD-CAM protocols. The digital workflows are nowadays at service of clinicians, technicians and patients.

Marco Nicastro: “New trends in fixed prosthodontics, adhesion, and new hybrid materials”

Continuous developments in the field of adhesive restorative techniques have permitted to significantly broaden the originally defined spectrum of indications for bonded restorations and thus to contribute to some of the major objectives of conservative restorative dentistry: the maximum preservation of sound tooth structure and the maintenance of the vitality of the teeth to be restored. The mastering of the basic principles of tooth preparation is fundamental in order to create optimum conditions for the dental technician for the fabrication of the master work piece. The meticulous application and handling of modern composite resin technology including dentin adhesives of the latest generation will in turn guarantee the reliability and longevity of the bonding.

Program:

- Indication of composite indirect restorations
- Indications of porcelain laminates and bonded ceramics

- Diagnostic approach
- Tooth preparation
- Luting procedures
- The new composite and ceramic materials
- Latest scientific data

Paul Weigl: “Brilliant and sustainable pink aesthetics : Part I. Immediate and minimally invasive shaping of the peri-implant soft tissue. Part II. The Socket Chamber Concept. Clinical Outcomes.”

Part I. Today, about 80% of the implants are placed in a single tooth gap. A therapy concept offered in the dental practice of today must be able to serve the main stream of patients that is predominant: brilliant esthetic results, treatment appointments reduced to a minimum and minimal invasive procedures. These requirements provide anatomic functional shaping of the peri-implant soft tissue immediately after implant placement or after re-entry of a submerged healed implant. In the so-called soft tissue transition zone, the prosthetic components abutment and / or crown simulate the root portion of the missing tooth and thereby form a nature-identical emergence profile. The therapy concept includes only two treatment appointments and avoids the change of abutments. This sometimes requires new work steps and workflows between surgeon, dentist and dental technology. The therapy concept stands in contrast to a stepwise shaping of the soft tissue. In case of sufficient primary stability, an immediate restoration with a temporary single crown with infra-occlusion is prioritized. In addition to conventional clinical and dental procedures, the following digital workflows are suitable for this:

- The own production of a patient-specific abutment, the temporary and the final crown with a chair-side CAD / CAM system (eg CEREC®)
- The outsourced production and deployment of the patient-specific abutment, temporary crown and ZrO₂ framework of the final crown prior to fully guided implant placement.

Part II. An immediate implant placement has to be combined with a primary wound healing of the extraction socket by a seal with a root-shaped abutment/crown complex. The resulting socket chamber is filled with blood which has a very high potential for healing and for new bone formation. The blood-filled chamber completely ossified without any therapeutic support - the placement of membranes and bone replacement materials in case of a lack of buccal bone lamella loses its dogmatic required application. This kind of immediate restoration simulates a tooth-reimplantation in the transition zone requiring a flapless tooth extraction. It ensures the preservation of the original emergence profile including papillae and long-term esthetics. However, an appropriate implant thread design and osteotomy is mandatory to gain predictable a sufficient primary and secondary stability of the implant at the fresh extraction socket. Additionally a two appointments work-flow enables an one-abutment-one-time concept preventing mid-facial soft- tissue recession.

Marko Jakovac: "Esthetic Dentistry; Digital and Analog Approach"

Abstract: The modern esthetic dentistry is not only about appearance but also about function and functional durability. For functional durability the knowledge about materials and precision of clinical and laboratory work are essential. The clinical part therefore is more demanding for the clinicians especially if we are using minimal invasive approach. Optical devices and digital scanners are helpful for clinicians to achieve that goal. The digital era in dental laboratory today is something that is more and more present but apart to digital dentistry touch of dental technician in high esthetic region is still necessary. In the lecture the digital and analog possibilities and their limits in esthetic dentistry will be shown.