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INTRODUCING THE FACULTY LEADERS

OF THE SCOTTSDALE CENTER FOR DENTISTRY

In this issue

DPR Survey Exclusive



GPs and IMPLANTS

57%

of GPs who place implants have placed immediate-load implants.

36



14

Clinical Solutions

Dr. Robert Lowe discusses an out-of-the-box technique to restore broken-down teeth.

Predictably

POWERFUL

Patient demand continues to rise, and implant systems continue to improve in both predictability and ease of use. That's why you'll want to review the results from this DPR Exclusive Implant Survey.

By Stan Goff

Of doctors who don't place implants now,

25%

plan to do so soon

Source: June 2007 DPR Implant Survey

More patients are aware of the benefits of dental implants, so you'd expect more GPs to get more involved in providing different phases of implant treatments. The results of DPR's Exclusive Implant Survey certainly concurs. Read on to see just how involved your colleagues are when it comes to implants.

In recent years, as great strides have been made in technology and techniques, dental implants have become a viable choice for both doctors and patients in many cases. The growth also has been given a big boost as success rates have dramatically increased—gone are the

days when predictability was a main concern.

"A wealth of data from the pharmaceutical industry shows a clear trend toward consumers more actively researching the healthcare decisions they make," said Kevin Mosher, vice president and general manager of Nobel Biocare North America. "Combined with the high success rates of dental implants, a wealth of information on the subject, and a Baby Boomer generation that desires to look good and maintain their quality of life, this trend has resulted in a dramatic increase in patients asking for the procedure."



DPR EXCLUSIVE

Implant protocols

Have you ever placed immediate-load implants?

Yes	57%
No	43%

Do you use a surgical guide/stent?

Yes	80%
No	20%

Have you ever performed bone augmentation/regeneration procedures before placing implants?

Yes	82%
No	18%

Source: June 2007 DPR Implant Survey

"Nobel Biocare has thus focused on evolving its product line so that doctors can offer patients not only more options, but options that meet the desires and expectations of today's more knowledgeable patients—fast, minimally invasive procedures with great looking results."

Nobel Biocare (www.nobelbiocare.com) held its 2007 Nobel Biocare World Conference in Las Vegas earlier this year. Close to 10,000 attendees from all corners of the globe participated in an effort to keep pace with the ever-changing developments in implantology. Several manufacturers host similar educational events each year. Implants are also a popular topic for lecturers at large dental conventions and specialty meetings.

Our latest survey (see "About this survey," page 41) matches last year's in terms of the rise in patient inquiries. In our February 2006 DPR Exclusive Implant Survey, more than three-quarters (79%) of responding GPs reported an increase in the number of patient inquiries about implants over the past three years. This time around, it's an even eight in 10 GPs who report such an increase (see "Interested patients," page 38).

Mosher's remarks on today's informed patients echo those of Delray Beach, Fla., dentist Dr. Robert J. Miller, who commented on the 2006 Implant Survey in the March 2006 issue of *Dental Products Report*.

"I don't have to convince patients to opt for implants," Dr. Miller said. "They're coming in requesting them. A few years ago it was just the opposite. Patients are coming in already expecting to hear that an implant is an option. And they're dis-

Continued on page 38

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Continued from page 37 appointed if it's not. That's the amazing change in paradigm here."

Surgical placement

GPs are becoming increasingly involved in implants, and virtually all are playing a role in helping educate their patients. According to the latest survey, more than 98% of our readers are involved in patient education on implants (see "Implant services," page 39). These numbers reflect a substantial jump from last year, when 81% of GPs reported to be involved in patient education about implants.

Implant manufacturers offer a wide array of brochures and other materials to provide implant education to patients. Additionally, most of these companies have dedicated plenty of time and resources to include detailed information on implant products and procedures on their Web sites. The rise in interest also has brought about a number of new educational sections on implants in multimedia patient education programs, including those from CAESY Education Systems, from Patterson (www.caesy.com) and Consult-PRO (www.consult-pro.com).

Another look at the "Implant services" chart reveals that 94% of readers are involved in the restoration of implants, and 18% are involved in placing implants. While less than one-fifth of GPs handle surgical implant placement, this figure does reflect an 80% jump from last year's survey when 10% of the respondents were placing implants.

"Advancements in implant and abutment design have allowed GPs to restore implants as they would a natural tooth. The fear of the technology, the fear of the cost to the patient should not exist as long as the dentist is well educated and prepared. It should also be emphasized that becoming involved with implants does NOT require GPs to go out of their comfort zone into the field of surgery," said Janie Shen, Director, Corporate Communications of Astra Tech Inc. (www.astratechdental.com).

Many GPs who don't place implants just prefer to refer the procedures to a specialist. Almost two-thirds of these doctors

DPR EXCLUSIVE

Interested patients

Over the past three years, how has the number of patient inquiries about implants changed in your practice?

Increased	80%
Stayed the same	20%
Decreased	<1%

Source: June 2007 DPR Implant Survey

(65%) said they feel more comfortable referring (see "Why not place?," page 40). Forty-four percent report not feeling skilled enough in implant procedures to place implants, while limited patient demand (17%) and closing in on retirement (8%) were the next most-popular reasons for not placing implants. Just 3% are waiting for products and procedures to be improved before placing the implants themselves. Additionally, 11% of readers offered "Other" responses, with some not believing it is cost-efficient to purchase the necessary equipment and training.

Those GPs who refer out implant placement are almost equally split, with 52% referring to oral surgeons and 45% to periodontists, while 1% refer to fellow GPs and 2% indicated "Other" on the questionnaire. Some of the "Other" answers included respondents who refer to both oral surgeons and periodontists, depending on the type of procedure needed.

"I prefer to focus on diagnosis and treatment planning and perform restorative procedures. This includes consultation with surgeons about site selection and preparation to place implants."

— DPR survey respondent on why he/she is not involved in placing implants

These specialists should expect referrals to continue from many GPs, as evidenced by the answers DPR readers gave when asked when they planned to start surgically placing implants. Forty-five percent said never, 30% don't know when they'll start, and 8% plan to take on placing implants within the next year; a total of 25% said they plan to place implants sometime in the future.

Quality of life care

As implant success rates, along with techniques and materials, have improved, systems have become more efficient and more affordable. On top of that, there's plenty of research supporting the belief that implants are the most economical long-term solution for single-tooth replacements because they are minimally invasive. With implants, abutment teeth are not damaged, while the implants themselves never need endodontic therapy.

Of the GPs who place implants, almost all (96%) do so for single-tooth replacement, while overdenture retention (86%) also is a very popular use for implants (see "What are you doing, using?," page 40). Almost three-quarters of these respondents place implants for multiple-unit implant-retained fixed bridges (73%), and 35% place implants for full-mouth reconstruction.

"There is no question that implants offer the highest standard of care for qualified edentulous patients," Shen said. "All statistics indicate that the paradigm shift to implants as a stan-

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standard-of-care treatment continues. As a result, it is important for all dental professionals to be able to understand when implants are a viable solution and how to speak with patients about the treatment process and what long-term benefits it can bring."

Longtime New York dentist Dr. Irwin Smigel (www.smigel.com) says implants have had one of the biggest impacts in dentistry during his five-decade career. Improving a patient's quality of life and ability to function are two of the many benefits brought about by implants.

"They've really changed dentistry," Dr. Smigel said. "It's such a pleasure when patients don't have to have anything removable. That's been tremendous, a real revolution to dentistry.

"For someone who must opt for a denture because of insufficient bone, instead of the denture being loose or unstable, we can put in small-diameter implants to lock the denture in and maintain stability."

The Atlas Denture Comfort procedure, developed by Dentatus USA, is one way for denture-wearers to get comfort and confidence in a more-economical, less-invasive manner than with larger implants. These narrow-body implants can be immediately loaded and are simple to place. The Denture Comfort (www.DentureComfort.com) procedure consists of placing four Atlas narrow-bodied titanium alloy implants into the toothless jaw, usually toward the front. A cushioning silicone relining material then is placed inside the denture to fit snugly over and around the short, protruding heads of the Atlas implants so that the person's denture can be securely and confidently retained.

"This product affords a big improvement, both socially and functionally," said Dr. Sang-Choon Cho, a professor at New York University College of Dentistry who also is in private practice in New Jersey. "Patients can use their existing dentures, or we can make a new one, but patients tell me immediately how it's functioning and stable in the mouth. It's so rewarding."

Small-diameter implants, offered by several companies, are being used by 77% of our readers who place implants, second only to internal hex (86%) and wide-diameter (78%) implants. Half of the GPs use specially coated implants, and 39% use external hex implants.

Learning the trade

It can be difficult for GPs to stay ahead of the curve with constant changes in implant systems, accessories, and techniques. This may help explain why few GPs initially got involved in placing implants. But just as breakthroughs in the types of coatings and thread designs have helped improve the success rates of implants, advances by manufacturers also have helped simplify the surgical component. One benefit of many of the newer systems is in the interchangeability of parts, which elim-

Continued on page 40

DPR EXCLUSIVE

Implant Services

With which of the following phases of implant dentistry are you involved?*

Patient education	98%
Restoration	94%
Placement	18%

* Multiple responses accepted.

Source: June 2007 DPR Implant Survey

Learning Locations

Where did you initially learn to surgically place implants?*

Manufacturer-sponsored CE	59%
University-sponsored CE	37%
Private educational center/institute	37%
Post-graduate university program	26%
Professional association-sponsored CE	26%
Dental meeting course	20%
Study club	16%
Other	4%

*Multiple responses accepted.

Source: June 2007 DPR Implant Survey





Continued from page 39

inates the need for GPs to have multiple sets of wrenches and other accessories at their side.

When we asked where GPs initially learned to place implants (see "Learning locations," page 39), the most-popular response was manufacturer-sponsored continuing education (59%), with university-sponsored CE and private educational centers/institutes each also selected by 37% of our readers. Post-graduate university program and professional association-sponsored CE were chosen by one-quarter of the GPs, while one-fifth learned to place implants at a dental meeting course.

With patient demand up, it's no surprise that 71% of the GPs have taken a CE course focusing on implant dentistry in the past year (see "In search of info," page 41), while a whopping 87% of our readers plan to take such a course in the next year. Three-quarters of you have turned to the Web for information on implant products or techniques.

In last year's DPR survey, we also asked GPs about how they educated their patients about the benefits of dental implants. More than three-quarters of our readers (78%) indicated using brochures for patient education, with some noting the importance of sending the patient home with something they can refer to as well as share with a friend or family member. Study models (57%) and before-and-after images (44%) also were popular choices among the respondents to the DPR 2006 survey.

Survey highlights

Other highlight's from DPR's latest implant survey include:

- As far as placing immediate-load implants, 57% of our readers said yes, they have, while 43% said they never have (see "Implant protocols," page 37). About eight in 10 GPs use a surgical guide/stent (80%), and a similar percentage (82%) have performed bone augmentation/regeneration before placing implants.
- Implant predictability may have improved greatly in recent years, but most GPs (82%) still have seen and/or treated patients with failed implants, regardless of who placed them. This figure is almost identical to last year's survey, in which 83% of you reported seeing or treating patients with failed implants.

According to the current DPR survey, top reasons for such failures include peri-implantitis (59%), insufficient bone (33%),

and insufficient or improper maintenance of the implant site(s) by the patient (31%). Other reasons for failure, as indicated by GPs, include prosthodontic difficulties other than premature loading (20%), patient illness or systemic disease (19%), premature loading (18%), bone augmentation needed but not initially provided based on initial diagnosis (16%), and increased periodontal involvement throughout the mouth (16%).

A great service

As more patients and practitioners benefit from improved esthetics, materials, techniques, and quicker, less-invasive systems, we can expect the field of dental implantology to continue its current surge. It won't hurt that many proponents believe implants to be the most cost-effective modality over the lifetime of a patient, as well as the fact that some of the newer, quicker techniques have also come with lower costs.

"It is apparent from the increase in patient inquiries that dental patients today are becoming more aware and better educated on the availability and benefits of implants as a tooth replacement solution, through such vehicles as the Internet and

DPR EXCLUSIVE What are you doing, using?

For which type of cases do you place implants?*

Single-tooth replacement	96%
Overdenture retention	86%
Multiple-unit implant-retained fixed bridges	73%
Full-mouth reconstruction	35%
Other	0%

Which of the following types of implants have you placed?*

Internal hex	86%
Wide diameter	78%
Small diameter	77%
Specially coated	51%
External hex	39%
Other	4%

*Multiple responses accepted.

Source: June 2007 DPR Implant Survey

DPR EXCLUSIVE

Why not place?

Why are you not placing implants?*

I feel more comfortable referring	65%
I don't feel skilled in implant procedures	44%
I don't have the demand among my patients	17%
I am close to retirement	8%
I am waiting for products/procedures to improve	3%
Other	11%

*Multiple responses accepted.

Source: June 2007 DPR Implant Survey

52%

Most often refer implant procedures to oral surgeons.

Source: June 2007 DPR Implant Survey

"The specialists are more efficient doing them all day long versus my occasional placement."

— DPR survey respondent on why he/she is not involved in placing implants

“Control of the surgical field. Most of the time it can be fairly easy, but sometimes it can be fairly difficult. That is part of the reason that I tend to do more of the flapless approach, especially with the growing use of CT (computed tomography).”

—DPR survey respondent on greatest challenges encountered as a result of placing implants

of-mouth,” Shen said. “As a result, unless the dentist of today can comfortably answer the patients’ inquiries and can offer implants as a standard of care, or at least a treatment option, they may be giving up a large growth opportunity for their practice.

“While the cost for implant treatment is frequently out-of-pocket for the patient, studies have shown that implants can be a worthwhile investment over time for the patient when compared to conventional methods—not to mention the physical benefits of maintaining bone, not compromising healthy adjacent teeth, and not having to deal with the embarrassment or discomfort of ill-fitting dentures,” she added.

Astra Tech North America’s President and CEO Scott Root said, “Implants are undoubtedly becoming the standard of care for patients looking for a tooth-replacement solution. Incorporating implants into a practice can help dental professionals stay competitive, increase profitability, and continue to provide their patients with the highest standard of care. At Astra Tech, we believe that providing products uniquely based on a biological approach and developing services and systems focused on the needs of our customers help to simplify the process of incorporating implants efficiently and effectively into a dental practice.”

DPR

Stan Goff is a senior editor for Dental Products Report. He can be reached at 847-441-3739 or via e-mail at sgoff@advanstar.com.

ABOUT THIS DPR SURVEY

The 2007 DPR Implant Survey was e-mailed on June 18, 2007, to 4,726 general practitioners in the United States. A total of 288 responses were received for an overall response rate of 6.1%.

DPR EXCLUSIVE

In search of info

Have you taken any CE courses specifically focusing on implant dentistry in the past year?

Yes **71%**

No **29%**

Do you plan to take any CE courses specifically focusing on implant dentistry in the next year?

Yes **87%**

No **13%**

Have you ever looked for information on implant products or techniques on the Web?

Yes **75%**

No **25%**

Source: June 2007 DPR Implant Survey

