The ACP Annual Session in Miami highlights “Generations of Excellence” to provide a unique opportunity to recognize our diverse strengths as Prosthodontists. This year, the program has been designed to maximize impact of the scientific sessions on both Thursday and Friday, November 2-3, 2006. The first day of the scientific session includes Prosthodontists - parent and sibling – that will present in tandem to provide an array of topics timely and applicable to our practices. The lead speaker, Ms. Moats Kennedy, will present an intriguing perspective on the generational differences of current and future students, colleagues and associates. Key speakers on various prosthodontic topics will include Drs. Harold & Michael Litvak, Drs. Brien & Lisa Lang, Drs. Baldwin & Chris Marchak, Drs. Niles & Guichet, Drs. Vincent & Frank Gelenza, and Drs. Albert Michael Litvak, Drs. Brien & Lisa Lang, Drs. Baldwin & Chris Marchak.


The private practice seminar is being revitalized to occur prior to the scientific session and a new program, the Technofair for Dental Laboratory Technician colleagues and Prosthodontists alike, will offer a more in-depth hands-on experience. Additional programs such as the Board Preparation course, Prosthodontic Dental Assistant program and implant training sessions will be offered again and highlight specialized continuing education for all members.

We look forward to having you enjoy both superb continuing dental education, as well as a beautiful area of the country - Miami, Florida.
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We are more fortunate…. We are one of the original dental specialties, yet we are new. Just think how many years we have been outpacing what Prosthodontics and Prosthodontists have become! Consider the 1980’s even the 1990’s. Look how differ- ent the patient body and need has become. I have never seen so many people looking for help in the hospital. We’ve never been able to do more for our patients, and seemingly we will continue to do so.

We are the most diverse specialty; a fact that has been our worst enemy in the past but has evolved into one of our strengths. I believe in evolving as a specialty to face the challenges of the year 2000. Prosthodontics is growing. We are more respected and recognized than ever, by our colleagues, by our patients, and by the academic community. And we have just begun.

The explosion of modern technology, the ever-increasing complexity of patient care, the rapidly expanding field of dental knowledge, and the desire of our patients to have the best of every aspect of oral health, is creating an increased demand for Prosthodontists. The future of Prosthodontics is closely tied to the future of the patient. As the patient becomes more educated, and sees the benefits and limitations of technology, he will insist that he receive the best possible care. The dental profession, and Prosthodontics, must meet that challenge.

The Journal of Prosthodontics will do its part to meet that challenge. The Journal of Prosthodontics is a voice for the profession, a vehicle to provide a forum for the exchange of ideas and information. As the specialty grows, so will the Journal to meet the growing needs of the profession.

The future is bright. We are on the threshold of a new future. The Journal of Prosthodontics, a Journal of Prosthodontics, is a vehicle for the profession to express itself. Integrity, objectivity, and dedication are the foundation of the Journal of Prosthodontics. The Journal of Prosthodontics is an important part of the future of Prosthodontics. The Journal of Prosthodontics is a leader in the field of Prosthodontics.
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2005 Annual Session Table Clinic Winners

Resident Competition

1st Place: Biofilm Formation in the Edentulous, Amit Sachdeo, BDS, MS, Prosthodontic Resident, Harvard University.

2nd Place: Comparison of Retention Characteristics in Prefabricated and Custom Cast Dental Attachments, Chin-chuan Fu DDS, MS, Prosthodontics Resident, University of Alabama at Birmingham.

3rd Place: The Effect of Etching Technique on the retention of adhesively cemented prefabricated post, Fiorella L. Potesta, DDS, MS, Maxillofacial Prosthetic resident, University of Alabama in at Birmingham.

Predoctoral Student Competition

1st Place: National Trends in Postgraduate Education in Prosthodontics, Ryan A. Dunlop, BS, Predoctoral Dental Student, Harvard School of Dental Medicine.

2005 Annual Session Table Clinics Abstracts

The Effect of Multidisciplinary Approach in a Patient with Cancer of the Head and Neck: Quality of Life, Joo-Loona Artapolou, DDS, MS, former Fellow, Section of Oncologic Dentistry and Prosthodontics, Department of Head and Neck Surgery, UTMD Anderson Cancer Center. Treatment for a clinical case of head and neck cancer treated at MDACC was provided by multiple departments. The patient was initially diagnosed by the head and neck surgeon and referred to the different medical and dental services for treatment plan formulation. The constructed treatment course involved systemic chemotherapy, radiotherapy and surgical intervention followed by prosthetic rehabilitation. Survivorship and rehabilitation are closely interacting concepts when applied to the cancer experience. Treatment is focused on the control or eradication of the disease and restoration of the cancer patients’ quality of life and functional status.

SWU 3 Visit Complete Denture Technique, Siriporn Arunpraditkul, DDS, MS, Sudsukh Thongthammachat-Thavornthasarn, DDS, MSD, Instructor, Department of Conservative Dentistry and Prosthodontics, Srinakharinwirot University Dental School, Bangkok, Thailand. Prosthodontic faculty and staff of the Srinakharinwirot University Dental School have developed a 3-visit complete denture technique to overcome the limited time problems when treating patients in remote rural areas of Thailand. Patient selection is the key to the success of this technique. The selected patients should be Class I or Class II patients, according to the ACP Diagnostic Classification of Complete Edentulism. The first visit includes preliminary impressions, occlusion rim fabrication, trial occlusion rims and jaw relation record. The second visit includes trial dentures, final impressions, and posterior palatal seal fabrication intra-oraally. At the final visit the dentures are delivered.

Prosthodontic Management of Sulcoglyphy and Suladochrophy with Use of a Conforming Surgical Stent, Robert W. Berg, DMD, Prosthodontic Resident, Albert Einstein College of Medicine at Montifiore Medical Center. A patient presented following loss of her mandibular implant-retained complete overdenture prosthesis. After six months, an unfavorable tissue hypertrophy had occurred. An excisional biopsy revealed significant inflammatory epithelial and fibrous hyperplasia. Unfavorable sulcular anatomy due to hypertrophy would not allow seating of any prosthesis. Through prosthetically driven treatment planning, the patient was referred to the oral surgeon for sulcoglyphy and suladochrophy accomplished with the use of a split thickness skin graft and a conforming surgical stent. Satisfactory denture bearing tissue was reestablished. This allowed fabrication of a new stable and retentive prosthesis.

Procerca Implant Bridge™ Zirconia: A Fabrication Technique for Framework Analog, Paul P. Chang, DDS, Periodontics/Prosthodontics Resident, University of Texas Health Science Center, San Antonio, Texas. Dental implants have been restored with all-ceramic restorations in an attempt to improve the esthetic results as compared with metal ceramic restorations. Procerca Implant Bridge™ Zirconia has been developed to enhance esthetics and precision fitting. It utilizes computer-assisted manufacturing (CAM) technology to mill a custom-designed framework from Zirconia blanks. Porcelain is then stacked directly onto the Zirconia framework. In order to have the Zirconia framework milled, a resin framework analog has to be fabricated for computer scanning and transportation. A convenient technique was developed converting a waxed framework into a resin analog for the fabrication of the Zirconia framework is described.

National Trends in Postgraduate Education in Prosthodontics, Ryan A. Dunlop, BS, Predoctoral Dental Student, Harvard School of Dental Medicine. Current trends regarding applications to prosthodontics programs are unknown. Survey instruments were sent to US Dental School Deans and Advanced Prosthodontic Program Directors to investigate current trends in prosthodontic education. The data showed 25% increase in dental students seeking prosthodontic training in the past five years. Important factors affecting dental student interest in prosthodontics were: lack of GME funds, lack of public awareness and need for prosthodontics personnel mentoring by prosthodontists, and advances in implant, cosmetic and reconstructive procedures. It is apparent that Dental school administrators have recognized an increase in students choosing prosthodontics and are implementing new programs to further increase interest in advanced prosthodontics education.

Fabrication and Use of Custom Arch Bars in the Full-Mouth Rehabilitation of a Patient Requiring Orthognathic Surgery, Stephanie A. Fagen, DMD, Prosthodontic Resident, USAF, Wilford Hall Medical Center, Lackland AFB, Texas. Fabrication of custom arch bars is a helpful tool in surgical applications when the maxilla and mandible must be fixed. Advantages of this technique include less damage to the supporting tissues, shorter operative times and better oral hygiene. A case in which the patient required orthognathic surgery in conjunction with full-mouth rehabilitation is presented. Custom cast arch bars and a surgical splint were fabricated using information obtained from the surgery procedure and diagnostic wax-up. Procedures to achieve a diagnostic wax-up, cast surgery, and fabrication of the custom arch bars are discussed.

Comparison of Retention Characteristics in Prefabricated and Custom Cast Dental Attachments, Chin-chuan Fu DDS, MS, Prosthodontics Resident, University of Alabama at Birmingham. The purpose of this study was to investigate the retention characteristics of attachments fabricated by micro-implanting and casting. The hypothesis cast cases including one prefabricated and two cast matrices were used. The dislodging force at the baseline, 100, 200, 300, 400, 500 and subsequently after every 500 pulls was measured. The results, measured in grams, were analyzed using no difference at the baseline but the cast groups had greater variation within group. Decreased dimension attachments had no significant difference when compared to the cast regular dimension group after 400 pulls.

Implant-Supported Fixed Provisionalization Following Full Arch Extraction, Guadalupe E. Garcia, DMD, Prosthodontic Resident, NYU College of Dentistry. Following a research endeavor, we have developed a system for a selective technique of fabricating two sets of provisional implants of providing the patient with a conventional removable prosthesis prior to implant rehabilitation. In certain cases, the extraction sites must be regenerated to provide enough osseous support for implant rehabilitation and enhance- ment of the prosthetic outcome. However, using a removable prosthesis as an interim prosthesis as described in the conventional implant treatment protocol may be inconvenient for some patients. A treatment modality is presented in which provisional implants were placed to support an interim fixed restoration allowing greater stability and immediate function for the patient during the period of osseous regeneration and definitive implant placement.

The Young Adult Oligodontia Patient: A Removable Prosthetic Option, Mollie E. Griswold, DDS, Prosthodontic Resident, NYU College of Dentistry. Patients with oligodontia require fixed or removable prostheses to provide acceptable esthetics and function. Extraction of retained primary teeth was contraindicated in a growing 17 year old male patient. An acrylic occlusal device was fabricated and worn temporarily by the patient to assess the tolerance of the required increase in the patient’s vertical dimension of occlusion. Maximal comfort and esthetics was established and reassessed. Based on the treatment parameters for this patient, the definitive removable prosthesis was then fabricated utilizing a titanium alloy framework veneered with various overlining materials.

An Alternative Technique for Fabrication of an Occlusal Device, Jason E. Holden, DMD, Prosthodontic Resident, NYU College of Dentistry. The use of an acrylic occlusal device serves many functions in prosthodontic therapy. Several methods have been suggested for their fabrication, but must require complex laboratory procedures, incur a laboratory fee and require multiple visits for fabrication and insertions. An alternative technique is presented.

Continues on page 9
2005 Annual Session Award Winners

Dr. Thomas Vergo (l) is presented with the Distinguished Lecturer Award by Dr. Steven Eckert (r).

Dr. Arthur Nimmo (r) is presented with the Distinguished Service Award by Dr. Patrick Lloyd (l).

Dr. Robert Cronin (l) is presented with the Educator of the Year Award by Dr. Patrick Lloyd (l).

Dr. Stephen Parel (r) is presented with the Dan Gordon Award by Dr. Patrick Lloyd (l).

Dr. Clark Stanford (r) is presented with the Clinician/Researcher Award by Dr. Patrick Lloyd (l).

Col. Charles F. De Freest is presented with the Federal Services Award by Lisa Curtis of Straumann, Inc.
American Board of Prosthodontists (ABP) New Diplomates are honored at the 2005 Annual Session Awards Luncheon. Back row (1-r): Dr. Alfonso Monarres, Dr. Si Woon Park, Dr. C. Lee Hatley, Dr. Kenneth Kurtz, Dr. Jack Piermatti, Dr. James Morris, Dr. Kiho Kang, Dr. Hassen Abed (accepting on behalf of Dr. Fahad Ahmed Al-Harbi), Dr. Gregory Kuwabara. Front Row (l-r): Dr. Kok-Heng Chong, Dr. Willy Shian Wei Chang, Dr. Diane Yoshinobu Tarica, Dr. Adel M. Al-hamad, Dr. Daniel D. Dunham.

Not pictured: Dr. Amal Rashad Abualsamh, Dr. Abdulaziz M.A. Al baker, Dr. Vincent Auth, Dr. Bashshar A.Z. Al-Rashdan, Dr. Philip S. Baker.

2005 John J. Sharry Research Competition Winners (l-r): Dr. Michael Douglas Brooks - First Place; Ambareen Khan - Third Place; and Dr. Y. Joan Ko - Second Place.

Dr. Kenneth P. Sobczak (l) accepts the President’s Award presented to him by Immediate Past-President Dr. Patrick Lloyd at the President’s Dinner at Universal Studios.

Anneliese Haws (r) receives the Best of the Best Student Prosthodontic Award sponsored by Waterpik Technologies from Ms. Stephanie Correal (l) of Waterpik.
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The maxillary and mandibular casts are mounted on a semi-adjustable articulator and the clinician designs and controls all mandibular eccentric movements during wax-up. A flask-less processing technique eliminates remounting working casts; it is predictable, does not incur laboratory fees and may be performed by trained auxiliary personnel.

Fabrication of an implant-supported acrylic fixed complete denture from a current hybrid denture, Yung-tsung Hsu, DDS, MS, Birmingham, Alabama. A maxillary hybrid denture is a fabricated restorative template. The denture is the primary framework that will receive the milled framework is used to support the denture acrylic resin. The anterior-posterior spread and arc of closure must be established. The advantage of the prosthesis for a completely dentulous area is that it preserves the alveolar ridge bone, mimics the condition of mastication and provides esthetics and function(Hsu). The fabrication of the hybrid denture is one of the best prosthodontic treatment options. But conventional implant restorations should be delayed until bone growth is completed. Interim implants can be effectively used as an interim prosthodontic treatment before the case is restored with conventional implants. A clinical case is presented to show how to use interim implants and a technique to achieve an acceptable interim implant restoration.

2005 Annual Session Table Clinic Winners (Continued from page 5)

The Effect of Etching Technique on the retention of adhesively cemented prefabricated post, Fiorella L. Potesta, DDS, MS, Maxillofacial Prosthetic Resident, University of Alabama in at Birmingham. Sixty extracted teeth, posts cemented into extracted, endodontically treated teeth. The apical segments produced the lowest bond strength. A self-etching primer showed the highest bond strength. The inconsistency of etchant material influenced the bond strength of prefabricated posts cemented into extracted, endodontically treated teeth.

Biofilm Formation in the Edentulous, Amit Sachdeo, BDS, MS, Prosthodontic Resident, Harvard University. The oral cavity presents numerous surfaces for microbial colonization. These surfaces produce biofilms of differing complexities unique to each individual. Several studies have looked at biofilms in the denture but there is very limited knowledge regarding biofilms in the edentate. This study, unlike any other study done before, compared the changes in composition and development of biofilms on dentures, soft tissues and saliva of 61 edentulous subjects. All samples were analyzed using the DNA-DNA Checkerboard Hybridization technique, providing both, cross-sectional and longitudinal data (microbiota of complete denture-wearing subjects before and after treatment).

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“All-On-Four” Immediate-Function Concept with Computer Numeric Control, Amir H. Moghadam, DDS, MA, Prosthodontic Resident, NYU College of Dentistry. This procedure enables the clinician to mount casts and simulate mandibular movements accurately, detect interferences, study the effect of the TMD on mandibular movement and occlusion, which help with treatment plan decisions.

Restoration of a Central Incisor with Immediate Provisionalization and All-Ceramic Crown: A Case Report, Michele Landolt, DMD, Prosthodontics Resident, NYU College of Dentistry. A 32 year old woman with a high smile line lost her right central incisor due to root resorption. A flapless extraction was performed and the site was grafted. After a healing period of three months, stage 1 surgery was performed (delayed placement) and the implant was immediately provisionalized. The implant was restored 10 months later with an all-ceramic abutment and an all-ceramic crown. The all-ceramic abutment was fabricated using scanning technique (Nobel Biocare).

Immediate Provisionalization of Dental Implants, Judd G. Langley, D.D.S., Prosthodontic Resident, USAF, Wilford Hall Medical Center, Lackland AFB, Texas. Due to the increasing number of provisional restorations being fabricated at the time of implant placement, the need for an expedient process to fabricate a high quality provisional restoration has arisen. The requirements for immediate implant provisionalization of dental implants from a surgical aspect are presented. Detailed techniques are included which provide high quality, immediate provisional restorations in a relatively short period of time.

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A Multidisciplinary Approach to Dental Treatment of a Patient with EEC Syndrome: A Case Report, Bhavani Venkatachalam, DMD, MS, AM ultidisciplinary Approach to Dental Treatment of a Patient with EEC Syndrome, Yung-tsung Hsu, DDS, MS, Prosthodontic Resident, University of Alabama in at Birmingham. The team approach to its treatment. The fabrication and delivery of an OSA device for a completely edentulous patient diagnosed with mild obstructive sleep apnea after completing a polysomnogram is presented. The patient presented with a maxillary completely denture and mandibular implant-retained overdenture. The OSA device was constructed incorporating TAP™ components to maintain the mandible in a protruded position during sleep. A polysomnogram to re-evaluate the patient’s condition while utilizing the device is planned.

Conversion Prosthesis: Chair-side Immediate Complete Denture, Marjan Mohammed, DDS, Prosthodontic Resident, Srinakharinwirot University Dental School, Bangkok, Thailand. Patients often present with mutilated dentitions requiring multiple extrac-
EXECUTIVE DIRECTOR’S MESSAGE

joined the ACP officially on December 1st 2005. We did have the chance to chat with many of you during the brief time I attended the Annual Session in Los Angeles. The collective positive energy generated at the meeting was impressive, and I am delighted to be serving such a high quality organization and its prestigious membership.

As we head into the New Year, I want to take this opportunity to recognize the outstanding efforts of staff who performed so admirably in 2005 – a year of great transition and achievement for the ACP. Kevin Fitzpatrick ably rose to the occasion and kept “a steady hand on the tiller” as Interim Executive Director. Through his efforts and those of Pamela Krueger and Leesa Kuo, the ACP’s and the ACPEF’s major initiatives for the year were achieved.

Our top priorities will be to fill a number of open staff positions we have in the central office. Once we hire and orient the new staff, we will be improving on improving membership services, communications, and the ACP Web site.

2006 is going to be an exciting and challenging year – with lofty goals and a commitment to better meet and serve our needs. We will need your involvement and full participation more than ever to ensure that the ACP’s brand grows stronger with the public and the profession you serve, and that it continues to provide resources that help you keep pace with the best quality practices in prosthodontics.

You should have received your first 2006 membership dues renewal notice in December. To take full advantage of your membership benefits, we hope you will renew early! I wish you all the best for a happy and successful New Year.

New ABP Examiner

The Members of the Council for the American Board of Prosthodontics are pleased to announce that Dr. Jonathan P. Wiens has been elected as the new examining member of the American Board of Prosthodontics (ABP).

Dr. Wiens has been in private practice limited to Prosthodontics in West Bloomfield, Michigan since 1976. He has held teaching positions at the VAMC University of Michigan and University of Detroit Mercy where he reached the rank of Adjunct Clinical Professor. He is the attending staff Maxillofacial Prosthodontist in the Craniofacial Department at Providence Hospital in Southfield, Michigan. He attained Diplomate status of the American Board of Prosthodontists in 1982 and completed recertification in 2004. Dr. Wiens has been active in organized dentistry holding memberships in various prosthodontic organizations. He is a Fellow of the American College of Prosthodontists, was recently elected to serve as Treasurer, and has served on many ACP committees including the informatics, maxillofacial prosthetics, nominating, parameters for approval.

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Employment Opportunities

Illinois – Two well-established prosthodontic practices in southwest area of Chicago are looking for a part-time or a full-time prosthodontist. Future partnership is a possibility. Please fax your resume to 708-364-1106.

Iowa (Iowa City) – The University of Iowa’s College of Dentistry is searching for full-time clinical or tenure track faculty in the Department of Prosthodontics. For duties to go: www.dentistryuiowa.edu/public/administration/hr_search.html. Position availability negotiable; screening begins immediately. Must have: DDS/DM/DMD from ADA accredited dental school or foreign equivalent, and by time of appointment, Master’s or Certificate in Prosthodontics from ADA accredited dental school. Desirable qualifications: clinical experience via private/military/institutional practice; board certification; and teaching experience. Tenure track applicants must also have: research training/experience; and demonstrated scholarly/professional growth commensurate with the following: completion of advanced education. Rank/track/salary commensurate with qualifications/experience. Submit CV and three letters of recommendation to: Dr. Joseph Schneider, Chair of Prosthodontic Search Committee, c/o Mary Ann Sevick, 414 Dental Science South, College of Dentistry, University of Iowa, Iowa City, Iowa 52242-1001 AA/EEO employer; women/minorities encouraged to apply.

Pennsylvania (Philadelphia) – Great opportunity for prosthodontist looking for equity position in established practice. I am looking for the right person so I may begin to slow down gradually. Practice encompasses basic restorative, crown and bridge, removable, prosthodontic, and implant reconstructions. State-of-the-art facility has seven operations, full lab, digital radiography and in operatory computers. Please call or submit resume to: Dr. Joseph Breitman at telephone: 215-728-1696; E-mail: djosephbreitman@aol.com.

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Straumann is one of the world’s leading providers of solutions in implant dentistry and dental tissue regeneration.

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