



NEWSLETTER

THE AMERICAN COLLEGE OF PROSTHODONTISTS

AN ORGANIZATION OF SPECIALISTS
DEDICATED TO SERVING THE PUBLIC

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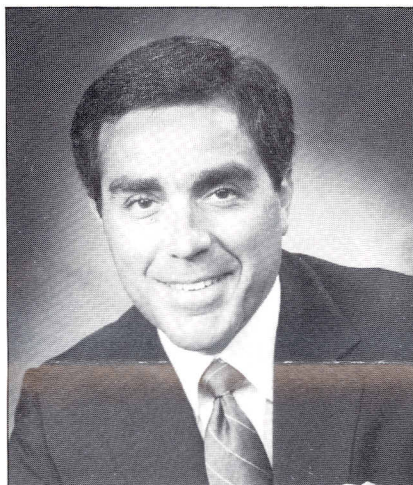
TIME FOR A CHANGE

It is difficult to believe that my tenure as President is quickly coming to an end. Prior to accepting the responsibilities of President I made a personal commitment to address the issues regardless of the controversy surrounding them. My last two President's Messages clearly stated the relevant ones and how I proposed to deal with them. One matter is so important that I have decided to devote this entire message to it. This issue, of course, is the FPO.

The existence of the FPO is something we all take for granted. I personally don't remember life without the FPO. My understanding of the FPO grew as my involvement with the College escalated. Unfortunately, the typical Prosthodontist or for that matter the typical general practitioner interested in the discipline can not fully understand the inner workings of the FPO. The task of bringing all prosthodontic related organizations under one "roof" was monumental, bringing it to fruition bordered on the miraculous.

Just about that time the College was being formed. The College wisely supported the FPO and worked diligently over the years to add strength and credibility to the FPO. Everything was going along fine until the College began maturing at a rapid pace. As a result the FPO began experiencing difficulty in addressing the needs of the College. The College became the focal point of a philosophical dichotomy in the FPO. You see, the FPO lost sight of one of the primary reasons for its existence, that is, "supporting the general practitioner and the specialist in prosthodontics". The FPO neglected the

PRESIDENT'S MESSAGE



College by not allowing them to represent the FPO on specialty related issues. It was not until the College became more vocal that the FPO implied it was going to loosen its reins.

As time went on the friction between the FPO and the College became more intense. The College accused the FPO of shutting them out on specialty related issues, while the FPO accused the College of being immature, disruptive, power hungry, and political. Both sides realized this controversy was counterproductive and agreed to work together to improve relations. The College continued to grow, gained in prestige and became recognized as the specialty organization of Prosthodontics. This did not impress the FPO and, in fact, it appeared to have created a more impermeable barrier between the FPO and the College.

As President of the College I vowed to bring the College and FPO closer together. By my own admission I have

failed. I have always felt strongly that the FPO is dependent on the College for success. Without the College, the FPO would no longer represent the specialty, only the discipline. Without the College the FPO would not have the revenues to adequately sustain its activities. A significant problem was that the FPO underestimated the College. The FPO failed to mature with the College and allow their relationship to be synergistic. Instead, the FPO continually attempted to stifle the College.

My activities as delegate to the FPO have been fraught with frustration. Although the College contributes approximately 30% of the revenues to the FPO, it is only allowed 3 of the total 25 delegates. Clearly a major problem. Taxation without representation! Why does this continue? Because the FPO will lose control if the College's representation is predicated on the total dues paid. Clearly this has become a power struggle. The FPO does not want the College to have enough delegates to sway the voting.

An embarrassing reality for me as President of the College, is that the College does not address matters

INSIDE

**Proposed changes
to By-Laws and
Policies and
F.A.C.P. Guidelines**

related to the specialty. The FPO does. We are the only specialty organization in dentistry that does not speak for the specialty. Of course the FPO argues that prosthodontics is unique hence the need for a Federation. This faulty logic "smoke-screened" the issue in the past, but not now.

The FPO has made significant contributions to both the specialty and the discipline. However, when analyzing these successes, we must remember who within the FPO gave the impetus for much of this success: the College -financially, and morally. Just look at the Defense of the Specialty. The information provided to the FPO by the College was in large part of the document submitted to the ADA by the FPO for the defense of the specialty. Thank you to Dr. Robert Morrow and his committee.

For years we lacked the maturity to challenge the FPO I myself was so concerned about the direction of the College that I established an ad hoc committee to study the future of the ACP. While this report is being written, the committee is in San Antonio for a major directional meeting. Since that committee was established my attitude has become more aggressive. I am not concerned about the College if, in fact, the FPO is disbanded. We will rise to the occasion and as usual perform above and beyond our own expectations.

The issue of College support of the FPO was raised by the South Carolina Section with a resolution it presented at the business meeting in Williamsburg. The main thrust of the resolution was to conduct a general membership vote. If approved, the College would poll the membership to determine whether or not they want to withdraw from the FPO. In other words, let the membership decide whether they want to stay with the FPO or withdraw. To give us more time to consider their resolution, key Executive Council members (myself included) convinced the membership present at the Williamsburg business meeting to table the issue definitely until the business meeting in San Diego. Meanwhile, position papers for and against the withdrawal from the FPO would be carried in the ACP **Newsletter**.

Dr. Charles DuFort's paper for not withdrawing from the FPO was carried in the June **Newsletter** while the paper for withdrawing can be found in this issue. The points that Dr. DuFort raises were addressed in either my previous President's Message or this message. The dues issue is not a real problem. If the \$75.00 FPO dues are paid to the College in the form of a dues transfer our revenues would increase well over \$100,000 per year. More than enough to support an executive director, an office in Chicago, and lobbying activities. I am proposing a 'Future Fund' in which the \$75.00 dues transfer from each College member will be deposited. I'm calling it a dues transfer since it is not really an increase because a majority of the College members already pay the \$75.00 in the form of FPO dues. Please read the two position papers carefully.

Sponsorship of the American Board of Prosthodontics is always a delicate issue. In all other areas of dentistry the specialty organization sponsors the Board. Why should prosthodontics be different? In fact, we are a specialty. Prosthodontics is similar to other specialties and should enjoy all the appropriate rights and privileges. I have no doubts that if we withdraw from the FPO we will sponsor the Board. No other organization has the credentials to assume the responsibility. The FPO would be reduced to an organization representing the discipline if in fact it survives. Anyone who really has the specialty's best interest at heart knows the College is the only logical sponsor of the Board.

It should be obvious from my comments that I am in favor of withdrawing from the FPO. There is no hope for the specialty if we remain in the FPO. The future of the College is the future of the specialty. We cannot continue to be stifled by the policies of the FPO. It has been a drain on the College both emotionally and financially for an inordinate number of years.

Be strong, don't be fearful of voting to leave the FPO. We should not be emotional about our decisions. Debate the issues in your own minds and with other members. Bring your thoughts to the business meeting in San Diego so

that we can debate the issue of a vote. We must be confident in ourselves, our colleagues, and our profession. Just keep in mind, there is a price to pay. Are you willing to pay that price in the form of a \$75.00 dues transfer (from the FPO to the ACP) and by supporting your Executive Council? Think about it. This is a major decision on your part. Are you prepared to support the College?

I have put my reputation on the line. Those of you who know me realize that addressing this issue was something I had to do. It was done for the future of the specialty, the College, the profession and our patients. I have done a great deal of soul searching and praying that I have made the right decision. I had hoped by this time in my tenure my message would have been different. The future is in your hands. I will support, and work as hard as ever for the future regardless of the results of this vote.

I thank all of you for the opportunity to serve the College in this its highest office. It will be an experience I will never forget. You all have been wonderful to me and most supportive during these past ten months. I look at the College as a precious gift, a gift that is full of endless fortunes. Don't take this gift for granted, treasure it as much as you would your most valued possession. You will not regret it.

I look forward to seeing you all in San Diego.

—Cosmo V. De Steno DMD, PhD

NEWSLETTER
The American College
of Prosthodontists

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2907 Deer Ledge
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CONGRATULATIONS TO THE NEW DIPLOMATES

All College members extend heartiest congratulations to the successful candidates for the American Board of Prosthodontics examination in 1987. Of the 28 successful candidates 26 are College members. The remaining two will be contacted and urged to join into the fellowship with their peers.

The New Fellows can be recognized at the Annual Meeting in San Diego by a special nametag they will wear. Take the time to congratulate them personally and welcome them to the activities of the College.

In addition to distinctive nametags they will be recognized individually at the business meeting luncheon where they will receive certificates acknowledging their movement to Fellow status. Photographs will also be taken at that time

The new Diplomates are:

Curtis L. Barmby
 Mickey J. Calverley
 Vincent Celenza
 Dale L. Cipra
 Edwin M. Crandall
 Eugene W. Dahl
 Walter Cyril Daniels
 Carl F. Driscoll
 Larry L. Eggleston
 Dean A. Hudson
 David Gregory Holcomb
 Juliet Kafka-Bergen
 Harold Kolodney Jr.
 Brian Kelvin Stanley Kucey
 Timothy C. Moore
 Merle Harry Parker
 Kevin D. Plummer
 Eric J. Rasmussen
 Edward A. Reetz
 Enrique J. Rodriguez Gonzalez
 Steven Judd Sadowsky
 Robert L. Schneider

James E. Schreiner
 James L. Sheets
 Dennis R. Skirvin
 Keith S. Smith II
 Michael John Tabacco
 Nai-Huei Wang

ANNOUNCEMENT

The **Newsletter** is published three times a year. The first issue is mailed February 1st, submission of material for printing should be no later than December 15th. The second issue June 1st, material for printing submitted to the Editor no later than April 15th. The third issue mailed September 1st, material should be received by the Editor by July 15th.

EDITORIAL

A MATTER OF IMPORTANCE

(continued)

FPO — YES OR NO?

At the business meeting at the last Annual Session in Williamsburg a motion was made by a member representing the South Carolina Section to the effect that "The American College of Prosthodontists shall withdraw its membership from the Federation of Prosthodontic Organizations." The motion further stipulated that the College members should vote by mail ballot.

In Vol. 17, No. 2 of the Newsletter a guest editorial by Dr. Charles DuFort

was published supporting the American College of Prosthodontists' continued membership in the Federation of Prosthodontic Organizations.

The South Carolina Section has submitted for publication the following guest editorial. The Editor will not take an official stand on the FPO, Yes or No, but does certainly endorse the concept of letting all the members vote. The membership of the College has matured over these past 17 years, and I feel that each member will think deeply over the importance of this issue before casting a ballot.

Your Editor,
 Kenneth L. Stewart

South Carolina Calls

The Question:

LET THE MEMBERS VOTE!

At a meeting of the South Carolina Section last September, the members present voted unanimously to present the following motion at the Annual Business Meeting in Williamsburg: "That the members of the College be polled by secret mail ballot on the question, 'The A.C.P. shall withdraw its membership from the F.P.O.' " Certain time strictures, no longer applicable, were added to assure action within a reasonable time.

At the Williamsburg meeting, after relatively brief debate led by several members of the Executive Council, the motion was tabled until the 1987 business meeting. Most of the comments were inappropriately directed at the virtues and/or vices of continued F.P.O. membership and contained predictions of dire consequences for this College should the F.P.O. collapse as a result of our withdrawal. Most of those contentions were reiterated in Dr. DuFort's editorial in the June **Newsletter**. None of those opposed to the motion correctly addressed its main point, a call to let all of the members vote on the question of continued F.P.O. membership. It should also be noted that the motion was misstated twice in the June **Newsletter**. Both the editor, in his introductory remarks, and Dr. DuFort incorrectly refer to it as a motion to withdraw from the Federation. We hope that will be no further obfuscation of the motion and ask that the President strictly limit debate at this year's meeting to the issue of whether to have or not to have a vote by all the members.

NEED TO CONTACT AN OFFICER OF THE COLLEGE?

Phone or Write	Phone	Address
President Cosmo DeSteno	201/652-2474	203 Godwin Avenue Ridgewood, NJ 07450
President-Elect William A. Kuebker	512/567-6400	4311 North Westberry San Antonio, TX 78228
Vice-President Stephen F. Bergen	212/686-7500 #428	1 Colonial Woods Drive West Orange, NJ 07052
Secretary James A. Fowler, Jr.	512/567-6460	12519 Chateau Forest San Antonio, TX 78230
Treasurer John B. Holmes	415/476-2098	279 Sandringham North Moraga, CA 94556

Executive Councilors

David W. Eggleston, Charles R. DuFort, and Ronald D. Woody

The South Carolina Section motion simply asks that all members be allowed to vote on the question. We have had similar votes on such minor and mundane matters as the change of a few words or phrases in the by-laws. One can only speculate on what motivates the continued reluctance of our officers to allow a vote on this central issue. We call on the leaders of the College, perhaps elsewhere in this issue of the **Newsletter**, to withdraw their opposition to the vote, in fact to lend it their support. If this is not done, we ask that they explain to the membership how they can continue to oppose this most democratic of all exercises. If our motion fails, the will of the few will again prevail without ever knowing the will of the many — just as in the days before the College was founded.

The South Carolina Section unanimously supported the concept of a College-wide vote on continued F.P.O. membership. It is not important, nor do we intend to declare here, whether or not there is unanimity within the Section as to remaining with or withdrawing from the Federation. We simply and clearly say, LET ALL THE MEMBERS VOTE!!

NOMINEES FOR 1987-88 COLLEGE OFFICES

At the summer meeting of the Executive Council, Dr. Noel Wilkie, Chairman of the Nominating Committee, submitted the following nominees for the positions indicated.

President-Elect

Dr. Stephen F. Bergen

Vice President

Dr. John B. Holmes

Treasurer (July 1, 1988)

Dr. Ronald D. Woody

Executive Councilor, 2 yrs.

Dr. Thomas J. Balshi

Executive Councilor, 3 yrs.

Dr. Kenneth S. Turner

Representative to the Council for the Affairs of the American Board of Prosthodontics

Dr. Dorsey J. Moore

These candidates will be submitted for election at the business meeting at the Annual Session in San Diego. Additional nominations may be made in accordance with the Constitution and By-Laws.

President-Elect William A. Kuebker will assume the office of the Presidency at the Annual Session in San Diego.

Other members of the Nominating Committee are William Kuebker, Lloyd S. Landa, Howard M. Landesman, and Joel O. Martin.

In addition to these nominations, the Executive Council reappointed as **Newsletter** Editor for another three year term, Dr. Kenneth Stewart.



President-Elect William A. Kuebker will assume the office of the President of the College at the San Diego meeting.



RONALD D. WOODY ELECTED AS BOARD EXAMINER

A memorandum from the Executive Director of the Federation of Prosthodontic Organizations, Mr. Peter C.

Goulding, has announced the election of Dr. Ronald D. Woody as an Examiner of the American Board of Prosthodontics. Dr. Woody was the nominee of the American College of Prosthodontists.

The memorandum was sent to the Council for the Affairs of the American Board of Prosthodontics and to Secretaries of member organizations. A total of 66% of the eligible Diplomates participated in the election. This compares favorably with previous elections.

Dr. Woody will officially assume his duties in September 1988 but will participate in Board activities as a consultant until that date. College members join in congratulating Dr. Woody for this honor.

COLLEGE NOMINEES FOR FPO OFFICES

The Nominating Committee Chairman, Noel Wilkie, submitted the following candidates for election to office in the Federation of Prosthodontic Organizations to the Executive Council at the summer meeting in New Jersey. The Executive Council voted to accept the slate of officers.

The election will be held by the House of Delegates of the FPO in September.

College nominees for FPO offices are:

President

Dr. Jesse T. Bullard

Vice President

Dr. Cosmo V. DeSteno

Secretary/Treasurer

Dr. James A. Fowler, Jr.

Assistant Treasurer

Dr. Harold Litvak

Associate Editor

Dr. Larry D. Sindledacker

WHY COME TO SAN DIEGO?

When songwriters Rodgers and Hart wrote, "Hate California, it's cold and it's damp," they couldn't have been talking about San Diego. The weather is one of the city's greatest assets.

San Diego also boasts fine hotels and restaurants, excellent meeting facilities and support services and a wealth of sight-seeing attractions. In a phrase, it's a splendid meeting and convention venue.

SAN DIEGO AREA

A city on the move, San Diego has grown to be the seventh largest city in the USA with 1.8 million residents. Bordered on the South by Mexico, on the west by the Pacific Ocean and on the east by mountains and the Anza Borrego Desert State Park, San Diego is home to the America's Cup and the Pacific Fleet. Ninety miles to the north is Disneyland and the beginnings of Los Angeles metropolitan area.

Let it be simply stated that San Diego has the best weather in the USA, perhaps the world. The average daytime high temperature in October is 75 degrees with a low of 61 degrees at night and, on most days, the sun shines. Humidity is generally low and the average annual rainfall is less than 10 inches, usually between December and March. Attire that is light weight and cool for daytime but can be layered in the evenings, should assure a comfortable visit.



PENGUIN ENCOUNTER: Sea World's Penguin Encounter features a 5,000-square-foot simulated antarctic environment, which provides a habitat for six species of penguins. Emperor, Adelie, king, gentoo, chinstrap, rockhopper and macaroni penguins walk or scurry across 12,000-pounds of fresh crushed ice, blown daily to provide a substrate for the flightless birds.

OUR HOTEL

The Hyatt Islandia features 349 beautiful guest rooms. Of these 260 are located in an eighteen story high rise building offering unforgettable panoramic views of Mission Bay and the Pacific Ocean. The 2-story lanai section has 87 guest rooms in a lush garden setting overlooking the swim-

ming pool and marina. The park-like secluded location on Mission Bay near Sea World is about 10 minutes from San Diego's business district.

The hotel provides courtesy transportation to and from San Diego International Airport 7 miles away and nearby Sea World.

Mission Bay is ideally located within 15 minutes of downtown San Diego and the Zoo, La Jolla, Old Town, 27 miles of Pacific beaches and many other attractions.

LEISURE TIME

Our Hotel Property — Sailboat rental and ocean fishing excursions are available at the hotel dock. The swimming pool and adjacent spa are heated year round. Scenic paths that wind throughout Mission Bay are available for jogging, cycling and walking. Located less than 1/4 mile from the Hyatt Islandia is the Marina Village shopping area with several fine restaurants and a variety of unique shops.



RARE AND BEAUTIFUL douc langurs are on exhibit at the San Diego Zoo's Whittier Southeast Asian Exhibits. Their sensitive nature makes the douc langurs difficult to maintain in most zoo settings and fewer than 45 are in captivity worldwide. These colorful, leaf-eating primates are native Vietnam and Laos. (Photo courtesy of the San Diego Zoological Society.)

San Diego Area — The numero uno attraction is the San Diego Zoo, considered the world's largest and certainly one of the finest. The zoo currently features two giant pandas visiting from China. Nearby Sea World recently added new shows to celebrate their expansion. The all new Shamu stadium and show is a must to see. The Wild Animal Park displays animals of the world in their natural habitat. Shopping

is unique and varied from the shops of La Jolla to Tijuana with Sea Port Village, Hilton Plaza and Old Town in between. Other leading attractions include Balboa Park, Cabrillo National Monument and Scripps Aquarium Museum.

Golf and Tennis — There are 15 tennis courts within 5 minutes of the hotel. Twenty-five golf courses, several of championship quality are within 25 minutes of the Hyatt Islandia.

SPECIAL ACTIVITIES

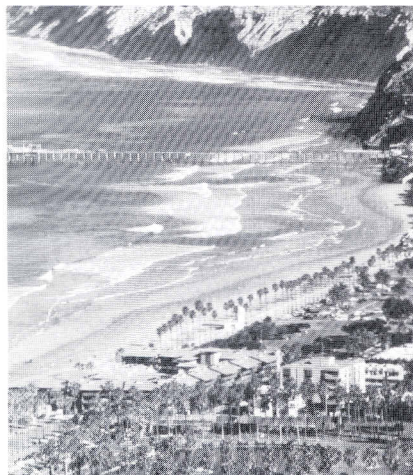
Golf — On Tuesday morning golf enthusiasts will have an opportunity to play the internationally famous Torrey Pines course — home of the Andy Williams - San Diego Open. Bus transportation, greens fees, electric carts and a box lunch will be provided.

Reacquaintance Beach Party — The thrill and excitement of the traditional reacquaintance party will be accentuated by the beauty of Quivera Point adjacent to the hotel. There will be liquid refreshment and hors d'oeuvres to enjoy as the sun disappears into the Pacific Ocean. While eating, drinking and meeting old friends around the bonfire, members and their guests will listen to assorted California Dreamin' music supplied by a local disc jockey.

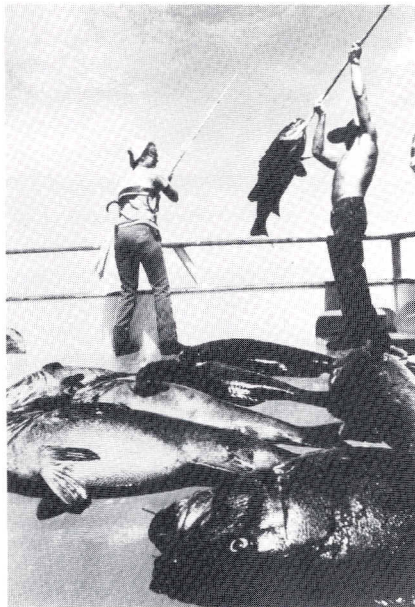
Past Presidents' Dinner — A 1987 highlight will be an evening of classic elegance honoring all ACP Past Presidents. This annual gala event will acknowledge the enormous contribution to our College and the profession made by these men. Let's honor them with our presence. A reception will be followed by a dinner of Beef Wellington and Swordfish in the Regency Room of the Hyatt Islandia. A dance band will play for your dancing and listening pleasure. Formal civilian and military summer mess dress uniforms are most welcome.

Navy Breakfast — The second annual Navy breakfast will be Thursday morning preceding the annual session.

Fun Run — For fitness buffs, the ACP Joggers 5 kilometer fun run will be Friday morning. There will be souvenir T-shirts for all participants and awards for the best times.



CALIFORNIA'S RIVIERA: La Jolla's rugged, beautiful coastline blending into lushly covered hillsides has often been compared to the French Riviera. Further inducements of this seaside village include quaint shops and restaurants, balmy breezes, a variety of watersports from surfing to diving and championship golf and tennis facilities.



YEAR ROUND FISHING PLAYGROUND—San Diego's offshore waters are famous for year-round ocean angling. Party boats and special charters operate regularly from the Islandia Hotel sports-fishing landings. Many rendezvous off the Mexican-owned Coronado Islands, lying 18 miles out to sea.

Larking in La Jolla for The "Better Half" — Separated from San Diego proper by Mount Soledad, and bordering on the north and west by the Pacific Ocean, La Jolla is a unique area of coastline parks, elegant shopping and Mediterranean style homes.

Spouses will visit the Scripps Institution of Oceanography, a world-renowned site for research and graduate-level instruction in oceanography.

Tijuana Ole! — The Friday evening trip to exciting Tijuana will offer an opportunity to discover Mexico's native handicrafts, wonderful shopping finds, and to experience the culture of this land "south of the border."

Members and their guests will have time to explore Avenida Revolution—"Main Street" for exciting happenings in Tijuana. Explore the many shops and arcades offering Mexican curios and duty-free import items (i.e., leather goods, wool blankets, clothing, and crystal).

Enjoy authentic Mexican cuisine for dinner at one of Tijuana's finest restaurants. We will be greeted by lively Mariachis who will perform colorful and rhythmic songs about life, love and Mexico. This "Mexican street band," consisting of various string instruments and fabulous vocals, will add zest to the gathering.

After dinner a troupe of dancers will perform an exciting Ballet Folklorico featuring the native dances of Mexico. Colorfully costumed, these couples provide excellent entertainment in awe-inspiring movement.



WINDSURFER: Windsurfing is just one of the many water sports enjoyed year-round in San Diego. Pictured here is Mission Bay, the world's largest aquatic park. You can enjoy sailing, swimming, water skiing or just sit back and enjoy a relaxing, sun-filled day in Southern California.

graphy, where they will visit the Aquarium to view underwater exhibits featuring many species of ocean life.

They will also visit the La Jolla Bay and Cove area, where the bluffs meet the water. The famed La Jolla Uncolored Water Park, maintained as a ecological reserve, is a favorite spot for scuba divers and snorkelers. Other points of interest include the magnificent cliffs of Torrey Pines overlooking Blacks Beach, the swimsuit-optional beach, and the Gliderpoint area where you may view dare-devils launching their gliders off the edge of the cliff.



PHOTO CARAVAN AT THE WILD ANIMAL PARK: Go nose-to-nose with rhinos and look a sky-high giraffe in the eyes. The San Diego Wild Animal Park offers visitors a chance to photograph the exotic wildlife of Africa and Asia up close in open, natural surroundings on their special photo caravan tours. The Wild Animal Park is a 1,800-acre natural environment preserve located 30 miles northeast of downtown San Diego.

Shopping is always a special experience in La Jolla. Among the many boutiques, import shops, galleries and specialty food shops, guests are sure to find unique and exclusive gifts.

La Jolla, with the tantalizing charm of a Mediterranean Isle, unique shops and breathtaking views of the Pacific, is a refreshing change of pace sure to delight even the most discriminating visitor.

So Why Come To San Diego? Can you think of a better spot to develop both the mind and the body? Block out the week of October 5th and plan to join us in America's Finest City. **San Diego feels good all over!**

DATES OF THE ANNUAL OFFICIAL SESSION

The 1987 Annual Official Session will be held at the Hyatt Islandia Hotel in San Diego, California.

The schedule will be:

Monday, October 5th

Executive Council Meeting

Tuesday, October 6th

Executive Council Meeting

Wednesday, October 7th

Private Practice Seminar

Table Clinics (PM)

ACP Sections Meeting (PM)

Projected Clinics (PM)

Commercial Exhibits

Re-Acquaintance Cocktail

Reception (6:30 PM)

Thursday, October 8th

Scientific Session

John J. Sharry Prosthodontic

Research Competition

First Annual Table Clinic

Competition

Peer Review Update

Spouses Program

Annual Luncheon and Business

Meeting

Commercial Exhibits

* President's Reception and Dinner

Friday, October 9th

ACP Jogging Event

Scientific Session

Affiliate/Associate Seminar

Luncheon and Meeting

Educators/Mentors Seminar

Commercial Exhibits (A.M.)

* Evening Dinner and Trip

Saturday, October 10th

Scientific Session

For the Sporting Enthusiast,

Fishing, Sailing, Tennis (PM)

* Please note this change due to conflicting meeting schedules.

Committee by each speaker for the 18th Annual Official Session. The dates and time of the lectures precede each synopsis.

Thursday, October 8th

8:00 AM Welcome by Dr. Cosmo V. DeSteno, President

8:15 AM Dr. Stephen M. Schmitt and Dr. Frederic H. Brown

Periodontics-Prosthodontics: A Special Relationship

This presentation will discuss the application of periodontal surgical therapy to create an environment which allows for excellence in prosthetic care. The following topics will be addressed: a) biologic dimensions of importance to the restorative dentist-soft and hard tissue management; b) prosthodontic evaluation of patients requiring periodontal therapy; c) anatomic considerations- root form, furcation management, therapeutic eruption and crown lengthening; d) management of hemisected teeth; e) surgical therapy; and f) provisional restorations- how, when and why.

Friday, October 9th

8:30 AM Dr. Patrick M. Lloyd

The Geriatrics-Prosthodontics Alliance

The discipline of Geriatrics affords Prosthodontics a unique and unparalleled opportunity. It is an occasion to employ the very skills and knowledge that have sustained the specialty of prosthodontics. Intrinsic to Geriatrics is a philosophy of patient care consonant with the ambitions and aspirations of prosthodontics. It is a style of professional health service based on principles of comprehensive evaluation and functional rehabilitation.

This presentation will suggest a posture for the academic and clinical prosthodontist regarding the demanding field of Geriatrics. Distinct attention will be given those organizations in Geriatrics most essential to the formation of a Geriatrics-Prosthodontics alliance. Specific instances for interaction will be identified in order to elucidate this complementary professional relationship.

9:30 AM Dr. Mark J. Friedman

Ultra-thin Ceramic Veneers: Maximum

Esthetics with Minimum Iatrogenics

Anterior Porcelain Veneer Techniques have added a New Dimension to conservative dental esthetics. These procedures also offer some innovative

restorative possibilities. The inherent methods involved with resin retained ceramics have made them less iatrogenic than **conventional** ceramic restorations.

Rarely can crown margins be esthetically placed above tissue crest. Thus, the potential exists for a negative periodontal reaction from the "typical" sub-gingival margin. In addition, conventional crown preparations require significant axial reduction to allow for proper contoured restorations. This requirement can present difficulty for the operator especially on teeth with minimal diameters such as mandibular incisors.

Porcelain veneers have distinct advantages in their ability to provide invisible supra-gingival margins, thereby, eliminating negative periodontal risk. They also obviate the need for inordinate tooth reduction thus minimizing pulpal and structural jeopardy especially to diminutive teeth.

11:00 AM Dr. Michael C. Alfano

Product Innovation in Dentistry: The Dentist/Entrepreneur and Industry

Several factors have been at work in recent years to enhance the rate at which new dental products are brought to market. These factors include: advances in microelectronics; increased emphasis on periodontal diseases; greater acceptance of mail order with reduced cost to market; willingness of corporations to license new technology; and most importantly, a greater consumer awareness of health issues. These changes will be discussed with special reference to plaque control agents and devices. In addition, the role of the individual dentists to market new products will be outlined.

Saturday, October 10th

8:30 AM Dr. Brien R. Lang

Computer Applications in Clinical Research

Numerous applications of computer technology have been and will continue to be important adjuncts in basic and clinically applied research in prosthodontics. This presentation will examine several applications currently in use and explore those where it may be significant in the future.

EUREKA-PROSTHODONTICS IN 1987

Scientific Session in San Diego

Listed below is a program synopsis as submitted to the Program Sub-

9:30 AM Dr. John B. Brunski
Biomechanics of Dental Implants and
Interfacial Tissues

From an engineering viewpoint, the design of a dental implant requires accurate data on the loadings to which implants are subjected in vivo. The value of such data is twofold. First, it is useful in evaluating the performance of prosthetic work with implants. Second, since dental implants transmit the in vivo loadings to surrounding interfacial tissues, we need to understand the response of interfacial tissues to the imposed loading. This talk will describe methods for direct measurement of in vivo forces on implants in laboratory animals and humans, and recent results concerning the response of interfacial tissues to biomechanical loading.

10:15 AM Dr. George W. Hetson
The Relationship Between Osseointegration and Dental Implant Design

Comparison of the amount of osseointegration with pull out strength as a function of surface preparation and implant design will be made. Pull out tests were performed on Instron machines. Classic histology of the dental implant-tissue interface will be shown.

11:30 AM Dr. Charles S. Greene
Does Expertise in Occlusion Make Prosthodontists Experts in Temporomandibular Disorders?

The origins of the dental profession's interest in temporomandibular disorders are firmly rooted in the area of occlusion. For many years, these disorders were presumed to arise mainly from various non-optimal occlusal relationships, and treatments were directed primarily at the correction of these relationships. More recently, some TMJ concepts have proposed major mandibular repositioning with prosthetic devices, a procedure which often leads to extensive dental reconstruction in order to "stabilize" new joint positions. However, recent findings suggest that little or no difference can be found in the occlusal relationships of TMJ patients and random populations. In addition, it has been demonstrated that high rates of short and long term success in treatment can be obtained without occlusal alterations.

12:30 PM Dr. Charles E. Pappas
A Multidisciplinary Approach To The Esthetics of The Face

After making some brief background remarks concerning the development of this computer assisted projection device, a demonstration of how using a special computer program to predict a patient's final facial contour, tooth size, and tooth position to promote optimal facial esthetics will be made. The ability of plastic surgeons, oral surgeons, and prosthodontists to collaborate, plan, and visualize the end result before initiating maxillofacial surgery makes the esthetic result that much easier to achieve. Applications will be discussed.

PRIVATE PRACTICE SEMINAR

This year's Private Practice Seminar promises to maintain the excellence of former years. Two exciting speakers have been engaged, one in the area of fiscal management, and the other in marketing.

Dr. L. Donald Guess, is the founder and President of Xe'lan, the Capital Accumulation Plan for Health Professionals. He will present his program of cash-flow management techniques used successfully by physicians and dentists for the last ten years. Fiscal strain is a reality for most private practices. My premise is that the less it impacts on your practice, the greater your flexibility in treatment planning and fee structure can be. This ultimately can allow us to do more comprehensive and sophisticated treatments for more patients. His theme will be "Prosthodontics would be a fun practice if I just didn't have to earn my living by it."

Dr. Guess will be our morning speaker and our luncheon guest.

Mr. Joseph J. Lancellotti, founder and President of Lanmark, Inc., will be our afternoon speaker. Lanmark is a marketing and advertising company with extensive experience in the Dental Field. Many of the dental ads, product pamphlets, brochures and package designs we see everyday, stem from Lanmark, Inc.. The executive council was pleased and impressed with a presentation by him at our meeting in

Chicago.

Mr. Lancellotti will be speaking on professional marketing tips and techniques with a sensitivity to ourselves as specialists. His theme will be "What makes a Prosthodontist different from my general dentist?"

The seminar will be held all day Wednesday October 7, 1987 with our luncheon from 12:15 to 1:15. Plan to attend, with your spouse, both these important and provocative talks.

AFFILIATE/ASSOCIATE SEMINAR

The Affiliates/Associates Seminar and optional luncheon will be held Friday afternoon, October 9, 1987. The purpose of the Affiliates/Associates Seminar is to assist non-Boarded members of the College who are preparing to challenge the American Board of Prosthodontics Examination. As in the past, the Seminar will attempt to have representatives of the Board as well as recent Examinees to give insight into the examination process. A question and discussion period will follow all the presentations. Preceding the seminar at 2:00, will be an optional luncheon at 1:00 to which all Affiliate members are invited as guests of the College (please pre-register). This luncheon gives all those looking forward to the Board examination an opportunity to share their common concerns and get to know one another.

EDUCATORS/MENTORS SEMINAR

The topic for our yearly meeting in San Diego will be implant dentistry in the post-doctoral prosthodontic program. A synopsis of the lectures as submitted by Dr. McGivney and Dr. Bebeau follows.

Dr. Glen P. McGivney, Marquette University School of Dentistry "The Practice of the Specialty of Prosthodontics and How Dental Implants Fit Into the Advanced Education Programs"

Responses from the Survey of Prosthodontics will be categorized to reflect need and demand, incidence and severity of conditions treated, and referral patterns as perceived by Prosthodontists. Dental implants provide one modality for conditions treated. Specialty Education Programs need to

develop specific requirements to assure students, Specialty Boards, the public and the profession that essential educational content, instructional activities, patient care, facilities and supervision are common to all programs.

Dr. Muriel J. Bebeau, University of Minnesota School of Dentistry

"Implant Dentistry: Do New Technologies Require New Ethics"

With changing disease patterns and the perceived oversupply of dentists, there are pressures on dental educators and practitioners alike to expand the range of services the dentist can offer. Dental implants present new practice opportunities as well as new ethical dilemmas for dental education and dental practice:

Has the efficacy of new implant technology been demonstrated sufficiently?

What kind of training satisfactorily prepares a dentist to perform implants?

What are the components of adequate informed consent for implant therapy?

The presentation will focus on the ethical problems raised by implant technologies and ways to prepare future practitioners to deal responsibly with these emerging ethical issues.

A discussion of the impact of implant prosthodontics on post-doctoral prosthodontic programs will follow these presentations. Dr. Richard Grisius, Georgetown University, will act as moderator of the Educators and Mentors Seminar.

PROJECTED CLINICS SCHEDULED

The projected clinics will be presented on Wednesday afternoon, October 7th in San Diego. Dr. Robert F. Baima, the Projected Clinics Coordinator, has scheduled the clinics as follows:

1:30-1:45 **Drs. Asha Samant and Ronald Marra** "Utilization of Magnets in Fabrication of Esthetic Overdentures"

1:48-2:03 **Dr. Kim Laurell** "Magnetic Resonance Imaging of the Temporomandibular Joint"

2:06-2:21 **Dr. Vincent Tso** "Characterization of Provisional Restorations"

2:24-2:39 **Drs. Nikzad Javid and Frank Colaizzi** "Analysis of Maxillary Denture Displacement Due to Relining Impressions"

2:45-2:57 **Dr. Ival McDermott** "To Balance or Not to Balance: This is the Question"

3:00-3:15 **Dr. Tony Daher** "Effects of Direct Castings on Mechanical Properties and Corrosion Resistance of Stainless Steel Posts"

3:18-3:33 **Dr. Florian Knap** "A Simplified Approach to a Fully Programmed Articulator"

3:36-3:51 **Dr. Jack Gerrow** "A Comparison of Articulator Settings Obtained from Wax Checkbites and from Computer Generated Mandibular Movements Recordings"

3:54-4:09 **Dr. William Akerly** "Plaster Registrations-The Substitute for Record Bases"

4:12-4:27 **Dr. Rodney Wong** "An Irreversible Hydrocolloid Boxing Technique Utilizing Magnetic Strips"

4:30-4:45 **Dr. Theresa Segat** "The Porcelain Bonded Onlay - An Esthetic Alternative"

ACP TABLE CLINICS

It Might Not Be TOO LATE! All members of the American College of Prosthodontists interested in presenting a table clinic at the Annual Session to be held in San Diego on October 7, 1987 should contact Dr. Lee M. Jameson (Northwestern University Dental School 312-908-5945) for further information.

COMMERCIAL EXHIBITORS IN SAN DIEGO

As was reported to you previously, the commercial exhibitors have been a great contributor to our College finances. This year, for instance, we are adding \$13,600 to our treasury.

We would appreciate you taking as much time as possible in San Diego to visit the exhibit area. I personally would appreciate your visits more than ever this year, since the exhibit area is some

distance from the area of the scientific sessions.

This year, as usual, we have a variety of commercial exhibitors demonstrating various products used in prosthodontics. Some of them will also show the most recent material used in ridge augmentation modification and osseointegration prior to prosthodontic treatment. Please give all your encouragement to the exhibitors. We would like them to be with us for years to come.

The Exhibit Committee along with the Officers and Council Members thank you very much for all you can do to make the meeting in San Diego a success.

The exhibitors for San Diego are as follows:

1. Austenal Dental
2. Brasseler, U.S.A., Inc.
3. Dentsply International
4. Interpore International
5. Ivoclar (U.S.A.), Inc.
6. Teledyne Hanau
7. Vicks Oral Health Group
8. Calcitek, Inc.
9. Healthco International
10. Nobelpharma U.S.A., Inc.
11. Zest Anchors, Inc.
12. Quintessence Publishing Co.
13. HTR Sciences
14. Dental Ventures
15. Core-Vent Corporation
16. Denar Corporation

M. Mazaheri,
Chairman Exhibit Committees

CAR RENTAL DISCOUNT

Hertz has been appointed the official car rental supplier for our upcoming meeting. Special low rates have been negotiated for this event, to help economize on travel costs.

For reservations and further information call the Hertz Convention Control Center at 1-800-654-2240.

ATTENTION: AMERICAN COLLEGE OF PROSTHODONTISTS MEMBERS. . . .

United Airlines and the American College of Prosthodontists are offering special discounted fares that are not available to the general public. ***This includes the Ultra-Saver fare and can mean discounts ranging anywhere from 40 to 50% off regular Y coach fares!!!***

Refer to Account #7059B

United's convention desk is open for calls 7 days a week from 8 a.m. to 9 p.m. One call from you or your travel agent will put you in touch with our meeting experts who will offer you the lowest discount for which you are eligible *plus* - an additional 5% off that fare! Remember, this *Discount is Only Available* when you or your travel agent book your reservations thru United's toll-free number. Call today for more details.

You will be automatically eligible for a raffle to win two free round trip tickets good anywhere on United's system within continental United States when you call and book your reservation through the 800 number (800-521-4041).

JOHN J. SHARRY RESEARCH COMPETITION FINALISTS

After months of reviewing abstracts of research articles accomplished by Affiliate and Associate members of the College, the Research Committee selected six candidates as semifinalists in the 1987 John J. Sharry Competition

The semifinalists (all Affiliates '87), their thesis title, their sponsor and the schools they represent are listed below.

1. Eun H. Hahn, D.M.D., M.M.Sc.
"Preservation of the alveolar ridge with hydroxylapatite-collagen implants in rats"
Stephen Sonis, D.M.D., D.M.Sc.
(Harvard)
2. Ana M. Diaz-Arnold, D.D.S.
"Bond strengths of intra-oral porcelain repair systems"
Robert L. Schneider, D.D.S., M.S.
(Iowa)
3. Susan E. Brackett, D.D.S., M.S.
"An evaluation of porcelain strength and the effect of surface treatment"
Kenneth A. Turner, D.D.S.
(Iowa)

4. Hussein El Charkawi, B.D.S., M.Sc., M.S.
"The effect of the resilient layer distal extension partial denture on movement of abutment teeth"
Richard J. Goodkind, D.M.D., M.S.
(Minnesota)
5. Ronald G. Verrett, D.D.S., M.S.
"The effects of sprue attachment design on castability and porosity"
E. Steven Duke, D.D.S., M.S.D.
(Texas-San Antonio)



Dr. Noel Wilkie, President of the ACP Education Foundation, presents a check to President of the ACP, Dr. Cosmo DeSteno for the John J. Sharry Research Competition awards.

6. Steven P. Davison, D.D.S.
"Shade selection in color defective dental personnel"
Robert J. Leupold
(Maryland)

The semifinalists submitted their entire thesis for final judging. The Research Committee members read and evaluated the results of their research. All six papers will be submitted to the **Journal of Prosthetic Dentistry**.

The three finalists selected by the Committee to appear before the membership of the College at the Annual Session in San Diego are, in alphabetical order:

Ana M. Diaz-Arnold
Hussein El Charkawi
Ronald G. Verrett

The three candidates selected to present their papers will receive travel and one day per diem expenses. Air travel is funded by the College based on the closest normal U.S. Port of Entry to the annual meeting site and return to the Port of Entry.

For the first time this year there will be cash awards for all three places: first place, \$1,000; second place, \$500; and third place, \$250. (See accompanying photograph.) All three finalists will also receive a plaque and all Volumes of *Classic Prosthodontic Articles*.

BALTIMORE IS COMING

Before you know it the Annual Meeting in San Diego will be a memory, a very happy one I'm sure, and you can begin to lay plans for an exciting and interesting visit to beautiful and historic Baltimore next October.

The city has undergone extensive rebuilding and revitalization processes in recent years making it one of the truly attractive tourist sites in the country. It stands as a rebirth of a city that has specialized in giving birth to many things that we, as professionals admire and respect.

At nearby Fort McHenry our national anthem, The Star Spangled Banner emerged on the scene in a memorable battle during the war of 1812. Francis Scott Key captured those intense and dramatic moments in the inspiring words to the anthem. In Baltimore, we can relive those historic times.

We can also experience, in Baltimore the founding of the exact education

PROPOSED CHANGES TO THE BY-LAWS AND POLICIES

The Constitution of the College requires that all proposed changes to the By-Laws shall be mailed to each Fellow and Associate at least thirty (30) days prior to the Annual Official Session. This enclosure constitutes the required notification. The proposed By-Laws and Policies changes and approval of Guidelines for the Use of FACP will be voted on during the business meeting of the College in San Diego, California, Thursday, October 8, 1987, and may be adopted by a majority vote of the Fellows and Associates present and voting at the session. It may be helpful to bring these proposed changes to the meeting for use as a resource material during discussion.

PROPOSED CHANGES TO THE BY-LAWS

CHANGE 1

CHAPTER IV: COMMITTEES

CHAPTER IV: COMMITTEES

CURRENT WORDING

PROPOSED CHANGE

Section 5. **Duties of Standing Committees.**

Q. New Paragraph

Section 5. **Duties of Standing Committees.**

Q. COMMITTEE ON ETHICS.

IT SHALL BE THE RESPONSIBILITY OF THIS COMMITTEE TO MONITOR THE CODE OF ETHICS OF THE COLLEGE MEMBERS. THIS SHALL ENTAIL: REVIEWING FROM TIME TO TIME THE ETHICS CODE OF THE ACP AND THE ADA AND SUCH OTHER DOCUMENTS AS THE COLLEGE MAY ADOPT IN THE FUTURE TO GUIDE THE CONDUCT OF ITS MEMBERS; REVIEWING ALL FORMS OF THE MEDIA ON A CONTINUING BASIS FOR PROPRIETY OF THE PRESENTATIONS OF COLLEGE MEMBERS; ACTING ON, IN ACCORD WITH COLLEGE POLICY, COMMUNICATIONS RECEIVED FROM OR REFERRED TO IT BY INDIVIDUALS OR ORGANIZATIONS RELATING TO THE ETHICAL CONDUCT OF COLLEGE MEMBERS; AND PROPOSING CHANGES TO CURRENT GUIDELINES AND OR RECOMMENDING NEW ONES WHICH WILL ENHANCE THE PROFESSIONALISM OF THE COLLEGE, ITS MEMBERS AND ULTIMATELY BENEFIT THE PATIENTS IT SERVES. A REPORT OF THE COMMITTEE'S FINDINGS, RECOMMENDATIONS AND/OR ACTIONS SHALL BE REPORTED TO THE EXECUTIVE COUNCIL.

CHANGE 2

CHAPTER VII: DUES

CHAPTER VII: DUES

CURRENT WORDING

PROPOSED CHANGE

Section 2: **Dues.**

- B. The annual dues for Affiliates shall be \$25.00 per year. Fellows and Associates returning to student status as full-time students in an accredited advanced education program in the study of prosthodontics shall pay annual dues at the Affiliate rate.

Section 2: **Dues.**

- B. The annual dues for Affiliates shall be \$25.00 per year. Fellows and Associates returning to student status as full-time students IN AN ACCREDITED ADVANCED EDUCATION PROGRAM shall pay annual dues at the Affiliate rate.**

CHANGE 3

CHAPTER IX: FPO REPRESENTATION

CHAPTER IX: FPO REPRESENTATION

CURRENT WORDING

PROPOSED CHANGE

Section 1. **Representation to the Federation of Prosthodontic Organizations (FPO).** The President, President-Elect, and the Secretary of this College shall be delegates to the House of Delegates of the FPO and shall serve terms in that body concurrent with their terms of office in the College. There shall be additional delegates elected to the House of Delegates of the FPO. The number of delegates shall be based on existing FPO by-laws. Delegates shall number one for the first 100 of the sum of Fellows and Associates; a second delegate for the next 101 to 500, a third for 501 to 1,000, and a fourth for 1001 and above. The Nominating Committee shall select the required number of nominees

Section 1: **Representation to the Federation of Prosthodontic Organizations (FPO).** **THE PRESIDENT SHALL APPOINT THE APPROPRIATE NUMBER OF DELEGATES AND THREE ALTERNATE DELEGATES TO THE FPO. THE TERM SHALL BE FOR ONE YEAR.**

and three (3) alternate delegates for this office. All delegates and alternates will be Fellows in the College whose experience in College affairs provide them with the knowledge and understanding to represent the views of the College in the FPO. They shall normally serve for a term of one (1) year but may serve more than one term. Of the three alternate delegates, one will be designated by the Executive Council as the first alternate delegate to the FPO and function as the ACP liaison person to the FPO. The liaison person must be knowledgeable of all workings of the FPO, including its organization, policies and functions, and be made cognizant of all correspondence to and from the FPO. The liaison person will be designated for a term of three years and may be reappointed to successive three (3) year terms.

CHANGE 4

CHAPTER XI: SECTIONS

CURRENT WORDING

Section 1: **Sections.** The College shall be comprised of Sections which may be established under the following conditions.

CHAPTER XI: SECTIONS

PROPOSED CHANGE

Section 1: **Sections. SECTIONS MAY BE ESTABLISHED UNDER THE FOLLOWING CONDITIONS.**

PROPOSED CHANGES TO THE POLICIES

Policy A-12. is amended to read: THE PARLIAMENTARIAN SHALL BE APPOINTED BY THE PRESIDENT TO ASSIST THE PRESIDENT IN THE ORGANIZATION OF THE BUSINESS MEETINGS AND TO SERVE AS A CONSULTANT DURING THESE MEETINGS. THE PARLIAMENTARIAN WILL SERVE AS NEEDED DURING THE TERM OF THE PRESIDENT.

2. Policy B-20. is amended to read: SOLICITATIONS OF FUNDS BY THE COLLEGE FROM OUTSIDE SOURCES WILL BE LIMITED TO THE FINANCING OF SPECIAL PROJECTS AS DETERMINED BY THE EXECUTIVE COUNCIL.

3. Policy B-11. is amended to read: ANY PUBLICATION TO BE DISTRIBUTED THAT DISPLAYS THE COLLEGE SEAL MUST BE SUBMITTED TO THE EXECUTIVE COUNCIL FOR REVIEW AND APPROVAL OF THE USE OF THE SEAL. THE USE OF THE SEAL WILL BE CONFINED TO OFFICIAL COLLEGE PUBLICATIONS AND CORRESPONDENCE, TO INCLUDE THOSE OF STATE SECTIONS, BUT IS NOT FOR USE BY INDIVIDUAL MEMBERS.

THE FOLLOWING ARE PROPOSED NEW POLICIES.

4. Policy C-12. TAPING OR RECORDING OF SPEAKERS, PRESENTATIONS OR ACTIVITIES FOR COMMERCIAL PURPOSES AT COLLEGE SESSIONS MUST BE AUTHORIZED BY THE EXECUTIVE COUNCIL.

5. Policy C-13. THE COLLEGE MAY ACCEPT CORPORATE SPONSORSHIP OF PORTIONS OF THE ANNUAL SESSION. APPROPRIATE RECOGNITION FOR SUCH SPONSORSHIP WILL BE GIVEN BY THE COLLEGE. THE ANNUAL SESSION COMMITTEE WITH GUIDANCE FROM THE EXECUTIVE COUNCIL WILL TAKE RESPONSIBILITY FOR SELECTING SPONSORS IN KEEPING WITH THE PRINCIPLES AND ETHICS OF THE AMERICAN COLLEGE OF PROSTHODONTISTS.

F.A.C.P., GUIDELINES FOR USE

The Title Fellow of the American College of Prosthodontists is conferred on all Associate members of the College at the annual official session following their successful completion of the examination of the American Board of Prosthodontics or, if a Diplomate of the Board at the time of application for membership in the College, it is conferred upon election to membership.

The letters F.A.C.P., representing the title, may be used following one's professional degree in specific circumstances. It is awarded in recognition of achievement, it is not a degree.

In accordance with ADA Principles of Ethics and Code of Professional Conduct, Section 5A Advisory Opinion 4 and to conform with good taste, accepted procedures and the College Code of Ethics, the following guidelines are promulgated for use of the letters F.A.C.P.

1. They may be used in academic registers where faculty are listed, together with all other degrees and titles.
2. They may or may not be used following your name as author of an article published in a Journal. This decision will be at the discretion of the group which makes policy for the Journal concerned.
3. They may be used on the title page of a textbook of which you are the author.
4. They may be used on your curriculum vitae.
5. They should not be used on office doors, office buildings, official nameplates, telephone directories, stationery, or in any public announcement where they might be interpreted by the reader or viewer as implying superior skills or specialty status not possessed by other specialists.
6. In foreign countries the use of all degrees, titles and letters is the custom when signing a professional register or guest book. In these cases follow the example of those who have signed before you.

The above guidelines apply where state law does not prohibit such use.

standards that serve as the foundation of professional dentistry as we know it today. In 1840 a charter was granted to, among others, Horace Hayden and Chapin A. Harris establishing the Baltimore College of Dental Surgery, the first dental college in the world.

With these several historic noteworthy events to tantalize and stimulate your minds, Baltimore promises to be an ideal spot to mingle the old with the new.

The annual meeting will be headquartered in the sparkling new Stouffer Harbor Place Hotel overlooking the splendor of the Inner Harbor. There promises to be something to satisfy the taste of everyone.

The scientific program is beginning to take shape and it should be excellent. If you have any suggestions you'd like to make concerning the meeting please drop a line to the **Newsletter** Editor who will be serving as Co-Chairman of the 1988 Annual Session.

SECTIONS

IT IS NOW POSSIBLE TO HAVE MORE THAN ONE SECTION WITHIN A STATE

After many fits and starts by various members of our college to form a second section in their state, the Executive Council has decided that it will be possible to have more than one section within a state. If there are enough members within a geographic area, that is also too far from another section for active participation, that group may petition the Sections Committee to be recognized as a section. If this is the case, then all/both of the sections within the state must create a single, separate executive board, made up of members from the executive board of the sections, which will be responsible to the state legislative body and the State Dental Association in affairs relating to the members of the College. This State Executive Board would be elected on an annual basis during an annual meeting of all the sections within the state, preferably at and during the annual State Dental Association Meeting. It would be the responsibility of the State Executive Board to advise the State Sections of any business or affairs of the state or other sections within that state that may have some bearing on the other sections. This State Executive Board would also be responsible to the Sections Committee for annual reports.

This is an extremely good opportunity for groups of members who are geographically isolated to have status within their own community and a stronger collective voice in their state, and consequently the College.

In brief:

1. Petition the Sections Committee to establish a new section;
2. Establish an Executive Board with the other section(s);
3. Establish liaison with the State Dental Association and State Legislature that such a group exists and that you are prepared to look into affairs relative to your members and specialty.

Annual Meeting - At the Sections meeting in San Diego, among other items of business the following topics will be discussed.

1. Need to establish new sections within each state or regions of the country
2. Multiple sections within each state
3. Should we have international sections for people in the military outside of the U.S.A.
4. Protocol for starting a section
5. Tax exemption status for each section
6. Inter-state specialty relations
7. Annual reports
Please try to have someone present to represent your Section.

— Carl W. Schullter, Chairman

TEXAS: In a beautiful ceremony on May 30th attended by the prosthodontic community of South Texas, Dr. Lily Garcia and Dr. David Bohnenkamp were joined in matrimony, undoubtedly one of the few prosthodontic weddings on record. Both are Affiliate members, soon to be Associates, of the College.

Lily completed her residency in June from the University of Texas Health Science Center at San Antonio at the same time her husband David, completed his residency at Wilford Hall USAF Medical Center.

There were more than forty prosthodontists from both the civilian and military communities in attendance. Shown with the happy couple are the Air Force prosthodontists from the Wilford Hall residency program.

Major and Mrs. Bohnenkamp have departed for Japan where David is assigned to the Yokota Air Base Hospital. Much happiness and many little prosthodontists are wished them.

On June 9, 1987 the Texas Section met at Brooks AFB Officers Club for their summer meeting. The meeting was sponsored by the Wilford Hall USAF Medical Center Prosthodontic Department.

The social hour was followed by an excellent dinner after which the scientific program was presented. The Chairman of the Prosthodontic Department, Col. Robert Cronin, presided and introduced the speakers, all senior residents in the Wilford Hall program.

Dr. Ronald Verrett spoke on "Metal Bases in Complete Dentures", Dr. David Bohnenkamp presented a review of "Intraoral Orthoses Therapy" and Dr. Don Belles summarized his work on "Renaissance Crowns". The

OLD PROSTHODONTISTS

DON'T ALWAYS FADE AWAY

College member Fran Clark, Wilmington, Delaware happened onto this quaint country store (see photo) and wondered whether Past President Bob Elliott had entered a new career. It's entirely possible knowing Bob's long time devotion to the ocean.

On the other hand, we know the real



Robert Elliott is busily engaged in preparing to assume the office of President of the American College of Dentistry. Congratulations Bob for a great honor.

By the way, Bob's country store is located on the corner of Clark and DeSteno Roads — no kidding.



Part of the reception party honoring Lily and David Bohnenkamp. From left: Charles DuFort, Earl Williams, Glen Richards, Dept. Chairman Robert Cronin, Lily and David, Charles Malloy, Rodney Knudson, Garrett Hartman and Tom Girvan.

programs, as usual, were well prepared and well received.

Following the scientific session Dr. Edmund Cavazos, President of the Section, conducted the business meeting. Dr. Don Kramer from the M.D. Anderson Cancer Hospital in Houston addressed the meeting and requested authority to establish a separate Section in Houston. The members agreed that the concept was good but that it should be referred to the Executive Council of the College for final action. (See accompanying article on separate sections within a state by the Chairman of the Sections Committee.)

The Section will meet in September at the Dominion Country Club for the annual dinner with spouses.

SYNOPSIS OF PAPERS PRESENTED AT THE INTERNATIONAL ANNUAL OFFICIAL SESSION

By Dr. Don Garver

TITLE: Current Perspectives in Shade Selection and Color Matching

Lecturer: Dr. Jack D. Preston

Consistently reproducing esthetic qualities in the natural dentition remains a challenge to dentists and technicians. Dr. Preston introduced his subject by stating that shade selection and color matching are totally different. He then delved into the subject of his color presentation with the in-depth knowledge and enthusiasm, the exactness that is the hallmark of any Preston presentation. The attempts to match the optical properties of a natural tooth with a limited selection provided by

current shade guides and the problems encountered trying to match the selected guide with porcelain are frequently frustrating. The solution of the problem lies in defining the variables, obtaining needed data, and properly employing current materials to obtain an optimal result. **New products and techniques** have potential to provide improved shade control —possibly even true color matching.

Dr. Preston presented an in-depth review of **hue, value** and **chroma**. He stated that Grassman's Laws are really a good definition of these particular interpretations. **Hue** is the evaluation of the spectral energy distribution. It does show color within light rays, but hues are a result of the light rays stimulating the eye and interpreting the color. **Value** was stated as being the quality of grayness as opposed to an amount of lightness or darkness. **Chroma** was designated as the intensity of the hue (purity) and the strength and concentration of the hue. Finishing up this discussion of the interpretation of color, Dr. Preston reviewed **Metamerism**. In Metamerism, two objects of different spectral curves appear to be the same match. They are really metameric only when a true spector-photometric curve matches exactly.

The lecturer continued his dissertation on color by explaining and reviewing the present color order systems. The first system described was the **Munsell system**. It can more readily relate to porcelain shading. It is a totally contained system with value, hue and chroma contained within a total axis type situation where value, chroma and hue are explained in different planes related to a total sphere containing all visible hues. Readily said, it is a length, width and depth conversion of the three important factors of hue, value

and chroma. The Neydium shade guide by the Ney Dental Manufacturing Company was an off-shoot of the Munsell system.

The second system discussed was the **Natural Color System** in which yellow, low, blue, red and green are the basic hues, all hues relate to all other hues, and all are discussed in accordance to the adjacent hue.

The third system reviewed was the **C.I.E. System** which is a mathematic transmission of hue, value and chroma. This particular system is more easily used in industry for the manufacturing or the fabrication of dye lots and chemically computerized coloring systems to be used in the industrial world.

The fourth system discussed was the **Clark Color System** designed in 1931 by Dr. Bruce Clark. In this particular system, there were 342 gingival colors and 361 incisal colors. It was an easily workable system which, for some reason, did not seem to be accepted in dentistry.

Dr. Preston now led the audience into a review of spectro-photometric studies that were conducted by three different groups—Dr. Sproull, Drs. Lennre and Burke and Dr. Clark. In the study by Dr. Clark, he stated that it is difficult to use the spectro-photometric evaluation in the measurement of tooth color. Out of the spectro-photometric studies came the colometry system which used the Chromascan instrument designed in 1976 and offered to the dental profession.

Dr. Preston led the audience into a review of the current problems that present to the dental profession:

- (1) Fluorescence
- (2) Metamerism
- (3) Translucence
- (4) Inhomogenous samples

Fluorescence is a vitality that we look for in the dentally restored tooth using either acrylic resin or porcelain veneers. When a fluorescent light gives a blue transmission to the porcelain, thus yielding a whiteishness of the tooth, we say that it is a vital restoration. The measurement of fluorescence is a real problem. The addition of metal oxides to the porcelain masks the fluorescence. We find that it is a real problem to change shades and have correct fluorescence of porcelain that we desire to use.

The subject of metamerism was overviewed because of the previous discussion.

Dr. Preston next led us into an evaluation of the translucent sample. He stated that a mammal is a great translucent and, because of this, we must worry about the backing and metal surface of our artificial restorations in order to have the same type translucence in our prosthesis as is available in the natural tooth. He stated that there is a scattering effect in which the particle size of the porcelain powder has a great effect on the scattering of the light throughout the porcelain restoration. In fact, the refractive index of the restored porcelain tooth is different than the matrix upon which it is built, we get a maximum of this scattering and, therefore, a poor translucent effect.

The next area of discussion was the requirements of an ordered color system. There are two basic requirements:

- (1) It must have a logical arrangement.
- (2) It must have adequate distribution.

Dr. Preston proved that shade guides available to the dental profession today are not based on these principles. The basic shade guide, by all manufacturers in the United States and even overseas, are made for a user supplied logic and there is very little definitive research for their exact manufactured composition. In fact, Dr. Preston stated that in most cases, shade guides do not even match other shade guides by the same company. Certainly the porcelains that are manufactured do not match the shade guides and, most emphatically, the opaque porcelains that are available do not match the body porcelains that are meant to blend in a double porcelain system. However, he did mention that Ceramco, Jelenko Generation Four, and Micro-bond Porcelain do seem to have good color matching of the opaque and the body porcelain powders.

Dr. Preston further evaluated the use of quality control spector-photometric systems within the porcelain manufacturing companies of the world and found out that of seven companies asked about this situation, only five of them used spectro-photometric equipment. Of these seven, three said that they used the system for formulation, four for quality control and one for research.

Dr. Preston concluded his presentation discussing the Spectratone shade guide in which there are 216 shades of a master hue guide. There are 36 permeations of value and chroma of each hue; thus, there is a logical order for the application of correct color matching and shade selection. In this porcelain shade guide kit,

there are only four bottles of porcelain with many modifiers and opaques. All are utilized with a formula chart and micro-metering tools to measure the exact amount of powder to be added.

Finally, Dr. Preston discussed the future and how spectro-photometry may be able to assist dentistry in arriving at the correct shades for patients. He stated that through proper computerization, we will be able to take all of the information from the patient's own teeth and custom formulate the porcelain for our use. We are really going into computer measurement of tooth structure and computer formulation of all porcelain powders. The proposed use of spectro-photometry is to: (1) measure the tooth color space; (2) measure the shade guide color space; (3) measure the color of the dental porcelain; (4) determine the source of color in each tooth; and (5) establish the correlation with other data that can be librated within the computer and drawn out for each individual usage. The computer can be used to formulate the porcelain to match the teeth better for the ultimate benefit of the dentist and the patient.

Further information about this lecture can be gained by contacting Dr. Preston at the following address: 4936½ McConnell, Los Angeles, CA 90066

TITLE: Dental Implants: The State of the Science - 1985

Lecturer: Dr. George A. Zarb

Dr. Zarb stated that dentistry, for many years, has attempted to compromise the restoration of the mouth with interference of the periodontal ligament, a 45 square centimeter section of oral tissues that supports the teeth and provides good oral health for the entire oral cavity. The periodontal ligament is present for several reasons: (1) to cushion the forces of mastication; (2) as a sensory organ for mandibular positioning and detecting the spatial relationships within the mouth; (3) to compensate for tooth movement; and (4) as a regulator of the osteogenesis process. Dentistry has constantly been trapped and hoaxed by the substitutes we deal with in a variety of the same theme—the restoration of this supporting mechanism and the teeth that it surrounds. Unfortunately, thus far in dental history, we have done a poor job of being able to approximate our dental prostheses to this periodontal ligament with any predictable success. Finally,

after the periodontal ligament and the teeth have been lost, we end up with complete or partial removable prostheses.

In a Scandinavian review presented by Dr. Zarb, a large group of patients who had received some type of removable prosthesis was evaluated. Thirty-one percent of the patients were no longer using their prosthesis, and over sixty percent of the patients could not chew successfully with their prosthesis, and in some cases could not use them at all. In the constant search for something to replace missing teeth at this 45 square centimeters of periodontal ligament, dentistry has gone into many types of implant systems, all of which have, in some way or another, failed to this particular date. They have been so unpredictable, that the dental educational system has been very reluctant to teach the art of implantology.

After his review of the periodontal ligament and dentistry's inability to properly replace the hard and soft tissues of the oral cavity with any type of predictability, Dr. Zarb entered into a discussion on implants. A good implant should: (1) not produce any acute or chronic inflammatory response; (2) not create any type of fibrous tissue encapsulation; (3) create an induction of bone formation with secure anchorage of the subsequent prosthesis; and (4) have a predictable result.

The objectives of any dental implant system should:

- (1) be predictable
- (2) withstand long term functional stresses
- (3) be capable of being located in any residual ridge location and supporting a total range of prosthetic designs

The Branemark method of osseointegration is the only method of implantology, thus far, which seems to fulfill all of the above objectives of the successful dental implant. When properly integrated, the osseointegrated implant fixture will have a direct contact between a well differentiated living bone and the implant surface. There is primary interfacial osseointegration. In the pure titanium fixtures developed by Dr. Branemark, there is an apparent bond between the titanium oxide and the bone. Dr. Zarb discussed the pure titanium fixtures as described by Dr. Branemark. This fixture has a 99.75% titanium content, .05% iron, .10% oxygen, .03% nitrogen, .05% carbon, and .012% hydrogen. This titanium compo-

sition used in the Branemark implant fixture, is a commercially pure titanium and, so far in dental research, is the only fixture that has a predictable integration with the titanium oxide and living bone. A predictable osteogenesis between the fixture and the living bone is the answer to success. Likewise, there seems to be a positive gingival response to this commercially pure titanium, in spite of the location of the fixture or the oral hygiene that the patient is able to maintain after placement of the prosthesis.

In conclusion, Dr. Zarb presented a review of the many different prosthesis combinations. He overviewed that fixed, partial removable, complete removable and maxillo-facial prostheses can be constructed over and supported by titanium osseointegrated fixtures.

Further information can be obtained by writing to Dr. George A. Zarb at the following address: University of Toronto, Fac. of Dent., 124 Edward St., Prosth. Dept., Toronto, Ont., Canada MJG 1G6

TITLE: The Restoration of the Mutilated Dentition

Lecturer: Dr. Harold W. Preiskel

Dr. Preiskel's presentation was directed to the rehabilitation of the mutilated dentition by use of the overdenture. He stated that overdentures were usually bulky; that they create too much load to their abutments and that there is an inability, in many cases, of the patient to be able to clean the abutments properly. All of these particular items can be adequately negated if, in fact, proper planning is done before the actual restoration of the oral cavity commences. Dr. Preiskel reviewed the choice of abutments as to periodontal considerations, tooth locations, the number of teeth for abutments, the space between abutments, and the teeth present in the opposing arch. All contribute to a decision as to what type of abutment restorations should be utilized in each over-denture situation.

Dr. Preiskel discussed the denture-abutment interface and its importance to the design and prognosis of the entire oral rehabilitation. He stated that the physical properties of the dental materials used must be appreciated by the attending dentist. The selection of proper materials to resist abrasion and wear and recurrent decay is essential. He stated that a path of insertion determined by a parallelling device

should be incorporated into the diagnostic phase. Retention is a very important factor in the success of the denture abutment interface. In retention, the rate of force application must be considered. We should use a retentive unit that will resist sudden impact force dislodgement. We should concern ourselves with how great a distance of movement there is before there is a breakaway occurring from the retentive device and its keeper, and we should certainly use a unit that resists sudden force dislodgement over a 300 micron distance. The last area in concern of the denture abutment interface is the space available to prevent the unesthetic and contoured bulges that would affect the patient's sense of having a full labial vestibule or lingual fold area.

Dr. Preiskel then discussed the overdenture abutments of choice. The first discussed was the **bare root face** wherein which the overdenture abutment is simply rounded off and prepared for supporting the overdenture without any restoration of the abutment root surface. Dr. Preiskel stated that this certainly should only be an intermediate situation due to the fact that the bare root surfaces have a tendency to fracture and decay. The second type of abutment discussed was the **dome-shaped coping**, followed by the **thimble-shaped coping**. Unfortunately, in the thimble-shaped coping there tends to be wear after a few years. At least 1 to 2 mm. of gold should be used to prevent a wear through between the denture acrylic resin or the internal support of casting that might be incorporated into the denture base.

The next type of overdenture that was discussed was the **magnet retained** restoration. Due to the fact that the rare earth magnets have now become popular with the use of cobalt semurium, we are able to provide an amount of kilogram pull that will resist dislodgement of the overdenture. Unfortunately, magnets **cannot normally withstand any type of lateral force**. Different style magnets that are available are the open field, which is usually made in the form of a bar magnet, and the closed field, which in some cases, is difficult to embed into the acrylic resin denture base. Magnet systems by Dr. Gillings have been refined and are much easier to use. Dr. Jackson's magnets show great promise due to the fact that they now have a dimple in them to withstand the lateral forces of displacement.

The next type of overdenture abutment retainer that was discussed was the **stud attachment**. The stud attach-

ment surveyor is an absolute essential in the diagnosis and fabrication of the prosthesis. Because of the size of these particular stud attachments, they should be placed in a lingual position in order to provide space for the placement of teeth. The stud attachment when surveyed in the diagnostic phase, can be positioned without difficulty and certainly without worry about where to place the abutment system. The final system of abutment restoration discussed by Dr. Preiskel was the **bar restorations**. He gave a fine review of the multi-clip and the single clip restorations.

Dr. Preiskel was very concerned about the constant hygiene surveillance that is necessary in any type of overdenture abutment system. He stated that communication skills between the dentist, hygienist and patient must be increased due to the fact that many overdenture research reviews have shown that plaque and gingival inflammation and dental disease **did increase** in overdenture cases. He simply felt that there should be a very definite oral hygiene regime installed within the total oral hygiene program of the overdenture patient. He also stated that a neutral fluoride gel or a .4% stannous flouride should be given to the patient with instructions for proper usage.

In conclusion, Dr. Preiskel's review of the rehabilitation of the severely mutilated mouth showed all of us that it is a very difficult diagnostic and technique sensitive procedure. The patients' desires and their oral problems must be understood by the dentist before treatment is commenced. There must be an increased scientific background of the doctor as to dental material and forces that might cause problems during the use of the overdenture system. The doctor certainly should have an increased biologic background to be aware of the detrimental effect to the supporting periodontal ligaments and the remaining residual tissues in any overdenture system. He ended this fine discussion by stating that the clinical and technical techniques of the overdenture system must be thoroughly understood by the doctor, explaining it well to the patient, and communicated with clarity to the dental technologists who support us with the fabrication of the final prosthesis.

Further information may be obtained by writing to Dr. Harold W. Preiskel at the following address: 25 Upper Wim-pole Street, London W1, England

SYNOPSIS OF PAPERS PRESENTED AT THE WILLIAMSBURG ANNUAL OFFICIAL SESSION

By Dr. Don Garver

TITLE: Implantology Today - A Dental Revolution

Lecturer: Dr. Paul A. Schnitman

Dr. Schnitman began his presentation by stating that there are **problems**, there is **confusion** and there is **controversy** in all of implantology. Patient distress, practitioner disappointment, literature inadequacy, short lectures or training periods, enthusiastic doctors, poor patient selection and failure have created these three problems. It is now up to the American Dental Association, the National Institute of Dental Research and the Food and Drug Administration to provide literature to enable us to better know implantology. Dr. Schnitman reviewed the different types of implants. Unfortunately the different types of implants developed have gone directly to the human placement foregoing primary laboratory research in order to save time and dollars. Toxicity problems and technique concerns were never developed in most implant systems. This discussion showed that most systems rely on grooves or mechanical locks for the metal/bone interface "attachment". Some systems have utilized a cementing medium. In the **PODASH model** replica of teeth reimplanted and tested, it showed that there was no difference in the periodontal ligament/bone attachment apparatus for smooth, perforated or grooved implants. Only length of the implant made a difference in lateral movement testing. Dr. Schnitman commented that the blade implant has a tendency to have an invagination of epithelial tissues around the non-segmented collar of the blade creating an opening in the oral cavity to the bony structures below. The staple implant has yielded a 95% success rate over the years, and except for the fact that major surgery is necessary for the placement of the staple implant, its results have been very successful. The subperiosteal implant is a last resort implant technique and osseointegration by Branemark has yielded a rebirth of implantology to dentistry.

The remainder of the presentation concerned the difference between the osseointegrated system of Branemark and the Core-vent system. Dr. Schnitman showed many pictures about the

different systems and summarized the Branemark system by stating that the implant must get into the cortical bone in order to maintain the implant at its greatest percentage of osseointegration. He suggested: (1) that the surgeon not exert force during implantation of the fixture; (2) that the drilling speed should be slow; (3) that there should be copious amounts of irrigation; and (4) that the management of the bone at the placement of the implant is the answer to success. (Knife edged bone should be removed in order to get a proper width and access to more cortical bone for the placement of the fixture). The Core-vent system is a functional and viable implant and works well in areas where there is adequate medullary bone. The bendable heads of the occlusion segment is a big plus in comparison to the Branemark section, and Core-vent has a cost factor in its favor in comparison to the Branemark system.

As a final comment in this lecture, Dr. Schnitman stated that a consent form must be utilized when placing any implant system, that the patient should be told why this implant system is necessary, and that (at great length) the patient should be told about the risks of the system and what can be done if any of the implants do not integrate and there is failure of the system.

In summary, Dr. Schnitman lectured to us on the indication, surgical insertion and restoration of the implant as well as follow-up, maintenance and troubleshooting. He specifically pinpointed the Branemark and the Core-vent systems and gave us an overview of the implant systems available in 1986. The success of any implant system is based upon the biocompatibility of the implant material to the patients' tissues, the biomechanics of the system, the surgical protocol, the prosthodontic protocol, the oral hygiene capability of the patient, the patient selection, and the training of the doctor or doctors involved in the restoration of the patient's oral needs. Any further

The Central Office of the College moved its offices on May 15, 1987. The new address is:

**1777 N.E. Loop 410
Suite 904**

San Antonio, Texas 78217

Please use **ONLY** the above address for mailings to the College.

information can be gained by writing to Dr. Schnitman at the following address: Prudential Center, 17 Fairfield Plaza, Boston, MA 02199

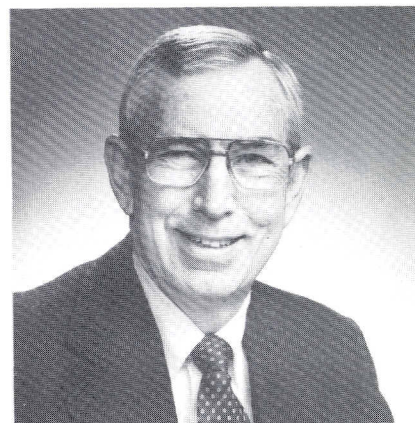
DR. JOSEPH P. LAMBERT RETIRES

After 35 years as a Baylor College of Dentistry faculty member, Dr. Joseph P. Lambert retired July 1, 1987. A 1952 Baylor graduate, Dr. Lambert served as chairman of the Department of Removable Prosthodontics for 30 years.

"Dr. Lambert's many contributions to the Baylor College of Dentistry over the past 35 years have been outstanding," said Dr. Richard E. Bradley, President and Dean. "He is a highly respected dental educator who will be remembered by his students and colleagues."

In his years at Baylor, Dr. Lambert has seen the influence of four deans, a number of changes in the building, and has seen several trends in dental education come full circle. "Every brick in this building has been laid since I came here as a student in 1949," he said.

Dr. Lambert's accomplishments and honors are many, he has received a number of teaching awards including the Delta Sigma faculty award, the outstanding faculty member award of 1969 and 1970 and the appreciation award of 1972. He is also a member of the Order of Good Fellows of the Texas Dental Association and a Fellow of the American College of Dentists. The 1986-87 *Baylor-Burr*, the college yearbook, was dedicated to him.



Dr. Joseph P. Lambert

Among his accomplishments are the leadership roles he played in implementing a new grading system and forming the Baylor Implant Group. He served as the first chairman of the

Implant Committee formed of representatives from the Departments of Fixed Prosthodontics, Removable Prosthodontics, Dental Hygiene, Oral Surgery and Periodontics. Implant patients are now seen once a week at Baylor, giving graduate students an opportunity for training in this important field.

Dr. Lambert has served as a consultant to Veterans Administration hospitals throughout Texas and has presented numerous continuing education courses throughout the Southwest. He has also been an active participant in the table clinic portion of the Dallas Mid-Winter Dental Clinic.

In his retirement, Dr. Lambert plans to continue his part-time private practice with particular emphasis in the implant field.

WASHINGTON NEWS BRIEFS

Congress Acts On Catastrophic Care

Key House and Senate committees approved similar versions of catastrophic health care bills. Even though the Association made a strong case for including dental coverage, neither bill contains it.

Catastrophic care in both bills would take effect after Medicare recipients have met an annual deductible. The Senate bill, S 1127, sets the deductible at \$1,700, while the House version, HR 2470, capped the limit at \$1,572. Both bills would be financed in part through a supplemental premium collected by the IRS.

HR 2470 was referred to another committee for further hearings. The Association testified before the Energy and Commerce Health Subcommittee on the need to include dental benefits in a catastrophic health insurance program.

Dr. Albert Guay, chairman of ADA's Council on Dental Care Programs, told the subcommittee that the dental coverage would represent "a sound investment for a relatively small amount of money." The Association calculates that it would cost Medicare beneficiaries 25-cents a month more for dental coverage.

Dr. Guay said that certain people suffering from catastrophic illnesses are vulnerable to oral infections. Citing research by Tufts dentist Athena Papas, Dr. Guay said 25 percent of all deaths of organ transplant patients are attributable to infections that begin in the mouth.

Rep. Henry Waxman (D-CA), subcommittee chairman, commended the Association's testimony. "I think you

have made a very good case," he said. "We will see what we can do."

Kennedy Calls For Mandatory Health Insurance

"Every American without health insurance is an American tragedy waiting to happen," Sen. Edward Kennedy (D-MA) said when he introduced his "Minimum Health Benefits For All Workers Act" May 19.

The Kennedy bill, S 1265, would require employers to provide minimum health care coverage for employees and their families. Only companies that are less than two years old with fewer than 10 employees would be exempt.

"A minimum benefit package does not mean Cadillac plans," Sen. Kennedy explained. However, under S 1265, employers will be required to cover hospital and physician care, testing, prenatal and well-baby care and catastrophic care. Employees would pay 20 percent of the costs after meeting a \$250-\$500 annual deductible.

State Issues

Aids: Close to 400 bills related to AIDS were pending in state legislatures this spring. Bills dealing with discrimination against AIDS victims probably have the greatest potential impact on dentists as employers and service providers.

Twenty-three states plus the District of Columbia officially recognize AIDS as a handicap entitled to protection under their anti-discrimination laws. The scope of this protection varies from state to state. Most state anti-discrimination laws cover employment. Some also cover housing, health care and other services.

An **Alabama** bill would require dentists and other health care providers to be tested annually for communicable diseases, including AIDS. The bill directs health authorities to act on the test results in any manner they deem necessary to protect the public.

Many states are considering amendments to their public health laws that would require health care providers to report cases of AIDS like other communicable diseases.

Professional Liability: Constituent societies in more than thirty states are members of major tort reform coalitions. **Georgia** and **Idaho** enacted comprehensive reform bills with coalition support this year. Other states, including **Arizona**, **Montana**, **Nebraska**, **South Dakota**, and **Virginia**, have enacted reforms dealing with particular areas of tort insurance reform.

Dental Hygiene: Several more states have changed their dental practice laws this year to conform to the Association's policy on supervision of auxiliaries. A new law in **Georgia** now requires direct supervision of dental hygienists. The **Texas** Board of Dental Examiners voted in May to propose a rule that would require all hygiene functions to be performed under direct supervision. **Nevada** enacted legislation that defines "supervision" to require that the dentists be present in the dental office whenever patient care is provided.

South Carolina hygienists, who won authority to practice under general supervision in public health settings in 1986, are pushing for authority to work under general supervision in all institutional settings. **Wisconsin** hygienists are backing the same general supervision measure that failed in their state last year.

Denturism: Denturists have lost every contest in state legislatures so far this year. **Montana** enacted legislation abolishing the Board of Dentistry and bringing regulation of denturists under the Board of Dentistry. Denturism bills failed in **Illinois**, **Mississippi** and **Washington**. However, **Washington** denturists will attempt to collect the 151,000 signatures needed to place a denturism referendum on the November ballot. A denturism bill has been introduced in **Nevada** and referred to subcommittee for study.

Sales Tax on Professional Services:

The **Florida** Dental Association won an exemption from that state's new comprehensive sales tax on services. The Florida exemption is especially important because other cash-hungry states are looking at the Florida tax as a model for their own legislation. No action was taken on a service bill in **Washington** before the legislature adjourned. Bills to impose the state sales tax on services, broadly defined to include dental services, have been introduced in **Colorado** and **Texas**.

ELECTRONIC LITERATURE SEARCH AND REVIEW

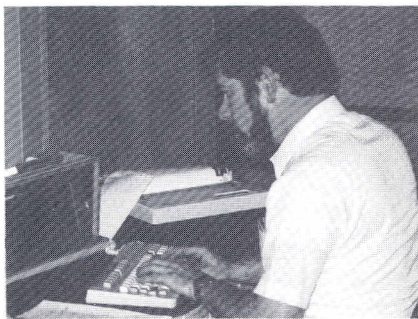
In an effort to speed up the mechanism involved in locating articles in the Dental and Medical literature, a new tool is currently available at a remarkably reasonable cost. If you own a computer (XT compatible with at least one

360K floppy disk and DOS 2.0 or later), a Hayes or compatible modem (preferably 1200/2400 Baud) and a printer, you can enter the age of electronic literature searches for \$29.95.

GRATEFUL MED, a communications and literature search program is available from the National Technical Information Service, U.S. Department of Commerce, Springfield, VA 22161. One then applies to the National Library of Medicine (NLM) for a user code and you're on your way. The NLM charges \$22.00/hr. for prime time M-F 10:00 A.M. - 5:00 P.M.) and \$15.00/hr. non-prime. The NLM operates the MEDLARS system. MEDLARS is the name of the system consisting of MEDLINE (Medical and Dental Journals) and other databases, including toxicology, cancer, population studies and books.

The GRATEFUL MED Program greatly simplifies the procedure. Novices to electronic database usage can access MEDLARS economically and efficiently. The variability in the types of searches you can perform is endless. You can search by author, title, subjects (they have hundreds and hundreds to choose from), journal, language, with or without abstract or any combination of the above.

The subject is invaluable to residency programs as well as individuals who want to keep up with current as well as back literature. The database goes back to 1966 for the Journal of Prosthetic Dentistry. You can specify the period of time you wish to search. The software (GRATEFUL MED) oper-



Vice-President Steven Bergen explains the new literature search and review system now available.

ates the search procedure. Once you enter the parameters of what you want to search, the program calls the member, logs on, completes the search, and sends the results to your disk and disconnects. It couldn't be simpler. After you've downloaded the information, GRATEFUL MED asks you questions as to the relevancy of each citation, recommends additional subject headings, sends information to a printer, if

you wish, and then queries if you want to search to a earlier date. GRATEFUL MED also allows for more sophisticated searches as you gain experience.

For those without computer access, the American College of Prosthodontists, Education Committee, in conjunction with the Computer Committee, is preparing an index to the Journal of Prosthetic Dentistry dating back to 1966. It will be available only in printed form. Copyright rules prevent us from making the database available on disk. The current index can still be ordered through our Central Office.

2ND ANNUAL MID-WINTER SEMINAR

SPONSORED BY
PRIVATE PRACTICE COMMITTEE
MARCH 20-26, 1988

The course content and speakers will be discussed and planned at the Private Practice Seminar in San Diego, California

PLACE: South Seas Plantation
Captiva Island, Florida

- *Seven nights accommodations
- *Roundtrip airport/hotel transfers
- *Baggage handling
- *All taxes and daily service charges
- *Function space available for the group

Prices vary from \$665 per person double occupancy staying in a New Harbour side hotel room or a one bedroom tennis villa Condominium Suite with kitchen and living room to \$853 per person double occupancy staying in a Beach Villa Condominium Suite with kitchen and living room. Bay Side and Marina Villas price in mid \$700 per person double.

On site are three restaurants, Pizza Parlor, and the availability of room service as well as golf, tennis and all water sports.

At present in March, there will be rooms in either a combination of villas or all harbor side hotel rooms for about 100 people. An \$80-\$100 per person deposit is required at time of booking. Final payment and rooming list is due 60 days prior to arrival.

Tuition for meeting depends on program, speakers invited, etc.. All questions, reservations can be made through: Destinations, Inc., 1-800-441-8999

Reservations should be made by November 15, 1987

LIFE MEMBERSHIP AVAILABLE FOR FELLOWS AND ASSOCIATES

In a recent decision by the Executive Council a move to Life Membership, either Life Fellow or Life Associate, is possible for anyone that has held membership for five years and has retired from active practice and/or teaching at any age. In addition to the above requirements, dues will not need to be paid for the year in which application for Life status is made.

A summary of Sections 5 and 6 of Article II, Membership of the Constitution, follows:

Life Fellows/Associates of the College shall be those who have held membership in the College during their active practice and participation in dentistry and who have attained the age of 65, or because of illness, are retiring from active participation in prosthodontics and dentistry in general. Furthermore, Fellows/Associates who have retired from active practice and/or teaching, and who have been active members for at least five years, may apply for Life Membership at any age. Individuals eligible and desiring Life Membership must apply for status through the Central Office Director and have approval from the Fellows and Associates to be placed in this category. Life Fellows/Associates may not vote in College elections and may not hold elective office.

THE AMERICAN FUND FOR DENTAL HEALTH APPROVES GRANT TO STUDY ECONOMIC IMPACT OF ELDERLY ON DENTAL PRACTICE

The American Fund for Dental Health recently awarded a \$21,000 grant to the University of Colorado School of Dentistry for the first year of a two-year project to gauge the economic impact that elderly patients have on a dentist's income.

The project will explore the various factors influencing regular dental vis-

its, the monetary index of services compared with the patient's age, and the payment mechanism. Research results are expected to provide appropriate guidance for future dental treatment of the elderly and increase awareness of the effect that this population group has on marketing strategies in the dental profession.

Directed by Dr. Lawrence H. Meskin, Dean of the School of Dentistry, the project is based on a study conducted by the University of Minnesota, indicating that the elderly, a group that will comprise 20 percent of our total population by the year 2010, seeks dental care more often than any other segment of the population.

This project is funded through the American Fund for Dental Health by a contribution from the Wm. Wrigley, Jr., Co., Foundation. The Fund is the only national, non-governmental, non-profit agency supporting projects aimed at increasing access to and enhancing the quality of dental care, accelerating the development of new technology, and maintaining quality dental education.

AFDH MINORITY SCHOLARSHIPS AWARDED

The American Fund for Dental Health recently awarded 25 Minority Dental Student Scholarships for the 1987-88 academic year. Each student will receive a \$2,000 scholarship that is designed to help high potential minority students defray the expense of dental school.

Initiated in 1968, the Fund's Minority Program is aimed at ensuring that minorities underrepresented in dentistry will have the opportunity to pursue a career in dentistry and serve their communities. Since the program's inception, the AFDH has awarded over 868 scholarships, totaling \$1.9 million.

The American Fund for Dental Health, founded in 1955, has steadily grown to become dentistry's only national, non-governmental, non-profit agency raising and allocating funds to support dental education, research and service programs. The Fund supports programs that increase access to and enhance the quality of dental care, accelerate the development of new technology, and maintain quality dental education.

ACADEMY OF DENTAL MATERIALS ANNUAL MEETING SCIENTIFIC SESSION

February 19, 1988
Hillenbrand Auditorium
American Dental Association
211 E. Chicago Avenue
Chicago, IL 60611 USA

Background: Creep in dental materials is a problem of fundamental interest. The two major direct posterior restoratives, amalgam and composite, exist in the oral cavity at temperatures where significant atomic mobility is possible in response to either mechanical or thermal perturbation. Dental elastomers also can be expected to be subject to creep phenomena in the clinical range of stress and temperature. Interestingly, the porcelain fused to metal system also is subject to the laws of creep since the fabrication of the bond involves heating the metal above its homologous temperature and the porcelain through its glass transition.

Format: A "European" style poster session is planned for the afternoon of the scientific meeting of the Academy of Dental Materials on February 19, 1988. **Posters will be welcome from all areas of dental materials research and, therefore, need not be restricted to the subject of creep.** Posters should be 4' x 6'.

This mode of presentation differs from the conventional presentation in that the poster author presents a five minute description of the salient points of his work followed by a directed discussion of five to ten minutes by the attending audience. Only one presentation is offered at a time.

Adequate time will be made available for the attendees to look at the posters prior to the start of the session.

The format has proved popular and stimulating at European dental research meetings and will represent a first time approach at the Academy of Dental Materials.

Please send **titles and a 2 page abstract** to:
Dr. Evan Greener
Dept. of Biological Materials
Northwestern Univ. Dental School
311 E. Chicago Ave., Rm. 10-100
Chicago, IL 60611 USA
by February 15th, so that the poster may be grouped by subject matter.

February 18—Annual Meeting and Dinner

For further information or questions telephone (312) 908-6887 or the Academy of Dental Materials at (312) 642-9570.

SAUL KAMEN SEMINAR

The Saul Kamen Seminar on the Management and Treatment of the Developmentally Disabled Dental Patient will be held November 8-11, 1987 at the Jewish Institute for Geriatric Care Auditorium, New Hyde Park, New York.

The seminar is sponsored by the Department of Dentistry, Long Island Jewish Medical Center and the Health Science Center of the State University of New York at Stony Brook. Tuition is \$474.00; \$275.00 for residents, dental auxiliaries and students (includes reception, luncheons and coffee breaks).

Reservations are limited.

This four-day seminar, taught by an interdisciplinary faculty, will emphasize the clinical management of patients with a wide range of physical and mental disabilities. It will explore, in depth, the nature of neurological and psychosocial impairment as well as techniques for the dental management of patients with concomitant behavioral disorders. It will include demonstrations in the clinics and operating rooms and a field trip to an outstanding day center for the education and vocational rehabilitation of the mentally retarded. The curriculum is designed to meet the needs of general practitioners, specialists, academicians, institutional dentists and dental hygienists.

For further information, please contact Ann J. Boehme, Associate Director for Continuing Education, Long Island Jewish Medical Center, New Hyde Park, New York 11042, (718) 470-8650.

**QUESTIONS?
IDEAS?
PROBLEMS?
Call the
Central Office
(512) 829-7236**

NOTICE

If you have moved, would like to add your telephone numbers to the roster, or change your codes in the roster, please contact Linda Wallenborn, Central Office Director, as soon as possible. The only way to keep the roster up-to-date is to notify Linda of any changes.

CLASSIFIED

Wadsworth VA Medical Center in Los Angeles, California is accepting applications for the 1988-89 academic year for a fully accredited, 2-year, full-time residency in Prosthodontics. The program is in a hospital setting and provides intense exposure to Fixed and Removable Prosthodontics with exposure to Maxillofacial Prosthodontics. Salaries are provided in accordance with the candidates' training and experience. The candidate must be a citizen of the United States and licensed in one of the fifty states, and must have completed a general practice residency or equivalent experience in private practice. For additional information please contact: Dr. Robert F. Baima, Advanced Prosthodontics, Wadsworth VA Medical Center, Dental Service (W160), Wilshire & Sawtelle Blvds., Los Angeles, CA 90073.

LEGAL GUIDE

Following publication in the last **Newsletter** of an article by Dr. Paul Binon "Avoiding Malpractice Litigation" a number of inquiries were received concerning steps that could be taken to be better prepared for the possibility of a law suit. Dr. Binon advised that the following guide should prove to be helpful.

The soft cover manual "Deposition Guide: A Practical Handbook for Witnesses" by Larry Johnson, J.D., published by Law Forum Press may be obtained from 2318 2nd Avenue, Suite C, Seattle, Washington 98102.

BOOKS AVAILABLE

The "Study Guide for Certification", "Classic Prosthodontic Articles" and the "Index to the Journal of Prosthetic Dentistry" are available. To get your copy(ies) of these valuable books, complete the form below and mail to the Central Office Director, 1777 N.E. Loop 410, Suite 904, San Antonio, Texas 78217.

Name _____
Address _____

- City _____ State _____ Zip _____
1. I would like ___ copy(ies) of the "Classic Prosthodontics Articles" Volume I (Price Members \$20.00; Non-members \$25.00)
 2. I would like ___ copy(ies) of the "Classic Prosthodontics Articles" Volume II (Price Members \$20.00; Non-members \$25.00)
 3. I would like ___ copy(ies) of the "Classic Prosthodontics Articles" Volume III (Price Members \$20.00; Non-members \$25.00)
 4. I would like ___ copy(ies) of the 1985 EDITION of the "Study Guide for Certification". **Includes 1981-1985 Questions and Answers.** (Price Members \$25.00; Non-members \$30.00) (Includes new Board guidelines.)
 5. I would like ___ copy(ies) of the "Index To The Journal of Prosthetic Dentistry". **Bibliography spans 1960 to June 1984.** (Price Members \$35.00; Non-members \$45.00, plus \$3.00 postage for out of the country mailings)

1. I would like ___ copy(ies) of the 1981, 1982 and 1983 Phase I, Part I Questions and Answers for the American Board of Prosthodontics as a Supplement to the Study Guide (Price \$5.00)
2. I would like ___ copy(ies) of the 1984 and 1985 Phase I, Part I Questions and Answers for the American Board of Prosthodontics as a Supplement to the Study Guide (Price \$3.00)
3. I would like ___ copy(ies) of the 1986 Phase I, Part I Questions (no answers) for the American Board of Prosthodontics as a Supplement to the Study Guide (Price \$2.00)
3. I would like ___ copy(ies) of the "Index To The Journal of Prosthetic Dentistry Update". **Includes 1980 to June 1984.** (Price \$10.00)

Amount enclosed \$ _____
Make checks payable to:
The American College of Prosthodontists



Item

ACADEMIC ROBES

To obtain order forms and material samples complete the form below and mail to: Central Office Director, 1777 N.E. Loop 410, Suite 904, San Antonio, Texas 78217.

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	Regular Material #1119	Deluxe Material #87
DOCTOR'S GOWN (with lilac front panels and sleeve bars outlined with gold nylon braid)	\$201.81	\$251.18
SQUARE STIFF MORTARBOARD CAP (with gold nylon tassel)	\$ 17.00	\$ 21.50
REGULAR DOCTORAL HOOD (with dental school colors)	\$ 68.35	\$ 85.17

Please send order form and material samples

NEWSLETTER
 THE AMERICAN COLLEGE
 OF PROSTHODONTISTS
 Dr. Kenneth L. Stewart, Editor
 2907 Deer Ledge
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Jewelry (ea)	14K	10K	1/10 DRGP	(Plate) Number	Jewelry (ea)	14K	10K	1/10 DRGP	(Plate) Number
Pinette	<input type="checkbox"/> \$ 67.50	<input type="checkbox"/> \$ 50.50	<input type="checkbox"/> \$20.50	_____	College Key	<input type="checkbox"/> 69.50	<input type="checkbox"/> 51.50	<input type="checkbox"/> \$26.00	_____
Tie Bar	<input type="checkbox"/> 72.50	<input type="checkbox"/> 55.50	<input type="checkbox"/> 26.50	_____	Lapel Pin	<input type="checkbox"/> 67.50	<input type="checkbox"/> 50.50	<input type="checkbox"/> 20.40	_____
Cuff Links	<input type="checkbox"/> 143.50	<input type="checkbox"/> 110.50	<input type="checkbox"/> 39.00	_____	Ladies Charm	<input type="checkbox"/> 67.50	<input type="checkbox"/> 50.50	<input type="checkbox"/> 20.30	_____
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OTHER ITEMS (ea) — Blazer Pocket Patch—Old \$9.00 Number _____ Wall Plaque (ceramic) \$26.00 Number _____
 Blazer Pocket Patch—New \$16.00 Number _____

In ordering 1/10 DRGP (Plate) Jewelry, Blazer Patches and Wall Plaques, please enclose check to cover costs, which includes mailing, payable to the American College of Prosthodontists.

***Note:** 14K and 10K jewelry are special order items and prices fluctuate with the costs of gold. You will be billed for the items you order on receipt by the Central Office of the manufacturer's invoice. Do not send check with order for 14K or 10K items.