25th Annual Scientific Meeting of the European Association for Osseointegration

PARIS From September 29th to October 1st, 2016

Invited Country
JAPAN
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Co-chairman
Franck Renouard (France)

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Yataro Komiyama (Japan)
Jose Manuel Navarro (Spain)
Friedrich Neukam (Germany)
Isabella Rocchietta (UK)
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Gerry Raghoebar (Netherlands)
Giovanni Salvi (Switzerland)
Henning Schliephake (Germany)
Lars Schropp (Denmark)
Massimo Simion (Italy)
Hendrik Terheyden (Germany)
Daniel Thoma (Switzerland)
Ann Wennerberg (Sweden)
Jorg Wiltfang (Germany)
On behalf of the European Association for Osseointegration and the French Society of Periodontology and Oral Implantology, we are delighted to welcome you to the EAO’s 25th Annual Scientific Congress in Paris.

The Scientific Committee and the EAO Board have prepared an exciting programme focusing on many aspects of treatment planning and decision-making. As well as featuring world-renowned speakers, the congress will include numerous interactive elements involving the audience. We are also very pleased and honoured to welcome Japan as a guest country during the congress.

The EAO Annual Congress provides a unique opportunity for researchers and clinicians to present their scientific studies, both as posters and during the oral presentation sessions. This year, we are pleased to announce the launch of a new session called “7 minutes to convince”: an original concept to present new research which could change the world in the field of implant dentistry.

To get the most out of the congress, we encourage you to download the official app. This provides the most up-to-date information on conference events, along with many useful features to enable you to fully benefit from all aspects of the EAO Annual Congress.

All that remains is for us to welcome you to Paris. We look forward to seeing you during the meeting and social events.

David Nisand
Chairman of the Scientific Committee

Franck Renouard
Co-chairman of the Scientific Committee
# CONGRESS OVERVIEW

## Thursday 29th September

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<td>13.00</td>
<td>ARENA 1 Decision making on the basis of the level of disease: conservation versus extraction</td>
<td>ARENA 2 Treatment planning session: a clinical case with a “complex” problem or involving extensive rehabilitation</td>
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<td>14.00</td>
<td>SESSION 1 Soft and hard tissue grafting: prevention and management of complications</td>
<td>SESSION 2 A digital revolution</td>
<td>SESSION 3 40,000 implants down the road: what did we learn?</td>
<td>SESSION 4 Contest by the Junior Committee: “7 minutes to convince”</td>
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<td>15.00</td>
<td>SESSION 5 Festival of complications</td>
<td>SESSION 6 Bone biology: where do we stand?</td>
<td>ORAL COMMUNICATION Clinical research: surgically related</td>
<td>ORAL COMMUNICATION Clinical research: prosthetically related</td>
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<td>16.00</td>
<td>SESSION 8 How to avoid the carpenter’s approach to implants</td>
<td>SESSION 9 Emerging technologies: head to head</td>
<td>INVITED COUNTRY SESSION: JAPAN Optimal long-term results for osseointegrated implants</td>
<td>ORAL COMMUNICATION Clinical research: peri-implant biology</td>
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## Closing Session

**Faculty and EAO Members’ Dinner**

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 mga
September

ALL SESSIONS, AS WELL AS THE EXHIBITION AREA, POSTER AREA AND COFFEE BREAKS, ARE ON LEVEL 2. THE HANDS-ON SESSIONS ARE LOCATED ON LEVEL 4.

Saturday 1st October

JAPANESE AND FRENCH TRANSLATION
Simultaneous translation from English to Japanese and French will be available during some of the major scientific sessions.

INDUSTRY SYMPOSIA
Learn more about key subjects in these industry sponsored symposia featuring research and innovation.

HANDS-ON SESSIONS
The “hands-on” sessions promote new techniques and offer high-level practical training under the guidance of renowned experts. These courses are organised by industry partners.

ARENA
These plenary sessions will include a series of interactive debates exploring key topics in implantology.

SESSION
Hear presentations exploring topics in implantology.

ORAL COMMUNICATION
Hear about exciting new research findings selected from among the conference abstracts as presenters compete for prizes.
ABOUT THE EAO

HISTORY

The European Association for Osseointegration (EAO) is a non-profit organisation which was founded in 1991. It was formed as an international, interdisciplinary and independent science-based forum for all professionals interested in the art and science of osseointegration. As one of the leading associations within the field in implant dentistry in the world, the EAO aims to improve the quality of patient care by bridging the gap between science and clinical practice.

MISSION

- promote and facilitate clinical applications of osseointegration for the benefit of patients all over the world
- promote the advancement of treatment methods in reconstructive surgery and prosthetic rehabilitation based on the principles of osseointegration and related disciplines
- promote and initiate research into improved clinical procedures for rehabilitation as a consequence of osseointegration
- promote international exchange of knowledge and understanding of the techniques and research in the field of osseointegration and related disciplines
- promote the publication of research findings and other materials as part of continuing education for the benefit of members and interested organisations

MASTER CLINICIAN COURSES

The Master Clinician Course series was launched in 2015, and since then participants have been hosted in Paris and Zürich by a number of internationally renowned master clinicians (Professor Khoury; Professor Hämmerle and his team; and Dr Valentini and Professor Chiapasco).

Two courses are held every year: one in March focusing on surgery, and the other in December dealing with prosthetics. Full details are available at: www.eao.org/master-clinician-courses.

NEXT COURSES

› Geneva on “Implant Prosthodontics” (December 11–12, 2016)
› Munich on “Soft Tissue management” (March 17–18, 2017)

STUDENTS AND YOUNG PROFESSIONALS

The EAO is glad to offer students registered in full-time education and young professionals greatly discounted membership rates.

Additionally, students and young members who choose to join the EAO can register for the annual congress at a preferential rate, and will be given a chance to extend their professional network and meet colleagues from all over the world to share their experiences and ideas.
EDUCATION PROGRAMME

The EAO has a long-standing commitment to dental education. In 2010, the association launched its Certificate in Implant-based Therapy. This was established to recognise the skills and expertise of dentists practising in this field. It is the first and only Europe-wide standardised assessment of knowledge in implant-based therapy.

The EAO’s Postgraduate Diploma in Implant Dentistry complements the EAO Certification Programme and provides an additional service to EAO members and the wider dental community.

Launched in June 2016, the programme is made up of six modules to be completed over a three-year period. Each of the modules includes a three-day live learning course at one of Europe’s most prestigious universities (Malmö, Groningen, Düsseldorf, Zürich, Madrid, Lisbon).

For more information please visit: [www.eao.org/education-programme](http://www.eao.org/education-programme)

MAKE US BETTER: BECOME ONE OF US

Regular membership: 225€ (+50€ joining fee in the first year)
Student membership: 50€
Young professional rate (available from 2017): 140€
(VAT included in all rates from August 2016)
Invited country: Japan

Although the EAO was originally created as a forum for European professionals, the proportion of members coming from non-European countries has greatly increased over the past few years. We are delighted to now have so many members in Asia, the Middle East, Eastern Europe and South/Central America. As a mark of recognition and appreciation, the association has decided to honour one of these countries during its annual congress. The exchange of knowledge and search for innovation is a true part of our mission to bridge the gap between science and clinical practice.

This year, the Board of Directors has chosen to welcome Japan as a guest country during the annual congress. With the highest number of members in Asia and a very active dental community, Japan appeared the natural choice for a guest country on this occasion.

The Congress Committee has introduced a guest country parallel session. This provides an opportunity for clinicians from the guest country to participate in a European event and demonstrate their professional achievements and research to an international audience.

The Japanese association will also be present to showcase their activities – don’t miss the Japanese buffet!

Local collaboration: Société Française de Parodontologie et d’Implantologie Orale (SFPIO)

The EAO is proud to work in partnership with local associations or scientific societies on the occasion of its annual congress. It is a great honour for the association to collaborate with the SFPIO for the 25th Annual Meeting in Paris.

The Société Française de Parodontologie et d’Implantologie Orale is an internationally renowned scientific society which works to promote periodontology and implantology and provides training in these fields. With over 1,100 members, it is one of the major French societies within the field of dentistry.
Thursday 29th September
AFTERNOON
13:00 > 14:45

**Grand Amphithéâtre**

**ARENA 1**
Decision making on the basis of the level of disease: conservation versus extraction

**CHAIR**
Christoph Hämmerle
Chairman, Clinic for Fixed and Removable Prosthodontics and Dental Material Science; Director of Student Affairs for the Center for Dental Medicine, University of Zürich

**CO-CHAIR**
Giulio Rasperini
Professor in Periodontology, University of Milan

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**001** Periodontal therapy or implant therapy? How do we judge when to select one or the other?

*Giano Ricci (Italy)*

When should we save a natural tooth or extract it and place an implant? Several factors need to be taken into account to reach the right decision. Endodontic conditions, proper reconstruction of a devitalised tooth, and the possibility of prosthetic treatment are all important factors to be considered. From a strictly periodontal point of view, some fundamental criteria need to be considered to reach the right decision. These concepts will be discussed through analysis of therapy outcomes over a period of at least 10 years.

**002** Decision making process between conservation and extraction for periodontally compromised teeth with a questionable prognosis

*Giovanni Salvi (Switzerland)*

Despite advanced loss of periodontal tissue support and a questionable prognosis, single- and multirooted teeth can be successfully treated and used as abutments for tooth-supported restorations. The outcomes of non-surgical periodontal therapy with or without the adjunctive use of systemic antibiotics are well documented. In addition, if indicated, regenerative and resective surgical procedures may be performed to improve periodontal tissue support and eliminate plaque-retentive areas. Moreover, outcomes of several studies indicated that in periodontally compromised patients the survival and success rates of dental implants and their restorations were not superior compared with those of natural teeth and their restorations. Hence, the long-term prognosis of dental implants in periodontitis susceptible patients is not more favourable compared with that of teeth following successful periodontal treatment. This lecture will summarise current scientific evidence indicating the limits for conservation and the indications for extraction of periodontally compromised teeth.
Room Maillot

ORAL COMMUNICATION
Basic research

CHAIR
Isabella Rocchietta
Specialist periodontist in London, UK. Affiliated with Department of Biomaterials, Institute for Clinical Sciences, the Sahlgrenska Academy, University of Gothenburg, Sweden

<table>
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<tr>
<th>C100</th>
<th>Evaluation of a new long lasting zirconia-based composite for oral implant fabrication: an experiment in the rat</th>
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<td></td>
<td>Ralf Kohal, Erik Adolfsson, Maria Bächle, Frank Butz, Nicolas Courtois, Tobias Förderer, Laura Montanaro, Kirstin Vach</td>
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<th>C101</th>
<th>Exploring the effects of magnesium on the early osseointegration of implants in osteoporotic sites: a histological and gene expression investigation</th>
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<td>Silvia Galli, Martin Andersson, Wenxiao He, Ryo Jimbo, Johan Karlsson, Michele Stocchero, Ann Wennerberg</td>
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<th>C102</th>
<th>Immediate elevation of periosteum versus periosteal distraction osteogenesis: an experimental study in the rat calvarias</th>
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<td>Nikola Saulacic, Maiko Haga-Tsujimura, Tateyuki lizuka, Ken Nakahara, Benoit Schaller, Kosaku Sawada</td>
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<th>Influence of extraction site and periapical lesion in MRONJ development after tooth extraction: a study in rats</th>
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<th>Modified titanium surface features attenuate osteoclast mediated bone resorption</th>
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<td>Michael Berger, Ethan Lotz</td>
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<th>A novel methodological platform to study cell-cell and cell-materials interactions on real 3D oral implants</th>
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<td>Omar Omar, Karin Ekstrom, Katarina Junevik, Maria Lennerås, Furqan Shah, Peter Thomsen, Forugh Vazirisani</td>
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<th>Effect of novel lactams against pathogenic single-species oral biofilm</th>
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<td>Cesar Augusto Magalhães Benfatti, Ricardo de Souza Magini, Bernardo Born Passoni, Esteban Rodrigues, Vera Slomka, Wim Teughels</td>
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Room 252

ORAL COMMUNICATION
Clinical research: peri-implant biology

CHAIR
Turker Ornekol
Founding member and the first president of the Turkish Association of Osseointegration. Current board member of the European Association for Osseointegration.

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<th>C114</th>
<th>Three-year analysis of zirconia implants used for single tooth replacement and three-unit fixed dental prostheses. A prospective clinical trial</th>
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<td>Marc Balmer, Ronald Jung, Ralf Kohal, Benedikt Christopher Spies, Kirstin Vach</td>
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<th>Hyaluronan injections are ineffective to reconstruct missing papilla volume at single implants in the anterior maxilla. An RCT with 6m follow-up</th>
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<td>Andreas Stavropoulos, Kristina Berti, Corinna Bruckmann, Klaus Gottfredsen, Simon Storgaard Jensen</td>
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<th>Randomised controlled clinical trial comparing two dental implants with different neck configurations</th>
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<td>Karen Anavi-Lev, Zvi Artzi, Liat Chaushu, Avital Kozlovsky, Frank Schwarz, Haim Tal</td>
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<th>Novel bioreabsorbable bioactive and antimicrobial membrane for guided bone regeneration – an in vitro study</th>
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<td>Dolly Gupta, Mahantesh Bembalgi, Santosh Nelogi</td>
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<th>Early peri-implant tissue healing on two-piece implants with platform-switching: an experimental study in the beagle dog model</th>
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<th>Outcomes of zirconia implants in prospective clinical trials: a systematic review and meta-analysis</th>
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Thursday 29th September

AFTERNOON

15.15 › 16.45

Grand Amphithéâtre

SESSION 1

Soft and hard tissue grafting: prevention and management of complications

CHAIR
Pascal Valentini

CO-CHAIR
Carlo Maiorana
Chair of Oral Surgery and Director of the Postgraduate Programme in Oral Surgery, University of Milan, and Head of the Department of Implant Dentistry at Policlinico Hospital

C003
Prevention and management of soft tissue defects around implants
Jacques Malet (France)
Implant surgery should follow a global approach integrating both bone and soft tissue management in order to provide the best results, to prevent complications and to ensure long-term stability. Soft tissue management at every stage of treatment provides optimal aesthetics, promotes healing and minimises morbidity. Soft tissue complications can be the consequence of bone remodelling or an adverse effect of bone augmentation procedures. Deficient soft tissue management may lead to visible scarring, lack of volume, shadowing or recession, all impairing the aesthetic outcome, and potentially the implant prognosis. Soft tissue augmentation procedures may be performed in order to treat these defects, but a better-defined preventive approach gives more predictable outcomes. If the biotype is thin, we must perform a corrective tissue graft (CTG), but the timing depends on which procedure we elect. We must balance reducing morbidity and limiting risk to decrease the number of surgeries and also to minimise healing complications. Immediate implant is the most challenging situation. Case selection, bone prevention (biomaterials) and soft tissue prevention (CTG) are all imperative to anticipate volume changes and to assure long-term stability. Early implant placement is the optimal situation to perform guided bone regeneration with the lowest risk and without vestibule reduction. If the buccal volume is not sufficient, additional CTG should be performed. While adequate bone is a pre-requisite for healthy osseointegration, sufficient soft tissue is crucial for long-term stability. Familiarity with the handling, grafting and healing of soft tissue is essential for clinicians to provide successful treatment. Connective tissue grafts are still the gold standard despite being relatively invasive. We should focus on alternative harvesting sites and, in the future, on soft tissue substitutes, to limit morbidity for better patient quality of life.

C004
GBR in vertical and horizontal defects: how to reduce complications
Jaime Lozada (USA)
In GBR procedures the main complication reported is membrane exposure, which may significantly jeopardise the final augmentation outcome. Several authors have reported that sites with membrane exposure had six-fold less bone gain when compared to the sites without exposure. Likewise, a wide range of complication rates have been reported in the literature for vertical and horizontal augmentations; however, local cofounding factors such as location, morphology or biomaterials that influence the outcome remain to be determined. In this regard, soft tissue management has become essential, since it is the means to achieve primary wound closure and fulfil the main principle for successful GBR. With our experience we have been able to reduce the number of complications regarding GBR for vertical and horizontal bone augmentation, which is in disagreement with other reports. Reports indicate that wound dehiscence and membrane exposure typically occurs in the proximity of the dental structures. During this presentation, guidelines such as adequate and smooth soft tissue management in combination with suitable biomaterial selection (i.e., type of membrane and bone graft) will demonstrate the high long-term survival rate and minimal peri-implant bone changes that might be attributed to the lack of wound dehiscence. It is important to highlight that these procedures do require a significant clinical expertise in order to avoid surgical complications and to obtain successful results.

C005
How to reduce complications using autogenous bone blocks
Matteo Chiapasco (Italy)
Autogenous bone blocks still represent one of the most frequently used surgical procedures to restore bone volumes in patients affected by partial or total edentulism associated with bone defects incompatible with a proper implant placement. Despite the huge amount of literature which shows excellent results, as with any other surgical procedure bone grafting is subject to potential complications, including exposure and/or infection of the graft(s); resorption over time; and non-integration of the grafted bone which may jeopardise the final outcome of the rehabilitation of these patients. The aim of this lecture is to present recent data on the incidence of these complications and to show the “tricks and tricks” that may be helpful in reducing these adverse events.

Amphithéâtre Bleu

SESSION 2

A digital revolution

CHAIR
Jose Manuel Navarro
Chair of EAQ Junior Committee, and practitioner in periodontics, prosthodontics and implant dentistry in Las Palmas, Madrid and London.

CO-CHAIR
Paul Stone
Consultant and Honorary Senior Clinical Lecturer in Oral Surgery, Edinburgh Dental Institute, Director, Blackhills Specialist Dental Clinic, Perthshire, Scotland.

C006
Virtual smile design to drive the restorative plan
Marcelo Calamita (Brazil)
From diagnosis through to manufacturing, dental treatment is becoming digital. Thus it is essential to understand how technology can enhance our diagnostic capabilities and treatment plan possibilities to achieve optimal results for every single patient. Based on the scientific basis and clinical relevance of digital dentistry, the integration of some parameters of the restorative design will be discussed with the critical aspects of function, structure, and biology, with the purpose of elucidating the decision making process. The presentation will also describe how to use this information to help patients understand their potential end results, with the implications, limitations and risks, for an ethical case acceptance. Additionally, it will review some key elements of tissue conditioning, tooth preparation, impression, and functional management in order to surpass the patient’s expectations, provide efficient function and long-term stability.

C007
3D engineering in contemporary implant dentistry
Wael Att (Germany)
The progressive shift towards implementing digitally-driven 3D engineering tools in dentistry is obvious. Compared to conventional methods, the ultimate goal of digital technologies is to improve the quality and capabilities in examination, diagnosis, and treatment of the dental patient. It is still questionable, however, whether such digital tools facilitate improved accuracy in data acquisition and assessment, superior efficacy in treatment planning, and more controlled and faster manufacturing process. This presentation will provide an overview of 3D engineering in contemporary implant dentistry, and will discuss the different possibilities and advantages when using a conventional or digital approach.

C008
Optical impression and implant reconstruction: where are we?
Nelson Silva (Brazil)
This presentation will address the importance of the development of optimised biomaterials for dentistry and how it influences the treatment decision for implant cases focusing on digital dental technology. The development of these materials has led us to explore other treatment workflow modalities that associate milling and printing concepts using ceramics, polymers, wax and/or metals.
Friday 30th September
MORNING

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| C128 | Soft tissue grafting favours the outcome of single immediate implants in the aesthetic zone: a randomised clinical trial |
| Elise G. Zuiderveld, Laurens Den Hartog, Henny Meijer, Gerry M. Raghoebar, Arjan Vissink |
| C129 | Immediate loading of post-extractive versus delayed placement of single implants in the anterior maxilla: a 1-year randomised controlled trial |
| Lorenzo Tuci, Carlo Barausse, Marco Esposito, Pietro Felice |
| C130 | The gene expression in peri-implant crevicular fluid cells during early osseointegration is differently regulated in smokers and non-smokers |
| Shariel Sayardoust, Omar Omar, Peter Thomsen |
| C131 | Immediate versus delayed loading of single mandibular molars. Five-year results from a randomised controlled trial |
| Marco Tallarico, Alessandro Deledda, Francesco Maria Lolli, Silvio Mario Meloni, Milena Pisano |
| C132 | Retrospective study on immediate implant placement and provisionalisation in the aesthetic zone |
| Haikun Hu, Xin Dong, Shifeng Liu, Lizhao Teng, Dayi Wu, Xiaodong Yang, Huihui Zhang |
| C133 | Immediate single implant placement and provisionalisation in the aesthetic zone: intact versus compromised sockets. A 1-year prospective clinical trial |
| Ordener Souza, Mauricio Barreto, Danielle Fernandes, Enzo Querino, Leonardo Neves, Roberto Sydney |
| C134 | Eight to ten-year clinical outcome of immediately restored single implants in extraction sockets and healed ridges |
| Stefanie Raes, Jan Cosyn, Hugo De Bruyn, Filiep Raes |

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<td>Clinical research: prosthetically related</td>
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<td>Taketo Koga</td>
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<td>PhD DDS, Private practice in implant dentistry in Makuhari, Japan</td>
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| C141 | Platform switching versus regular platform implants. Three-year results from an RCT |
| Silvio Mario Meloni, Sascha Jovanovic, Milena Pisano, Marco Tallarico |
| C142 | Aesthetic outcome of implant-supported crowns with and without peri-implant conditioning using provisional fixed prosthesis – a randomised controlled clinical trial |
| David Furze, Sonia Alam, Ashley Byrne, Julia Wittneben |
| C143 | Dental implants with internal versus external connections: 5-year post-loading results from a pragmatic multicentre randomised controlled trial |
| Hassan Maghaireh, Marco Esposito |
| C144 | Plasma of argon cleaning treatment on implant abutments in periodontally healthy patients: five years post-loading results of an RCT |
| Luigi Canullo, Berta Garcia, David Penarrocha, Miguel Penarrocha, Marco Tallarico |
| C145 | Customised zirconium abutments in aesthetic areas: 10-years prospective study |
| Leonardo Amorfini, Eugenio Romeo, Stefano Storelli |
| C146 | Ten year results from a randomised controlled multicentre study with immediately and early loaded SLActive implants in posterior jaws |
| Pedro Nicolau, Korbinian Benz, Fernando Guerra, Jochen Jackowski, Tim Krafft, Rita Reis |
| C147 | Immediately loaded tilted implants combined with angled screw channel zirconia abutments: a prospective case series study |
| Ertta Xhanari, Luigi Canullo, Silvio Mario Meloni, Gianpao Sannino, Marco Tallarico |

| C148 | |
The EAO’s Certificate in Implant-based Therapy has been developed to raise standards of oral implant-based therapy across Europe. Obtaining the certificate is a prestigious achievement that demonstrates the holder is competent to perform basic and advanced implant treatments. Certification is open to any dentist or maxillofacial surgeon worldwide – not just members of the EAO.

Completing the certification programme is an achievable goal for anyone who is suitably qualified. The EAO’s Certificate in Implant-based Therapy is the only Europe-wide standardised assessment of skills and expertise within the field of implant-based therapy. It supports the EAO’s core aim of improving standards of education, clinical practice and patient care in implant-based therapy. Certification provides a way of recognising the skills and expertise of dentists practising in this field.

Certification from the EAO demonstrates to your patients and colleagues that you are committed to providing high-quality implant treatments.

Delegates are invited to attend this workshop to learn more about the EAO’s certification programme and how to prepare an application. The presenters will give examples of the types of questions applicants will be asked, and will describe how they should prepare and present their cases.
SESSION 3
40,000 implants down the road: what did we learn?

CHAIR

Jean-François Tulasne
Maxillofacial surgeon
private pracrice (Paris). He
introduced the Brånemark
implant system to France
in 1984. Past President of
the EAO 1996–1998

C009
Some thoughts on ailing/failing implants
Bertil Friberg (Sweden)
The occurrence of ailing/failing implants may be explained by various causes: products and components; treat-
ment techniques; the performance of clinicians; patient factors. The aim of this presentation is to explore different
parameters that may have an impact on the implant treatment outcome in the short- and long-term, such as:
implant micro and macro design; implant site preparation techniques; clinician’s competence and performance;
local and systemic patient factors. Various cases will be used to illustrate the presentation.

C010
40,000 implants down the road – what did we learn?
Torsten Jemt (Sweden)
It is today more than 50 years since the first patient was treated with dental implants based on the principles of
osseointegration. The ultimate objective of implant treatment is to establish osseointegration and thereby provide
a stable support for the prosthetic restoration. Once osseointegration has taken place, the ongoing aim is to main-
tain a biological equilibrium between the implant/prosthesis and the surrounding host tissue over time. Failure of
osseointegration is today a relatively rare occurrence in routine treatment and only occurs in a small number of
patients. Low incidence of failures makes it challenging to analyse the different factors in this process in more
detail. Therefore, larger numbers of patients have to be followed up over longer period of time, and including
patients treated at different clinics may further improve the analysis of implant failures. As an alternative to implant
failure, parameters could also be used that are assumed to relate to future implant failures, where bone loss at the
implants has been a commonly reported factor. This approach allows for analysing early and late implant failures
and other events associated with future failures in relation to the patient, clinical treatment and hardware. This
presentation will focus on implant failures in relation to these different factors.

Amphithéâtre Bleu

SESSION 4
Contest by the Junior Committee: “7 minutes to convince”

CHAIR

Stefan Fickl
Priv.-Doz. Dr. med.
dent. Associate
Professor, Department of
Periodontology, University
of Würzburg

CO-CHAIR

Helena Francisco
Private practice at the
Implantology Institute
in Lisbon, Portugal, and
assistant lecturer at the
implant department of
Lisbon University College
of Dentistry

An original concept to present new research which could change the world in the field of
implant dentistry
This session will feature 7 ‘out of the box and original’ presentations of 7 minutes each. At the end of the session
the audience and the Junior Committee will vote for the best presentation.

Digital workflow in implantology Part 1
Karim Dada (France)
Leon Pariente (France)

Digital workflow in implantology Part 2
Karim Dada (France)
Leon Pariente (France)

The conometric concept to make fixed implant supported restorations
Marco Degidi (Italy)

Customised solution for 3D defects
Giuseppe Lizio (Italy)

Effective implant surface decontamination during peri-implantitis treatment: what is the
secret?
Brenda Mertens (France)

Point of view perspective of a dental implant patient
Mustafa Ozcan (Turkey)

Voids and areas of reduced mineralisation in healed sinus grafts: a prospective study using
immediate and 6 months’ cone beam computerised tomography
Amandine Para (France)
Friday 30th September

MORNING

11.00 › 12.30

Grand Amphithéâtre

ARENA 2

Treatment planning session: a clinical case with a “complex” problem or involving extensive rehabilitation

CHAIR

Michael Cohen
DDS, MSD, FACS, is a noted dental educator and a globally renowned periodontist and implant dentist

CO-CHAIR

Andrea Ricci
Scientific Director of IDEAT (Institute of Dental Education and Therapy)

COORDINATOR

Stefano Gracis
Past President of the Italian Academy of Prosthetic Dentistry (AIOP) and current President of the European Academy of Esthetic Dentistry (EAED)

In this session a complex clinical case will be discussed by two teams of 3 clinicians each of different specialties guided by a moderator. The two teams receive the initial patient presentation in advance (clinical chart, radiographs, extraoral and intraoral photographs and any other pertinent information) and prepare a formal presentation in which they explain their treatment proposal and its rationale. Afterwards the moderator discusses the two proposals and the presenter reveals the therapy that was actually performed.

Team America

uação

Drew Ferris (USA)

Team Europe

Rino Burkhardt (Switzerland)

Jörg Strub (Germany)

Marc Schätzle (Switzerland)

All EAO members are invited to attend the Ordinary General Assembly during the Paris meeting. The Board of Directors will present an overview of current projects and present the accounts. Elections will also be held for two new Board members. The full agenda is available at http://www.eao.org/general-assembly
AFTERNOON
Friday 30th September
13.30 › 15.00

Grand Amphithéâtre
SESSION 5
Festival of complications

CHAIR
Irena Sailer
Head of the Division of Fixed Prosthodontics and Biomaterials at the University of Geneva

CO-CHAIR
Bjarni Pjetursson
Professor and Dean of the Dental School, University of Iceland. Specialist training in Periodontology and Prosthetic Dentistry

SESSION 6
Bone biology: where do we stand?

CHAIR
Friedrich Neukam
Chairman and Head at the Department of Oral and Cranio-Maxillofacial Surgery at Erlangen-Nuremberg University Dental School, Germany

CO-CHAIR
Georg Watzek
Founder and Partner of the Academy for Oral Implantology in the Vienna Competence Center

C011
Treatment planning away from biological and technical complications

Ralf Kohal (Germany)

C012
Removable implant reconstructions: factors influencing incidence and type of complications

Hugo De Bruyn (Belgium)

C013
How to solve or better how to avoid technical complications

Oliver Brix (Germany)

Complications of technical or biological origin seem to be unavoidable at both fixed and removable implant restorations. Numerous systematic reviews have demonstrated excellent survival rates of almost all types of implant prostheses, yet, translated into daily clinical practice, this has only meant that the prostheses remained in clinical service for a defined period of time. The reviews have also shown that all implant prostheses suffered from different kinds of biological or technical complications over time. In daily clinical practice, these complications may influence the patient and clinician satisfaction much more than the survival rates.

Complications often lead to the need for unpleasant discussions with the patient and possibly the dental technician, and to costly repair or retreatment. In some clinical patient situations, the complications might have been foreseen, and hence avoided — for instance by critical analysis of the risk factors and adaptation of clinical and/or technical protocols. Frequent considerations during treatment planning encompass questions like “What is the most predictable prosthetic approach in this specific patient?” or “Which concept is the best for this patient?”.

The main goal of this session is to discuss factors influencing the incidence of complications at fixed and removable implant prostheses with three world-renowned experts in the field of implant prosthodontics: Professor Hugo De Bruyn, an expert in removable implant prosthodontics, Professor Ralf Kohal, an expert in fixed implant restorations and all-ceramics, and Mr. Oliver Brix, a dental technician highly experienced with implant prosthodontics, ceramics and aesthetics.

During this session, provocative questions like “How can implant placement be related to technical complications and expense in removable prostheses – can we blame everything on the surgeons?”; “What is the influence of the restorative material on the biological outcomes?” and “How often do technicians experience a three-dimensionally perfectly placed implant – how do they solve less ideal situations?” will be discussed interactively, supported by presentations by the three speakers. It will conclude with clinically relevant concepts to avoid the different complications in the future, demonstrating numerous tips and tricks from science and practice.

C014
Cell biology and immune response related to implant dentistry

Reinhard Gruber (Austria)

Our current biological understanding of osseointegration is based to a great extent on histology. Based on this, various hypotheses on the roles of cells and molecules during osseointegration have been raised. Testing these hypotheses can involve mouse models where cells and molecules are controlled by gene deletion or overexpression. To take advantage of these models, we have to make assumptions that osseointegration follows the basic principles of bone regeneration. Mouse models are available representing the major phases of bone regeneration: thrombosis and haemostasis, inflammation, formation of granulation tissue, woven and later lamellar bone formation, and finally bone modelling and remodelling. Mouse models also provide insights into the impact of chronic inflammation on bone resorption and impaired regeneration. Mouse models also provide insights into the impact of chronic inflammation on bone resorption and impaired regeneration.

This presentation aims to discuss the current knowledge gained from genetically modified mouse models in the context of clinical implant dentistry.

C015
Bone to implant interface: where do we stand and where do we go?

Peter Thomsen (Sweden)

The biological mechanisms of osseointegration as well as the failure of osseointegration are likely to have multifactorial causes but are as yet not completely understood. Today, a predictable outcome is observed both for oral and orthopaedic implants. However, these implants may fail due to infection, dysregulated inflammation and bone resorption. In order to address such challenges, it is critical to understand the underlying biological mechanisms of host-material interaction. Our hypothesis is that implant surface properties are rapidly conveyed to bone cells via first-line, implant-adherent cells and cell-to-cell cross-talk. Particular interest is given to the communication between cells involved in inflammation and regeneration respectively. Material surface modifications may promote a faster and stronger apatite formation, mineralised bone-to-implant contact and interfacial strength. The biological mechanisms include a rapid activation of both anabolic/osteogenic and catabolic/osseoclastic activities, resulting in faster bone formation and remodelling. The processes of osseointegration and bone remodelling are material surface-dependent, and are triggered by the expression of RANK, RANKL and OPG in the implant-adherent cells. Inflammatory cells and both undifferentiated and differentiated mesenchymal stem cells communicate with each other via cytokines, chemokines and by shuttling cell-derived extracellular vesicles (exosomes), containing lipids, proteins and nucleic acids such as miRNAs and microRNAs. The osteogenic differentiation is at least partly controlled by exosomal microRNAs. This underscores the need for understanding the mechanisms which govern the transition from inflammation to tissue regeneration and, eventually, the transition from maintained osseointegration to loss of osseointegration.

C016
What is osseointegration in 2016 and why are we losing bone around dental implants?

Tomas Albrektsson (Sweden)

Osseointegration is not a foreign body reaction to the titanium implant with its leaked out ions. The body builds bone around the foreign material as a protection mechanism. Problems with bone resorption are not primarily dependent on a periodontitis like disease, but relate to foreign body rejection mechanisms. The great majority of placed implants fare very well, provided controlled implants are placed by properly trained individuals, with only 1–2% of modern implant designs being threatened by ‘peri-implantitis’ at 10 years or more of follow up.
**Friday 30th September**

**AFTERNOON**

şa 13.30 › 15.00

**Room Maillot**

**SESSION 7**

**Tips and tricks for successful implant practice**

**CHAIR**

Björn Klinge
Dean and Professor in Periodontology, Faculty of Odontology, Malmö University, Sweden, Professor in Periodontology, Department of Dental Medicine, Karolinska Institutet, Stockholm, Sweden and President of the EAO 2015–2016.

**CO-CHAIR**

Ailsa Nicol
Consultant in Restorative Dentistry

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**C017**

*Where to be trained in oral implantology (EAO Education Programme)*

Helena Francisco (Portugal)

The European Association for Osseointegration has a long-standing commitment to dental education. The association's aim is 'to improve the quality of patient care by bridging the gap between science and clinical practice'. The EAO Education Programme has been carefully designed to offer unique benefits that are not currently provided by other programmes. It is structured around six modules: two each at levels S (straightforward), A (advanced) and C (complex). Each of the modules includes three days on-site training, combining hands-on elements, theoretical and practical lectures and live surgery. The breadth of the training modules is much wider than what is offered by existing courses, and enables candidates to gain the range of knowledge required to practise at the highest level. The programme covers domains including surgery, prosthodontics, periodontics, treatment planning and maintenance in every module. In addition, students are required to join online sessions, and access online education modules. The EAO Education Programme provides an additional service to EAO members and the wider dental community.

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**C018**

*How photos can improve your private practice*

Antonello Appiani (Italy)

In recent years, photography has become an integral part of our daily profession. A correct photographic protocol allows us to optimise our results, improving our analysis and critical ability. The main objective has to be high quality, simple equipment and ease of execution. In this lecture the correct parameters that will enable dental photography to be within everybody's capability will be outlined without sacrificing quality.

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**C019**

*Private practice management and development*

Sarah Chick-Richardson (United Kingdom)

Implant dentistry and the science behind it is continually evolving and opens up new and fascinating possibilities to provide patients with the care and treatment that they need. Each person who comes to see us for treatment is an individual case with its own challenges and successes. It's my job to make sure that the science is kept for the scientists and that the patients needing care are given the best treatment as a result of the science and excellent management. Of course, evidence-based science is the driving force behind excellent patient care, but this in its entirety is not what makes a practice a success. This comes from hard work, teamwork and motivation. When we question patients about what they want and need, it comes down to very few things. These need to be kept uncomplicated and be delivered in an accurate and confident way. This presentation will highlight the key steps and solutions to a successful practice, which will enable you to gain high treatment uptake whilst delivering excellent care.

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**Room 252**

**ORAL COMMUNICATION**

**Basic research**

**CHAIR**

Ann Wennerberg
Professor at the Department of Prosthodontics, Faculty of Odontology, University of Malmö, Sweden

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**C107**

*Biological effects of different compressive forces exerted on particulate bone grafts during socket preservation. Animal study*

Rafael Delgado-Ruiz, Jose Luis Calvo Guirado, Gerardo Gomez-Moreno, Georgios Romanos

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**C108**

*Bone healing evaluation of SDF-1α chemically cross-linked collagen membrane in critical size defect model of rat skulls*

Hai-peng Sun, Deng Feilong, Huang Shengxing, Yiming Li, Shuangquan Wan, Jiming Wang

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**C109**

*Effectiveness evaluation of the concentrated growth factor (cgf) in alveolar ridge preservation after tooth extraction*

Yong Wen, Jia Tingting, Qingjie Lin, Xu Xin, Cong Zhou

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**C110**

*Stimulation of bone regeneration by an innovative bone filler paste containing antioxidative molecules*

Marco Morra, Clara Cassinelli, Giorgio Iviglia, Elisa Torre

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**C111**

*Effect of antibody mediated osseous regeneration on guided bone augmentation using novel tenting screws*

Seiko Min, Homa Zadeh

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**C112**

*Alveolar ridge augmentation and ossification of a thick sugar cross-linked collagen membrane in a canine L-shape defect model*

Yuval Zubery, Thomas Bayer, Arie Goldlust, Nicolette Jackson, Aubrey Soskolne, Shane Woods

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**C113**

*Optimising structural properties and cellular interaction of 3D-printed PLA scaffolds for bone regeneration*

Paolo Cardelli, Rossella Bedini, Sergio Caputi, Patrizia De Marco, Francesca Diomedes, Ilaria Mercario, Giovanni Murmura, Raffaella Pecci, Nicola Serafini, Oriana Trubiani
**Room 252**

**Clinical research: peri-implant biology**

**CHAIR**

Frank Schwarz  
President of the German Association of Oral Implantology (DGI). Board Member of the Osteology Foundation. Awarded the André Schröder Research Prize in 2007 and the Miller Research Prize in 2012.

- **C121** Prevalence of peri-implant mucositis and peri-implantitis in private office  
  Peter F. Carls, Marco Bernasconi, Francesco Carinci, Thomas Lambrecht, Mark Lawrence, Gareth Lewis, Nicola Zitzmann

- **C122** Comparison between inflammation-related markers in peri-implant crevicular fluid and clinical parameters during osseointegration in edentulous jaws  
  Fernanda Faot, Amália Machado Bielemann, Otacílio Chagas Junior, Altair Antoninha Del Bel Cury, Fábio Renato Manzolli Leite, Raissa Micaella Marcello-Machado, Frederico Canato Martinho

- **C123** Assessing the impact of Epstein-Barr virus in the microbiological profile associated with peri-implantitis  
  Mia Rakic, Daniele Boticelli, Luigi Canullo, Ugo Covani, Sasa Jankovic, Tanja Jovanovic, Paolo Pesce

- **C124** Crestal bone stability around regular connection implants after vertical soft tissue thickening: a 3-year report from prospective controlled clinical trial  
  Tomas Linkevicius, Algirdas Puisys

- **C125** Prevalence of peri-implantitis 19 years (17–22) after implant placement. Preliminary results of a retrospective study  
  Mischa Krebs, Amira Begic, Nikola Kesar, Konrad Neumann, Georg Hubertus Nentwig, Nadine Von Krockow

- **C126** Cytokines, MMP and TIMP release in periodontitis compared to peri-implantitis  
  Maxime Ghighi, Marjolaine Gosset

- **C127** Implant survival rate and marginal bone loss in computer-guided surgery: a 5-year retrospective analysis on 299 implants  
  Stefano Storelli, Eugenio Romeo

**Room 251**

**Clinical research: prosthetically related**

**CHAIR**

Klaus Gottfredsen  
University of Copenhagen, Department of Oral Rehabilitation, Copenhagen, Denmark

- **C149** Maxillary overdentures on four implants in the anterior region supported by a bar or locators; an RCT with 1-year follow-up  
  Carina Boven, Henny Meijer, Gerry Raghoobar, Arjan Vissink

- **C150** Single dental implant in the edentulous mandible (SMIS) – chewing efficacy  
  Matthias Kern, Samir Abou-Ayash, Daniela Bender, Elfriede Fritzner, Stefanie Kappel, Ioannis Konstantinidis, Torsten Mundt, Nicole Passia, Meike Stiesch, Valerie Von Koenigsmarck, Stefan Wolfart

- **C151** Implant-supported mandibular removable partial dentures; patient-based outcome measures in relation to implant position  
  Charlotte Jensen, Marco Cune, Wouter Kerdijk, Henny Meijer, Gerry Raghoobar, Caroline Speksnijder

- **C152** Implant overdentures on locators, prosthetic maintenance in relation to the resorption profile of the mandibula; one-year results  
  Carine Matthys

- **C153** Clinical and radiographic evaluation of short implants placed in the posterior mandible: a 1-year prospective cohort split-mouth study  
  Mireia Haro-Adánez, Wael Att, Miha Brčavšček

- **C154** Effects of prosthetic restoration on implant survival and implant success  
  Peter Rammelsberg

- **C155** Treatment outcomes of mandibular implant overdentures utilising ball attachments over a 50-month follow-up  
  Sang-Wan Shin, Kyeong-Whan Kang, Jeong-Yol Lee, Ki-Sun Lee
The influence of insertion torque on primary stability, implant survival and marginal bone loss

Michael Norton (United Kingdom)

A great deal of debate has taken place about the need for ever higher insertion torques in implant dentistry in order to maximise primary stability, especially when considering the immediate temporisation or loading of implants. Much of this has been driven by anecdote, with little evidence to support the concept of new implant designs aimed at achieving very high torques, often in excess of 70Nm. However, it is well understood that bone is a dynamic vital tissue which responds poorly to over-compression and the build-up of strains within its structure, leading to resorption and early intrinsic viscoelastic rebound, which could lead to loss of mechanical stability, before there has been any chance for osseointegration to take a foothold. In this respect, it is possible that high insertion torques are in fact contraindicated when undertaking early or immediate restoration/loading. By contrast, resonance frequency analysis is used to measure axial stiffness and this may be a better representation of primary stability, although much work still needs to be done to understand the relationship between peak insertion torque (PIT), implant stability (ISQ) and other factors such as bone density and implant design, as well as surgical technique. This presentation will review the current literature and focus on the latest data from a prospective study to evaluate the relationship between torque, ISQ, implant survival and maintenance of marginal bone.

Evidence-based implant carpentry. What are you using, what are we doing?

Ryo Jimbo (Sweden)

Implant treatment consists of numerous components and treatment steps that have been designed and based on medical engineering concepts. As a result, it can be said that the implant hardware that exists today can provide patients and clinicians with satisfactory clinical outcomes. So why do implants fail? It goes without saying that different reasons exist for the failures, however, the clinicians and their knowledge, experience and expertise as a factor for success should not be forgotten. It is a fact that certain levels of skills are necessary to conduct complex cases. In this respect, some things can be learned from carpentry, which requires scrupulous planning and execution techniques. However, in the case of dental implant treatment, biology is a major factor and therefore implant treatment should have a biological basis based on scientific evidence. Specifically, when focusing on the surgical procedures, different techniques can be utilised during implant installation, and implants can be placed with relatively high insertion torques if desired, just like installing a screw in wood. However, as a result, some early failures do occur reminding us that bone cannot be treated in the same manner as a piece of wood. How is implant stability achieved through different procedures and what is their biologic effect on the peri-implant tissue? In this presentation, the surgical aspects of implant treatment will be discussed, with a particular focus on how different procedures and components can affect its success.

Bone versus implants! Do we need to grant the biomechanical to the biology? The orthopaedist’s perspective

Thierry Joudet (France)

Prosthetic orthopaedic surgery first started with hip and knee prostheses. In the 1980s the pioneers of shoulder surgery started to develop shoulder implants. Still, the first designs came from the hip. The stems were big and needed a cortical fixation. Analysis of the first mid- and long-term results showed that too strong a fixation led to stress shielding and loosening of the prosthesis. In the early 1990s, a new prosthesis was developed with a spongy fixation. The micro-motion of the implant was the origin of a good bone reaction, increasing the bone integration of the implant. Engineers started to look for better designs to spread the forces from the prosthesis to the implant. A surface treatment was also proposed in order to increase bone growth on the prosthesis. However, we still have a lot of work to do to increase the long-term fixation. The interface between bone and prosthesis is still delicate and breakable. We have to search for the factors that have an effect on the consolidation or the loosening. Finally, we also have to pay attention to the origin of the macrophagic reaction, from inflammatory or infection. To conclude, if a surgical technique really affects the primary fixation, a bulky implant is not the best way to guarantee the long-term fixation. We need to use new small implants, with an adapted design to modify the forces applied, associated with a surface treatment increasing the bone integration.

Hand guided surgery versus guided surgery

Daniel Wismeijer (Netherlands)

From the literature we have learned that guided surgery is not as precise as we would want it to be. Digital planning and guided implant surgery still leaves us with deviations between the realised implant position compared with the planned implant position. This is in many cases disappointing, as it makes it virtually impossible to execute a full digital workflow from the design of the crown to the planning of the implant position, the design of the drill guide and the actual insertion of the implant. The reality often involves ‘trying to get the fixed prosthesis to fit’, due to the inaccuracies of the workflow. A hand-guided surgical approach is more rewarding in these cases as at least then the practitioner knows what he can expect and what his/her limitations are. The challenge we are confronted with then is finding why this workflow doesn’t work for us and what can we do about it. This presentation will discuss the variables that influence the precision of a guided surgery workflow and what we might be able to do to overcome these problems. Are we far away from roboticising this workflow or are there tools at hand that could make this possible in the near future?

Autogenous bone block versus allogegenic bone block

Zvi Artzi (Israel)

Severe alveolar ridge deficiencies i.e. Seibert Class III, are the utmost challenging situations. Autogenous bone block transplantation is one of the recommended surgical techniques for a 3D alveolar bone restoration. This procedure advocates delayed implant placement and loading protocols. There is a substantial difference when an implant is placed simultaneously with bone block transplantation compared with an implant which is placed in native bone. There should be awareness, such as block shrinkage, anatomical limitations and increased morbidity, which might advocate an alternative source such as using allogegenic blocks. So far, there are quite a few reports which support this biomaterial grafting source. Further, there is no solid evidence to support the efficacy and validity of true osseointegration between allograft blocks and osseointegrated implants. New data elucidates these issues in experimental clinical trials. Allogenic bone block grafts were also compared with particulate graft biomaterials in bone augmentation procedures. Direct bone-to-implant contact and the amount of vitalisation of the block are the principal parameters to evaluate the efficacy of these procedures. This lecture will highlight the efficacy of autogenous vs. allogegenic blocks.

Connective tissue graft versus soft tissue substitute around implants

Giovanni Zucchelli (Italy)

The recession of the buccal soft tissue margin is a frequent complication of well integrated dental implants. The appearance of metallic structures or even their visibility through the thin buccal soft tissues is a common reason for patient aesthetic complaints. Moreover, poor implant installation frequently results in excessive buccal soft tissue exposure. A disrupted margin of the implant-supported crown. Soft tissue plastic surgical procedures – and bilaminate techniques in particular – can be successfully used in combination with pre- and post-surgical prosthetic approaches to increase the volume of the interdental soft tissue; to treat buccal gingival recessions and soft tissue dehiscence around dental implants; and to provide the new implant-supported crown with an aesthetic transmucosal emergence profile.
Optimal long-term results for osseointegrated implants

**CO26**

### New strategy for bone augmentation

Shohei Kasugai (Japan)

Oral rehabilitation with dental implant treatment is predictable, making highly functional and aesthetic recoveries possible. However, this modality is difficult when there is insufficient bone at the implant installation site. It is also obvious that a certain amount of bone and soft tissues are prerequisite around the implant for functional and aesthetic outcome with good long-term prognosis. Thus, bone augmentation is frequently required in our daily practice. Autologous bone grafts are still a gold standard for bone augmentation because the bone blocks contain osteogenic cells, several osteogenic signal molecules and natural bone matrix, which are the three key players for bone regeneration. However, a limit to the amount of harvestable bone and inflammation at the donor site are the problems in autologous bone grafts. Instead, bone substitutes – xenogenic or synthetic materials – are used. However, since they only work as scaffolds for bone regeneration, they are not always effective. Applying some of the three key players (cells, signal molecules and scaffold) exogenously to the regenerative site is a current trend of tissue engineering. It has been reported that applications of signal molecules, such as PDGF or BMP-2, and/or stem cells are effective for bone augmentation. However, clinical application of such a tissue engineering strategy is difficult because of its high cost. Furthermore, vertical bone augmentation is still challenging. Interestingly, a bone augmentation technique without any graft material has been reported in the maxillary sinus. The maxillary sinus membrane was surgically elevated and the space for bone regeneration was provided under the sinus membrane with implants, resulting in bone formation in this space. We experienced neither complications nor implant loss in this graftless maxillary sinus augmentation technique. We and others have reported that gradual elevation of the peristium can produce bone over the basal bone in animal experiments. Furthermore, we have evolved this idea and developed ‘expansible guided bone regeneration’ (E-GBR), in which the space for bone regeneration under the barrier membrane increases gradually. In E-GBR, extensive bone is formed in the space under the barrier membrane. Graftless sinus augmentation and E-GBR clearly indicate that ‘respecting healing potential of bone and providing space’ are important for bone augmentation. Instead of applying some key players exogenously, our strategy could solve the problems which the current tissue engineering strategies encounter.

**CO27**

### Consideration of dental implant treatment based on biomechanics and mechanobiology

Keiichi Sasaki (Japan)

Mechanical stress in the bone surrounding osseointegrated dental implants is associated with biomechanics determined by anatomical factors of the maxillofacial system, including bone morphology, bone density and alignment of the implants, and functional factors such as functional load on the implants. It is widely accepted that mechanical stress in the tissues can induce mechanobiological responses such as differentiation, proliferation and apoptosis in cells. As a result, inflammation, bone resorption and deformation around the implants can be elicited, which could cause the loss of osseointegration of the implant to the bone. However, the evidence for these hypotheses, based on the biomechanics and mechanobiology, has been scarce. The author has been advancing multidisciplinary researches regarding biomechanical features and mechanobiological responses. Three-dimensional (3D) load on dental implants during oral function, such as clenching and mastication, were estimated using 3D force transducers in patients with implant-supported prostheses, which could reveal the functional loads on the implants in vivo. Using functional load and morphological data from the same patient, finite element analysis (FEA) has been carried out. The higher stress was observed in the cortical bone around the implant neck, especially around the supporting bone of one implant, where the cortical bone was thin and the implant was highly inclined. The stress distribution was affected by the number of implants and the magnitude and direction of occlusal force. When each implant was aligned along the direction of the measured load vector in the FEA model, the stress was reduced. The author also examined the load distribution on the abutment teeth, implants and alveolar ridge in various cases of partial edentulous model with implant-overdenture on the bench. The dynamic changes of bone metabolism around the implant under loading were also examined using nuclear molecular imaging by bone scintigraphy and positron emission tomography (PET). Two titanium implants were inserted in medial proximal tibias. Load was applied using closed coil springs with 0.5 to 4.0 N. Bone metabolism around the implant increased with loading. It differed with the magnitude and period of loading.
Perio plastic surgery to prevent biological complication in the aesthetic zone

Caroline Fouque (France)

Patients with implants in the anterior zone are extremely concerned about the aesthetic outcome of their smile. The peri-implant mucosa has a significant influence on the overall aesthetic result. Complications with implants can include infections like mucositis, peri-implantitis, or recession of peri-implant soft tissue. What is the role of keratinised mucosa tissue in these biological complications? Does a minimal width maintain peri-implant tissue health? Is the reaction of mucosal tissue so different to that of gingival tissue? Cardaropoli et al. (2006) observed a mean apical displacement of the labial soft tissue margin of 0.6mm at 1 year following the end of implant treatment. Different factors have been described that negatively influence the stability of the peri-implant mucosa. Is immediate implant placement a risk factor for biological complications? What procedures can we use to prevent these problems? Burkhart et al. (2008) observed no complete coverage of soft tissue dehiscence around implants after muco-gingival surgery. Are gingival grafts around implants less effective than around teeth? Roccuzzo et al. (2014) suggested that, by means of their surgical technique, buccal soft tissue dehiscences around single implants can be successfully treated. Do we have to use special procedures to obtain better outcomes? We will try to answer all these questions and propose step-by-step treatment plan protocols including the management of perio plastic surgery to prevent biological complications, especially in the aesthetic zone, which is a real challenge!

Bone management for optimal aesthetic outcome

Nicolas Picard (France)

In recent years, oral rehabilitation of partially or fully edentulous patients with oral implants has become a routine treatment with a high survival and success rate. But nowadays aesthetic outcomes play a more important role in terms of success criteria. In an aesthetic area the main problem which has been described is bone resorption after a tooth extraction. Hämmerle (2012) reports that the alveolar ridge undergoes a mean horizontal reduction in width of 3.8mm and a mean vertical reduction in height of 1.24mm. Several surgical techniques have therefore been described to optimise aesthetic outcomes by contracting the remodelling process, such as crystal bone preservation technique or immediate implant placement. On the other hand, other techniques such as delayed implant placement give priority to bone rebuilding. The aim of this lecture is to describe the indication and limitation of each surgical technique, and to evaluate scientifically the capacity of each to maintain or rebuild bone in the aesthetic area over the short- and long-term, along with what we can really expect in terms of aesthetic results.
Saturday 1st October

MORNING

9.00 > 10.30

Room 252

ORAL COMMUNICATION

Clinical research: surgically related

CHAIR

Carlo Maiorana
Full-time Professor and Chairman of Oral Surgery at the University of Milan School of Dentistry

C135
Posterior jaws rehabilitated with partial prostheses supported by 4x4mm or by longer implants: a 1-year post-loading randomised controlled trial
Carlo Barausse, Luigi Checchi, Marco Esposito, Pietro Felice, Irene Masi

C136
Extraction socket management using connective tissue graft versus Mucograft®: a randomised controlled trial
Alberto Fernández Ayora

C137
Bio-Oss® versus chin bone as pre-implant augmentation surgery: results of a 10-year randomised clinical trial of single implants in the aesthetic zone
Caroliene Meijndert, Henny Meijer, L. Meijndert, Gerry Raghoebar, K. Stellingsma, Arjan Vissink

C138
The implant-supported maxillary overdenture: 5-years results from a randomised controlled trial on 4 versus 6 implants in the anterior region
Wim Slot, Henny Meijer, Gerry Raghoebar

C139
The effects of insertion torque on hard and soft tissues around single implants. Randomised clinical trial at 3 years
Valentina Borgia, Fortunato Alfonsi, Antonio Barone, Ugo Covani, Enrica Giammarinaro, Simone Marconcini, Paolo Tonelli

C140
Assessment of new bone formation following sinus augmentation with cone beam computed tomography and micro computed tomography
Yoon Jeong Kim, Joseph Kan, Mina Nishimoto

C141
Autogenous bone blocks harvesting from the mandibular retromolar area: a clinical report of 180 consecutive treated patients
Stefano Trasarti, Fouad Khoury
MORNING

SESSION 11

CO-CHAIR
Henning Schliephake
Professor and Chair of the Department of OMF Surgery at Georg August University, Göttingen

CO-CHAIR
Ronald Jung
Head, Division of Implantology and Vice Chairman, Clinic for Fixed and Removable Prosthodontics and Dental Material Science, University of Zurich

C028

Immediate implant placement
Mariano Sanz (Spain)

When a tooth extraction is performed, important anatomical changes in the resulting alveolar ridge should be expected and these changes may affect the ideal positioning and outcome of the dental implant used to restore the lost dentition. In order to compensate for these physiological tissue changes, immediate implant placement has been proposed. In this presentation, the scientific evidence on the histological and clinical outcomes following immediate implant placement will be reviewed and risk factors associated with this surgical protocol will be emphasized, as well as the different surgical approaches designed to compensate for these risks.

C029

Prosthodontic rehabilitation of edentulous jaws
Karl-Ludwig Ackermann (Germany)

Edentulous patients do not only suffer from missing teeth, but also from compromised function, aesthetics and quality of life. Implants have been used to solve these problems, mostly by supporting a removable or semi-detachable appliance. But this does not meet the expectations of many edentulous patients. Generally, fixed restorations are preferred. Which is the current treatment of choice? Today, the implant restoration of edentulous patients is not only related to the amount of bone atrophy and specific type of edentulism, but also to a number of pre-implantological and restorative evaluations. In addition to the amount of atrophy, interalveolar relation, room to move for the correct tongue function, space for the superstructures and other aspects that interfere with aesthetics such as the chewing function, speech and hygiene abilities also play a role in this planning. More than 15 years of experience and knowledge in implant prosthodontic rehabilitation help us diagnose and treatment-plan cases to the highest possible level based on individual needs. A selection of cases from our clinic will be presented.

C030

Immediate CAD/CAM restoration
Margareta Hultin (Sweden)

The use of computer assistance in implant dentistry has increased during the last decade, mostly due to advances in radiographic 3D imaging techniques and computer technology. Computer assistance can include CBCT and virtual planning of the implant position, as well as prosthesis design and manufacturing prior to implant placement. The virtual planning of the rehabilitation can be transferred to the actual clinical setting by the fabrication of a surgical guide for flapless implant placement. A permanent fixed prosthesis may also be fabricated in advance for immediate function. Computer guided techniques for implant placement may offer advantages to the dentist as well as the patient. Precision is good in general, and implant survival rates are comparable with those achieved using conventional techniques. However, complications specific to the immediate connection of a permanent prosthesis are not negligible. This presentation will focus on complications and unexpected events that can occur due to the immediate connection of the implant-supported prosthesis. The base for objective scientific evaluation using computer guided implant surgery in the edentulous jaw will be discussed, with reflections from our experiences of using these techniques in clinical trials.

C031

Cemented fixed restorations
Konrad Meyenberg (Switzerland)

In the early days of oral implant reconstructions 30 to 40 years ago, reconstructions were primarily screw-retained, due to the lack of reliable and smart prosthetic components. A high potential for reinvention to compensate for technical limitations was hereby the primary motivation to do so. Later, due to improved technical understanding and engineering of prosthetic components and the desire to reduce technical complexity, cemented reconstructions on simplified abutments became more and more popular. However, with the increased clinical use of implants and wider experience of biological problems (such as peri-implantitis), along with long-term prosthetic complications (such as fractures, open contact points and cement-induced peri-implantitis), perceptive clinicians once again realised the clinical advantages of screw-retained implant reconstruction. This presentation will focus on these special aspects, and will show technically advanced solutions for these reconstructive challenges.

C032

Clinical advantages of modern micro-rough implant surfaces
Daniel Buser (Switzerland)

This lecture will review the progress made with micro-rough titanium dental implants in the past 20 years. It’s clearly one of the most significant areas of progress, since it has made implant therapy safer and more attractive for implant patients. These advances can be described as follows: clearly reduced healing periods; possibility of using shorter implants; much better success rates during the initial healing phase in sites with standard implant placement, implant placement with GBR or implant placement with SFE; excellent 10-year success and survival rates as documented by various clinical studies examining different micro-rough implant surfaces. The lecture will also address the key clinical factors determining how implants with micro-rough surfaces must be utilised in daily practice to achieve these excellent long-term outcomes.

C033

Machined or rough implants?
Massimo Simion (Italy)

After 15 years of pre-clinical and clinical studies, in the early 1980s Professor P.I. Brånemark developed a new implant concept named osseointegration. According to this concept, CP titanium implants with a relatively smooth turned surface were placed using a two-stage approach in a submerged situation and left to heal for 3-6 months before prosthetic loading. Between 1980 and 2000, millions of patients were treated with extremely good long-term success around the world. After 2000, the implant surfaces of several implant systems were modified by means of sand blasting, acid etching or oxidation to increase their roughness and speed up the osseointegration process. After a few years of enthusiastic use of such implants, most clinicians started to observe an increased prevalence of progressive peri-implant marginal bone loss associated with pus exudation, a pathology that was named ‘peri-implantitis’. In addition to implant surface roughness, different factors may contribute to the onset and development of peri-implantitis: host response; local factors; smoking; and patient compliance. Implant surface characteristics and all the aforementioned factors will be considered in the lecture.
Implant design has no influence on soft tissue parameters: a 1-year analysis
- Adrian Alexander Hurrle, Maria Bateli, Marin Christmann, Ralf Kohal, Benedikt Christopher Spies, Kirstin Vach

Up to 10-years retrospective analysis of 694 TiUnite implants placed in private practice using computer-guided template-assisted surgery
- Silvio Mario Meloni, Luigi Canullo, David French, Marco Tallarico, Erta Xhanari

SFRP2 enhanced the osteo/dentinogenic differentiation of stem cells from apical papilla by antagonize a canonical Wnt pathway
- Luyuan Jin, Zhipeng Fan

Osseointegration of additively manufactured 3D Ti-6Al-4V implants with trabecular porosity in cortical and trabecular bone
- Alice Cheng

Accuracy, clinical and patient-centred outcomes of aesthetic implants: a 2 years RCT comparing conventional with guided surgery approach
- Leonardo Amorfini, Eugenio Romeo, Stefano Storelli

The use of Leucocyte and Platelet Rich Fibrin (L-PRF) in socket management and ridge preservation: a split-mouth, randomised, controlled clinical trial
- Andy Temmerman, Ana Castro Sarda, Nelson Pinto, Marc Quiryen, Jeroen Van Dessel

Immediate loading of two dental implants, in edentulous mandibles, with single attachments vs. bars: 5-year results from a randomised controlled trial
- Carvalho Gomes Pedro, Ana Granja da Fonseca

Effectiveness of maxillary removable prosthesis retained by 4 implant-supported locator-attachments: patient-centred outcomes
- France Lambert, Alice Bouhy, Marc Lamy, Geoffroy Lecloux, Caroline Legros, Eric Rompen

Sandwich inlay technique for the posterior mandible: short-term prospective cohort clinical study
- Guido Galletti, Alfonsi, Antonio Barone, Valentina Borgia, Ugo Covani, Giovanni Battista Menchini Fabris

Immediate implant placement in the aesthetic zone of post extraction infected sites: a prospective study
- Elpida Samara, Theodora Karanikola, Anastasios Tsirlis, Dimitrios Tsirlis

Lactams and derivatives: are they toxic to human oral keratinocytes?
- Ricardo de Souza Magini, Cesar Augusto Magalhães Benfatti, Bernardo Born Passoni, Andrea Lima Pimenta, Esteban Rodriguez Herrero, Vera Slomka, Wim Teughels

Treatment of mild peri-implantitis using a novel chitosan device – a multicentre consecutive case series
Team 1

**C036 How to manage the anterior maxilla complex cases using a multidisciplinary approach**

> Markus Hürzeler (Germany)
> Otto Zuhr (Germany)

To the present day, tooth loss in the anterior maxilla represents in most instances a serious problem for the affected individuals. Although in situations where a single tooth is missing or needs to be extracted under more or less ideal preconditions, a variety of surgical techniques have been successfully applied and extensively reviewed, uncertainty exists regarding reliable treatment conceptions in less favourable situations. As a result, the last 20 years of implant dentistry have been substantially characterised by the search for surgical techniques that allow successful treatment results, especially in situations where more than one adjacent tooth needs to be replaced in aesthetically relevant zones. To date, no serious surgical ‘breakthrough’ has been found to avoid compromised aesthetic outcomes in such situations. As a result, contemporary attempts to overcome the aforementioned limitations seem to be mainly related to interdisciplinary approaches to the problem. Based on this premise, the team Hürzeler/Zuhr will present findings from their wealth of experience illustrated by different clinical scenarios, and will discuss promising and forward-looking treatment strategies for the future.

Team 2

**C037 Contemporary management of complex aesthetic dilemmas with an interdisciplinary approach**

> Tidu Mankoo (United Kingdom)
> Laura Frost (United Kingdom)

The aesthetic rehabilitation of the periodontally compromised dentition and inadequate or failing implant treatment in the aesthetic zone remains a challenge, despite numerous advances in the treatment of periodontitis, and in regenerative and dental implant therapies. This presentation will review contemporary interdisciplinary concepts in the management of the aesthetic zone with a view to achieving optimal long-term aesthetics and stability. With this in mind, novel approaches for aesthetic rehabilitation of complex aesthetic dilemmas will be presented. The outcomes depend on the clinical management and an understanding and application of the biological factors that influence our treatment outcomes. The optimal management of the interplay between bone, soft tissues and prosthetics determines the aesthetic outcome and the long-term stability of soft tissue aesthetics. An interdisciplinary approach is often the key to success.
Saturday 1st October

13.30 › 13.45

EAO MOMENT
Awards ceremony

- European Prize for Clinical Research in Implant Dentistry (3 awards)
- European Prize for Basic Research in Implant Dentistry (1 award)
- European Prize for Research in Implant Dentistry: Poster Presentation (1 award)

EAO honorary awards
During this session prizes will be awarded for the best presentation from each of the preceding Oral Communication sessions. Candidates who have obtained the prestigious EAO Certificate in Implant-based Therapy in 2016 will also receive their certificates.

The awards ceremony will also provide an opportunity for the EAO to recognise the invaluable contribution of Professor Klaus Lang to the field of implant dentistry. He will receive Honorary Membership of the EAO.

13.45 › 15.15

SESSION 12
Treatment planning session: multiple cases with a “simple” or “limited” problem

Clinical cases presenter
Christoph Hämmerle (Switzerland)

Periodontist
Mario Roccuzzo (Italy)

Implant surgeon
Hannes Wachtel (Germany)

Oral surgeon
Fouad Khoury (Germany)

Prosthodontist
Petra Gierthmühlen (Germany)

Orthodontist
David de Franco (Italy)

15.15 › 15.30

Closing ceremony

We look forward to seeing you again at the EAO’s Scientific Congress in Madrid next year. This will take place from October 5th to October 7th 2017. Save the date!
Faculty and EAO Members’ Dinner at Le Grand Hôtel

Thursday 29th September 20:30

ADDRESS
Le Grand Hôtel
Special VIP entrance:
12 Boulevard des Capucines
75009, Paris

The dinner will take place at the magnificently restored Le Grand Hôtel. The hotel opened its doors 150 years ago, during the reign of Napoleon III, and was inaugurated by the Empress Eugénie, in person, in 1862. It is located across the street from the Opéra Garnier, and close to the wonderful Place Vendôme.

With its legendary Salon Opera, a listed historical monument, the ballroom is an invitation to experience what is unique in past and present-day Paris.

This is your chance to experience the elegance of Paris in the company of friends and faculty from the EAO Congress.

Dress code: cocktail dress, business attire.

GETTING TO THE VENUE
A complimentary bus service will leave from Le Palais des congrès de Paris. Please meet in front of the registration desk on Level 0 at 20:00.

For guests who are not using the bus transfer, please note that the evening will begin at 20:30.
Management of peri-implant diseases
Frank Schwarz (Germany)
While non-surgical therapy is effective for the treatment of mucositis, therapy of moderate to advanced peri-implantitis requires more demanding surgical interventions, or even explantation. Etiology, as well as major risk indicators for peri-implant disease, limitations of non-surgical approaches and appropriate surgical procedures for the treatment of peri-implantitis will be covered.

The next level for hard and soft tissue regeneration
Ronald Jung (Switzerland)
Is guided bone regeneration a safe therapy and what is known about long-term results? New innovative clinical approaches will be demonstrated to solve the problem of hard- and soft tissue volume stability. Are there reliable off-the-shelf solutions that will bring us to a next level?

Osseointegration of implants: how to reduce treatment time and better manage patients with risk factors. Using the ISQ scale to make your treatment protocols more predictable
Marcus Dagnelid (Sweden)
Joerg Neugebauer (Germany)
Jay Malmquist (USA)
Implant stability is crucial to successful survival and long-term success, but requests for shorter treatment times, along with a growing number of patients with risk factors, place greater demands on dentists and available technology. With the increasing variances in protocols in implant placement and loading, having a predictable method of measurement becomes increasingly important. These speakers represent more than 30 years of combined experience with Osstell and the ISQ scale in daily practice and will in this unique and interactive lecture discuss the process of osseointegration success in various treatment indications, illustrated by cases and data.

The Piezotome-enabled flapless vertical alveolar crest-split and horizontal distraction
Angelo Troedhan (Austria)
Based on the mechanical behaviour of woven bone, Piezotome osteotomy tools were developed for flapless crest splitting and widening techniques. The indication for this surgery can be applied to alveolar ridges with widths of only 1mm due to the bone preserving benefits provided. A prospective clinical multicentre study resulted in an overall implant loss rate of less than 2% and a mean vertical bone loss of 1mm within the first two years after surgery.

Orthodontic bone stretching (OBS) for ankylosed teeth or implant relocation
Philippe Bousquet (France)
Matthieu Renaud (France)
Christèle Artz (France)
OBS allows conservation of intraclused ankylosed teeth or severely malpositioned implants on the arch, and can be an alternative to tooth extraction or implant removal associated with bone regeneration. The technique uses partial corticotomies, associated with orthodontic forces. This procedure leads to bone movement by the stretching effect. The orthodontic device induces and directs the movement until the proper position is achieved.
**Inspiration TALKS with Dentsply Sirona Implants**

**Challenging implant-supported single tooth restorations**
Experienced clinicians will share insights and trends in single tooth restorations. They cover solutions for limited bone volume, including sloped ridges, as well as state-of-the-art digital technologies – all of these for achieving best function and aesthetics for every single patient.

- Peter Gehrke (Germany)
- Mischa Krebs (Germany)
- Robert Nöiken (Germany)
- Daniel Thoma (Switzerland)

**Standpoints and views on peri-implantitis – expert debate**
Challenge your thinking by attending the expert debate between Professor Jan Lindhe and Professor Tomas Albrektsson on the topic of peri-implantitis, with a critical review of the current differences in opinions and available scientific data.

- Jan Lindhe (Sweden)
- Tomas Albrektsson (Sweden)

We look forward to welcoming you for an interactive symposium with inspirational talks and lively discussions. Simultaneous translation to French and Japanese.

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**Improved treatment protocols – affordability and productivity**

**How to select the right implant for the right indication**

- Mario Roccuzzo (Italy)

Choosing the right implant for ideal long-term soft tissue integration to mimic the natural gingival contour and prevent gingival recession or pocket formation.

**Key factors for success with implants in the aesthetic zone**

- Arndt Happe (Germany)

This presentation will give an overview of the main factors that influence the outcome of aesthetic implant treatments. It will show proven protocols that allow for successful treatment of demanding patients.

**Treatment solutions for the edentulous patient**

- German Gallucci (USA)

Upon completion of this lecture participants should be able to assess different implant-prosthodontic designs, discuss different loading protocols and evaluate long-term treatment outcomes.

Treatment enhancement and refinement – evidence counts

Moderator: Hadi Antoun (France)

Speakers: Bart Vandenberghe (Belgium), Bernard Touati (France), Paulo Malo (Portugal), Hannes Wachtel (Germany)

Explore the development of a variety of patient-centred protocols and the clinical and scientific evidence supporting them.

Emerging technology

The lectures will cover the integration of existing and emerging technology for meaningful clinical application in daily practice routine. What is available today, what is coming and which aspects are not yet solved? The lectures will focus on practical examples and overall patient benefits from interdisciplinary treatment teams already taking advantage of these technologies and solutions. Clinical opportunities presented by innovations like the new On1 restorative concept will be covered.

Refinements in managing the terminal and failing dentition

The All-on-4® treatment concept continues to evolve. Dental professionals must understand how to manage rehabilitation strategies for patients with varying levels of bone resorption. The edentulous patient population is growing and will continue to present opportunities that will challenge even the most skilled surgeon and team. The experts will present new solutions developed to meet the clinical needs of these patients.

Implant aesthetics and grafting – new guidelines for optimising results

Monish Bhola (USA)

This presentation is designed to acquaint the clinician with current evidence-based guidelines on implant placement and bone grafting in the anterior aesthetic region. Guidelines for placing and temporising immediate implants in the aesthetic area will be discussed. The lecture will also introduce some key and new soft tissue managing and enhancing procedures, such as the dual-zone grafting and biotype modification techniques to create a natural emergence profile. Additionally, key features and clinical applications of the Eztetic implant will be discussed.

Guided surgery with the Dentsply Sirona Chairside Workflow: from good to great

Guillaume Fougerais (France)

Nowadays, backward planning is an established procedure, meaning that implants are used to serve the prosthetic treatment and not vice versa. Implants must be placed in accordance with the targeted final prosthetic project to get the best environment for gingiva and osseointegration management. The Dentsply Sirona Chairside Workflow will allow us to respect each step of the implant treatment, from planning to the final prosthetic restoration using guided surgery. The surgical guide used during this digital workflow is the key element in this procedure to ensure that we transfer what we planned into our patient’s mouth. This planning is always driven by the prosthetic project, including the anatomical environment, and must also include the selection of the implant system. The perfect match between implant system and digital workflow is now the guarantee for outstanding aesthetic results that last longer.
Saturday 1st October
INDUSTRY LUNCH SYMPOSIUM
⏰ 12.30 › 13.30

L-PRF: the future for optimal bone & soft-tissue healing
Marc Quirynen (Belgium)
L-PRF, a second generation platelet concentrate, offers significant and clinically relevant advantages in cases of sinus augmentation, ridge preservation, initial osseointegration, soft tissue grafting, etc. This presentation will show the data of several RCTs.

How to reconcile function, aesthetic, simplicity and patient satisfaction
Jean-Pierre Brun (France)
The contribution of better implant ranges adapted to existing tissue evolutions allows for a more secure approach in complicated surgeries.
Friday 30th September
HANDS-ON SESSIONS

8.30 › 11.00 or 13.30 › 16.00

It is essential to pre-register for all hands-on sessions. Places are limited. If you would like to take part in any of the sessions, please visit the registration desk to book your space. All sessions will take place on level 4.

**Surgical regenerative therapy of peri-implantitis**
Frank Schwarz (Germany)
Therapy of peri-implantitis combined with regenerative measures is associated with clinical and radiographic improvements. Effectiveness is influenced by several factors. Cutting-edge knowledge of surgical techniques, regenerative approaches, decontamination protocols, decisions on regenerative or resective measures, and prevention of post-operative recessions will be provided.

**Extraction socket management of infected sockets: classification and treatment concepts**
Ki-Tae Koo (South Korea)
This hands-on course is aimed at introducing a new treatment classification system for extraction sockets based on the extent of inflammation and bone defect and the respective treatment of each type.

**Digital implant boot camp for guided prosthetics**
Luis Cuadrado (Spain)
Don’t miss this hands-on workshop and presentation of the digital implant treatment process and guided prosthetics. From intraoral scanning, implant planning and drill guide design to designing and manufacturing final restorations (crown and abutment), you will experience first-hand the game-changing benefits of digital implantology.

**The All-on-4® treatment concept – how to prepare for an immediate temporary bridge**
Armando Lopes (Portugal)
Tilting implants to maximise available bone offers many advantages. But how should you plan the provisional and final bridges for the best possible outcomes? How valuable is the protocol for immediate provisionalisation? Using a model, learn the steps for placing implants and converting a denture into a provisional bridge.
Dentistry Publications from Wiley

Clinical Oral Implants Research is the Official Publication of the European Association for Osseointegration

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CHAIRPERSONS & INVITED SPEAKERS

KARL-LUDWIG ACKERMANN (Germany)
Active clinically and in research since 1978. Operates practice with Dr Axel Kirsch in Filderstadt (DE). Special- ist in oral surgery. Board member of the DGI (German Society of Implantology) and the DGZMK (German Society of Dental, Oral and Craniomandibular Sciences) and specialist in periodontics of the European Dental Association (EDA). He holds teaching posts at the German Academy of Practice and Science (APW), is visiting lecturer at several German universities. Since 2004 guest professor at the Nippon Dental University Niigata, Japan, and since 2005 guest lecturer at Steinbeis University Berlin. He has published multiple publications worldwide in his fields of expertise.

TOMAS ALBREKTSSON (Sweden)
Tomas Albrektsson worked closely with P-I Brånemark in the development and introduction of osseointegrated implants from the latter part of the 1960s. He continues to publish scientific papers on oral, craniofacial and orthopaedic implants with a current emphasis on clinical outcomes and reasons for clinical problems.

ANTONELLO APPIANI (Italy)
Antonello Appiani received his DMD degree in 2000 from the University of Siena (Siena, Tuscany, Italy). He has private practices in Chianciano Terme and Rome, where he deals mainly with dental prosthetics and surgery. He belongs as ordinary member to the Italian Academy of Prosthetic Dentistry (AIOP), European Academy of Esthetic Dentistry (EAEED), and as active member of Italian Academy of Dentistry Photography Research and Study (Alto R&S). He is a co-author of Matteo Capelli and Tiziano Testori’s book Implantologia. Tecniche Implantari Mininvasive ed Innovativa (ACME; Viterbo, 2012). He is also the author with Stefano Gracis of Eyes on dental photography (ebook).

ZVI ARTZI (Israel)
Professor Artzi is Director of the Postgraduate Programme in Periodontology at the School of Dental Medicine, Tel Aviv University, Israel. He is an active member of the European Federation of Periodontology (EFP), the European Association for Osseointegration (EAO), the American Academy of Periodontology (AAP), the Academy of Osseointegration (AO), the International College of Oral Implantologists (ICOI), and the International Association of Dental Research (IADR). Professor Artzi has published over 100 articles and research abstracts in peer-reviewed leading journals in Periodontology and Oral Implantology. His current main research topics are related to the quality of regeneration and osseointegration, bone substitutes and advancing surgical modalities.

WAEL ATT (Germany)
Professor Att is the Director of the Postgraduate Programme at the Department of Prosthodontics, Dental School, University of Freiburg. He is a board-certified prosthodontist from the German Society of Prosthodontics and Biomaterials (DGPro) and serves as Past President of the Prosthodontics Group of the International Association for Dental Research (IADR) as well as President of the Arabian Academy of Esthetic Dentistry (ARAED) and President Elect of the International Academy for Digital Dental Medicine (IADD). Professor Att graduated in 1997 and received his Dr Med Dent (2003) and PhD (2010) degrees as well as extraordinary professor (2013) from the University of Freiburg.

MARTIN BRIENT (France)
Martin Brient is a general dental practitioner working in Paris, France. He has a private practice with a strong orientation in prosthodontic and restorative dentistry. After receiving his dental degree from the University Paris-Descartes in 2003, he spent 8 years teaching fixed-prosthesis in the same university under the supervision of Dr Gil Tirlet. His research, lectures and publications are focused on clinical decision-making and multidisciplinary treatment planning.

OLIVER BRIX (Germany)
Oliver Brix received his training as a CDT between 1985 and 1989, specialising in the fields of aesthetics and function, all-ceramics and implantology. He has been a world-renowned lecturer on the topics of ceramics and aesthetics since 1993 and is international guest lecturer and consultant to Ivoclar Vivadent AG. He has published various articles in national and international journals. In March 2001, he published the textbook The Fundamentals of Esthetics. He opened the International Training Centre and dental practice ‘Innovative Dental Design Oliver Brix’ in 2009. In March 2013 he published the bestseller Fascinating All Ceramics.

RINO BURKHARDT (Switzerland)
Rino Burkhardt graduated from the University of Zürich and received his doctorate from the Medical Faculty of the same university. He is a European Federation of Periodontology certified specialist and received his Master’s degree from the Medical Faculty of the University of Berne. Since 1995 he has run a private clinic in Zürich. He also holds an appointment as lecturer at the University of Zürich and professor at the University of HK. He has published articles and book chapters, and received a research prize from the European Federation of Periodontology. He is an active member of the European Academy of Esthetic Dentistry, the EAO, the Swiss Society of Periodontology and Board member of the Swiss Society of Implantology.
**Daniel Buser** (Switzerland)

Dr Buser is Professor at the Department of Oral Surgery at the University of Bern. He spent several sabbaticals at universities, most recently at Harvard University. He served as President of various associations, most importantly the EAO (1996/97), and the ITI (2009–13). He has received several scientific awards from the ITI, the AO, the AAP and the AAOMS. Recently, he was honoured with the Brämerkn Osseointegration Award by the Osseointegration Foundation (2013). His main research areas are in surface technology and bone regeneration with GBR. He has published more than 350 publications and several textbooks.

**Luca Cordaro** (Italy)

Dr Cordaro graduated with a degree in Medicine and in Dentistry from the University of Rome “La Sapienza”. He received his PhD in the same field from the University of Siena. Dr Cordaro received his postgraduate degree in oral surgery from the University of Rome. He has been appointed Head of the Department of Periodontology and Prosthodontics at the Eastman Dental Hospital in Roma. Dr Cordaro is an active member of the Italian Society of Osseointegration and a Fellow of the ITI and Director of the ITI scholarship centre in Rome. In 2007 he won the H. Goldman Prize for Clinical Research of the Italian Society of Periodontology. He has been a member of the EAO Board of Directors since 2011 and is also Chair of the EAO Congress Committee.

**Marcelo Calamita** (Brazil)

Dr Marcelo Calamita received his DDS degree in 1988 from the University of Sao Paulo, where he also obtained his certificate, MS, PhD degrees in prosthodontics. He worked as clinical instructor in the same university for 17 years. He was associate professor of prosthodontics at University Braz Cubas and University of Guarulhos, both in Sao Paulo. Marcelo Calamita is the current vice-president of the Brazilian Academy of Esthetic Dentistry and former president of the Brazilian Academy of Esthetic Dentistry. He maintains a private practice in Sao Paulo focusing on comprehensive restorative, aesthetic, and prosthetic implant dentistry.

**Matteo Chiapasco** (Italy)

Graduated in Medicine and specialised in maxillofacial surgery at the University of Milan, Italy. Professor and Head, Unit of Oral Surgery – Department of Biomedical, Surgical, and Dental Sciences, University of Milan, Italy. Visiting Professor, Loma Linda University, Los Angeles, California, USA. His main fields of interest are oral and maxillofacial surgery, with particular focus on oral surgery, orthognathic surgery, and advanced implant dentistry procedures. He is an international lecturer on these topics.

**Sarah Chick-Richardson** (United Kingdom)

Sarah has over 20 years’ experience in the dental industry working in various roles both in the public and private sector. She has over 14 years’ experience working in dental management which entails working in the specialist sector and as a consultant to various practices. Sarah is also studying to be a clinical psychologist in her spare time.

**Michael Cohen** (USA)

Dr Michael Cohen received his DDS from McGill University in Montreal and his MS and Certificate in Periodontics from the University of Washington. He is founder of the Seattle Study Club® network. This advanced educational organisation includes 260 chapters with over 7000 members on four continents. Dr Cohen has lectured internationally over the past 25 years and authored and edited two dental textbooks focused on treatment planning. He maintains a private practice limited to periodontics and implants in the Seattle area and is a visiting assistant clinical professor in the Department of Periodontics at the University of Washington.

**Hugo De Bruyn** (Belgium)

Graduated in Leuven 1983, PhD Groningen Netherlands 1987 and Master Periodontology from Lund University Sweden in 1988. Since 2004 Full Professor and Chairman Department and Research cluster Periodontology, Oral Implantology, Removable and Implant Prosthodontics at Ghent University Belgium. Course director of the international periodontology master programme as well as the postgraduate programmes of oral implantology and oral health sciences. Over 150 high ranked peer review papers and over 500 international lectures/courses. Research interests: immediate implant placement and loading, bone remodelling around various implant surfaces and designs, risk factors, patient-centred outcome and biomaterials. Visiting Professor at Malmö University Department of Prosthodontics.

**David De Franco** (Italy)

Dr De Franco obtained a BA degree in Biochemistry from University of Pennsylvania, a DMD degree from University of Connecticut, and a certificate in Orthodontics with a Doctorate of Medical Sciences degree in Oral Biology from Harvard University. He moved to Milan in 1992 where he has a private practice limited to orthodontics. He is a Diplomate of ABO, EBO and IBO, and is presently Chairman of Examiners for EBO. He is a member of AAO, EOS, HSASO, SIDO, AIDOr, EAED, and the Angle Society – East, of which he is President-Elect. He is a reviewer for several orthodontic journals.

**Drew Ferris** (USA)

Drew attended the University of Missouri – Kansas City for his DDS degree and completed his Orthodontic Residency at Loma Linda University. He practises in Santa Barbara, California. Drew has distinguished himself in the use of clear aligners and fixed appliances in pre-restorative orthodontics. He also has lectured internationally on a variety of orthodontic topics to include diagnosis, treatment and practice management. In addition to practice and frequent lecturing, Drew is co-director of Santa Barbara Dental Study Group, where he is an advisor on orthodontic diagnosis and treatment technique. The group is active in treatment planning for interdisciplinary restorative patients.
LAURA FROST (United Kingdom)
Laura Frost is a specialist Orthodontist working in multidisciplinary dentistry for the past 12 years. She uses multiple types of appliances, from removable to lingual fixed braces. In recent times, her areas of interest are vertical and horizontal orthodontic movements to regain bone tissue in the anterior maxilla and mandible, with the aim to facilitate implant placement and increase aesthetic outcomes. She is a co-founder and past Vice President of the Brazilian Lingual Ortho Association. She is also a co-founder and former treasurer of the British Lingual Ortho Association. She is currently taking an MSc in Facial Aesthetic Medicine.

HELENA FRANCISCO (Portugal)
PhD, University of Lisbon, College of Dentistry; Master, University of Lisbon, College of Dentistry; Postgraduate Fellowship in Periodontology and Implant Dentistry (3 year full-time programme), New York University College of Dentistry; Assistant Professor and co-Coordinator of the Implant Programme, University of Lisbon, College of Dentistry; Biomedical and Oral Sciences Research Unit (UIOCOB), University of Lisbon, College of Dentistry; private practice limited to periodontology and implant dentistry.

BERTIL FRIBERG (Sweden)
Dr Bertil Friberg received the DDS degree in 1975. Specialist in maxillofacial surgery. Joined the Brånemark Clinic from its start in 1986. Became a Master of Dental Science in 1994 and Doctor of Odontology in 1999. Associate professor and Co-chairman at the Brånemark Clinic. Performed ~1,000 national and international presentations of the Brånemark System and published 60 scientific papers. Appointed visiting professor at Siena University, Italy, in 2005.

STEFANO GRACIS (Italy)
Dr Gracis received his DMD degree in 1986 from the University of Pennsylvania, Philadelphia, USA. After his American title was recognised in Italy at the University of Pavia, he went to the University of Washington in Seattle where, in 1990, he obtained the certificate in Prosthodontics and the Master of Science in Dentistry. Presently, he maintains a private practice limited to prosthodontics and restorative dentistry in Milan. He is the current President of the European Academy of Esthetic Dentistry (EAED) and the Past President of the Italian Academy of Prosthetic Dentistry (AIOP). He has contributed several articles and chapters in the field of restorative dentistry and he lectures regularly, both nationally and internationally.

REINHARD GRUBER (Austria)
Reinhard Gruber was a visiting scientist at Carnegie Mellon University in Pittsburgh and at the University of Michigan's Dental School. He published 137 peer-reviewed articles (Scopus; 5/2016; h-index 25). He is Associate Editor of UOMI and BMC Oral Health, and in four editorial boards. He is on the Board of the Osteology Foundation and the German and Austrian Society of Osteology. Since 2012, Reinhard Gruber has been the Head of the Laboratory of Oral Cell Biology at the University of Bern. In October 2014, he became Professor for Oral Biology at the Medical University of Vienna.

PETRA GIERTMÜHLEN (Germany)
Dr Guess graduated from Albert-Ludwigs-University, Freiburg, Germany in 2001. She was an Assistant Professor (2001–2006) at the Department of Prosthodontics (Professor Dr Strub), Freiburg, Germany and is a Board certified Prosthodontist (2005) of the German Society of Prosthodontics and Dental Materials. 2006–2009 she was a Visiting Scientist at the Department of Biomaterials & Biomimetics (Professor Dr Thompson), NYU, USA. In 2009 Dr Guess was appointed Associate Professor at the Department of Prosthodontics, Freiburg, where she accomplished the Habilitation in 2011. Since 2016 she has been Chair of the Department of Prosthodontics at the Heinrich-Heine-University, Duesseldorf, Germany.

KLAUS GOTFREDSEN (Denmark)
Professor and chairman of section of Oral Rehabilitation at the Institute of Odontology, Faculty of Health Science, University of Copenhagen. Graduated from Aarhus University, Denmark. A PhD in Prosthodontics from University of Copenhagen and a PhD in Periodontology 2001 from Gothenburg University. Major subject areas for research are implant and prosthetic dentistry; biomaterials and oral health-related quality of life. Clinical research projects as well as experimental bone research have been performed. He serves as reviewer for clinical and scientific peer-reviewed journals and has published more than 100 peer-reviews papers and lectured in the field of implant dentistry.

LAURA FROST (United Kingdom)
Laura Frost is a specialist Orthodontist working in multidisciplinary dentistry for the past 12 years. She uses multiple types of appliances, from removable to lingual fixed braces. In recent times, her areas of interest are vertical and horizontal orthodontic movements to regain bone tissue in the anterior maxilla and mandible, with the aim to facilitate implant placement and increase aesthetic outcomes. She is a co-founder and past Vice President of the Brazilian Lingual Ortho Association. She is also a co-founder and former treasurer of the British Lingual Ortho Association. She is currently taking an MSc in Facial Aesthetic Medicine.

STEFAN FICKL (Germany)
2003, Dental degree at University Erlangen, Germany. 2004, Doctor Thesis. 2004–2007 Postgraduate Education in Periodontology and Implant Dentistry at the Institute of Periodontology and Implantology (IPi), Munich, Germany. 2007–2009 Assistant Professor in the Department of Periodontology and Implant Dentistry (Chair: Dr Dennis Tarnow) at New York University, New York, United States. Since 2009, Associate Professor in the Department of Periodontology, University of Wuerzburg, Germany. 2011, Habilitation (Privat-Dozent, PhD thesis) and Venia legendi. Dr Fickl is part of the editorial board of various dental journals, an international speaker in the field of periodontology and implant dentistry and author of numerous publications and book chapters.

CAROLINE FOUQUE (France)
and lectured worldwide since 1983. Dr Jemt has published over 150 scientific publications in Gothenburg in 1986. Dr Jemt was chairman of the clinic between 2000 and 2009 and currently holds a combined scientific position at the University of Zürich.

CHRISTOPH HÄMMERLE (Switzerland)
Professor Christoph Hämmerle is the Chairman of the Clinic for Fixed and Removable Prosthodontics and Dental Material Science, including the division of Implant Dentistry, the University of Zürich, Switzerland. He is specialised in both prosthodontics and periodontics. Christoph Hämmerle is Board Member and Past President of the Osteology Foundation and a Council Member of the European Association for Osseointegration (EAO). He has published more than 220 scientific and clinical articles. Professor Hämmerle has lectured widely on comprehensive reconstructive and implant dentistry.

MARKUS HÜRZELER (Germany)
Markus B. Hürzeler received his DMD degree in 1984 from the University of Zürich. In 1996 he obtained the Docent (PhD) degree from the Department of Prosthodontics at Albert-Ludwigs University in Freiburg, Germany. Since 1997, he has been working in private practice together with his partner. In 2002 he became Professor of Dentistry at the Medical Department of Albert-Ludwigs University. From 1997, he was an Associate Professor at Albert-Ludwigs University, Department of Preventive Dentistry and Periodontology. In 2012 he published with his partner Dr Zuhr the world-renowned book: Plastic-Esthetic Periodontal and Implant Surgery – A Microsurgical Approach.

TORSTEN JEMT (Sweden)
Dr Jemt started a collaboration with Professor P-I Bränemark in 1978, and was involved in the development of the first single implant abutments, and CAD/CAM titanium frameworks. He received a PhD in Prosthodontics in 1984 and he co-founded the Bränemark Clinic in Gothenburg in 1986. Dr Jemt was chairman of the clinic between 2000 and 2009 and currently holds a combined scientific position at the Faculty of Odontology as a Professor and as a clinical scientific coordinator. Dr Jemt has published over 150 scientific publications and lectured worldwide since 1983.

MARGARETA HULTIN (Sweden)
Assistant professor in Periodontology at Department of Dental Medicine, Karolinska Institutet, Stockholm, Sweden. Head of undergraduate education in dentistry, with more than 15 years in research and education in implantology.

MARKUS HÜRZELER (Germany)
Markus B. Hürzeler received his DMD degree in 1984 from the University of Zürich. In 1996 he obtained the Docent (PhD) degree from the Department of Prosthodontics at Albert-Ludwigs University in Freiburg, Germany. Since 1997, he has been working in private practice together with his partner. In 2002 he became Professor of Dentistry at the Medical Department of Albert-Ludwigs University. From 1997, he was an Associate Professor at Albert-Ludwigs University, Department of Preventive Dentistry and Periodontology. In 2012 he published with his partner Dr Zuhr the world-renowned book: Plastic-Esthetic Periodontal and Implant Surgery – A Microsurgical Approach.

THIERRY JOUDET (France)
Dr Thierry Joudet is a surgeon working in Libourne, France. He is one of the conceptors of two kinds of shoulder prosthesis: a stemless anatomical and a reverse total arthroplasty. Assistant of Professor Leval, he decided to be a shoulder surgeon. Three people influenced his carrier: the first was Professor Herzbarg with whom he learnt the principles of shoulder surgery. The second was Dr Lafosse who advised him to push the limits of arthroscopic surgery. Last but not least was Professor Gerber who influenced him in arthroplasty surgery. Now, Thierry Joudet works with 5 orthopaedic surgeons in a private hospital, in the Saint Emilion wine area.

RONALD JUNG (Switzerland)
Ronald Jung is currently Head of the Division of Implantology and Vice Chairman of the Clinic for Fixed and Removable Prosthodontics and Dental Material Science at the Center of Dental Medicine of the University of Zürich. In 2006 he worked as Visiting Associate Professor at the Department of Periodontics at the University of Texas, San Antonio, USA. In 2008 he finalised his “Habilitation” in dental medicine and was appointed at the University of Zürich. In 2011 he obtained his PhD doctorate of the University of Amsterdam, ACTA Dental School, The Netherlands. In 2013 he worked as Visiting Associate Professor at the Department of Restorative Dentistry and Biomaterials Sciences at Harvard School of Dental Medicine in Boston, USA. In 2015 he was promoted to full Professorship for Implantology at the University of Zürich.

SHOHEI KASUGAI (Japan)
Shohei Kasugai graduated from the dental school of Tokyo Medical and Dental University (TMDU) in 1979 and was awarded his PhD at TMDU in 1983. He worked in the Department of Pharmacology at TMDU from 1983 to 1999. He was also a postdoctoral fellow in the MRC Group in Periodontal Physiology, University of Toronto from 1989 to 1991. He is currently a professor and chair of Oral Implantology and Regenerative Dental Medicine and a director of Dental Implant Clinic in TMDU. He is focusing his research on bone and soft tissue regenerations.

RYO JIMBO (Sweden)
Dr Ryo Jimbo received his DDS at Nagasaki University, Japan, in 2004 and then at Gothenburg University, Sweden, in 2014. He defended his thesis in 2007 at Nagasaki and received specialist training in prosthodontics and in oral & maxillofacial surgery. From 2009, he worked as visiting researcher at the Department of Biomaterials, Gothenburg University. At present, he is Associate Professor and at the Department of Oral and Maxillofacial Surgery and Oral Medicine at Malmö University, and is dedicated to education, clinical practice and implant research. He has published more than 130 articles and lectures internationally. He is in the editorial board of CIDRR and JOMR.
FOUAD KHOURY (Germany)
Born in Maghdouché, Lebanon. 1978: DMD, St. Joseph University, Beirut. 1978–1979: Department of Oral and Maxillofacial Surgery of the University of Freiburg, Germany. 1979–1994: Assistant and later Associate Professor at the Department of Oral and Maxillofacial Surgery of the University of Muenster, Germany. 1984: Diploma in Oral Surgery. 1988: Habilitation. Since 1994: Professor at the Department of Oral and Maxillofacial Surgery in Muenster and Chairman of the Privatklinik Schloss Schellenstein, Olsberg. Member of editorial board of several journals. Several Prices and Patients, 118 Publications, 3 Textbooks translated to 11 languages and more than 1000 lectures.

BJÖRN KLINGE (Sweden)
Dr Klinge received his dental degree in 1977, his specialty degree in periodontology in 1988, and his PhD in 1984. Dr Klinge was visiting assistant professor at the Department of Periodontology at Loma Linda University, CA, USA, from 1979–1980 and was appointed Professor in Periodontology at the Karolinska Institute in 1994, where he was also the Dean for several years. He is currently Professor in Periodontology and Dean at the Faculty of Odontology, Malmö University, Sweden. Dr Klinge operated on his first implant patients more than 30 years ago, included in the first prospective study on implants in partially edentulous cases. He is a pioneer in virtual treatment planning and guided surgery in edentulous patients and is currently President of the EAO.

TAKETO KOGA (Japan)
Dr Taketo Koga received his DDS degree from Tokyo Dental Collage in 1986. He completed the postgraduate programme in advanced implantology at the department of Oral & Maxillofacial Surgery of Uppsala University Hospital, Sweden, in 1998. He received his PhD from Tokyo Dental Collage in 2009. He focuses his practice in implant dentistry, collaborating with specialists of various fields in Makuhari, Japan. He has been an adjunct lecturer at the department of Oral Anatomy of Niigata University since 2008. He has published scientific articles and books regarding complications in implant surgery.

RALF KOHAL (Germany)
Dr Kohal is Associate Professor at the Department of Prosthetic Dentistry, University of Freiburg, and received his doctoral degree in 1991. He was a Visiting Assistant Professor at the Division of Periodontology, University of Texas, Houston from 1993–1995. He is Board Certified in Prosthodontics (DGPro) and has received a certification for Oral Implantology (German Society of Implantology). In 2002, he was awarded docentship (Dr. Med. Dent. Habil.) in Oral Health Sciences (University of Freiburg). His main interests are ceramic implant materials; bone regeneration for oral implants; guided implant surgery; and prosthodontics.

YATARO KOMIYAMA (Japan)

NIKLAUS LANG (Switzerland)
Professor Niklaus P Lang is Honorary Professor at the Faculty of Dentistry, The University of Hong Kong, Honorary Professor at University College London, Guest Professor at the University of Zürich and Professor Emeritus at the University of Bern.

SONIA LEZIY (Canada)
Dr Sonia Leziy received her dental degree from McGill University. Dr Leziy’s postgraduate degree in periodontics was completed at the University of British Columbia, Canada. She is an associate clinical professor and sessional lecturer at the University of British Columbia and member of numerous societies and editorial boards. Dentistry Today recognises her among the top 100 clinicians in CE in North America. She is a recipient of the 2013 Lucy Hobbs Award and 2014 Saul Schluger Award. Dr Leziy is also executive VP of Clinical Affairs for the Seattle Study Club. She maintains a full-time private practice in the Imperio Group, practising in Vancouver and Whistler, Canada.

JAIME LOZADA (USA)
Dr Lozada is Professor and Director of the Advanced Education Program in Implant Dentistry at Loma Linda University, School of Dentistry, where he also received his Certificate in Implant Dentistry (1987) and Prosthodontics (1995). He is a Diplomate of the American Board of Implant Dentistry, Past President of the American Academy of Implant Dentistry, member of the editorial board of the Journal of Oral Implantology and a member of the American Board of Dental Specialties.

GEORG MAILATH-POKORNÝ (Austria)
Doctor of Medicine, University of Vienna. Specialty degree in dentistry, specialty training in maxillofacial surgery. 1991, PhD Medical University Vienna. 2003, President of the Austrian Society of Oral Surgery and Implantology. 2004, founding member of the Academy for Oral Implantology, Vienna. 2006, Board member of the European Association of Osseointegration (EAO). Since 2010 “Universitätsprofessor” (University Professor). Author of more than 100 publications on Oral Surgery.

CARLO MAIORANA (Italy)
Carlo Maiorana is full Professor and Chairman of Oral Surgery at the University of Milan School of Dentistry. He has been serving as Director of the Postgraduate School of Oral Surgery and is currently Director of the Center for Edentulism and Jawbone Atrophies at the Policlinico Hospital, University of Milan. Author of more than 100 papers on international journals, he limits his practice to implantology, oral surgery and jawbone reconstructions.

JACQUES MALET (France)
Dr Tidu Mankoo qualified with a BDS from the University of Bristol in 1981 and has a renowned private and referral practice in Windsor, UK, treating implant, restorative and aesthetic cases, particularly complex cases. He is an active member of numerous societies and Past President of the European Academy of Esthetic Dentistry, founder and Past President of the British Academy of Aesthetic Dentistry, has numerous publications and serves on the editorial board of a number of dental journals. He is a sought-after international speaker, particularly in the field of dental implants, aesthetic dentistry and management of complex cases.


Dr Brenda Mertens graduated from the Ruprecht-Karls-Universität Heidelberg. After her EFP Postgraduate Program in Periodontology at Strasbourg University and her PhD at Heidelberg University, she went to Montpellier to create her private practice limited to periodontology and oral implantology. She is since then Assistant Professor at the Department of Periodontology and a teaching assistant at the Periodontology and Implantology Postgraduate Program at Montpellier University. She is also lecturer at the National Periodontology Diploma Program and in charge of teaching in periodontology and oral implantology at the school for Dental Assistant. She is also part of the National Communication Committee of SFPIO and EFP Junior Officer for the External Affairs Committee.

Dr Konrad Meyenberg graduated at the University of Zürich, Switzerland in 1985. 4-year postgraduate programme in reconstructive dentistry at the University of Zürich (chairman: Professor Peter Schärer). Certified specialist for Reconstructive Dentistry (specialty degree since 1993). Private practice limited to aesthetic reconstructive dentistry in Zürich. Since 1990 a well-known speaker at numerous international events, having presented at more than 500 congresses. Started his clinical work in implantology in 1990. Since then has worked extensively with different systems. His clinical long-term experience in these fields is one of the primary topics in his lectures.

Dr Brahm Miller received his dental degree from McGill University and completed his postgraduate prosthodontics certification at the Medical College of Virginia. He is an associate clinical professor and sessional lecturer at the University of British Columbia and member of numerous societies and editorial boards. Dentistry Today recognises him among the top 100 clinicians in CE in North America. Dr Miller is a co-recipient of the 2014 Saul Schluger Award. He maintains a full-time private practice in the Imperio Group in Vancouver, Canada.

Virginie Monnet-Corti is Professor of Periodontology at the University of Odontology, Marseille. She graduated from Université de la Méditerranée and received her doctorate in 1997, Department of Odontology. She has published hundreds of articles and participated in international and national conferences. She is the co-author of a book on periodontal plastic surgery. Since 2014, she has been President of the French Society of Periodontology and Oral Implantology and is a member of the board of directors of the European Federation of Periodontology. In 2015 she was elected a member of the College of the medical board at Assistance Publique – Hôpitaux de Marseille.

Dr Jose Manuel Navarro qualified with a BDS from the University of British Columbia and oral rehabilitation of patients with head and neck cancer. She is Clinical Lead for Periodontics in conjunction with her role as Clinical Lecturer in Restorative Dentistry at Newcastle Medical School. 1990 PhD, 1994 Associate Professor. Since 1995 Chairman and Head at the Department of Oral & Cranio-Maxillofacial Surgery at Erlangen-Nuremberg University Dental School. Member of EAO Board from 2000 to 2010, acting EAO President from 2006 to 2008. Focused on CLP, orthodontic surgery, tumour surgery, implant dentistry, and bone grafts in combination with implants.

Ailsa Nicol is a Specialist in Restorative Dentistry, Prosthodontics and Periodontics. She works as an NHS Hospital Consultant in Restorative Dentistry at Newcastle Dental Hospital, UK. Ailsa completed her Specialist training and PhD at Glasgow Dental Hospital and School in conjunction with her role as Clinical Lecturer in Restorative Dentistry at the University of Glasgow. She is Clinical Lead for Prosthodontics on the MClndent programme in Restorative Dentistry at Newcastle University, UK. She was a founder member of the Junior Committee of the EAO. Her clinical interests include the management of hypodontia and oral rehabilitation of patients with head and neck cancer.
MICHAEL NORTON (United Kingdom)

Michael R Norton BDS FDSRCS(Ed) runs a practice dedicated to implant and reconstructive dentistry in London. He is a Specialist in Oral Surgery and Fellow of the Royal College of Surgeons, Edinburgh. Michael is Adjunct Clinical Professor at the University of Pennsylvania Dental School. He is President Elect & Fellow of the Academy of Osseointegration (AO) and is Past President (1999–2001) and Honorary Life Member of the Association of Dental Implantology, UK. Michael is Associate Editor of the International Journal of Oral & Maxillofacial Implants. He is widely published in the literature.

TURKER ORNEKOL (Turkey)

Dr Ornekol received his DDS from the Faculty of Dentistry of Marmara University (Turkey). He opened his private practice in Istanbul where he worked from 1979 to 1994 and in 1989 opened the first dental implant clinic in Turkey. He is one of the founder partners of Cosmodent Dental Center which is a merger of all dental practices in Istanbul. The center opened in 1994 and is focused on implant and aesthetic dentistry. Dr Ornekol is a founding member and the first president of the Turkish Association of Osseointegration and was elected for 4 mandates (2001–2010). He has been a member of the EAO Board of Directors since 2015.

NICOLAS PICARD (France)

Dr Picard received his dental degree from the University of Reims, his certificates in oral biology and periodontology from the University of Paris, and his postgraduate in periodontology and implantology from the University of Reims. He is affiliated with the European Academy of Osseointegration, a board member of the French Society of Periodontology and Oral Implantology, and president of the regional board of the SFPIO. Dr Picard is on the review committee of the French review “Implant”. He is a former Assistant Professor with the Department of Periodontics and Implantology at the University of Paris. Dr Picard maintains a private practice in periodontology and implantology in Rouen, France.

BJARNI PJETURSSON (Iceland)

Professor Pjetursson received his DDS from the University of Iceland. He got his specialist certificate in periodontology (EFP & SSP), Masters of Advanced Studies in Periodontology and DMD from the Faculty of Medicine, University of Bern in 2003, and finished his postgraduate training in prosthetics at the University of Berne in 2005. He received his PhD from the University of Iceland. From 2005 to 2008 he was Assistant Professor at the Department of Periodontology and Fixed Prosthodontics, University of Berne. Presently he is a Professor and Chairman of the Department of Reconstructive Dentistry and Dean, Faculty of Odontology, University of Iceland.

GIULIO RASPERINI (Italy)


ANDREA RICCI (Italy)

Dr Ricci graduated from the University of Perugia in 1996. After a 3-year training programme he achieved the Certificate in Advanced Prosthodontics at the University of Southern California, LA. He limits his practice to prosthetics, periodontology and implant dentistry, with special emphasis on the aesthetic areas. His office is one of the Leading Dental Centers of the World. He is the Scientific Director of Institute of Dental Education and Therapy. He is an active member of the European Academy of Esthetic Dentistry, of the Italian Academy of Esthetic Dentistry, of the Italian College of Prosthodontics and an Associate Member of the American Academy of Restorative Dentistry.

GIANO RICCI (Italy)

Dr Giano Ricci graduated in medicine and specialised in dentistry at the University of Florence, Italy. In 1974 he obtained his Master of Science degree in Periodontology from Boston University. He is the author of numerous publications in the periodontal field, including the recent book Diagnosis and Periodontal Therapy published by Quintessence (2014). He has delivered lectures internationally, and continuing education courses in periodontology, implantology and aesthetic dentistry. He is an active member of the European Federation of Periodontology (EFP), co-founder, Past President and active member of the Italian Society of Periodontology and Immediate Past President of the European Academy of Esthetic Dentistry (EAEAD).

ISABELLA ROCCHIETTA (United Kingdom)

Graduate in dentistry at the University of Milan. Research Fellow, Department of Periodontology, Harvard School of Dental Medicine. Fellow and instructor at the Department of Periodontology, University of Milan. Research consultant for the Institute for Dental Research and Education until 2011. Chair of the EAO Junior Committee (2007–2011). Member of the Experts Council of the Ostology Foundation and of the EAO Communication Committee. Currently performs clinical work limited to periodontics and implant dentistry in London. Affiliated with the Department of Biomaterials, Institute for Clinical Sciences, the Sahlgrenska Academy at the University of Gothenburg, Sweden.
MARIO ROCCUZZO (Italy)
Mario Roccuzzo is lecturer in periodontology and member of the attending staff at the Department of Maxillofacial Surgery, University of Torino, Italy. Member of the editorial board of Clinical Oral Implants Research, the International Journal of Esthetic Dentistry, the International Journal of Periodontics and Restorative Dentistry. He has been invited to lecture in more than 30 countries on all continents. Awarded the best clinical presentation on implants in periodontally compromised patients at the 2009 EAO Congress in Montecarlo, he maintains a private practice limited to periodontology and implantology in Torino.

IRENA SAILER (Switzerland)
Irena Sailer received her dental education and DMD degree from the University of Tübingen, Germany, in 1997. She received postgraduate training at the Clinic of Fixed and Removable Prosthodontics in Zürich, Switzerland, where she was later Associate Professor. In 2007 she was a Visiting Researcher at New York University, USA. Since 2009 she has held an Adjunct Associate Professorship at the University of Pennsylvania, USA. She is a Specialist for Prosthodontics (SSRD), and holds a Swiss specialisation degree for Dental Implantology (WBA, SSO). Since September 2013 she has been Head of the Division of Fixed Prosthodontics and Biomaterials at the University of Geneva.

GIOVANNI SALVI (Switzerland)
Giovanni E Salvi received his license in dental medicine in 1988 from the University of Bern, Switzerland. From 1994 to 1997 he conducted research at the University of North Carolina at Chapel Hill, NC, USA. In 1998 he became a certified periodontist. He has been a fellow of the ITI since 1999. Since 2003 he has been a member of the editorial board of the Journal of Clinical Periodontology and in 2006 he was appointed Associate Editor of Clinical Oral Implants Research. In 2010 he was promoted to associate professor. In 2012 he became honorary member of the German Society of Periodontology (DGfP).

MARIANO SANZ (Spain)
Chairman of Periodontology and Director of the EFP-accredited Master Course in Periodontology. Chairman of the Workshop Committee of the EFP and Honorary Doctor of the Universities of Göteborg in Sweden and San Sebastian in Chile.

KEICHI SASAKI (Japan)
Keiichi Sasaki is Dean at the School of Dentistry and Professor in the Division of Advanced Prosthetic Dentistry, Tohoku University, Sendai, Japan. He received his basic training (DDS, 1981) and neurophysiology (PhD, 1985) at Tohoku University. He was involved in biomechanical research with Professor AG Hannam at the University of British Columbia, Canada (1987–1989). In 2000 he was appointed head of the Department of Prosthodontics, Tohoku University. Professor Sasaki has been involved in both clinical and research works, particularly in biomechanics and mechanobiology of stomatognathic components related to dental implants. He is Past President of the Japan Prosthodontic Society (2009–2011).

HIRONOBU SATO (Japan)
Hironobu Sato graduated in 1977 and was awarded his PhD in 1981 from Kyushu Dental College. He worked there in the Department of Prosthodontics as assistant. He worked in the Department of Prosthodontics, Nagasaki University School of Dentistry as lecturer and associate professor (1983–1998). He was also an Oversea Research Fellow from Japanese Government in the Department of Prosthodontics, University of Gothenburg, Sweden (1994–1995). He became a professor and chairman of Prosthodontics, Fukuoka Dental College in 1998. During his academic career, he is a council member of Japanese Society of Oral Implantology from 2012 and Japanese Society of Prosthodontics from 2011.

MARC SCHÄTZLE (Switzerland)
Marc Schätzle graduated from the School of Dentistry, University of Berne, Switzerland, and completed the orthodontic postgraduate programme at the Clinic of Orthodontics and Paediatric Dentistry, University of Zürich, Switzerland. He also obtained a doctorate from the University of Berne, an Odont Dr (PhD) from the University of Malmö, Sweden and a Private Docent (PD) of the medical faculty, University of Zürich. He has received an Honorary Associate Professorship in Orthodontics of Faculty of Dentistry, the University of Hong Kong, SAR. In 2013 he received the Beni Solow Award for the best paper published in the European Journal of Orthodontics.

IRENA SAILER (Switzerland)
Irena Sailer received her dental education and DMD degree from the University of Tübingen, Germany, in 1997. She received postgraduate training at the Clinic of Fixed and Removable Prosthodontics in Zürich, Switzerland, where she was later Associate Professor. In 2007 she was a Visiting Researcher at New York University, USA. Since 2009 she has held an Adjunct Associate Professorship at the University of Pennsylvania, USA. She is a Specialist for Prosthodontics (SSRD), and holds a Swiss specialisation degree for Dental Implantology (WBA, SSO). Since September 2013 she has been Head of the Division of Fixed Prosthodontics and Biomaterials at the University of Geneva.

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HENNING SCHLIEPHAKE (Germany)
Professor Henning Schliephake received his training in OMF surgery/facial plastic surgery in Hannover, where he also did his PhD degree. He became full professor and chair of the Department of OMF Surgery at the Georg August University in Göttingen in 2001. He has chaired several scientific organisations and is editorial board member of a number of national and international journals. His research foci are reconstructive microsurgery, tissue engineering and QoL in head and neck oncology.

LARS SENNERBY (Sweden)
Professor Sennerby graduated from the University of Gothenburg, Sweden in 1986 (DDS) and defended a PhD thesis on dental implants in 1991. He was trained and worked with implant surgery at the Brånenmark Clinic in Gothenburg from 1989 to 2002. Professor Sennerby has published some 300 papers and book chapters and supervised some 16 PhD projects. Together with Dr Bill Becker, he is the founder and co-editor-in-chief of Clinical Implant Dentistry and Related Research. He holds a part-time position at the Department of Oral & Maxillofacial Surgery at the University of Gothenburg and performs implant surgery in private practice in Sweden, Italy and Scotland.

ALBERTO SICILIA (Spain)
Professor and Head of the Section of Periodontology, and Director of the Master Programme of Periodontology, University Clinic of Dentistry, Faculty of Medicine and Health Sciences, University of Oviedo, Spain. President Elect of the EAO. Medical Director, Clinica Sicilia, Oviedo, Spain.
research programme on biomaterials, stem cells and regeneration of tissues. Sue has secured several awards for him and his group. He is currently the Scientific Director of the BIOMATCELL VINN Excellence Center and has served as Associate Professor at the University of Gothenburg, Sweden. Honorary Dental Surgeon, Eastman Dental Hospital, London, UK. Honorary Tutor United Medical & Dental Schools of Guy’s & St Thomas’s Hospitals, London, UK. Senior Lecturer European University College Dubai, UAE. Implant Specialist & Prosthodontist Copenhagen Implant Centre, Assistant Professor, Department of Prosthodontics, Malmö University, Sweden.

NELSON SILVA (Brazil)
Dr Silva is Professor of the Department of Restorative Dentistry at the Federal University of Minas Gerais, Brazil. He holds Master, PhD and Postdoctorate from University of Sao Paulo/New York University. Dr Silva served as Assistant and Associate Professor of Prosthodontics at New York University and has published several articles and book chapters. He is on the review boards of high impact factor journals. His clinical and research skills involve translational research; laboratorial and clinical aspects for the success of aesthetic restorations; partial and complete removable prostheses; and implants using CAD/CAM.

MASSIMO SIMION (Italy)

PAUL STONE (United Kingdom)
Paul has been involved with dental implants for over 25 years and has held a number of senior positions including: President of the EAO; President of ADI UK; Chairman of the Dental Implant Advisory Board, Royal College of Surgeons of Edinburgh (RCSEd), and Senior Examiner for the Diploma in Implant Dentistry RCSEd. He has placed many thousands of implants and been involved in a number of significant areas of implant and biomaterials research. He has lectured nationally and internationally and has a particular interest in regenerative surgery and implant education.

JÖRG STRUB (Germany)
Professor Dr JR Strub received his DDS, DMD and Dr. Med. Dent. Habil. (PhD equivalent) degrees from the University of Zürich, Switzerland in 1975/1985 and his Dr. h.c. from the National and Kapodistrian University, Athens, Greece, in 2008. Since 1988 Dr Strub has been Professor and Chair of the Department of Prosthodontics at the Albert-Ludwigs University in Freiburg, Germany.

PETER THOMSEN (Sweden)
Dr Thomsen did his early training in experimental cell biology at the University of Gothenburg, Sweden. After holding a Fellowship with the Swedish Medical Research Council, Dr Thomsen succeeded Professor P-I Brånemark and became Professor of Biomaterials at the Sahlgrenska Academy in 1994. The underpinning work on the ultrastructure, cellular and molecular events in the interface between implant and tissue has secured several awards for him and his group. He is currently the Scientific Director of the BIOMATCELL VINN Excellence Center of Biomaterials and Cell Therapy, a 10-year Swedish governmental research programme on biomaterials, stem cells and regeneration of the musculoskeletal system.

JEAN-FRANÇOIS TULASNE (France)

GÖRAN URDE (Sweden)
Present: Director Futurus Clinic, Bridging Innovation & Research, Malmö University, Sweden. Programme Director Postgraduate Education, Malmö University, Sweden. Assistant Professor, Department of Materials Science & Technology, Malmö University, Sweden. Senior Lecturer Tipton Training, London & Manchester, UK. CV: Brånemark Clinic, Gothenburg, Sweden. Honorary Dental Surgeon, Eastman Dental Hospital, London, UK. Honorary Tutor United Medical & Dental Schools of Guy’s & St Thomas’s Hospitals, London, UK. Senior Lecturer European University College Dubai, UAE. Implant Specialist & Prosthodontist Copenhagen Implant Centre, Assistant Professor, Department of Prosthodontics, Malmö University, Sweden.

PASCAL VALENTINI (France)
Pascal Valentini received his DDS from the University of Paris VII Denis Diderot in 1982 and his postgraduate in Oral Implantology from the same university in 1992. He is currently Associate Professor of Implant Dentistry at the University of Loma Linda (USA), and Programme Director and Chairman of the European Postgraduate of Oral Implantology at the University of Corsica (France). Author of several articles in the field of osseointegration and bone regeneration with a special emphasis on maxillary sinus grafting techniques and bone grafting techniques. International lecturer. Past President of the European Association for Osseointegration. He runs a private practice limited to oral and implant surgery in Paris, France.

NELE VAN ASSCHE (Belgium)
HANNES WACHTEL (Germany)
Dr Wachtel received his degree in 1982 from the University of Tübingen. He then undertook training in prosthodontics at the University of Southern California and in periodontology at the Free University Berlin, where he became Associate Professor in Periodontology and obtained his PhD. He now holds a clinical professorship there at Medicine Charité, and at the University of Gothenburg, Sahlgrenska Academy. He is an active member of the European Academy of Esthetic Dentistry (EAED) and lectures on periodontology, implantology and aesthetics. He has written scientific articles and published in textbooks. Since 1994 he has maintained a private clinic in Munich, with Dr Bolz.

GEORG WATZEK (Austria)
Professor Georg Watzek received an MD degree, DDS degree and PhD and performed the Speciality Board Examination in Oral and Maxillofacial Surgery at the Medical University of Vienna. He was Head of the Department of Oral Surgery and Dean of the University Clinic of Dentistry in Vienna up until 2012. For several years he was President of the Austrian Society of Oral Surgery and Implantology and Acting President of the EAO 2003–2004. His research and patient therapy has focused on all parts of oral and maxillofacial surgery, and in the last 20 years especially on implantology and bone grafts in combination with implants. He is the author of more than 300 publications, including nine textbooks.

ANN WENNERBERG (Sweden)
Dr Ann Wennerberg received her dental degree in 1979, and received her PhD in 1996 and license degree in prosthodontics in 1997. She became Professor in Prosthodontics at the Sahlgrenska Academy, Gothenburg University, in 2002. Since 2008, she has been head of the Department of Prosthodontics, Faculty of Odontology, Malmö University, Sweden. Dr Wennerberg has written more than 220 scientific papers published in international peer-reviewed journals and has presented more than 120 invited lectures internationally.

DANIEL WISMEIJER (Netherlands)
Graduated in 1985 and worked until 2006 at the Amphia Teaching Hospital in Breda in the department of Oral Surgery and Maxillofacial Prosthodontics. Since 2006 he has been Professor of Oral Implantology and Prosthetic Dentistry at ACTA Amsterdam, which he combines with his referral practice for oral implantology. He is the head of the section of Oral Implantology and Prosthetic Dentistry. His research areas are focused on CAD/CAM treatment optimisation; digital dentistry, treatment evaluation and workflow; implant surface and bone substitute optimisation; peri-implantitis; and the evaluation of different implant-based treatment modalities. Since 2015 he has been Chairman of the ITI Education Committee.

GIOVANNI ZUCCHELLI (Italy)
Doctor in Dentistry. Professor of Periodontology, Bologna University. PhD in Medical Biotechnology applied to Dentistry. Active member of European Academy of Esthetic Dentistry, Italian Society of Periodontology, Italian Society of Osseointegration and European Federation of Periodontology. Member of the editorial board of the European Journal of Aesthetic Dentistry and International Journal of Periodontics and Restorative Dentistry. Winner of scientific prizes for research in periodontology in Italy, USA and Europe. Author of more than 100 scientific publications in the field of periodontology. Author of a book on aesthetic mucogingival surgery (Ed. Quintessence).

OTTO ZUHR (Germany)
Dr Otto Zuhr received his DMD from the Department of Oral and Maxillofacial Surgery in Aachen. He worked with Drs Bolz, Wachtel, and Hürzeler in the Institute of Periodontology and Implantology in Munich. He received his Specialist in Periodontology of the German Society of Periodontology. Today, he is in professional partnership with Marc Hürzeler and holds an assistant professorship position in the Department of Periodontology at the University of Frankfurt. He was a board member of the German Society of Periodontology. His book Plastic Esthetic Periodontal and Implant Surgery was published by Quintessence in 2012.
ORAL COMMUNICATION

SPEAKERS

LEONARDO AMORFINI (Italy)
Implantologist, periodontist, prosthodontist

KAREN ANAVI-LEV (Israel)
Periodontology and Oral Implantology – Tel Aviv University, Israel

MARC BALMER (Switzerland)
Clinic for Fixed and Removable Prosthodontics and Dental Material Science – University of Zürich

CARLO BARAUSSE (Italy)
PhD student, Biomedical & Neuromotor Sciences, Bologna University

CESAR AUGUSTO MAGALHÃES BENFATTI (Brazil)
Professor and researcher in the field of implantology and periodontics

MICHAEL BERGER (USA)
Undergraduate Researcher, Department of Biomedical Engineering, VCU School of Engineering

ADRIEN BOLETTE (Belgium)
Periodontology, Oral and Implant surgery

CAROLINE BOLLE (France)
DDS, PhD. Researcher – Laboratory of Multimaterials and Interfaces – University of Lyon 1

VALENTINA BORGIA (Italy)
Research Fellow at Tuscan Stomatologic Institute, University of Pisa

CARINA BOVEN (Netherlands)
Assistant Professor, Oral & Maxillofacial Surgery, University of Groningen

LUIGI CANULLO (Italy)
Practice limited to surgery and implant-supported prosthetic rehabilitation

PAOLO CARDELLI (Italy)
DDS, PhD – Research Fellow, University of Chieti, Italy

PETER F CARLS (Switzerland)
Oral Maxillofacial Surgeon in Private Practice and at Oxford University Hospital

RAFAEL DELGADO-RUIZ (USA)
DDS, MSc, PhD – Assistant Professor of Prosthodontics, Stony Brook University, NY

FERNANDA FAOT (Brazil)
Adjunct Professor at Federal University of Pelotas, RS, Brazil

ALBERTO FERNÁNDEZ AYORA (Spain)
Master in Periodontics, Liege University Periodontics & Implantology

DAVID FURZE (United Kingdom)
Associate dentist completing both surgical and prosthodontic components of implant dentistry

SILVIA GALLI (Sweden)
Dentist and PhD student at Malmö University

MAXIME GHIGHI (France)
Private Practice in Periodontology and Implantology

DOLLY GUPTA (India)
Implantologist and research enthusiast

MIREIA HARO-ADÁNEZ (Germany)
Postgraduate student, University Hospital Freiburg, Germany
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<thead>
<tr>
<th>Name</th>
<th>Country</th>
<th>Position/Role</th>
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<tbody>
<tr>
<td>HAIKUN HU</td>
<td>China</td>
<td>PhD, DDS – West China School of Stomatology, Sichuan University</td>
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<tr>
<td>CHARLOTTE JENSEN</td>
<td>Netherlands</td>
<td>Research on Mandibular Implant-supported Free-ending Removable Partial Denture</td>
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<tr>
<td>MATTHIAS KERN</td>
<td>Germany</td>
<td>Professor of Prosthodontics and Dental Materials</td>
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<td>YOON JEONG KIM</td>
<td>USA</td>
<td>Diplomate of American Board of Periodontology</td>
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<td>RALF KOHAL</td>
<td>Germany</td>
<td>Associate Professor, Senior Lecturer</td>
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<tr>
<td>MISCHA KREBS</td>
<td>Germany</td>
<td>Oral Surgeon, Assistant Professor, Goethe University Frankfurt am Main, Germany</td>
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<td>TOMAS LINKEVICIUS</td>
<td>Lithuania</td>
<td>Associate Professor, Institute of Odontology</td>
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<tr>
<td>HASSAN MAGHAIREH</td>
<td>United Kingdom</td>
<td>Clinical teaching fellow in implant dentistry – University of Manchester</td>
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<tr>
<td>CARINE MATTHYS</td>
<td>Belgium</td>
<td>Deputy dental clinical head at the Ghent University Hospital</td>
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<td>CAROLIENE MEIJNERT</td>
<td>Netherlands</td>
<td>DMD/PhD student University Medical Center Groningen</td>
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<td>SILVIO MARIO MELONI</td>
<td>Italy</td>
<td>Assistant Professor, School of Dentistry, University of Sassari</td>
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<td>SEIKO MIN</td>
<td>USA</td>
<td>Diplomate of American Board of Periodontology</td>
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<td>MARCO MORRA</td>
<td>Italy</td>
<td>Head of research and cofounder of Nobil Bio Ricerca, Italy</td>
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<td>PEDRO NICOLAU</td>
<td>Portugal</td>
<td>Professor of Prosthodontics, University of Coimbra, Portugal</td>
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<td>OMAR OMAR</td>
<td>Sweden</td>
<td>Assistant Professor, Institute of Clinical Sciences, Sahlgrenska Academy, University of Gothenburg</td>
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<td>STEFANO PIERALLI</td>
<td>Germany</td>
<td>Assistant Professor, Department of Prosthetic Dentistry, Freiburg, Germany</td>
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<tr>
<td>STEFANIE RAES</td>
<td>Belgium</td>
<td>Periodontist &amp; part-time PhD, Periodontology &amp; Oral Implantology, University of Ghent</td>
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<tr>
<td>MIA RAKIC</td>
<td>France</td>
<td>Assistant Professor – periodontology, implant dentistry and scientific methodology</td>
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<tr>
<td>PETER RAMMELSBERG</td>
<td>Germany</td>
<td>Director, Department of Prosthodontics, Heidelberg University</td>
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<td>IGNACIO SANZ-SÁNCHEZ</td>
<td>Spain</td>
<td>EFB board in periodontics and implants</td>
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<tr>
<td>NIKOLA SAULACIC</td>
<td>Switzerland</td>
<td>Department of Cranio-Maxillofacial Surgery, University of Bern, Switzerland</td>
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<tr>
<td>SHARIEL SAYARDOUST</td>
<td>Sweden</td>
<td>Periodontist and PhD student. Research interest: early phase of osseointegration</td>
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<td>SANG-WAN SHIN</td>
<td>Korea</td>
<td>Korea Implantologist and Clinical Researcher</td>
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<tr>
<td>WIM SLOT</td>
<td>Netherlands</td>
<td>Research on Implant-supported Maxillary Overdentures</td>
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<tr>
<td>ORDENER SOUZA</td>
<td>Brazil</td>
<td>DDS, MS, Periodontist, Master in Implantology and Private Practice Salvador, Bahia, Brazil</td>
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</table>
ANDREAS STAVROPOULOS (Sweden)
Professor of Periodontology, Malmö University

STEFANO STORELLI (Italy)
Specialist in oral surgery and implantology

HAI-PENG SUN (China)
PhD, Associate Professor, Oral implantology expert

MARCO TALLARICO (Italy)
DDS, MSc, Implant-Based Therapy Certified (EAO 2013)

STEFANO TRASARTI (Italy)
Specialist in oral surgery and implantology

LORENZO TUCI (Italy)
Resident, Biomedical & Neuromotor Sciences, Bologna University

YONG WEN (China)
DDS, PhD, Associate Professor

ERTHA XHANARI (Albania)
DDS – Private practice, Albania

YUVAL ZUBERY (Israel)
Periodontist and researcher on regeneration

ELISE G. ZUIDERVELD (Netherlands)
Dentist in Germany and PhD student in Groningen

“7 MINUTES TO CONVINCE” PRESENTERS

KARIM DADA (France)
DDS, private practice limited to periodontology and oral implantology

MARCO DEGIDI (Italy)
Private practice restricted to implant surgery and prosthetics

GIUSEPPE LIZIO (Italy)
Research Associate, University of Bologna

BRENDA MERTENS (France)
National Com. Committee & EFP Jr Officer Ext. Affairs Committee – SFPIO

MUSTAFA OZCAN (Turkey)
Assistant Professor, Cukurova University, Faculty of Dentistry Department of Periodontology

AMANDINE PARA (France)
Private practice in implantology and periodontology

LÉON PARIENTE (France)
DDS, private practice limited to implantology and periodontology

SYMPOSIA & HANDS-ON FACULTY

Tomas Albrektsson (Sweden)
Hadi Antoun (France)
Christèle Artz (France)
Monish Bhole (USA)
Philippe Bousquet (France)
Jean-Pierre Brun (France)
Luis Cuadrado (Spain)
Marcus Dagnelid (Sweden)
Guillaume Fougerais (France)
German Gallucci (USA)
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Arndt Happe (Germany)
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Robert Nolken (Germany)
Marc Quirynen (Belgium)
Matthieu Renaud (France)
Mario Roccuzzo (Italy)
Frank Schwarz (Germany)
Daniel Thoma (Switzerland)
Bernard Touati (France)
Angelo Troedhan (Austria)
Bart Vandenberghe (Belgium)
Hannes Wachtel (Germany)
Over 500 abstracts have been selected for poster presentation. Abstracts have been divided into seven themed categories, as illustrated in the diagram below. Full abstracts can be found in the conference abstract book, published as a supplement of Clinical Oral Implants Research. Abstracts are also available on the congress app. To download the app – or for direct access to the posters if you have the app installed already – please scan the QR code.

- **516 - 519**: Long-term outcome of implant restorations in the aesthetic zone
- **510 - 515**: Treatment of technical and biological complications
- **415 - 509**: Implant therapy outcomes, prosthetic aspects
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**Basic Research (PBR)**

**PBR-101** SFRP2 enhanced the osteo/dentinogenic differentiation of stem cells from apical papilla by antagonising a canonical Wnt pathway
- L. Jin, Z. Fan

**PBR-103** Osseointegration of additively manufactured 3D Ti-6Al-4V implants with trabecular porosity in cortical and trabecular bone
- A. Cheng

**PBR-105** Effect of heat-treatment temperature on the hydrophilicity and serum protein adsorption capacity of CP titanium
- S. Rhee, S. Kim

**PBR-109** The fusion of the prenatal mandibular canals in the first years of life
- T. Rybaczek, G. Eisenmenger, T. Dobšák, C. Ulm, S. Tangl

**PBR-111** Development of silk ink for 3D printing of a novel membrane surface for dental implantology
- A. Mcdonnell, P. Rider, P. Smith, C. Miller

**PBR-113** Observation on attachment of soft tissue on titanium implants with different micro-morphology surfaces by SEM
- W. Meng

**PBR-115** Effect of membranes of nanofibrous poly(-caprolactone/poly[2-oxazoline]) electrospinning blends on the viability of human dental pulp stem cells
- M. Deboni

**PBR-117** The effect of magnesium on the development of biologically inspired titanium-based surface produced by powder metallurgy technique

**PBR-119** Influence of scaling procedures on the integrity of titanium nitride-coated CAD/CAM abutments
- P. Gehrke, E. Spanos, C. Fischer

**PBR-121** Evaluation of the occlusal contact area with different widths of articulating papers
- G. Boehler leite, J. Valente de matto, C. Vivaquita, L. Dos Santos, S. Motta, C. Elias

**PBR-123** In vitro pre-clinical assessment of non-resorbable membranes for guided bone regeneration: bacterial and cellular response

**PBR-125** Hybrid scaffolds composed of β-TCP, PDLLA, and collagen for alveolar bone augmentation

**PBR-127** Evaluation of non-university postgraduate implant training courses in the UK
- F. Matsakas, D. Patel, A. Leung, C. Louca

**PBR-129** Effect of the diameter of dental implant on the screw joint stability in internal implant-abutment connection
- J. Lee

**PBR-131** Evaluation of bone healing following different types of osteotomy using SEM and 3D-SEM analyses – an animal study

**PBR-133** Ridge preservation following maxillary third molar extraction using PLGA/HA/β-TCP scaffolds with and without simvastatin: a pilot randomised controlled clinical trial
- M. Noronha Oliveira, L. Rau, A. Marodin, M. Corrêa, L. Ruhl and Corrêa, A. Aragones, R. De Souza Magini

**PBR-135** Assessment of functional dynamics of oral implants during early-stages of osseointegration in vitro
- M. Tanaka, J. Henrique Cavalcanti Lima, P. Cristiana Matos, F. Bezerra, E. Mavropoulos

**PBR-137** Real-time navigation: the beginning of a new era in guided implant surgery
- J. Ackhurst

**PBR-139** Wear of dental implant joints after removal torque

**PBR-141** Marginal bone loss adjacent to dental implants with different designs: radiographic evaluation after 1 year
- M. Kadkhodazedeh, B. Heidari, F. Zhang

**PBR-143** The influence of different implant designs on stress and strain pattern in the apex area
- M. Kadkhodazedeh, A. Lafia, M. Khademi, R. Amid, S. Hosseinpour

**PBR-145** Analysis of bone dimensions in the anterior maxilla using cone beam computed tomography, effect on implant therapy planning
- A. Alhadidi, S. Altarawneh, A. Hamdan, M. Shaqman, E. Habib

**PBR-147** Reversing fibrous encapsulation around oral implants via L-Wnt3a
- X. Yin, J. Li, S. Zou, J. Helms

**PBR-149** Effect of resorbable collagen plug on bone regeneration in rat critical-size defect model
- W. Liu, Q. Yuan, N. Kang, X. Liang

**PBR-151** Comparison of strength titanium and titanium alloy implant
- N. Ogata

**PBR-153** Influence of the crown-to-implant ratio on short implants marginal bone loss
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**PBR-155** Adhesion properties of porphyromonas gingivalis and streptococcus sanguis on zirconium dioxide and titanium surfaces: a study in vitro
- M. Wang, H. Zou, H. Xia, B. Shi

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- R. Ventura

**PBR-159** Surface and bulk characterisation of a zirconia implant by XRD and XPS

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- Y. Onodera

**PBR-163** Transcriptome sequencing of gingival biopsies from chronic periodontitis patients reveals novel gene expression and splicing patterns
- Y. Kim, Y. Lee, S. Kim

**PBR-165** Engineering of vascularised bone tissue via adding microspheres to three-dimensional fibrin gel in vitro
- F. Zhang

**PBR-167** Histomorphometric evaluation of bone quality in case of preservation of bone volume after extraction using particulate allografts (DFDBA) and platelet concentrates
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GENERAL INFORMATION

VENUE
Le Palais des congrès de Paris
2, place de la Porte Maillot
75017, Paris.
Easily reachable by public transport via metro station line 1 “Porte Maillot”.

OFFICIAL LANGUAGE AND TRANSLATIONS
The official language of the Congress is English. Translation into Japanese and French will be provided for sessions in the Grand Amphithéâtre. Headphones will be available to borrow from the cloakroom on Level 0.5 near the welcome desk. Your badge will be scanned when you collect a set of headphones. Please return them at the end of the day, so they can be charged for the following day.

TRANSPORT IN PARIS
Paris has numerous means of transport: metro, bus, RER, taxi, bicycle, boat, car hire. Please go to www.parisinfo.com for more information.

From Paris to CDG Airport
We recommend taking a taxi (around 55€, depending on traffic). Not all taxis accept payment by banker’s card. The Air France shuttle departs from Porte Maillot and takes around 40 minutes. For more information, visit www.lescarsairfrance.com

From Paris to ORLY Airport
We recommend taking a taxi (around 35€, depending on traffic). Not all taxis accept payment by banker’s card. The Air France shuttle departs from Etoile/Champs-Elysées station (two metro stops from Porte Maillot) and takes around an hour. For more information, visit www.lescarsairfrance.com

LOST AND FOUND
Articles found should be taken to the registration desk on Level 0.

CLOAKROOM
The cloakroom is on Level 0.5, near the welcome desk. Opening times:
September 29th...........08.00 › 19.30
September 30th...........08.00 › 19.30
October 1st...............08.00 › 17.00

TRADE EXHIBITION
The trade exhibition on Level 2 will be open at the following times:
September 29th...........10.00 › 18.00
September 30th...........08.30 › 18.00
October 1st...............08.30 › 14.00

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ON-SITE REGISTRATION

<table>
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<tr>
<th>Category</th>
<th>Fee</th>
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<tbody>
<tr>
<td>EAO members, SFPIO members and Invited country (Japan)</td>
<td>600€</td>
</tr>
<tr>
<td>EAO student members</td>
<td>290€</td>
</tr>
<tr>
<td>Non-members</td>
<td>800€</td>
</tr>
</tbody>
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The registration fee includes:
› admission to the congress sessions, poster areas and exhibition
› congress documents (final programme, digital abstract book)
› lunches and coffee breaks

NAME CHANGE
Registered participants who are unable to attend the congress cannot nominate a substitute participant. Name changes are not permitted.

VAT
All prices (registration fees, hands-on, Faculty and EAO Members’ Dinner) include French VAT at 20% as September 2016.

EAO MEMBER REGISTRATION
The member congress registration fee is reserved for EAO members. Regular membership: 225€ (+50€ joining fee in the first year). Further info at www.eao.org

STUDENT REGISTRATION
The student congress registration fee is reserved for EAO student members. Student membership: 50€.

SFPIO MEMBER REGISTRATION
Please note that your SFPIO membership for 2016 should be up to date before you register at the preferential rate. SFPIO members should go to the registration desk on Level 0.

EAO STAND
Please don’t hesitate to visit our stand at S25 for more information about the EAO and its activities, including the 2017 Scientific Congress in Madrid.

FACULTY AND EAO MEMBERS’ DINNER
For full details, including dress code and information about transport to and from the dinner, see page 27.

EAO MEMBERS’ LOUNGE
EAO members have exclusive use of the lounge on Level 2 throughout the congress. Members are invited to a happy hour in the lounge on Friday 30th September from 17:30.

LUNCH FOR FIRST ATTENDEES
The EAO is hosting a special lunch for delegates who are attending the EAO Congress for the first time. This will take place in Room 251 from 12:00 to 13:00 on Thursday 29th September.
DISCOVER PARIS

LEGEND
1. Eiffel Tower
2. Champs Elysées
3. Arc de Triomphe
4. Notre Dame
5. Montmartre
6. Louvre
7. Musée d’Orsay
8. Place de la Concorde
9. Centre Pompidou
10. Montparnasse Tower
11. Bastille
12. Nation
13. Père Lachaise
14. Pantheon
15. Opéra Garnier
16. La Villette
17. La Défense

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SHOPPING
Paris, “Capital of Shopping”, is home to couturiers and concept stores that create the trends of the future. There is a shopping centre in the Palais des congrès where you will be able to enjoy food, beverages and general shopping.

Luxury fashion areas:
Avenue Montaigne, Rue Saint Honoré and Place Vendôme.

Designer fashion areas:
Place des Victoires, le Marais.

Ready to wear areas:
Champs Elysées, Rue de Rivoli and Galeries Lafayette.

GASTRONOMY
Paris “Capital of Gastronomy” invites travellers from all over the world to have a feast! The art of French cooking owes its success to the mastery of classics updated by today’s chefs.

You will be able to enjoy the famous Parisian bistrots, cafés and brasseries, and also the most prestigious restaurants for French food. Bring back a souvenir from “La Grande Epicerie de Paris” at Le Bon marché (7th arrondissement).

CULTURE
Paris “Capital of Culture”, with its incomparable heritage and profusion of sites and monuments, is a dream destination for visitors in search of historic splendour. Thanks to its unique blend of iconic sights, innovative architecture and unusual places, the French capital promises a cultural journey like no other through 1,803 monuments, 173 museums and a host of other exceptional sites. Don’t miss the biggest museum in the world: Le Louvre.

Other must-see locations include the Musée d’Orsay with its 19th century Impressionist art collection and the Musée Rodin with its famous sculptures.

ROMANTIC PARIS
Paris is THE romantic city par excellence! With its little streets, secret passages and squares full of charm, it is the ideal setting for a romantic getaway. Lovers can stroll hand in hand admiring the capital’s magnificent monuments. Why not enjoy a dinner on the most romantic “Avenue” in Paris, the river Seine. For more information visit www.paris.fr
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DENTSPLY SIRONA
Dentsply Sirona is the world’s largest manufacturer of professional dental products and technologies, with a 130-year history of innovation and service to the dental industry and patients worldwide. Dentsply Sirona develops, manufactures, and markets comprehensive solutions including dental and oral health products as well as other consumable medical devices under a strong portfolio of world class brands. As The Dental Solutions Company, Dentsply Sirona’s products provide innovative, high-quality and effective solutions to advance patient care and deliver better, safer and faster dentistry. Dentsply Sirona’s global headquarters is located in York, Pennsylvania, and the international headquarters is based in Salzburg, Austria. The company’s shares are listed in the United States on NASDAQ under the symbol XRAY. Visit www.dentsplysirona.com for more information about Dentsply Sirona and its products.

NOBEL BIOCARE
Nobel Biocare is a world leader in the field of innovative implant-based dental restorations. The company’s portfolio offers solutions from single tooth to fully edentulous indications with dental implant systems (including key brands NobelActive®, Bränemark System® and Nobel-Replace®), a comprehensive range of high-precision individualised prosthetics and CAD/CAM systems (NobelProcera®), diagnostics, treatment planning and guided surgery solutions (NobelClinician® and NobelGuide®) and biomaterials (creos™). Nobel Biocare supports its customers through all phases of professional development, offering world-class training and education along with practice support and patient information materials. The company is headquartered in Zurich, Switzerland.

STRAUMANN
The Straumann Group, established in 1954 and headquartered in Basel, Switzerland, is a pioneer and global leader in implant, restorative and regenerative dentistry. In collaboration with leading clinics, research institutes and universities, Straumann researches, develops and manufactures dental implants, instruments, prosthetics and biomaterials for use in tooth replacement and restoration solutions or to prevent tooth loss. In education and research, Straumann works closely with its academic partner, the International Team for Implantology (ITI). The Group currently employs approximately 3500 people worldwide; its products and services are available in more than 100 countries through its broad network of distribution subsidiaries and partners.

GEISTLICH BIOMATERIALS
Geistlich Pharma AG develops, manufactures and markets medical products for restoring bone, cartilage and soft tissue, as well as drugs. The Swiss company encompasses three business units: Geistlich Biomaterials (Dental), Geistlich Surgery (Orthopaedics) and Geistlich Medical (Drugs) and operates from the Wolhusen and Root sites. The company has a worldwide sales and distribution network with ten subsidiary companies and more than 60 distributors. Geistlich Biomaterials has specialised in regenerative biomaterials for 30 years and has long been the world market leader in regenerative dentistry. Dentists and maxillary surgeons use the Geistlich Bio-Oss® and Geistlich Bio-Gide® pioneer products in bone regeneration. The replacement bone material, Geistlich Bio-Oss®, is the standard in dental surgery bone regeneration.

ZIMMER-BIOMET
As an affiliate of one of the largest musculoskeletal companies in the world, Zimmer Biomet Dental offers you the kind of premium service and quality rarely found in today’s world of dentistry. The portfolio of products includes: surgical solutions, regenerative materials for both hard and soft tissue applications, versatile prosthetic components for all types of implant restorations, and end-to-end digital dentistry solutions. With approximately 319 issued patents and 161 pending patents worldwide, Zimmer Biomet Dental has published over 650 articles on surgical, restorative and regenerative products. They have operations in 25 countries around the world and sell products in more than 100 countries. All references contained herein to Zimmer Biomet Dental refer to the Zimmer Biomet dental division. Due to regulatory requirements, Zimmer Biomet’s dental division will continue to manufacture products under Zimmer Dental Inc. and Biomet 3i, LLC respectively until further notice.
In its continuing efforts to serve the dental community, Quintessence provides the latest scientific and clinical information in formats designed to meet the varying needs of busy professionals. As people from around the world have come to expect, the Quintessence name represents a commitment to quality that is unsurpassed in the dental publishing world. Quintessence Publishing has over 50 professional journals, more than 1000 book titles and various multimedia products. As part of its commitment to innovative, high quality publishing, Quintessence has actively sought new ways to use emerging media technology for the electronic transfer of information.

As one of the leading implant companies worldwide, OSSTEM Implant is spearheading the trend of growth and evolution, providing clinical operation methods and clinical technical intelligence through AIC workshops, regional research societies, as well as various conferences to meet customers’ high standard and dentists’ academic fervour. Based on the decades of cases with new concepts of operative methods applied, in addition to the release of such new technology and products (TS system, CAS-Kit, LAS-Kit, ESSET Kit, SmartBuilder-titanium mesh membrane, AutoBone Collector, Parallel Kit and etc.), OSSTEM Implant is committed to supporting our customers’ success.

Established in 1995, MIS Implants Technologies Ltd. is at the forefront of development and production of advanced products and solutions aimed to simplify implant dentistry. With our cutting edge facilities, MIS offers a complete range of premium quality dental implants, superstructures, tools and kits, regenerative solutions and digital dentistry. Distributed in over 65 countries, MIS provides unparalleled service to our customers. Standing behind MIS are world-class scientists and engineers, devoted to the continued research and development of innovative products and technologies, perfectly matched to the needs of dental implant professionals worldwide.

Wiley is the world’s premier dentistry publisher, representing the very best in academic research, student learning and clinical expertise. Wiley is honoured to be the publisher of Clinical Oral Implants Research, the official journal of the European Association for Osseointegration, and offers to attendees at this conference a discount of 20% on all books on display at our booth.
3SHAPE
3Shape creates 3D scanning and CAD/CAM software solutions: award-winning technology that enables dental and hearing professionals to treat more people, more effectively and with improved care. A privately-owned company, 3Shape has over 700 employees with a product-development force of more than 275 professionals. Offices and service centres located in the Americas, Asia and Europe serve customers in more than 100 countries. Company headquarters are in Copenhagen, Denmark, www.3shape.com

ANTHOGYR
Anthogy is a key player in dental implantology. The company designs, manufactures and distributes a complete range of implants and instruments to support dental health professionals in treating millions of patients throughout the world. Our missions: to propose an alternative and attractive quality solution to brands called “Premium”, with an innovative and strong value added offer; to be the special partner of full tooth restoration dedicated to both dental surgeon and laboratory.

BEGO IMPLANT SYSTEMS
BEGO Implant Systems, established in 1990 as BEGO Semados®, specialises in the development and marketing of Semados® implant systems, the accompanying implant prosthetics and BEGO Biomaterial System. The company’s key objective is to apply the BEGO system concept to cutting-edge implant technology, and thus supply the market with highly efficient systems that can be conveniently used for all indications. Today, dental implants “Made by BEGO” epitomise top German technology at a fair price, delivering a perfect combination of safety, durability, aesthetics and reliability.

BTI
BTI Biotechnology Institute is one of the leading companies in the field of research in oral implantology and rehabilitation with a presence in over 25 countries. A key part of BTI activity is design, manufacturing and distribution of dental implants, prosthetic components, surgical material and tissue and bone regeneration with an intense R&D-I activity. Therefore, BTI is the medical company with the most versatile dental implant system worldwide, offering the widest range of solutions tailored to each need of patients. Besides, it is a pioneer in the application of regenerative medicine in this field, using Plasma Rich in Growth Factors (Endoret®-PRGF®) to stimulate and accelerate healing and tissue regeneration.

CAMLOG
CAMLOG is a leading supplier of complete implant systems and products for restorative dentistry. Years of research and development experience, high quality standards, and attractive price-performance ratio for partnerships and practical services have made CAMLOG a first-class address. CAMLOG Biotechnologies AG is headquartered in Basel, Switzerland. CAMLOG subsidiaries distribute CAMLOG products in Germany and Switzerland and there is a network of distributors in more than 20 countries worldwide. www.camlog.com

CORTEX
Established in 2008 by recognised doctors in dentistry with a growth rate of nearly 30% per year, CORTEX designs, manufactures and sells innovative and “easy-to-implant” solutions to meet doctors’ needs and simplify the learning stage. Our motto: “One Product, One Protocol, Predictable Results”. Our product range developed by Dentists for Dentists includes dental implant systems, abutments, prosthetic parts, surgical kits, drills, and more. CORTEX offers dentists comprehensive and customised solutions to grow their daily business and make their patients smile.

DENTIUM
Founded in Korea in 2000, Dentium has grown to become the trusted manufacturer. We are committed to the creation of healthy, beautiful smiles by providing high quality products, comprehensive training, and unrivalled customer service worldwide. Dentium is distinguished by a dedicated R&D centre that has partnered with leading clinicians and research institutions to develop the state-of-the-art implant systems that deliver remarkable results. Our full selection of products, ranging from surgical and restorative components to fixtures and regeneration materials, enable dental professionals to perform a great diversity of works quickly, accurately and aesthetically.

HENRY SCHEIN
Henry Schein, Inc. (Nasdaq: HSIC) is the world’s largest provider of health care products and services to office-based dental practitioners. A Fortune 500® Company, member of the S&P 500® and the Nasdaq 100® indexes, Henry Schein employs nearly 19,000 Team Schein Members, serving more than one million customers, offering a comprehensive selection of products and services, including value-added solutions for operating efficient practices and delivering high-quality care. The Company also offers innovative technology solutions, including practice management software and e-commerce solutions. For more information, visit Henry Schein at www.henryschein.com.

IMPLANT DIRECT
Implant Direct is the leading online source for high-quality dental implants. We offer smart implant solutions for dental professionals compatible to leading implant manufacturers. As our name implies, we provide a broad product line of dental implant products at factory direct prices to dentists worldwide. We are the leading online source for high-quality, innovative dental implants available worldwide. Implant Direct builds on the expertise of 30 years of implant industry innovation. Implant Direct is passionate about dentistry, convinced and proud of our products and services that make the difference to deliver the best value to dental professionals and their patients.
NEODENT
Neodent, the 4th largest dental implant company in the world founded in 1993, its implants and other products available in more than 20 countries, sells more than 1 million implants a year. Neodent specialises in the design, development, and manufacture of dental implants and related prosthetic components. Its success has been achieved through a philosophy of making tested implant solutions more affordable to a broader population. The proven product concept achieves 99.7% implant survival rate, supported by more than 150 studies. Neodent also places considerable importance on education and training, with the aim of ensuring treatment standards and patient care.

SHINHUNG
Shinhung has been writing dental history in Korea since 1955. As the oldest, largest, and most respected dental company in Korea, Shinhung has been a dedicated provider of dental unit chairs, precious metals, and other dental products for over 60 years. After years of research, the Shinhung Implant System was launched nearly 15 years ago, and today SIS is being celebrated as one of the safest and most reliable systems worldwide. For over 60 years, Shinhung has contributed to the advancement of the Korean dental industry through superior products and customer relations. Now, as we look towards 100 years, we aim to bring the same commitment to the rest of the world.

THOMMEN MEDICAL
Thommen Medical AG develops, manufactures and sells implants and surgical instruments for oral implants. The company was founded in August of 2001 by a very experienced team and established itself on the market for oral implants within a very short period with the Thommen Implant System. Thommen Medical has grown at high rates over the past few years and has subsidiaries in Germany, Switzerland, Austria, the US and Canada. The company is, moreover, represented by distributors in France, Benelux, Italy, Spain, Finland, Lithuania, Norway, Poland, Russian Federation, Turkey, the Near and Middle East, Australia, Japan and China.

TRINON TITANIUM
Trinon Titanium is a manufacturer of high quality implants for dental implantology, maxillofacial surgery, traumatology and orthopaedics. In the product range there are also modular distractor for alveolar ridge Q-MultiTractor, titanium meshes, Bone Pins System, micro and mini plaques for osteosynthesis. Dental implant systems Q-Implant and GIP-implant offer a big variety of platforms and diameters, as well as excellent primary stability. In cooperation with Trinon Collegium Practicum Trinon Titanium organises since 2003 practical implantology courses for novices and advanced surgeons, who wish to improve their skills.

SOUTHERN IMPLANTS
At Southern Implants, expertise in research, development and manufacturing of dental implants allow us to provide innovative solutions for everyday implant challenges. We offer a broad range of implants and restorative components that work seamlessly with existing systems while offering unique, innovative features that simplify the most complex challenges. Visit the website at http://www.southernimplants.com for more information.
ACTEON
ACTEON creates and develops high-tech medical devices that enable dentists and surgeons to implement less invasive, safer and quicker operating protocols that are less traumatic for their patients. ACTEON focuses on two added-value technologies that fall within a number of scientific domains and is the global pioneer of these technologies: high-frequency ultrasonics, irreplaceable in dental treatments and specifically developed for high-precision osseous surgery; digital medical imaging, which provides a digital view of the operative sites during micro dental surgery and medical endoscopy procedures.

BIOHORIZONS
BioHorizons is committed to developing evidence-based and scientifically-proven products. This commitment started with the launch of the Maestro implant system in 1997 and remains in full force today with our most recent launches, the Tapered Plus and Tapered 3.0 implant systems. The focus of BioHorizons on science, innovation and service enables our customers to confidently use our comprehensive portfolio of dental implants and biomaterials products making BioHorizons one of the fastest growing companies in the dental industry. BioHorizons helps customers restore smiles in 85 markets throughout North America, Europe, South America, Asia, Africa, and Australia.

CLARONAV
ClaroNav is a Toronto based medical device hardware and software company specialising in surgical navigation products. Navident, its flagship product, is a dynamic freehand guided surgery system for dental implantation. Navident accurately compares the motions of the drill to planned positions, enabling minimally invasive, precise placement of the dental implants.

EUROTEKNIKA – ETK
Founded in 1992 by a French implantologist, etk is a French company specialising in dental implant surgical and prosthetic solutions. The company is always working on developing sensitive implantology, whose vision pairs reliability with technological advancement for the purposes of simpler protocols, making implantology more accessible and affordable. Beyond implants, etk is a partner for action and thinking for dentists and dental laboratories. etk is present in over 30 countries around the world with a network of subsidiaries and exclusive distributors benefiting from the dynamics and supports offered by the company. Discover our new website: www.etk.dental

FOTONA
Lasers are the Heart of our Business. Founded in 1964, only four years after the invention of the very first laser, Fotona is one of the most experienced developers of high-technology laser systems, recognised for the design, manufacture, and support of advanced laser systems for medicine. Fotona customers receive access to professional workshops, individual training sessions, hands-on demonstrations, as well as participation in international clinical studies and international scientific symposiums. When you choose Fotona, you choose a company committed to designing, manufacturing and delivering: The highest performance, best made laser systems in the world.

BICON
THE BICON DESIGN is driven by simplicity. One of the cornerstones of that simplicity is the innovation of SHORT® Implants. When the Bicon system was first introduced in 1985, its 8.0mm length implants were considered quite short—most other implants were at least 12–14mm and sometimes 18–20mm long! Since then, the natural progression of Bicon’s design philosophy has resulted in 5.0mm and 6.0mm SHORT® Implants, all with proven clinical success. Visit www.bicon.com for more information.

BIOTECH DENTAL
Biotech Dental : Le partenaire pour le cabinet du futur. Biotech Dental is a French company founded in 1987 that designs, manufactures and distributes products for dental surgery: implants, prosthetics, intraoral scanner, biomaterial… The company also distributes a range of products for dental care: aligners, ultra-thin veneers, hyaluronic acid, smile analysis software... With 28 years of experience, the Group has become a leading French player in the healthcare field and is now one of the leaders in the dental implant market. More informations on our website: www.biotech-dental.com

BREDENT
The bredent group is the prosthetics expert over 40 years, with pioneering skills in the field of acrylics and high performance polymers as well as the reliable partner for complete, implant-supported treatments, leading in immediate restorations and the antimicrobial photodynamic therapy.

ALPHA-BIO TEC
Alpha-Bio Tec is a recognised global leader in implant technology, well known for the launch of the first Spiral Implant, the pioneer of a new generation of active implants. Alpha-Bio Tec’s innovative solutions are based on more than 28 years of proven clinical know-how, strong in-house R&D comprised of superior engineering and highly experienced clinicians. It is well-rooted in the company’s commitment to deliver sophisticatedly designed, high-quality and intuitively simple solutions for dental specialists worldwide. Contact us in France: 01 49 89 38 50. Find your local distributor: www.alpha-bio.net
and our unique systems echo that belief.

improve the lives of both patients & dentists continues to believe in finding solutions that will impact the world thanks to its unsurpassable immediate stability in any kind of bone. MegaGen continues to believe in finding solutions that improve the lives of both patients & dentists and our unique systems echo that belief.

GLOBAL D
Global D is a French company of Menix Group which specialises in the design, manufacture and supply of high quality medical devices for maxillofacial and pre-implant surgery, orthodontics and dental implantology. We are passionate about what we do, and we develop close relationships with our customers. In addition to our products, which we develop in close collaboration with experienced surgeons, we support all our users in developing their skills. We believe this in mind we have set up a large network of colleagues, and we offer a variety of events, meetings and training courses to give our customers the opportunity to share their knowledge.

IVOCLAR VIVADENT
Ivoclar Vivadent is a global company offering a comprehensive range of innovative products and systems for dentists and dental technicians. What began in Zürich in 1923 with the production of artificial teeth has evolved into a leading international dental company. Headquartered in Schaan, Principality of Liechtenstein, Ivoclar Vivadent AG has been a privately owned company since its inception. Products are shipped from here to 120 countries worldwide. As a global player, Ivoclar Vivadent has its own subsidiaries and marketing offices in 25 countries and with about 3300 employees throughout the world.

IBS IMPLANT
The MAGIC FIN THREAD design along with the revolutionary MAGIC SURGICAL SYSTEM (PBR/BECHCMC techniques), IBS provides for treatments that are simpler, easier, and safer for both doctor and patient. The IBS Implant system has been said to be a “game-changer” by some of the most renowned implantologists throughout the world. Since Bränemark introduced the era of modern implantology in the early 1960s, only minor improvements and small variations have been made to implant and surgical design. From Korea to Europe, the US, and beyond, IBS is making its mark globally as one of the most innovative and prosthetic-driven implant companies in the world.

KEYSTONE DENTAL
Keystone Dental is an oral healthcare company with over 30 years of expertise in the dental implant market that delivers advanced, easy-to-use implants and biomaterials focused on providing the most functional and aesthetically pleasing outcomes possible. Keystone Dental develops, acquires and commercialises oral healthcare technologies that ultimately improve a patient’s treatment and quality of life. Keystone Dental has two production sites in US: Burlington (Massachusetts) and Irvine (California), a worldwide headquarters and R&D in Burlington, a European headquarters and customer service in Verona (Italy) and 5 subsidiaries in Europe with a dedicated sales force.

MEGAGEN
MegaGen, based in South Korea, is currently one of the fastest growing implant companies in the global market, with a growing number of enthusiastic users throughout Europe and the rest of the world. The introduction of the innovative and unique AnyRidge system has resulted in increasing interest from serious implantologists around the world. Thanks to its unsurpassable immediate stability in any kind of bone, MegaGen continues to believe in finding solutions that improve the lives of both patients & dentists and our unique systems echo that belief.

IBS IMPLANT
Implantswiss offers innovative, and superb quality products as a result of Swiss precision and extensive R&D without ever compromising on quality and aesthetic approach. Implantswiss aims to provide personally tailored solutions for patients and improve their life quality. Implantswiss offre des produits innovants de superbe qualité comme un résultat de la précision Suisse et une étendue R&D. Implantswiss vise à fournir des solutions personnellement adaptées pour les patients et d’améliorer leur qualité de vie. Nos produits de marque Implantswiss sont fabriqués avec le principe de la réalisation de perfection, sont distribués dans le monde entier.

MECXTRON
Leader company developing and manufacturing advanced products for dentistry and oral surgery: PIEZOSURGERY®: the original dedicated piezoelectric surgical devices for many oral surgeries. Piezoelectric scalers: both multi-purpose table-top versions with its own water supply and an extremely compact version for connection to the water supply. Air-polishers for supra- as well as subgingival use: table-top unit and quick-fitting polishers for connection to a turbine, plus a special device for prophylactic treatment that combines a piezoelectric scaler and a jet polisher. LED curing lamps: available cordless versions and two versions for dental units.

NUCLEOSS
On the purpose of improving the quality of the surgery and providing more comfortable treatments, we design, develop and present well-qualified and innovative products. We share knowledge, experiments and research with practitioners and academics through TFI Academy in order to lift effectiveness of ongoing R&D studies. As NucleOSS, we embrace a well-qualified, confidential and customer-oriented production with a visible, ethical and principled management. In the light of this, we work more and more as the primary requirement of progression and development within the scope of our innovative and open-minded approach.
OSSTELL
Osstell is the global leader in monitoring implant stability and the progress of osseointegration. The proprietary technology helps dentists around the world to measure the stability of implants objectively and non-invasively using the widely established ISQ scale (Implant Stability Quotient). More than 750 scientific publications validate the benefits of the method, its clinical values and the use of the ISQ scale in daily practice. Dentists are able to more predictably manage risk patients and meet the need for reduced treatment times, while still avoiding premature loading. Osstell is headquartered in Gothenburg, Sweden – the birthplace of dental implants.

OSTEOBIOI
OsteoBiol® by Tecnoss is a product line of collagenated grafting materials for bone and tissue regeneration in dental surgery, produced in Italy and now distributed in over 60 countries. Our mission “to produce a xenogenic bone substitute as similar as possible to autogenous bone” is pursued preserving the mineral and the collagen phase (with its unique biological properties) in each OsteoBiol® granule and avoiding high temperatures, making OsteoBiol® granules gradually resorbable and replaceable by new vital bone.

SIC INVENT AG
The success of the SIC invent group is based on our company slogan “Implants from Implantologists”. SIC invent offers premium products, which have been developed in cooperation with the SIC – Schilli Implantology Circle – under the scientific direction of Wilfried Schilli. The SIC, an internationally organised network of opinion leaders and users of the systems, gives scientific support to SIC invent. Visit us to learn more about SICvantage® max the implant system with an innovative, conical implant-abutment-connection, to be used with and without screw!

SIGMAGRAFT
SigmaGraft is an American manufacturer of dental and orthopaedic biomaterials used in bone regeneration. We are committed to providing innovative solutions for bone graft surgeries. Our bone graft materials are used as medical devices and biomaterials in dental and orthopaedic implant surgeries. These procedures foster new bone growth in regions of loss caused by injuries or diseases.

SUNSTAR
Oral health being interlinked to the health of the whole body, SUNSTAR strives to help people everywhere achieve better oral health and quality of life through its innovative and high-quality oral care products: ranges GUM®, BUTLER® and GUIDOR®, designed to help professionals preserve teeth, tissues and implants. GUM and BUTLER products provide preventative treatment and maintenance products used in conjunction with professional hygiene programmes. GUIDOR portfolio* helps professionals achieve a return to health of diseased or damaged dentition with products to diagnostically test, clinically treat and surgically correct. *Region dependant. Please visit www.sunstar.com

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SWEDEN & MARTINA
45 years of solid experience, subsidiaries in Spain, UK, Germany and the USA and a very good position in over 30 countries in the implantology sector: this is Sweden & Martina. Thanks to scientific research, flexibility and speedy intervention, the company evaluates and promotes innovative clinical concepts, offering concrete and effective solutions: an all-round view that includes in vitro, in vivo and clinical research is the secret behind a sound and secure base. All design and production activities are conducted at the company’s premises in Italy, to assure total and direct control over all aspects of the process, and thus full responsibility for the final product.

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PERIOSYSTEM
PerioSystem is the most innovative dental management software, developed by specialists in Periodontology in collaboration with experts in new technologies. PerioSystem is a full web dental software. Our solution is offering the technological progress to dentists by giving them the keys to improve the productivity of their dental offices, thanks to the automation of administrative tasks. We have integrated four important innovations: voice recognition, motion recognition, facial recognition & augmented reality, which enable doctors to gain in autonomy and efficiency.

TEPE
TePe is a family-owned Swedish company manufacturing and marketing high quality oral hygiene products since 1965. All design, development and production takes place at the headquarters in Sweden. Continuous collaboration with dental experts has made TePe a leading brand in preventive dental care. TePe aims to raise awareness of preventive dental care, interdental cleaning and the connection between oral and general health. TePe has 250 employees and subsidiaries in France, Germany, Italy, Benelux, The Nordic and the United Kingdom. The wide range of TePe’s products is recommended by dental professionals and used by consumers in more than 60 countries worldwide.
TRI® DENTAL IMPLANTS
TRI® Dental Implants is a fast growing global provider for dental implant solutions. Designed and manufactured in Switzerland, TRI® Dental Implants provides high-quality, innovative and easy-to-use implant solutions for the benefit of patients worldwide. At the EAO Booth TRI® introduces its new and outstanding handling concept. The new implant packaging TRI® Pod integrates the latest engineering know-how and innovation. Its revolutionary touchless delivery concept allows to pick-up the implant directly with the surgical hand-piece in one single step. A true design innovation which will take the surgical performance to a new level. Touch it, and you will love it!

W&H DENTALWERK
The family company W&H Dentalwerk, based in Bürmoos near Salzburg, Austria, is one of the leading providers of dental devices in the world. Innovative product and service solutions, a modern corporate structure and a strong focus on research and development – this is what makes W&H Dentalwerk a successful local and global player. With around 1,000 employees worldwide (600 of whom work in the Austrian headquarters in Bürmoos), W&H exports its products to more than 110 countries. The company operates two production sites in Bürmoos (Austria), one in Brusaporto (Italy) and 18 subsidiaries in Europe, Asia and North America.

ZEST DENTAL SOLUTIONS
Zest Dental Solutions (Formerly Zest Anchors) is a global leader in manufacturing and distribution of products for patients caring for their natural teeth, and the treatment of edentulous patients. Zest pioneered pivoting and self-aligning design of the LOCATOR Attachment System, which has evolved to a next generation LOCATOR R-Tx™ Removable Attachment System. Zest’s portfolio also includes LODI and SATURNO narrow diameter implant systems and the CHAIRSIDE® Product Portfolio. Zest recently acquired Danville Materials, carrying dental consumables, micro-etching and air abrasion products and Perioscopy. Zest Dental Solutions corporate headquarters is in Carlsbad, CA.
Techniques and procedures. Membranes for many tissue regeneration.

Grafts are available in a wide range of formats: granules, granules in a matrix mechanical properties while optimising viral safety and sterility. Clinical efficiency: quick and complete osseointegration thanks to two main factors: optimal hydrophilic properties and mechanical resistance similar to natural bone.

BONEMODELS

BoneModels was born in 2011 as a result of a need for getting maxillary and mandibular models, similar to the reality, that simulate a patient’s mouth. Nowadays we reach 40 countries around the world, and each model is designed by Dr Fernando Rojas-Vizcaya. The mission of this company is to improve the quality of training, research and knowledge in the dental sector. The vision is to be an international leader in the design and manufacture of anatomical models, brand Spain, similar to reality and customised through excellence. Our values are: likeness, customisation, innovation & creativity, centrality in the customer, as well as usability & ergonomics.

BOTISS BIOMATERIALS

Botiss biomaterials is a private German, globally leading biomedical company specialising on bone and soft tissue regeneration. We produce and develop innovative regeneration solutions for a wide range of dental applications and market them in >100 countries worldwide. All botiss products are manufactured according to the highest quality controls and scientific standards to offer outstanding biological reliability and performance for a successful and predictable treatment outcome. We focus on biological functionality, safety and reliability. Our innovative technologies are founded on long-standing academic and industrial research and testing.
BRÄNEMARK INTEGRATION AB

In 2001 Professor Per-Ingvar Brånemark with son Dr Rickard Brånemark founded the company Brånemark Integration AB on the principle that the original concept of osseointegration offers the greatest long-term benefit for the implant patient. Brånemark Integration AB and its subsidiary BioSmile Sarl are uniquely positioned to address the fast growing, under-penetrated market internationally. Brånemark is one of the best known “brand” names in this market place worldwide. The group aims to become a major market player offering Simple, Precise and Affordable implant dentistry solutions based on solid science from the country where it all began.

CHIMO DENTAL

Chimo Dental is a company which works with good quality and good price. It is a good business for doctors. From producer to doctor.

DENTAL RATIO

Our brand DENTAL RATIO® stands for high quality and fair prices – Made in Germany by MEISINGER. “Buy smart” is our motto and stands for the link between high product quality and the intelligent use of resources and procedures for cost-effective products. Our aim is to improve the healthcare and quality of life of as many patients as possible by providing them with high-value, fairly priced, dental medical products. Well-known specialists in implantology provide DENTAL RATIO® with professional and scientific counselling and support. DENTAL RATIO® generates cost advantages with the brand manufacturer Hager & Meisinger and these are passed on directly to our customers.

DENTAL STUDIO

It is different from any existing product by other companies. It contains dental studio’s philosophy. A new drill shape only by dental studio ensures your convenient surgery. Our advanced technology leads you to a new road. Our differentiated products provide you with the best solutions. Our design of sense adds the best value to the dentist’s technique. All these arrangements are contained in each product of DENTAL STUDIO. Experience your new satisfaction with DENTAL STUDIO, which you have never experienced before.

BRESMEDICAL

BresMedical is an Australian medical research company with software, design, additive and precision manufacturing capabilities. The company created the ImplaNav system: an integrated software-hardware solution for intrasurgical navigation. It is able to track in real time the position of a cutting surgical tool and create its dynamic representation over a maxillofacial surgery plan. Compatible with multiple surgical techniques, it reduces the risks associated with implant placement. The resulting intraoral surgical navigation system has been tested in approved clinical trials by University of Bologna (Italy) with results being published in relevant literature.

COLLAGEN MATRIX

Collagen Matrix is the driving force in the design, development and manufacturing of collagen and mineral based medical devices for tissue repair and regeneration. We manufacture medical devices for oral surgical, neurosurgical and orthopaedic-spine surgeries. Our full line of products for oral surgeries include membranes, anorganic and synthetic mineral bone grafts, and mineral-collagen composites are available in the U.S. and global dental community. We are seeking global independent distributors and partnerships/joint ventures with established medical device companies.

CENDRES & METAUX

Innovation – Precision – Partnership. Cendres+Métaux roots date back to 1885 and over the years, the company located in Biel/Bienne, Switzerland transformed into a dynamic group. We develop and manufacture precious metal alloys for the crown and bridge technique as well as attachments for ensuring functional and aesthetical hold of dentures in prosthetic dentistry and implant-supported reconstructions. With the CM LOC® anchor system, deviations of up to 60° (± 30°) can be corrected, thus significantly reducing wear. Meet our experts and discuss our leading brands: CM LOC®, Pektort®, Dalbo®, Dolder®, Ceramicorr®, Elitor®.

DATUM DENTAL

Datum Dental Ltd. was founded in order to develop, manufacture and market dental biomaterial products for tissue and bone regeneration. Datum Dental develops sugar based cross-linked collagen products for GBR and GTR. Our newest GLYMATRIX® based product – OSSIX® VOLUMAX – joins the renown and scientifically proven OSSIX® PLUS resorbable collagen membrane, in use since 2006. These GLYMATRIX® based products are designed to cover a wide range of dental regeneration procedures. GLYMATRIX® is a patented collagen cross-linking technology, producing a collagen matrix, which can be tailored to deliver products of varying physical properties and customised longevity.

DENTATUS

Dentatus, founded in 1930 is known worldwide as a designer of systems and manufacturer of innovative high quality medical devices used in the dental field. Dentatus’ specialised implant systems widened the horizons of what can be done in dental implantology when introduced in 2004. The narrow body implants Atlas (for denture retention) and Anew (for single tooth prosthetics, multi-unit restorations and removable dentures), and the innovative prosthetic components are used for patients with thin ridges and limited spaces. The implant range is available from a large number of dental dealers throughout the world.
DOWELL DENTAL PRODUCTS
DoWell Dental Products stands out for superior product quality and competitive prices. We are a company specialising in manufacturing dental instruments. We use high-purity stainless and satín steel, minimising the fatigue that occurs during treatments. PiezoART, an ultrasonic bone cutting system, is driven with piezoelectric technology, designed for osteotomy and osteoplasty used in implantology, periodontology, endodontics and orthodontic surgery which features elaborated cutting for surgical precision and intra-operative sensibility, and selective cutting for hard tissues without causing any damage to soft tissues.

G.COMM
G.COMM is producing the operating light IRIS VIEW, a dental light with a Full HD video camera and autofocus with a 30x optical zoom. Iris View allows recording and broadcasting of an operation in HD. That is useful in various scientific contexts such as conferences, conventions and university lectures. The lamp can be controlled by an App, MyLight, using an iPad. Through a regulation system, it’s possible to adjust the colour temperature to improve the contrast on soft tissues. Three colour temperature preset programmes are available: Anti-Polymerisation Mode, Surgical Treatment, Colour Capture. The geometry of reflectors allows an optimal sciatic effect.

GLIDEWELL LABORATORIES
Gladewell Dental is a privately owned corporation that has more than 46 years of history as a provider of high-quality restorations to dental practitioners in the United States. With industry-leading CAD/CAM processing capabilities and a Patients First philosophy, Gladewell aims to make comprehensive dental treatment more affordable around the world. Clinicians can choose from a vast array of products, including award-winning BruxZir® Solid Zirconia crowns & bridges and Hahn Tapered Implant™ components. To view its large selection of clinical videos, press releases, visit the Gladewell Dental website, http://glidewelldental.com/convention/eao.

DSP BIOMEDICAL
DSP BIOMEDICAL is a dental implants and prosthetic abutments manufacturer, with 15 years of existence, based in Campo Largo, Curitiba, Brazil. It’s present all over the Brazilian market, and exports to several countries worldwide. For DSP BIOMEDICAL the customers’ satisfaction is the main goal, as well as the constant research and development of new technologies in a way to assure the constant commitment to manufacturing high-quality dental products at an affordable price. Establishing an excellent cost benefit choice on the market of dental implants and prosthetic abutments.

GC TECH
In the course of specialisation within the global GC Group GC Tech GmbH, divisions Implants and CAD/CAM, was founded in 2014. Profiting from expertise within the GC Group, GC Tech combines Japanese and European Art of Engineering to facilitate practitioners’ daily work. In this way, GC Tech makes its contribution to 21st century health care. The ‘Aadva’ Solution is a reliable, efficient and safe system, based on multiple evidence in practice and science. Furthermore GC Tech supports clinical research. For more than 3 years, Prof Marc Quirynen – KU Leuven – works on a new study of L-PRF in implant dentistry. It’s a pleasure for us to invite you to the world of Aadva!

HAGER & MEISINGER
Since 1888 MEISINGER has been one of the world’s leading developers and manufacturers of rotating high-tech instruments in the field of dental technology. The range of drills; milling, finishing, grinding, and polishing tools; instruments; and special instrument systems (for endodontia, orthodontia, ENT and mouth, jaw and facial surgery, and oral implantology) comprises around 12,000 products. 45 million individual instruments are manufactured and sold every year in more than 100 countries. With 128 years of experience, highly qualified staff, as well as state-of-the-art technical facilities, MEISINGER produces valuable instruments with high quality “made in Germany”.

HU FRIEDY
For over 100 years, Hu-Friedy has been a valued partner in the dental field. With more than 10,000 products in a wide range of specialities we offer you high quality instruments for surgery, diagnostics, periodontology and more. We lead the industry in innovation and technology development. Our products are meticulously produced by our own in-house, highly skilled artisans, and we provide the highest level of service to our customers – before, during and especially after the sale. We have a passion for performance, and we are delighted to be able to help you perform at your best. Visit us at our booth B37 at the EAO Congress in Paris to learn more!
INTRA-LOCK
Intra-Lock® is a leading provider of biologically driven dental restorative solutions including a wide range of dental implants, biomaterials and prosthetic components. Intra-Lock Dental Implant Systems, including BLOSSOM®, Gold & Blue™, EnvisionOS™, MILO®, and MDL®, incorporate a full spectrum of designs from 2.0mm to 6.5mm in diameter. All Intra-Lock® Dental Implants feature the bioactive surface OSSEAN® which promotes rapid early healing and increased biomechanical fixation. Intra-Lock also provides the implant clinician with the only FDA cleared medical device for the production of L-PRET™-IntraSpin™ - optimised to ensure proper performance for graft delivery.

JAPAN PROSTHODONTIC SOCIETY
Japan Prosthodontic Society (JPS) was founded in 1933, and has 6,807 members. JPS is committed to the development and study of Prosthodontics including implants, and authorises prostodontic specialists. The official journal of JPS is Journal of Prosthodontic Research and its 2015 IF is 1.693.

KOINE ITALIA
Koîne Italia – surgical instruments for dentists made in Italy. Brand leader in medical sector, is well represented in the major fairs and congresses in Europe.

I-RES
iRES®, dynamic and flexible company attentive to professionals’ demanding needs, offers a wide range of products for oral surgery, regenerative material (bone substitutes), implant systems, guided surgery, prosthodontics custom made, high scientific level courses and programmes with popular opinion leaders, making use of specialised production units with more than thirty years of experience in the medical field. An international staff of professionals has combined practical experience and scientific knowledge, facilitating procedures and improving performance, providing an innovative product concept. The sales system is based on Continuing Education.

JAPANESE SOCIETY FOR ORAL IMPLANTOLOGY
Japanese Society for Oral Implantology (JSOI) was established in 1972 and currently hold about 14000 members. It has been a leading society for implant related basic and clinical research as well as training specialist. International Journal of Implant Dentistry is an open access journal and was launched in 2014 as the joint project with German Implant Society (DGII).

LASAK
LASAK focuses on the development and manufacture of innovative healthcare products, particularly bone regeneration materials and dental implants. LASAK has developed a new surface treatment of titanium which exhibits unique properties enabling faster, safer and more predictable implant healing. The first hydrophilic, bioactive surface was launched by LASAK to the European market in 2000. Based on 20 years of experience and following the latest trends in implantology, LASAK launched a new system of dental implants BloniQ in 2013. LASAK produces several types of bioactive materials for bone regeneration, under the brands, PORESORB-TCP and OssaBase-HA.

KLOCKNER IMPLANT SYSTEM
KLOCKNER IMPLANT SYSTEM is a global leader and pioneer in the field of implantology. Since its establishment in the year 1987, the company has always been driven by its two main pillars: Science and Education. KLOCKNER IMPLANT SYSTEM is present in many countries around the world thanks to an ambitious internationalisation project and a wide distribution network. The mission of KLOCKNER IMPLANT SYSTEM is to help our doctors to achieve excellency in their treatments by offering our unique portfolio of high quality products and scientific rigour.

LEONE
The history of Leone began in 1934 when Mario Pozzi started his business activity and adopted the lion head of Marzocco, the Florentine symbol of excellence, as his trademark. Today the manufacturing facilities are located in the west region of Florence and spread out over approximately 10,000 m², with 135 employees. Leone Spa is the leading Italian manufacturer of orthodontic products and, since 1993, it has been a member of the O.M.A. (Orthodontic Manufacturers Association) which incorporates the 12 worldwide leading orthodontic manufacturers. In 2001 Leone expanded its production introducing the Leone “Implant System”, a complete dental implant System.
NSK

NSK is a Japanese company created in 1930 by Keiichi Nakanishi and now managed by his grandson Eiichi Nakanishi. NSK produces dental rotary instruments and materials for surgery, hygiene, laboratory, endodontics and periodontics applications. NSK is the world leader in the dental rotary instruments business, with 13 subsidiaries all over the world. It exports its products in 135 countries. The French subsidiary was created in 2005 and it’s composed of 25 collaborators. Find us at our Japanese stand B56 to discover our material dedicated to surgery and implantology applications.

LIFENET HEALTH

LifeNet Health helps save lives, restore health, and give hope to thousands of patients each year. We are the world’s most trusted provider of transplant solutions, from organ procurement to new innovations in bio-implant technologies and cellular therapies—a leader in the field of regenerative medicine, while always honouring the donors and healthcare professionals that allow the healing process.

NEOSS

Neoss is an innovative developer of dental solutions founded by Mr. Engman and Professor Meredith. By forging strong relationships with a wide range of clinicians, academics and engineers, we have created an implant system that redefines the word simplicity. It is built around a single platform concept which allows you to work with seven different implant diameters with only one set of instruments and fewer prosthetic components. Neoss head office is located in the UK and we operate in Australia, Austria, Croatia, Denmark, Germany, Italy, Japan, Middle East & Africa, Netherlands, New Zealand, Norway, Poland, Republic of Ireland, Spain, Sweden, Switzerland, Thailand, Turkey and United States.

META

Effectiveness, simplicity, hi-tech: these are META’s key guidelines. From the very first outline of the project, to the definition of the complete manufacturing and commercial plan, META sees that everyone in its departments is fully committed to creating something that follows two fundamental criteria: the simplification and the improvement of the current clinical and surgical procedures. The ultimate expression of META’s commitment takes the shape of a series of innovative devices that actively contribute to the technological and scientific improvement of the whole medical field.

NORAKER

NORAKER has specialised in the design, production and sale of synthetic and absorbable biomaterial-based implantable medical devices for regenerative medicine. Its strategy has been built on differentiation through innovation using bioactive glass. This strategy has been an innovative alternative to first-generation biomaterials, which combines osteostimulation and bioactivity to promote the natural bone regeneration. NORAKER develops a specific range of products for tissues engineered solutions for regenerative medicine for GBR and GTR. For the EAO congress 2016, NORAKER proposes to its dental surgeons a new resorbable bilayer synthetic membrane.

OMNIA

For more than 25 years Omnia has been developing and producing sterile and non-sterile disposables, thanks to our experience in the dental field and co-operation with leading surgeons. Our products are aimed at everyday use and realised to avoid infections and cross contamination. Surgical Line: a complete range of sterile surgical accessories meant for simple routine implant surgeries and more complex maxillofacial surgeries. Safety Line: a selection of non-sterile barriers and hygiene products for everyday use in dental practices. Maxil®: a complete offer of surgical instruments specifically developed for implantology and maxillofacial surgeries.

MORITA

There’s a very good reason why dentists and doctors worldwide place their trust in Morita’s products. Under family management, our company is characterised by maximum quality awareness, a strong working relationship with our customers and reliable values. With this philosophy, we have been operating successfully on the market for 100 years! A century of innovations from endo products like DentaPort ZE, handpieces, chairs, X-Ray devices and our 3rd generation of Erb. YAG laser.

NORABONE

NovaBone products focus on developing bone graft substitutes based on advancements in biomedical engineering that would meet the specialised needs of orthopaedic and dental surgeons. NovaBone® Dental Putty was the first bioactive synthetic bone graft offered to the dental community, and it represents the next generation Calcium-Phosphosilicate bone graft substitute engineered for enhanced handling and improved performance.

OSTEONEGENICS BIOMEDICAL

Osteonegenics Biomedical was founded in 1996. Headquartered in Lubbock, Texas, USA, Osteonegenics Biomedical has grown into a leader in the dental bone grafting industry serving Periodontists, Oral & Maxillofacial Surgeons, and clinicians involved in regenerative and implant dentistry throughout the world. The company’s core brands include Cytoplast™ Barrier Membranes, Cytoplast™ PTFE Suture, Zcore™ Porcine Xenograft, Vitala® Porcine Pericardium Membranes, and the Pro-Fix™ Precision Fixation System.
IDSAB is behind the new concept PenguinRFA which measures implant stability and osseointegration. PenguinRFA is the result of more than twenty years’ research and development by a small, dedicated team. Their experience and close relationship with specialists across the world has been instrumental in creating the PenguinRFA concept. The project’s defining ambition has been to offer an affordable and uncomplicated concept for all clinicians working with implants. The instrument is handheld and the Multi-peggs are autoclavable and re-usable which makes the concept extremely user friendly. For more information please visit us at booth B53. Welcome!

REGEDENT AG is a Swiss-based company with its headquarters in Zürich. REGEDENT develops, manufactures and markets innovative, clinically proven solutions in regenerative and implant dentistry for optimised treatment and long-term patient care. Thanks to many years of extensive experience in the fields of regenerative and implant dentistry, REGEDENT offers high-quality, customer-tailored products and solutions enabling regenerative professionals to improve their patients’ health and quality of life. In 2015, REGEDENT successfully launched SMART-BRANE – the smallest 10x10mm membrane. Visit us at our booth to get to know our latest innovation: BE SMART!

SAEYANG MICROTECH Co. highly specialises in the research & development of micro motor handpieces with its state-of-the-art technologies that have been accumulated since its foundation in 1976. SAEYANG has been consistently pursuing technological innovation and investing in research & development to create the masterpiece. Today, the outstanding products created by SAEYANG are distributed to over 100 countries around the world and recognised as one of the best products. Ki-20 is the best implant engine in Korea. Speciality, quality and design of handpiece and motor has received a favourable review from many dentists in the world.

Planmeca Oy is one of the world’s leading dental equipment manufacturers with a product range covering digital dental units, CAD/CAM solutions, world-class 2D and 3D imaging devices and comprehensive software solutions. Headquartered in Helsinki, Finland, Planmeca’s products are distributed in over 120 countries worldwide. With a strong commitment to pioneering innovations and design, Planmeca is the largest privately held company in its field. Planmeca Oy is part of the Finnish Planmeca Group, which operates in the field of health care technology. The group reached a turnover of EUR 734 million in 2015 and employs 2,700 people worldwide.

PenguinRFA

The PROCESS FOR PRF Company is the leader all over the world and the conceptor of the PRF technique. The concept of Platelet Rich Fibrin™ by Dr CHOUKROUN aims to accelerate hard & soft tissues and bone regeneration throughout known surgical techniques and new treatments concepts.

www.a-prf.com

Saeshin Precision co., Ltd. has manufactured and exported dental implant engines and angles for the first time in Korea since 1976. “X-CUBE” and “TRAUS” are representative brands of Saeshin for dental implantology field. We are specialised for OEM & ODM projects for our customers. Please do not hesitate to call us if you have a special request.

Saelent

Since 1975 Silfradent specialises in the production of instruments for dental laboratories and since 2003 produces medical instruments. The constant support of customers, a motivated staff and an organised distribution network of dental depots has helped Silfradent to become the leader in Italy and all over the world. On medical field, in 2008/2009 Silfradent carried out an important research on the activation of growth factors and on the separation of blood components (C.G.F . Concentrated Growth Factors) and on the separation of blood components and on the separation of blood components. In 2008/2009 Silfradent carried out an important research on the activation of growth factors and on the separation of blood components and on the separation of blood components. The PROCESS FOR PRF Company is the leader all over the world and the conceptor of the PRF technique. The concept of Platelet Rich Fibrin™ by Dr CHOUKROUN aims to accelerate hard & soft tissues and bone regeneration throughout known surgical techniques and new treatments concepts. www.a-prf.com

www.a-prf.com

The French Society of Periodontology and Oral Implantology (SFPio) is a national scientific society specialised in Periodontology and Implantology which works to promote the awareness and treatment of periodontal disease. The SFPio is a member of the European Federation of Periodontology (EFP) and The French Dental association (ADF). It’s a confederation of 15 regional societies with more than 1100 members composed of periodontist, implantologist and general practitioners. The SFPio publish a review “Objective Paro” for its members three times a year. Each year the SFPio organises a congress, and this year the theme was: “The Perio Patient: therapeutical confluences”.
TBR GROUP
TBR Dental Group is the 1st French dental implant manufacturer, celebrating next year its 30th anniversary. TBR Dental Group is by your side to provide you with all the tools, products and information essential to your practice of dental implantology. Your profession is above all a human adventure, same as our bond with you. Therefore, we focus all our efforts not only on our product but also on the pleasure of use they bring. TBR Dental Group has introduced the Z1 concept into the dental implantology universe through its patented zirconia collar soft tissue level implants. Discover or rediscover a reliable company, true to its values and, above all, loyal to its users. http://www.tbr.dental

USTOMED INSTRUMENTE
Ustomed – that means dental instruments from Tuttlingen, one of the major centres for instruments worldwide. This direct distributor specialises in instruments for dental, oral and maxillofacial surgeons. The company designs, develops and distributes dental instruments for dentists working in the fields of surgery, implant dentistry, periodontics, osteosynthesis and augmentation. Close contact with its end customer guarantees excellent service and outstanding competencies in the fields of instrument reprocessing, sterilisation and organisation.

TI- OSS
Ti-oss is a manufacturer of state-of-the-art quality biomaterial products for bone repair and regeneration in oral/maxillofacial surgery. Our cancellous bone substitutes are proudly introduced to the dental society as natural inorganic materials with no single trace of protein or allergic reactions. Ti-oss’s privileged products are exported to more than 30 countries worldwide, proven safe and effective with CE, ISO 13485, KGMP, KFDA, and USFDA certifications.

X-NAV TECHNOLOGIES
X-Nav Technologies is the maker of the X-Guide® Dynamic 3D Navigation system for more accurate surgery. This revolutionary system extends the capabilities of 3D imaging for simplified and more accurate implant procedures. X-Guide delivers interactive, turn-by-turn guidance to improve the precision and accuracy of implant POSITION, ANGLE and DEPTH. X-Nav delivers the only live, 360-degree single-view of implant position, drill movements and anatomy during surgery to confidently transfer your 3D treatment plan to the patient, with ease. Same-day guided surgery can be a reality at just a fraction of the cost of traditional guides. www.X-NavTech.com

TBR GROUP

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TI- OSS

X-NAV TECHNOLOGIES

EAO
EUROPEAN ASSOCIATION FOR OSSEOTREATION

CONGRESS

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Written by a highly respected and innovative surgeon, this book presents an unconventional implant treatment strategy for the esthetic restoration of anterior teeth that has proven effective over years of clinical experience. In addition to reviewing biologic principles, treatment planning, indications, esthetic analysis, and prosthetic options, the author focuses on factors such as gentle tooth extraction, precise implant positioning, criteria for one- and two-stage implant placement, and most importantly, a wide range of soft tissue management techniques in his approach.

This book also presents techniques to improve the esthetic outcome of any dental implant therapy, regardless of treatment strategy. With more than 4,000 clinical images and illustrations of all procedures and techniques discussed, this tour de force by a leader in implant dentistry raises the reader’s awareness of the high demands of implant dentistry and how clinicians can achieve optimal results.

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