Dentistry’s ‘Legends, Illusionists and High Rollers’ reveal techniques

AACC annual scientific session in Las Vegas April 18–21

The American Academy of Cosmetic Dentistry (AACD) 33rd Annual Scientific Session will be held from April 18–21 (Tuesday–Friday), in Las Vegas, Nevada.

The conference, described by organizers as “the world’s largest continuing education program for cosmetic dentistry” will feature more than 35 hands-on workshops, 60 lectures and 100 speakers. The annual event typically draws between 1,300 to 1,500 dental professionals and includes courses and events serving dentists, lab technicians, hygienists, and dental team members to help them refine their skills, learn the latest techniques and share ideas.

General session speakers

The 2017 conference will take place at the Venetian Resort Hotel & Casino and will feature three groups of educators: the “Legends,” the “Illusionists” and the “High Rollers,” who will reveal their techniques and share their expertise.

The Venetian Resort Hotel & Casino is one of Forbes Travel Guide’s Four-Star hotels for the 13th year in a row and has been described as being one of the seven “Greatest Hotels in the World.”

General sessions at AACD 2017 in Las Vegas will feature some of the industry’s top speakers with messages for the entire dental team. Speakers include:

• Daniel “Rudy” Ruettiger, who overcame obstacles and criticisms to attend Notre Dame and play football for the Fighting Irish. As fans cheered “RU-DY, RU-DY,” he sacked the quarterback in the last 37 seconds of the only play in the only game of his college football career. He is the only player in the school’s history to be carried off the field on his teammates’ shoulders. Today, he is considered to be one of the most popular motivational speakers in the United States.

• Doug Hanson, an internationally recognized speaker, consultant and peak-performance coach, will reveal why businesses with high expectations and a positive approach are innovative, efficient, productive, have lower costs, lower turnover, fewer distractions and are quicker to respond to change. Hanson will show how great teams create relationships that last a lifetime.

• Dr. Jackie Freiberg will lay out the preconditions leaders must create to ensure that “innovation” is a deeply embedded part of your practice’s cultural DNA, where teams are hungry for change and inspired to find innovative ways to overcome challenges in part by reducing costs while improving quality of patient care. Freiberg will share strategies for collaborating, thinking creatively, turning liabilities to assets and finding ideas outside of your industry. Attendees will learn how the most creative companies in the world innovate beyond customer expectations.

The AACD is the world’s largest non-profit member organization dedicated to advancing excellence in comprehensive oral care that combines art and science to advancing the acceptance by patients. Our colleagues in medicine, such as dermatologists and ophthalmologists, have used lasers for years for myriad reasons. Visiting a dermatologist’s office recently, I observed a variety of large, bulky and costly lasers. The different types have been needed because the doctor’s choice of laser power source will vary based on the desired outcome goals for the procedure. Dermatological procedures are chiefly concerned with soft tissue — its responses and reactions defensively as well as offensively.

As has been true with general medical uses of lasers, the laser systems recommended for dentistry have been relegated primarily to soft-tissue procedures. The reason for this is that with the exception of relatively recently introduced technology, using lasers on hard tissue in dentistry would typically cause desiccation of the tooth or bone being treated.

Periodontal esthetics with soft-tissue lasers

The use of lasers in dentistry — and in medical procedures in general — has made great strides in recent years, not only in effectiveness but also in acceptance by patients. Our colleagues in medicine, such as dermatologists and ophthalmologists, have used lasers for years for myriad reasons. Visiting a dermatologist’s office recently, I observed a variety of large, bulky and costly lasers. The different types have been needed because the doctor’s choice of laser power source will vary based on the desired outcome goals for the procedure. Dermatological procedures are chiefly concerned with soft tissue — its responses and reactions defensively as well as offensively.

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By David L. Hoexter, DMD, FACD, FICD
Editor in Chief

Clinical

The Venetian Resort Hotel & Casino, host site of AACD17, is one of Forbes Travel Guide’s ‘Greatest Hotels in the World.’ Photo/Provided by Venetian Resort Hotel & Casino

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leaving the affected hard tissue dried out and brittle. Early laser technology that was promoted as appropriate for hard-tissue procedures made lots of noise, costs for money and at best achieved minimal and limited results. Recently, however, new laser technology for use on hard-tissue dental structures has proved to be more capable of meeting goals of both practicality and effectiveness.

This article, though, will limit its focus to the soft-tissue side: specifically, achieving desired esthetic results by using soft-tissue laser technology to treat gingival hyperplasia.

My personal experience with lasers dates back more than 25 years to when I bought a CO2 laser for my private practice. It was an adventurous and costly (about $60,000 in early ’90s dollars) commitment. There were no laser dental societies back then—just a few of us dentists trying to find newer techniques to more effectively and comfortably achieve the results our patients desired. Hyperplasia of epithelial tissue of the gingival area breaks the smooth appearance of the periodontal tissue, compromising esthetic goals. It also makes it difficult for patients to maintain good oral hygiene, leading to inflammation of tissue and increasing risk of progression to periodontitis.

Case 1

As illustrated in Fig. 1, a patient presented in my office with a singular localized dense hyperplastic area, confirmed through oral examination. The 31-year-old female had neat clothes and clean, well-maintained hands and nails. She related how difficult the local area was to clean, describing that cleaning efforts hurt and caused bleeding, especially when she brushed. The local area also didn’t look clean visually, creating an unesthetic plastic situation in the maxillary anterior. Dr. Karl Leinfelder

Figs. 5–8. The figures and captions document the treatment of a simple local hyperplastic tissue area, as well as a complex acutely inflamed hyperplastic area.

Conclusion

In both of these cases, the patients were treated by using a soft-tissue laser to achieve correct, desired results. While any soft-tissue laser system might have achieved similar results, in these cases, a diode AMD Picasso laser was used. I chose this particular laser primarily because of what I consider to be its reasonability cost when compared with others, its ease of use and the disposables tips that make it easy to maintain sterility.

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- **Local information**: Access details on restaurants, hotels, travel arrangements, weather and shopping.

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(Source: AACD)
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