Cetacaine Topical Anesthetic Liquid Kit

Cetylite’s new Cetacaine® Topical Anesthetic Liquid Kit is ideal for scaling and root planing, providing patients with effective, non-injectable, cost-effective anesthesia.

Only $2 for a full-mouth application, the included 14-gram bottle yields up to 34 full-mouth applications.

The new unique dispenser cap for Luer-lock syringes allows the clinician to use only what he or she needs, not exceeding a 0.4 ml maximum dose.

Cetacaine’s triple-active formula (14 percent benzocaine, 2 percent butamben, 2 percent tetracaine hydrochloride) has onset within 30 seconds and duration typically lasts 50 to 60 minutes.

The kit contains a 14-gram bottle of Cetacaine Topical Anesthetic Liquid with dispenser cap, 20 Vista™ 1.2 mL Luer-lock syringes and 20 Vista-Probe™ 27 ga tips.

Cetylite now offers a 14-gram or 30-gram replacement bottle of Cetacaine Liquid with the Luer-lock dispenser cap.

The cap fits all Luer-lock syringes. This unique design also allows for the single dip of a microbrush, which is ideal for pre-injection or other procedures requiring site-specific topical anesthesia.

During the Chicago Midwinter Meeting, the company will offer as a show special: a free 14-gram bottle of Cetacaine Liquid to anyone who purchases three 14-gram bottles or one Cetacaine Liquid Kit, as well as a free 30-gram bottle with purchase of three 30-gram bottles.

For more information about Cetacaine, visit www.cetylite.com. You may also stop by the Cetylite booth, No. 4623, during the Chicago Midwinter Meeting.

Bluetooth-enabled apex locator

ApexNRG Blue is the world’s first and only Bluetooth-enabled apex locator. It can be used with or without a handpiece. This locator can be used as a conventional apex finder with audible and visual indicators. The user will find it to be extremely accurate and easy to use.

When the Bluetooth feature is activated, a large image will appear on the user’s computer screen showing the file advancing to the apex. This feature allows the patient to follow along and gives the practitioner three ways to measure progress: audibly, visually and computer assisted.

Pricing of the ApexNRG Blue is similar to a standard apex locator. It is easy to use with your current apex location procedures and no calibration is required.

The ApexNRG Blue can be used with or without the companion patient treatment software that comes with the unit. Progress of the apex location procedure can be shown on one or more computer monitors.

The unique digital signal processing (DSP) of the unit provides precision of 0.1 mm in all canal fluids.

The ApexNRG Blue is the only apex locator in the world that comes with a 50-month warranty.

See the ApexNRG Blue in action at the Chicago Midwinter Meeting at booth No. 4728. Or, visit www.medinc.org or call (888) 429-0240 for additional information.
Pentron’s new core material offers high depth of cure

Pentron Clinical, a leader in post and core technology, is proud to introduce new Build-It® Light Cure Core Material.

Build-It Light Cure Core Material is specifically designed for clinicians that favor the on-command cure afforded by light-cure only core materials.

The light-cure only formula produces outstanding physical properties and is compatible with 4th through 7th generation bonding agents, ensuring compatibility with your preferred bonding agent.

The Build-It Light Cure addition to Pentron Clinical’s award-winning line of Build-It Core Materials cures to a depth of 10 mm with only 20 seconds of curing time per surface without the need for time consuming layering.

Pentron Clinical Technologies product manager Jeremy Grondzik said, “Ideal handling characteristics together with the ability to instantly light cure to a depth of 10 mm puts the clinician in complete control of the core build-up procedure from start to finish.”

Once cured, Build-It Light Cure performs just like the original Build-It FR™, meaning it sets to a rock-hard consistency that cuts like dentin. Non-sticky, sculptable handling that enables quick and easy adaption to tooth structure and the post are made possible by a proprietary new BisGMA-free resin.

To satisfy individual dispensing preferences, Build-It Light Cure Core Material is available in both a syringe and single dose delivery option.

Build-It Light Cure Core Material is one of the latest innovations from Pentron Clinical, an established leader in the dental consumables industry, offering a wide variety of affordable products to suit your restorative needs. As one of the pioneers of fiber post and nano-hybrid composite technologies, Pentron Clinical continues to demonstrate its commitment to the technological advancement of dentistry.

The company’s portfolio of innovative and award-winning dental products includes: Fusio™ Liquid Dentin, Bond-1® SF Solvent Free SE Adhesive, Mojo™ Light Cure Veneer Cement and FibreKleer® Posts.

For more information, call (800) 551-0283 or visit www.pentron.com. You may also visit booth No. 3413 at the Chicago Midwinter Meeting.
Implants begin at the moment of extraction

Directa’s Luxator instrument is a specially designed periodontal ligament knife with a fine tapering blade that compresses the alveolar, cuts the membrane and gently eases the tooth from the socket. It was invented and designed by Dr. Lars Rundquist, a Swedish dentist and specialist in maxillofacial surgery. Here is what Rundquist wrote about this instrument:

The requirement for an atraumatic method of tooth extraction has been emphasized much recently in the field of dentistry.

Tooth extraction is to be performed with a minimal loosening and removal of the tooth from the root, thus allowing the final insertion of implants to be achieved. Even the periodontal ligaments can be inserted to a deep level if the operation is initiated or accomplished on the root, thus allowing the final insertion of the implant.

The potential to improve close-up vision, even beyond our 4.5x loupes, is essential that there is as little bone loss as possible during extraction to obtain an optimal prognosis.

The increased number of patients under medication with anticoagulants, who often are not allowed to interrupt their medication when a tooth is to be extracted, requires extreme care to avoid postoperative bleeding. It is also necessary to strive for as little damage to the tissues as possible to receive the optimal possibility for local haemostasis.

Patients treated with irradiation or cytostatics must be treated with minimal trauma to diminish the risk of postoperative infections.

The possibilities of avoiding unnecessary trauma when extracting teeth are considerably increased if the operation is initiated or accomplished by employing a Directa Luxator to widen the alveolus and loosen the periodontal ligaments.

The delicate tip of Luxator Original can be inserted to a deep level on the root, thus allowing the final loosening and removal of the tooth to be performed with a minimal amount force.

During my many years as an oral surgeon, I have found that the use of Luxator instruments is indispensable to meet the demands for an atraumatic method of tooth extraction. Dr. Lars Rundquist is a former member of the Department of Oral Surgery and Oral Medicine, Faculty of Odontology, University of Lund, Malmö and the Department of Maxillofacial Surgery, Institute of Odontology, Karolinska Institute, Huddinge, Sweden.

Enhancing dentistry with the dental-video procedure scope

The MagnaVu dental-video procedure scope by Magnified Video Dentistry

By William Domb, DMD

Every once in a while a dental product comes along with the ability to change our lives for the better, such as the high-speed handpiece.

The Dental Procedure Scope is also one of those powerful tools.

We originally saw the MagnaVu by Magnified Video Dentistry at a trade show and immediately saw the potential to improve close-up vision, even beyond our 4.5x loupes.

Our dental supply dealer simply removed our current exam light and replaced it with the MagnaVu.

The MagnaVu provides us better lighting — up to 24x magnification — and allows us to sit up in a more comfortable, upright and ergonomic position while working from a hi-res LCD display similar to what medical surgeons have been doing for years.

The MagnaVu provides the same images and orientation as I see with my eyes, so after a short training session, it only took me about a week to transition from looking directly at the patient to working from the screen with a natural tactile sense and depth perception.

The nice thing is that the MagnaVu doesn’t change the way I perform procedures, it just enhances what I have always been doing.

In the past, I used to sit like a pretzel, bent over my patient in all sorts of back-contriving and straining angles.

With the MagnaVu, I now have the option of sitting up and working in high magnification; now it’s rare that I put on my loupes.

I got the MagnaVu because I wanted to see better, but then we observed an even more profound effect: I’ll probably practice years longer because I’m no longer killing my back and neck.

Eventually, nearly every dental staff member will experience some degree of back, neck or eye strain, and many of us are forced to retire earlier than we had planned.

Before I began using the MagnaVu scope, by every afternoon I’d start to feel a burning sensation around the region of the right scapula, sometimes radiating up into the shoulder.

Now, however, even though I am working out of several operating rooms and only have the MagnaVu in two of them, I am consistently making it through the afternoons with little or no squawking from my back and shoulder.

I now have increased magnification, better lighting, improved patient understanding and I end up feeling less fatigued during the day and after work.

Using the MagnaVu Dental Procedure Scope is just a great way to spend your day.

FDI Annual World Dental Congress
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Salvador da Bahia, Brazil

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