INTERNATIONAL
DENTAL CONGRESS

EGYPTIAN DENTAL ASSOCIATION

In Collaboration with

FUTURE UNIVERSITY

The 16th International Dental Congress

For a Better Oral Health & Better Smile

Cairo City Stars Intercontinental Hotel

5th - 8 th November 2013

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Honorary President of the Congress

Professor

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President of the EDA and the Congress

Chairman of Scientific Program Committe

Professor

Mohamed Riad Farid

Vice President of the EDA and the Congress
Chairman of Correspondence Committee
and Scientific Committee

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Salah Hamed

Secretary General of the EDA and The Congress
Chairman of Scientific Committee
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Chairman of Workshop Committee
Member of Exhibition Committee
and Reception Committee

Professor

Tarek Abbas Hassan

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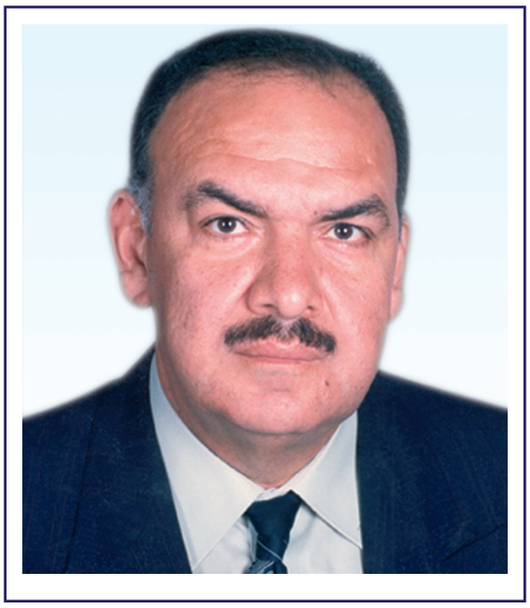
Chairman of Social Activities Committee
Member of Scientific committee and Press Committee



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Professor

Mouchira Salah-El-Din

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Professor

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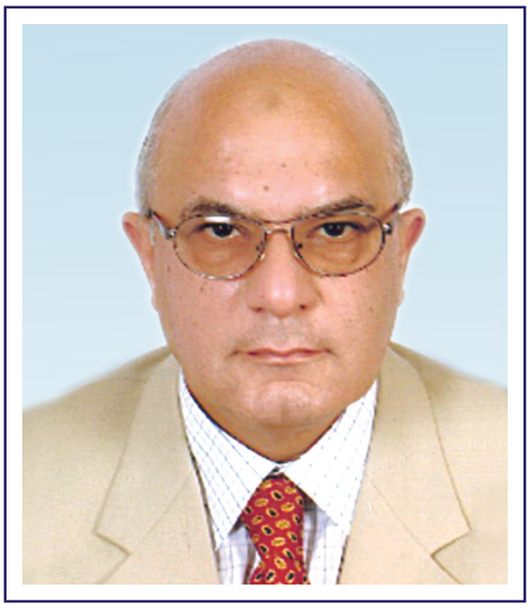
Chairman of Exhibition Committee Coordinator of FUE & EDA

Member of Scientific Programs Committee and Scientific Committee and Social Activities Committee



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Ibrahim E. Shindy

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Hesham Katamesh

Executive Director of the Congress
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Member of Workshop committee

Professor

Reda Abdel- Rahman

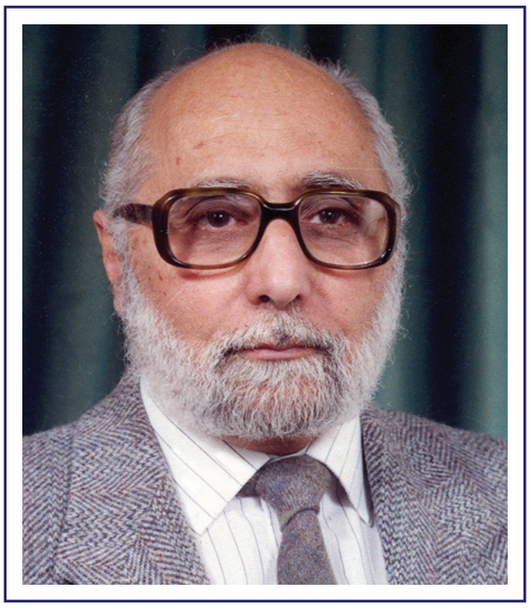
Dean and Coordinator of FUE
Member of Scientific Programs Committee
Member of Social Activities Committee

APPRECIATION

The Board of Directors of the EDA and the Organising Committee of the 16th International Dental Congress wish to express their deep thanks and most sincere gratitude and appreciation to

Professor Mamdouh M. Abdel-Latif

Chairman of the Scientific Committee and Web Master of the EDA web site, for undertaking the editorship of the Congress Book and for managing the EDA web site on the Internet, as well as for undertaking the e-mail correspondence of the Congress.



Professor

Mamdouh M. Abdel-Latif

Chairman of the Scientifi c Committee

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Professor Ahmed Barakat
Doctor Mohamed Farid Shehab

WELCOME

It is indeed a source of great pleasure to welcome all our esteemed guests in the Egyptian Dental Association's 16th International Dental Congress.

The present Congress is again held during a period of great turmoil where our region is still living through and undergoing great upheavals.

It is, however, through such human intercourses such as this Congress that people of different backgrounds are brought together and made to better understand each other, which we are sure will ultimately lead to better understanding between us all, as well as to better relations among all our nations. It is indeed one of the major benefits of scientific exchange to bring different people from all over the world together where they may share common goals and objectives.

May we wish all our guests a pleasant and enjoyable stay amongst us, and we sincerely hope that you may fully enjoy the scientific and social programmes we have prepared for you.

Thank you very much indeed for joining us and for contributing to the success of our meeting, and we hope to see you again with us many more times in future Congresses.

President

Prof. Dr. Ragab El Beialy

Dear Colleagues,

On behalf of myself and of all EDA board members, I extend a very welcoming hand to all our colleagues, our participants and our visitors. We are all very proud and happy to have you with us here in Cairo.

Our last meeting was a very successful one, both scientifically and socially, and we promise you at least an equally successful, or an even more enterp1ising meeting. The quality of the scientific papers to be presented in this conference is extremely high, and we promise you that the social program accompanying and following the congress will appeal to you all.

The trip to Sharm El-Sheikh in Sinai at this time of the year is going to be an unforgettable one.

The EDA board and members are very happy to have you all with us, and we wish you a very pleasant stay and hope to see you all in Cairo in next EDA meetings.

Professor

Salah H. Sherif,

General Secretary of the EDA and the Congress

Dean of Faculty of Dentistry MIU

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DENTAL CONGRESS

EGYPTIAN DENTAL ASSOCIATION
The 16th International Dental Congress

CONGRESS TIME TABLE

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CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Al Hambra)

First Session

Chairpersons

Professor **Maguid Amin**
Professor **Mamdouh Abd El-Latif**
Professor **Tarek Mahmoud**
Professor **Mohamed Salah Ayoub**
Professor **Ghada Elian**

Time	*Lecture*
10:00 – 11:00	Controversies in Orthognathic Surgery **Sadakah A. A. (Egypt)**
11:00 – 12:00	Bleaching and Patient's Demands **Magda S. Eldiwany (USA)**
12:00 - 12:30	**Coffee Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Al Hambra)

Second Session

Chairpersons

Professor **Siza Yakoub**
Professor **Medhat Abdel Rahman**
Professor **Louloa Fathy**
Professor **Alaa Diab**
Professor **Ehab Hassanein**
Professor **Saed Abdel Hafez**

Time	Lecture
12:30 – 1:30	Complex Endodontic Cases: Theory and Practice **Ahmed A Hashem (Egypt)**
1:30 – 2:00	Evidence Based Assessment of Recent Root Canal Obturation Materials **Kariem M El Batouty (Egypt)**
2:00 – 3:00	**Lunch Break**

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Al Hambra)

Third Session

Chairpersons

Professor **Hany Haleem**
Professor **Ashraf Mokhtar**
Professor **Ashraf Sherif**
Professor **Hesham Katamesh**
Professor **Ehab Hammad**
Professor **Ahmed Nagib**

Time	Lecture
3:00 – 5:00	CEREC CAD/CAM Live Demo.....From A-Z **Atef Shaker (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Al Hambra)

Fourth Session

Chairpersons

Professor **Ali El- Sahn**

Professor **Yehia Ashour**

Professor **Amr Shabaka**

Professor **Adel Ezzat**

Professor **Amira Farid**

Time	Lecture
5:00 - 5:30	The Effect of Incorporation of Silver Nanoparticles to Resin Composite on Its Bond Strength to Dentin **Marwa M. Abbas (Egypt)**
5:30 - 6:00	Efficacy of Various Remineralizing Agents on Remineralization of Early Enamel Caries-Like Lesions: An in Vitro Study **Mostafa S. Atta (Egypt)**
6:00 – 6:30	Ultrastructural and Histogical Evaluation of The Protective Effect of Ginseng on γ -Irradiated Rats' Tongue. **Dalia H. El-Rouby (Egypt)**
6:30 – 7:00	Role of Digital Radiography in Evaluating the Effect of Melatonin on Osseo-Integration of Dental Implants **Noha S. M. Abu-Taleb (Egypt)**
7:00 – 7:30	Dental Fluorosis: Associated Risk Factors and Primary Source of Fluoride Intake in the Gaza Strip - Palestine: Working Towards A Strategy for Dental Fluorosis Prevention **Lamis Abuhaloob (Palestine)**

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Montazah)

First Session

Chairpersons

Professor **Mouchira Salah El-Din**
Professor **Mahmoud El-Refaay**
Professor **Mona Darhous**
Professor **Azaa Ezz Al Arab**
Professor **Neveen Raji**
Professor **Mohamed Sabry**
Professor **Gehan Omar**

Time	*Lecture*
10:00 – 11:00	Perforated Barrier Membrane –Predictable Periodontal Regeneration **Ahmed Y Gamal (Egypt)**
11:00 – 12:00	Critical Thinking in Esthetic & Implant Dentistry **Khaled Abdel-Ghaffar (Egypt)**
12:00 – 12:30	**Coffee Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Montazah)

Second Session

Chairpersons

Professor **Kamal El-Motayam**
Professor **Salah El-Beheiry**
Professor **Mervat Rashed**
Professor **Neveen Waly**
Professor **Mahmoud Hamdy**

Time	Lecture
12:30- 1:00	Early Management of Spacing Between Upper Anterior Teeth in Young Adult Patients **Mohamed S. Farag (Egypt)**
1:00 – 1:30	Minimal Intervention Dentistry **Nagwa Khattab (Egypt)**
1:30 – 2:00	Recent Trends in Preventive Dentistry **Osama El Shahawy (Egypt)**
2:00 – 3:00	**Lunch Break**

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Montazah)

Third Session

Chairpersons

Professor **Mokhtar Nagy**
Professor **Salma El Ashry**
Professor **Yehia M. El Baghdadi**
Professor **Houssam Tawfik**
Professor **Sayed Senyour**

Time	Lecture
3:00 – 4:00	Recent Advances in Regenerative Endodontics **Omar M. Fahim (KSA)**
4:00 – 5:00	Pulp Revitalization: Fact Or Fiction **Shehab El Din M. Saber (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Montazah)

Fourth Session

Chairpersons

Professor **Nour Ahmed Habib**
Professor **Maged Negm**
Professor **Khaled Ezzat**
Professor **Mohamed Abd El-Azim**
Professor **Randa Bogdadi**
Professor **Taheya Moussa**

Time	Lecture
5:00 - 6:00	Direct pulp capping with Tri-calcium silicates and pulp regeneration **Imad ABOUT (France)**
6:00 - 6:30	Total rehabilitation ..... A decision to take **Hala I. Abboud (Lebanon)**
6:30 - 7:00	Diode Laser Applications in Endodontics: A Clinical Overview **Mohammad Hamdi Atteia (Egypt)**
7:00 - 7:30	Effect of Curing Modes and Light Intensties of (Led) on Microshear Bond Strength of Resin Composite to Dentin **Yasser A. Abed (Egypt)**

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Abdeen)

First Session

Chairpersons

Professor **Nahed Abdel-Salam**

Professor **Adel Zein**

Professor **Hossam Kandil**

Professor **Mohamed El-Serougy**

Professor **Wael Amer**

Time	*Lecture*
10:00 - 11:00	Switching to CBCT: is it beneficial to the dental practitioner? **Mushira Dahaba ,Sahar Hosny , Nagla`a Abdel Wahed , Hany Omar Riham M. Hamdy , Ahmed M. Abdel Samad (Egypt)**
11:00 - 12:00	Magnetic Resonance Imaging in Maxillofacial Region: Advanced Techniques and Different Scope **Mushira Dahaba , Mohamad Khalifa , Riham Hamdy, Ola Mohamad Rehan, Salma Belal (Egypt)**
12:00 - 12:30	**Coffee Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Abdeen)

Second Session

Chairpersons

Professor **Sayed Attia**

Professor **Ahmed Mokhtar**

Professor **Reda Abd El-Rahman**

Professor **Khaled Abdel-Ghaffar**

Professor **Moushira Dahaba**

A. Professor **Waleed El- Beilay**

Time	Lecture
12:30 – 1:30	ConeBeam 3D system FONA XPAN 3D , FONA Laser , Hygienic System DAC Universal **Michal Cempírek (Germany)**
1:30 – 2:00	Clinical Decision Making-CDM- in Surgical Dentistry and Oral Surgery : How to Improve Consistency and Implementation of Treatment Recommendations and Options **Ziad e. F. Noujeim (Lebanon)**
2:00 – 3:00	**Lunch Break**

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Abdeen)

Third Session

Chairpersons

Professor **Abdel-Hady Nassef**
Professor **Sherif Sabry**
Professor **El-Zahra Fatema Albagory**
Professor **Abdel-Salm ElBaz**
Professor **Rabab Mubarak**

Time	*Lecture*
3:00 – 3:30	Efficacy of Ozone Therapy in Management of Patients With Internal Derangement of Temporomandibular Joint **Mohamed S. Hamed (UAE)**
3:30 – 4:00	Evaluation of Bone Regenerative Capacity Following Distraction Osteogenesis of Goat Mandibles Using Two Different Bone Cutting Techniques **Walid A. Abdullah (KSA)**
4:00 – 4:30	CO2 and Er:YAG Laser Therapy in the Management of Dentin Hypersensitivity and Assessment of Mineral Content. **Mahmoud H. Belal (Egypt)**
4:30 – 5:00	A Novel Surgical Approach for Treatment of Class II Furcation Defects Using Marginal Periosteal Membrane **Hala H Hazzaa (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Wednesday 6th November 2013

Hall (Abdeen)

Fourth Session

Chairpersons

Professor **Mohamed Dehies**

Professor **Mounir Shaker**

Professor **Galal Beheiry**

Professor **Mohamed Diaa**

Professor **Mohamed katamesh**

Time	Lecture
5:00 - 5:30	Anesthetic Efficacy of Four Percent Articaine During Extraction of the Mandibular Posterior Teeth By Using Inferior Alveolar Nerve Block and Infiltration Techniques **Khalid E. El-Kholey (KSA)**
5:30 - 6:00	Evaluation of the Dentoalveolar Application of Tobramycin–Dexamethasone Ointment Postoperatively for the Prevention of Alveolar Osteitis After The Extraction of Impacted Mandibular Third Molars: A Clinical Study. **Saleh Bakry (Egypt)**
6:00 - 6:30	Management of medial orbital trauma and nasoethmoid-orbital injuries **Mostafa I. Shindy (Egypt)**
6:30 - 7:00	Clinical Outcome of Immediate Non Functional Loaded Implants Immediate Versus Delayed Immediate Implantation **Mahmoud M. El-Arini, (Egypt)**
7:00 – 7:30	Role of Diazepam in Dental Anxiety and It's Relation to Serum Cortisol Level Before Dental Surgical Treatment **Rafel H. Rasheed, Eman M. R. Al-Hadithy (Iraqi)**

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Al Hambra)

First Session

Chairpersons

Professor **Ragia Mounir**
Professor **Hamdy Abou El-Fotouh**
Professor **Khaled Zekry**
Professor **Hussein El-Sharkawy**
Professor **Mohamed S. Hamed**

Time	*Lecture*
9:00 - 9:30	Restoration of the Peri-Implant Defect of Immediate Implant By Bovine-Derived Xenograft With and Without PRF **Shereen W. Arafat (Egypt)**
9:30 - 10:30	4D Concept and Immediate Implant Placement **Ahmed H. Ayoub (Egypt)**
10:30 - 11:00	Rehabilitattion of Atrophic Posterior Maxilla Using Pterygoid Implants **Riham M. El-Dibany (Egypt)**
11:00 - 12:00	Diagnosis and Treatment Planning from Simple to Difficult Cases. **M.S. El Attar (Egypt)**
12:00 - 12:30	**Coffee Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Al Hambra)

Second Session

Chairpersons

Professor **Essam Abd El-Hafez**
Professor **Mohamed Riad Farid**
Professor **Faten Kamel**
Professor **Mohamed Abd El-Mohsen**
Professor **Hussein Gomaa**
Professor **Mohsen Abil Hassan**

Time	Lecture
12:30 – 1:15	Composite & Anteriors: Can Everyday Dentistry Be…Aesthetic **Walter Devoto (Italy)**
1:15 – 2:00	Problem Solving in Dental Practice **Ahmed Roshdy (Egypt)**
2:00 – 3:00	**Lunch Break**

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Al Hambra)

Third Session

Chairpersons

Professor **Khaled Abou El-Fadl**
Professor **Mohamed S. El Attar**
Professor **Rabab Mohamed**
Professor **Tarek El-Sharkawy**
Professor **Mohamed Shereen**

Time	Lecture
3:00 – 4:30	Novel Techniques to Repair Defective Labial Plate of Bone and Deficient Alveolar Ridge **Abd Elsalam Elaskray (Egypt)**
4:30 – 5:30	CEREC: THE INNOVATIVE SOLUTION **Mohamed S. Hassanien (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Montazah)

First Session

Chairpersons

Professor **Tarek Abbas**
Professor **Mostafa El-Dibany**
Professor **Hany Amin**
Professor **Ibrahim Shindy**
Professor **Reham El-Dibany**

Time	*Lecture*
9:00 – 9:30	Effect of Platelet Rich Plasma on Healing of Distracted Mandibular **Amr A. EL Swify (Egypt)**
9:30 – 10:00	Updates on Dental Pain Management 2012-2013 **Sally Ragy Riad (Egypt)**
10:00 – 11:00	Excessive Gingival Display –Etiology, diagnosis and treatment **Magda S. Eldiwany (USA)**
11:00 – 11:30	The Correlation Between Masticatory Muscles, AMFP and Condylar Path. **Silvana Beraj (Albania)**
11:30 – 12:00	Exercise Therapy and Massages for Oral Myofacial Pain A Systematic Review of the Last Thirteen Years. **Carolina R. Barraza (Germany)**
12:00 - 12:30	**Coffee Break**

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Montazah)

Second Session

Chairpersons

Professor **Wagih Abdel Kader**
Professor **Hisham Afifi**
Professor **Amr Labib**
Professor **Amr Dakrory**
A. Professor **Islam Tarek**

Time	Lecture
12:30 -1:15	Clear Aligner the Invisible Orthodontics With Visible Success **Hisham H. Namazi (Germany)**
1:15 – 2:00	Orthognathic Surgery Beauty and Attractiveness **Nasser Al- Manthery (Oman)**
2:00 – 3:00	**Lunch Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Montazah)

Third Session

Chairpersons

Professor **Abbady El-Kady**
Professor **Amr Abou El-Ezz**
Professor **Dalia El-Bokl**
Professor **Esam Nasef**
Professor **Khaled Hazem**

Time	Lecture
3:00 – 3:30	Is Full Ceramic Crowns a Valid Restorative Option for Primary Teeth? **Osama El Shahawy (Egypt)**
3:30 – 4:00	Ergonomic Perspectives for Optimal Health **Hala M. Abass (Egypt)**
4:00 – 4:30	Evaluation of Accessory Fiber Posts With Self-Adhesive Resin-Modified Glass Ionomer in Reinforcement of Structurally Compromised Upper Permanent Incisors in Children. **Talat M. Beltagy (Egypt)**
4:30 – 5:00	Silver Nanoparticles: Properties and Applications in Restorative Dentistry **Mona I. Riad (Egypt)**

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Montazah)

Fourth Session

Chairpersons

Professor **Sherin Ezz El-Din**
Professor **Eman El-Masry**
Professor **Mohamed Sherif Farag**
Professor **Fatma Abdo**
Professor **Hoda Abdelaziz**

Time	Lecture
5:00 - 5:30	Use of Advanced Approaches in Orthodontics **Ahmed R. Elkalza (Egypt)**
5:30 - 6:00	Face Driven Orthodontics **Khaled S. Aboulazm (Egypt)**
6:00 - 6:30	Non-Surgical Approach towards Successful Management of Traumatized Young Permanent Teeth in Children – Apical Plug Technique **Hany Saber (Egypt)**
6:30 - 7:00	Tear Strength and Wettability of Two Recent Impression Materials for Post Spaces **Nasser Hussein (Egypt)**
7:00 – 7:30	Evaluation of Horizontal Ridge Augmentation Using Beta Tricalcium Phosphate and Demineralized Bone Matrix: A Comparative Study. **Mahmoud Shalash (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Abdeen)

First Session

Chairpersons

Professor **Ragab Radwan El-Beialy**

Professor **Magdy Badawy**

Professor **Atef Aguib**

Professor **Khaled Allam**

Professor **Inas Samy**

Time	*Lecture*
9:00 – 9:30	Impact of Three Fluoridated Mouthwashes on the Transverse Strength, Resiliency and Corrosion of Nickel Titanium and Stainless Steel Orthodontic Wires **Salwa A. El-Negoly (Egypt)**
9:30 – 10:00	Peripheral Neurectomy of Trigeminal Neuralgia Clinical and Experimental Study **Elsherbini Elshal (Egypt)**
10:00 – 10:30	Face Off: A Dream Comes True **Mohamed Elsholkamy (Egypt)**
10:30 – 11:30	Holistic Dentistry: The Future of Dentistry **Hesham El-Essawy (UK)**
11:30 – 12:00	High Quality Dental Photographs Understanding your Camera and concepts **Ahmed Salah (Egypt)**
12:00 - 12:30	**Coffee Break**

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Thursday 7th November 2013

Hall (Abdeen)

Second Session

Chairpersons

Professor **Sherif El-Mofty**

Professor **Nabila Fayed**

Professor **Ahmed Farid Shehab**

Professor **Ahmed Barakat**

Professor **Sameh Mekhemerk**

Time	Lecture
12:30 -1:00	Assessment of Ridge Splitting With and Without Bone Grafting Material for Implant Placement in Thin Posterior Mandibular Ridge: Radiographic and Functional Evaluation **Ashraf Fathy (Egypt)**
1:00 – 1:30	Frontal Sinus Obliteration. Short Term Follow-Up Study **Mohamed I. El-Faramawey (Egypt)**
1:30 – 2:00	Dentoalveolar Trauma Among Children **Mohamed H. A. Khawlaani, (Algeria)**
2:00 – 3:00	**Lunch Break**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Abdeen)

Third Session

Chairpersons

Professor **Ezzat Sabet**
Professor **Nadia Abbas**
Professor **Fekry Georgi**
Professor **Adel Aziz**
Professor **Shereen Fouda**
Professor **Ashraf Emil**

Time	*Lecture*
3:00 – 3:30	A Dawn of New Era: Glucosamine in the Management of Periodontal Disease **Hala A. Abuel-Ela (Egypt)**
3:30 – 4:00	Restoring Mandibular Anterior Kennedy Class Iii With Single Narrow-Diameter Implant Supporting A Cantilevered Prosthesis: A One-Year Clinical and Radiographic Study **Ali M. El-Sheikh (Egypt)**
4:00 – 4:30	Topical Pimecrolimus Effect on Phenotype and Localization of Infiltrating T-Lymphocytes in Oral Lichen Planus Lesions **Ola Ezzatt (Egypt)**
4:30 – 5:00	Effect of Red Bull Energy Drink on Rats' Submandibular Salivary Glands **Rabab Mubarak (Egypt)**

CONGRESS TIME TABLE

Thursday 7th November 2013

Hall (Abdeen)

Fourth Session

Chairpersons

Professor **Hany Eid**

Professor **Mostafa Ezz**

Professor **Samar Sweilam**

Professor **Kadry Geesa**

A. Professor **Nader El-Bokl**

A. Professor **Rehab El-Sharkawy**

Time	Lecture
5:00 - 5:30	Evaluation of Efficacy of Alendronate Versuscalcitonin on Implant Osseointegration in Osteoporotic Rabbits **Abeer M. Kamal (Egypt)**
5:30 - 6:00	Evaluation of Horizontal Alveolar Distraction Using Modified Micro Bone Screws and Subsequent Implant Placement **Hassan Abdel-Ghany (Egypt)**
6:00 - 6:30	Clinical Application of Computer Guided Implant Surgery **Mohamed F. Shehab (Egypt)**
6:30 - 7:00	Splinted Versus Non Splinted Mini Dental Implants Retaining Mandibular Complete Overdenture (Stress Analysis Study) **Mona M. Aboelnagga (Egypt)**
7:00- 7:30	The Study of Tempromandibular Joint Disorders and Anti-Cyclic Citrullinated Peptide Antibodies in Serum and Saliva of Patients with Rheumatoid Arthritis **Raya M. Khidhir, Raja H. Al-Jubouri, (Iraqi)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Al Hambra)

First Session

Chairpersons

Professor **Mohamed Abdel-Aziz Attia**
Professor **Malak Soliman**
Professor **Salah Hamed Sherif**
Professor **Ahmed Helmy**
Professor **Heba Farag**
Professor **Samah Mehana**

Time	*Lecture*
9:00 – 9:30	The Prevalence of Inflammatory and Developmental Odontogenic Cysts in a Libyan Population **Hamed Orafi (Libya)**
9:30 – 10:00	Management of Complex Maxillofacial Gunshot Injuries at Nasser Institute. **Niveen Askar (Egypt)**
10:00 – 10:30	Bilateral Distraction Osteogenesis for the Management of Mandibular Hypoplasia **AMR A. EL SWIFY (Egypt)**
10:30 – 11:30	An Alternative Technique for Inferior Alveolar Nerve Lateralization **Joaquin G. Rodriguez (Spain), Riham M. El-Dibany (Egypt)**
11:30 - 2:00	**Friday Prayer and Lunch Break**

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Al Hambra)

Second Session

Chairpersons

Professor **Ahmed Roshdy**
Professor **Mohamed Bayoumy**
Professor **Emad Saied**
Professor **Maha Hakam**
Professor **Amir Saad**

Time	Lecture
2:00 – 4:00	How to Become A Unique Dentist **M.S. El Attar (Egypt)**
4:00 – 4:30	Surgical localization and identification of Marginal Mandibular Nerve during submandibular dissection **Rami R. El-Beialy (Egypt)**
4:30 – 5:00	Assessment of A Novel Tooth Extraction Forceps; With Lock and Pressure Controlling Unit. **Yasser F. H. Gomaa (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Montazah)

First Session

Chairpersons

Professor **Ragab Radwan El-Beialy**
Professor **Mohamed Kenawy**
Professor **Eman Sharawy**
Professor **Magda Hassan**
Professor **Ghada Shehab**
Professor **Mohamed ElShahat**

Time	*Lecture*
9:00 – 10:00	The scope of T.M.J. Arthroscopy in the management of Internal Derangement **Waleed R. El-Beialy (Egypt)**
10:00 – 11:00	Indirect veneers **Carlos Sabrosa (USA)**
11:00 – 11:30	Recombinant Human Bone Morphogenetic Protein-2 (Rhbmp-2) in Secondary Alveolar Cleft Reconstruction **Mohamed El-Faramawey (Egypt)**
11:30 - 2:00	**Friday Prayer and Lunch Break**

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Montazah)

Second Session

Chairpersons

Professor **Abdel-Aziz Fahmy**
Professor **Ibrahim Shindy**
Professor **Ahmed Farid Shehab**
Professor **Mamdouh Shaaban**
Professor **Ragia Mounir**
Professor **Ayman Aboul-Enein**

Time	Lecture
2:00 – 3:00	Management of Apical Migration of Dental Implant Related Tissues **Abd Elsalam Elaskrary (Egypt)**
3:00 – 3:45	Advances in Oral & Maxillofacial Surgery Postgraduate research at Future University in Egypt **Waleed R. El-Beialy, Waleed Fathy El-Yazby, Ahmed Abo Zekry (Egypt)**
3:45 – 4:30	Sinus Lifting and the Stability of Simultaneously Inserted Implants **Hesham E. Elhawary (Egypt)**
4:30 – 5:00	Can We Change to Digital Dentistry? Yes We Can. **Nagy Abdulsamee (Egypt)**

INTERNATIONAL DENTAL CONGRESS

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Abdeen)

First Session

Chairpersons

Professor **Maha Kheidr**

Professor **Randa Hafez**

A. Professor **Nadi Metwaly**

A. Professor **Gamal Moutamed**

A. Professor **Noha Kabel**

A. Professor **Fardos Rizk**

Time	*Lecture*
9:00 – 9:30	Flapless Apecoctomy in Cases of Small Sized Periapicallesions **Ashraf Fathy (Egypt)**
9:30 – 10:00	Microshear Bond Strength of Direct Composite to Dentin Substitutes **Amal K. Sakr (Egypt)**
10:00 – 10:30	Recent Advances in Treatment of Immature Non-Vital Roots **Khaled F. Abbas (Egypt)**
10:30 - 11:00	Third party softwares and its application in implantology& computer guided surgery **Walaa Samir (Egypt)**
11:00 – 11:15	Effect of Ozone on Wound Healing After Surgical Removal of Impacted Mandibular Third Molar **Ahmed N. Al Ghandour (Egypt)**
11:15 – 11:30	Dental Implant Complications **Sherif Hani Salama (Egypt)**
11:30 - 2:00	**Friday Prayer and Lunch Break**

CONGRESS TIME TABLE

Friday 8th November 2013

Hall (Abdeen)

Second Session

Chairpersons

Professor **Gehan Fekry**

Professor **Hala Zaatar**

Professor **Omaima El-Mehallawy**

Professor **Ibrahim Yehia**

Professor **Ashraf Attia**

A. Professor **Reham Magdi Amin**

Time	Lecture
2:00 – 2:15	Assessment of Peripheral Alcohol Injection With Different Concentrations in Management of Trigeminal Neuralgia **Amr A. El-Atty (Egypt)**
2:15 – 2:30	Fracture Resistance Assessment of Endodontically Treated Teeth With Different Ferrule Designs and Two Post Systems **Engy A. A. Farag (Egypt)**
2:30- 2:45	The Influence of Two Different Surface Treatments on the Fracture Strength and Core-Veneer Shear Bond Strength of Two Different All-Ceramic Systems **M.M. Al Ankily (Egypt)**
2:45 – 3:00	The Life Span of Different Nickel Titanium Rotary Instruments in Either Rotary or Reciprocating Motion Using Single File Root Canal Preparation Technique **Mostafa El Kholy (Egypt)**
3:00 – 3:30	Morbidity After Chin Graft Harvesting Using Piezosurgery Versus Conventional Osteotomy Techniques **Gamal M. Moutamed (Egypt)**
3:30– 4:00	Effect of Two Different Attachments on The Supporting Structures and Masticatory Capacity of Implant Retained Mandibular Overdenture **Fardos N Rizk (Egypt)**
4:00 – 4:30	The Influence of Two Different Surface Treatments on the Fracture Strength and Core-Veneer Shear Bond Strength of Two Different All-Ceramic Systems **Fatma Makkeyah (Egypt)**

INTERNATIONAL
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EGYPTIAN DENTAL ASSOCIATION

The 16th International Dental Congress

ABSTRACTS

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ABSTRACTS

MANAGEMENT OF APICAL MIGRATION OF DENTAL IMPLANT RELATED TISSUES

Abd Elsalam Elaskary

Lecturer, NYU Vice President of the International Congress of Oral Implantologists (ICOI)

Apical migration of related local tissues to dental implant supported restorations has become a common daily clinical dilemma that faces clinicians. Too far labial and/ or deep implant placement, lack of keratinized tissues, thin tissue phenotype and defective labial plate of bone are all among the factors that lead to implant related gingival recession. The treatment approach to dental implant related gingival recession depends mainly on the type of the recession occurred and on the existing level of the adjacent peri-implant papillae , the amount of attached gingiva, and the remained amount of labial bone; Methods to treat implant related gingival recession can be achieved by using connective tissue grafts alone or combined , the use of 3 dimensional barrier membranes, the use of inter positioned osteotomies(sandwich technique) and the use of complex autogenous bone grafts with apical repositioning flap. This presentation will overview the classifications of gingival recession and the applied treatment of each type, the treatment errors and physiological factors that lead to implant related gingival recession, clinical applications solving this clinical dilemma.

NOVEL TECHNIQUES TO REPAIR DEFECTIVE LABIAL PLATE OF BONE AND DEFICIENT ALVEOLAR RIDGE

Abd Elsalam Elaskary

Lecturer, NYU Vice President of the International Congress of Oral Implantologists (ICOI)

Immediate implant placement in fresh extraction sockets offers several advantages which include patient comfort, immediate aesthetics; as well as decreased treatment time. The labial plate of bone plays a major key that influences the fate & prognosis of such procedure; other additional factors that involve: tissue biotype, type of implant loading, diameter of implant used, etc... The understanding of the nature of the labial plate of bone, and the detection, maintenance, and preservation of the labial plate of bone becomes then valuable, also the ability of the clinician to repair the defective labial plate of bone at surgery or after becomes valuable to the final treatment outcome, this presentation will highlight in details novel techniques of the labial plate of bone at the time of tooth extraction: The use of The use of fitted Autogenous bone lumineers , and the use of a new socket repair assorted PDLLA kit . These all novel techniques help to simplify the treatment complexity while increasing treatment predictably in order to provide an outstanding clinical outcome.

The candidate will be able to:

Learn the value of the labial plate of bone.

Learn factors that lead to labial plate of bone resorption.

Learn how to repair the labial plate of bone.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

EVALUATION OF EFFICACYOF ALENDRONATE VERSUSCAL CITONIN ON IMPLANT OSSEOINTEGRATION IN OSTEOPOROTIC RABBITS

Maha Galal ; **Abeer Kamal and Amr A.M. ELkarargy**

Lecturer of Oral and maxillofacial Surgery, College of Oral and Dental Surgery, Misr University for Science and Technology (MUST), Egypt

Background Alendronate (ALO) is a second-generation bisphosphonate used widely in osteopenic individuals for increasing bone density. Calcitonin is approved for the treatment of osteoporosis and other diseases involving accelerated bone turnover (CT).The current study will clarify the better of these two drugs in osteoporotic implant patients. Objective: to compare the effects of alendronate versus calcitoninon implant osseointegration in osteoporotic bone. Material and methods: Thirty female New Zealand White rabbit were used in this study. They were bilaterally ovarictomized (OVX) and fed on low Calcium diet (bran food) to establish osteoporosis model. Each animal received two implants intheir tibia bilaterally. They were divided equally into 3 groups. Group I were considered as control (OVX) group. Group II received calcitonin I.M. (CT) and Group III received Alendronate orally(ALO). At 12 weeks after implant insertion the animal were scarified. Ossiointegration among the three groups were evaluated through histomorphometric analysis, scanning elecromicroscope (SEM),and dual-energy X-ray absorptiometry(DEXA) for measuring bone mineral density (BMD). Results: Through histomorphometric analysis greatest mean area percentage of peri-implant bone was shown in (ALO) group, followed by (CT) group,the lowest effect was recorded in the control OVX group. Difference was statistically significant (P<0.0001).SEM results showed significant highest implant osseointegration value (Lowest gap distance) in(ALO) group, followed by(CT) group , then the control OVX group (P<0.001).BMD was decreased after OVX and then wasincreased after using each drug,this change was statistically significant.ALOgroup showed statistically significant higher mean BMD than (CT) group (P<0.001)withpositive correlation between osseointegration and BMD in both groups. Conclusions: In osteoporotic conditions, both ALO and CT could effectively enhance osseointegration. ALO induced more pronounced effect than CT making it better choice for implant osseointegration.

COMPLEX ENDODONTIC CASES: THEORY AND PRACTICE

Ahmed A Hashem

Professor of Endodontics, Faculty of Dentistry, Ain Shams Univ. Director, Microscope Center, Future University

Sometimes, Endodontic work is not an easy task at all. Facing a challenging situation can start even by trying to reach a proper diagnosis ending up to management of several iatrogenic problems within the same tooth. A systematic approach based on scientific knowledge and clinical experience should be utilized to reach a proper outcome. This lecture will go through the scientific background, technical skills needed to manage several problematic Endodontic cases.

ABSTRACTS

4D CONCEPT AND IMMEDIATE IMPLANT PLACEMENT

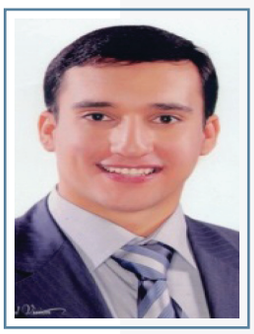
Ahmed Halim Ayoub

BDS, DDS. , Director Dental smile training and educational center
President of Egyptian society of oral implantology

The 4th additional axis of time is added to the traditional 3D axes which makes it different to identify the time of extraction and implant placement either immediate implant placement , early implant placement or delayed implant placement.

This review focus on each technique and the ideal choice of each technique in every case. Immediate implant placement after extraction has become a favored treatment protocol with many clinicians worldwide. There are many advantages to this protocol, amongst them; shortened treatment time, placement of the implant in sound bone that constitutes the socket wall, placement trajectory guidance by the socket and preservation of bone volume. This literature review describes the 4th dimension in implant placement which is the timing of placement after extraction which is a very important factor in immediate placement success rate.

EFFECT OF OZONE ON WOUND HEALING AFTER SURGICAL REMOVAL OF IMPACTED MANDIBULAR THIRD MOLAR



Ahmed Nagi Kamel Al-Ghandour

Demonstrator at surgery department at MUST University

Atmospheric air is made up of nitrogen (71%), oxygen (28%) and other gasses (1%) including ozone. altered Ozone can be utilized for therapeutic purposes & it has long been used in complementary and alternative medicine (CAM) & probably one of the most miraculous healing therapies available on our planet at this time. Its use is based on the known anti-microbial, antihypoxic, analgesic, immunostimulating properties of ozone (O3) on biological systems. These mechanisms of action is supported with a lot of case reports and scientific studies using in different fields of medicine; In this study the effect of ozone on healing; ozone after extraction of impacted third molar is evaluated. Further studies are necessary to standardize indications and treatment protocols of this promising medical agent.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

USE OF ADVANCED APPROACHES IN ORTHODONTICS

Ahmed R. ELkalza

Lecturer of Orthodontics – Alexandria University

A temporary anchorage device (TAD) is a device that is temporarily fixed to bone for the purpose of enhancing orthodontic anchorage either by supporting the teeth of the reactive unit or by obviating the need for the reactive unit altogether, and which is subsequently removed after use. The use of CBCT has proven useful in the management of patients with impacted teeth. The CBCT allows for a more precise analysis of the extent of the pathology related to the ectopic tooth. CBCT images can be used to locate the precise position of ectopic cuspids and to design treatment strategies that would result in less invasive surgical intervention, smaller incisions, more conservative flap design, and overall reduced morbidity associated with the surgery. Lasers in dentistry have been available in one form or another for a good few years. The clinical benefits of applying lasers in treatment are many, as along with reduced patient discomfort and more rapid post operative healing, they are easy to use.

PROBLEM SOLVING IN DENTAL PRACTICE

Ahmed Roshdy

Professor of Oral Surgery, Faculty of Oral and Dental Medicine, Cairo University

The presentation will focus on the following items:

- How to manage a broken wisdom tooth?
- Conservative (using wires) vs. using plates in the management of jaw bone fractures.
- Technical tips during implant surgery.
- Cases of full-arch restoration using dental implants.
- Pain control in the dental practice
- Antibiotic selection
- The use if intermaxillary fixation for treatment of fractures or diet control
- Fractures in children (Simple no treatment)
- Management of bleeding (Socket INR patients under anticoagulant therapy)
- Orthodontic vs orthognathic surgery

ABSTRACTS

HIGH QUALITY DENTAL PHOTOGRAPHS: UNDERSTANDING YOUR DSLR CAMERA AND CONCEPTS

Ahmad S. Hashem

Course Director of Dental Photography, Continuous Education Center, Faculty of Oral and Dental Medicine, Cairo University

Dental photographs have become an important tool not only for illustration, but also helps in documentation, diagnosis and follow up procedures. It can be used as a measuring tool in certain situations as smile assessment and color matching of dental prosthesis. Obtaining high quality dental photographs depends not only on using advanced sophisticated cameras, but also on understanding the available options of these recent cameras. This article is a trial to explain every option in the DSLR cameras and its application to obtain high quality photographs. Those options include the meaning of the terms on the DSLR camera body as AV, TV, M, A, P, ISO and its effect on the image quality

PERFORATED BARRIER MEMBRANE–PREDICTABLE PERIODONTAL REGENERATION

Ahmed Y Gamal

Professor of Periodontology, Faculty of Dental Medicine, Ain Shams University, Cairo, Egypt.

Multiple factors influence the predictability of treatment outcomes following guided tissue regeneration (GTR) procedures. Perhaps the most important factor for surgical success is periosteal isolation. In addition, the recent identification of gingival stem cells in the gingival connective tissue suggests that isolation of the gingival connective tissue from the space created by the GTR membrane will deprive the area of this important source of stem cells. Stem cells have the capacity to differentiate into any connective tissue element; traditional occlusive guided tissue membranes will preclude migration of stem cells into the wound. Gamal and Iacono, 2012 introduced a novel perforated collagen membrane that allows positive participation of periosteal and gingival stem cells in periodontal regeneration. This presentation will provide background leading to the development of the main hypothesis and present data evaluating the approach clinically, and biochemically. Possible clinical applications of perforated collagen membranes for various other periodontal and implant related problems will be also discussed.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

RESTORING MANDIBULAR ANTERIOR KENNEDY CLASS III WITH SINGLE NARROW-DIAMETER IMPLANT SUPPORTING A CANTILEVERED PROSTHESIS: A ONE-YEAR CLINICAL AND RADIOGRAPHIC STUDY

Ali M. El-Sheikh , Mohamed M. El-Sheikh and Sahar M. Ghoraba

Assistant Professor, Department of Prosthetic Dentistry, Faculty of Dentistry, Tanta University, Tanta, Egypt)

Background: Some of the challenges associated with the replacement of mandibular incisors are limited space, challenging surrounding anatomy, and potentially tough esthetic requirements. Purpose: The purpose of this study was to evaluate clinically and radiographically a single narrow-diameter implant supporting a cantilevered prosthesis to restore mandibular anterior Kennedy class III. Materials and Methods: Ten partially edentulous patients with anterior mandibular Kennedy class III received only one 3.5 mm diameter implant (SPI, Thommen Medical AG, Switzerland). The implant was restored with a cantilevered 2-units ceramo-metal fixed partial denture. Standardized clinical and radiographic parameters (survival rate, probing pocket depth and marginal bone loss) were evaluated at the time of the completion of the prosthetic treatment (baseline) and 3, 6 and 12 months after functional loading. Prosthetic complications were also assessed. Results: The survival rate for the narrow diameter implants was 100% after 1 year of functional loading. There were no statistically significant differences between the values of probing pocket depth over the follow-up period. All implants showed less than 1 mm of marginal bone loss at the end of the 1-year. Comparisons between the mean values of the bone loss at the baseline and the three recall visits were not statistically significant (P>0.05). Conclusions: Using a single narrow diameter implant can be considered a reliable method to support a cantilevered prosthesis to restore mandibular anterior Kennedy class III.

Keywords: Dental Implants, Narrow-Diameter, Kennedy Class III, Mandibular Incisors

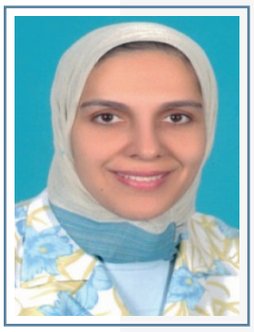
MICROSHEAR BOND STRENGTH OF DIRECT COMPOSITE TO DENTIN SUBSTITUTES

Amal Khairy Sakr

Associate Professor Conservative Dentistry
Vice Dean for Postgraduates & Scientific Research College of Dentistry, MUST

Objectives:The aim of this study was to compare microshear bond strengths (μSBS) of direct composite to Biodentine (BD) when compared to Glass Ionomer (GI) & Normal Dentin (ND) using two adhesive strategies .METHODS:Forty discs of

ABSTRACTS



Biodentine (Septodont) and Glass Ionomer (3M ESPE) were prepared.At the same time, twenty freshly extracted sound teeth were ground to expose dentin. Each group was divided into 2 groups (n=10) according to the adhesive tested, Adper™ Single Bond Plus (3M ESPE) representing two step total etch adhesive (TE) and Scotchbond™ Universal (3M ESPE) representing self etch adhesive (SE). Adhesives were applied to selected substrates, and composite cylinders (0.9 mm diameter x 0.7 mm length) were formed. After 24 hrs distilled water storage specimens were subjected to microshear testing at a crosshead speed of 0.5 mm/min. Failure modes were determined using a stereomicroscope at 40X magnification. Data were analyzed using Duncan's Multiple Range &Student t tests. RESULTS:The results have revealed a significant decrease in μSBS of composite cylinders bonded to BD relative to those bonded to ND ($p \leq 0.001$) .There was no significant difference between composite bonded to either BD or GI.At the same time there was no significant difference between TE &SE treatments to either ND,BD or GI.The mean values for μSBS were: ND-SE 16.71 ± 7.3,ND-TE 13.77±8.4,BD-SE 9.06±4.9,BD-TE 5.46±2.2 ,GI-SE 6.65±5,GI-TE 5.3±3. CONCLUSIONS: Composite achieved higher μSBS to Biodentne, more than Glass Ionomer. However,Biodentine couldn't substitute dentine in bonding to composite with the same values. Self etch surface treatments resulted in higher bond strength values more than total etch to all substrates, even though of no significant difference.

ASSESSMENT OF PERIPHERAL ALCOHOL INJECTION WITH DIFFERENT CONCENTRATIONS IN MANAGEMENT OF TRIGEMINAL NEURALGIA

Amr Adel Abd El-Atty, Gamal M. Moutamed, khaled Atef

Assistant lecturer, Oral and Maxillofacial Surgery Department, Faculty of Dentistry, British University in Egypt (BUE), Egypt

The effect of peripheral alcohol injection with different concentrations in management of Trigeminal Neuralgia (TGN) were studied and compared in fourteen patients suffering from Trigeminal Neuralgia. Patients were divided into two groups. Group A was injected with 70 % ethyl alcohol while Group B was injected with 99 % ethyl alcohol (absolute alcohol). The results of this study showed that there was no significant difference in sensation between patients received ethyl alcohol injection 70% & those received absolute ethyl alcohol for treatment of TN. It may be concluded that Office-based peripheral alcohol injection is a useful technique for treatment of Trigeminal Neuralgia regardless the Alcohol concentration.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

EFFECT OF PLATELET RICH PLASMA ON HEALING OF DISTRACTED MANDIBULAR SEGMENT

Mohammed S. Hamed, **Amr A. EL Swify ,**Fawzy T.ELSayed, Salama M. EL Shennawy,EL Taib A.Mohammed

Professor Oral & Maxillofacial Surgery Department , Suez Canal University

Introduction: Recent efforts to improve wound healing have focused on auto genus sources of bioactive mediators, such as platelet rich plasma (PRP),which offer the potential to enhance the bone healing ,the aim of this work was to study the effect of platelet rich plasma on distraction osteogenesis. Patients and methods:Ten patients (7 females and 3 males), their ages ranged from 7 years to 23 years (with a mean of 14.45 years). They presented with bilateral mandibular hypoplasia. All patients were treated with bilateral mandibular distraction osteogenesis, using intra and extra-oral unidirectional distractors, platelet rich plasma was applied only at left site while the right site act as a control. The follow-up periods were 3 months ,6 month and one year using panoramic x ray which was analyzed by special soft wares to determine the amounts of formed bone and its gray level also axial computerized tomography was used to measure bone density in Hounse field units . Results: the gray level at the right site was 101/256±6.50and that of left site was 108.7±7.30 with no significant difference P>.05.: The amount of formed bone at the right site was294185pexils±1.018,while that of the left site was 366921.5 pexils ±1.70with no significant difference P > .05 between the right and left sites . the CT density at the right site was 537.9HU±35.32 and that of left site was 501HU±53.37 with no significant difference P>.05. Conclusion: the platelet rich plasma has no significant role in distraction osteogenesis as regard amount of formed bone and its density.

Keywords: Distraction osteogenesis ,platelet rich plasma , Mandibular lengthening, Surgical correction of mandibular hypoplasia

ABSTRACTS

BILATERAL DISTRACTION OSTEOGENESIS FOR THE MANAGEMENT OF MANDIBULAR HYPOPLASIA

Mohammed S. Hamed, **Amr A. EL Swify ,**Fawzy T.ELSayed, EL Taib A.Mohammed
Professor Oral & Maxillofacial Surgery Department , Suez Canal University

Introduction: Patients with mandibular bilateral hypoplasia usually present with varying degrees of facial deformity. Upper airway obstruction and difficulty with feeding. Treatment of such cases is very important. Distraction osteogenesis (DO) using intra and extra- oral devices provides an excellent alternative when other surgical techniques do not prove to be satisfactory. Aim of the Work: To evaluate the efficacy of bilateral DO in the treatment of mandibular hypoplasia. Patients and Methods: Ten patients (7 females and 3 males). their ages ranged from 7 years to 23 years (with a mean or 14.45 years). They presented with bilateral mandibular hypoplasia with facial deformity, difficulty in feeding and three of them presented with obstructive sleep apnoea. All patients were treated with bilateral mandibular distraction osteogenesis, using intra and extra-oral unidirectional distractions. The follow-up periods were immediately, 3 months, 6 months and one year post distraction. Results: The patients were successfully treated using bilateral unidirectional distractors After completion of distraction, retrognathia was corrected in all patients. The " subjec.tive '' symptoms had disappeared compl etel y or had been alleviated with obvious increase of airway space. And good stability of skeletal changes (defined by the lateral cephalograms measurements). Conclusion: DO is an effective method for management of facial deformity and obstructive sleep apnea with good stabi lity of the results.

FLAPLESS APECOCTOMY IN CASES OF SMALL SIZED PERIAPICAL LESIONS

Ashraf Fathy Mohammed
Professor of Oral & Maxillofacial Surgery, MUST

A new apiceoctomy technique was employed in this study to avoid disadvantages of the commonly used flap designs for periradicular surgery. This technique is rapid and no need for incisions or suturing is required. The technique was performed in 32 cases (26 patients). Both clinical and radiographic assessments were done every 3 months for one year follow up. All cases healed clinically with no soft tissue scarring. Radographic assessment showed bone healing in different degrees. However, no signs of unsatisfactory healing or failure were found. This technique is easy, time saving, does not affect healing or endanger esthetics.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

ASSESSMENT OF RIDGE SPLITTING WITH AND WITHOUT BONE GRAFTING MATERIAL FOR IMPLANT PLACEMENT IN THIN POSTERIOR MANDIBULAR RIDGE: RADIOGRAPHIC AND FUNCTIONAL EVALUATION

Ashraf Fathy Mohammed, Engy Ali Abdelhaleam, Reham Hamdy, Fardos Nabil Fathy Rizk

Professor and Chairman, Oral and Maxillofacial Surgery Department, Faculty of Dentistry, Minia University

The aim of this study was to assess ridge splitting technique with and without bone grafting prior to dental implant placement in thin posterior mandibular ridge using cone beam CT (CBCT). Sixteen implants were placed in bilateral mandibular edentulous ridges, where 4 implants were inserted in 4 patients. All the patients had knife edge posterior ridge and were eligible for ridge expansion. Eight implants were immediately placed after ridge splitting followed by placing alloplastic bone graft (group A). Eight implants were immediately placed after ridge splitting without bone grafting (group B). Using cone beam computed tomography- preoperatively and 6 months postoperatively- linear and densitometric measurements were conducted. The postoperative CBCT derived linear measurements showed high statistically significant increase in buccolingual width in both groups ($p<0.0001$). On the other hand, there was non-significant difference in the buccolingual width between both groups. Statistically significant increased marginal alveolar bone height was observed in the mesial side of group A when compared to the mesial side of group B ($p=0.0112$). However there was non-significant collective marginal alveolar bone height gain in group A when compared to group B. Statistically non-significant difference in densitometric measurements were also found between both groups. Thus it could be concluded that ridge splitting improved bone thickness gain bucco-lingually regardless of the graft material usage. On the other hand presence of the alloplastic bone graft improved marginal bone height gain yet it had no effect on its density six months postoperatively.

Keywords: CBCT, Ridge splitting, Bone grafting, Linear measurements, Densitometric measurements

CEREC CAD/CAM Live Demo.....From A-Z

Atef Shaker Ibrahim Said

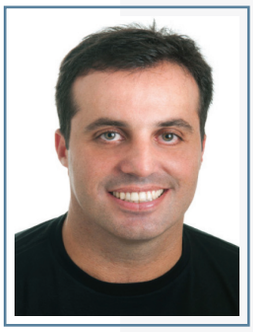
Assistant Professor, Fixed Prosthodontics Department, Cairo University

CAD/CAM dentistry has become one of the hot topics in dental field. The number of CAD/CAM users are increasing day by day either with chair-side systems or in the high tech dental laboratories. CAD/CAM systems can provide dentists and patients with restorations satisfying high precision, great esthetics accompanied with fast treatment sessions. The goal of this Presentation is to demonstrate a full ceramic restoration including ideal preparation, optical impression acquisition, designing full anatomical crown using an advanced software, construction of the designed crown & bonding of the final restoration. Presentation will be a live patient treatment procedure using OmniCam CEREC Chair-side CAD/CAM system accompanied with the latest 4.2 SW. Session will include an open discussion to answer questions that come in mind during different procedures.

ABSTRACTS

INDIRECT VENEERS

Carlos Sabrosa



The practice of esthetic dentistry allied to adhesive dentistry is a reality today. With the improvement of restorative dental materials, new techniques and systems are available to fabricate dental restorations supported by teeth and implants. The potential of bonded restorations increase the number of indications for esthetic procedures. main objective of most esthetic systems today is to replace porcelain fused-to-metal restorations with metal-free restorations without changing the procedures usually used by the restorative dentist. Esthetic procedures can only be achieved when there is a good relationship between the restorative dentist and the dental technician. The main objective of this lecture is to show evidencebased requirements that should be followed such as tooth preparation design and tooth surface arrangement, adhesive cementation as well as other steps throughout the prosthodontic treatment to optimize your results.

EXERCISE THERAPY AND MASSAGES FOR ORAL MYOFACIAL PAIN A SYSTEMATIC REVIEW OF THE LAST THIRTEEN YEARS.

Carolina Roldin Barraza

DDS, PhD

Abstract: a systematic review of RCTs on exercise therapy and manual therapy for myofacial pain was conducted. Methods: we searched the literature from 1999 to 2012 (MEDLINE via PubMed, Cochrane CENTRAL, and other sources) in order to identify RCTs on exercise therapy and massages for the treatment of myofacial pain in adults. Two review authors compiled and evaluated the included studies. Results: we found 13 RCTs (n=820) with a high heterogeneity in treatment modalities and outcomes Conclusion: We did not find sufficient evidence to support the sole indication of any of these physiotherapeutical interventions for TMD. In this review, the quality of the reports prevents us from concluding on the effectiveness of the treatment. However, in a limited number of good quality studies we observed a tendency to show a boosted action of psychosocial interventions combined with exercise therapy.

Keywords: physiotherapy, physiotherapeutical interventions, jaw exercises, temporomandibular disorders, myofacial pain, systematic review

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

ULTRASTRUCTURAL AND HISTOGICAL EVALUATION OF THE PROTECTIVE EFFECT OF GINSENG ON γ -IRRADIATED RATS' TONGUE.

Dalia Hussein Saad-elDin El-Rouby

Professor, Oral Pathology Depart., Faculty of Oral & Dental Medicine, Cairo, Egypt.

Objective: Radiation-induced mucositis has a major deleterious effect on oral health. Aim: This study was conducted to evaluate the effect of Ginseng on radiation induced oxidative stress in tongue mucosa. Design: Forty-eight Albino rats were divided into two equal groups. The control group received a single dose of γ-irradiation (6 Gy). The experimental group received ginseng (100 mg / kg, by gavage) for 7 consecutive days and exposed one hour later to single dose γ-irradiation (6 Gy). At the 3rd and 10th day after the end of treatment, rats were sacrificed and tongue specimens were subjected to light and transmission electron microscopy (TEM). Results: The tongue mucosa of the experimental group revealed slight alteration of cellular architecture and almost even size nuclei as compared to the irradiated group. TEM revealed slightly altered appearance of rough endoplasmic reticulum and mitochondria in Ginseng group. Conclusion: Ginseng ameliorated the deleterious effects of gamma irradiation in rats' tongue mucosa.

PERIPHERAL NEURECTOMY OF TRIGEMINAL NEURALGIA CLINICAL AND EXPERIMENTAL STUDY

Elsherbini Elazazy Elshal

Consultant of Oral and Maxillofacial Surgery; Mansoura International Hospital.

Trigeminal neuralgia is unknown disease treated medically or surgically. The cause of the lesion is still unclear either central or peripheral. Six patients were diagnosed with trigeminal neuralgia. No medical responses with tegretol, neurontin and amytriptyline druges occurred. Peripheral neurectomy was done for these patients with complete remissions. Infraorbital-mental-infrior alveolar nerve were cut and redirection into muscles or periosteium. The distal end of the nerve was cauterized to avoid any nerve reapproximation. 5 years follow up without nerve excerption was detected. Neurovascular bundle of the buffalo's mandible was dissected to show irregularities of the canal under the teeth while the canals smooth in the ramus region. The author suggested that the trigeminal neuralgia is due to peripheral nerves of the jaws. Basically, cutting the peripheral nerves would not get a better results if the reason of the disease is in the ganglion or CNS.

ABSTRACTS

FRACTURE RESISTANCE ASSESSMENT OF ENDODONTICALLY TREATED TEETH WITH DIFFERENT FERRULE DESIGNS AND TWO POST SYSTEMS

Engy A. A. Farag , Jylan F. El-Guindy , Mona A. El Agroudy

Assistant Lecturer, Faculty of Dentistry, British University in Egypt (BUE).

Purpose: This in vitro study was to investigate the effect of different ferrule designs on the fracture resistance of endodontically treated teeth with two post systems. Material and methods: Forty intact lower second premolars of average dimensions were used. The teeth were decoronated horizontally parallel to cementoenamel junction and then endodontically treated. In one group, the teeth were decoronated 1mm coronal to the most occlusal point of the proximal cemento-enamel junction while the three other groups , had retained 2mm coronal tooth structure. The forty samples were divided into four equal groups according to the design of ferrule prepare. Thus, Group I: prepared with 1mm Circumferential ferrule ;Group II: prepared with 2mm Circumferential ferrule ; Group III: prepared with 2 mm ferrule only in the two proximal sides while the buccal and lingual regions were removed and Group IV: prepared with 2mm ferrule in the buccal and lingual regions while the proximal sides were removed. In each group, 5 prepared teeth were then restored with glass fiber posts (RelyX) and composite resin (Filtek P60) cores while the other 5 were restored with custom made posts-cores. Metal copings were constructed. A universal testing machine compressively loaded the tooth specimens at a cross head speed of 1mm/min at an angle of 135° to the long axis of the teeth until failure occured. A survival analysis was conducted. The mode of failure was determined by visual inspection of all specimens. Results. The failure load was 801.6 N, 1336.5 N, 347.0 N, and 320.2 N for 1 mm, 2 mm, Proximal, and Buccal and Lingual groups, respectively with custom made post-core. With glass fiber post, the failure load was 361.2 N, 420.1 N, 329.4 N, and 314.8 N, for 1 mm, 2 mm, Proximal, and Buccal and Lingual groups, respectively. With buccal and lingual design, custom made post-core showed statistically significant higher percentage of unfavorable fracture pattern than glass fiber post. Conclusion. With 2mm ferrule, teeth with only two walls of remaining coronal dentin are more prone to fracture than teeth with four walls of remaining coronal dentin. The site of the missing coronal dentin wall does not affect the fracture resistance of endodontically treated teeth, irrespective to the post type.

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ABSTRACTS

EFFECT OF TWO DIFFERENT ATTACHMENTS ON THE SUPPORTING STRUCTURES AND MASTICATORY CAPACITY OF IMPLANT RETAINED MANDIBULAR OVERDENTURE

Fardos N Rizk

Associate Professor, Prosthodontics Department, Faculty of Dentistry, British University in Egypt

Aim: This study was carried out to compare the effect of Ball and Socket attachment and GPS attachment in implant retained mandibular overdenture cases regarding changes in:

- Crestal bone height and density surrounding implants.
- Electromyographic activity of Temporalis and Masseter rmuscles.
- Occlusal bite-force.

Materials and Methods: Following two stage surgical protocol twelve completely edentulous patients received two implants placed bilaterally in the canine region (24 implants) to retain mandibular overdentures. Four months following the surgery patients were randomly divided into two equal groups; Group-I received Ball and Socket attachment while Group-II received GPS attachment upon which mandibular overdentures were retained. Once patients were comfortable to the prosthesis, they were placed on zero, three, six and twelve months follow-up periods to measure:

- Crestal bone height and density surrounding the implants using Cone Beam Computed Tomography.
- Muscle activity of Masseter and Temporalis muscle using Electromygraphic device
- Occlusal Biting force using Occlusal Force-Meter.

Measurements were taken then the results were statistically analyzed.

Results:

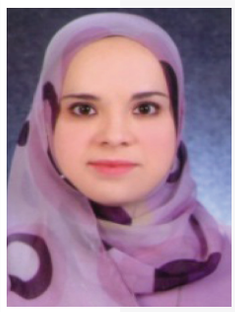
- Both attachment designs showed crestal bone resorption and increase in bone density during the follow-up period however, there was statistically significant difference between the two designs in favour of GPS attachment regarding bone resorption but there was statistically none significant difference between them regarding the increase in bone density.
- By time, the muscle activity significantly decreased in both attachment designs with statistically none-significant difference between them during the follow-up period. However, the occlusal bite-force significantly increased during the follow-up period in both attachment designs with statistically significant difference in favour of GPS attachment.

Conclusion: GPS is less destructive to crestal bone surrounding implants and has higher biting force than Ball and Socket attachment however, there is no difference between the two attachments in terms of muscle activity of masseter and temporalis muscles.

Key words: implants, GPS attachment, Ball and Socket attachment, overdenture, Cone Beam Computed Tomography, Electromyograph , Occlusal Force-Meter.

ABSTRACTS

THE INFLUENCE OF TWO DIFFERENT SURFACE TREATMENTS ON THE FRACTURE STRENGTH AND CORE-VENEER SHEAR BOND STRENGTH OF TWO DIFFERENT ALL-CERAMIC SYSTEMS



Fatma Makkeyah, Hany Halim, Gihan El-Naggar

Assistant Lecturer of Fixed Prosthodontics, Faculty of Dentistry, British University in Egypt(BUE).

Objectives: The present study aims to evaluate the effect of two different core surface treatments on the core-veneer shear bond strength and the fracture strength of two commercially layered all-ceramic systems. Materials and Methods: The selected systems were one CAD CAM system (Vita In-ceram Alumina blocks machine milled using Cerec inLab) and one pressable lithium disilicate system (IPS e.max Press). Crown shaped samples (for fracture strength testing) and disc shaped samples (for core-veneer shear bond strength testing) were constructed. For each system the core substructures were treated by either sandblasting or acid etching. The core samples were then veneered with their corresponding veneer. The obtained disc shaped samples were subjected to core-veneer shear bond test, while the crown shaped samples were cemented to standardized epoxy resin dies using resin cement (Variolink II) then subjected to fracture strength test. The sheared discs were scanned using scanning electron microscopy at different magnifications then digital images of scanning electron microscopy were analyzed using image analysis software. The obtained data were analyzed using one-way analysis of variance (ANOVA). Post hoc LSD test was used when ANOVA rendered a significant result to determine differences between means.Results: The IPS e.max Press with different core surface treatment showed no significant difference either for fracture strength or core-veneer shear bond strength, while the Vita In-ceram Alumina showed higher fracture strength for the acid etched and higher core-veneer shear bond strength for the sandblasted samples. SEM and digital image analysis demonstrated the particle size, surface area and area fraction of the remaining veneer. Conclusion: IPS e.max Press responds similarly to hydrofluoric acid etching and airborne alumina abrasion. In-Ceram Alumina ceramic is not affected by hydrofluoric acid etching, while airborne alumina abrasion can induce some degree of micro-roughness.

MORBIDITY AFTER CHIN GRAFT HARVESTING USING PIEZOSURGERY VERSUS CONVENTIONAL OSTEOTOMY TECHNIQUES

Gamal M. Moutamed

Vice Dean, Faculty of Dentistry,British University in Egypt (BUE), Egypt

The aim of this study was to investigate the morbidity at the donor site following harvest of chin bone using piezosurgery versus conventional bone cutting tools. A group of 20 patients who had undergone chin bone harvesting for alveolar ridge augmentation or sinus floor elevation procedures were selected. Patients were equally divided into two groups according to the cutting tool. Piezosurgery group in which piezoelectric surgical device was used for chin graft harvesting. Conventional group in which conventional cutting tools used for chin graft harvesting. The true

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distances between the donor defect and the apices of the adjacent mandibular teeth were measured. The distance from the lateral margins of the donor defect to the right and left mental foramina was recorded. Sensibility of the lip, teeth, and gingiva was registered one week, one, three, six and 12 months post-operatively. A total of six (30%) patients experienced anesthesia of the gingivae immediately postoperatively and had full recovery when reviewed at 3 month follow up. Three (15%) of these patients experienced paraesthesia of the chin and lower lip, however full recovery had occurred at the 6- month follow-up. Three patients experienced pain at the graft site for up to three months postoperatively. Nine patients showed a negative pulp sensitivity reaction in their lower teeth to ethyl chloride at one week postoperatively. Parameters comparisons across each group showed statistically significant difference between different parameters in teeth with and without negative response to thermal pulp testing regarding mean volume of the chin bone defect (P-value < 0.001), mean distance of the defect to mental foramen of both sides (P-value < 0.05). In conclusion chin graft donor site showed some post-operative morbidity. The most frequent disturbance was impaired teeth sensibility. Surgical control for the piezosurgery was easier than conventional methods for mobilizing a chin bone block graft. The force necessary to produce a cut was much less compared to rotational burs. Increased temperature during bone cutting with piezosurgery was avoided which reduces the risk of bone damage as a result of overheating.

A DAWN OF NEW ERA: GLUCOSAMINE IN THE MANAGEMENT OF PERIODONTAL DISEASE

HALA A. ABUEL-ELA

Professor in Periodontology, Oral Medicine and Periodontology Department, Faculty of Oral and Dental Medicine, Ain Shams University (ASU) and Misr International University (MIU), Cairo, Egypt.

Inflammation and destruction of periodontal tissues are largely considered to result from the response of a susceptible host to a microbial biofilm containing gram-negative bacterial pathogens. Therefore, host modulation as a treatment strategy for periodontal disease has received much interest in the recent decades. Several host modulating agents were investigated; however search for novel host modulating agents for the management of periodontal disease is still highly recommended by researchers. Glucosamine (GlcN) is an amino sugar that is commonly used to treat arthropathies. GlcN has anti-inflammatory actions related to its ability to suppress neutrophil functions as well as immune-modulatory effects including inhibition of nuclear factor kappa B (NF□B) activation and cyclo-oxygenase II (COX-II), prostaglandin E2 (PGE2) and interleukins (IL) production. Interestingly, GlcN was also found to suppress T-cell activation and ICAM-1 expression. The current presentation will focus on the clinical studies utilizing GlcN in the management of chronic periodontitis with an emphasis on the immune modulatory effects of GlcN.

ABSTRACTS

A NOVEL SURGICAL APPROACH FOR TREATMENT OF CLASS II FURCATION DEFECTS USING MARGINAL PERIOSTEAL MEMBRANE

Hala H Hazzaa

Associate professor of Oral Medicine, Periodontology, Diagnosis and Radiology. Faculty of Dental Medicine, Al Azhar University (Girls Branch).

Objectives: This study was designed to describe and clinically evaluate the use of a vascularized marginal periosteal barrier membrane (MPM) harvested, for the first time, by a semilunar flap incision in treatment of class II buccal furcation defects in mandibular molars. MPM was applied either alone or combined with a bone graft in treatment of the defects, compared to open flap debridement (OFD). Methods: 26 subjects (15 women and 11 men) were participated in the study, ranging in age from 37 to 52 years, diagnosed to have chronic periodontitis (CP) according to the clinical and radiographic findings. 30 class II buccal furcation defects in mandibular molars were selected and randomly assigned into three equal groups; group I (control) included the defects for OFD, group II (test-1) included those defects treated with MPM, while group III (test-2) contained the defects treated with MPM after applying demineralized freeze dried bone allograft (DFDBA). At baseline and 6-months follow-up, vertical probing depth (VPD) and clinical attachment level (CAL) measurements were obtained. A radiographic measurement of bone height (BH) was also obtained for each defect at the same time intervals. Results: Both groups; II (MPM alone) and III (the combined use of MPM + DFDBA) reflected significant favorable outcomes in all the assessed parameters, compared to OFD (the control group). Non-significant difference was found between both groups, regarding VPD, while significant improvement in CAL and BH were detected in favor of group III ($P \leq 0.05$).Conclusion: From our clinical data, it was demonstrated that: first, a vascularized marginal periosteum harvested by a semilunar incision, represents a promising way to get a more predictable amount of periosteum. Second, placement of an MPM as a barrier membrane using that novel approach demonstrated a significant improvement in clinical outcomes of class II furcation defects in lower molars. A meaningful difference was reflected on its combination with bone grafting, concerning the gain in CAL and BH.

TOTAL REHABILITATION.. A DECISION TO TAKE.

Hala I. ABBOUD

Partial or Total edentation, missing of one or more teeth, dental rehabilitation is a goal essential for both dentist and patient. The dental rehabilitation is a cooperation between different disciplines ranging from dental diagnosis to making treatment plan, which will be discussed with our patient and that will fit with its overall condition, social status and economic status.

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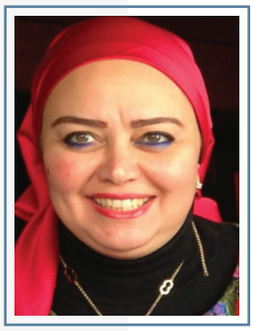

ERGONOMIC PERSPECTIVES FOR OPTIMAL HEALTH

Hala M. Abass

Professor in pediatric dentistry and Dental Health Department Cairo University & Head of the department, Misr International University (MIU)

ERGONOMICS is a way to work smarter-not harder, by designing tools, equipment, work tations and tasks to fit the job to the worker-NOT the worker to the job. Many of researchers believe that awkward body posture and low movement are the sources of occupational disorders. In conclusion, dentists should be informed about dental ergonomics regulation and its different aspects.

THE PREVALENCE OF INFLAMMATORY AND DEVELOPMENTAL ODONTOGENIC CYSTS IN A LIBYAN POPULATION

Hamed Orfi

Odontogenic cyst is a group of jaw cysts that are formed from tissues involved in odontogenesis (tooth development). Odontogenic cysts are closed sacs, and have a distinct membrane derived from rests of odontogenic epithelium. Intra-bony cysts are most common in the jaws, because the mandible and maxilla are the only bones with epithelial components. The prevalence of those types of cysts in Libyan population is common due to many etiological factors.

Non-Surgical Approach towards Successful Management of Traumatized Young Permanent Teeth in Children – Apical Plug Technique

Hany Saber, Sherine Ezz El-Din,Amr Ezzat, Norhan El-Dokky and Omar H

Assistant Lecturer in Department of Paediatric and Community Dentistry, Faculty of Oral and Dental Science, Cairo University

Aim of the study: The purpose of this study was to evaluate clinically and radiographically the periapical healing of traumatized young permanent anterior teeth in children by the use of sodium hypochlorite or sodium hypochlorite in conjunction with MTAD as irrigating materials and Bioactiveglass or mineral trioxide aggregate as an obturating materials. Materials & Methods: Forty four subjects having forty eight immature maxillary anterior permanent teeth aged between eight and thirteen years with mean age of (10.2 ± 1) have been selected in this study. The selected subjects were divided randomly into four groups according to the irrigating and obturating materials. Subjects were followed for one year both clinically and radiographically immediately postoperatively, 3 months, 6 months and 12 months postoperatively using DIGORA system. Radiodensitometric measurements were made for each subject. Data were collected and statistically analysed.

ABSTRACTS

EVALUATION OF HORIZONTAL ALVEOLAR DISTRACTION USING MODIFIED MICRO BONE SCREWS AND SUBSEQUENT IMPLANT PLACEMENT

Taher A.R., Mounir R.M and **Osman H.A**

Lecturer of Oral and Maxillofacial Surgery, Oral and Maxillofacial Surgery Department, Faculty of Oral and Dental Medicine, Cairo University, Egypt.

Objectives: The aim of this study was to evaluate horizontal distraction osteogenesis of thin alveolar ridge using modified micro bone screw and subsequent implant placement. Patients and Methods: Eight patients were seeking for restoring their missing anterior maxillary teeth with implant supported prosthesis. Residual alveolar ridge height was adequate but insufficient alveolar width. Distraction Osteogenesis (DO) using modified micro screw was performed before implant placement. Postoperative Cone Beam Computed Tomography (CBCT) scan was performed to assess the bone width and area gained after distraction process. After consolidation period the distractor was removed, bone core was harvested from the implant site then implant was placed. The obtained bone specimens were histologically examined. Results:The mean preoperative bone width was 3.06 mm that was increased to reach 5.5 mm, and mean preoperative bone area was 64.82 mm2 that was increased to reach 85.75mm2. Histological examination revealed native bone with well organized cancellous bone with wide marrow spaces. Conclusion: Horizontal DO using modified micro screw proved to be an effective method for augmenting the width of the deficient alveolar ridge, micro bone screw serving as a simple distraction device which doesn't considerably add to the overall costs of the surgical procedure.

Key words: Alveolar augmentation, Horizontal distraction, dental implants, Bone screws.

HOLISTIC DENTISTRY: THE FUTURE OF DENTISTRY

Hesham El-Essawy

The author contends that dentistry is responsible for many of the world diseases today. He contends that, the only way forward is holistic dentistry, Meaning that we should work in the patient's mouth with a view of helping, not harming, the whole body of our patient.

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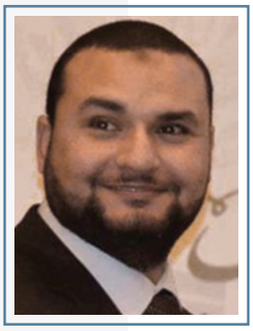
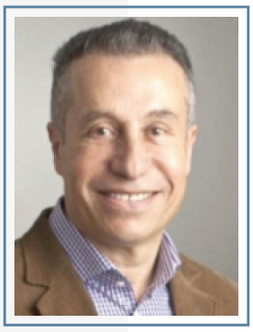


SINUS LIFTING AND THE STABILITY OF SIMULTANEOUSLY INSERTED IMPLANTS

Hesham E. Elhawary , Alshaimaa A. Shabaan

Lecturer of Oral and Maxillofacial Surgery, Faculty of Oral and Dental Medicine, Cairo University

Sinus lifting is one of the recent surgical modalities that were introduced to overcome the limited available bone height in the posterior maxilla for implant placement. Different techniques were introduced and utilized for sinus lifting. Implants were inserted either simultaneously or delayed after the healing of the lifted and grafted sinus according to the surgical situation. The present lecture is going to introduce the most popular and successful sinus lifting techniques and the indications and limitations of each one. It will also present resonance frequency analysis evaluation of the stability of implants simultaneously inserted in lifted and grafted sinus floor.



CLEAR ALIGNER THE INVISIBLE ORTHODONTICS WITH VISIBLE SUCCESS

Hisham Hammad

C-A speaker of the Middle East and Arab Gulf region

Nowadays more adolescents and adults realize the importance of straight teeth for their appearance and self-confidence. They are ready to start an orthodontic treatment; however it should be as invisible and comfortable as possible. Highly motivated people have long been seeking a way to manage their esthetical, dental and facial problems. Clear Aligner is an affordable appliance that involves all of these features. It provides the ideal solution for people who cannot rely on traditionally visible orthodontic treatments for private or professional reasons.

Whats is C-A ?

Its an invisible orthodontic appliance which offers our patients the following advantages:

- Comfort through a flat and even design.
- Customized design and fabrication.
- Virtually invisible and removable.
- Managing several grades of tooth movements.
- Observable results after short time.

ABSTRACTS

• No enamel decalcification or root resorption risk.

From the practitioner' s perspective C-A provides the following advantages:

• A modern and efficient treatment.

• Local fabrication.

• Direct control of treatment planning process and manufacturing.

• Economical: acceptable and affordable costs.

In this lecture we offer basic theoretical and practical knowledge about this modern and practical orthodontics concept, developed by Prof. Kim/Seoul. C-A is a successful tool that has been in use for many years in Europe, Japan and North America. We look forward to involve you in this innovative treatment process.

Direct pulp capping with Tri-calcium silicates and pulp regeneration

Imad ABOUT

Professor of Oral Biology

Understanding dentinogenesis and pulp regeneration during physiological and pathological conditions represents a real challenge in the provision of a suitable treatment that ideally leads to the induction of the pulp regenerative potential. Application of dental materials onto the injured pulp/dentin modifies the local microenvironment. The subsequent early steps of dentin pulp regeneration imply the activation of stem cells, their migration to the injury site and differentiation to secrete a reparative dentin in the form of a dentin bridge. Thus, these steps are critical and determine the success/failure of pulp capping procedures.

Tricalcium silicate-based materials, such as a BiodentineTM, developed as a dentin substitute, have biocompatible and bioactive properties. Biodentine has similar mechanical properties to human dentin. After mixing, the cement can be applied directly into the restorative cavity as a bulk dentin substitute without any conditioning pre-treatment. Investigating Biodentine interactions with dentin and enamel demonstrated that it provides a hermetic seal preventing bacterial infiltration. In addition, when applied directly onto the pulp in entire human tooth culture model, reparative dentin was synthetized at Biodentine application site.

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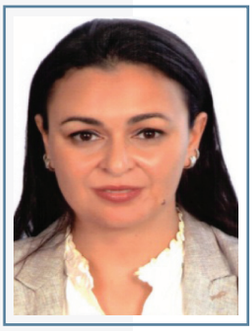
AN ALTERNATIVE TECHNIQUE FOR INFERIOR ALVEOLAR NERVE LATERALIZATION

JOAQUIN GARCIA RODRIGUEZ, RIHAM MOSTAFA EL-DIBANY

Postgraduate in Implantology & Periodontology NYU. BDS, dental university of Dominican Republic. Private practice with an emphasis in Implantology, Algeciras, Spain.

PhD, MSc & BDS, Alexandria University. Assistant professor of Oral & Maxillofacial Surgery, Alexandria University, Egypt.



The posterior mandible presents a challenge to clinicians because of the presence of the inferior alveolar nerve (IAN). Bone grafting procedures to increase the bone volume available for implant placement may be a viable treatment option but they often imply demanding surgical procedures and can be associated with complications, morbidity and high costs, therefore their acceptance by patients is often poor. Transposition of the IAN has been suggested as an alternative treatment to allow placement of longer implants, better initial stabilization and reduced treatment time. However, the conflicting results from studies that have determined the incidence of IAN dysesthesia with this procedure have created debate as to its appropriate use. This study describes the treatment outcome of a modified technique for lateralization of the inferior alveolar nerve in conjunction with expansion of the mandibular ridge for the rehabilitation of severely atrophic posterior mandibles.

EVIDENCE BASED ASSESSMENT OF RECENT ROOT CANAL OBTURATION MATERIALS

Kariem M El Batouty

Ain Shams University School of Dental Medicine, Endodontic depart. Cairo, Egypt

Over the past century, manufacturers have incorporated adhesive dentistry in endodontics by introducing obturation systems with a specific focus on obtaining a “monobloc” in which the core material, sealing agent, and root canal dentin form a single cohesive unit. Examples of systems that advertise this technology include Resilon, Activ GP and EndoREZ. Using E glass fibers, a light transmitting root canal filling material (GF) was manufactured as a prototype for research purpose. The GF transmits light to the apical area of the canal allowing the future use of light cure self adhesive sealers and better polymerization of dual cure resin sealers. It was found that the GF seal the root canal efficiently. Throughout the lecture these obturation systems will be compared to GF based on scientific evidence from literature regarding sealing ability, tooth reinforcement, bond strength, post insertion, ease of removal and cytotoxicity.

ABSTRACTS

CRITICAL THINKING IN ESTHETIC & IMPLANT DENTISTRY

Khaled Abdel-Ghaffar

Professor and Chair of Periodontology and Implant Dentistry, Faculty of Dentistry, Ain- Shams University, Cairo, EGYPT

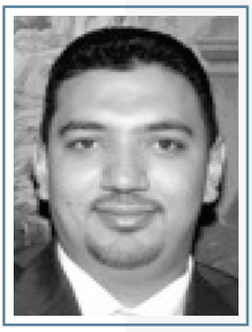
The esthetic replacement of teeth has become an important standard for implant dentistry. While defining this goal has not been difficult, the ability to resolve implant esth-etically has been fraught with obstacles & sometimes has not been attainable. The pu-rpose of this presentation is to summarize essential anatomical & surgical considerati-ons for cosmetic implant dentistry, in additions 129 oft & hard tissue requirements for pla-cing an implant in an ideal position. The prosthetically driven concept has to be respected during planning of implants at the esthetic zone in addition the basic concepts for perfect smile & critical diagnostic guides will be also addressed to optimize our esthetic results.

RECENT ADVANCES IN TREATMENT OF IMMATURE NON-VITAL ROOTS

Khaled Farouk Abbas

Assisstant Lecturer Endodontic Department BDS ,Msc Endodontics

FACE DRIVEN ORTHODONTICS



Khaled Samir AboulAzm

Lecturer of orthodontics

Face-driven treatment planning is unique in that the face and the smile are considered as a whole. Tooth movement and facial movement are both projected, resulting in the best overall result for the patient So What are today patients looking for? what can we, as orthodontists, provide to stand out from the crowd? The answer to both questions is very simple: LIFETIME ESTHETICS IN ADDITION TO FUNCTIONAL ADEQUACY. The emerging paradigm in our field is a global esthetic approach with emphasis on patient-centered interaction that enhances a good occlusion,achieved either solely by orthodontist or in conjunction with a team of cosmetic dentists and prosthodontists. Advanced modern orthodontic techniques provide solutions to effect an overall facial change, maximize esthetics and merge this with function providing the patients with top notch treatment outcome. With the new invention of term “filler like Orthodontics”

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ANESTHETIC EFFICACY OF FOUR PERCENT ARTICAINE DURING EXTRACTION OF THE MANDIBULAR POSTERIOR TEETH BY USING INFERIOR ALVEOLAR NERVE BLOCK AND INFILTRATION TECHNIQUES

Khalid Eid El-Kholey

Lecturer, Oral Surgery Ain-Shames University Hospitals Currently, Assistant professor oral surgery Ibn-sina college for medical studies, Saudi Arabia

Purpose: The study was designed to evaluate the anesthetic efficacy of 4% articaine with 1:100,000 epinephrine (A100) in infiltration and inferior alveolar nerve block (IANB) anesthetic techniques for the pain control during extraction of the mandibular posterior teeth. Patients & Methods: This prospective randomized double-blind clinical trial included 100 patients needing extraction of at least two mandibular molars. Patients received either Infiltration in the buccal vestibule opposite to the first molar supplemented with lingual infiltration or standard IANB with A100. The study variables for each technique were: total amount of anesthetic used, quality of the obtained anesthesia, the difficulty of extraction, and duration of postoperative anesthesia. A visual analog scale was used to assess pain during surgery, and thus subjectively evaluate the anesthetic efficacy of the two techniques. Results: Fifty patients received infiltration anesthesia and fifty patients anesthetized by IANB. The success rate of pain-free extraction after buccal infiltration was 94%, whereas by using IANB with the same anesthetic it was 92%. No Statistical differences were detected in the success rates between the 2 anesthetics techniques (P = 0.15). Conclusions: Buccal Infiltration can be considered a good option during extraction of the mandibular molar and premolar teeth of course, with supplemental lingual anesthesia.

DENTAL FLUOROSIS: ASSOCIATED RISK FACTORS AND PRIMARY SOURCE OF FLUORIDE INTAKE IN THE GAZA STRIP - PALESTINE: WORKING TOWARDS A STRATEGY FOR DENTAL FLUOROSIS PREVENTION

Lamis ABUHALOOB

PhD in Dental Public Health – United Kingdom, Head of Dental School Health in Ministry of Health – Palestine.

Dental Fluorosis has been a serious oral health problem in Gaza Strip for decades. It negatively affects personal appearance and perception. Aesthetic treatment of Dental Fluorosis is so expensive and unaffordable in middle and low income countries. Although, there is an effective role of fluoride in preventing dental caries, long term and high intake of fluoride during the period of permanent tooth development increased the risk of having dental fluorosis. Consecutive studies have been conducted in Gaza Strip to investigate the associated risk factors of Dental Fluorosis among Palestinian children and primary source of fluoride intake in the Gaza Strip to develop a strategy for dental fluorosis prevention. The prevalence of Dental Fluorosis was 78% (63.4% was questionable to moderate (TFI score 1-4) and 14.6% was severe (TFI score 5-8)). The factors reducing the Dental Fluorosis risk were: Being child of Professional and Managerial fathers, covering brushes with pea size fluoridated toothpaste, not to swallow fluoridated toothpaste and higher consumption

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of animal protein. While, drinking tap water with high fluoride concentration, living in houses near main road, using open fire as heating system during winter, rare knowledge for Dental Fluorosis and its risk factors, low energy and nutrients intake were factors that increased the risk. Foods were the primary source of fluoride intake because fluoridated tap water was used to prepare foods only and there was an increased trend in drinking filtered water in Gaza Strip. In conclusion, strategies and interventions for preventing Dental Fluorosis (including health and environmental education programs) should consider all fluoride sources and the impact of nutrients intake and nutrition status, not only the fluoride concentration in supplied tap water.

CEREC: THE INNOVATIVE SOLUTION

Mohamed El Sayed Hassanien

B.DS- M.D.S -P.H.D Fixed prosthodontics dept., Faculty of Oral and Dental Medicine-Cairo University

I.S.C.D Certified Cerec Trainer, CEREC being state of the art dental technology, offering ultimate merits for the elite dental practice.

The session will mainly focus on how Cerec is a valuable time saving machine offering highest degrees of precision to achieve both the operators and the patients functional and esthetic demands.

VARIATIONS OF CEMENTUM AND CEMENTOENAMEL JUNCTION IN THE EGYPTIAN DENTITIONS (HISTOLOGICAL, ULTRASTRUCTURAL AND STATISTICAL STUDIES)

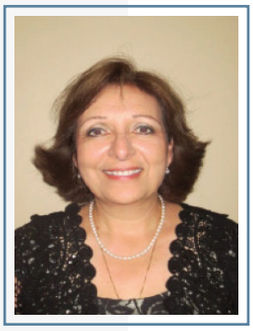
Mohamed M. Al Ankily ; A.M. El Motayam and N.S. Korany

Assistant Lecturer, Faculty of Dentistry, British University in Egypt (BUE)

Purpose: to investigate the frequency of various interrelationships between root cementum to coronal enamel at the cementoenamel junction in primary and permanent teeth in the Egyptian population as well as different types of cementum. Materials and methods The samples of this study was obtained from different areas in Egypt, teeth extracted for orthodontic purposes, presence of caries, or pulp involvement, avoiding direct contact of surgical instruments with the cervical region. The relationship between the enamel, dentin, and cementum was examined by light and electron microscope noted, photographed and analyzed statistically. The results of this study showed that all circumferences represented by CEJs exhibit an interchange and combination of 3 types of relationships: (1) cementum over enamel; (2) enamel and cementum in the edge-to-edge relationship; and (3) the presence of a gap between the enamel and cementum with dentin exposure. The cementum overlapping the enamel predominated. It is concluded the predominance of the cementum overlapping enamel (52.8%), then the edge-to-edge interrelationship (38.6%), while gap with dentin exposure was rare (5.7%).

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS



EXCESSIVE GINGIVAL DISPLAY –ETIOLOGY, DIAGNOSIS AND TREATMENT

Magda S. Eldiwany,
DDS, MS,

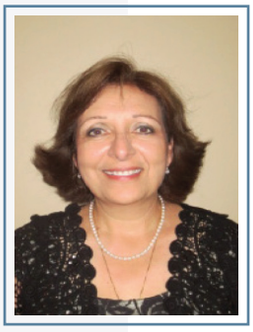
Associate Professor at the University Of Texas School of Dentistry at Houston, Department of Restorative Dentistry and Prosthodontics

Course Description

Extensive exposure of the gingiva during a smile, called excessive gingival display or gummy smile, is a point of concern for both patients and clinicians. Patients often present to the dental clinic seeking a solution to their "gummy" appearance. A clinician must fully understand the various factors involved in this situation, to provide patients with a satisfactory treatment. Thorough examination followed by the right diagnosis is imperative for achieving an esthetic and predictable result in the treatment of such situations.

Objectives

- Review basic principles of smile design.
- Understand the etiology of a gummy smile
- Overview the principles of diagnosis and treatment.
- Provide the patient with predictable esthetic results.



BLEACHING AND PATIENT'S DEMANDS

Magda S. Eldiwany,
DDS, MS,
Associate Professor at the University Of Texas School of Dentistry at Houston, Department of Restorative Dentistry and Prosthodontics

Course Description

Patients today are increasingly in search of whiter and brighter smiles and their expectations for white teeth continue to grow. Successful dental practitioners must be prepared to treat the growing population of patients who are in quest to improve their smile The dental professional must be able to balance the request for extremely white teeth with predictable treatment options with a view to the overall oral health of the patient.

ABSTRACTS

Course Objectives:

- Be able to answer safety concerns related to bleaching.
- Understand the research on current treatment options.
- Review causes of teeth discoloration.
- Review different techniques of bleaching.
- Case presentations

CO2 AND ER:YAG LASER THERAPY IN THE MANAGEMENT OF DENTIN HYPERSENSITIVITY AND ASSESSMENT OF MINERAL CONTENT.

Mahmoud Helmy Belal

Associate professor of Oral Medicine, Periodontology & Oral Diagnosis. Department of Oral Medicine, Periodontology & Oral Diagnosis, Faculty of Oral & Dental Medicine, Fayoum University, Al-Fayoum, Egypt.

Background & Objective: Dentin hypersensitivity is considered a potential threat to the oral health since its pain may interfere with the maintenance of a good oral hygiene. Laser irradiation may now provide reliable and reproducible treatment but still has debate. The aim of the present study was to evaluate and compare effects of using CO2 or Er:YAG laser therapy in treating dentin hypersensitivity, and also to assess their effect on the mineral content. Materials & Methods: Eighteen single-rooted teeth extracted due to advanced periodontitis from 10 patients were included in this study. A thorough scaling & root planning was done by Gracey periodontal curettes to buccal & lingual surfaces of all teeth forming thirty six specimens. Specimens were then prepared using EDTA gel (24%) for 2 minutes for removing smear layer and simulating hypersensitive teeth, then washed with distilled water and dried. These were randomly & equally divided into three groups: 1- Control (no irradiation), 2- CO2 laser (repetitive pulsed mode, 2 Watt, 2.7 J/cm^2) & 3- Er:YAG laser (slight contact mode, 40 mJ/pulse & 10 Hz). To evaluate dentinal tubule occlusion eighteen specimens (six per group) of 2 mm thickness were obtained, prepared and observed using scanning electron microscopy for calculation of percentage of occluded tubules. To evaluate mineral content eighteen specimens (six per group) of 0.6 mm thickness were obtained then the levels of Ca, K, Mg, Na & P were measured by inductively coupled plasma-atomic emission spectrometry (ICP-AES). Results: SEM photomicrographs indicated that there were melted areas around the exposed dentinal tubules and a significant greater percentage of tubular occlusion in groups treated with CO2 and Er:YAG laser than that in control group. In addition, there were no significant differences between the experimental groups for Ca, K, Mg, Na and P. CO2 laser group showed an evident thermal effect than that obtained in Er:YAG laser group. Conclusion: Using CO2 and Er:YAG laser at the determined power settings can significantly treat dentin hypersensitivity and reduce its symptoms. However, Er:YAG laser has a more significant effect on tubular occlusion with also less thermal change, thus it may constitute a useful conditioning item for such condition. Furthermore, CO2 and Er:YAG laser did not affect compositional structure regarding mineral content. Key words: Laser, CO2, Er:YAG, dentin hypersensitivity, mineral content.

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CLINICAL OUTCOME OF IMMEDIATE NON FUNCTIONAL LOADED IMPLANTS IMMEDIATE VERSUS DELAYED IMMEDIATE IMPLANTATION

Mahmoud Mohsen El-Arini, Hatem Abdel-Rahman Mostafa, Tarek Abbass, Mushira Abdel-Latif Dahaba, Hesham El-Hawary

Sinus lifting is one of the recent surgical modalities that were introduced to overcome the limited available bone height in the posterior maxilla for implant placement. Different techniques were introduced and utilized for sinus lifting. Implants were inserted either simultaneously or delayed after the healing of the lifted and grafted sinus according to the surgical situation. The present lecture is going to introduce the most popular and successful sinus lifting techniques and the indications and limitations of each one. It will also present resonance frequency analysis evaluation of the stability of implants simultaneously inserted in lifted and grafted sinus floor.

EVALUATION OF HORIZONTAL RIDGE AUGMENTATION USING BETA TRICALCIUM PHOSPHATE AND DEMINERALIZED BONE MATRIX: A COMPARATIVE STUDY.

Mahmoud Shalash

Purpose: To evaluate the effectiveness of beta tricalcium phosphate (β-TCP) alone compared to β-TCP and Demineralized Bone Matrix (DBM) in regenerating localized horizontal maxillary alveolar ridge deficiencies prior to implant placement. Study Design: The study included 20 patients with horizontal maxillary ridge deficiencies limited to one or more neighboring teeth and initial ridge width of ≤ 5mmm. Patients were divided equally into two equal groups. Ridge augmentation was performed using Guided Bone Regeneration (GBR) principals. In group I GBR was performed using β-TCP only, while in group II both β-TCP and DBM were used. Following a 6 months healing period, bone cores from both groups were retrieved and implants were inserted. Specimens were examined histologically to calculate percentage of mineralized bone. Apical and crestal changes in ridge dimensions were calculated by digital subtraction using CBCT immediately after graft placement and six months later. Results: There was a statistically significant difference between the mean area percentage of mineralized bone between both groups where it was 40.1 % for group I and 68.96 % for group II. Radiograpically, the mean ridge width in group I increased crestally to 4.66 mm and apically to 6.12 mm. In group II the mean ridge width increased crestally to 5.2 mm and apically to 6.9 mm. Group II showed more bone gain with a mean of 1.37 mm crestally and 2.44 mm apically. This difference however was not statistically significant. Conclusion: Within the limitations of this study the combination of DBM and β-TCP can be used effectively in cases exhibiting minimal alveolar ridge defects. Keywords: guided bone regeneration, equine bone, alloplast, bone graft.

ABSTRACTS

THE EFFECT OF INCORPORATION OF SILVER NANOPARTICLES TO RESIN COMPOSITE ON ITS BOND STRENGTH TO DENTIN

Hadi A.I, Riad M.I and **Abbas M.M.**
Lecturer of Operative Dentistry, Faculty of Dentistry, October 6 University.

Objective: The aim of the study was to assess the effect of incorporation of silver nanoparticles to resin composite restorative material on its microtensile bond strength to dentin. Method: Non-carious 32 sound human molars were selected for the study.The specimens were randomly divided into two equal groups according to the silver nanoparticles incorporation. Micro tensile bond strength test was done; two representive sample of each group and analyzed using Environmental Scanning Electron Microscope (ESEM). Results: Resin composite without silver nanoparticles incorporation has the highest bond strength to deep dentin when tested after 24 hours, while resin composite without silver nanoparticles incorporation has the lowest bond strength to superficial dentin when tested after 3 months. After 3 months; resin composite specimens with incorporation of silver nanoparticles showed statistically significantly higher mean micro-tensile bond strength than resin composite specimens without incorporation of silver nanoparticles. Conclusions: Incorporation of antibacterial silver nanoparticles to resin composite affected its bond strength to dentin that was improved with aging. The bond strength of resin composite either applied alone or with silver nanoparticles incorporation is dentin depth and aging dependent.

ConeBeam 3D system FONA XPAN 3D

Michal Cempírek,
MSc., Product Trainer, FONA Dental Bratislava, Slovak Republic

ConeBeam 3D system FONA XPAN 3D

- Benefits of 3D examination, diagnostic value
- Solution for everyday practice
- 3D examination workflow in dental office

FONALaser

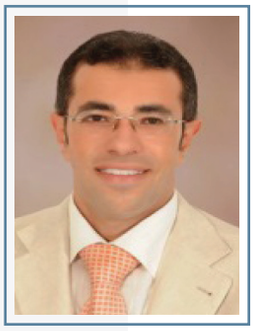
- Application and benefits
- Cases and results
- Laser for everyday practice

Hygienic system DAC Universal

- Complete solution for maintenance of instruments
- Safety and cost benefits of DAC

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS



FACE OFF: A DREAM COMES TRUE

Mohamed Ahmed El-Sholkamy

Lecturer, Faculty of Dentistry – Suez Canal University, Oral & Maxillofacial Surgery Dept

Objectives: The aim of this presentation is to break the ice with the breakthrough of the innovative trials of facial transplantation. Patients & Methods: The presentation is advocated to the review of the cases done in several countries regarding the facial transplantation. The indications and clinical implications will be covered. The auto immune problems associated with the procedure & the blood supply considerations will also be discussed. Finally the medico legal aspects and the flow chart of the administrative paper work required for legislation of such procedures will be referred to in brief.

DENTOALVEOLAR TRAUMA AMONG CHILDREN

Mohamed El Kaoulani

Vice Dean, Faculty of Dentistry, El-Hadida, Algeria

Assistant professor, Faculty of dentistry, El-Hadida, Algeria

Dentoalveolar trauma are a frequent reason for consultation in emergency dentistry. The incisors are the most part shocked. Dentoalveolar trauma are common among children 5 to 12 years. Diagnosis and early treatment of these injuries has a great influence on the prognosis of the dental organ. The search for other fractures (including condylar) must be systematically associated on account of serious consequences that can result (TMJ ankylosis). A precise interrogation, clinical examination oriented and radiographic appropriate; allow immediate care and effective significantly improving the prognosis. The delayed treatment can limit the results.

ABSTRACTS

FRONTAL SINUS OBLITERATION. SHORT TERM FOLLOW-UP STUDY

Mohamed I. El-Faramawey

Lecturer, Oral & Maxillofacial surgery Department, Faculty of Oral and Dental Medicine, Cairo University.

Introduction: Frontal sinus fractures are composed of between 5% and 12% of all facial fractures and are associated with 32% of panfacial and maxillary injuries. Of the patients with frontal sinus fractures, 35% present with concomitant orbital fractures, 17% with zygomatic fractures, and 15% with naso-orbito-ethmoid fractures. management depends on a detailed understanding of the pathogenesis of injury and is guided by basic principles of adequate fracture fragment mobilization, reduction, and fixation. Unique to frontal sinus fractures is the potential for intracranial and nasopharyngeal communication with the development of subsequent severe infectious complications. It is imperative that the practitioner recognize these problematic fractures and treat them appropriately.

Materials and methods: The purpose of this study was to assess the short term results of surgical management of anterior table frontal sinus fractures. This study included 10 patients admitted to the Craniomaxillofacial Surgery Department, Nasser Institute Hospital, Cairo, Egypt. All patients were males with age range from 24 to 38 years. The trauma in 7 patients were due to motor cycle accidents, 2 patients were due to street violence and one patient fell from a height. The preoperative C.T. scans showed marked displacement of the anterior wall of frontal sinus. All cases had a questionable involvement of the nasofrontal duct seen on the C.T. scan in the form of air-fluid level. No involvement of the posterior sinus table was seen. Three of those 10 cases had other facial fractures. All patients were treated through a coronal approach, complete exenration of the sinus lining and obliteration of the nasofrontal duct using pericranial tissue followed by sinus obliteration with particulate corticocancellous bone graft that was harvested from the posterior and/or anterior iliac crest. Other fractures were treated via variable transfacial approaches. Results: The immediate postoperative C.T. scans and clinical assessment demonstrated complete sinus obliteration with no air-fluid level. Clinically there was mild edema in the field of surgery. 3 months later results were consistent with those seen immediately after surgery. Clinically there was no edema and good frontal contour with good eye opening was seen. After 12 months the C.T. scans showed uneventful changes except 2 cases showed a cyctic radiolucent area in the obliterated sinus. The maximum diameter of these radiolucencies was 3cm. nasofrontal duct leakage were not seen. These 2 cases had to be reoperated for exoneration of these mucocele (examined histopathologically). 6 months later these 2 cases showed no recurrence with intact posterior table.

Conclusion: Obliteration of the frontal sinus is seemingly an adequate procedure to manage anterior table fractures. Mucocele is a high threat for thsese cases requiring a more aggressive exoneration of the sinus lining. Inadequate removal of the lining in surgical cases can induce an early mucocele formation.

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ABSTRACTS

RECOMBINANT HUMAN BONE MORPHOGENETIC PROTEIN-2 (RHBMP-2) IN SECONDARY ALVEOLAR CLEFT RECONSTRUCTION

Mohamed I. Faramawey

Lecturer, Oral & Maxillofacial surgery Department, Faculty of Oral and Dental Medicine, Cairo University.

Introduction: Since the early maxillary cleft grafting, by Lexer (1908), the literature is overwhelmingly enriched with enormous reports dealing with this clinical dilemma. Grafting material was considered an important issue in this realm of controversies. Only recently the consensus of the gold standard being the autologous particulate bone graft harvested from the iliac crest. With the introduction of tissue engineering technology, researchers have been trying to find a comparable substitute for the autologous graft thus avoiding its inherent donor site morbidity. One of those tissue engineered materials is recumbent human bone morphogenic protein (rhBMP-2). Patients and methods: A total of 12 unilateral maxillary cleft patients, the age of which ranged between 8-12 years were selected randomly from the dental school. Those patients were divided randomly into 2 groups, group A where the rhBMP-2 carried on an absorbable collagen sponge was used in the closure of their alveolar clefts and group B where autologous corticocancelous grafts were used in the closure of their clefts. Assessments of all patients was done through clinical and radiographic parameters. A multislice C.T. scan was used as a baseline before any surgical intervention; the same scan was repeated six month after grafting. Both volumetric and denistometric analysis were extrapolated from the radiographic assessment. Both bone density and volume of the grafted areas were subsequently analyzed. Results: Clinical evaluation of both groups proved uneventual. Slight immediate postoperative edema was seen in the recombinant group (first group) and one case of postoperative infection was seen in the autologous group (second group). Radiographic assessment of the immediate versus 6 months postoperatively showed good bony bridging in all cases with evidence of permanent canine eruption into the newly formed bone. Volumetric analysis showed statistically significant increase in bone volume of the iliac crest group than rhBMP-2 group. On the other hand denistometric analysis showed increased density of the newly formed bone in the rhBMP-2 group than the iliac crest group but not with statistical significance. Conclusion: Recombinant human bone morphogenic protein (rhBMP-2) promises to carry adequate efficacy in closure of maxillary cleft defects thus it may carry the advantage of avoiding any concomitant donor site morbidities. Further studies on rhBMP-2 using different concentration to reach an optimum volume may be needed.

ABSTRACTS

CLINICAL APPLICATION OF COMPUTER GUIDED IMPLANT SURGERY

Mohamed Farid Shehab
Lecturer, Oral and maxillofacial surgery department, Faculty of Oral and Dental medicine, Cairo University, Egypt.

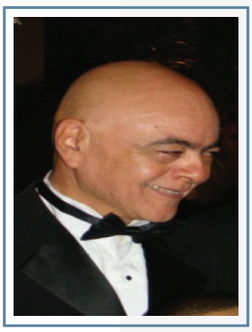
Computer-guided implant placement helps clinicians to precisely implement a treatment plan and accurately place implants with the use of three-dimensional interactive imaging software. The software enables the direct link between anatomic interpretation, surgical and prosthetic treatment planning, and precise surgical execution. Bone preparation, in relation to the position, angle, and depth of the implant, is guided through computerized digital procedures and patient-specific surgical guides are developed to obtain the optimum result of the insertion of implants in a predetermined acceptable position.

DIAGNOSIS AND TREATMENT PLANNING FROM SIMPLE TO DIFFICULT CASES.

Mohamed S. El Attar
Prof of Prosthodontics, Alexandria University

This presentation will discuss both the diagnosis & treatment planning ways of thinking. It will simplify the way of prosthodontic thinking and possibilities. Treatment planning is the key for success and patient satisfaction. Clinical cases will be presented showing a simple guide to the author's way of thinking.

HOW TO BECOME A UNIQUE DENTIST.



M.S. El Attar
Prof of Prosthodontics, Alexandria University

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

EFFICACY OF OZONE THERAPY IN MANAGEMENT OF PATIENTS WITH INTERNAL DERANGEMENT OF TEMPOROMANDIBULAR JOINT

Mohamed Said Hamed

Dean and Professor of Oral & Maxillofacial Surgery, Consultant "A", Oral & Maxillofacial Surgery , College of Dentistry, GMU – Ajman, UAE

Head of Scientific Committee , PAN ARAB Association for Oral & Maxillofacial Surgery

The signs and symptoms of temporomandibular disorders (TMDs) may include pain, impaired jaw function, malocclusion, deviation or deflection, limited range of motion, joint noise, and locking. Headache, tinnitus, visual changes, and other neurologic complaints may also accompany TMDs. TMDs can be subdivided into muscular(myogenic) and articular categories. Myogenic disorders include myalgia, myofascial pain, myospasm, splinting, and fibrosis contracture. Articular disorders include synovitis, capsulitis, joint effusion, trauma,fracture, internal derangement, arthritis, and neoplasm. Internal derangements of the temporomandibular joint are an abnormal relation of the articular disc to the mandibular condyle and the articular eminence. Jaw pain, clicking of the joint, irregular and limited movement of the jaw is the characteristic symptoms of this disorder. Usually it starts as clicking associated with normal opening (anterior disc displacement with reduction), to a stage where clicking gradually ceases but restricted mouth opening ensues (closed lock). Ozone has a long history of research and clinical applications. During World War I, ozone gas was used for treating gaseous post-traumatic gangrene, infected wounds, mustard gas burns and fistulas in German soldiers. The use of ozone is based on its oxidative, disinfective and bactericidal properties. Huang et al (2010) studied the effect of ozone water in promoting the healing of infected wounds. They concluded that ozone water showed better effects in promoting the healing of the infected wound, especially at higher doses of 10 and 20 mg/L. The aim of this study was to evaluate the efficacy of ozone therapy for management of patients with temporomandibular joint internal derangements in comparison with hyaluronic acid injection and saline wash and lavage. The current study was performed clinically in the outpatient clinic at the department of Oral and Maxillofacial surgery, faculty of dentistry, Suez Canal University. Forty five patients were evaluated in this study. Ten males and thirty five females aged between 15 and 40 years with a chief complaint of limited mouth opening and TMJ pain. All patients included in the study were subjected to diagnosis by: • Clinical examination including pain, tenderness, clicking sounds maximal mouth opening. • Radiographic examination. • Magnetic resonance imaging for the affected joint. All patients received different treatment modalities for TMJ dysfunction (muscle relaxants, diets, and physical therapy or oral splints) with no clinical improvement. All patients included in this study were diagnosed as having temporomandibular joint internal derangement, disc displacement without reduction and subjected to treatment by arthrocentesis. Patients with History of previous surgery, systemic inflammatory joint disease, and direct trauma to the facial bone, Hyperplasia, hypoplasia or tumor in the joint were excluded from this study. Patients with limited mouth opening caused by only muscle pain or muscle spasm were excluded also. Collection of synovial fluid sample from the outflow of the mixture of synovial fluid and saline solution during the process of arthrocentesis. Arthrocentesis is an effective conservative procedure in treatment of temporomandibular joint internal derangement. Clinical efficacy of arthrocentesis with ozone in the temporomandibular joint internal derangements. Efficacy of ozonized water as a clinically applicable form of ozone in ozone therapy for the temporomandibular joint . The clinical efficacy of ozone therapy in reducing joint pain. It has been found that ozonized water has the similar effect of sodium hyalurinate on the temporomandibular joint. The superiority of sodium hyalurinate

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over ozone was reported in physical jaw functions as reported in jaw movements. IL6 was detected in the synovial fluid in joints with internal derangement. It is considered an indicator for inflammatory reaction in the joint but it is not considered indicator to the severity of clinical symptoms.

EARLY MANAGEMENT OF SPACING BETWEEN UPPER ANTERIOR TEETH IN YOUNG ADULT PATIENTS

Mohamed Sherif Farag

Professor of Pediatric and community Dentistry, Suez Canal University

Managing patients with congenitally missing maxillary anterior teeth raises several important issues concerning the amount of space, the patient's age, the type of malocclusion, and the condition of the adjacent teeth. Early orthodontic intervention is important to eliminate a lot of psychological problems that may arise in young adult patients with spacing between upper anterior teeth and to create as well as to maintain a space either for fixed bridge or for insertion an implant after facial growth had been completed. In this lecture we aim to highlight about different treatment plans for this problem.

DIODE LASER APPLICATIONS IN ENDODONTICS: A CLINICAL OVERVIEW

Mohammad H. Atteia

BDS, MDSc, DDS, PhD of Endodontics , Associate Professor of Endodontics, Faculty of Oral & Dental Medicine, Cairo University. Cairo, Egypt.

Consultant of Endodontics, Dental and Maxillofacial Center, DF-Hospital, Royal Medical Services,West Riffa, Bahrain.

Lighth has been used as a therapeutic agent for many centuries. In ancient Greece, the human body was exposed to the sun for the restoration of health, or the so called "Heliotherapy". The Chinese used the sun to treat such conditions as rickets, skin cancer and even psychosis. This use of light for treatment of various pathologies is referred to as "Phototherapy". The use of lasers in dentistry has burgeoned at an astonishing rate over the past few years. Once relegated to use on soft tissue; now even hard tissue procedures can be done with lasers. Because of their many advantages, lasers are indicated for a wide variety of intraoral and extraoral procedures. The use of lasers in endodontics has been studied since the early 1970s, and lasers have been more widely used since the 1990s. Diode laser for medical use got the FDA approval since 1988, for coagulation during ophthalmic surgery. As an endodontic adjunct approved in late 1990s AAE stated that lasers and specially diode lasers can be used as an adjunct to root canal treatment procedures including the peri-radicular surgeries, provided that heat and thermal effects are controllable to be less than the thermal tolerance of vital periodontium and not mechanically undermining the tooth structure. In this regard, this lecture will describe the evolution of dental lasers, and will present the state-of-the-art effectiveness of diode laser in the cleaning and decontamination of the endodontic system, presenting recent preliminary studies on new methods of utilizing diode laser energy in endodontics.

INTERNATIONAL DENTAL CONGRESS

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SILVER NANOPARTICLES: PROPERTIES AND APPLICATIONS IN RESTORATIVE DENTISTRY

Mona Ismail Riad

Professor of Operative Dentistry, Faculty of Oral and Dental Medicine, Cairo University, Egypt.

Nanotechnology has been used for medical applications in several forms, including dental practice with the development of silver nanoparticles (Ag NPs) as a useful tool. The aim of this lecture is to identify the properties and appliances of Ag NPs in dental practice. Silver compounds and NPs have already been used as dental restorative material, endodontic retro-fill cements, dental implants and caries inhibitory solution. Despite the effectiveness that Ag NPs has shown in dental practice, Ag NPs remain a controversial area of research with respect to their toxicity in biological and ecological systems. Therefore any application of Ag NPs in dentistry requires more studies. Nano science involves the study of materials on the nano-scale level between approximately 1 and 100 nm. Metal-microbe interactions have an important role in several biotechnological applications. Their applications have already led to the development of new practical productions. In the past few years, nano-structured materials have been receiving considerable attention as a result of their unique physical and chemical properties, biological properties, and functionality due to their nano-scale size, and have elicited much interest and important applications in Dentistry.

SPLINTED VERSUS NON SPLINTED MINI DENTAL IMPLANTS RETAINING MANDIBULAR COMPLETE OVERDENTURE (STRESS ANALYSIS STUDY)

Magdy Eid Mohamed Elsayed and Mona Mohamed Aboelnagga

Lecturer of prosthodontics, Faculty of dentistry, Ain Shams University

Two identical acrylic models representing completely edentulous lower ridge were constructed to conduct this study. Four mini dental implants with ball head abutments were placed in the symphysial region of the 1st acrylic model (model 1). Another Four mini dental implants with square head abutments were inserted at the same sites in the 2nd acrylic model (model 2). Two identical overdentures were constructed on these two models. The first overdenture was fitted to the ball head mini dental implants through metal housings with O rings. while the second denture was fitted to the square head mini dental implants through clip bar attachment. One strain gauge was installed, on the distal aspect of the distal implant on each side and another one was installed vertically on the buccal aspect of the2nd molar area of the ridge bilaterally. Posterior unilateral tissue ward force was applied on the second molar tooth of each model using universal testing machine. Tissue away force was also applied on the denture of each model. Microstrains were recorded by the four strain gauges during the tissue ward and tissue away forces. The results

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of this study revealed that, statistically significant higher stresses were transmitted to the distal implants of model 2 (bar design). However, the ridge of model 1 (ball head design) received statistically significant higher stresses especially on the loaded side. The results of the tissue away forces showed statistically significant higher stresses transmitted to the distal implants of model 1 (ball design) than that of model 2 (bar design). However statistical insignificant difference was observed between the stresses transmitted to the ridge of the two models. So it can be concluded that, it may be advantageous in clinical situations involving poor posterior ridge form with reduced posterior mucosal support, to splint the mini implants using interconnecting bar.

THE LIFE SPAN OF DIFFERENT NICKEL TITANIUM ROTARY INSTRUMENTS IN EITHER ROTARY OR RECIPROCATING MOTION USING SINGLE FILE ROOT CANAL PREPARATION TECHNIQUE

Mostafa El Kholy, Ghada ElHilaly, Abeer Saba

Assistant Lecturer, Faculty of Dentistry, British University in Egypt (BUE).

Purpose: to evaluate the single file technique using different instrument systems which were ProTaper (F2), Race and TF (size 25, 0.06 taper). Both continuous rotation and reciprocation motions were evaluated when used in this file technique. Materials and Methods: Maxillary molars were used in this study to evaluate each instrument type and each motion type until instrument failure (deformed or fractured). A total thirty six instruments were divided into three equal groups according to instruments' type. Furthermore each group was subdivided into two equal subgroups according to file motion (continuous rotation and reciprocation). The numbers of completed molars/instrument, total number of completed canal/instrument as well as the number of completed buccal canals/instrument were tabulated. Working times to complete a whole molar and that of a single buccal canal were also noted. Stereomicroscopic and scanning electron microscopy (SEM) examination were performed to evaluate instrument deformation, detect defects according to selected criteria and to identify mode of failure. Results: The ProTaper instrument prepared more canals than RaCe and TF when used in both file motion types. While the TF gave the least number of canals prepared among groups used in the two file motions. Concerning the file motion type, the continuous rotation allowed preparation of greater number of canals than the reciprocation. The ProTaper file reached the working length in more time than the other groups when used either in a continuous rotation or reciprocating method. Comparing the file motions, the reciprocating file needed more time to reach the working length. The cause of failure of most of instruments was due to torsional overload, and most of the stereomicroscopic defect was unwinding and increase in flute length. Most of the defects were located 4 mm from the tip of the instruments. The scanning electron microscope photomicrograph revealed that developing surface defects.

INTERNATIONAL DENTAL CONGRESS

ABSTRACTS

MANAGEMENT OF MEDIAL ORBITAL TRAUMA AND NASOETHMOID-ORBITAL INJURIES

Mostafa Ibrahim Shindy, Samer Abdulgabar Noman

Lecturer of Oral and Maxillofacial Surgery, faculty of Oral and Dental Medicine, Cairo University

Fractures of the nasoethmoid-orbital region present some of the more formidable challenges to the reconstructive surgeon in regard to aesthetic and functional restorations. As the severity of injury escalates, the surgical difficulties increase, making acceptable results of therapy difficult to achieve. Optimal management involves not only repair of the skeleton of the central midface, but also restoration of function and aesthetics of the orbits, frontal sinus, anterior cranial fossae, and the overlying soft tissue. Detailed physical examination and radiographic imaging are necessary to properly diagnose the extent of injuries. Various surgical techniques, such as interfragmentary wiring, microplate fixation and transnasal wiring, are utilized. This article reviews injuries of the nasoethmoid-orbital region, and describes the pertinent anatomy and classification of injuries. Currently accepted methods of evaluation and repair of specific injuries are outlined.

EFFICACY OF VARIOUS REMINERALIZING AGENTS ON REMINERALIZATION OF EARLY ENAMEL CARIES-LIKE LESIONS: AN IN VITRO STUDY

Mostafa S. Atta

Lecturer of Operative Dentistry, Al-Azhar University, Cairo.

Aim: The objective of this in vitro study was to evaluate the remineralization potential of acidulated phosphate fluoride (APF), casein phosphopeptide-amorphous calcium phosphate fluoride (CPP-ACPF)and Beta tricalcium phosphate (βTCP) in remineralizing enamel surface on which artificial caries lesion was created. The changes were analyzed using Vickers microhardness tester (Lieca Japan, Tokyo) and scanning electron microscope (SEM). Materials and Methods: Fourteen maxillary premolars were selected and randomly divided into four groups of 10 teeth each: I: (Control; artificial saliva), II: (APF), III (CPP-ACPF) and IV :(βTCP). All the samples were assessed using Vickers microhardness (VHN) testing machine at the baseline, after demineralization and then after remineralization. One representative sample was randomly selected from each group for surface evaluation using SEM. Results: Statistical analysis using one-way ANOVA followed by multiple Duncan test was applied to detect significant differences at $P \leq 0.05$ levels between various surface treatments at different phases. Statistical analysis showed that group III: CPP-ACPF (235.43±24.97) and group IV: βTCP (275.75±19.45) had a significantly higher amount of remineralization than group II: APF (205.76±13.87) and group I: Control; artificial saliva (180.54±22.34). Conclusion: Among the remineralizing agents used in this study, β-TCP was found to be more effective than CPP-ACPF and Fluoride.

ABSTRACTS

SWITCHING TO CBCT: IS IT BENEFICIAL TO THE DENTAL PRACTITIONER?

Mushira Dahaba ,Sahar Hosny , Naglàa Abdel Wahed , Hany Omar, Riham M. Hamdy , Ahmed M. Abdel Samad

An overview of cone beam computed tomography (CBCT) and its role in orofacial imaging is provided, including comparison with conventional and volumetric computed tomography (CT). The results of several studies conducted at the Oral and Maxillofacial Radiology Department, where the researches were conducted, are summarized. Using CBCT for the pre- and postoperative implant site assessment necessitates following certain protocols in order to obtain standardization and hence accurate linear and densitometric measurements of jaw bones. Such protocols were established. The accuracy of CBCT in detecting the actual extension and location of lesions affecting the maxillofacial region as well as the perforation of cortical boundaries was evaluated. CBCT's ability in revealing the bony components of the Temporomandibular joint was also examined. It was concluded that it's essential for all dental and orofacial clinicians to be familiar with CBCT imaging. However, the responsibilities and the radiological skill levels of clinicians involved in imaging require consideration.

MINIMAL INTERVENTION DENTISTRY

Nagwa Khattab;

Professor of Pediatric and community Dentistry, vice dean for student affair, Minia University

Is the evidence based discipline dealing with oral soft and hard tissue saving procedures with the primary goal of improving the quality of life through lifelong optimal oral health. The "minimally invasive" approach in the treatment of dental caries incorporates the dental science of detecting, diagnosing, intercepting and treating dental caries on the microscopic level. Therefore, it involves early detection of carious lesion, evaluation of individual caries risk, preventive strategies, noninvasive approach to cavitated and non cavitated lesions as well as recall appointment according to caries risk category

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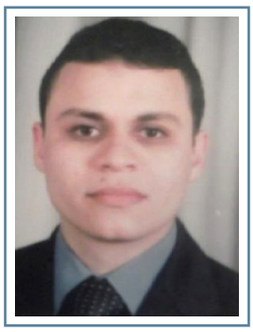
ABSTRACTS

MAGNETIC RESONANCE IMAGING IN MAXILLOFACIAL REGION: ADVANCED TECHNIQUES AND DIFFERENT SCOPE.


Mushira Dahaba, Mohamad Khalifa, Riham Hamdy, Ola Mohamad Rehan, Salma Belal

Although MRI has been applied for imaging pathological conditions of the head and neck for more than thirty years ago, it is still underestimated among dentists and maxillofacial surgeons. In addition, its benefits and value in the diagnosis of various maxillofacial abnormalities is still not totally discovered and properly established. One of the goals of the research plan of the Oral Radiology Department, Faculty of Oral and Dental Medicine, Cairo University is to investigate and throw some light on the validity and reliability of recent advances in MRI for examination of temporomandibular joint, salivary glands as well as maxillofacial lesions and to integrate these advances with the traditional approaches in an attempt to optimize the examination protocols in maxillofacial region.

CAN WE CHANGE TO DIGITAL DENTISTRY? YES WE CAN.

Nagy Abdulsamee

Head of Dental Biomaterials Department, College of Dentistry, Misr University for Science and Technology

Science is presently undergoing a great evolution, taking humanity to a new era: the era of digital dentistry. Digital technology is advancing rapidly in dentistry. Computers are making what were previously manual tasks easier, faster, cheaper and more predictable. Layered manufacturing processes can produce complex shapes at affordable prices with little or no waste. The challenge for the dental materials research community is to marry the technology with materials that are suitable for use in dentistry. This can potentially take dental materials research in a totally different direction. The aim behind this lecture is to provide an overview of these changes.

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ORTHOGNATHIC SURGERY BEAUTY AND ATTRACTIVENESS

Nasser Al- Manthery

BDS NUI, MSc UCL, MOrth RCS Ed, FFD RCSI, Senior Consultant in Orthodontics
Head of Orthodontic Department, Royal Oman Police Hospital

Most patients who request orthognathic surgery done do not have functional problems. Their problems are mainly aesthetic. They are basically unsatisfied with the way they look. This is because facial anomaly may have an adverse effect on individual's self-esteem and self-confidence. This presentation will focus on the different factors that might drive the individual with facial anomaly to have the surgery done.

TEAR STRENGTH AND WETTABILITY OF TWO RECENT IMPRESSION MATERIALS FOR POST SPACES

Nasser Hussein and Nagy Abdulsamee

DDS, MS a, Misr University for Science and Technology, Collage of Dental Surgery, 6th October City, Cairo, Egypt

Statement of problem: The need for determination of the impression material that can reproduce the post space accurately. Materials and Method: Ten specimens of medium viscosity polyvenylsiloxane ether (Identium, KettenBach. Germany) Group 1, and ten specimens of thermoplastic resin (Glue gun Thermoplastic resin rods. China) Group 2, were prepared in un-nicked 90-degree angle shaped specimens according to ASTM No.D624 for tear strength testing. The specimens were subjected to tension (F) using a universal testing machine at a constant head speed of 50 mm/min. Tear strength was calculated in kg/mm. Wettability of the specimens were determined by measuring the contact angle using the static sessile drop method. The contact angle was measured using an optical system to capture the profile of pure water dropped on the surfaces which were fixed horizontally. Results and conclusion: will be presented and discussed.

MANAGEMENT OF COMPLEX MAXILLOFACIAL GUNSHOT INJURIES AT NASSER INSTITUTE.

Niveen Askar , Mamdouh Sayed , Fahmy Abdel Alla

Assistant Professor of Oral and Maxillofacial Surgery, faculty of Oral and Dental Medicine, Cairo University

* Management of gunshot injuries to the face remains a cornerstone of the specialty of oral and maxillofacial surgery.
* Recently, since the events of January 2011, the number of firearm-related injuries has increased in Egypt, which was not the case since October 1973; this represented a challenge to both residents and experienced surgeons, owing to the complex nature of these injuries.

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* In the current presentation, the experience of Maxillofacial Department at Nasser Institute in management of complex maxillofacial gunshot injuries is introduced.
* The guide lines for management of ten cases are represented, including primary care, methods of fixation, late reconstruction to restore function and aesthetics.
* Also the use of computer aided design/CAM, and medical rapid protyping (Stereolethography) in reconstruction of maxillofacial defects following gunshot injuries is described.

ROLE OF DIGITAL RADIOGRAPHY IN EVALUATING THE EFFECT OF MELATONIN ON OSSEO-INTEGRATION OF DENTAL IMPLANTS

Marwa Mohammed Ali Mohammed1, Nashwa Salah Mohammed, Alaa Ebrahim Aboul Ela and **Noha Saleh Mohammed Abu-Taleb**

Lecturer of Oral Radiology, Faculty of Oral and Dental Medicine, Cairo University

Objectives: This study was performed to evaluate the effect of topical application of melatonin on osseointegration of dental implants using direct digital radiography. Material and Methods: Nine patients (1male,8 females) age range 20-40 years old were included where twelve implants were inserted and divided into two groups; control group: six implants inserted without topical application of melatonin, study group: six implants inserted with topical application of melatonin. Direct digital periapical and panoramic radiographs together with ridge mapping were performed preoperatively for implant site assessment. Direct digital periapical radiographs were performed immediately after implant placement and after 1, 3 and 6 months. The linear bone density and the marginal bone loss mesial and distal to the implants were measured. Statistical analysis was performed and the significance level was set at $P \leq 0.05$. Results: The study group showed statistically significant higher mean percent increase in bone density than controls after 3 months (9.3% and -13.2% respectively) and after 6 months (16.1% and -3.3% and respectively). Also, the study group showed statistically significant lower mean decrease in marginal bone loss than controls after 1 month (0.84 mm and 0.20 mm respectively), after 3 months (1.09 mm and 0.20 mm respectively), and after 6 months (1.6 mm and 0.26 mm respectively). Conclusions: It may be possible to apply melatonin during endoosseous dental implant surgery as a biomimetic agent where its use increased the bone density and decreased the marginal bone loss around dental implants reducing the period of occurrence of osseointegration.

ABSTRACTS

TOPICAL PIMECROLIMUS EFFECT ON PHENOTYPE AND LOCALIZATION OF INFILTRATING T-LYMPHOCYTES IN ORAL LICHEN PLANUS LESIONS A COMPARATIVE CLINICAL IMMUNOHISTOCHEMICAL STUDY

Ola Ezzatt, Hala Kamal, Hadir El Dessouky, Ehab Sa'eed

lecturer of Oral Medicine, Periodontology, Oral Diagnosis, Faculty of Dentistry, Ain Shams University, Egypt.

BACKGROUND: Oral lichen planus (OLP) is a T-cell-mediated chronic inflammatory oral mucosal disease. T-cell accumulation in the superficial lamina propria and keratinocyte apoptosis are characteristics of OLP lesions. The therapeutic objectives should be to quickly reduce disease symptoms by targeting pathophysiological pathways, and to provide long-term management by reducing recurrences. Pimecrolimus is a novel topical selective inflammatory cytokine release inhibitor; Given the T-cell-mediated pathogenesis of OLP, application of this drug seems to be a promising therapeutic option without the potential side effects that are associated with corticosteroids. ***OBJECTIVES***: The purpose of this study was to compare topical pimecrolimus 1% with Betamethasone 17-valerate 0.1% cream both in clinical efficacy and the effect on the number, immunophenotype and site of expression of infiltrating T-cells in oral erosive and atrophic lichen planus lesions. ***METHODS:*** Twenty four patients with Erosive or Atrophic OLP were randomly assigned blinded in two equal groups to receive either Pimecrolimus 1% cream **(Group I)** or Betamethasone 17-valerate 0.1% cream **(Group II)** 4 times daily for one month and followed up for another treatment free one month observational period. A marker lesion was identified and assessed weekly by clinical scoring (CS), and symptomatology score was obtained using a visual analog scale (VAS). Pre-treatment and post-treatment specimens were immunohistochemically stained for detecting, counting and localization of CD4+ and CD8+ cells. ***RESULTS:*** Both drugs showed significant reduction in clinical parameters after treatment termination, but with no significant difference ($P>0.05$) between changes from baseline mean values of Pimecrolimus and Betamethasone groups in terms of **CS** (-61.11±18 versus -63.19±19), **VAS** (-99.1±2.88 versus -98.65±4.6) respectively. However, Pimecrolimus 1% demonstrated initial significant reduction in CS after the first two weeks while this reduction was significant in Betamehasone group only after the 3rd and 4th week. Recurrence occurred within the treatment free period in 33.3% of patients of Group I, and 50% of Group II. Pimecrolimus reduced CD4+, and CD8+ cells number more than Betamethasone, and both drugs shifted the position of these cells from subepithelial area to deeper lamina propria. Moreover, the reduction in lesion size and pain was directly correlated with the reduction in CD4+ cells in Group I and with CD8+ in Group II. ***CONCLUSION:*** Both Pimecrolimus 1% and Betamethasone valerate 0.1% cream are well tolerated and effective in reducing painful symptoms and lesion size in erosive or atrophic oral lichen planus patients. But Pimecrolimus 1% cream induces rapid initial response, and has a lower rate of recurrence after treatment cessation; that may be mediated by its immunopharmacological effect on CD4+ cells number and localization.

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RECENT ADVANCES IN REGENERATIVE ENDODONTICS

Omar Mostafa Fahim

Professor of Endodontics , Faculty of Dentistry, King Abd Al-Aziz University (KAU), Saudi Arabia & Faculty of Oral & Dental Medicine, Cairo University, EGYPT

Abstract: Recently, there are great improving after introduction of the use of dental stem cells (DSCs) in many branches in dentistry as a whole in field of tissue engineering and regeneration & specially in Endodontics such as pulp capping, pulpotomy, apexigenesis, apexofication, revascularization of non vital teeth even with periapical pathosis. This lecture was directed to review recent advanced experiments, their results and to evaluate the problems still facing those trials and expected problem solving for them.

RECENT TRENDS IN PREVENTIVE DENTISTRY

Osama El Shahawy

Associate Professor of Pediatric Dentistry Cairo University

Head of Pediatric Dentistry Department, Future University, Egypt

Current trends in preventive dentistry focuses on defining the risk of the patient before formulating a treatment plan. CAMBRA which is caries management by risk assessment was introduced as an evidence based approach to prevent and manage the earliest stages of caries. Caries protective measures are both biological and therapeutic measures that can be used to arrest or prevent the pathological challenges posed by caries risk factors. Once the clinician has categorized the patient caries risk as (low, medium, high or extreme) a therapeutic and/ or preventive plan should be implemented. Fluoride along with other products were recommended to be used as non invasive therapeutic approaches. The use of fluoride varnish augmented with calcium and phosphorus technologies has became an important component in the described approach.

IS FULL CERAMIC CROWNS A VALID RESTORATIVE OPTION FOR PRIMARY TEETH?

Osama El Shahawy

Associate Professor of Pediatric Dentistry Cairo University

Head of Pediatric Dentistry Department Future University, Egypt

Successful & reliable restoration of primary teeth is a cornerstone in managing pediatric dental defects. Restoration is essential to manage small cavities all through severely mutilated teeth. The longevity and reliability of the restoration fulfilling function and esthetics demands is the goal of all pediatric dental practitioners. As it is

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well known, Full coverage is the reliable restorative option for endodontically treated teeth, severely mutilated teeth and teeth with developmental defects. Moreover recent conservative approaches in management of deep caries requires proper restorative seal to ensure the success of indirect pulp capping or partial caries removal, and this can well achieved with full coverage. Veneered stainless steel crowns emerged as an esthetic alternative to the classic stainless steel crowns. Most recently, full ceramic zirconium crowns were introduced both for anterior and posterior restorations as a superior esthetic option with perfect gingival integration and thus adding a new dimension in restoring primary teeth.

EFFECT OF RED BULL ENERGY DRINK ON RATS' SUBMANDIBULAR SALIVARY GLANDS

Rabab Mubarak

Dean of Faculty of Dentistry, Beni Sueif University

Professor of Oral Biology, Faculty of Oral and Dental Medicine, Cairo University.

Background: Energy drink consumption has continued to gain wide popularity. These drinks are marketed for young people !iS natural alternatives that improve physical and mental performance such as concentration, attention, and alertness. Aim: The purpose of this study was to determine the histological and ultra structural changes in rat submandibular salivary glands induced by Red Bull energy drink. Methods: Twenty male albino rats (170 ±10 grams) were divided equally into group I (control) and group II (Red Bull). The rats of group II received a daily single dose (3.57 ml/kg) of Red Bull energy drink using an oro pharyngeal metallic curved tube for 8 weeks. At the end of the experimental period, all rats were sacrificed. The submandibular salivary glands were dissected out and prepared for histological and transmission electron microscopic examinations. Results: Histological examination revealed swelling of the secretory portions with numerous intracytoplasmic vacuoles. The connective tissue capsule and septae showed extensive fibrosis and congested blood vessels. Nuclear atypism, pleomorphism, hyperchromatism as well as numerous mitotic figures were detected. The excretory ducts appeared dilated with retained secretion. The granular convoluted ducts appeared dilated with reduced granular eosinophilic content. Electron microscopic examination revealed abnormal divided nuclei and large coalescing electron lucent secretory granules in the secretory cells. Numerous vacuoles and electron lucent granules were detected also in the granu lar convoluted ducts. There were also numerous dilated blood vessels with electron dense erythrocytes.

Keywords: energy drinks; Red Bull; salivary glands; histological changes.

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ROLE OF DIAZEPAM IN DENTAL ANXIETY AND IT'S RELATION TO SERUM CORTISOL LEVEL BEFORE DENTAL SURGICAL TREATMENT

Rafel Hamed Rasheed, Eman Majed Rasheed Al-Hadithy

Prof. in Department of oral medicine; Faculty of dentistry, Baghdad University
Lecturer in Department of physiology; Faculty of Dentistry; Anbar University

Purpose: To evaluate the relation between the level of serum cortisol and increase anxiety in dental patients before minor oral surgery and role of low dose diazepam in decrease anxiety. Materials and method: Sixty patients were included in this study were attended Alkatana Specialized Dental Center from December/2011 till March/2012, their age ranged from (16-54 years) 32 patients were females and 28 were males. They were divided into three groups, 30 of them as controls (they didn't need any dental surgery), second group are 20 patients study group in age, sex and their general health status but they needed minor oral surgery, other third group are 10 patients who take low dose diazepam (5mg) before minor oral surgery. Blood samples were collected from all patients between 10-11 Am., and about 5 minutes before surgery to the patients of the study group and third group. Serum cortisol level was measured by using radioimmunoassay analysis. Results: Regarding the control group 15 were females and 15 were males while for the study group patients12 were females and 8 were males while in third group 5 were females and 5 were males. Serum cortisol level was significantly different between three groups the mean was13.05 ±6.51 for control patients and 23.62 ±10.12 respectively while for valium group 2.69±1.28 and the Coefficient correlation (r) between serum cortisol level and pulse rate in three groups were 0.23 ($p>0.05$) for the control patients and 0.55 ($p<0.01$) for the study group patients and o.42 ($p>0.05$). When serum cortisol concentrations in study group were distributed according to the age of the sample, there was a highly significant positive correlation between these variables ($r=0.36$, $p< 0.05$). Also pulse rat in study group was found highly positive association with age ($r=0.55$, $p < 0.01$).While serum cortisone concentration and pulse rate no significant different in patients who take 5mg diazepam before minor dental surgery. Conclusions: the valum group patients exhibited significantly low levels of serum cortisol than that of the study and control group. Keywords: dental anxiety; pain; cortisol.

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THE STUDY OF TEMPROMANDIBULAR JOINT DISORDERS AND ANTI-CYCLIC CITRULLINATED PEPTIDE ANTIBODIES IN SERUM AND SALIVA OF PATIENTS WITH RHEUMATOID ARTHRITIS

Raya Muwaffaq Khidhir and Raja Hadi Al-Jubouri

Professor, Department of Oral Medicine, College of Dentistry, University of Baghdad

Background: Rheumatoid arthritis is an autoimmune disease that affects mainly the synovial membranes and articular structures and is characterized by chronic, systemic inflammation involving multiple joints. The TMJ was considered as a specific serological marker for diagnosing RA disease ,antibodies to cyclic citrullinated peptide have proven to be associated with joints destruction, though; it may play a potential role in the prediction of the disease severity. Materials and Methods: 69 individuals were enrolled in this study, 49 were patients diagnosed with Rheumatoid Arthritis, and 20 were healthy control subjects. Blood and saliva samples were taken from each subject for immunological analysis of Anti-Cyclic Citrullinated Peptides antibodies by ELISA. Each patient with Rheumatoid Arthritis disease was examined by means of Research Diagnostic Criteria for Temromandibular Disorders for the assessment of TMJ involvement. Results: Frequency of positive serum Anti-CCP antibodies was higher in rheumatoid arthritis patients compared to healthy controls (p=0.000). TMJ clinical findings were bilaterally involved except joint sounds, sometimes; it was unilateral. Chronic rheumatoid arthritis patients associated with higher prevalence of TMJ disorders than newly diagnosed RA, except limited mouth opening which were prevalent in newly diagnosed RA patients, (p=0.012) was significant. Positive serum Anti-CCP rheumatoid arthritis patients were associated with higher frequency of TMJ disorders compared with RA patients with negative serum Anti-CCP, a non-significant difference was found. Conclusions: Anti-Cyclic Citrullinated Peptide antibodies are considered as a biomarker of inflammation and disease activity. TMJ disorders are frequently involved in rheumatoid arthritis patients. Rheumatoid arthritis patients with positive serum Anti-Cyclic Citrullinated Peptides antibodies associated with higher frequency of TMJ disorders.

Keywords: Rheumatoid arthritis, Tempromandibular joint, Anti-Cyclic Citrullinated Peptide antibody.

SURGICAL LOCALIZATION AND IDENTIFICATION OF MARGINAL MANDIBULAR NERVE DURING SUBMANDIBULAR DISSECTION

Rami R. El-Beialy

Lecturer of Oral and Maxillofacial Surgery, faculty of Oral and Dental Medicine, Cairo University

Submandibular incision and dissection is considered the most common surgical approach for the Head and Neck surgery. It is encountered in mandibular trauma, submandibular sialadenectomies, resections and neck dissections. Trauma to the marginal mandibular nerve leads to facial cosmetic deficit that is unpleasant and unacceptable by patients. Here we introduce a surgical technique for localization and identification of the marginal mandibular nerve during submandibular dissection that allows for safe protection of the nerve.

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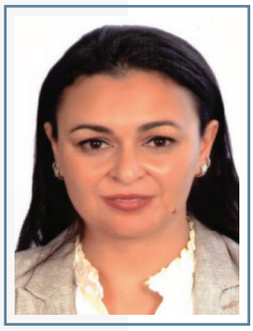

REHABILITATTION OF ATROPHIC POSTERIOR MAXILLA USING PTERYGOID IMPLANTS

RIHAM M. EL-DIBANY

PhD, MSc & BDS, Alexandria University. Assistant professor of Oral & Maxillofacial Surgery, Alexandria University, Egypt.

The rehabilitation of posterior maxilla with osseointegrated implants is one of the greatest clinical challenges. The location of the maxillary sinus, deficient bone quality, bone quantity, limited surgical access, and biomechanics (greater masticatory forces) make it a challenge to restore dentition in this region. Implants delivered into the dense cortical bone of the pterygomaxillary region have been found to provide adequate support in the posterior maxilla and eliminate procedures such as sinus augmentations, supplemental bone grafts, posterior cantilevers and the use of a large number of implants. Implant placement in the pterygoid bone can be difficult due to the variable anatomy and varying degrees of atrophy possible in the maxillofacial region. The technique is not without risk because the drill path is close to important anatomic structures. A significant error can be induced by only a slight deviation of the drill path direction. The present study provides long-term results following placement of screw-type implants in the pterygomaxillary-pyramidal region using threaded bone expanders.

CONTROVERSIES IN ORTHOGNATHIC SURGERY

Sadakah. A.A

Professor of Oral and Maxillofacial Surgery, Oral and Maxillofacial Surgery Department, Faculty of Dentistry, Tanta University, Egypt

Appropriate description of the facial muscle “memories” and evidence is still lacking as to the stability and efficacy of many of the surgical procedures being recommended today. The bones are not inanimate blocks of wood that can be sectioned and placed where the doctors believe they should be. Bone can resorb and readapt and reposition itself, powered by the musculature and other soft tissues. How a surgical procedure could be performed without the complete cooperation or “close harmony” of the orthodontist and surgeon. No matter how positive the orthodontist is, no surgery is possible without the complete approval of the surgeon. It would be appalling to discover that there are surgeons who would proceed with surgery with which they strongly disagree simply because it is being recommended by the orthodontist. In spite of large developments in orthognathic surgery in overall the world, however, there are still many debatable and controversial issues starting from issues of bone cutting techniques, nerve injuries, soft tissue changes, stability and condylar resorption. These controversial issues will be presented and the etiology and methods of avoidance will be highlighted.

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EVALUATION OF THE DENTOALVEOLAR APPLICATION OF TOBRAMYCIN–DEXAMETHASONE OINTMENT POSTOPERATIVELY FOR THE PREVENTION OF ALVEOLAR OSTEITIS AFTER THE EXTRACTION OF IMPACTED MANDIBULAR THIRD MOLARS: A CLINICAL STUDY.

Saleh Ahmed Bakry
Lecturer of Oral and Maxillofacial Surgery, faculty of Oral and Dental Medicine, Cairo University

Purpose: The aim of the present study was to clinically evaluate the dentoalveolar application of tobramycin–dexamethasone ointment postoperatively for the prevention of alveolar osteitis, to prepare a comprehensive treatment plan to prevent alveolar osteitis after removal of an impacted third molar extraction. Material and Methods: A prospective study was done on 80 patients with impacted lower third molars which were indicated for extraction. They were divided randomly into two groups; the test group was treated with dentoalveolar application of Tobramycin - Dexamethasone ointment postoperatively and the control group not received any dentoalveolar medication. All the patients were evaluated for pain, presence or absence of clot and condition of the alveolar bone for the diagnosis of dry socket. Results: The results showed that the incidence of dry sockets was 11%, when patients did not use tobramycin–dexamethasone ointment postoperatively which is statistically significant. Conclusion: It appeared that the incidence of dry socket can be reduced significantly by dentoalveolar application of tobramycin–dexamethasone ointment postoperatively.

KEYWORDS: Impacted lower third molar, alveolar ostitis, tobramycin–dexamethasone ointment

UPDATES ON DENTAL PAIN MANAGEMENT 2012-2013

Sally Ragy Riad
Abbott Laboratories

50 Years of Ibuprofen

Ibuprofen was first synthesised fifty years ago in December 1961 by Dr Stewart Adams and his colleagues John Nicholson and Colin Burrows, who worked at the Boots Pure Drug Company in Nottingham, UK. The first clinical trial took place in 1966 at the Northern General Hospital in Edinburgh, Scotland and in 1969 ibuprofen was first launched in the UK as a treatment for rheumatoid arthritis under the brand name Brufen. Ibuprofen went on to become one of the world's most widely used pain management treatments because of its accessibility and broad efficacy in the management of pain, inflammation and fever.

Abbott and Brufen:

Brufen from Abbott is the original ibuprofen. It has been available for >40 years to patients in >96 countries, and continues to be innovated to meet local patient needs and requests. It is available in many forms and strengths today including traditional pills, granular and effervescent packets that dissolve in water and even liquid form.

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Points of Discussion :

- Latest Scientific Updates on Dental Pain Management 2012-2013 (ADA – BDA)
- Among all NSAIDs…Why Brufen ?
- Brufen in Managing pain from Dental Caries .
- Brufen in Wisdom Tooth Pain .
- Endo-dontics : Brufen in Managing Inflammatory pain such as Pulpitis (Specially Irreversible pulpitis e.g. Root canal or extraction)
- Peri-dontics : Brufen in Managing Periodontitis pain (mild ,moderate & severe)
- Orthodontics : Brufen in aiding analgesia through in –office procedures .(eg Bleeching – Tightening of dental Braces)

IMPACT OF THREE FLUORIDATED MOUTHWASHES ON THE TRANSVERSE STRENGTH, RESILIENCY AND CORROSION OF NICKEL TITANIUM AND STAINLESS STEEL ORTHODONTIC WIRES

Salwa Abd El-Raof El-Negoly, and Reham Abd Allah

Associate professor, Department of Dental Biomaterials, Faculty of Dentistry, Mansoura University, Egypt.

Purpose: To evaluate the effect of three fluoridated mouthwashes on the transverse strength, resiliency and corrosion of Nickel Titanium (NiTi) and Stainless Steel (StSt) orthodontic wires. Materials and Methods: Two types of orthodontic wires (NiTi and StSt), three fluoridated mouthwashes (Fluoridex, B-fresh, Ezaflour) and artificial saliva were used in the present study. Transverse strength and resiliency mechanical testing was based on the current American National Standard/American Dental Association Specification No. 32 for orthodontic wires. The testing was done using ovoid orthodontic wire specimens, cut from the straight portion of the preformed arch wire. Meanwhile, the chemical corrosion test was performed using potentiostat to assess the cyclic potentiodynamic polarization curve measurements. Two way-ANOVA followed by least significant difference (LSD) statistical tests were conducted for the results to determine if there was a significant difference in and between the groups. Results: The results showed significant differences in both transverse strength and resiliency values in and between NiTi and StSt wire specimens immersed in artificial saliva and the different fluoridated mouthwashes. Also, there was a relatively comparable decrease in corrosion potential and relative increase in oxidation current densities for both wires in case of using both B-fresh and Ezafluor mouthwashes in comparison with the artificial saliva. While Fluoridex mouthwash showed the least corrosion potential and highest oxidation current densities for both wires, suggesting a risk of corrosion of the wires. Conclusion: The transverse strength, resiliency and corrosion behavior of both Nickel Titanium and Stainless Steel orthodontic wires would depend on the type of the fluoride present in mouthwashes.

Keywords: Transverse strength test; resiliency; corrosion; fluoridated mouthwashes; orthodontic wires

ABSTRACTS

PULP REVITALIZATION: FACT OR FICTION.

Shehab El-Din Mohamed Saber

Associate Professor of Endodontics. Ain Shams University. Cairo. Egypt

For many decades, apexification has been a routine practice to manage immature teeth with necrotic pulps, and despite a literature replete with discussion, including recent artificial barrier methods, there has been no major breakthrough to improve this treatment. Recently, two new clinical concepts have emerged. One involves a revitalization approach to achieve tissue generation and regeneration. In this method, new living tissue is expected to form in the cleaned canal space, allowing continued root development in terms of both length and thickness. The other is the active pursuit of pulp/dentine regeneration via tissue engineering technology to implant or re-grow pulps. Although the technology is still at its infancy, it has the potential to benefit immature pulpless teeth by allowing continued growth and maturation. With this understanding, it may be predicted that apexification will become less needed in years to come. This lecture will overview the recent concept of pulp revitalization in the treatment of immature teeth with non vital pulps, and the emerging research on pulp tissue engineering and regeneration.

RESTORATION OF THE PERI-IMPLANT DEFECT OF IMMEDIATE IMPLANT BY BOVINE-DERIVED XENOGRAFT WITH AND WITHOUT PRF

Maggie A. Khairy and Shereen W. Arafat

Lecturer OMFS, MSA University

Objectives: The present study was performed to determine the influence of Bio-Oss with and without Platelet Rich Fibrin (PRF) on grafting the peri-implant defect around immediate implants. Material and methods: 18 implants were immediately placed following extraction of 18 maxillary anterior teeth. The peri-implant defects around 6 implants were grafted using Bio-Oss only, while the peri-implant defects around 6 implants were grafted using Bio-Oss combined with PRF, and the peri-implant defects around 6 implants were left non-grafted as control. The treatment outcome was evaluated after 6 months of healing clinically, and radiographically. By using CBCT, the changes in the vertical and horizontal defects in each group was measured and statistically analyzed.

Results: By the end of the study, No implants were lost yielding a 6-month survival rate of 100%. Regarding the peri-implant defects, there was statistically significant ($P \leq 0.05$) reduction of vertical and horizontal defects around the immediately placed implants in all the study groups. The horizontal defects showed reduction of 71.9 ± 14.2 % in test group A, 76.9 ± 11.5 % in test group B, and 66.4 ± 13.3% in control group. Moreover, the vertical defects showed reduction of65.7 ± 13 % in

INTERNATIONAL DENTAL CONGRESS

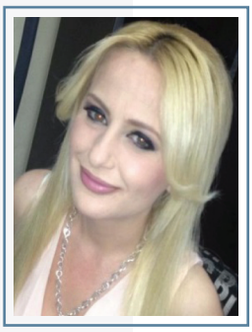
ABSTRACTS

test group A, 66.8 ± 4.8 % in test group B, and 63.4 ± 15.3% in control group. Although the changes were not significantly different between the three groups, both the horizontal and the vertical defect reduction were greatest in the test group B. Conclusion: Grafting of the peri-implant defects with Bio-Oss combined with PRF seems to provide favorable outcomes over the grafting with Bio-Oss only although it was statistically non-significant. Key words: osseointegration, xenograft, Bio-Oss, PRF, immediate implant.

DENTAL IMPLANT COMPLICATIONS

Sherif Hani Salama

Demonstrator Conservative Dentistry Department



THE CORRELATION BETWEEN MASTICATORY MUSCLES, AMFP AND CONDYLAR PATH.

Silvana BERAJ

DDS

With the lose of teeth in time the harmonious occlusal contat will be interrompt and occlusal interferences will arise. These contacts will lead to the generation of forces with tangential components to the teeth which have a hard destructive effect on the tissues and require an neuromotor adjustment that, causing an alteration of the spatial position of the mandible with respect to that of neuromuscular equilibrium, triggers the framework of cranio-mandibular joint disorder. The balance of muscles and joints can be achieved and maintained while minimizing the proprioceptive input arising from contacts on the cusp slopes (Interference Jankelson). The lecture topic discusses some concept of dental occlusion related to the mandibular movement in alterated conditions and the using of kinesiograph as an excellent instrument for measuring mandibular movement in three dimension, which should lead the prosthodontic and dental technician on the design and construction of prosthodontic replacement of losing teeth.

ABSTRACTS

EVALUATION OF ACCESSORY FIBER POSTS WITH SELF-ADHESIVE RESIN-MODIFIED GLASS IONOMER IN REINFORCEMENT OF STRUCTURALLY COMPROMISED UPPER PERMANENT INCISORS IN CHILDREN.

Talat M. Beltagy

Lecturer of Pedodontics, Faculty of Dentistry, Tanta University

Despite the technological advances in dentistry in recent years, there still exist major challenges for restoring endodontically treated teeth in special cases where the root is weakened. Purpose: This study evaluated: 1- In vitro: the fracture resistance of over-flared root canals, which were rehabilitated with fiber posts with and without accessories associated with a self-adhesive resin-modified glass ionomer. 2- In vivo: clinically and radiographically the same reinforcing system which had been used in the in vitro study in restoring structurally compromised upper permanent central incisors in children. Materials and methods: 1- In vitro: 50 extracted caries-free human maxillary central incisors of nearly similar sizes, shapes and root anatomy, were selected, coronally sectioned, endodontically treated and randomly divided into 5 groups, 10 specimens each. Group I: over-flared specimens were restored with only master fiber posts. Group II: over-flared specimens were restored with master posst and one accessory fiber posts. Group III: over-flared specimens were restored with master posts and two accessories. All 3 groups used a self-adhesive resin-modified glass ionomer (GC Equia) as root reinforcing material and core build-up. Group IV (control group): over-flared specimens were restored with master posts associated with hybrid composite (Prime-Dent) as root reinforcing material and core build-up. Group V (control group): normal canals without over-flaring and were restored with only master posts and self adhesive resin modified glass ionomer as core build-up material. All specimens were subjected to a load failure test with an incremental static force at an angle of 45 degrees to the long axis of the root. Fracture resistance, and mode of failure were measured and analyzed using one-way analysis of variance (ANOVA). 2- In vivo: Thirty patients (10 -15 years) had a structurally compromised upper permanent central incisor with different degrees of flaring and indicated for rehabilitation using the same reinforcing system used in first 3 groups of in vitro study. Another ten patients were used as control group (normal canals) using only master post. Results: The results of this study indicated that, the order of fracture resistance was as follows, control group V > IV = III > II > I, and the difference was significant ($P<0.001$), but there was no significant difference in load failure between control group IV and III ($P = 0.999$). Mode of failure showed that 91.67% of specimens showed repairable mode of failures and 8.33% of specimens (in control groups) showed non-repairable mode of failures. In vivo results: Clinical evaluation, showed no displacement of reinforcing system or displacement of any fiber posts. There was no fracture in the core or the reinforcing material in any of studied groups. Radiographic evaluation showed that no evidence of root fracture, external root resorption and no periapical or periodontal pathology requiring crown removal for clinical interference. The clinical findings showed 100% early success rate of reinforcing system in the studied technique for root rehabilitation. Conclusion: The use of accessory fiber posts associated with self-adhesive resin-modified glass ionomer seems to be an effective method to improve fracture resistance and increase repairable failures of over-flared root canals and show promising results and appears to be a better alternative to single post in clinical practice.

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ABSTRACTS

THIRD PARTY SOFTWARES AND ITS APPLICATION IN IMPLANTOLOGY AND COMPUTER GUIDED SURGERY

Walaa Samir Abd elfatah

Assistant Lecturer of Oral and Maxillofacial Radiology MUST

Third party software refers to software programs developed by companies other than the operating system developer. Using minimal invasive procedure to maximize patient comfort and minimize traumatic injury to tissue with flapless insertion of dental implant. Treatment planning is determined by the computer programs. It can be saved and applied to surgical sites by means of image-aided template production

ADVANCES IN ORAL & MAXILLOFACIAL SURGERY POSTGRADUATE RESEARCH AT FUTURE UNIVERSITY IN EGYPT

Waleed R. El-Beialy* , Waleed Fathy El-Yazby , Ahmed Abo Zekry*****

** Associate Professor of Oral & Maxillofacial Surgery , Faculty of Oral & Dental Medicine, Cairo University, Egypt , Faculty of Oral & Dental Medicine, Future University in Egypt , Alumnus of the Graduate School of Dental Medicine, Hokkaido University, Japan*

*** Assistant Lecturer of Oral & Maxillofacial Surgery , Faculty of Oral & Dental Medicine, Future University in Egypt*

**** Assistant Lecturer of Oral & Maxillofacial Surgery Faculty of Oral & Dental Medicine, Future University in Egypt*

The Oral & Maxillofacial Surgery Research Team at Future University in Egypt (FUE) will present the latest findings in their research topics. A new technique in maxillary sinus lifting will be introduced. The technique involves a safer approach to the sinus and new forms of sinus augmentation substitutes. The latest in Temporomandibular joint (TMJ) diagnosis and the documentation of Temporomandibular joint dysfunction (TMD) will be discussed.

ABSTRACTS

THE SCOPE OF T.M.J. ARTHROSCOPY IN THE MANAGEMENT OF INTERNAL DERANGEMENT

Waleed R. El-Beialy

Associate Professor of Oral & Maxillofacial Surgery , Faculty of Oral & Dental Medicine, Cairo University, Egypt , Faculty of Dentistry, Future University in Egypt, Alumnus of the Graduate School of Dental Medicine, Hokkaido University, Japan

Temporomandibular joint disorders (TMD) are very common pathological conditions that can be un/misdiagnosed by the general practitioner. Improper management of TMD can lead to devastating results that might entail a chronic condition affecting the patient's way of living or leading to an artificial TMJ prosthesis. Internal Derangement (ID) is one of the most common TMD now in Egypt. A simple approach to diagnosing ID and the road map to its management will be discussed. Arthroscopy is currently the corner stone in both the diagnosis and management of ID. An introduction of TMJ arthroscopy and its scope will be highlighted.

EVALUATION OF BONE REGENERATIVE CAPACITY FOLLOWING DISTRACTION OSTEOGENESIS OF GOAT MANDIBLES USING TWO DIFFERENT BONE CUTTING TECHNIQUES

Nasser Nooh, **Walid A. Abdullah,** Mohammed EL-Awady Grawish, Sundar Ramalingam, Ghada Hassan, Fawad Javed, Khalid Al-Hezaimi

Associate professor and consultant of maxillofacial surgery, dental college, King Saud university, KSA.

Purpose: The goal of the present study was to evaluate the regenerative capacity of goat mandibles following sagittal split osteotomy and distraction osteogenesis compared with vertical body osteotomy. Animals and Methods: Bilateral vertical and sagittal body osteotomy was performed in the left and right sides of the mandibles in18 goats respectively. All animals were started on bilateral distraction after a 5 day latency period. The distraction period lasted for 10 days at 1mm/day. Animals were sacrificed at zero time which is the end of the distraction period, 10, and 35 days post distraction. Bone mineral density (BMD) and bone volume (BV) were analyzed using micro computed tomography (MCT). Type of bone, and cells present in the regenerated defect sites were analyzed histologically. Results: BMD of the vertical osteotomy was 0.358±0.012, 0.410±0.012, 1.070±0.019, and for sagittal osteotomy was 0.420±0.013, 0.421±0.009, and 1.182±0.030 for zero time, 10, and 35 days, respectively. BV of the vertical osteotomy was 973.310±5.048, 1234.589±4.159, 2121.867±6.519, for sagittal osteotomy was 995.967±2.781, 1755.938±4.379, 2618.441±21.429 for zero time, 10, and 35 days, respectively. Regarding BMD and BV Significant differences were noted at all the examination periods. Histological analysis shows that sagittal splitting was characterized by more robust lamellar bone formation bridging the distraction gap than vertical body osteotomy. Conclusions: Both histological and MCT analysis showed that following distraction in sagittal osteotomy technique resulted in significant BV and BD than vertical body osteotomy.

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ABSTRACTS

"COMPOSITE & ANTERIORS: CAN EVERYDAY DENTISTRY BE...AESTHETIC?"

Walter Devoto, Sestri levante

In daily practice, composites are the materials most commonly used for restorative dentistry. We use them for preventive seals, micro-invasive restorations, build ups and complex, direct and indirect restorations in the anterior and posterior sections.

Indeed, it is in the anterior sections that composites have traditionally been used to the greatest effect, enabling us to carry out quite complex restorations using direct techniques and with notable aesthetic and clinical results. Recent product developments, combined with clinical research into stratification, now make it possible to utilise new evolved composites with excellent characteristics from mechanic and aesthetic point of view. It is however, a common complaint among colleagues that the techniques of layering seem to be rather complex and it is difficult to make the right colour choice: paradoxically, they say that the appearance on the market of sophisticated materials, designed to give ever better results in the medium or long term, only makes it even more difficult to make the correct decision. Indeed, many of these colleagues, after the first buzz of enthusiasm, give up on the layering technique and opt for materials which they say are more simple or "mimetic"(!) In this lecture, the author would like to discuss these topics and make suggestions which aim to give high quality and predictable results every day, both from an and clinical point of view with undeniable advantages for ourselves and for our patients.

EFFECT OF CURING MODES AND LIGHT INTENSTIES OF (LED) ON microshear bond strength OF RESIN COMPOSITE TO DENTIN

Hassan Mossad Nemg , Mohsen Hussein Abi-Elhassan and **Yasser Abd Elaziz Abed**

Lecturer of Operative Dentistry, Faculty of Oral Dentistry, October 6 University.

Purpose: This study investigated the microshear bond strength (MSBS) of two different types of resin composite (nanofilled and microhybrid) as affected by different light intensities, curing modes of light emitting diode and effect of thermocycling. Materials and Methods: Two types of resin composite Filtek Z350 (nanofilled), Filtek Z250 (microhybrid) and adper single bond plus (etch-and-rinse adhesive), were selected. 160 human molars were used. The molars were embedded in self cure acrylic resin using specially designed Teflon mold. The enamel was removed till exposure of dentin to prepare a flat surface. The samples were divided into two main groups, 80 teeth each, according to the type of resin composite used each group was further subdivided into two equal subgroups according to the intensity of light, either low or high intensity each subgroup were divided into two divisions according to curing mode, soft-start or snap shot. Half of the samples were stressed for 500 thermocycles. Composite specimens were made using polyethylene

ABSTRACTS

tube (2mm hight and 1.2mm internal diameter) (MSBS)was determined in a universal testing machine at a crosshead speed of 0.5mm/min. The results were analyzed with ANOVA and Tukey-post. Hoc test at significant level P £ 0.05. Results: Significant difference in (MSBS) were found between nanofilled resin composite and microhybrid resin composite ($P < 0.001$). Thermocycling significantly reduce bond strength to dentin ($P < 0.001$). Light intensities and different light curing modes showed mixed results. Conclusion: Bond strength to dentin of resin composite restorations are dependant on the type of resin composite, light intensities, light curing mode and thermocycling.

ASSESSMENT OF A NOVEL TOOTH EXTRACTION FORCEPS; WITH LOCK AND PRESSURE CONTROLLING UNIT

Yasser Fathi Gomaa , Mohamed B Khider

Associate professor and acts as a Chairman of Dental Biomaterials Department, Faculty of Dentistry, Minia University, Egypt.

This was a two phase study to assess a novel design of tooth extraction forceps in vitro and in vivo. Study design: The new forceps was composed of single handle connected to a long spiral- controlling movement of the forceps jaws and locks at the desired position and pressure controlling mechanism in the form of spring. In vitro phase was done to estimate recommended pressure controlling values. Forty extracted human lower molars were positioned in universal testing machine between special heads in the form of conventional forceps beaks and subjected to compressive load till fracture to. The in vivo phase was clinical trials in terms of evaluating time of extraction in seconds, difficulty of extraction and procedure sensitivity and extraction trauma. Results: teeth fracture occurred at load in the range of 100-150 Kg/Cm2, Mean compressive strength of dentin was 849.2 MPa for clinical trials new design showed significantly lower extraction time, technique sensitivity and trauma. Conclusion: on the bases of this study it is recommended with further clinical researches.

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ABSTRACTS

CLINICAL DECISION MAKING-CDM- IN SURGICAL DENTISTRY AND ORAL SURGERY: HOW TO IMPROVE CONSISTENCY AND IMPLEMENTATION OF TREATMENT RECOMMENDATIONS AND OPTIONS

Ziad E.F. NOUJEIM ,

Dr.chir.dent.,ces oral biol.,ces oral surg.,oral pathol. Dipl.,du antiaging/esthetic medicine diplomate of the european board of oral surgery, fellow,american college of oral and maxillofacial surgeons, fellow,international college of dentists,

Clinical Decision Making-CDM-is a complex cognitive process that involves consideration of patient's complaints and preferences, availability of evidence-based data, and practitioner's case-specific clinical judgment. Inter-clinician variability and disparity in decision making is very well known in dentistry and medicine as well (T.Kvist et al., 2004---LK McCaul et al., 2001---GR Persson et al., 2003---AA Rawski et al., 2003--- J Cosyn et al., 2007). In surgical dentistry and oral surgery, treatment recommendations, options, and decisions can widely vary among dental practitioners: indeed, they are often based more on personal (biased?) values and expertise than on thorough, objective, rigorous, evidence-based, analysis of treatment alternatives, risks, prognosis, and benefits. If treatment guidelines are clear for impacted teeth management, they are unfortunately not for aggressive and relapsing jaw cysts and odontogenic tumors where documented long -term treatment success is not yet available. Consequently, treatment planning process in oral surgical specialty remains a dilemma and warrants further interest and research. Regional differences in training, education ,and dental school treatment philosophy("school's effect") may influence CDM process (S Aryanpour et al.,2000--- BR Bigras et al.,2008).It seems also likely that specialists (in surgical dentistry ,oral ,and maxillofacial surgery) are much more confident in their ability to successfully manage surgical cases and it is obvious that a better understanding of inter-clinician variability in CDM will definitely help oral health community in improving consistency and implementation of oral surgical treatment recommendations and options . In our presentation, we will address a range of oral surgical cases in order to discuss CDM: oral / gingival lesions, impacted teeth (with and without accompanying pathologies),and jaw cysts and tumors will be exposed, with emphasis on tentative diagnosis and treatment planning that lead to CDM : Step-by-step implementation of treatment will be shown for each clinical case to make the link between initial decision and final therapy.

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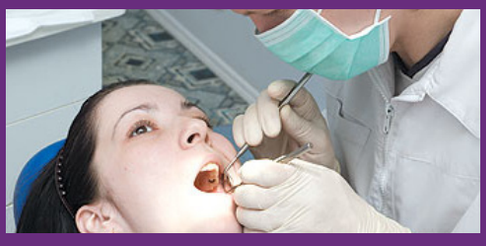

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Wednesday 6th November 2013

Al Montaza Foyer Hall

First Session

10:00- 1:00

SYSTEMIC AND LOCAL ORNIDAZOLE IN THE TREATMENT OF CHRONIC PERIODONTITIS

Soulafa Mohamed Belal, Safenaz Saleh Saied, Magda Kamal Khalil

Oral medicine, Periodontology, Oral diagnosis & Radiology Department, Faculty of Dentistry, Tanta University.

VITAMIN C IN GINGIVAL BLEACHING :A NEW INNOVATION

Nermin Mohammed Yussif,Ahmed Youssef Gamal and Ahmed Reda Abdel Rahman

B.D.S Cairo university

INFLUENCE OF NICOTINE ON K14 IMMUNOSTOCHEMICAL EXPRESSION DURING MORPHOGENESIS OF RAT FILIFORM PAPILLAE

Dahlia Ghazy Mohamed and **Rania Mossad Hassan**

Assistant Professor of Oral Biology, Faculty of Dentistry, Ain Shams University

PLATELETS RICH FIBRIN AND PERIOSTEAL PEDICLE FLAP IN TREATING PERIODONTAL INTRABONY DEFECTS

Doaa Adel

Assistant Lecture Ain Shams University Oral Periodontology Department

ANTIBACTERIAL EVALUATION OF SILVER NANOPARTICLES IN EXPERIMENTALLY INFECTED DENTIN WITH S.MUTANS DENTAL BIOFILM MODEL AND MICROTENSILE BOND STRENGTH OF RESIN COMPOSITE TO DENTIN PRETREATED WITH ANTIMICROBIAL NANOPARTICLES

Mona I. Riad

Professor of Operative Dentistry, Faculty of Oral & Dental Medicine, Cairo University.

INTERNATIONAL DENTAL CONGRESS

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Wednesday 6th November 2013

Al Montaza Foyer Hall

Second Session

3:00 - 6:00

MATERNAL CHRONIC ORAL INFECTION WITH PERIODONTITIS AND PERICORONITIS AS A POSSIBLE RISK FACTOR FOR PREECLAMPSIA IN EGYPTIAN PREGNANT WOMEN

(MICROBIOLOGICAL AND SEROLOGICAL STUDY)

Lobna Abd El-Aziz Aly ,Hala El- Menoufy , Lobna A. Aly and Rehab T. Elsharkawy

Associate professor of Oral & Maxillofacial Surgery

COLLAGEN TURNOVER INDUCED BY CELLULAR CYTOKINES OF DRUG INDUCED GINGIVAL OVERGROWTH AND HEREDITARY GINGIVAL FIBROMATOSIS (HISTOLOGICAL AND IMMUNOHISTOCHEMICAL COMPARATIVE STUDY)

Hala Salem el- Menoufy , Lobna Abdel Aziz Aly and Alyaa Ragae

Associate Professor of Periodontology, Oral Medicine and Oral Diagnosis, Faculty of Dentistry, Misr University for Science and Technology

ISOLATION AND CHARACTERIZATION OF HUMAN DENTAL PULP STEM CELLS AND THEIR IN-VITRO DIFFERENTIATION INTO ODONTOBLASTS AND NERVE-LIKE CELLS

Ahmed Shawky El-Sheshtawy,Jealan M. ElShafei and Eman Abouel-Ezz

Demonstrator Department Of Endodontic, Faculty of Oral & Dental medicine-Cairo University

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Thursday 7th October 2013

Al Montaza Foyer Hall

First Session

10:00 - 1:00

THE EFFECT OF BOTULINUM TOXIN (BOTOX) ON PERSISTENT PAINFUL TEMPROMANDIBULAR JOINT

Mona Faris, Nagy El-Prince**, Riham El-Dibany**, Gihan Abdel Latif
Assistant Professor Oral & Maxillofacial Surgery, Faculty of Dentistry, Alexandria University.

EVALUATION OF MANDIBULAR UNILOCULAR AND MULTILOCULAR LESIONS BY THE USE OF CONE-BEAM COMPUTED TOMOGRAPHY (CBCT)

Ahmed S. Saad El-din, Ahmed S. El-Mahallawy, **Riham M. El-Dibany**, Hanaa S. Raslan, Abbas H. Nour El-din
Assistant Professor Oral & Maxillofacial Surgery, Faculty of Dentistry, Alexandria University.

MAXILLOMANDIBULAR FIXATION USING ORTHODONTIC MINI-IMPLANTS FOLLOWING MANDIBULAR FRACTURES

Riham M. Eldibany, Mohamed M. Shokry

Assistant Professor Oral & Maxillofacial Surgery, Faculty of Dentistry, Alexandria University.

CUSTOMIZED ZIRCONIA IMPLANTS. ARE THEY RELIABLE CLINICALLY? A-ONE YEAR FOLLOW UP CLINICAL TRIAL

Ziad Tarek M.Aly

Assistant Lecturer at Oral and Maxillofacial surgery Department. Faculty of Dentistry, Alexandria University.

SCREW GUIDED FAST BONE REGENERATION: A NOVEL TECHNIQUE OF 3D BONE AUGMENTATION PRIOR TO DENTAL IMPLANT PLACEMENT.

Bassem Nabil El Fahl
Demonstrator, Tanta University

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Thursday 7th October 2013

Al Montaza Foyer Hall

Second Session

3:00 - 6:00

INFLUENCE OF THE PATTERN OF OCCLUSAL REDUCTION AND MARGINAL CONFIGURATION ON THE FRACTURE RESISTANCE AND MARGINAL DISCREPANCY OF ALL CERAMIC CROWNS

Ahmed W . Hashem, Omaima S.El-Mahallawi and Jaylan El Gendy

Assistance lecturer in fixed Prosthodontics ,MSA University, Egypt

EFFECT OF DIFFERENT CLASP MATERIALS ON DENTURE SUPPORTING STRUCTURES.

Nesrin Ahmed El Mahrouky

Assistant professor of Removable prosthodontics, Faculty of Dental Medicine, Al Azhar University, Cairo (Girls Branch)

MARGINAL GAP DISTANCE AND FRACTURERESISTANCE OF TWO CONSERVATIVE ALL-CERAMIC FIXED PARTIAL DENTURE DESIGNS

Sarah Omar, Eman M. Anwar, Elzahraa Eldawkhly and MahaTaymour

Postgraduate Student, Department of Fixed Prosthodontics, Faculty of Oral and Dental Medicine, Cairo University.

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Friday 8th October 2013

Al Montaza Foyer Hall

First Session

10:00- 12:00

CONVENIENCE OF MINI-HEAD VERSUS REGULAR SIZED HAND-PIECE ON OPERATOR AND PATIENT LEVELS

Mervat Abd el Moneim Rashed , Samah Mohamed Awad , Dalia Mohamed Moheb

Professor of Pediatric Dentistry & Dental Public Health , Faculty of Oral &Dental Medicine- Cairo University.

CHILDREN'S PREFERENCE TO COLORED COMPOMERS VERSUS TOOTH COLORED COMPOMER

Samah Mohamed Awad ,Dalia Mohammed Moheb and Mervat Abd el Moneim Rashed

Lecturer of Pediatric Dentistry& Dental Public Health.Faculty of Oral &Dental Medicine- Cairo University.

POSTER "RE-USE OF DENTAL MINI-IMPLANTS AFTER DIFFERENT MODES OF STERILIZATION"

Noha Abdel-Mawla El-wassefy , Abeer El-fallal and Mahasen Taha

Assistant professor, Mansoura university

INTERNATIONAL DENTAL CONGRESS

POSTERS

Friday 8th October 2013

Al Montaza Foyer Hall

Second Session

1:00 - 3:00

MALIGNANT TRITON TUMOR OF THE NECK WITH RABDOMYOBLASTIC DIFFERENTIATION –A CASE REPORT

Sahar M.El Sheikh , **Awatef Draz**, Hanaa S.Rasslan

Professor of oral pathology faculty of oral and dental medicine Cairo and King Abdul Aziz universities

EFFECT OF USE, SODIUM HHYPOCHLORITE AND STERILIZATION ON SURFACE TOPOGRAPHY AND ELEMENTAL COMPOSITION OF ROTARY NICKEL-TITANIUM TWISTED INSTRUMENTS

Lobna Abbas, Hebatalla M.M.ElFar, **Ghada E. M Eid**

Associate professor of Endodontic, Faculty of Oral& Dental Medicine Cairo University

CUSTOMIZED ZIRCONIA IMPLANTS. ARE THEY RELIABLE CLINICALLY? A-ONE YEAR FOLLOW UP CLINICAL TRIAL

Ziad Tarek Mahmoud Aly

Assistant Lecturer at Oral and Maxillofacial surgery department, Faculty of dentistry, Alexandria University.

ALVEOLAR BONE MAPPING FOR PLACEMENT OF ORTHODONTIC MINI-IMPLANTS IN PATIENTS WITH DIFFERENT VERTICAL FACIAL DIMENSIONS

Mais Medhat Sadek, Noha Ezat Sabet, and Islam Tarek Hassan

Assistant Lecturer, Orthodontic Department Ain Shams University

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جامعة فيوتشر	P1-p2 خارجى
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Abot	G2
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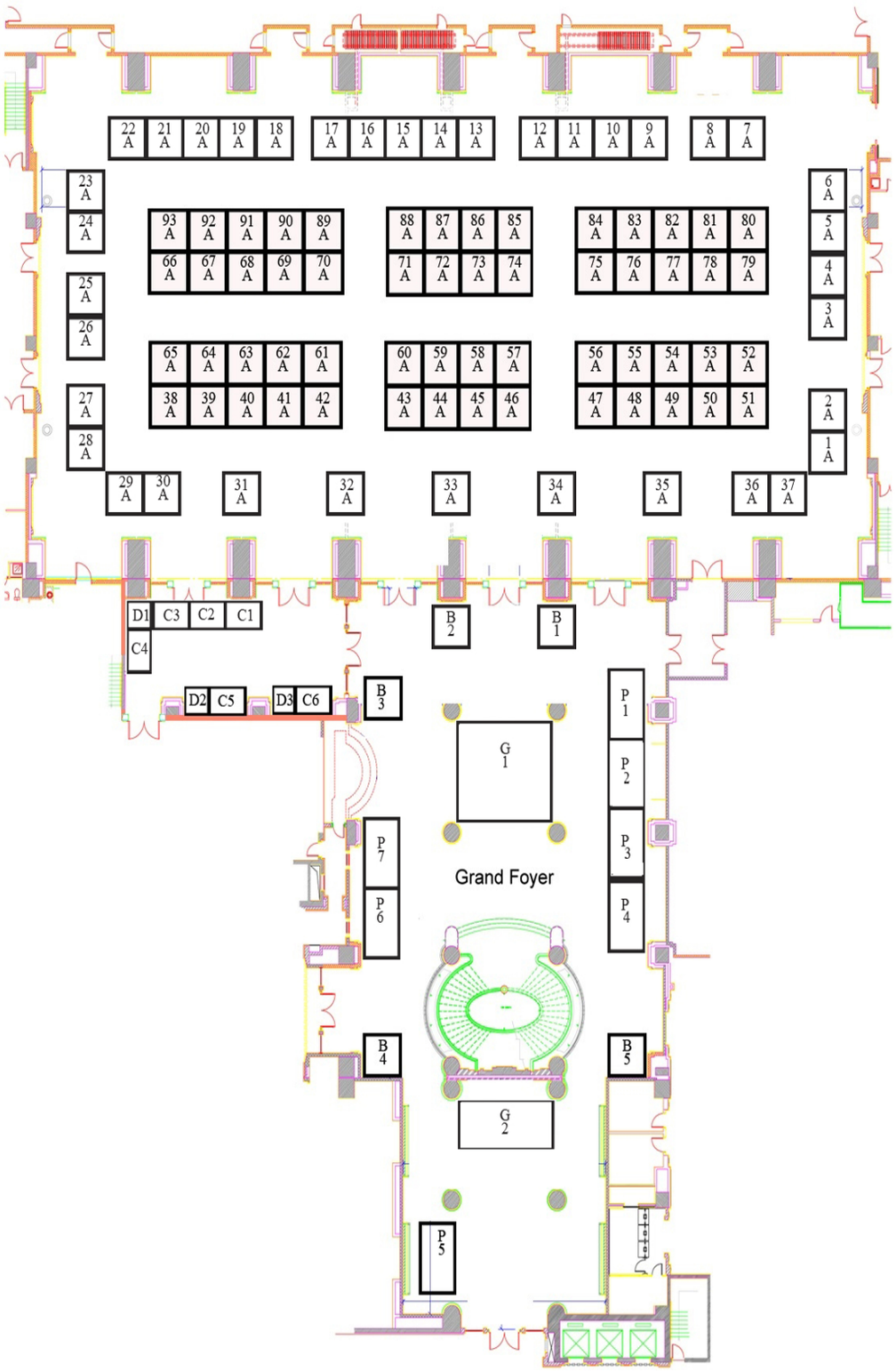

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ضيـوفنـا الاعـزاء / زملائنا الأفـاضـل

مرحبا بكم مرة أخرى فى مؤتمركم العلمى، المؤتمر الدولي السادس عشر للجمعية المصرية لجراحى الأسنان، بل يمكن أن أقول الجمعية العربية لجراحى الأسنان. نرحب بكم ترحيبا حارا فى مؤتمرنا الذى ننتظره ونتطلع إليه بشوق لنجدد لقاءاتنا العلمية التى نتبادل فيها آخر ما توصلنا إليه فى سعينا الدؤوب لرفعة وتقدم مهنتنا.

ضيـوفنـا الاعـزاء ...

نرحب بكم ونحن على ثقة تامه بأن هذا المؤتمر، كسابقيه من مؤتمرات الجمعية المصرية لجراحى الأسنان سيؤتى ثماره ويسهم مساهمة فعالة فى تبادل خبراتنا بما فى ذلك من فوائد جمة لنا جميعا، وإن وجود الأساتذة الأفاضل من علماء الدول الغربية واليابان، بالإضافة إلى النخبة الممتازة من علماء الدول العربية لهو ضمان كاف لارتفاع المستوى العلمى للمؤتمر، بما يعود بأعظم الفوائد على جميع الزملاء حضور المؤتمر.

نتمنى لكم جميعا أطيب إقامة فى مصرنا العزيزة، كما نتمنى أن نراكم جميعا مرات ومرات على ضفاف نيلنا الخالد.

شكرا خالصا لجميع الزملاء من أعضاء اللجان المعاونة لما قاموا به من جهد فعال ومساهمتهم فى إنجاح هذا المؤتمر، فلولا تعامونهم الصادق لما أمكننا الوصول بهذا المؤتمر لما وصل إليه بفضل الله تعالى ثم بتعاونكم معنا ومعاونتكم لنا.

وإلى أن نسعد بلقائكم فى مرات قادمة بإذن الله تعالى، نتمنى لكم أطيب إقامة، كما نرجو أن تستمتعوا معنا بالبرنامج الاجتماعى الحافل الذى أعددناه لكم.

ولكم جميعا منا خالص الشكر والتقدير.

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