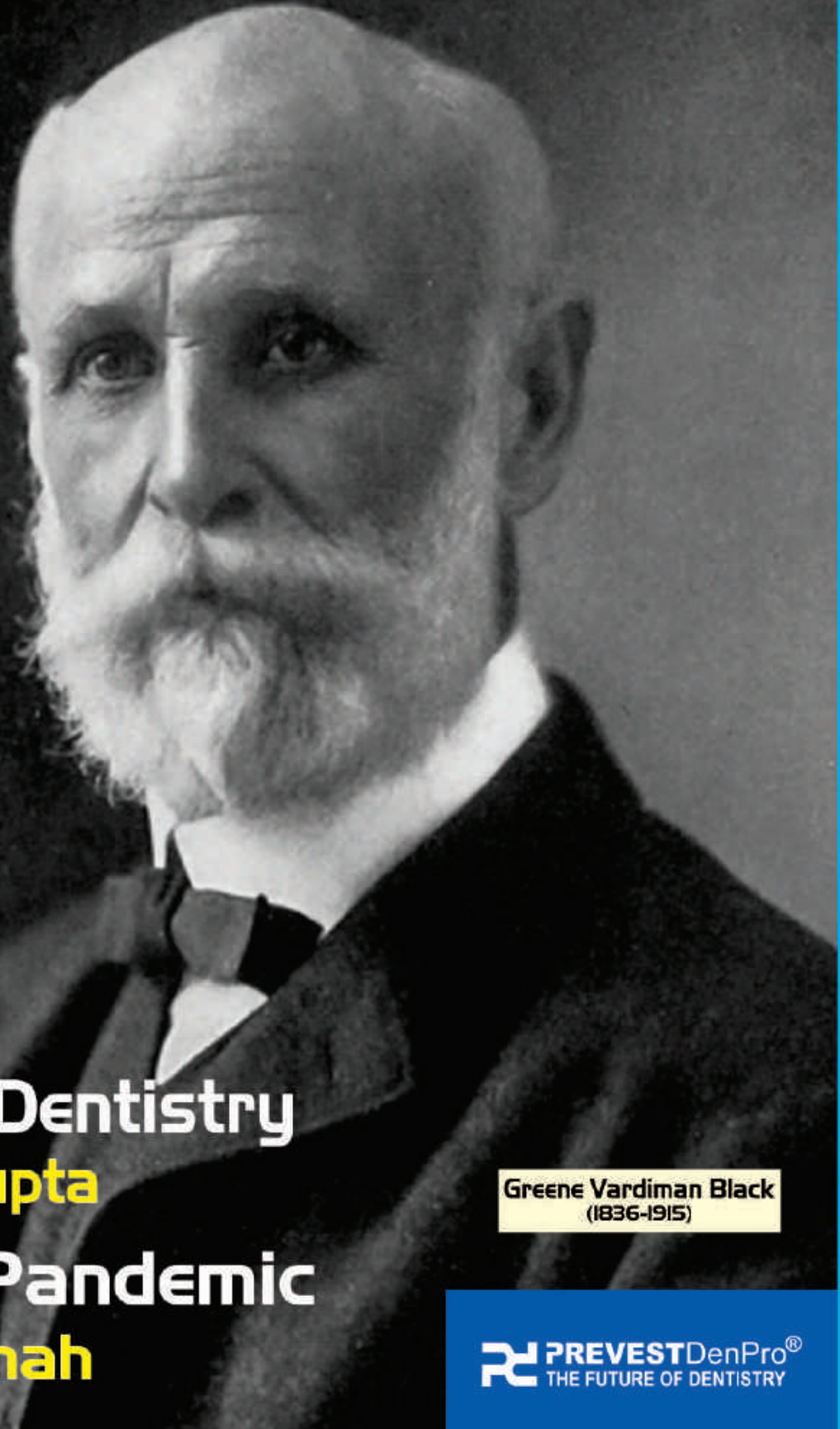




DENTAL 360

e-Newsletter published by Prevest Denpro Limited, India

Volume -1, Issue -1, June 2020



Cosmetic Dentistry

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Life In a Pandemic

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(1836-1915)

PREVESTDenPro®
THE FUTURE OF DENTISTRY

Editorial

Rethink , Relearn, Reboot and Relive



The current pandemic has swept the healthcare industry off its feet. There are several lessons we can learn from this. This pandemic has reinforced the fact that no country was adequately prepared to tackle it. However it gave us an opportunity to introspect and develop a plan to reset and reboot the healthcare system. The last three months has seen a lot of ups and downs. Some regions experienced severe healthcare shortages while the others noticed decreased outpatient visits, lesser health emergencies and lesser healthcare expenditure. It was surprising to notice that the number of deaths has gone down by 30 percent when compared to the last year. A part of this could be attributed to the decrease in road traffic accidents, but it difficult to explain the decrease in deaths from other life threatening illnesses. The pandemic taught us that at least 25-30 percent of the dental visits can be replaced by telephonic and video consultations. However there are no specific guidelines to standardize these online consultations. We have also realized there we lacked a standard disinfection protocol a dental offices. The pandemic has raised the value of professional and personal hygiene thereby ensuring safe, reliable and effective dental treatments. The existing infra structural deficiencies have been identified and are being addressed at a rapid pace. We have also noticed that lowcost medical devices could be designed and mass produced in times of need. Respirators, hygiene devices, air quality equipment and personal safety devices were produced in a short period. Several local manufacturers boosted their individual capabilities to meet the growing demand. When the inevitable storm in life comes through, realize that it can truly be a blessing. I am pretty sure that the life lessons learnt during these times will surely help us to tackle harder times in future. The pandemic provided us the perfect opportunity to Rethink, Relearn, Reset, Reboot and relive...



DR. SAI KALYAN
MDS, MS, PHD

Love to Smile? What Cosmetic Dentistry Can Do for You

Dr. Manu Gupta

As spring and summer approach, it just may be time to put a fresh face and new smile on life. Appearance can be changed through cosmetic enhancement and today expectations are higher than ever before. In many instances, the most dramatic esthetic effects can result from smile enhancement.

Cosmetic dentistry isn't just for celebrities and the wealthy — there's now a wide variety of options and price ranges that put a better smile within reach for millions of people.

Today, cosmetic dentistry is more popular than ever, from whitening and shaping to closing spaces and replacing teeth. And dentists have a wide array of tools and techniques at their disposal for improving the look of your smile.

Is What You See, What You Get?

Here's a little about a lot. "Cosmetic" derives from ancient Greek (kosmetike) meaning "the art of dress and ornament" and from (kosmeo) "to order, to arrange, to rule, to adorn, to equip, to dress, to embellish." Cosmetic — as in dentistry — relates largely to external or superficial; pertaining only to the surface or appearance of something. But there may be more to it, for surface change may require more than you see, and as we will see, can sometimes require a lot of change beneath the surface. Cosmetic is also not to be confused with aesthetic. Aesthetics, commonly describes the study of sensory or emotional values, sometimes called judgments of sentiment and taste. Aesthetics could be said to describe how you feel and the value you place on a cosmetic change.

Smile Analysis

It all starts with a "Smile Analysis," which is crucial to the process of cosmetic enhancement and change. There are multiple elements that make up what leads to that special end result we call "a smile." When the curtain goes up and the lips part, the show that goes on display is not just those pearly whites. Just think of teeth in all their various aspects, shapes, colors and sizes; gum health and gum line, framing the teeth and smile; tooth alignment, spacing and bite; jaw relations upper to lower; and all within the context of the big picture — your face, including eyes, lips, skin and more. When complex cosmetic enhancement is being contemplated all these elements need to be borne in mind, because changing one thing can change everything.

Cosmetic Dentistry Options

There are a variety of cosmetic dentistry procedures available, including:

Teeth Whitening

Over time, teeth can become stained or discolored, especially after smoking, taking certain medications, or consuming foods and beverages such as coffee and tea. Using a chemical process, dentist can bleach your teeth in one of two ways. He can do an in-office procedure or provide you with a system to use at home.

The teeth can become stained again if exposed to the same substances that originally stained them. Because whitening products are not meant to clean teeth, it is still important to continue practicing daily oral hygiene by brushing twice a day, flossing at least once a day, and rinsing with an antiseptic mouthwash daily.

Bonding

Bonding may improve how your teeth look if they have excess space between them, or if they are chipped, broken, stained, or cracked.

This procedure is done in a single office visit by applying an etching solution followed by tooth-colored materials (composite resins) directly to the tooth's surface where needed.

Veneers

Simply stated a veneer in dentistry is a thin layer of dental porcelain restorative material, that replaces tooth enamel. Provided your teeth are basically in the right position within the jaw structure, these remarkable life-like restorations can truly change a smile — cosmetic dentistry that really makes a difference.

Crown

A variation on the porcelain veneer, but basically used when more tooth structure has been damaged by decay or trauma, porcelain crowns replace the visible "crown" of the tooth in the most cosmetic way.

Orthodontics

The "Original Smile Makeover" is the most, and may be the only effective means of correcting malocclusions (mal-bad, occlusion-bite) and teeth in poor position. Orthodontics is the specialty in dentistry concerned with the diagnosis and treatment of malocclusion. Using a variety of 21st century techniques, including traditional "braces," clear aligners and more, orthodontics allows movement of teeth into correct and functional positions.

Aligners are replaced about every two weeks to progressively move your teeth. Unlike traditional braces, aligners can be removed while eating, brushing, and flossing. This either improves cosmetics and function (your bite) by itself or lines the teeth up properly for restorative dental techniques.

Implants

Dental implants are perhaps today's ultimate tooth replacement systems providing "stand alone" teeth, unconnected to other teeth. While a dental implant replaces the root of a tooth, the crown atop the implant (the tooth you see in your mouth) is an exact replica of a natural tooth. Therefore implants provide for cosmetic tooth replacements, emerging through the gum tissues just like natural teeth, and can be made to match the neighboring teeth exactly.

Smile makeovers

These procedures involve a comprehensive assessment of the overall appearance of the teeth and smile. Typically, several cosmetic dentistry procedures are required to overhaul the look of a patient's smile. Think of it as a facelift for the mouth.

Dr. Manu Gupta completed his BDS and MDS in Prosthodontics and Crown & Bridge from Manipal College of Dental Sciences, Manipal. He has also finished Post Graduate Certificate Courses in Advanced Oral Implantology and Aesthetic Dentistry from Manipal. He practices in New Delhi and may be contacted at manu6771@yahoo.co.in.



Life of Dental Professionals in Covid-19 pandemic situation

DR. SEJAL SHAH

Dental surgeons are at the highest risk of contracting and transmitting the Coronavirus, alongside paramedics, nurses, and other healthcare workers. Here is a quick view into the future of dental practice post CoVID-19. Dentists must now strictly follow all protocols to decontaminate, disinfect and sterilize at the clinics as prescribed.

Zones and Dental Clinics

1. The dental clinics will remain closed in the CONTAINMENT ZONE; however, they can continue to provide tele triage.
2. In the RED ZONE, Emergency dental procedures can be performed.
3. The dental clinics in ORANGE AND GREEN ZONE will function to provide dental consultants. Dental operations should be restricted to Emergency and Urgent treatment procedures only.
4. All routine and elective dental procedures should be deferred for a later review until new policy/guidelines are issued.

Emergency Dental Procedures -

1. Fast spreading infections of facial spaces/Ludwig Angina /Acute celluloids of dental origin/Acute Trismus.
2. Uncontrolled bleeding of dental origin.
3. Severe uncontrolled dental pain, not responding to routine measures.
4. Trauma involving the face or facial bones.
5. Radiographs like PNS, OPG, CBCT in facial trauma and in medico-legal situations.
6. Dental abscess
7. Dentoalveolar trauma
8. Pain of cavitation needing temporisation
9. Unavoidable Dental Extractions
10. Orthodontic procedures
11. Adults and Geriatric
12. Dental pain of pulpal origin not controlled by Advice, Analgesics, Antibiotics (AAA)
13. Acute dental abscess of pulpal / periodontal/ endoperio origin/ Vertical split of teeth
14. Completion of ongoing root canal treatment (RCT)
15. Temporization of cavitation in teeth which are approximating pulp but do not need pulp therapy
16. Broken restoration/ fixed prosthesis causing sensitivity of vital teeth/ endangering to pulpitis/significant difficulty in mastication
17. Unavoidable Dental Extractions / Post extraction complications
18. Already prepared teeth/ implant abutments to receive crowns

22. Long-standing cysts and tumours of the jaw with abrupt changes
23. Sharp teeth /Trigeminal neuralgia Moderate
24. Orthodontic wire or appliances, piercing or impinging on the oral mucosa.
25. Delivery of clear aligners
26. Patients on skeletal anchorage
27. Urgent procedures should be undertaken only after tele-consultation, tele-triage, consent, and through pre-fixed appointment only

Patient Management

General Guidelines- Contact all patients prior to dental treatment. Telephone screen all patients for symptoms consistent with COVID-19. If the patient reports symptoms, of COVID-19, avoid non-emergent dental care. If possible, delay dental care until the patient has recovered. Actively take the patient's temperature. If the patient is afebrile (temperature < 100.4°F)* and otherwise without symptoms consistent with COVID-19, then dental care may be provided using appropriate engineering and administrative controls, work practices, and infection control considerations. Place chairs in the waiting room at least six feet apart. Remove toys, magazines, and other frequently touched objects that cannot be regularly cleaned or disinfected from waiting areas. Minimize the number of persons waiting in the waiting room. Patients may opt to wait in a personal vehicle or outside the dental facility where they can be contacted by mobile phone when it is their turn for dental care. Minimize overlapping dental appointment.

Dental unit waterlines (DUWL) -

Test water quality to ensure it meets standards for safe drinking water as established by the Environmental Protection Agency (< 500 CFU/mL) prior to expanding dental care practices. Test sterilizers using a biological indicator with a matching control (i.e., biological indicator and control from same lot number) after a period of non-use prior to reopening.

Administrative Controls and Work Practices -

Set up operatories so that only the clean or sterile supplies and instruments needed for the dental procedure are readily accessible. All other supplies and instruments should be in covered storage, such as drawers and cabinets, and away from potential contamination. Avoid aerosol-generating procedures whenever possible. Avoid the use of dental handpieces and the air/water syringe. Use of ultrasonic scalers is not recommended. Prioritize minimally invasive/atraumatic restorative techniques (hand instruments only). If aerosol-generating procedures are necessary for dental care, use four-handed dentistry, high evacuation suction and dental dams to minimize droplet spatter and aerosols.

Preprocedural mouth rinses (PPMR) -

There is no published evidence regarding the clinical effectiveness of PPMRs to reduce SARS-CoV-2 viral loads or to prevent transmission. Although COVID-19 was not studied, PPMRs with an antimicrobial product (chlorhexidine gluconate, essential oils, povidone-iodine or cetylpyridinium chloride) may reduce the level of oral microorganisms in aerosols and spatter generated during dental procedures.

Properly maintain ventilation systems -

Consider the use of a portable HEPA air filtration unit while the patient is actively undergoing, and immediately following, an aerosol-generating procedure.

Patient volume -

Determine the maximum number of patients who can safely receive care at the same time in the dental facility, based on the number of rooms, the layout of the facility, and the time needed to clean and disinfect patient operatories. To allow time for droplets to sufficiently fall from the air after a dental procedure, should wait at least 15 minutes after the completion of dental treatment and departure of the patient to begin the room cleaning and disinfection process.

Hygiene -

Strict adherence to hand hygiene, including Before and after all patient contact, contact with potentially infectious material, and before putting on and after removing personal protective equipment (PPE), including gloves. Hand hygiene after removing PPE is particularly important to remove any pathogens that might have been transferred to bare hands during the removal process. Use 60-95% alcohol or wash hands with soap and water for at least 20 seconds. Universal Source Control

PPE -

Dental facilities must ensure that any reusable PPE is properly cleaned, decontaminated, and maintained after and between uses. Dental settings also should have policies and procedures describing a recommended sequence for safely donning and doffing PPE. There are multiple sequences recommended for donning and doffing PPE. One suggested sequence for DHCP includes:

Before entering a patient room or care area:

1. Perform hand hygiene.
2. Put on a clean gown or protective clothing that covers personal clothing and skin (e.g., forearms) likely to be soiled with blood, saliva, or other potentially infectious materials.
3. Gowns and protective clothing should be changed if they become soiled. Put on a surgical mask or respirator.
4. Mask ties should be secured on the crown of the head (top tie) and the base of the neck (bottom tie). If mask has loops, hook them appropriately around your ears.
5. Respirator straps should be placed on the crown of the head (top strap) and the base of the neck (bottom strap). Perform a user seal check each time you put on the respirator.
6. Put on eye protection Personal eyeglasses and contact lenses are NOT considered adequate eye protection.
7. Perform hand hygiene.
8. Put on clean non-sterile gloves. A
9. Gloves should be changed if they become torn or heavily contaminated Enter the patient room.

After completion of dental care:

1. Remove gloves.
2. Remove gown or protective clothing and discard the gown in a dedicated container for waste or linen.
3. Discard disposable gowns after each use.
Launder cloth gowns or protective clothing after each use.
4. Exit the patient room or care area.
5. Perform hand hygiene.
6. Remove eye protection.

Carefully remove eye protection by grabbing the strap and pulling upwards and away from head. Do not touch the front of the eye protection. Clean and disinfect reusable eye protection according to manufacturer's reprocessing instructions prior to reuse. Discard disposable eye protection after use. Remove and discard surgical mask or respirator. Do not touch the front of the respirator or mask. Surgical mask: Carefully untie the mask (or unhook from the ears) and pull it away from the face without touching the front. Respirator: Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator. Perform hand hygiene.



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Product Profile

FUSION CRYSTA ORTHODONTIC ADHESIVE KIT

LIGHT CURE ORTHODONTIC KIT

Crysta Orthodontic Adhesive Kit is a light-curing composite kit used for bonding Metal & Ceramic brackets to tooth surface and for cementation of molar bands. The kit contains a revolutionary primer based on MDP technology. The novel technology ensures high enamel bond strengths. The combination of Crysta adhesive and primer provides reliable long-lasting bonding in orthodontic cases.



Prevest Updates

Army College of Dental Sciences (ACDS) & Prevest Denpro Ltd Jammu signed a memorandum of understanding here on Tuesday for collaborative research and academic activities in dental fields.

The MoU was inked by Dr Sai Kalyan, Director, Prevest Denpro, and Dr K V Ramana Reddy, Principal, ACDS, in the presence of Major General N Srinivas Rao, General Officer Commanding, Telangana and Andhra Sub Area & chairman, ACDS.

The aim is to define a mechanism to promote interdisciplinary joint research and academic activities, impart skill-oriented training to benefit students and staff of both organisations. inivas Rao, General Officer Commanding, Telangana and Andhra Sub Area & chairman, ACDS.

They will collaborate on research projects involving other agencies of the region and work towards development of concerned regions keeping in view the interests and philosophies of each other, informed a release.



FLORENCE in office bleaching system

Florence is a chemically activated in office whitening gel containing 35% hydrogen peroxide. The new pH activated technology enables a fresh fast acting mix every time. This unique technology can be used to whiten vital teeth in a relatively short time. The system employs a novel Blockdam partially adhesive resin isolation technology to isolate the gingiva from the harmful effects of the peroxide ions. The whitening system does not require any light activation, making it the apt technology to be incorporated into everyday dental practice.

