



BRIAN SIMPSON, D.M.D. DIPLOMATE OF THE AMERICAN BOARD OF ORAL & MAXILLOFACIAL SURGERY
113 NORTH MIDDLETOWN ROAD NANUET NY 10954 (845) 623-3497 FAX (845) 623-4039 www.drbrriansimpson.com

New Clinical Perspectives on Implants

I wanted to make you aware of some new options available to you and your implant patients.

The Encode Restorative System: Impressioning a Healing Abutment to Fabricate a Patient Specific Implant Restoration

The Encode Restorative System allows for fabrication of precise implant abutments for Patient Specific Restorations, without the need for restorative dentists to make implant level impressions. The Encode Restorative System offers simplicity for restorative dentists, promotes increased

implant referrals to surgical practices, and allows all laboratories to participate in offering implant-retained restorations.

The unique technology of the Encode Restorative System begins with a distinctive series of codes in the form of concavities located on the occlusal surfaces of the Encode Healing Abutments. Using a conventional impression technique, these codes transfer the hex position, collar height, platform diameter and angulation of the implant, as well as capture the soft-tissue contours surrounding the implant. The definitive cast made from this impression is then sent to 3i for optical scanning and fabrication of a computer de-

signed, patient specific implant abutment, followed by fabrication of the definitive crown by the dental laboratory.

Roger Levin reported in *Implant Dentistry* (Vol. 11, Nov 2002) that "the major hurdles for general dentists in treatment planning and restoring implants are the relative comfort and complexity of the various commercial dental implant systems currently available." Levin reported that eighty percent of dentists were confused about diagnosis and treatment planning implants and sixty percent of those had less than satisfac-

tory experiences with implant dentistry. Furthermore, he reported that they were not excited about doing more implants due to implant complexity. The restorative dentists contributing to the study also reported that the complexity of implant components was overwhelming.

The Encode Restorative System specifically addresses these barriers to treatment planning and restoring implants by eliminating the need for restorative dentists to make implant level impressions.

continued on reverse

Dental Fun Fact

DID YOU KNOW THAT...

IN 1840, HORACE HAYDEN AND CHAPIN HARRIS ESTABLISHED THE WORLD'S FIRST DENTAL SCHOOL, THE BALTIMORE COLLEGE OF DENTAL SURGERY, AND ORIGINATED THE DOCTOR OF DENTAL SURGERY (DDS) DEGREE.

-ADA

News You Can Use

On an anecdotal note, a number of cutaneous infections have been referred to me in my hospital and office practices. The vast majority of these infections are caused by group A streptococci. These respond well to Rx Keflex (500 mg x 40 tabs 1 tab QID until gone for infection), and a topical application of Rx Bactroban (Mupirocin) (cream 2%

30 gram tube, apply TID). Mupirocin has excellent topical penetration. The greater concern is of course, that the infection might be caused by methicillin resistant *Staphylococcus aureus* (MRSA). This infection might require hospitalization and treatment with Vancomycin. If you have any concerns, please give me a call at 845-623-3497.

New Clinical Perspectives on Implants

With the protocol described by 3i, the restorative dentist does not need to order components, torque abutment screws or remove/replace components (healing abutments and impression copings). They only need to make a conventional polyvinylsiloxane impression of the 3i Encode Healing Abutment, which has supragingival margins. This impression is much simpler than a

conventional crown-and-bridge impression because retraction of the peri-implant soft tissues is not required.

The Encode Restorative System is attractive to implant surgeons as coordination of the components that are necessary for implant restorative dentistry has been minimized due to the ease of the impression and

restorative techniques described above.

From an article written by Lee Walker, MD, DDS, and Peter C. Cutler, DDS in *3i Clinical Perspectives*, volume 5, issue 1.

If you have any questions, please call (845-623-3497) or email me (drbriansimpson@optonline.net).

For more information on implants, please don't forget to check our website www.drbriansimpson.com

Synergy Training Program

Dr. Brian Simpson reflects on the fourth sessions of the Synergy Training Program.

Synergism: The joint action of agents, that when taken together, increase each other's effectiveness

On March 13th, Dr. Bruce Ouelette, a certified 3i speaker and I conducted the fourth session of the Synergy Training Program at Pasta Cucina in New City. The session tackled a number of cases for treatment including single tooth implants in the posterior and aesthetic regions, multiple implant cases

with interim restorations, denture cases with Locators, and everything in between. This was a hands-on session. We worked with the various components (implants, abutments, Encode abutments, etc.) of the 3i system. Bob Renza joined us to give his perspective from the laboratory point of view. The emphasis of our program is on the team approach: each member of the implant team (surgeon, restorative dentist, and laboratory technician) coordinates his/her efforts with the other members.

The final session will be on

April 24, 2009 when the final case presentations will be completed.

If you have any questions about the Synergy Training Program, please call me at the office at (845)-623-3497 or email me at drbriansimpson@optonline.net.

Because of the tremendous initial success of this program, we plan to have other implant educational opportunities in the future.

"Welcome the challenges. Look for the opportunities in every situation to learn and grow in wisdom."

-Brian Tracy