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THE DENTCARE

Your Monthly Health Care Magazine

Brightening smile the world over

Art
of Dental Selling

Secret of Being
POSITIVE IN LIFE

Alloplastic
Facial Augmentation

WEIGHT LOSS
NO LONGER A SAGA

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2017





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Before



After



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2016 would have had a perfect ending for most of you, I hope.

Nevertheless, January heralds new beginnings for all of us...

As we figure out the past and reckon that our future is in the process of unfolding, it does throw you into a state of subdued concern given the prevailing air of uncertainty.

If we had the opportunity to fit the pieces of the jigsaw called life, well ahead of time, I am certain the lure would be irresistible. Who would not want to??

It is only human to wish that every dream would turn into reality.

But then Life is really not that simple, nor does it offer you the expected, always.

2017 may present you with situations that you would never have had a clue about nor know what it would take to find a resolution. These "overwhelming" moments would be the true test of your faith.

It is my prayer that despite all that life has to throw at you this year, you may have the strength to face every challenge as an opportunity to learn from and grow as a better person.

Beyond life, there are thoughts for you to ponder in what is inside these pages.

Better Children through brain power is an example. So is their right to protection from disease through judicious vaccination.

A positive attitude in life is all it takes to face an insurmountable task. However, difficult scars may need experienced hands to manage them well. Or youthfulness could find a rejuvenating solution in facial augmentation?

Kerala begins this year on a celebratory note for the fraternity through KODACKK. I trust you will capture the moment without fail and wholeheartedly partake in the festivities on offer.

I urge you once again, to dream new dreams today. Set new goals today. Spend time on things that truly count today. Love your family today. Be a friend today. Do things better, TODAY and make every day this year account as your best to date.

The entire team at THE DENTCARE wishes you the abundance of His Grace in the days to come.

Yours truly,

Prof. (Dr.) George P. John

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CAUTION: When viewing the techniques procedures, theories and materials that are presented, you must make your own decisions about specific treatment for patients and exercise personal professional judgment regarding the need for further clinical testing or education and your own clinical expertise before trying to implement new procedures.

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A child's brain develops in response to both genes and the environment. It is the interaction between the genes and environment that really shape the developing brain; a dance between biology and experience.



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Kerala State
Dental Conference
KODACKK'17
20,21,22 Jan 2017@KOTTAYAM



49TH IDA KERALA STATE DENTAL CONFERENCE

January 20, 21, 22 | Hotel Windsor Castle, Kottayam

Hosted by IDA Central Kerala Kottayam Branch

TENTATIVE SCIENTIFIC PROGRAMMES KODACKK'17

PRECONFERENCE COURSES (20th Jan)		KEYNOTE LECTURES (Jan 21, 22)	
1	Fixed Orthodontics for General practitioners. (Lecture)	1	Trouble shooting in Endodontics.
2	Implantology for beginners. (Lecture & Hands-on)	2	Digital Radiography, versatility in dental practice.
3	Incorporating Lasers in dental practice. (Lecture & Hands on)	3	Ethical marketing of dental practice.
4	Management of Mutilated Teeth – Post & Core (Lecture & Hands-on)	4	Excellence in aesthetic restorations.
5	Minor Oral Surgery & surgical extraction. (Lecture & Hands-on)	5	Excellence in Ceramic Crown & Bridges.
6	Practice Management (Lecture)	6	Tips & Tricks for successful Implantology in GP.
7	Strategic Implantology: A novel and superfast approach in Dental Implantology (Lecture & Live Demo)	7	Managing Malocclusion in mixed dentition.
8	Pulpectomy & Stainless Steel crowns. (Lecture & Hands-on)	8	Medications in dental practice.
9	Rotary Endodontics simplified. (Lecture & Hands-on)	9	Procedural emergencies in day to day practice.
10	Smile designing. (Lecture & Hands-on)	10	Perio-Aesthetics for general practitioners.

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Organising Secretary +917025148111
Registration +917025148222
Registration +917025148444
Scientific Committee +917025148333
Accommodation +917025148555
Tradefair Incharge +917025148666
24 X 7 Helpline +917025148333

CONFERENCE SECRETARIAT

Prof. Dr Eapen Thomas

ACE Dental Specialty Clinic, Holyfamily Complex,
Muttambalam P.O, Kanjikuzhy, Kottayam 686004
E Mail: info.49ksdc@gmail.com. www.49ksdc.com
Mob: +917025148111, +917025148333

THE DENTCARE INVITES YOU TO EXPERIENCE KODACKK '17

Visit our
Stalls :
No. 53, 54, 55,
56, 57 & 58

Kottayam, the land of latex, letters and lakes beckons the entire Dental fraternity to the 49th IDA Kerala State Dental Conference, KODACKK'17. Kottayam, which is reputed for its excellent hospitality and many places of historic importance and scenic beauty, gets a chance to be the host after a long gap of 20 years. There will be an impressive array of speakers from across the country and of international repute. Assuring each of you a memorable conference which will be truly cherished for long.

DentCare invites you to join us for this Extravaganza which will be held in Hotel Windsor castle, Kottayam on January 20th - 22nd, 2017.

This mega event is hosted by IDA Central Kerala Kottayam branch (CKK) and the theme of the event "Together towards Tomorrow" rightly implies what DentCare foretells to offer through the conference.

DenCare is all set to leave no stone unturned to stay true to its tagline, "Brightening Smiles the World Over" by exhibiting a wide array of its products and showcasing the latest technology solutions. We are arranging a huge booth space of total number of 6 stalls (54sq.meters) and the stall numbers are 53, 54, 55, 56, 57 and 58. You all are invited to visit us.

**Looking forward to meeting
you all at Kottayam.**



Perioral Rejuvenation and Lip Augmentation

Dr. Asha Biju

Consultant Cosmetologist and Cosmetic Laser Surgeon
Wow Factor MediCosmetic Skin and Laser Centre
Thiruvananthapuram, Kerala, India



The signs of ageing seen around the mouth are a frequent source of cosmetic concern especially for women as they enter their late 40's and early 50's. This region is difficult to rejuvenate because the causes of the problem are multifactorial. Any procedure that only addresses one of these components will fail to produce the type of result that patient's desire.

There are at least 4 different aspects to the ageing perioral region: photodamage with loss of collagen and elastic fibers; loss of bone and support structure; contribution to the radial lines from the orbicularis muscle; and pigment changes from photo damage.

Lips are the foundation on which the perioral region is centered. According to modern aesthetics, full lips provide a healthy, youthful appearance. The main anatomic feature of the lips is the "Cupid's Bow" on

the upper lip, formed by two high points of the vermillion joined at a V-shaped depression centrally.

From birth to pubescence, glandular and muscular hypertrophy leads to formation of full, youthful lips. After puberty, gradual atrophy influenced by the aging process, leads to reduction of the vermillion show of the lips, blunting of the cupid's bow, and an attenuated white roll. Repetitive activity of the lip muscles leads to vertical rhytids or smokers lines on both lips. Later on, marionette lines i.e., vertical lines at oral commissures form, leading to an expression of sadness. Sun damage and smoking can worsen these lines. Other signs of ageing in this area are the mentalis crease (transverse crease on the chin) and *peau de orange* (dimpling of the chin). Another telltale sign of aging in this area is the deepening of the naso labial folds.

Lip augmentation increases the fullness of the lips, using one of a variety of surgical or minimally invasive techniques. While the most popular methods uses hyaluronic acid fillers, fat grafts and lip implants may also be options.

Hyaluronic acid fillers are the most popular lip fillers as they are very predictable. When they're in the lips, they're very soft; they won't feel like a hard material inside your lip. They are temporary, and the nice thing about it, too, is if there's a problem or if it was injected improperly where there's a lump or something doesn't look right, there is a medication that can dissolve that material. So that's a nice safety feature. The results are natural, very beautiful and amazing.



The other way to plump the lips would be fat. Fat in theory is permanent, but fat is also very unpredictable. The fat tends to move a little bit and form lumps in the lips, especially because the lips are an area that is constantly moving. Also, you can lose up to 50 percent of the fat that's injected, so you need to put in a lot of fat in order for you to get the result that you want. And also with fat, you have to harvest the fat. You have to go through the process of a little bit of a liposuction procedure. In general for the lips, you only need a few cc's of fat, so it's just a little bit, just a small syringe. That can be easily suctioned, even from someone that's very skinny, from their hip, butt or stomach. But there's always the risk of having a problem where that fat is harvested from.

As a rule of the thumb, the upper lip should be approximately 75 to 80% of the volume of the lower lip and the central lip should protrude slightly beyond the upper lip.

The third way is with lip implants. They're silicone implants that are put in. The advantage is that they're permanent and don't need any maintenance. These new silicone implants for lips can easily be removed if there's an issue. If you decide that Lip Implants are the right choice for you, make sure you have none other than a highly experienced lip implant surgeon to do the procedure, after discussing all the pros and cons.

More than 90 percent of patients for lip augmentation choose one of the hyaluronic acid fillers, which I think is the appropriate choice. Now, the other 10 percent, in my practice, are choosing implants. In patients who are getting implants, I often advise that they have a temporary filler like hyaluronic acid injected first, so that they can see what they look like for the next six months or so and be certain they like what their lips look like when they're larger, before they go ahead and commit to a lip implant.

Chin creases can be improved by a variety of means. If the muscles are pulling the chin in a strange way, creating a band, or causing dimpling of the chin, botox can help improve this and lessen the prominence. Facial fillers can also play a prominent role in improvement here. For those who look to soften cleft chins and creased mentalis musculature, the treatment nearly always involves a blend of botulinum toxin and soft tissue filler like hyaluronic acid. Results are uniformly excellent, although depending upon the strength and severity of your creasing, yearly follow-up maintenance injections may be necessary.

The nasolabial fold is the deep crease running from either side of the nose down towards the corners of the mouth. Also known as a "smile line," this crease is created by repeated movement of the mouth. While it is attractive to have a little fold here, a deep fold can make you look older than you truly are. It becomes more noticeable as part of the natural ageing process. Fat is lost from the cheeks, reducing skin volume and making this fold appear deeper.

Repeated smiling or having a "big smile" may result in permanent, deep creases in this area. Even after you're no longer smiling, the line remains. Deep nasolabial folds can be corrected through injections of dermal filler into the surrounding area, restoring the lost volume and softening the appearance of these creases. The goal of nasolabial fold injections is to even out the skin volume, leaving you with a smoother, refreshed-looking appearance.

Perioral rhytids or wrinkles develop around the perioral region or area around the mouth for various reasons including smiling, talking, smoking, and related muscle motions thousands of times a day throughout life. The

More than 90 percent of patients for lip augmentation choose one of the hyaluronic acid fillers, which I think is the appropriate choice.

vertical rhytids around the lips are especially prominent because of constant motion around the mouth. These rhytids often can be temporarily effaced with injectable fillers. As the perioral rhytids become more pronounced with increasing age, resurfacing techniques must be considered such as fractionated CO₂ laser resurfacing or peels. Peels can be used for more superficial rhytids and the laser treatments are better for the deeper rhytids.

To sum up, the perioral region must be addressed in facial rejuvenation to achieve a complete, balanced, and more youthful appearance, after an accurate pre-procedure assessment of the area.



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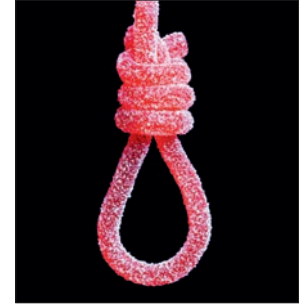


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Weight Loss

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WEIGHT LOSS



We have enough knowledge to know which food is healthy, high in calories and which is to be avoided. It is all about making up your mind and avoiding unhealthy food, cutting down on calories and exercising.





Ms. Wanitha Ashok
Fitness Expert
Bengaluru, Karnataka, India

Maintaining a healthy body weight is important for physical and emotional well-being and to prevent disease. Excess body weight has been linked with increased risk for numerous health issues like heart disease, high blood pressure, stroke, diabetes, osteoarthritis, and certain types of cancer, elevated cholesterol levels, weak knees and back pain.

Diet and exercise go hand in glove when it comes to losing weight. 70% of weight loss comes from your kitchen and 30% from exercise. So let's start with diet. A little know how will help you sail through the battle with the bulge. I am often asked for a diet chart, I smile and tell people I don't believe in diet charts. We have enough knowledge to know which food is healthy, high in calories and which is to be avoided. It is all about making up your mind and avoiding unhealthy food, cutting down on calories and exercising. To win the battle with the bulge, make small changes one at a time instead of big changes all at one time. Allow your body to get used to these small changes and eventually for it to become a way of life. The mantra to lose weight is simple, "eat and do not skip meals". When you skip meals your metabolism slows down and as a defense mechanism your body begins to store any available energy as fat and further gets rid of muscles as they are expensive tissues to maintain. When you lose out muscles, your metabolism comes down.



Weight loss is burning more calories than you take in. Exercise and curtailng over-eating and unwanted calories is the healthiest and easiest way to lose excess weight and is the hardest. If you are someone who has no control over indulging and yield to temptations then it's best to avoid being in places where you know you are tempted to make poor food choices. Spend time with those people who will not pressure you to make poor food choices. Do not stock your house with unhealthy high-calorie, low-nutrition snacks like chips and other Indian snacks. Stock plenty of healthier options such as popcorn, low-fat cheese and yogurt, fruits, healthy dips and non-fried snacks.

Whether you are trying to lose 1 kilo or 15, the same principles establish how much weight you lose and how fast you lose weight. Our body weight is determined by calorie intake and expenditure. If you want to see a change, reduce your calorie intake by 250 calories and expend 250 calories through exercise, this mounts up to 3500 calories a week which will lead to half a kilo weight loss. It's safe to lose from 1 to 1½ pounds per week. Fat diets may result in rapid weight loss but is unhealthy and soon your mind will rebel due to deprivation and pounce on food with vengeance. Therefore it's better to make healthy lifestyle changes by cutting down on quantity. Example instead of eating 3 dosas/idli/roti have only 2, switch from 3 coffee/tea a day to 1cup a day and substitute with green tea,



***On your marks
get set and go!***

from 2 cups of rice cut it down to one and gradually substitute white rice with nutritious brown rice.

Stick to home cooked food and avoid or cut down eating outside food, instant food, deep fried, sweets, colas, pastries and junk foods as these are high calorie food and none are nutritious. Just go off all this for a month and you will see a big physiological change, the results will keep you going.

“Exercise”- A natural anti-depressant, metabolism booster, calorie burner, complexion enhancer and more. An exercise regime consists of 3 components, cardio, strength and flexibility. Cardio options are walking, swimming, cycling, jogging, aerobics, zumba, RPM and spinning.

Choose what you would enjoy the most as there are more chances of sustaining. To get the body into calorie burning stage you have to aim for 40-60 minutes of cardio. Let's stick to the main component of exercising that's cardio, this loosens up the body and gets you into the rhythm. If you are new to exercise it's recommended to start slow. Begin with 10 minutes to allow your body to get used to exercise and gradually add minutes until you touch 40-60 minutes.

Make sure you warm before you start the cardio segment and cool down post cardio session. Appropriate footwear will power your workout and prevent injuries.



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Chemical **PLAQUE** Control

Dental caries and periodontal diseases are the two most common chronic diseases of the oral cavity. Experimental and epidemiological studies have demonstrated that these diseases are dependent on the microorganisms present in plaque. Constant build-up of the plaque on and in between the teeth causes constant irritation to the gingiva.

Dental Plaque may be defined as a highly specific variable structural entity formed by sequential colonization of microorganisms on the

tooth surfaces, adjacent gingival tissues and restorations.

Plaque control is the removal of microbial plaque and the prevention of its accumulation on the tooth and adjacent gingival tissues. Reduction of supragingival and subgingival plaque helps to reduce pathogenic microorganism and calculus formation and favors healthier microflora. Thus plaque control is an effective method of treating as well as preventing gingivitis and other periodontal diseases.



Dr. Anish John
Dental Practitioner
Chengannur, Kerala, India

Types of Plaque Control

1. Mechanical: Tooth brushing and interdental cleaning
2. Chemical: Chlorhexidine, Listerine, Triclosan etc.

Chemical Plaque Control

Chemical plaque control agents have proven to be an ideal adjunct to mechanical plaque control procedures especially in individuals:

- With a defective host defense mechanism
- Mentally or physically handicapped
- Who have undergone surgical procedures post operatively

Ideal Requisites of an Anti-Plaque Agent

- Should significantly reduce plaque and gingivitis
- Should prevent growth of pathogenic bacteria
- Should prevent development of resistant bacteria
- Should be compatible with oral tissues
- Should not stain or alter taste
- Should exhibit good retentive properties (substantivity-slow release property)
- Should be inexpensive and easy to use

Classification

First Generation Anti-Plaque Agents

- Plaque reduction – 20-50%
- Poor retention within the mouth
E.g., Antibiotics, Phenols, Quaternary ammonium compounds and Sanguinarine

Second Generation Anti-Plaque Agents

- Plaque reduction – 70-90%
- Better retention and slow release
E.g., Bisbiguanides (Chlorhexidine)

Third Generation Anti-Plaque Agents

- Block binding of microorganisms to the tooth or to each other
- Lack of good retention compared to chlorhexidine
E.g., Delmopinol

Agents which are accepted by ADA (American Dental Association)

- Chlorhexidine rinse
- Essential oil rinse/ Listerine

Chlorhexidine

It is a cationic bisbiguanide which is effective against gram positive, gram negative organ-

isms, fungi, yeast and viruses. Exhibits both anti-plaque and antibacterial properties.

Mechanism of action

Anti-plaque action

Superior Anti Plaque activity is due to its sustained availability - “substantivity” (Reservoir of chlorhexidine → slow dissolution → bacteriostatic milieu in the oral cavity).

Mechanisms of Plaque Inhibition

- Prevents pellicle formation by blocking acidic groups on salivary glycoproteins thereby reducing glycoprotein adsorption onto the tooth surface.
- Prevents adsorption of bacterial cell wall onto the tooth surface by binding to the bacteria.
- Prevents binding of mature plaque by precipitating agglutination factors in the saliva and displacing calcium from the plaque matrix.

Antibacterial action

- Exhibits wide spectrum of activity
- Chlorhexidine shows different effects at different concentrations
- Bacteriostatic-at low concentration
- Bactericidal-at high concentration

At Low Concentration

Chlorhexidine increases the permeability of bacterial cell membrane and causes leakage of low molecular weight compounds and entry of harmful substances. At this bacteriostatic stage, the effect of chlorhexidine is reversible.

At High Concentration

- It causes greater damage to cell membrane
- Large molecular weight compounds are lost
- Coagulation and precipitation of cytoplasm
- Vital activity ceases
- Cell death (irreversible)

Adverse Effects

- Brownish discoloration
- Causes mucosal erosion
- Alters taste sensation
- Hypersensitivity (rarely)
- Stenosis of the parotid gland

Instructions for Use

- Chlorhexidine should not be used before or immediately after using a tooth paste (interaction with anionic surfactants reduce effective delivery of chlorhexidine in active form). Therefore, tooth paste should be used prior to chlorhexidine, and excess tooth paste should be rinsed off with water.
- Avoid intake of tea or coffee immediately after morning rinse.
- Use of mouth wash as a last thing in the night is recommended
- Since it is more effective in preventing plaque on clean tooth surface than in reducing pre-existing plaque debris, chlorhexidine mouthwash should never be given to patients before any periodontal treatments.



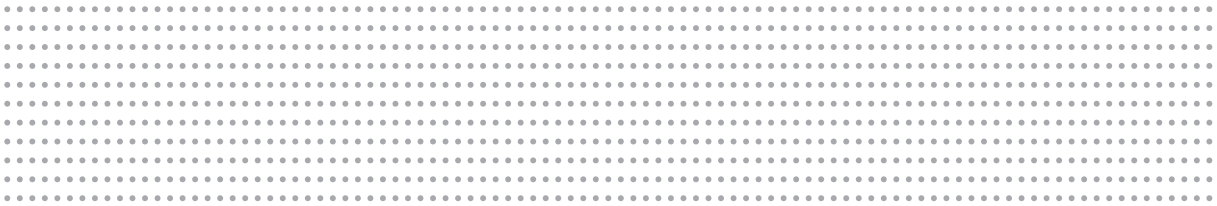
Results

Several clinical investigations have reported that two daily rinses with 10 ml of a 0.2% aqueous solution of chlorhexidine digluconate almost completely inhibited the development of dental plaque, calculus and gingivitis. Plaque reduction-45 to 61% and gingivitis reduction-25 to 35%.

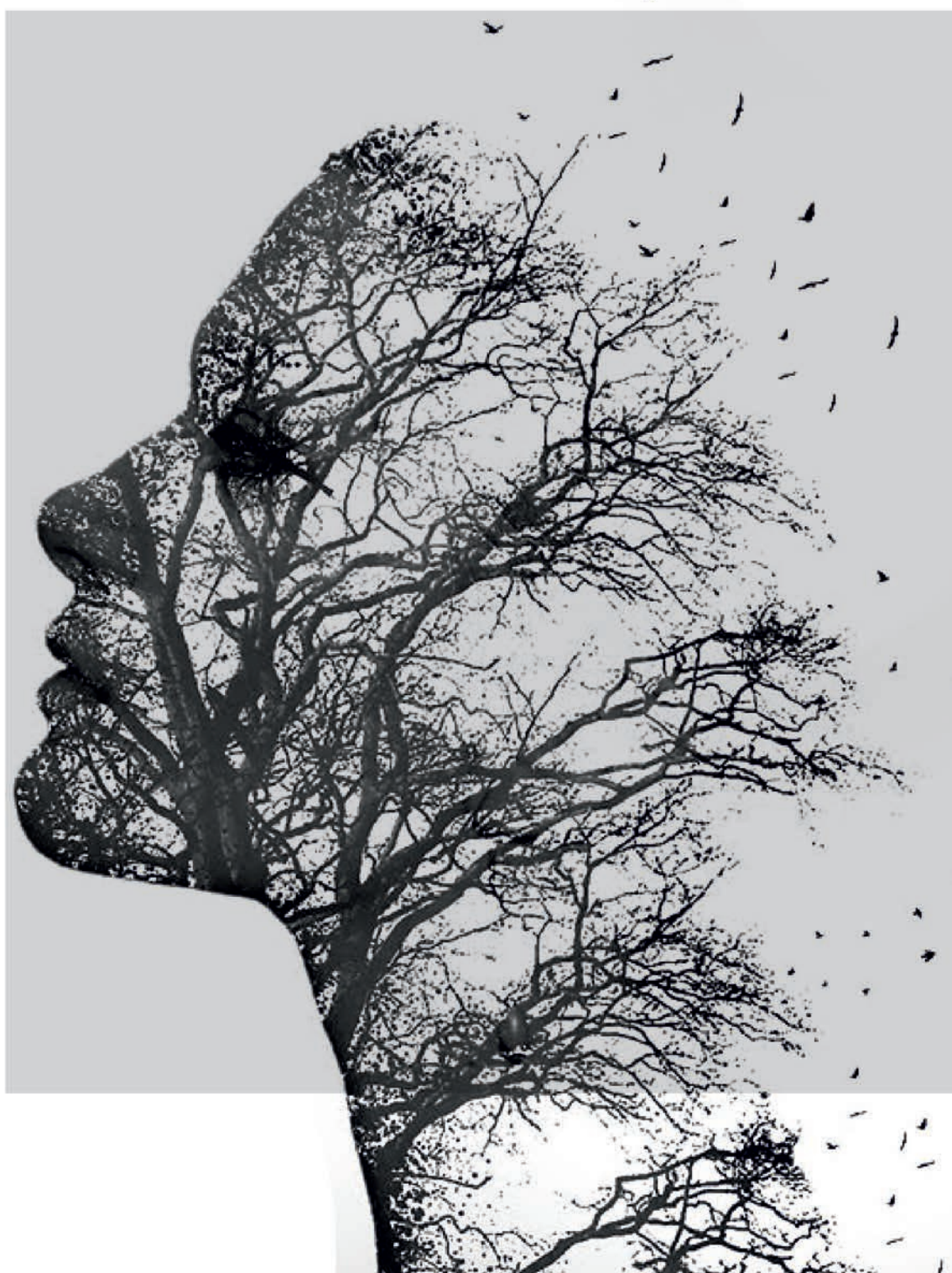
Essential Oil Rinse / Listerine

It is a phenolic mouthwash containing thymol, eucalyptol, menthol and methyl salicylate. Clinical studies have demonstrated, Plaque reduction-20 to 35% and Gingivitis reduction-25 to 35%. On the basis of these studies, it has been accepted by ADA to be an aid to home oral hygiene measures. It is safe for use; hence it is available without a prescription. Contain alcohol up to 24% and it exhibits poor oral retention. It is lesser effective compared to chlorhexidine.





Managing Difficult Scars

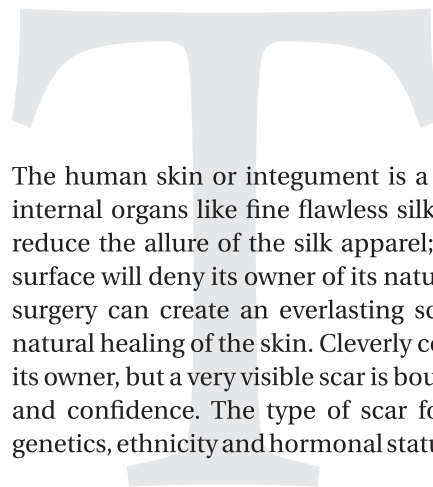


Cleverly
concealed
scars do not
bother its
owner, but a
very visible
scar is bound
to reduce the
self-esteem
and confidence.



Dr. M. S. Jayasekhar

Consultant Plastic and Cosmetic Surgeon
Suvarna Aesthetics Plastic Surgery Centre
Thiruvananthapuram, Kerala, India



The human skin or integument is a seamless organ covering all internal organs like fine flawless silk clothing. A simple tear can reduce the allure of the silk apparel; similarly a scar on the skin surface will deny its owner of its natural gloss. Any injury, burn or surgery can create an everlasting scar as it is the end point of natural healing of the skin. Cleverly concealed scars do not bother its owner, but a very visible scar is bound to reduce the self-esteem and confidence. The type of scar formed depends on the age, genetics, ethnicity and hormonal status of the person.

Scar Revisions

Depending on the size and type of scar to be treated, it may be possible to treat your scar revision in different ways. The procedures usually take about 30-60 minutes (approx.). It may be possible to improve the appearance of red, itchy and/or unsightly scars either by steroid injection, silicone gel tape or surgical excision. Steroid injection can be performed under Local Anaesthetic and may require a few injections over time to improve the appearance. Silicone gel tape is applied to the scar and worn for virtually 24 hours a day. It is removed for washing/bathing and each piece lasts a few weeks.

Surgical excision can be performed under Local Anaesthetic. Sutures will need to be removed (if not dissolving) and a pressure garment may be required. If a large scar, serial excision may be required. The scar will need moisturising (with a bland moisturiser) and massaging to help with the final result. Skin coloured surgical tape is applied for a minimum of 2 weeks to help support the scar. Sun block should be worn for 18-24 months over the affected area as it will be prone to burning.

Keloid and Hypertrophic scars

Keloid scars are formed because of the exaggerated healing process of the skin, which overshoots the normal limits of healing. They extend beyond the boundaries of the injured areas. Hypertrophic scars are the less aggressive variants of Keloid. Hypertrophic scars and keloids are difficult to improve and remain a therapeutic challenge. Every time the skin is cut or injured it will heal with a scar. Some people make better scars than others. General patients with black and pigmented skin will tend to produce poor scars including keloids and hypertrophic scars. Certain areas of the body are known to produce keloid scars than others. The worst areas are the chest, shoulders and over bony prominences, but fortunately the face and neck produce good scars. Scars which lie in the lines of skin tension are better than ones that run across them.

Prevention is the foremost in keloid therapy. Avoid performing unwanted cosmetic surgeries in patients known to form keloids. Suture all surgical wounds with minimal tension. Incisions should not cross joints and avoid making chest incisions, and make sure that incisions follow skin creases whenever possible. Treatments include intralesional steroid injections, occlusive dressings, and compression therapy. Intralesional steroid injections have been the mainstay of treatment. They reduce excessive scarring by reducing collagen synthesis. The most commonly used steroid injection is Triamcinolone Acetonide (TAC) in concentrations of 10-40 mg/ml, given intralesionally into the scar with 25 to 27-gauge needles at 6-week intervals. Other measures include occlusive silicone sheets on top of these scars. They are used for periods of 3-6 months. Compression therapy with pressure garments is also very effective. Compression treatments also include button compression, pressure earrings, elastic adhesive bandages, compression wraps and support bandages. Compression therapy involves pressure, which has thinning effect on skin.

1. **Intense Pulse Light (IPL)** laser when used along with intralesional steroids can produce a marked improvement in the scar texture, colour improvement and reduction in scar height.
2. **Fractional Resurfacing** - "heating" type or non-ablative Laser treatment. This procedure stimulates formation of new collagen by heating tiny columns of tissue without damaging the skin's surface. After each treatment there will be some redness and swelling which will go away in a few days' time. The treatment needs to be repeated 3- 4 times.
3. **Microneedling** is a new alternative cost effective alternative to laser treatments. By introducing fine needles into the skin stimulation of collagen formation is done. Microneedling is done using a special vibrating device that is fitted with a sterile tip containing tiny microneedles. A local anesthetic cream is applied for 30 minutes prior to the treatment. There will be some redness and mild swelling like mild sunburn for 48 hours. There may also be minimal pinpoint bleeding and bruising. The goal of microneedling is to break down the old scar tissue and to stimulate skin cells to produce new collagen. This results in the formation of new tissue layers of elastin and collagen fibers as well as new capillaries for improved blood supply. In response to the stimulus, the skin plumps and thickens. Microneedling can be used for mild to moderate acne scarring. A few sessions of treatments is required for best results.



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FACIAL AUGMENTATION

A CASE REPORT OF MALAR
AUGMENTATION DONE USING
MEDPORE IMPLANTS

Dr. Varun Nambiar
Maxillofacial Plastic Surgeon and Implantologist
Payyanur, Kerala, India



Alloplastic facial implants offer the reconstructive surgeon certain advantages over autogenous tissue, including availability of material, simplification of operative procedure, and limited donor site morbidity. Depending upon the desired surgical result, the implant must be chosen based upon its physical properties. In order to prevent extrusion or infection, proper preoperative planning and operative technique are essential.

The use of alloplastic implantable materials to achieve improved facial contours has been noted for centuries. Early implants consisted of naturally occurring materials (e.g., gold or ivory), while modern implants are complex materials such as ceramic, silicone or carbon-based polymers. The search for the perfect implant material is still underway.

The appearance of the malar aesthetic unit is a strong component of western youth and beauty. A round, more prominent malar area conveys a youthful, healthy appearance. As ageing occurs, the malar soft tissues atrophy and descend, creating an aged face.

Malar deficiencies can be classified as congenital or acquired. Bony deficiencies or asymmetries are typically treated with osteotomies (possibly requiring bone grafts) or implants. Soft tissue deficiencies can be corrected with soft tissue resuspension, injectables (e.g., fat injection), or implants.

A thorough and critical analysis of a patient's face is required prior to embarking upon malar augmentation. The analysis should consist of bony and soft tissue abnormalities. Noting asymmetries of the face preoperatively and pointing them out to the patient is critical. Having the patient look into a mirror while pointing out asymmetries can be exceedingly useful, as can photographic analysis (post-operatively, the patient will see himself in the mirror and in photographs, and through these formats he will judge the surgical outcome).

General anesthesia is typically preferred, but, depending upon the size of implant and amount of required dissection, malar implants can be placed using local or general anesthesia. It allows a more liberal dissection for patient comfort. A thorough history and physical examination should be performed for each patient, with specific focus on medications or supplements that can cause bleeding, smoking history and wound healing issues.



Indications

Several general categories of indications for malar augmentation includes:

- Post traumatic
- Congenital deformities
- Midface hypoplasia
- Very long, narrow face
- Aged face with atrophy and ptosis of soft tissues
- Very round, full face
- Unbalanced aesthetic triangle

The first two categories can be identified by a proper history. If midface hypoplasia is considered, the occlusion should be properly examined and a cephalogram evaluated. Patients in all of these categories may benefit from malar augmentation. (The first three categories are treated more with bony augmentation; the other four use more soft tissue augmentation)

Case report

Patient named Arun aged 23 working as a software engineer came to my clinic for his smile correction and facial aesthetic evaluation. On evaluation of the facial symmetry using photographs and lateral cephalometric analysis, he presented with a slightly prognathic mandible and bilateral malar deficiency. The treatment plan included fixed orthodontic correction of the teeth to decompensate the teeth and following surgical correction of the mandible using anterior segmental osteotomy and malar correction using MEDPORE malar implants. The planned treatment was explained to the patient and consent was taken for the same.

The procedure was done under general anesthesia. The malar implants has to first soak in hot saline bath for easy moulding and the area of placement approached intraorally using vestibular incision extending from canine region to 1st molar area in the vestibule. The periosteum separated from the bone and the malar area exposed subperiosteally. Once the dissection is completed, the predetermined desired size and shape of the implant is adapted for try-in. Currently a large variety of facial implants are available and my personal choice while considering malar implant is porous polyethylene implant – MEDPORE because they do not have

complete memory, are readily modifiable at surgery, are porous which facilitates tissue in-growth and self-stabilization. Careful adaptation of the preformed implant is necessary to obtain optimal results; the implant is stabilized using 10-12mm titanium screws. The incision is closed using absorbable vicryl sutures.

The facial outcome can be very well appreciated with the prominence of the malar implant. The procedure can be done under Local Anaesthesia too. Chances of minimal facial oedema are unavoidable. A layered tape dressing is applied for 48 hours. After removal of the dressing the patient maintains a liquid to very soft diet for 7 to 10 days until the vestibular incisions are well healed.

Complications

Chances of infection are high for alloplastic implants when compared with autogenous augmentation. Once the infection occurs there is no other shortcut for healing rather to remove the implant.

Summary

Alloplastic facial augmentation has become a standard of care. Careful preoperative detailed systematic esthetic evaluations permit the various areas of the face to be augmented precisely.

Frontal Profile View



Before

After

Lateral Profile View



Before

After



Antibiotics in Dentistry

Evolutionary changes have created the origin of newer diseases and activation of virulent variety of existing ones. Research works have evolved newer dimensions in medical therapy. New generation molecules of antibiotics are synthesized to tackle each of these diseases. In spite of extensive research work, practitioners are finding it difficult to contain certain epidemic/pandemic situations. We should think about the reasons for this. One of the possible cause is misuse of molecules by practitioners. Most of our patients have other systemic diseases which may require many medications, cross reaction and efficacy of certain drugs are affected on such situations. Along with that most of our dental practitioners also prescribe antibiotics without any rationale. Antibiotics can serve the purpose only if we follow correct regime and route of administration.

Dentistry

Routine dental cases doesn't require antibiotic therapy. But in cases of active infection and acute emergencies which require proper antibiotic therapy, dental practitioners prescribe antibiotics without any rationale. They don't follow correct dosage and frequency of administration, used to change the drug frequently and continue to prescribe it for longer periods even more than 15 days.

Incorrect dosage and prolonged usage can cause long term complications such as drug resistance, development of gastric problems, hypotensive attacks and, cross reaction with other routine medicines. It is essential for a practitioner to take proper medical history of routine medications before prescribing medicines and assess tolerance of patient for each and every drugs. Some may not tolerate anti-inflammatory drugs. In such cases antacids are must. Drugs like Metronidazol, Ornidazole prescribed for patients without adequate food intake can cause hypotensive attacks. Clinician should be aware of all such sequelae. Patients should be warned of such complications in





Dr. Raji Sreekumar
Endodontist
Ernakulam Medical Centre
Ernakulam, Kerala, India

Incorrect dosage and prolonged usage of Antibiotics can cause long term complications such as drug resistance, development of gastric problems, hypotensive attacks and, cross reaction with other routine medicines.

advance. Parental route of administration is preferred in some cases.

How to categorize:

1. Antibiotics in prophylactic situations
2. Antibiotics for specific infections
3. Antibiotics for extensive space infections

1. In prophylactic cases - Commonly used antibiotics such as:

Amoxicillin 500 mg 8th hrly (3 times daily)

Phexin 375 mg 12th hrly

Cefixime 200 mg 12th hrly

2. In specific infection cases - Multidrug combinations such as:

Amoxicillin-Clavulanic acid 625 mg, 12th hrly (2 times daily)

Cefixime-Clavulanic acid 12th hrly (2 times daily)

3. In extensive space infection cases - Intravenous Drugs (IV) such as:

Amoxicillin IV 500 mg and amikacin 500 mg (Intramuscular) IM 12th hrly

Augmentin 1.2 gm IV 12th hrly

OR

Cefixime 500 mg/1.0g IV and Gentamycin 80 mg IM 12th hrly

4. Osteomyelitis cases - IV drugs such as

Metronidazole 500 mg IV 8th hrly

Clindamycin 300-600 mg IV 12th hrly in divided doses

Protocol to be followed in history taking

1. Medical history
2. History of drug allergy-name of drugs should be noted in capital letters
3. Instruct to take oral medicines after having food
4. Instruct the patient to take regular medicines unless stopped for medical reasons
5. For paediatric patients, dosage should be calculated according to the weight of patient

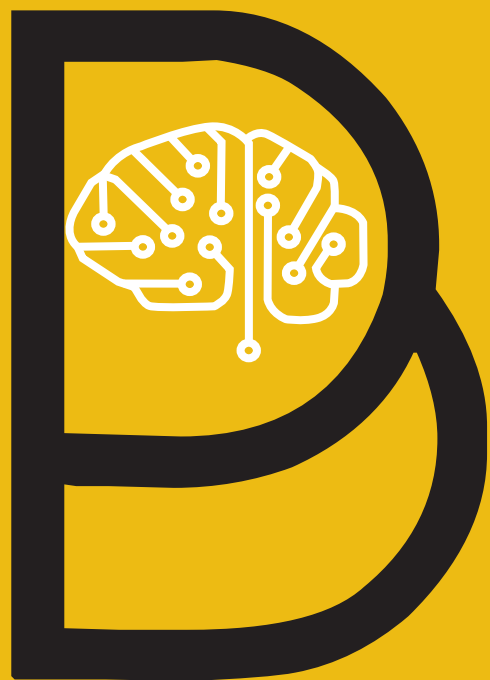
Prescription of antibiotics

1. Name in CAPITAL
2. Specify the dosage
3. Frequency of administration-if needed, time of intake, date of starting and finishing, total number of days to be taken

Analysis of situation

Antibiotics are molecules developed by scientists after a continued research work. So we are responsible for the proper usage of these molecules. Otherwise it can generate lot of resistant organisms in future. Development of resistant organisms causes delay in curing as well as uncontrollable complications. It is our responsibility to follow the correct regime and route of administration.

Train
Your

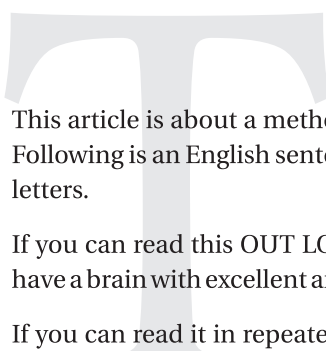


rain





Dr. Civy V. Pulayath
 Head of the Department
 Public Health Dentistry
 Malabar Dental College and
 Research Centre
 Edappal, Kerala, India



This article is about a method which we can use to test your brain. Following is an English sentence framed using numbers in between letters.

If you can read this OUT LOUD as a sentence at first attempt, you have a brain with excellent analytical power.

If you can read it in repeated attempts within one minute you can train your brain to improve.

If you take more than five minutes you need to have a consultation with a neurologist.

And if you are not able to solve it, rule out Alzheimer's before it ever gets anywhere near you!

Now try to read this,

7H15 M3554G3 53RV35 7O PROV3
 HOW OUR M1ND5 C4NDO 4M4Z1NG
 AND 1MPR3551V3 7H1NG5
 1N 7H3 B3G1NN1NG17 WA5 H4RD Bu7
 NOW,ON 7H15 LIN3 YOUR M1ND 1S
 R34D1NG 17 4U7OM471C4LLY WI7HOU7 3V3N
 7H1NK1NG 4BOU7 17
 P13453 B3PROUD 1FU C4N R34D 7H15,45 ONLY
 C3R741N P3OPL3 C4N R3AD 7H15!

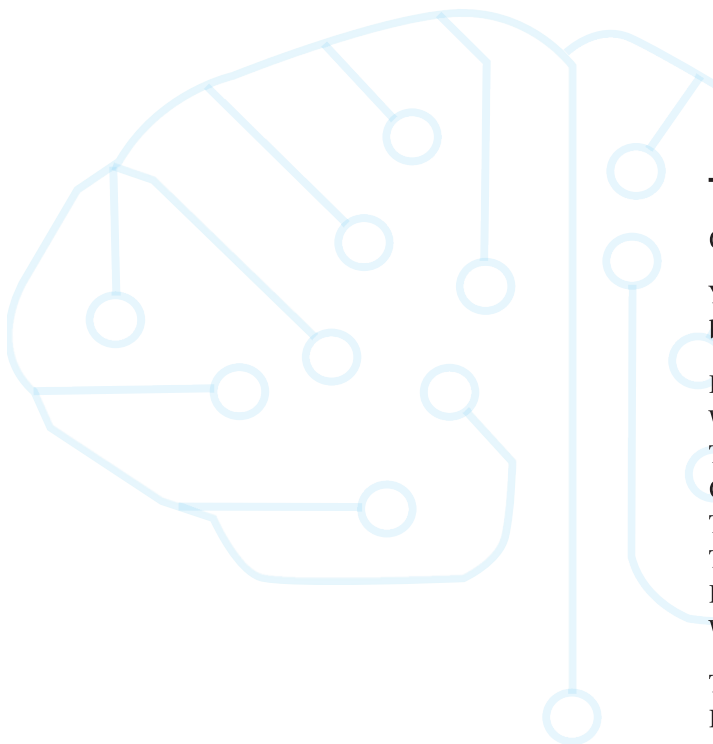
Ok, now let's try to test the visualization power of your brain.

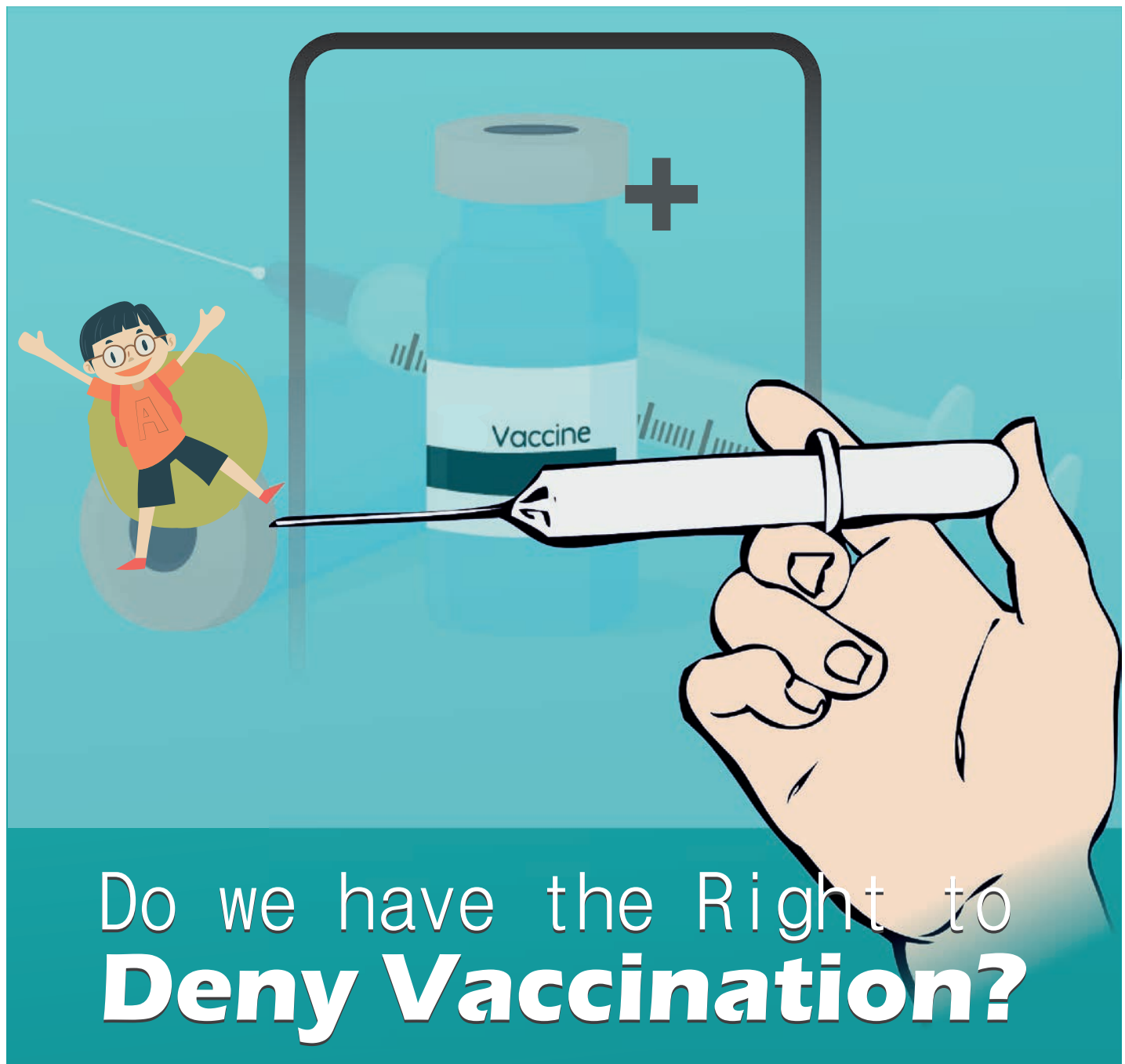
Your picturisation capacity is excellent if you can read the paragraph below without hesitation.

I CDNUOLT BLVEIEE THAT I CLUOD AULACLTY UESDNATNRD
 WHAT I WAS RDANIEG. THE PHAONMNEAL PWEOR OF
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 THE LTTRES IN A WORD ARE, THE OLNYPROAMTNT TIHNG IS
 THATTHEFRSIT AND LAST LTTEER BE IN THE RGHIT PCLAE. THE
 RSET CAN BE A TAOTL MSES AND YOU CAN STILL RAED IT
 WHOTUIT A PBOERLM.

THIS IS BCUSEAE THE HUAMN MNID DEOS NOT RAED ERVEY
 LTETER BY ISTLEF, BUT THE WORD AS A WLOHE. AZANMIG HUH?
 YAEH AND IAWLYAS TGHUHOT SLPELING WAS IPMORANTT!

Hope you have enjoyed the amazing power of your brain.





Do we have the Right to **Deny Vaccination?**

Small Pox caused by the virus *Variola major*, characterized by skin lesion and ulceration, for several years had caused death world over and even now there is no treatment for it. 90% of children and 30% of adults who contracted the disease had died and the rest who survived had complications like blindness, scars on the skin and other disabilities. During the 18th century the yearly toll in Europe due to the disease was around 4,00,000 [Four hundred thousand]

In the year 1948, when WHO (World Health Organization) came into being around 5 crores developed this disease world over. In India 1 crore used to die due to small pox. However, this dreaded disease has been wiped off from the earth. Hectic efforts to control this disease started with vaccine being developed



Dr. Suresh Kumar S. K.
Diabetologist
Kozhikode, Kerala, India

by Edward Jenner in 1794. Concerted efforts by WHO, various governments, NGOs (Non-Governmental Organizations) and others helped in the eradication of the disease by 1979, which proved that it is not an impossible dream to have world sans diseases.

Health Status

Along with eradicating small pox, diseases like TB (Tuberculosis), malaria, cholera, tetanus, diphtheria, whooping cough, plague could be successfully controlled. Kerala has health indicators comparable to the developed countries and is due to better economic status, education among females, cleanliness, fully equipped treatment centers and most importantly due to positive response to vaccination.

Recently to our shock we have realized that there are cracks on this secure zone, with diseases like diphtheria and whooping cough which we had controlled claiming the lives of children. It is seen that people who refuse to take vaccination and those who publically oppose it are coming to the fore. Those opposed to vaccination gave wide publicity to the false allegation, that doctors who promote vaccination is part of a group whose ploy is to increase the sale of vaccine and helping pharmaceutical companies. These advocates of 'no vaccination' conceal the fact that coordinated efforts by WHO and governments created a sense of security among the society against many diseases.

2 crores of children without vaccine

According to WHO about 1.5 million children die worldwide

yearly of diseases which have vaccine but do not get it. In 2013, 2 crore children have not got full immunization. Developing and under developed countries are more affected and 1 in 5 children does not get vaccine. According to WHO, India has lot to do to achieve full immunization.

1.5 million deaths per year

Before the advent of vaccination child mortality and death due to infective diseases were very common. After vaccination started deaths reduced and life expectancy also increased. But unfortunately even now 30% of children die due to not being vaccinated. About 1.5 million children die due to this and why do we have to deny them vaccine?

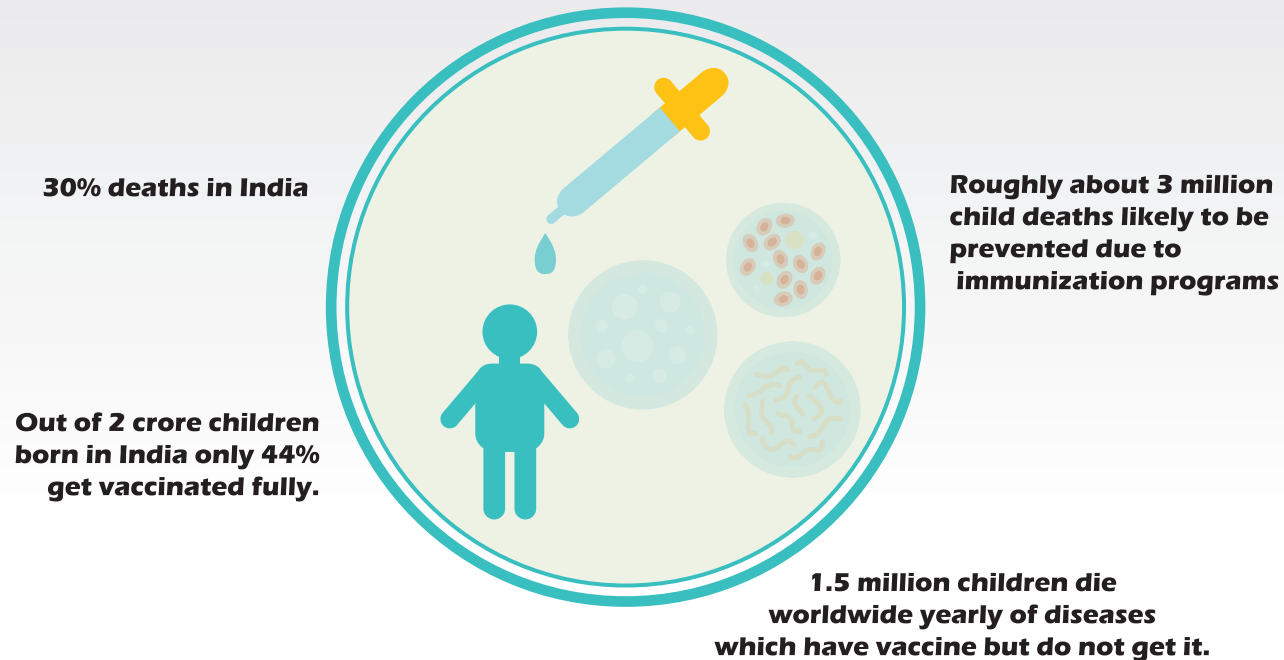
Vaccination- a birth right

Roughly about 3 million child deaths likely to be prevented due to immunization programs and why we or our children are alive today could be due to vaccination. Importance of prevention of disease does not appear to have been imbibed by the society even now. Among all the public health programs in the world, the importance of vaccination cannot be under estimated and without doubt is the single most important discovery in the field of medicine and should be considered as a birth right.

30% death in India

About five hundred thousand deaths occur in India due to children not being vaccinated. In early 1970s when developed countries could reduce death drastically due to vaccine, there was less than 5% compliance in India. In 1974, WHO initiated EPI-

About five hundred thousand deaths occur in India due to children not being vaccinated.



Expanded program on Immunization for 6 diseases-TB, tetanus, diphtheria, whooping cough, typhoid and polio and with the help of vaccines the western world could get rid of these diseases.

Nature's limitation

Out of 2 crore children born in India only 44% get vaccinated fully. There are several obstacles in India to full vaccination. Geographical difference is a main factor with Kashmir full of snow, hill terrain in Himachal Pradesh, deserts in Rajasthan, areas of forests, islands and others. China which is more populous and bigger does not have this problem. This is a bigger challenge and it is logistically difficult to access these areas for vaccination. Cultural differences, terrorist activities, naxal infiltration areas are notorious for attacking vehicles and medical persons. Some religious groups also take stand against vaccination.

Ignorance about the importance of vaccination is a very important factor. Media too give importance to negative publicity about vaccination. When hundreds of thousands of vaccine are given one or two children may have discomfort due to other causes and media highlights the negative aspect only but when truth comes out that vaccine was not the reason for discomfort media do not give adequate publicity.

Resist misinformation

With diseases like diphtheria and whooping cough raising their heads again efforts have to be taken to curb the spread of those diseases. Even though the disease was seen among non-immunized children initially medical persons have also been affected and it is necessary to vaccinate all with vaccine three times and after 10 years so that the disease is eradicated. The seriousness of the situation should be realized and the health status should be preserved.

Disease prevention is not the monopoly of a particular place or people. It is to universally implemented and achieved and it is the birth right of every child to get fully immunized. That cannot be blocked and it is the duty of central and state government to facilitate it and to take strict action against those who propagate opposition to vaccination. Necessary laws have to be made to prevent misinformation. Action against those who play with the health of the people should be severely dealt with and punished. There should also be efforts to make people aware of healthy health practices and programs should be organized by the government for this and no effort should be spared.



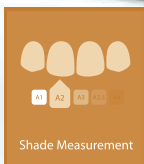
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A mouth ulcer is an ulcer that occurs on the mucous membrane of the oral cavity. Mouth ulcers are very common, occurring in association with many diseases and by many different mechanisms, but usually there is no serious underlying cause.

Oral Ulcer



Dr. Benley George

Vice Principal



Dr. Minimol K. Johny

Senior Lecturer
Department of Conservative
Dentistry and Endodontics

Pushpagiri College of Dental Sciences
Thiruvalla, Kerala, India

A mouth ulcer is an ulcer that occurs on the mucous membrane of the oral cavity. Mouth ulcers are very common, occurring in association with many diseases and by many different mechanisms, but usually there is no serious underlying cause. 10-25% of the general population suffer from this non-contagious condition.

The two most common causes of oral ulceration are local trauma (e.g. rubbing from a sharp edge on a broken filling) and aphthous stomatitis ("canker sores"), a condition characterized by recurrent formation of oral ulcers for largely unknown reasons. Mouth ulcers often cause pain and discomfort, and may alter the person's choice of food while healing occurs (e.g. avoiding acidic or spicy foods and beverages). They may form individually or multiple ulcers, may appear at the same time. Once formed, the ulcer may be maintained by inflammation and/or secondary infection. Rarely, a mouth ulcer that does not heal for many weeks may be a sign of oral cancer.

Causes

Predisposing factors found may include any of the following:

- Stress: This is one of the most common reasons for development of aphthous ulcer. In students ulcers appear to exacerbate during school or university examination times which are the stressful periods.
- Trauma: Biting of the mucosa and wearing of dental appliances may lead to some ulcers.
- Endocrine factors in some women: Recurrent Aphthous Stomatitis (RAS) is clearly related to the progesterone level fall in the luteal phase of the menstrual cycle, and ulcers may then temporarily regress in pregnancy.
- Allergies to food: Food allergies occasionally underlie RAS; the prevalence of atopy is high.
- Sodium lauryl sulphate (SLS): This is a detergent in some oral healthcare products like toothpastes that may aggravate or produce oral ulceration.

There are basically 3 types of aphthous ulcers:

- Recurrent minor aphthous ulcers, which occur in up to 80% of aphthous ulcer cases. They are usually less than 5mm in diameter and heal within 1-2 weeks.
- Major aphthous ulcers which are large ulcers (more than 10mm) that take weeks or months to heal and do so with scarring.
- Herpetiform ulcers, which are multiple pinpoint ulcers that heal within a month. These are most commonly on the tongue.

The exact cause of aphthous stomatitis is unknown, but there may be a genetic predisposition in some people. Other possible causes include hematinic deficiency (folate, vitamin B, iron), stopping smoking, stress, menstruation, trauma, food allergies or hypersensitivity to sodium lauryl sulphate (found in many brands of toothpaste). Aphthous stomatitis has no clinically detectable signs or symptoms outside the mouth, but the recurrent ulceration can cause much discomfort to sufferers. Treatment is aimed at reducing the pain and swelling and speeding healing, and may involve systemic or topical steroids, analgesics, antiseptics, anti-inflammatories.

These ulcers occur periodically and heal completely between attacks. In the majority of cases, the individual ulcers last about 7-10 days, and ulceration episodes occur 3-6 times per year.

Most appear on the non-keratinizing epithelial surfaces in the mouth although the more severe forms, which are less common, may also involve keratinizing epithelial surfaces. Symptoms range from a minor nuisance to interfering with eating and drinking. The severe forms may be debilitating, even causing weight loss due to malnutrition.

Treatment

The first line therapy for aphthous stomatitis is topical agents rather than systemic medication, with topical corticosteroids being the mainstay treatment. Systemic treatment is usually reserved for severe disease due to the risk of adverse side effects associated with many of these agents. A systematic review found that no single systemic intervention was found to be effective. Good oral hygiene is important to prevent secondary infection of the ulcers.

Occasionally, in females where ulceration is correlated to the menstrual cycle or to an oral contraceptive, progestogen or a change in oral contraceptive may be beneficial. Use of nicotine replacement therapy for people who have developed oral ulceration after stopping smoking has also been reported. Starting smoking again does not usually lessen the condition. Trauma can be reduced by avoiding rough or sharp foodstuffs and by brushing teeth with care. If sodium lauryl sulfate is suspected to be the cause, avoidance of products containing this chemical may be useful and prevent recurrence in some individuals. Similarly patch testing may indicate that food allergy is responsible, and the diet modified accordingly. If investigations reveal deficiency states, correction of the deficiency may result in resolution of the ulceration. For example, there is some evidence that vitamin B12 supplementation may prevent recurrence in some individuals.

There is no cure for aphthous ulcers. Most recurrent minor aphthous ulcers heal within 1-2 weeks without any treatment. The main goal of treatment is to lessen the pain and discomfort, and promote healing.

A systematic review found that no single systemic intervention was found to be effective. Good oral hygiene is important to prevent secondary infection of the ulcers.



General measures

- Protective pastes that form a barrier over the ulcer so that exposure to irritating substances is reduced.
- Local anaesthetics benzocaine and lignocaine to reduce pain.
- Medicated toothpaste without sodium lauryl sulfate.
- Antibacterial mouthwashes to reduce secondary infection.
- Avoidance of foods that trigger or exacerbate the ulcers.
- Dietary supplements of vitamins or minerals, if diet is deficient.
- Reduction in stress.

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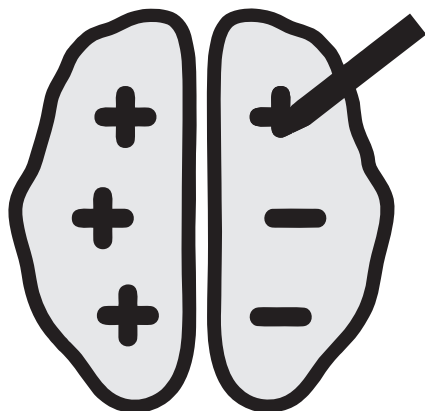
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SECRET OF BEING POSITIVE IN LIFE



Positive thinking is a discipline that trains the human mind to change a perceived reality by repeatedly making positive mental statements. It is more like an art, science, skill, attitude, passion and ability to be on the positive vibe of brain signals. A person practices the profound skill of Positive Thinking when they derive a positive sense of well being, optimism, belonging, meaning and/or purpose from being part of and contributing back to something larger and more permanent than themselves. Positive thinking is a process of choosing positive emotions from stimuli in the environment or situations and applying them to perceptions and beliefs. The objective is to create an outlook that translates into a new or better chosen reality.

Positive Mental Attitudes

A positive mental strength is the belief that one can increase achievement through optimistic thought processes. A positive attitude comes from observational learning in the environment and is partially achieved when a vision of good natured change in the mind is applied toward people, circumstances, events, or behaviors. Since it is difficult to quantify the effects of a positive mental gain, it can be considered a philosophy and a way to approach practical life.

The Secret to Positive Thinking

Creating reality by how one chooses to think about life, health, relationships, and finances was the subject of the hit movie "The Secret." Current self-help gurus discussed the Law of Attraction and other principles congruent with Optimism. Building a positive mindset that attracts better circumstances involves:

- (1) landing to a clear vision of what is desired,
- (2) an expression/attitude of thankfulness,
- (3) positive emotions associated with the desire,
and
- (4) transforming that desire to a greater power.

The experts in “The Secret” emphasized an individual's responsibility to create and institute positive mental programming and present moment awareness to release emotional drivers that cloud a person's ability to have a productive life. Regret, shame, and blame and a negative outlook on life focused on past circumstances can also be fundamental cause of physical disease in adults. Similarly, physical healing can be obtained creating a self-made vision. Demonstrating a healthy life with positive outcomes involves setting an intention, consciously creating a mental attitude of positive expectation, and conditioning the mind to accept navigate through grief, loss, anger with ease or choosing to eliminate those mental attitudes altogether.

Tool of Affirmations

The technique of writing and repeating affirmations has been said to institute a positive mental attitude resulting in measurable change. An affirmation is a positive, present day statement that assumes what one declares is real and present. The more an affirmation is practiced, the mind has a greater the level of acceptance of that thought. Positive thinking experts, such as Louise Hay, Michael Beckwith, James Arthur Ray, Catherine Ponder, Norman Vincent Peale, Napoleon Hill, and John Randolph Price advocated the use of affirmations to both reprogram the brain by repetition and maintaining present moment centeredness. The desired result is to manifest new and positive circumstances. Since an affirmation declares one's state of mind and expectation, it acknowledges to the mind and body a present-day reality.

Affirmations are a spiritual idea, and non-quantitative. They are based upon “as within, so without, as above so below” which is an idea, or universal presented in many religious works, including the Bible. If thought attracts, or resonates, with like energies, than any individual practicing positive thinking can eventually see results externally in the form of a better job, more loving relationships, or even satisfying experiences.

TOOL KIT TO IMPROVE YOUR ATTITUDE

01

Self-Coaching with experiences

Affirmations repeated several times each day, every day, serve to reprogram your subconscious with positive thinking. An affirmation is made up of words charged with power, conviction and faith. You send a positive response to your subconscious, which accepts whatever you tell it. When done properly, this triggers positive feelings that, in turn, drive action.

02

Self-Motivation through Discovering Your Motives

Discover what motivates you-what incites you to take action to change your life. Basic motives include love, self-preservation, anger, financial gain and fear. Self-motivation requires enthusiasm, a positive outlook, a positive physiology (walk faster, smile, sit up), and a belief in yourself and your God-given potential.

03

The Power of Visualization

Studies of the psychology of peak performance have found that most great athletes, surgeons, engineers and artists use affirmations and visualizations either consciously or subconsciously to enhance and focus their skills.

04

Attitude Talk for Positive Internal Dialogue

Attitude talk is a way to override your past negative programming by erasing or replacing it with a conscious, positive internal voice that helps you face new directions. Your internal conversation-that little voice you listen to all day long-acts like a seed in that it programs your brain and affects your behavior. Take a closer look at what you are saying to yourself.

05

The Power of “WOW”

Once released to the universe, our words cannot be taken back. Learn the concept of WOW-watch our words. What we speak reflects what is already in our hearts based upon all the things we have come to believe about ourselves. If we find ourselves speaking judgmental and disparaging things about our circumstances or those around us, we know the condition of our hearts needs to change. You can create a direct path to success by what you say.

06

The Power in a Positive Greeting

When people ask me how I am doing, I say, “Super-fantastic.” Most people enjoy working and living with others who try to live life for what it is - “a beautiful gift.”

07

Enthusiasm: Vital Tool

Enthusiasm is to attitude what breathing is to life. Enthusiasm enables you to apply your gifts more effectively. It is the burning desire that communicates commitment, determination and spirit. Enthusiasm means putting yourself in motion. It is an internal spirit that speaks through your actions from your commitment and your belief in what you are doing. It is one of the most empowering and attractive characteristics you can have.

08

Connecting to Your Spiritual Empowerment

The ultimate level of human need extends into the spiritual realm. Just as we feed our bodies in response to our primary need to survive physically, we need to feed our spirit because we are spiritual beings. Many people find powerful and positive motivation in their faith. I happen to be one of them.

09

Lighten Up Your Life with Humor

Humor is a powerful Mind Builder. The more humor and laughter in your life, the less stress you will have, which means more positive energy to help you put your attitude into action. There are also health benefits to lightening up.

10

Exercising Will Help Keep You Motivated


One of the best ways to move to a more positive and motivated frame of mind is to exercise. A regular routine exercise can provide relatively quick positive feedback in the form of weight loss, muscle development and a sense of doing something positive for yourself.

Health Benefits of Positive Thinking

The impact and benefits of positive thinking and attitude are too good to ignore and more worthy to be practiced. Behavioral Neuroscience has some excellent research that clearly shows the resulting benefits of how a positive attitude can transform your life:

- Increased life span
- Lower rates of depression
- Lower levels of distress
- Greater resistance to the common cold
- Better psychological and physical well-being
- Reduced risk of death from cardiovascular disease
- Better coping skills during hardships and times of stress

To be positive is a skill, an art and a spirit/energy to boost an action in an unfavourable circumstances. This attitude imparts self motivation and guides towards personal growth.



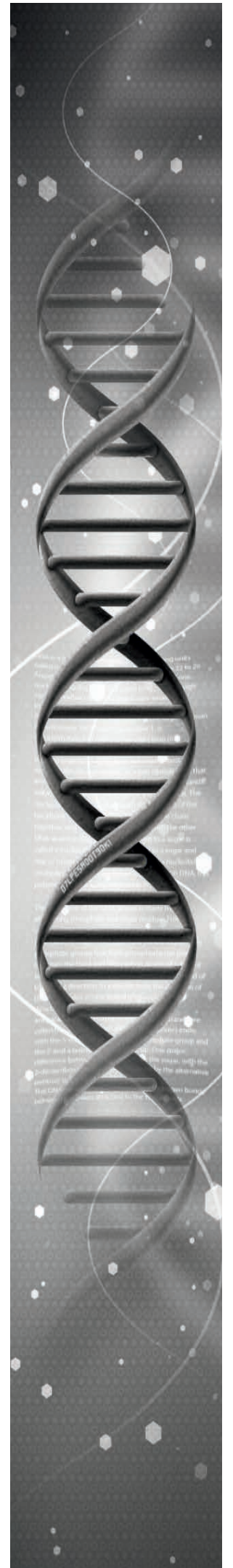
Brain Power Enhancement in Children

A child's brain undergoes an amazing period of development from birth to three—producing 700 new neural connections every second. The development of the brain is influenced by many factors, including a child's relationships, experiences and environment.

Brains are built over time, from the bottom up. The basic architecture of the brain is constructed through an ongoing process that begins before birth and continues into adulthood. Simpler neural connections and skills form first, followed by more complex circuits and skills. In the first few years of life, 700 to 1,000 new neural connections form every second. After this period of rapid proliferation, connections are reduced through a process called pruning, which allows brain circuits to become more efficient.

Brain architecture is comprised of billions of connections between individual neurons across different areas of the brain. These connections enable lightning-fast communication among neurons that specialize in different kinds of brain functions. The early years are the most active period for establishing neural connections, but new connections can form throughout life and unused connections continue to be pruned. Because this dynamic process never stops, it is impossible to determine what percentage of brain development occurs by a certain age. More importantly, the connections that form early provide either a strong or weak foundation for the connections that form later.

The interactions of genes and experience shape the developing brain. Although genes provide the blueprint for



the formation of brain circuits, these circuits are reinforced by repeated use. A major ingredient in this developmental process is the serve and return interaction between children and their parents and other caregivers in the family or community. In the absence of responsive care-giving-or if responses are unreliable or inappropriate-the brain's architecture does not form as expected, which can lead to disparities in learning and behavior. Ultimately, genes and experiences work together to construct brain architecture.

Brain Development

A child's brain develops in response to both genes and the environment. It is the interaction between the genes and environment that really shape the developing brain; a dance between biology and experience. While genes provide the initial map for development, it is the experiences and relationships babies and children have every day that literally shapes their brains. Families have an extremely important ongoing influence on children's development. The community and service environments in



which children and families interact also play a key role in supporting optimal development. Genes provide the initial map for brain development, beginning with the basic connections in the brain from birth. Significant 'wiring' occurs during the first years of a child's life and this effectively programs child development. At three, a child has around 1000 trillion brain connections or synapses, which in later development are selectively pruned. When adolescence is reached, brain synapses will number around 500 trillion, and this number remains relatively stable into adulthood. The pruning of brain synapses indicates the tremendous influence experience and environment play in shaping a young brain. It is the experiences and relationships that infants and young children have that continuously develop their brains and build the neural circuits that will be the foundation for later development. New research in an area called epigenetics; even suggest that a person's genes can potentially develop in response to some environmental factors.

Stress and brain development

Stress is a feature of the normal development of positive and adaptive coping. Everyday stress responses of a moderate and brief nature can result in mild increases of hormone levels (cortisol) and short-lived increases in heart rate. These kinds of 'tolerable' stress responses help in the development of adaptive coping when buffered by stable and supportive relationships and are an important part of healthy development. Excessive or long-lasting stress is known as 'toxic stress' and can have a negative impact on brain development. Examples of toxic stress include: physical or sexual abuse, neglect or lack of affection, parental mental illness, family violence, poverty, and lack of adequate housing. Ongoing stress factors that are not buffered by caring and positive relationships disrupt brain architecture leading to a lower threshold of activation of the stress management system, which in turn can lead to lifelong

problems in learning, behaviour, and both physical and mental health. Although manageable levels of stress are normal and growth-promoting, toxic stress in the early years can damage brain development. It is in situations where ongoing stress is likely, that intervening as early as possible is critical to achieving the best possible outcomes for the child. Caring and positive relationships are essential to ensure stress levels promote resilience for babies and children.

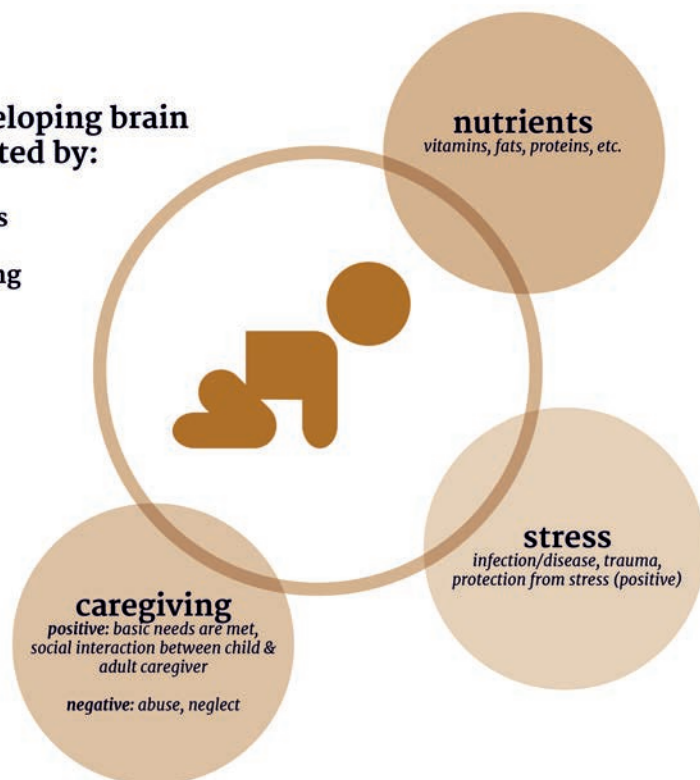
Diet and Nutrition

Diet and nutrition is also an important factor that can influence brain development of a child. Brain development starts in the womb itself. Hence, women must adopt good eating habits immediately before and after they conceive. Abstinence from alcohol and smoking is a must since these can directly impact the child's brain development in the womb.

After birth, breastfeeding is the best food for a baby. It contains fatty acids like DHA (Docosahexaenoic Acid) and AHA or AA (Arachidonic Acid) which are believed to be good for brain development. As the child moves beyond breastfeeding stage, it is important to give her a well balanced, healthy diet. In addition to breast

The developing brain is impacted by:

- nutrients
- stress
- caregiving



milk in the first two years of a child's life it is important for the child to get half of her daily calorie requirement from good fats, sources of which include yoghurt, cheese, ghee and whole milk.

A child's brain development and intelligence is greatly impacted by their early experiences in life. Parents play a key role in raising a well developed child. To nurture the child all that parents need to do is to adopt a loving and caring attitude. It would suffice if parents act naturally and do not overly stress the child or themselves with a view to improve a child's level of intelligence.

How to build a healthy brain?

Here we will look at how to grow healthy brains vital for a smart and happy kid.

Follow these **Four Golden Rules**.

- Balanced blood sugar
- Ensure essential fats
- Vitamins and minerals
- Avoid anti-nutrients and eliminate allergies

Balanced Blood Sugar

Why is balance so important?

Sugar is your brain's super fuel. But you have to make sure your child is getting the **RIGHT TYPES** and **RIGHT AMOUNT** at the **RIGHT TIME**.

Too much 'fast' sugar means a blood sugar high and **hyperactivity**. The excess sugar in the blood gets dumped into storage as abdominal fat. Eating little and often helps keep your child's energy and concentration even.

Too much sugar and your child may be hyperactive and find it **hard to concentrate**.

Too little and they may feel **tired, irritable** and find it **hard to concentrate**.

60% of a dried brain weight is fat; it is no wonder deficiencies in specific kinds of fats can have huge repercussions on intelligence and behaviour.

Ensure Essential Fats

If your child is having 3 portions of oily fish and a daily portion of seeds they should be getting a good level to help their brains develop and boost IQ.

How do I give my child all the essential fats they need?

Eat plenty of seeds and nuts. You can grind and sprinkle them on cereal, soups and salads.

Vitamins and Minerals

Why does your child need vitamins and minerals?

Vitamins and minerals are the intelligent nutrients that keep the brain in tune. They are key to building and rebuilding the brain. They mainly come from fruit, vegetables and wholefoods and can be supplemented for optimum brain performance. Studies shows that giving children supplements could improve IQ.

How do I ensure that my child is having enough?

Make sure that they eat at least **5 portions** of fruit and vegetables a day. Choose **wholefoods**, not refined foods. Give them a chewable multi-vitamin and mineral supplements.

Avoid anti-nutrients and eliminate food allergens

Which foods rob your child's brain of nutrients?

Anti-nutrients are substances that knock out essential brain-friendly nutrients. Some children develop an allergy or intolerance against particular foods.

How do I avoid anti-nutrients?

Avoid or minimise:

Refined sugar: These are essentially carbohydrates robbed of essential nutrients.

Damaged fats: These come from fried foods and hydrogenated fats.

Chemical food additives: Especially colourings.

Food intolerances can be detected by a pin prick blood test or speak to your Nutritionist/Pediatrician. Alternatively you could try

eliminating a food group you think your child is allergic to, and reassessing their mood and behaviour weekly.

Parents play an important role in the development of child's brain.

There is no single magic trick which will make your child a genius. All parents desire that their child should become super intelligent and excel in just about everything. Sadly, it is this over expectation which can adversely affect a child's brain development. Plain common sense and expecting age appropriate performance from a child is all that is required to raise a well developed intelligent Child. Once this happens the child will automatically grow to be an intelligent and confident individual.

Unconditional Love

There is no substitute for love, care and comfort which only parents can give a child. Grandparents and extended family members can also play an active role in this regard. Parents must respond positively and quickly to feelings of a child. They must not overreact but at the same time provide the required support in a timely manner. A child understands the importance of social interactions by observing the giving and caring attitude of his or her parents and grandparents.

Abusing a child physically or mentally can be detrimental to the overall development of a child in the long run. Hence, parents must learn

to be understanding and handle child challenges in a mature manner without stressing the child in any way.

Communicate Skills

The language related skills of a child depends to a very large extent on how people around them talk to them. From a very early stage itself parents must make it a point to talk to their child constantly. It does not matter if your child blabbers in baby language. It is important to respond to the child and have regular conversation irrespective of whether the child understands what the parents have to say or not.

Exposure to Outside World

A child must be exposed to varieties of experiences. This can be any activity like reading a book together, painting a picture, dancing to music, zoo visit, going to a park, a bus or a train ride. Parents must be prepared to keep repeating these experiences at regular intervals. The more opportunities a child gets to see different things and meet people, better are the chances for their developing good intellect and social skills.





Dr. Chandy Koruthu
Dental Practitioner
Geraldton, Western Australia

MY DENTCARE EXPERIENCE

Hi there,

My name is Dr. Chandy Koruthu and I run a general dental practice in Western Australia. I have been using DentCare products for the past two years and although there were some teething problems in terms of logistics initially due to different time zones and distance, I have been impressed on how we have been able to overcome these hurdles together with patience and understanding. DentCare has also shown itself to be one of the leading dental laboratories in Asia by consistently producing high quality prosthesis and crown/bridgework for my patients. I have personally been to the lab and it never ceases to amaze me the level of sophistication and dedication the staff invests in producing such quality work. Lastly, I would like to offer my sincere gratitude for the work the lab has done so far and hope to continue this amazing partnership in years to come.

Importance of Personal Hygiene

One of the most effective ways we have to protect ourselves and others from illness is good personal hygiene. This means washing your hands, especially, but also your body. It means being careful not to cough or sneeze on others, cleaning things that you touch if you are unwell, putting items such as tissues (that may have germs) into a bin, and using protection (like gloves or condoms) when you might be at risk of catching an infection.

Personal hygiene, such as bathing, is very much dependent on the culture in which you live. In some cultures, it is expected that you will wash your body at least every day and use deodorants to stop body smells. Other cultures have different expectations.

Body odour

Body smells are caused by a number of factors working in combination, including:

- Chemicals in sweat, in-

cluding pheromones, which are made by the body and sexually attract (or repel) other people.

- Wastes excreted through the skin, such as metabolised alcohol.
- The actions of bacteria that live on the skin and feed on dead skin cells and sweat.
- Unwashed clothes, such as underwear and socks.

Hand washing

Most infections, especially colds and gastroenteritis, are caught when we put our unwashed hands, which have germs on them, to our mouth. Some infections are caught when other people's dirty hands touch the food we eat. Hands and wrists should be washed with clean soap and water, using a brush if your fingernails are dirty. Dry your hands with something clean, such as paper towels or hot air dryers.





You should always wash your hands:

- After using the toilet
- Before making or eating food
- After handling dogs or other animals
- If you have been around someone who is coughing or has a cold.

Personal hygiene for women

The vagina is able to clean itself no special care is needed, other than washing the external genitals. Do not put anything like douches into the vagina, as the delicate skin can be damaged. Here are some personal hygiene suggestions for women:

- **Menstruation** - wash your body, including your genital area, in the same way as you always do. Change tampons and sanitary napkins regularly, at least four to five times a day. Always wash your hands before and after handling a tampon or pad.
- **Cystitis** - is an infection of the bladder. This is a common condition for sexually active young women. Urinating after sexual intercourse can help to flush out any bacteria that may be in the urethra and bladder.
- **Thrush** - some soaps and detergents can irritate the skin of the vagina, and make thrush infections more likely. Some people find that they often get thrush when they use antibiotics. Use mild soap and unperfumed toilet paper. Avoid tight, synthetic underwear. Try cotton underwear, and change regularly. There is medical treatment for thrush, so talk to your doctor or pharmacist.



Personal hygiene for men

A build-up of secretions called smegma can form under the foreskin of uncircumcised men. If you are uncircumcised, gently pull back the foreskin when you have a shower and clean with water. You can use soap if you like, but make sure you rinse it off well.

Bad breath

Good dental hygiene includes regular brushing and flossing. Bad breath can be caused by diseases of the teeth, gums and mouth, such as infections. Most people have bad breath first thing in the morning because saliva is not made while you are asleep. Some foods that can cause bad breath include garlic and onion. Mouth washes, mouth sprays and flavoured chewing gum can make your breath smell better for a while, but

if you have a health problem in your mouth, you need to see your dentist.

Travelling hygiene

When travelling overseas, take special care if you are not sure whether the water is safe.

Suggestions include:

- Drink only bottled water.
- Do not use tap water to clean your teeth.
- When you wash your hands, make sure they are totally dry before you touch any food.
- Do not wash fruit or vegetables in unsafe water.
- If you have no other water source, make sure the water is boiled before you drink it by holding it at a rolling boil for one minute.
- Make sure any dishes, cups or other utensils are totally dry after they are washed.

To at risk youth it is important to understand that many of our youth have not had a parent, or caring adult to talk with them regarding good personal hygiene. As adults we know that poor hygiene can

put youth at a disadvantage for employment and peer acceptance. We have an opportunity to teach a positive and lasting lesson about this topic. On the fact that this might be a sensitive and uncomfortable subject, nevertheless it is welcoming to have outlined a few ways to approach this situation.

1) The first step is to be empathetic. Because puberty is an incredibly confusing time and your youth might have many questions and not know how to ask them. It is important that you give them a safe space to ask these types of questions.

2) Be relatable. We all went through puberty and we understand how the changes in our bodies affected us as teens. Try to begin the conversation with an experience you had, or a lesson that you learned while going through puberty.

3) Reassure your youth that what he or she is experiencing is normal, and that there are steps he/she can take to avoid unwanted smells, acne, or greasy hair.

Personal hygiene is an inevitable factor for individual well being and is a social concern making us live and let others live.

Personal Hygiene is Precious

CLEAN HANDS ARE HEALING HANDS





Art Of DENTAL SELLING

Hello Friends! This article is going to be very interesting, informative and life changing for sure. I promise that I am going to give you some life changing information for your successful Dental Practice.



Major (Dr.) Pravin Prathip J.
Dental Practitioner and Motivational Speaker
Chennai, Tamil Nadu, India

I have trained and reached more than 1000 dentists personally through my meetings in colleges and dental associations. I have addressed dental practice problems and provided simple, yet powerful solutions on the following issues.

1. How to get new patients?
2. How to convert them to paying customers?
3. How to make them comeback again and again?
4. How to get referrals from them?

Today in this dental practice management article I would like to provide you some solutions regarding the conversion part of the patients.

My journey in selling dates back a long way when my father use to tell me to sell some screen printed stickers which he himself manufactured during the 1990's. Being born in a business family my father taught me lots of tricks and tips. He always instructed me that in the process of selling one must learn and understand that emotions play a long role as selling involves mixed emotions of fear and insecurity of the decision making.

Also, during my own clinical practice, I was failing initially when I started my practice. I went to libraries, spent nearly 10,000 hours of my time, went to various programmes and tried to find out solutions for my problem.

I started getting lots of good and measurable results after I started using the following framework which helped me to convert almost 90% of my patients and make them comeback to me again and again. My income also increased by 50%.

So today I am going to share with you those framework and little secrets as a token of my gratitude to all of you, my dear fellow dental surgeons.

During a regular consultation in your office patients have certain fears

1. Fear of being taken advantage off
2. Fear of treatment failure
3. Fear of money
4. Complexity of the solutions

Doctors have certain fears

1. Fear to convert the patient
2. Fear of failure
3. Fear of rejection
4. Fear of procedures

So during consultations especially in the first visit

Doctor Fear + Patient Fear = Fear² = No Sale

So how to handle this situation?

Patient Psychology

- They are skeptical
- They are worried about the numbers (price, number of visits etc.)

Doctors

Worried about telling price - Skeptical

Worried about convincing - Fearful

Getting the money - Doubtful

Solutions/ Rules

1. Fear goes away only by positive emotions like smile, small caring touch and being thankful.
2. Appreciate the patient when they enter the clinic.

Towards the Patients having dental pain: Show empathy and say you will do your level best to solve their problem.

Regular Patients: Say that you always are cautious about their dental health. Their problems are detected early and avoided thereby saving 80% of money.

3. Always ask their permission to have a checkup.

Example: can I check your mouth now?- permissions elevate their ego there by fear comes down.

3. Be very polite and nice, smile at them.

4. Ask them what they expect from us today? It's an open ended question. Patient will say some story or facts, listen and please try to understand patient's hot buttons.

Hot buttons are those clues which the patient will communicate during the conversation, whether he is bothered about money, time, pain or all of them.

5. Ask who are their previous dentists?
6. Ask why did they choose for you?
7. Ask what do they expect from you and your services?

Why?-The most powerful tool

1. Most doctors straight away jump into problem by explaining the features of the treatment and telling the price. (Numbers stimulate more of the already fearful skeptical left brain thereby patient fears are added up.)

2. There is no emotional appeal in such consultation where the price has been quoted prematurely before the patient developed a trust. Price has already excited their left brain but we need right brain activity to trust and to take a buying decision.

3. So invariably patient will listen to the price and then say no or say I will come tomorrow and he will never come once he goes out. But if you appeal emotionally using the above solutions, they activate their right brain (Trust Brain) and it will help them to take a buying decision.

4. So price quoted prematurely will steal the SALE.

5. Also telling is not selling, features tell and only benefits sell.

6. Only asking effective questions and listening to patients' answer will cause selling (law of cause and effect).

7. Listening builds Trust.

8. If patients like you they will listen to you, if they trust you they will buy from you.

Conclusion

Losing a patient or customer is predominantly a leadership issue. Why because leadership is actually influence. When we don't work on a frame work we tend to be random. Random work produces random results. Whereas a true leader will take care of the patients' needs and then provide solutions which will influence them to buy. Normal dentists provide procedures. Great dentists offer real solutions. Also in our colleges due to lack of business, sales and marketing curriculum, we are facing bad results in our practice again justified by the law of cause and effect. So I request all of you should read, understand and undergo more training in the Art of Dental Selling. Otherwise we will lose our patients to our healthy competitor in this severe competitive world.

JAI HIND

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magazine@dentcaredental.com
Editor in Chief, The DentCare
DentCare Dental Lab Pvt. Ltd.
NAS Road, 130 Junction
Muvattupuzha, Ernakulam
Kerala, India 686 661

Subscription & Advertising Inquiries

thedentcare@dentcaredental.com
Subscription, The DentCare
DentCare Dental Lab Pvt. Ltd.
NAS Road, 130 Junction
Muvattupuzha, Ernakulam
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PRODUCT PROFILE

DENTCARE ZIRCONIA

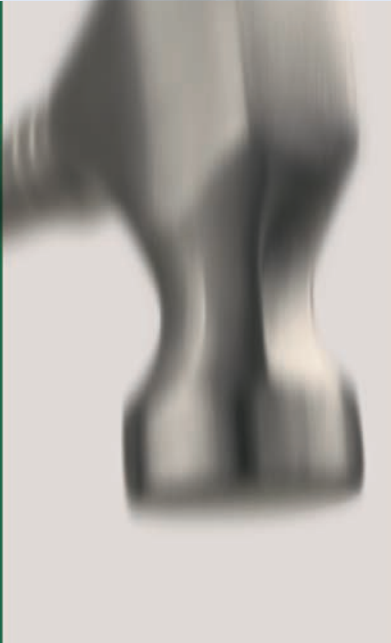
DENTCARE, a leader in the field of dental prostheses manufacturing for multiple decades has introduced an epochal masterpiece – DentCare Zirconia – a biomedical grade material from Germany used for the fabrication of Crowns, Bridges, Customized Implant Abutments, Inlays and Onlays and Primary Telescopes. State-of-the-art technology from Germany, coupled with our highly skilled technicians make DentCare Zirconia Premium the optimum solution for perfect dental prostheses – aesthetic and functional fulfilment guaranteed.

DentCare Zirconia is an innovative all-ceramic prosthesis made using the latest CAD/CAM technology. Unlike PFM (Porcelain Fused to Metal), or normal opaque zirconia restorations, the tooth-coloured substructure makes DentCare Zirconia highly aesthetic and natural. Substructures are available in fluorescent-effect shades, 7-effect shades and more than 40 vivid, warm and natural shades (all VITA shades are available). As a novum all our DentCare Zirconia Full Contour solutions are indicated for Bruxism.

DentCare Zirconia: “One Product – Diverse Options”

DentCare Zirconia Variants

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 DentCare Zirconia Premium
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 DentCare Zirconia Basic Full Contour
 DentCare Zirconia Translucent
 DentCare Zirconia Monolithic



Flexural Strength

1550MPa
 1550MPa
 1450MPa
 1450MPa
 1550MPa
 1550MPa
 1550MPa
 1450MPa
 1450MPa
 1450MPa
 1200MPa

Warranty Period

Limited 15 years
 Limited 15 years
 Limited 12 years
 Limited 10 years
 Limited 15 years
 Limited 15 years
 Limited 15 years
 Limited 12 years
 Limited 10 years
 Limited 10 years
 Limited 5 years

DENTCARE ZIRCONIA PREMIUM PLUS

Benefits

- Highly aesthetic – Super high translucent
- Available in more than 40 shades
- Full contour crowns are chip resistant and “Bruxism” approved
- Limited 15 year warranty
- Highly bio-compatible
- High flexural strength of 1550 MPa ensures long-term success of restorations
- The tooth-coloured translucent substructure ensures that the natural tooth shade comes right from the internal framework level, unlike PFM or other normal zirconia systems with opaque frames
- Designing and manufacturing using CAD/CAM assures outstanding marginal fit

Indications

- Single crowns
- Bridges with up to 16 units
- Implant prostheses
- In bridges with up to 8 units, 4 and 2 continuous pontics may be given in anterior and posterior regions respectively
- In bridges with more than 8 units, 2 continuous pontics may be given in anterior as well as posterior regions
- In bridges with at least 2 continuous abutments, 1 cantilever is possible. (However, distal cantilever not advisable; avoid cantilever in canine and molar regions.)
- Primary telescopes
- Custom Zirconia abutments for a wide variety of implant systems
- Inlay and Onlay, Inlay Bridges
- Full contour option can offer up to 5 units in a bridge
- Full contour option can be used in case of Bruxism

DENTCARE ZIRCONIA PREMIUM

Benefits

- Natural translucency and good aesthetics
- High strength – flexural strength of 1550MPa
- Precision CAD/CAM system for outstanding marginal fit
- Full contour crowns are chip resistant and “Bruxism” approved
- Limited 15 year warranty



Indications

- Single crowns
- Bridges with up to 16 units
- Implant prostheses
- In bridges with up to 8 units, 4 and 2 continuous pontics may be given in anterior and posterior regions respectively
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- Custom Zirconia abutments for a wide variety of implant systems
- Inlay and Onlay, Inlay Bridges
- Full contour option can offer up to 5 units in a bridge
- Full contour option can be used in case of Bruxism

DENTCARE ZIRCONIA CLASSIC



Benefits

- High strength – flexural strength of 1450MPa
- Full contour crowns are chip resistant and “Bruxism” approved
- Limited 12 year warranty

Indications

- Single crowns
- Bridges with up to 16 units
- Implant prostheses
- In bridges with up to 8 units, 4 and 2 continuous pontics may be given in anterior and posterior regions respectively
- In bridges with more than 8 units, 2 continuous pontics may be given in anterior as well as posterior regions
- Primary telescopes
- Custom Zirconia abutments for a wide variety of implant systems
- Inlay and Onlay, Inlay Bridges
- Full contour option can be used in case of Bruxism

DENTCARE ZIRCONIA BASIC

Benefits

- High strength of 1450MPa
- Full contour crowns are chip resistant
- Limited 10 year warranty

Indications

- Crowns and bridges up to 5 units (3 and 2 continuous pontics may be given in anterior and posterior regions respectively)
- In bridges with at least 2 continuous abutments, 1 cantilever is possible. (However, distal cantilever not advisable; avoid cantilever in canine and molar regions.)

BRUXCARE

BruxCare crowns are monolithic solid medical grade zirconia restoration with no ceramic layering. They are designed specifically for the posterior teeth with more emphasis on strength making it the ideal restoration for bruxers, implant restorations, and areas with limited occlusal space.

Benefits

- Excellent translucency and esthetics
- Biocompatible – No allergic tissue reaction
- Glazed to a smooth surface to reduce plaque accumulation
- Low wear on opposing dentition
- Extraordinary strength – flexural strength of 1550MPa
- Monolithic material makes the restoration completely chip-proof
- Precision CAD/CAM system for outstanding marginal fit
- No ceramic layering – staining technique only
- Limited 15 year warranty

Indications

- Crowns, Bridges, Implants, Inlays and Onlays
- Ideal for patients with Bruxism
- Up to 5 units as a single restoration
- An esthetic alternative to PFM
- Ideal for bruxers who have broken natural teeth or previous PFM restorations
- Suited for cases with only less interocclusal space

DENTCARE ZIRCONIA TRANSLUCENT

Benefits

- Great translucency with good strength
- High strength – flexural strength of 1450MPa
- Precision CAD/CAM system for outstanding marginal fit
- Full contour option can be used both in anterior and posterior region
- Limited 10 year warranty

Indications

- Crowns and bridges up to 3 units
- In bridges with at least 2 continuous abutments, 1 cantilever is possible. (However, distal cantilever not advisable; avoid cantilever in canine and molar regions.)

DENTCARE ZIRCONIA MONOLITHIC

DentCare Zirconia Monolithic crowns are fabricated in full contour out of a single biomedical grade zirconia material. It eliminates the layer of porcelain over the crown thereby making the crown much stronger. It is a great choice for posterior teeth as the restoration is so resistant to fracture and strong.

Benefits

- Suitable for patients with Bruxism
- High strength and hence may be used in posterior regions
- No ceramic layering – staining technique only

Indications

- Crowns and bridges up to 3-units
- Ideal for patients with bruxism
- Suitable for cases with only little interocclusal space

DentCare Zirconia - a cornerstone in the field of prosthetic dentistry with an unmatched blend of artistry and technology.

Today, medical grade DentCare Zirconia is the preferred option over other metal free restorative materials because of its remarkable strength, aesthetics and biocompatibility. Your preferences and desires are always an important element of consideration. Always choose quality products at an affordable price from DentCare.

The ultimate choice of technique and type of restoration should be discussed with the one who knows the best dental solution for you – **your Dentist.**

Don't just settle for any dental restoration... **Go for DentCare Zirconia!!**

CALENDAR

JANUARY - FEBRUARY

02 - 03 February ●
Abu Dhabi, UAE

125th International Conference on Recent
Advances in Medical and Health Sciences
Radisson Blu
☎ + 971 565 861 709
☎ + 917 077 656 338
☐ www.academicworld.org

07 - 09 February ●
Dubai, UAE

21st UAE International Dental Conference
and Arab Dental Exhibition
Dubai International Convention and
Exhibition Centre
☎ + 971 436 247 17
☐ www.aeedc.com

12 - 14 February ●
Kuwait

Kuwait Dental Administration Conference and Exhibition
Jumeirah Messilah Beach Hotel
☎ + 965 226 185 35
☎ + 965 226 185 36
☐ www.kdac-kw.com

25 - 29 January ●
Boston, USA

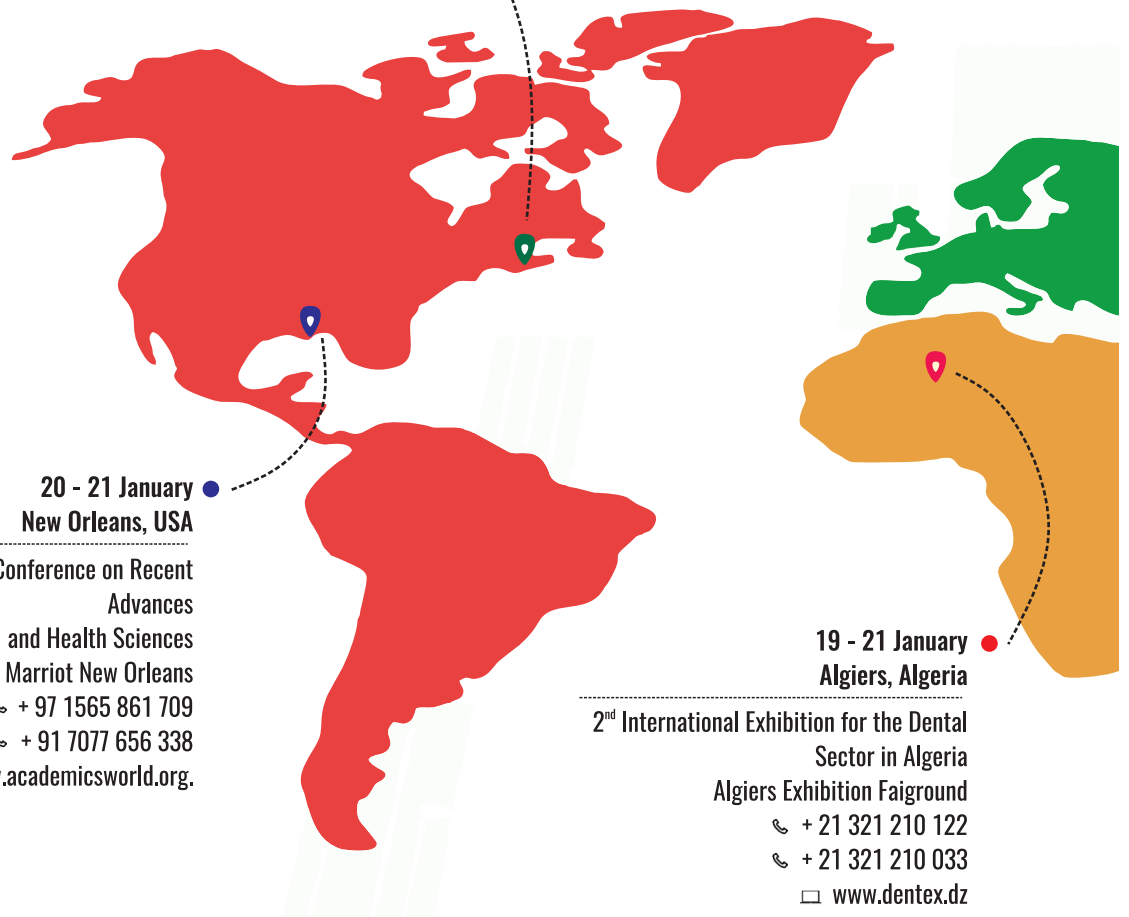
Annual Yankee Dental Congress
Boston Convention and Exhibition Center
☎ + 877 515 9071
☎ + 150 848 00002
☐ www.ydc2017.org

20 - 21 January ●
New Orleans, USA

117th International Conference on Recent
Advances
in Medical and Health Sciences
JW Marriot New Orleans
☎ + 97 1565 861 709
☎ + 91 7077 656 338
☐ www.academicworld.org

19 - 21 January ●
Algiers, Algeria

2nd International Exhibition for the Dental
Sector in Algeria
Algiers Exhibition Faiground
☎ + 21 321 210 122
☎ + 21 321 210 033
☐ www.dentex.dz



● 17 - 19 February
Navi Mumbai, India

Indian Dental Conference
CIDCO Exhibition Centre
☎ + 91020 2544 9153
☎ + 91020 6520 3347
☐ www.ldc2017.org.in

● 13 - 14 January
New Delhi, India

6th International Conference on "Medical,
Medicine and Health Sciences"
Hans Hotel
☎ + 6 03 6735 6566
☐ www.academicfora.com

● 20 - 22 January
Kottayam, India

49th Kerala State Dental Conference
Hotel Windsor Castle
☎ + 702 514 8111
☎ + 702 514 8000
☐ www.49ksdc.com



@ Stalls: 53, 54, 55, 56, 57 & 58

● 02 - 05 February
West Bengal, India

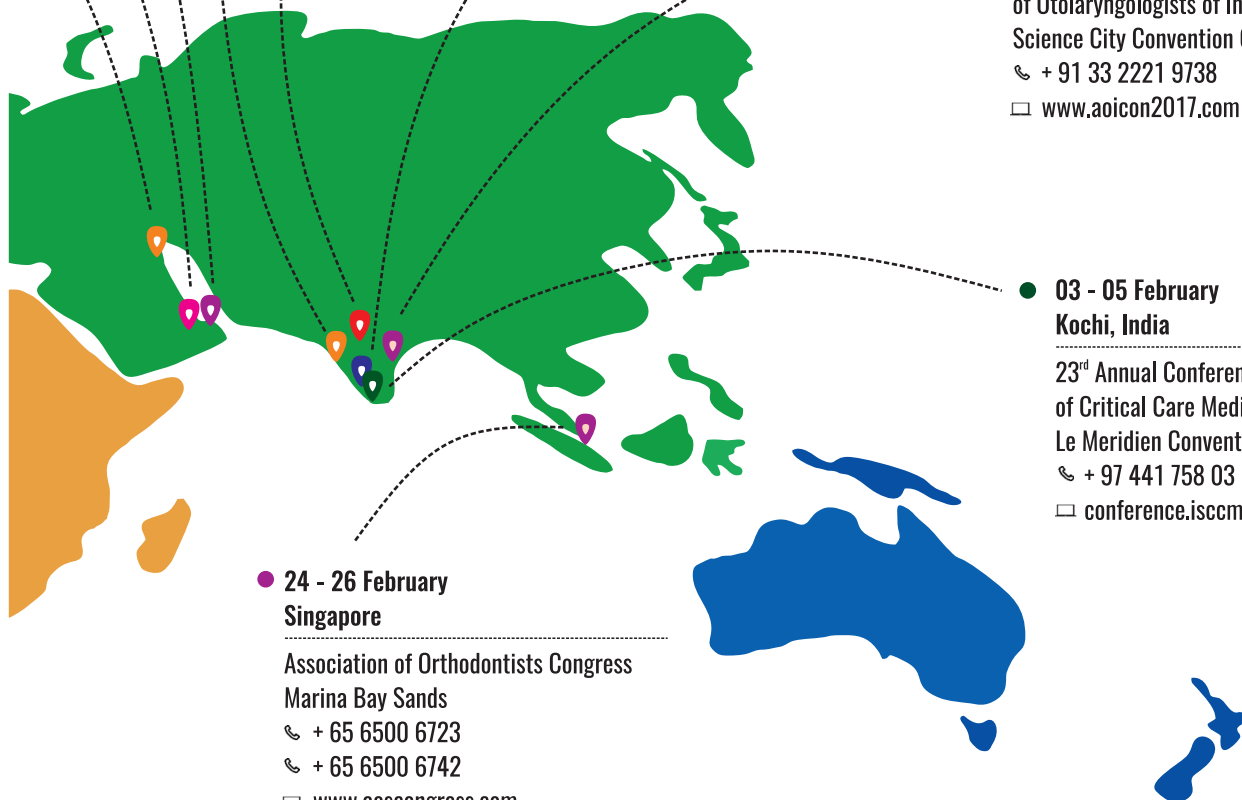
69th Annual Conference of the Association
of Otolaryngologists of India
Science City Convention Centre
☎ + 91 33 2221 9738
☐ www.aoicon2017.com

● 03 - 05 February
Kochi, India

23rd Annual Conference of Indian Society
of Critical Care Medicine
Le Meridien Convention Centre
☎ + 97 441 758 03
☐ conference.isccm.org

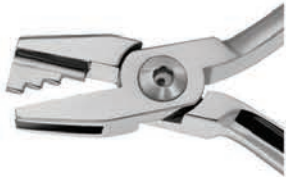
● 24 - 26 February
Singapore

Association of Orthodontists Congress
Marina Bay Sands
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☎ + 65 6500 6742
☐ www.aoscongress.com





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