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35th Annual World Dentistry Summit

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8th International Conference on Prosthodontics & Orthodontics

July 10th, 2023 | Webinar

Strategically preventing and managing team burnout Abstract

According to the World Health Organization, burnout syndrome is a result of chronic workplace stress that has not been successfully managed. Healthcare providers suffer from burnout at an alarming rate. Healthcare providers who suffer from burnout may deliver less than satisfactory patient care due to their overwhelming stress level.

An organization's culture is key to the wellbeing of the team as well as the clients that are serviced. A positive work culture supports and encourages workers, which in turn protects their overall wellbeing. Every team member wants to feel heard, valued, and appreciated. Workers are now looking for organizations that will align with these needs. The whole team is responsible for the culture of an **organization**. The decision makers are however ultimately responsible for making sure all are actively participating in making the work cultures a positive one.

This interactive discussion will provide an overview on how to identify **burnout** and successfully implement strategies to prevent, manage, and overcome the damaging effects within yourself and your team!.

Biography

Kari Carter-Cherelus RDH, DA, has been passionately advocating for others for more than 24 years. As a clinician, speaker, author, consultant, writer, and a coach, she helps to empower individuals and organizations through her relatable content. She inspires her colleagues by discussing how she overcame burnout and overwhelm.

Kari knows firsthand how working in a hostile work environment can contribute to the feeling of burnout, negatively effecting ones overall health and confidence. She authored the book The Ultimate Guide for Dental Hygienist Burnout to serve as a guide to help dental hygienists in all stages of their career.



Kari Carter-Cherelus RDH KMC Strategic Solutions, United States.

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Finger nail scratching habit resulted in localized gingival recession

Abstract:

Self-inflicted gingival injuries have been reported to occur in children and adolescent secondary to number of causes , including accidental trauma , fingernail biting , digit sucking of these causes the one documented as the most common cause is habitual fingernail biting or onychphagia .Gingival recession is a muccogingival defect caused by variety of etiological factors that result in periodontal destruction most prevalent among those being periodontal inflammatory changes , one of the least documented cause is self-inflicted gingival injury can be confirmed by a careful medical and dental history , clinical appearance of the lesion and response to established treatment protocol. This case report described a repetitive injurious behavior by nail scratching resulted in localized gingival recession. The lesion responds well to conservative periodontal treatment. The role of underlying psychiatric morbidity leading to repetitive self-inflicted injurious behavior is discussed.

Biography

Dr. Almontasir balllah imreewah graduated from The University of Tripoli in 2015 and since then providing the most advanced dental care in a comfortable and pleasant atmosphere are the priorities of Dr. Almontasir balllah imreewah. During this time I was interested in Periodontology as my father specialty. And soon I was finding myself more in periodontology and been involving in much local dental conference



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Can you use a low-dose CBCT protocol to evaluate the volume of orofacial clefts?

Abstract:

Background: Cleft lip and palate defects (CLP) are the most frequent congenital abnormalities in the craniofacial area. In Sweden, around 2/1000 children are born with CLP. This condition has both physical and phycological consequences and a multidisciplinary team of specialists is, therefore, required for management and treatment. Furthermore, children with CLP are often exposed to ionizing radiation, since radiographs are needed both before and after alveolar bone graft surgery. This procedure is usually performed when the child reaches mixed dentition.

Cone beam computed tomography (CBCT) can be a helpful tool in surgical planning and healing control, as it can show both thickness and height of the alveolar bone. Our aims were to determine the volume of the alveolar cleft as well as **anatomical** Landmarks in the region, using **standard clinical**- and Low-dose protocols.

Biography

Dr. Almontasir balllah imreewah graduated from The University of Tripoli in 2015 and since then providing the most advanced dental care in a comfortable and pleasant atmosphere are the priorities of Dr. Almontasir balllah imreewah. During this time I was interested in Periodontology as my father specialty. And soon I was finding myself more in periodontology and been involving in much local dental conference



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Effect of cone-beam computed tomography voxel size on detection of vertical periodontal bone defects

Abstract:

Objectives: Finding the best voxel size for the detection of vertical periodontal bone defects with

minimum patient radiation dose is a priority. This study sought to assess the effect of conebeam

computed tomography (CBCT) voxel size on the detection of vertical bone defects.

Materials and Methods: In this in vitro, experimental study, 31 vertical defects including 2 one-wall, 12 two-wall, and 17 three-wall defects were randomly created in the maxilla and mandible of four sheep skulls with the associated soft tissue using round and needle burs. Forty sound sites were considered as the control group. The CBCT scans were obtained from the skulls with 0.150 and 0.300 mm3 voxel sizes and 8 x 11 cm2 field of view (FOV). The images were randomly evaluated by two oral and maxillofacial radiologists and two periodontists, and their findings were recorded. The inter-rater observer agreement (weighted kappa), sensitivity and specificity values were calculated for each voxel size. Comparisons were made using paired t-test.

Results: The two voxel sizes had no significant difference in detecting one-wall and two-wall defects (P>0.05). But the smaller voxel size was **significantly** superior for detecting three-wall defects (P=0.001). The inter-rater observer agreement was unfavorable (kappa < 0.6) for the detection of all three defect types.

Conclusion: In general, increasing the image resolution by **decreasing** the voxel size increased the sensitivity and reduced the specificity of CBCT for detection of vertical bone defects, and is only recommended for detection of three-wall defects.

Biography

Dr. Eftekhar studied General Dentistry at Tehran University of medical sciences, Tehran, Iran for almost 6 and a half years and graduated as a general dentist in 2020. She received her doctoral degree on the 5th of August 2020 at the same institution. She is interested in the field of periodontology and surgery and has done some researches in this field.

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Transformation of dental education patterns during COVID-19 in china

Abstract:

The end of 2019 saw the outbreak of COVID-19. During three years of anti-COVID-19 campaign in China, dynamic zero-COVID policy was consistently held on by the government. Along with the policy, dental education patterns in China were adjusted accordingly.

From the spring semester of 2020, online teaching was adopted by the majority of dental colleges in China, the top five ones were included, which were Beijing University School of Stomatology (BUSS), Sichuan University West China School of Stomatology (SUWCSS), Shanghai Jiaotong University School of Stomatology (SJUSS, formerly known as Shanghai Second Medical University School of Stomatology), the Fourth Military Medical University School of Stomatology (FMMUSS), and Wuhan University School of Stomatology (WUSS). Furthermore, these top dental colleges also shared their education resources with other dental colleges, for example, SCBU shared academic resources with Inner Mongolia University School of Stomatology.

The modes of continuing dental education were also changed correspondingly. Before 2020, offline teaching was the mainstream of continuing dental education. However, from 2020 through 2022, online teaching forms such as Tencent Conference, Cloud Classroom, et al, became more and more prevailing. Since Cloud Classroom was recommended by the Chinese Stomatological Association (CSA), it was used by the majority of nationwide continuing dental education activities, while Tencent Conference was preferred by the local continuing dental education activities.

How about the outcome of the transformation of dental education patterns? According to investigations launched by CSA, more than ninety-five percent of the teachers advocated online dental education, about ninety percent students were satisfied with the transformation. According to the reports from the colleges, no differences were found between the scores of the students receiving online education and those of the ones receiving offline education.

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Biography

Hantang Sun, B.A Shandong Medical University 1997, M.D. The Fourth Military Medical University School of Stomatology 2000, Ph.D. The Fourth Military Medical University School of Stomatology 2003, Endodontic Fellowship Tokyo Medical and Dental University School of Dentistry 2006, Operative Dentistry Fellowship Loma Linda University School of Dentistry 2011. Associate Professor of the Fourth Military Medical University School of Stomatology 2009-2017. Chair and Professor of the Dept. of Operative Dentistry and Endodontics, Affiliated Nantong Stomatoligical Hospital, Nantong University 2017-current. Research and interests- Anatomy of teeth, Odontogenesis, Endodontic Instruments and Technology, Dental Education. Member of Chinese Geriatric Dentistry Committee, Chinese Stomatological Association. Member of Operative Dentistry Endodontics Committee, Stomatological Association of Jiangsu Province, China. Member and Secretary of Stomatoligical Committee, Medical Association of Nantong City. Published and/or presented over 30 abstracts and peer reviewed publications, including one presented in the International Federation of Endodontic Association (IFEA) Congress 2018, which was held in Seoul, Korea.

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Visibility of anatomical landmarks in the region of the mandibular third molar, a comparison between a low-dose and default protocol of CBCT.

Abstract

European commission of radiation proection (Euratom) has elaborated guidelines, SedentexCT, with the objective to promote scientific based use of dental CBCT for varios diagnostic indications e.g., mandibular third molars. Optimization of radiographic examinations is necessary for radiation protection and many countries regulate radiation delivery to patients by law. Therefore, the aim of the study was to investigate the clinical applicability of a low-dose CBCT protocol as compared to the default for pre-surgical evaluation of mandibular third molars. Forty-eight patients (62 teeth) referred for pre-surgical mandibular third molar examination was enrolled after justification for CBCT. Two CBCT scans of each tooth were made using a default protocol and a low-dose protocol (Veraviewepocs 3D F40, J Morita Corp, Kyoto, Japan). The protocols had the same tube potential (90kV) and exposure time (9.4s), but in the low-dose protocol the tube current was reduced to 2 mA instead of 5mA. Four observers evaluated the visibility of five relevant anatomical structures and relations. The subjective image quality was ranked on a 3-point scale as diagnostically acceptable, doubtful, or unacceptable. The Wilcoxon signed-rank test compared differences between the two protocols and significance was set at $P \le .05$. No significant differences were found between the two protocols for any observer regarding the visibility of the relationship and proximity between the roots and the mandibular canal; root morphology; and possible root resorption of the second molar. The periodontal ligament differed significantly in visibility between the two protocols (P \leq .05). The four observers ranked (mean percentage) 96% of the default images and 84% of the lowdose images as diagnostically acceptable. Two observers scored the subjective image quality for the low-dose protocol images more frequently as diagnostically doubtful compared to the default protocol images. In conclusion this study indicates that a lowdose CBCT protocol with 60% reduced tube current provides, in most cases, acceptable image quality for pre-surgical assessment of mandibular third molars. Optimization of CBCT protocols should be a primary issue according to recommended guidelines.

Biography

Josefine Cederhag, DDS, PhD candidate in Oral and Maxillofacial Radiology, Malmö University, Sweden. In 2007, Josefine Cederhag graduated from the Dentist School at Umeå University, Sweden. For ten years Josefine worked as a general dentist before moving on to hold a position as a clinical teacher and clinician at the Dentist School, Malmö University, Sweden.

Josefine Cederhag Malmö University, Malmö, Sweden

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Orthodontic treatment of complex cases

Abstract:

In developing countries such as Brazil, the **socioeconomic** condition of the population is reflected in the condition of oral health. In a scenario of great scarcity, oral health is delegated to a second priority level. Therefore, a greater number of teeth are lost due to caries disease associated with a difficulty for the

population to have access to specialized treatment in dentistry. This is reflected in Orthodontics. A large number of patients come to treatment with malocclusions acquired or aggravated by tooth loss. Therefore, the incidence of patients seeking orthodontic treatment with malocclusions such as: 1) dental midline deviation is high; 2) slanted molars; 3) accentuated Spee curve; 4) large spaces to be enclosed; 5) buccal corridors acquired by inclination of the teeth towards the palate, after loss of teeth in the lower arch and 6) need for intrusion of teeth that extruded due to lack of antagonist teeth. Apart from these issues of greater

influence of the socioeconomic condition, there are also cases with skeletal malocclusions, causing disharmonies between the bone bases in the **anteroposterior** direction and with transverse problems. Report of complex clinical cases of Brazilian patients, using low-cost resources for a low-income population. Clinical cases of: 1) with great dental asymmetries; 2) cases with bone asymmetries; 3) verticalization and mesialization of molars; 4) clinical cases with Brodie's

Syndrome; 5) case reports with large closure of large orthodontic spaces (> 7mm); 6) Clinical cases of mandibular response in adult patients with skeletal CL II, treated without orthognathic surgery; 7) Gummy smile treatment with and without orthognathic surgery.

Biography

Paulo Picanco Specialist in Orthodontics, ABO-CE, 1998. Mini-Residency in Orthodontics, CEOSA, Madrid-Spain, 1998. Member of the MEAW-Foundation, Boston - USA, 2000.



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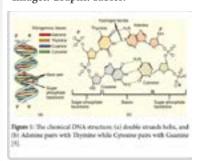
Molecular biology applications in oral and maxillofacial

Abstract:

Genetic developments during the 20th century had a great impact on our lives initiated by Mendel principles in 1900. Following the publication of the entire human genome sequence on 2004 chromosomes now can be rapidly analyzed very precisely by microarray techniques and next generation sequencing providing the genetic studies useful for clinical applications. Up to now the number of phenotypes with a known molecular basis reached 5500 while the number of genes with a phenotype causing mutation reached 3400. Genetic is becoming significant to every medical field. Recent discoveries have influences not only on rare genetic diseases and syndromes but extend too many common human disorders. The advancement of genetics refers back once the structure of DNA was discovered in 1953 by James Watson and Francis Crick, while nucleic acid was actually detected in 1849. Then in 1960s, the unraveling of the sequence of bases in DNA and the sequence of amino acids in protein called genetic code, was achieved with sophisticated techniques. Molecular biology provided wide applications in different areas such as genetically modified disease resistant crops, therapeutic drugs produced by genetically engineered animals and the advances to introduce vaccines that are DNA-based. In this article, we are reviewing the general application of molecular biology and its advances in the field of oral and maxillofacial surgery.

Keywords: Cystic fibrosis; Pharmacogenomics; Oral and Maxillofacial surgery; Craniofacial syndromes; Genetic in Dentistry

Images/Graphs/Tables:



Decade	Development	Examples
1980s	Southern blot, Sanger sequencing, and Recombinant CRA technology	DNA sequence of Epithen-Barr virus genome (1984), DNA fingerprising (1984), and Recombinant erythropoids (1987).
1900s	Polymerase chain reaction (POR)	Conetic disorders diagnosis
2000s	Microarray technology and capillary sequencing	Human genome sequence (2003)
2010s	Next generation sequencing	Human genome sequenced First scule myeloid leukemis (MIL) cascer genome sequenced (2008)

Table 1: Stages of genetic technology development.

Biography

Raniah Al Eid Faculty member with over 13 years of experience in teaching, research and clinical management in oral & maxillofacial surgery department at King Saud University. Completed Master Science and Clinical training in Oral and maxillofacial surgery College of Dentistry, King Saud University Riyadh, KSA 2013 Published several papers in reputed journals. Currently working as Assistant Professor in Oral and Maxillofacial SurgeryDepartment, College of Dentistry, KSU.

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