



# NORTHEASTERN SOCIETY OF PERIODONTISTS BULLETIN

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SPRING 2002

SPRING MEETING • FRIDAY, MARCH 22, 2002

*Joint Symposium: Northeastern Society of Periodontists  
& Northeastern Gnathological Society*

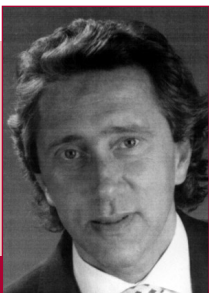
New York Marriott Marquis Hotel • 1535 Broadway, New York, NY

**J**oint meetings of NESP and Northeastern Gnathological Society have always been an exciting and pleasant experience during which two leading specialties of dentistry come together. The NESP joint meeting with NGS this spring promises to be another gathering full of erudition while renewing friendships with our prosthodontist colleagues. Dr. Louis F. Rose, NESP Program Chairman, together with the NGS, has gathered an impressive list of speakers who will inspire you on the subjects of their expertise. The day will start with registration, exhibits and coffee between 8:15-9:00 A.M. Dr. Mauro Fradeani will be the first speaker at 9:00 A.M., discussing *Biological Integration of Anterior Restorations*, followed by Dr. Bradley S. McAllister who will present *Distraction Osteogenesis*. Lunch will be served from 12:15-1:45 P.M. After lunch, Dr. John F. Bruno

will present *Periodontal Plastic Surgery to Enhance Esthetics and Restorative Procedures*. Dr. Robert Winter will be the final speaker, presenting *Restorative, Periodontal and Technical Parameters for Esthetic Success*. Following a panel discussion, there will be a cocktail reception courtesy of the meeting sponsors.

**DR. MAURO FRADEANI** will present *Biological Integration of Anterior Restorations*. Tissue management procedures during prosthetic treatment will be discussed and their importance emphasized in order to integrate anterior restorations into the oral environment in such a way as to achieve esthetic and biological predictability. A predictable esthetic final result in the ante-

(CONTINUED ON PAGE 4)



Mauro Fradeani



Bradley McAllister



John Bruno



Robert Winter

**ADAC·E·R·P**  
CONTINUING EDUCATION RECOGNITION PROGRAM

*Sponsored by NYSDS*

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## President's Remarks

### Broadening Our Horizons



Laureen Langer

It is a great honor to serve as the new President of the NESP for the upcoming year. I would like to thank our immediate Past President Dr. Alan Farber for his help, direction, and mentorship. These are unprecedented times for the country and for our profession as well. Major changes have taken place recently in our society and these will spill over into the future of our specialty. As Bob Dylan has said “The Times They Are A Changing.....”

What we have witnessed in the last two decades has been the greatest knowledge explosion in the history of dentistry. Unquestionably, the discovery of the technique of osseointegration has revolutionized dentistry and our specialty. Today many of us treat cases that include both teeth and implants.

Now we are not only involved in treating the diseased periodontium but also in replacing lost parts of the dentition using one or more of a host of new techniques. Tooth replacement, bone and/or soft tissue rebuilding are no longer beyond our capabilities. Additionally, the esthetic possibilities are endless. The next decade will again change the borders for all of the different specialties in dentistry. A blurring of the areas of responsibility will come about for a variety of reasons and we cannot take the chance of becoming complacent about the need to understand all of the various techniques of these allied fields.

If we look back nineteen years to when we were first introduced to predictable implant therapy by Professor P.I. Branemark, we were initially content that implants enjoyed a long-term success and steady state of bone. Finally, that predictable implant stability allowed us to combine it with prosthetic convenience. While we have always enjoyed a close relationship with our prosthetic and restorative colleagues, a better understanding of their needs and techniques can only be beneficial to all of us in the future. It is time to build a coalition right here in our practices. The guarantee that we as co-therapists will continue to appreciate each others' talents

will depend on how much consideration we give to the treatment that follows our own. These changes should be looked upon as an opportunity rather than a challenge. Due to the already fine tuned cooperation among our specialties we are poised to improve patient treatment even further. Our Spring joint meeting with the Northeastern Gnathologic Society continues this great tradition of cooperation at the highest level.

This year we are fortunate to have the talented and capable Dr. Lou Rose serve as our program chairman. Dr. Rose has worked closely with the program chair of NGS, Dr. Robert Rawdin, to bring us a balanced program, which will incorporate the prosthetic aspects of periodontal treatment as well as the more innovative procedures in our own field, all with an eye towards the final result. The speakers for the joint meeting will be: Dr. Mauro Fradeano from Italy, who will speak on *Implant Prosthesis*, Dr. John Bruno from Philadelphia on *Periodontal Plastic Surgery to Enhance Aesthetics and Restorative Procedures*, Dr. Bradley McAllister on *Distraction Osteogenesis* from a periodontal point of view and Dr. Robert Winter on the *Periodontal/Restorative Interface*.

Our Fall Meeting will be just as exciting, with Dr. Bernard Touati from France on *Anterior Esthetics—Criteria for Success*, Dr. Ron Nevins on *Bone Morphogenic Protein*, our own Dr. Susan Karabin on *Gender Difference in Biologic Healing Which Affect Treatment Outcomes*, and Dr. Edmond Bedrossian from California on *Zygomatic Implants and Veneer Grafting*.

NGS President Dr. Daniel Budasoff and I ask you to please save the date of March 22nd and make plans to spend the day in an educational and social environment with your restorative colleagues. I look forward to working with the board and with our Executive Director, David Kratenstein, who has always been a tireless worker for our organization.

*Dr. Laureen Langer is a Diplomate of the American Board of Periodontology. She is a graduate of Columbia University in both dentistry and periodontics, where she is an Associate Clinical Professor of implants and periodontics. She is currently President of both the Osseointegration Foundation and the Northeastern Society of Periodontists.*

*Dr. Langer has been published in the Journal of Periodontology, the International Journal of Periodontics and Restorative Dentistry, the International Journal of Oral & Maxillofacial Implants, and has authored chapters in four textbooks on the subject of periodontal surgery, gingival recession and implants. She has also lectured extensively both nationally and internationally.*

## Editor's Notes

### What Lies Beneath

Isn't it amazing how certain phrases enter into our vocabulary and start influencing our lives? A case in point is "Evidence Based." You may think you have heard enough of it already, but brace yourself as it is gaining more notoriety. Exactly who coined this term is unclear. Equally mysterious is the meaning of it: everyone seems to have his or her own meandering interpretation. Was there no evidence in science? So, why the distinction? "Scientific" has always connoted "Evidence Based." That is what sets it apart from the subjective, non-evidence based beliefs. One wonders whether "Evidence Based" owes its genesis to social, political, and economic forces and that it pursues to control trends in scientific research.

"Evidence Based" is creeping into many disciplines. In dentistry it gained momentum as a buzzword about three years ago. I must confess I couldn't resist joining the bandwagon in exploiting its usage. It sounded nice and made you look brainy. Yet, like "Paradigm Shift," "New Millennium," or "Globalization," its virtue was far less than its overused and misused utility. Several years ago in the House of Delegates of American Dental Association, some colleagues strongly opposed the pervasive use of "Evidence Based" vocabulary. Their fears are now coming true. Insurance companies use the phrase to question every standard of clinical practice to minimize utilization. Worse yet, they pick out our own credulous positions, often out of context, to deny benefits to the patients. Governments and politicians support it to dis-

prove screening tests, detection techniques and treatment modalities in order to cut costs and balance budgets. Recently a well-publicized study from the Nordic Cochrane Center (NCC) in Copenhagen questioned the benefits of mammogram screening. On the evidence of its web site, this young organization that has gained great influence and support with lightening speed, is a dedicated "Evidence Based" center. On the influence of this organization suffice it to say that the government of Switzerland has decided not to offer a national mammography-screening program. The Swiss Network for Health Technology Assessment has said the decision was heavily influenced by the Danish research. Switzerland will now save in its social health program but what are trade offs in terms of public health and quality of life?

Should we conduct retrospective studies, perhaps with an agenda, to question yesterday's science and concentrate on disproving what we have learned until now? Isn't it better to direct our talent and resources to finding newer and more effective means of disease detection and treatment? Early cancer detection is shown to improve survival odds. In that respect mammograms are second to none. "Evidence Based" mentality rejects this common sense approach. It seeks to dismiss anything that does not lend itself to quantification. On exactly those basis, it rises to divide disciplines

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Mehdi Saber

Visit us at [www.nesp.org](http://www.nesp.org)

### You Are Wanted

Periodontists needed to join the board of the Northeastern Society of Periodontists. If you would like to become active in your society, please contact Laureen Langer, President, at 914-723-0900 or email through our web site at [www.nesp.org](http://www.nesp.org). We are looking for members who want to get involved.

### FALL MEETING

November 1, 2002

*The Periodontally Compromised Patient:  
Innovative & Therapeutic Modalities*

Dr. Edmond Bedrossian  
Dr. Myron Nevins

Dr. Susan Karabin  
Dr. Bernard Touati

## PROGRAM DESCRIPTION (CONTINUED FROM PAGE 1)

rior region is often largely dependent upon close cooperation between prosthodontist and periodontist, especially in the case of patients with a high smile line. Both surgical and prosthetic treatments are required when old failed restorations have to be replaced in order to re-establish proper biological width, correct gingival asymmetries, and reduce "gummy smile" appearance. The prosthodontist's task is even more challenging during the prosthetic rehabilitation of periodontally involved patients.

Occlusal, functional and esthetic problems, such as tooth elongation and wider interproximal spacing, can be successfully solved through proper execution of all prosthetic procedures as well as adequate tissue management. A strong emphasis on team co-operation will ensure optimal esthetic results. Dr. Fradeani received his D.M.D. in Italy in 1979 and his specialization in dentistry in 1983. He is President Elect of The European Academy of Esthetic Dentistry and Past President of The Italian Academy of Prosthetic Dentistry. He is an Active Member of The American Academy of Esthetic Dentistry and maintains membership in The International College of Prosthodontists and The American Academy of Fixed Prosthodontics. Dr. Fradeani teaches extensively in Italy and abroad on periodontal prosthesis and esthetic dentistry and contributes to the dental literature. He has been appointed as Adjunct Associate Professor at Louisiana State University School of Dentistry, Prosthodontics Department, New Orleans. He maintains a private practice limited to Prosthodontics and Aesthetic Dentistry in Pesaro and Milan, Italy.

**LEARNING OBJECTIVES:**

- To understand tissue management procedures during prosthetic treatment to yield esthetic and biological predictability.
- To recognize the role of the prosthodontist and periodontist for predictable esthetic results.
- To understand how to deal with occlusal, functional, and esthetic problems through treatment team co-operation.

**DR. BRADLEY S. McALLISTER** will discuss *Distraction Osteogenesis for Predictable Vertical Ridge Augmentation*. Vertical ridge augmentation for dental implant placement is one of the greatest challenges facing the implant surgeon. The technique of distraction osteogenesis has been successfully employed in long

bone applications by Ilazorov and colleagues for over forty years, yet it has only recently been introduced as a technique for vertical alveolar ridge augmentation. This presentation will review multiple cases where up to 10 mm of vertical augmentation was obtained utilizing the technique of distraction osteogenesis. The surgical technique, recommended latency period, distraction rate and consolidation period will be reviewed. Clinical, histologic and radiographic results for consecutively placed distractors will be discussed along with the potential complications of employing distraction osteogenesis for vertical ridge augmentation.

Dr. McAllister maintains a full-time practice limited to periodontics and implantology in Tigard, Oregon. He is a part-time Associate Professor in the Department of Periodontics at the University of Texas Health Sciences Center at San Antonio. Dr. McAllister was the head of the departmental implant program and Director of Research at Oregon Health Science University from 1993 to 1997. He was also a member of the Northwest Wound Healing Center and had a faculty appointment in the Department of Surgery, Division of Plastic Surgery. Dr. McAllister has presented and published his research on distraction osteogenesis, wound healing, bone regeneration and implantology nationally and internationally, and is a diplomate of both the American Board of Periodontology and the International Congress of Oral Implantology.

**LEARNING OBJECTIVES:**

- To understand the concept of distraction osteogenesis.
- To determine when to plan distraction osteogenesis treatment for vertical augmentation.
- To recognize the surgical techniques and potential complications with distraction osteogenesis.

**DR. JOHN F. BRUNO** will present *Periodontal Plastic Surgery to Enhance Esthetics and Restorative Procedures*. In the past, periodontal surgery has been perceived as causing root exposure and cosmetic disfigurement, thus presenting problems to the restorative dentist and alienating the patient. This presentation will illustrate techniques to eliminate existing cosmetic problems, as well as techniques to provide esthetic results. A subepithelial connective tissue graft procedure will be presented, which provides predictable results for root coverage, root abrasion, root caries, previously restored root areas, exposed crown margins, root sensitivity, and for purely cosmetic reasons. The use of connective tissue grafts for enhancement of esthetics in conjunction with

implants will be presented, along with a ridge augmentation procedure utilized prior to restorative procedures to improve atrophied ridges. A staged technique to eliminate amalgam tattoos with optimum esthetic results will be shown. The anatomy of the palatal area from which the donor connective tissue is procured will be discussed and the histology of a human block section following a subepithelial connective tissue graft procedure will be presented.

This presentation will place emphasis upon assisting the restorative dentist and helping to eliminate many of the mucogingival problems the restorative dentist has had to contend with in the past.

Dr. Bruno completed his dental and periodontal training at Georgetown University. He is a Clinical Associate Professor of Periodontics at Tufts University School of Dental Medicine. Dr. Bruno has been active in organized dentistry with many honors and elected positions, including being a member of the Board of Directors and the Board of Trustees of the American Academy of Periodontology. He is the Past President of the Northern Virginia Dental Society, Greater Washington Society of Periodontology and Fairfax County Dental Society. Dr. Bruno has published extensively on the subject of connective tissue grafts in various journals, including the *International Journal of Periodontics and Restorative Dentistry*, and has co-authored a chapter in the book *Periodontal Therapy*. Dr. Bruno is a Fellow of the American College of Dentists with a private practice in Springfield, Virginia.

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#### LEARNING OBJECTIVES:

To obtain clinical knowledge of:

- The different applications of the subepithelial connective tissue graft.
- The subepithelial connective tissue graft technique at the recipient site.
- The technique for procurement of the connective tissue at the palatal site.
- The anatomy of the palate, which affects the procurement of the connective tissue.

**DR. ROBERT R. WINTER** will present *Restorative, Periodontal, and Technical Parameters for Esthetic Success*. Meeting the esthetic expectation of our patients requires a comprehensive interdisciplinary approach to patient care. An oral-facial and esthetic analysis is an integral part of diagnosis and treatment planning. An essential part of this process is the interrelationship of the restorative, periodontal, and technical aspects of dentistry. The interface of the restoration, tooth, and periodontal structures must be well planned and precisely

executed, especially in the patient with a high lip line. Failure to diagnose and correct soft tissue problems leads to disappointing results for both the patient and dentist. Careful treatment planning and coordination of this discipline will assure predictable esthetic outcomes for the patient.

Dr. Winter graduated from Marquette University School of Dentistry, and in 1983 completed his Prosthodontic Specialty Residency in Milwaukee, Wisconsin. He maintains a private practice limited to Prosthodontics in Newport Beach, California, and is a member of the graduate prosthodontics faculty at the University of Washington. Dr. Winter is a co-founder of the Newport Beach Dental Forum, an educational facility in Newport Beach, California, where he teaches a series of both technical and clinical educational courses. Having taught didactic, clinical and technical courses in over 35 countries, Dr. Winter is recognized around the world for his skills as both a clinician and ceramist. This unique blending of disciplines and talent as a teacher continues to keep him in high demand as a speaker. In 1991, he was the second recipient of the Gordon Christensen Lecturer Recognition Award for Excellence in Teaching.

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#### LEARNING OBJECTIVES:

- To understand how oro-facial and esthetic analysis is an integral part of diagnosis and treatment planning.
- To understand the interrelationship of restorative, periodontal, and technical aspects of treatment.
- To demonstrate how failure to diagnose and correct soft tissue problems can lead to esthetic failures.

## New Members

The NESP welcomes  
the following new members:

Dr. Vasliki Batalias

Dr. Belinda Brown

Dr. Therese Hoffman

Dr. Neil Lehrman

Dr. Ruth Parkin

Dr. Marie Tola

Dr. Lucy Villa

## EDITOR'S NOTES

(CONTINUED FROM PAGE 3)

into good science, bad science, and maybe even evil science. But a discipline does not need to be quantifiable to be scientific and the medical science is the prime example of that. Ultimately, the numbers have to be interpreted. As we have learned from quantum mechanics, the observer affects the outcome of the experiment. Therefore, the value of human experience cannot be discounted in reaching scientific conclusions. In an editorial on the issue of quantification in clinical experiments, Wang and Greenwell in the December 2001 issue of *Periodontics and Restorative Dentistry* wrote: "When valid clinical research can make a contribution to our literature but fails to satisfy all the statistical niceties, we should clearly note the limitations, but not throw out clinically useful information." One can only hope that "Evidence Based" does not encourage some to consider past clinical experience and knowledge null and void unless proven by mathematical certainty.

However, such hope may be fading away if I use my new physician, freshly out of his training, as the indicator of things to come. I inherited him since my original physician decided to retire after 35 years in practice. We met during my annual exam. He had a great bedside manner, a definite improvement over my previous physicians. He told me about his practice philosophy, which stated that basically there is no need for any tests or exams unless there are signs, symptoms, or risk factors. All he did was to listen to my lungs and also order a lipid panel, since my cholesterol level has been on borderline. While I didn't miss the prostate exam, I missed the head to toe exam, EKG, and myriad of blood tests including PSA to which I was accustomed. When I asked him for such "extras" he replied there were no evidence these tests would help patients preventively. Worse yet they could give false positive results, causing undue tests and procedures. I urged him to reconsider and indeed a minor problem was detected that required attention. All I can say now, is that I thank him for inspiring me to write this editorial. If you didn't like what you read, blame him.

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### ACKNOWLEDGMENTS

The NESP wishes to thank the sponsors of the fall meeting for their financial support. All members are urged to visit the exhibit booths and to acquire the latest information on periodontal products.

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