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FIRST IMPRESSIONS BY DR. GEORGE FREEDMAN

"Dr. George Freedman is a founder and past president of the American Academy of Cosmetic Dentistry, a cofounder of the Canadian Academy for Esthetic Dentistry and a Diplomate of the American Board of Aesthetic Dentistry..."



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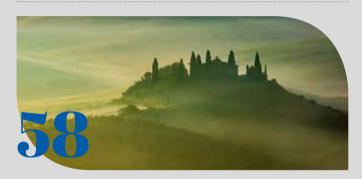
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focus on

With its nearly 1.4 billion inhabitants, China is an economic giant and it has registered impressive double-digit growth figures for most of the 1990s and 2000s. In recent years, however, this seemingly incessant expansion began to show signs of fatigue.





Economy overview

n the last 50 years, China has turned from a country based on agriculture to an industrial superpower, experiencing a population boom with no precedents in history. Despite heavy human and environmental costs, the economic and industrial transformations that occurred in China lifted a great number of people out of poverty:

- The number of absolutely poor people in rural China fell from 250 million in 1978 to 35.97 million in 2009.
- The proportion of people who live with less than I \$ per day, dropped from 46% in 1990 to 10.4% in 2005.
- China's Human Development Index (HDI) rose from 0.404 in 1980 (77th among 106 countries measured) to 0.687 in 2011 ranking (101st among 187 countries measured). However, taking into account the inequity across geographic areas and sectors of society, the 2011 HDI ranking decrease from 0.687 to 0.534.

With its nearly 1.4 billion inhabitants, China is an economic giant and it registered impressive doubledigit growth figures for most of the 1990s and 2000s. In recent years, however, this seemingly incessant expansion began to show signs of fatigue as the impact of both domestic and external issues caused a contraction that is still lasting by now. Predicted growth for 2015 should stop slightly below 7%, a very low figure compared to previous decades, but still very better than many other developed nations. China remains, however, the second largest economy in the world after the USA and it is now taking a more decided step in the international cooperation environment by founding the Asian Investment Development Bank, aimed at financing infrastructure projects in Asia, that has already been joined by most of the Asian countries and also by most of the major economies outside Asia except from USA, Japan and Canada.

Despite the massive urbanisation that took place in the last three decades and the remarkable expansion of the Chinese middle class (68% of urban households were in the \$9,000 to \$34,000 annual income range in 2012, according to an estimate by McKinsey), the consumption boom that many economists expected has not happened.

As reported in a recent editorial by Bloomberg, the gap between extreme rich and poor people has narrowed for six and this is a significant achievement, but the smaller inflow of migrants registered in the last five years into China's main cities means that much of the real wage increase, which, meanwhile, has pushed many multinationals to move their factories to cheaper manufacturing places such as the Indochina peninsula, has mainly benefited low-income and migrant workers. This group represents around 40% of China's households but only 17.5% of the total consumption.

At the same time, the higher number of graduates and qualified workers make higher-end jobs harder to find, putting white-collar wages under downward pressure.

The big infrastructure projects carried out by the government have also favoured the state-owned companies, and focused less on the development of the small and middle-size private sector. According to the Chinese premier Li Keqiang's remarks during the latest World Economic Forum 2015, China is aware of this need and should now concentrate more in supporting entrepreneurship and innovation, but the current slowdown will not harm the economic sustainability in the medium to long term.

Healthcare profile

In about 50 years, the health of China's population has seen a dramatic improvement. For instance, according to the World Health Organization (WHO) life expectancy at birth rose from 35 years before 1949 to 75 years in 2010. Moreover, the maternal mortality ratio (MMR) dropped from 1500/100,000 before 1949 to 30/100,000 in 2010, while the infant mortality rate (IMR) decreased from 200/1,000 to 13.1/1,000 live births in 2010. These were very remarkable achievements that account for a general progressing path towards health indicators that are more in line with those of the older industrialised countries

However, these gains were not equally benefiting all of the population. With a land area of over 9.5 million square kilometres, China is the world's fourth-largest country with wide remote rural areas where the living conditions are extremely different than in larger cities. The gap exists not only between urban and rural residents, but also between Eastern, Middle and Western China, with the latter lagging behind in health outcomes such as maternal mortality ratio.



Cover Photo

China Hangzhou West Lake Stock photo © gyn9038

Photo Next Page

Peking opera

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Moreover, the huge inflow of migrants that filled Chinese cities in the past decades created millions of unregistered urban dwellers who barely had any access to health services other than traditional Chinese medicine remedies. Even with the newly introduced healthcare insurance coverage for the rural residents, millions of migrant workers still remain excluded from it because they cannot move back to their home provinces.

The massive urbanization (from 7% in 1949 to 51% in 2011) and the rapid industrialisation permanently changed population lifestyles, habits and behaviours. With such deep transformations happening in the span of a very few decades, combined with the burden of pollution, water and soil contamination that weren't recognised and addressed as severe threats to healthcare for long time, the diseased profile of the Chinese population has altered significantly. Over the last 20 years, deaths related to communicable diseases have dropped while non-communicable diseases have spread all across China, even faster in rural than in urban areas. Currently, the WHO reports malignant neoplasms, heart diseases, cerebrovascular diseases and chronic lung diseases as the major causes of death in China, with growing morbidity rates.

Another important factor influencing the country's healthcare profile is its demographic trend. According to official data, China had 178 million people aged 60 years or above, nearly 13% of the total population, but with an estimated increase of 5 million per year, the ageing population is expected to reach the stunning number of 248 million in 2020, with its share climbing up to 17%. Despite the reforms introduced in the welfare system, there is still a gap between the growth rate of the ageing population and the availability of financial resources for their support.

The three health insurance programs include the Urban Employee Basic Medical Insurance Program (UEBMI), based on employment contributions (8%); the Urban Resident Basic Medical Insurance Program (URBMI) and the New Cooperative Rural Medical Scheme (NCMS), both based on provincial contributions, combined, provide coverage to the majority of the population. Nominally, more than 95% of the population had joined the schemes, but in the reality, migrant workers' employers often do not provide any insurance contributions. Moreover, a urban-rural medical assistance system covers special disadvantaged groups such as low-incomes patients with severe illness, the severely disabled and senior citizens from low-income families.

As the amount of contributions varies greatly, especially those in UEBMI and NCMS, health insurance coverage is very uneven, also because of the different benefits included in the covered basket.

Among the main issues that the government is attempting to address there are:

- Wide variations in the quality of care and availability of services
- High copayments
- Incomplete drug coverage
- Insufficient reimbursement of out of pocket expenses, especially in rural areas and for services related to critical illness
- · Less qualified, undertrained staff in rural areas
- Insured patients sometimes end up spending more out-of-pocket than the uninsured due to increase charges by service providers
- Underpaid doctors raise extra income by prescribing costly drugs and treatments.

Several healthcare reforms have been implemented to tackle these shortcomings and the funding for the health sector has to be increased to about \$1.3 trillion by 2020. The public sector is put under great pressure, even though a rising share of patients prefer going to private clinics because of the higher quality of services. Despite this trend, the private sector is still underdeveloped with only 12% of hospital beds and less than half of population having any form of private insurance. Only recently, the reimbursement of private treatment to publicly insured patients has been introduced into the national policies.

The Traditional Chinese medicine (TCM) system is integrated in the overall healthcare system and it is composed of general hospitals or departments within them, special hospitals, community health centres, township hospitals, village clinics, outpatient departments and clinics. TCM is encouraged by the government in combination with Western medicine.

As of 2011, China had a total of 954,389 health-care facilities including hospitals, primary care institutions, public health institutions and other facilities. Among the total of 5.16 million inpatient beds, about 30% was under primary care institutions such as district health centres, county hospitals and public health institutions. However, inpatient bed density varies from 6.24 beds per 1000 people in urban areas to 2.80 beds per 1000 people in rural areas.

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Photo

The Great Wall of China
Stock photo © Nikada

on China



According to the event organiser, Reed Sinopharm, in 2013, the medtech sector generated over US\$24 billion and the expected US\$1 trillion that should be pumped into the healthcare sector by 2020 will provide further resources for an expansion of services and related demand of equipment.

The company reports that in the same year, in the Chinese dental industry those companies with annual revenue of RMB 20 million or more increased their revenue by 31.9% from a year earlier to RMB 5.025 billion, while in the first eleven months of 2014 they totalled RMB 3.623 billion.

Larger foreign brands are well-established and widely recognised in the Chinese dental market and dominate the mid-to high-end segment. However, in recent years some domestic companies have introduced themselves into this market by providing an alternative to imports of quality but expensive equipment.

As regards the participation of private investors in the provision of dental services, China is still different from the developed markets where it is common to see a large share of patients opting for a trusted dentist operating in a single practice, or in recent years, to seek treatment in dental clinics that offer particularly advantageous conditions. In Chinese larger cities, however, there is a marked preference for local hospitals that enjoy of a good reputation, which is attracting some private investors to acquire hospitals with an established reputation, trusting that it will keep attracting patients despite the entrance/entry/appearance of a private player in the ownership.

The total healthcare spending was about US\$389.5 billion in 2011, or 5.1% of GDP, which represents a 30-fold increase from the expenditure in 1990. Per capita health expenditure in 2011 was roughly US\$289, but once again, this national average hides big differences among the different provinces, regions and urban vs rural areas. The percentage of private health expenditure in the 2011 was 34.9%, a decline from the peak of 59% registered in 2000 and even from the 35.7% in 1990.

Concerning the health workforce, against an increase in the total number of health workers from 6.14 million in 1990 to 8.62 million in 2011 and in the number of doctors, including assistant doctors, from 1.56/1000 in 1990 to 1.82/1000 in 2011, there are significant disparities of human resources across the different geographic regions and areas. Both number and quality of healthcare staff is insufficient to meet the demand for treatment of the growing population.

Among the goals to strengthen healthcare system, the top priorities are the reduction of out-of-pocket payments, the allocation of resources and staff targeted to reduce the urban-rural and cross-regional gap, and the improvement of public management across all levels of the three-tiered health-care delivery network.

Outlook on the oral healthcare sector

In 2012 the Chinese dental hospitals provided treatments worth RMB8.1 billion, after 6 years of Compound Annual Growth Rate (CAGR) of 22.7% since 2006, when the revenue was RMB 2.37 billion. Gross margins remained around 11% (ranging from 10.8% to 11.9%) in the period 2010-2012.

Private and foreign providers are aggressively stepping into the market, focusing on Beijing, Shanghai, Guangzhou, Shenzhen, Hangzhou and other larger conglomerates in coastal regions.

Dental diseases are usually neglected compared to conditions that are perceived as more critical and the high rate of out-of-pocket payments does not help lower and middle-income households to seek for proper oral healthcare. According to a national report dating back to 2008, 94% of the population had some form of dental problem, mainly calculus (97%), caries (88%) and periodontal disease (85%), followed by dental sensitivity, plaque and malocclusion.



Other significant figures were:

- 66% of children aged 5 had cavities.
- Almost one-third of children aged 12 had cavities in the permanent teeth.
- Adults between the ages of 35 and 44 had cavities, and only 8.4% of the teeth with cavities had been treated.
- Periodontal disease was rather rare and only affected 14% of the population.
- Tooth loss affected more one third of people aged 35 to 44 and almost one in ten people aged 65 to 74.
- Between 10 and 42.6% of adults wore dentures.

These figures have not been significantly reduced in last years, as the market remains unable to meet the demand of dental care. With a density of 100 dentists for 1 million people, the rate is still below that of developed countries and also below that of other developing nations. However, 15,000 new dentists add to the workforce each year.

The major providers of dental care are public dental hospitals, even though in recent years around 50,000 private clinics have been established.

In such a large country as China, it is a very difficult task to conduct exhaustive surveys and studies on a national scale and gaining a close picture of the general population oral healthcare status. Three national oral health surveys have been conducted so far, in 1983, 1995 and 2005.

In the last few years several regional studies have assessed the oral health status of specific population groups. A comprehensive look to these surveys helps gaining some insights into the oral health conditions across the different Chinese regions.

For instance, a 2008 study on the prevalence of dental caries among 2,364 people aged 65-74 in the three provinces of the north east: Liaoning, Jilin and Heilongjiang (a region also known as Manchuria), reported an incidence of 67.5%, higher in rural than in urban areas, with the higher prevalence registered in the Jilin Province.

The major providers of dental care are public dental hospitals, even though in recent years around 50,000 private clinics have been established.

Even Periodontal disorders were common:

gingival bleeding 72% dental calculus 86.6% periodontal pockets 58% loss of attachment 60.1%

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According to

researchers, rural

residents across

the whole country.

generally show low

levels of oral health

knowledge and

poor oral health

behaviours.



On the workforce side, a more recent survey conducted in Liaoning Province reported that, out of a total of 5,617 dentists, 87.8% are located in urban areas. The disproportion is worsened by the lower educational skills and specialisation levels found in dentists working in rural areas. The ratio of dentists to the total population was 1:7682, too low to meet the demand for oral health services. It was estimated that 13.000 dentists would be needed to fill this gap. Moreover, the ratio of dentists to nurses to technicians was about 6:2:1, highlighting a shortage of these dental professionals in the region.

Although the two cited studies only took a specific area into consideration, it is worth mentioning that their findings are consistent with those reported in the third National Oral Health Survey (2005). According to researchers, rural residents across the whole country, generally show low levels of oral health knowledge and poor oral health behaviours. Among the reasons, they indicated high costs of dental examination and treatments, which are not covered by health insurance and poor implementation of oral health promotion activities. The shortage of facilities and professional dentists at the community level in rural areas also contributes to a higher preva-

lence of dental diseases. In general terms, however, the same trend is evident

across the whole country. The average density of dentists is 18 to every 100,000 residents. Just to give a quick comparison, the proportion is three times higher in the United States. When one considers that in this count there are also orthodontists, periodontists and other specialists included, it is clear how the ratio of dentists per population in itself, apart from the difficulty of accessing dental services, is still too low to meet the oral healthcare needs of the population.

According to the World Federation of Public Health Associations, in 2008 the Chinese Government has started an oral health promotion project for children in 23 provinces across middle and western regions of China, funded by a special government budget. The programme includes the provision of oral health education, specialised training courses and providing oral healthcare training courses in community level, as well as providing pits and fissure sealants for the first permanent molars in children bearing a high caries risk.

Since the beginning of the programme until 2012, the budget allocated for the project has increase from 8.8 million Chinese Yuan (approximately \$1.5 million) to 46.5 million Chinese Yuan (approximately \$7.8 million). In terms of coverage, the number of school children involved rose from 150,000 to 540,000 during the same period and the number of sealed teeth increased from 530,000 to 2.3 billion. This remarkable progress was accompanied by an effort in qualifying 20,000 oral healthcare workers to carry out the project, that also served as a blueprint for further allocations of funds for oral healthcare targeting school children in the eastern provinces as well.

Currently, the comprehensive oral health promotion programme receives financial support from both the central and provincial government and extends over almost all of the provinces. Further to the above mentioned intervention, the project now includes topical application of fluoride, such as fluoride varnish, for high-risk pre-school children in order to prevent tooth decay in primary teeth, and providing simple fillings for permanent and primary teeth decays.

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DURAVIT













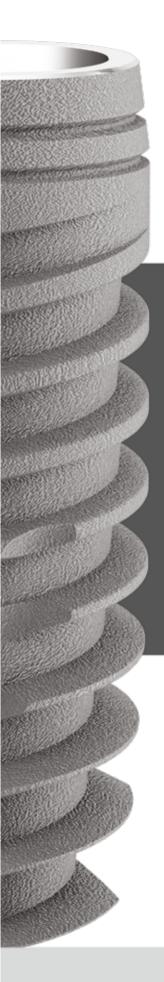














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Doctor Claudio Banzi (B&B Dental founder)

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B&B Dental is well-known for a continuous research and development of innovative and certified products, always absolutely original. Over 20 years of experience that make B&B Dental very appreciated by doctors and dental operators worldwide.



导引植牙术

Author: Dott. Francesco Giardina

植体学是一门研究修复牙齿缺失的牙科学科,因为各种原因而在缺牙的部位植入植体,效果自然可媲美真牙。由此可知植体学是一门专为假牙膺复的外科,没有植体膺复计划,手术就无法施行。

仅仅数年以前,要执行精准和成功的手术,很大程度 上取决于外科医师的经验、专业和技术,而医师 的技术和经验亦会影响植体在直径和长度上的选择。

近来,信息技术(采用植体设计专用软件,读取 DICOM档案,导出颚骨三维影像)和机械人学(采用 3D印刷技术)的革新改变了上述情况,医师从此 可以:

- 虚拟规划手术和假牙膺复阶段;
- 制作手术模板,利用固定其上的刚性导引,将植体置入到虚拟规划好的位置、角度和深度。过程使用专用配备和钻针,钻针上有操作部件以及为模板上的刚性导引而设的精确同轴导引管(图2)
- 制作预构建的假牙: 将手术模板放到事先做好的石膏模型上, 进行「石膏手术」制作临时的假牙, 假牙经虚拟设计, 可在导入植体后立即镶嵌到病人口中(立即受力)。

本文将会讲述軟件輔助導引植牙和軟件輔助導引植體膺復。



图1

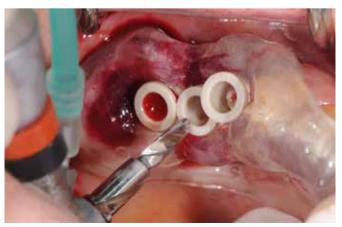


图2

个案

一名63歲女士罹患上顎两侧無牙,没有禁忌病史, 坚决要求采取固定式植体膺复治疗。置入植体前九 个月透过自体骨移植在上颚两侧施行大型的上颚窦提 升术。因此我们决定进行软件辅助导引植牙,没有 采取立即受力,在缺牙的地方一共置入六个植体, 分别为每边三个。

在病人口中装上手术模板后(固定在门牙之上,以确保模板贴合和稳固,这是施行手术的必要条件)(图1),使用导引进行粘膜环切后,移除黏膜导管。先在每边中间准备手术齿槽(图2),透用模板并使用紧固在植体上的装配工具置入首两个植体。这个步骤目的是将模板永久的固定,以防发生意外移位。

模板固定以后,透过其余导引重复以上步骤。



置入植体后(图3), 移走装配工具, 拧开植体和模板上的连接螺钉, 检查植体位置是否正确(图4)。手术以安装愈合螺帽的一贯方式作结。

在手术项目所有阶段都精准进行下,下述手术的做法都是简单又安全的,复杂的手术能在相对短时间内完成(60-90分钟完成有6-8个植体的全口植牙),同时最高的可预测性亦得以维持。此外,使用可以即时镶嵌的固定式预构建假牙

(在解剖及功能状态允许之下)不但可以大大改善 美观,更可使功能负荷下的植体一骨接口加快愈合。



图5



图3



图4



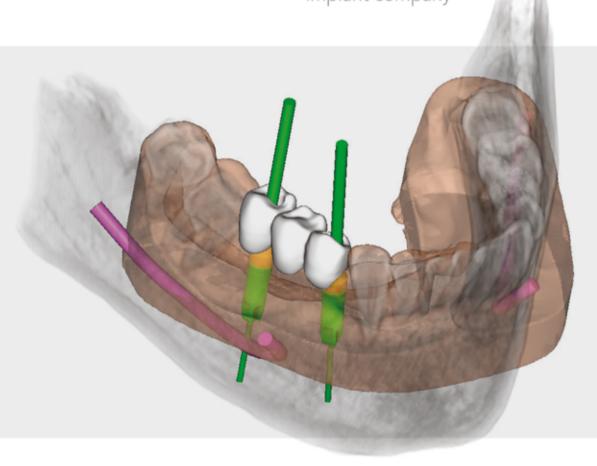
图(



图7







DURAVIT COMPUTER-GUIDED SURGERY





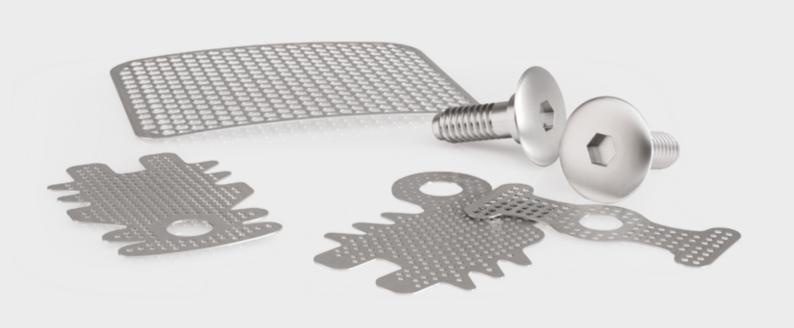


B&B DENTAL implant company

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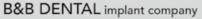
BONE REGENERATION MATERIAL











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and in terms of design.

Medesy

MEDESY is an Italian company manufacturing high quality dental, surgical and orthodontic instruments. A third generation family company located in Maniago, the knives district famous worldwide for its 600-years tradition and know-how in the manufacture of blades and cutting tools of the finest quality. Medesy is nowadays firmly present and appreciated in more than 105 international Countries for the excellent quality of its products refined in all the details, from a technical point of view





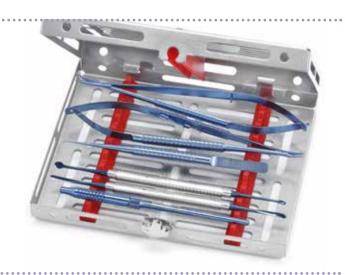
Medesy manufactures a wide range of instruments easily covering all the dentistry specialties. To facilitate everyday tasks of the professionals the company also selects the most suitable instruments for each discipline and presents them organized in ergonomic trays. Here below some examples of these kits Gammafix, the new range of sterilization trays ensuring a perfectly safe cleaning and sterilization process.

• Micro periodontal surgery kit

Nowadays periodontology has become extremely specialized, more complex and advanced thanks to the most recent developments in the treatment techniques and has created a demand for more sophisticated surgical instruments far more suitable for accurate dental interventions.

Medesy has replied to the precise needs of the professionals with a new specific kit created uniquely for periodontal micro surgery, a **combination of instruments made in titanium**, extremely light and purer than steel.

The kit has been specifically conceived for microsurgery and includes instruments which have been developed to guarantee maximal precision and reliability (Code 1671/7 kit)



• Micro-surgical tweezers

Range of 5 different micro-surgical tweezers , conceived to fulfil the ever growing demand for more sensitive and finer microsurgical instruments; main technical features:

- Tungsten carbide inserts;
- Diamond dusted tips:
- 0,7 mm hole
- 1x2 teeth
- Standard serration

The ultra-thin tips ensure a precise and firm grip of the tissue fragments and also a wider visual field (Codes 1063 & 1064)

Peri-implantitis kit

The bacterial aggression observed on the neck portion of the implants is similar to the bacterial aggression noticeable at the mucogingival junction of the tooth.

The stainless steel instruments may contaminate the titanium made implants while plastic instruments do not fully remove the failing tissues around the implant.

Hence the need of using instruments made of Titanium, the unique solution for a real efficient and fully safe handling on and close to the implants sites. Blue colour for a simple and fast identification of titanium tips (kit code: 1671/3)





Ortho Advanced Kit

Medesy presents the new line of Orthodontic pliers, Century Line, whose some of the main features are the following:

- finely manufactured through a sophisticated handcrafted BOX-JOINT system which provides higher stability to the pliers, ensures safer use, longer duration and preserves the tips perfectly aligned;
- note the **new neat Rhombus design** for MEDESY'S distal ends: a lighter and thinner shape for optimal performance;
- **TC** inserts on cutters and on distal ends obtained by using the most advanced electro-welding technological processes;
- A special **glass-microspheres surface treatment** adds an antiglare and elegant finishing to the instrument

Medesy produces a wide range of cutters and distal ends offering different cutting functions. Medesy created a special Orthodontic kit which includes the most common basic pliers and instruments for performing an orthodontic treatment.

Excellent for Orthodontics specialists (kit code: 1680/2)

Today more than 3.000 instruments, some of them covered by an international patent, are successfully on the market proving that Medesy commitment on innovation is the right formula to better fulfil the needs of modern dentistry. The entire Medesy team takes pleasure in looking after all its customers with a personalized attention and punctual pre and post sales-service.

Our know-how, expertise and above a deep passion for our instruments are at your full service to provide you just with the Best. Always. Everywhere.



MEDESY s.r.l.

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作者: Michela Adinolfi

告诉我们关于GCOMM的历史?

GCOMM位于意大利布里安扎区,这是意大利传统制造业的基地。我们是一家牙科设备配件的制造商,尤其专注于研发和生产牙科口腔灯和电动马达。经过20多年的发展,我们赢得了客户的肯定和市场声誉。

GCOMM的座右铭是品质、设计、创新、它是如何影响你们的活动?

品质、设计、创新是我们今天区别于其他厂家的一个准则。在遵循国际卫生标准和环境安全准则的前提下,我们致力于为客户制造有竞争力,可靠的高质产品。在设计上方便医生操作的同时也考虑为病人提供一个舒适的治疗环境。为确保产品质量以及生产的灵活性,我们严格监控和协调项目部、技术部和生产部的各个环节。我们保障优质的售前售后服务。同时我们根据不同的客户需求设计和生产不同的产品。

关怀客户和对产品的热诚是我们成长并通向成功的基础,目前我们的产品远销到全球30多个国家和地区,我们决心把GCOMM品牌扩展到全球更多的区域。

口腔灯是你们的核心产品、不同的型号如何 满足不同的需求?

我们特别关注医生的工作质量。这个使命激发了我们对口腔灯的设计和生产。例如,爱睿视(Iris View)手术灯的格言是: "我们的目标,您的工作"

我们相信口腔治疗的质量与能否观察到的操作区域内最细微的细节密切相关。基于这个理念,一个带有内置全高清(分辨率:1920x1080px),自动对焦摄像功能,并可以30倍放大效果观察整个操作区域的口腔多功能操作灯爱睿视(Iris View)应运而生。



爱睿视(Iris View)可以精密观察操作区域,重点突出裸眼难以观察到的细节,增强专业人员的视觉观察能力并可有效缓解眼部疲劳,改进工作方式和工作流程。



图: 爱睿视(Iris View)手术灯

体文件的分类和保存变的十分必要。爱睿视(Iris View)提供了一个以高分辨率记录并传输操作过程的机会。而且,视频信号可以和多种设备兼容。 记录和查看操作过程在多种学术场合都十分有用,比如临床会诊,学术大会以及大学演讲等。

牙科临床流程不断地数字化,使得信息交互以及多媒

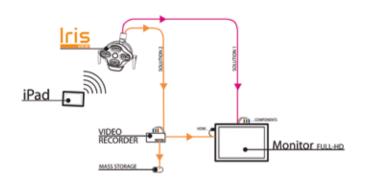


图: 视频信号可以和多种设备兼容

摄像机的使用促进了医生及相关专业人员之间的交流。 在诊疗过程中,病患可以通过显示器清晰地展示出来,对问题的理解进而变得简单和直接。同时,在治疗期间,专业人员可实时地跟踪操作进展,并对最终的效果进行评定。

爱睿视(Iris View)提高了您每日工作的舒适度。通过显示器直视操作区域,您工作起来会非常舒适。 牙医不需要长时间以不正确的姿势倾向病人,只需坐直操作,从而减少了脊柱压力和常见的因操作过程中姿势不正确而患上职业病的风险,如宫颈问题,腰部疼痛和畸形等。



图: 摄像机的使用

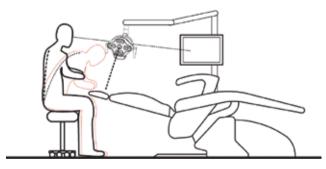


图: 完全舒适

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根据医生的需求,通过下载Mylightapp的软件可以在IPAD进行操控手术灯,也可以在手术灯的按键板直接操控。连接手术灯的内置WIFI,护士可以通过IPAD设置光照度而避免手触手术灯按钮,达到卫生标准。



图: My Light app

色温的常规范围是4200~6000开尔文 (K), 这个调整范围有利于更明显地区分软组织。最新的研究证明医生专注力随着色温的增加而加强,从而减少眼睛的过度疲劳。

通过控制板或者IPAD可以方便地选择三个预设功能程序:

- 防树脂预先固化模式: 3000K, 最大化减少蓝光发光, 降低树脂固化速度。
- 外科治疗模式: 4500K,最佳地显示软组织的色差, 更好的区分牙龈、血液和牙周组织的深浅。
- 比色模式: 5500K,结合冷LED光和暖LED光,使色温调整最大化,有助于牙医选择合适的波长进行牙齿镶复治疗。

其它重要特征:

- 光照度: 8000~35000勒克斯光照度范围有利于医生舒缓眼睛疲劳。
- 无影效果:每个LED光源透过几何图形设计的反光镜照射出的光线柔均匀并且没有光影。
- 低消耗和长寿命: 低电流和电压(功率少于20瓦特)的输出减少热量的排放,减轻散热器的负荷。LED寿命比卤素灯长,大约50000小时,而传统的灯寿命只有3000~5000小时。

手柄的线条柔和,表面光滑,可以轻易取出和消毒, 保持干净和卫生。

- 辐射: 灯光没有紫外线辐射。
- 人类工程学的意大利设计: 生产的过程确保手术灯在 拆离和伸展时候的坚固性和耐用性。
- 根据治疗椅,吊顶和落地等不同的安装方法,手术灯 有不同的RAL色号的选择。
- •新: 爱睿视(Iris View)的灯头有三位转轴,可以转向任意的方向。

然后介绍另一款LED口腔灯POLARIS。

POLARIS是口腔灯LED技术应用的先锋者:它包含了爱睿视的很多特征:色温调节范围,光学效应,低消耗长寿命,没有辐射,转向灵活,人类工程学的意大利设计。POLARIS还有其他选配功能:三位转轴运动方向,防树脂预先固化功能,以及加装多功能镜子。



图: LED口腔灯POLARIS

高效的美白仪系统COREWHITE可以轻易地安装在POLARIS上,只需要把其中一支手柄取出,不需要任何的配件支持,直接将美白仪安装上去就可以灵活使用。 光照度可以满足不同的手术需要。最大的功率输出是2000兆瓦。特殊的过滤器可以减少光斑的红外线。





图: 美白仪系统COREWHITE

GCOMM同时也生产卤素口腔灯 ISA。

它是人类工程学的设计,具有现代感,容易拆卸清洁。

- 它是一款很容易操作的口腔灯,光线和谐,光色舒适。
- 完美的光斑和冷光
- 人类工程学的意大利设计: 生产材料主要是铝; 结构牢固耐用; 树脂材料的反光片不容易断裂并且方便清洁。

根据治疗椅,吊顶和落地等不同的安装方法,口腔灯有多种不同的RAL色号选择 (RAL 9010,9002,9016,7047等)。



图: 卤素口腔灯 ISA

卤素口腔灯还包括型号 VISION。

VISION是基本型号,是GCOMM最早推出的第一款 卤素灯,在市场已经20多年了。它简单,功能稳定可靠;特殊材料制造的反光片使光斑没有阴影和瑕疵,照射出冷白光。

有以下选配:

- 调节光照度开关: 15000和25000勒克斯的转换。
- 计电器的安装: 可以在15000和25000勒克斯之间选择适合的光照度。
- 感应开关的安装: 口腔灯的开关可以通过感应控制。 根据治疗椅,吊顶和落地等不同的安装方法,口腔灯有多种不同的RAL色号选择(RAL 9010,9002,9016,7047等)。



图: 卤素口腔灯 VISION

Silfradent

CGF浓缩生长因子:学术方案和性质特征

CGF是自体血小板浓缩液,由Sacco在2006年研发, 他借助一个离心机装置(该装置是由意大利 Forli的Silfradent 有限公司生产的MEDIFUGE200离心机)用一个标准化的简易分离法,在没有任何 外源附加物质的情况下, 将它从血液样本中分离出来。该CGF的主要特点在于它的一致性: 是 一个富含纤维蛋白的有机基体, 它可以"捕捉" 血小板、白血球和生长因子, 在再生过程中, 这些 元素都起着很重要的作用。

CGF-(浓缩生长因子)

CGF的突出特点:

- •操作简单,安全,经济
- •天然-100%的自体
- •粗纤维蛋白基质
- •白细胞、血小板和生长因子
- •可变的释放动能
- •用于骨移植材料矩阵结构中

CGF可以给再生医学领域的操作提供有价值的帮助,以加快再生的过程。其实这种生长因子浓缩显示出极大的可再生性和通用性(Sohn等人,于2009年)。它的用途已经被使用于各种不同的情况下和范围内,从填充拔牙窝(Tadić等人,于2014年),到填充膀胱切除后的空腔(Mirković等人,于2015年),或用于上颌窦的抬高手术中(Kim等人,于2014年,Del Fabbro等人,于2013;Sohn等人,于2011年)。此外,它还可以单独使用,或与自体骨粒子或生物材料一起使用(Gheno等人,于2014年)。一些学者建议与CGF一起弄湿植入物的表面,来加速骨整合(Siebrecht等人,于2002年)。

- •用扫描电子显微镜(SEM)研究表明, CGF是一个由薄纤维状元素和厚纤维状元素够成的纤维蛋白网(Rodella等人, 在2014年提出)。
- •组织形态学的研究(由BORSANI, Bonazza等人在2015年提出)已经使人们能够看到CGF网状纤维蛋白的结构和CGF中血细胞(白细胞、红细胞和血小板)的分布。 •最后, 对不同的人类细胞系进行体外实验(由BORSANI, Bonazza等人在2015年提出)的结果证明,在培养基中加入CGF, 可以起到刺激细胞增殖的作用(由BORSANI, Bonazza等人, 在2015年提出)。

CGF- 材料

血样采集

- 1.防腐拭子
- 2.全套蝴蝶针
- 3.止血带
- 4.纱布
- 5.补丁
- 6.Vacuette血液收集管(由奥地利克雷姆斯明斯特的 Greiner Bio-One国际有限公司生产)
- 7.试管架









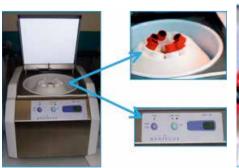








CGF是在不添加任何外源性物质的情况下, 在涂有二氧化硅微粒的聚乙烯试管中(Vacuette试管)制造出来的。 采血后, 立即使用一种特殊的离心机(MEDIFUGE200离心机, 由意大利Forli的Silfradent 有限公司生产)将血液样品进行离心而得。







CGF MEDIFUGE离心机(Silfradent有限公司生产)

特点

- •台式离心机为了专门用于CGF的制备,该机配备了一个可以替换可稳速的转子,并且在加速时始终低于300 RCF。
- •MEDIFUGE离心机可以一次放置多达8个用于制造 CGF(纤维蛋白)的试管:
- •由一个微处理器控制系统来维持恒定的速度;
- •外加一个具有自通风功能的转子系统, 该系统避免了血液样品

暴露在热源之中:

- •在试管破裂的情况下,转子仓、关闭的门和试管夹套子,都可以在生物防护方面提供可靠的生物安全性:
- •试管夹套子和转子都是由易散热、抗静电的材料制成, 因此, 易于清洗和提取, 置于135℃高压灭菌器内消毒即可:
- •MEDIFUGE离心机还配备了一个利用UVC反射光的净化循环系统:
- •净化时间为在转速1000下持续5分钟;
- •电子控制发动机及其内部部件无需维护:
- •噪音水平低于所要求的标准,不超过57分贝。

CGF离心方法(一次离心法)

30"加速

2'2700转/735克

4'2400转/580克

4'2700转/735克

3'3000转/905克

33'减速和停车

离心过程结束时, 血液被分成了三个层次: (1)上层, 有被叫做贫血小板血浆的液态血浆(PPP); (2)红色的下层, 是由于包含了大部分的红细胞所至(RBC); (3)中间层, 由三个部分组成的固体CGF: 上部白色, 下边红色部分(至红细胞的距离约0.5厘米)和中间的"血沉棕黄层*"部分(就是连接白色部分和红色部分的那一段)(图1A,B,C)。

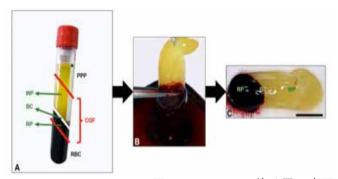


图1ABC: CGF的分层示意图

CGF-形态特征

网状纤维蛋白

利用电子显微镜(SEM),可以观察到网状的纤维蛋白 CGF由薄纤维状元素和厚纤维状元素(图2A)构成。

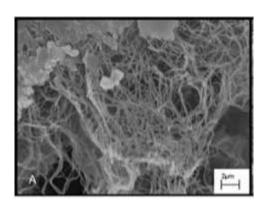
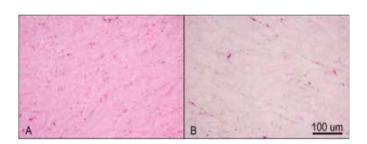


图2A: 电子显微镜下看到的CGF网状纤维蛋白

苏木精 - 伊红染色体, 使我们能够观察到CGF网状纤维蛋白的结构(图3)。图像显示, 网状纤维蛋白的结构在血沉棕黄层和白色层中是不一样的。邻近血沉棕黄层的网状纤维蛋白的网格显得特别严密紧凑(图3A), 而远离棕黄层的网状纤维蛋白的网格则比较粗大(图3B)。



网状纤维蛋白的结构 A)邻近血沉棕黄层;B) 远离棕黄层

血细胞

用迈格林华染色液(图4A)和苏木精 - 伊红(图4B),可以定位到CGF中存在的血细胞。白细胞主要分部在血沉 棕黄层中,并零散分散在CGF中的其它部分;尤其是在CGF的红色部分中;而红细胞则只存在于CGF的红色部分内。

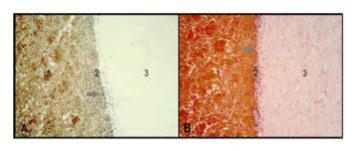
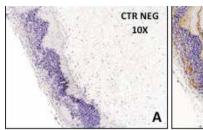


图4:A)迈格林华染色液 B)苏木精-曙红

Silfradent

用CD61血小板标记物进行血小板免疫组化分析(图5B) 发现, 尽管已经发现血小板也聚集在CGF的白色部分, 但主要还是出现在CGF的血沉棕黄层中。



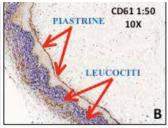


图5: 使用CD61血小板免疫组化分析: A) 阴性对照, 不用 CD61; B) 用CD61

CGF的白色部分(PPP)和红色部分(RBC)之间的界面。

CGF- 体外释放生长因子

根据一些CGF生长因子的体外释放情况表明,每个具体的因子都不一样。事实上,他们中的一部分有一个快速的释放(只需1天),而其他的则释放得比较缓慢(达6-8天的时间)(图6的a,b)。

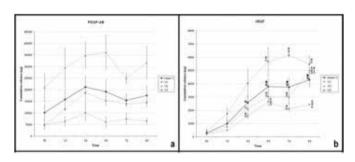


图6:a血小板源性生长因子(PDGF-AB)的释放情况 和b血管内皮生长因子(VEGF)的释放情况

TNF-ß在第1天中即达到最高值, 之后便逐渐下降(图 6c)。可见, 它具有很快的释放动能。

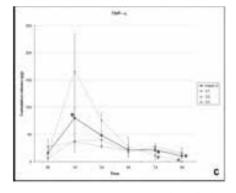


图6:TNF-ß的释放情况

TGF-ß1和BDNF则有一个不断积累的过程(图6 d和6e)

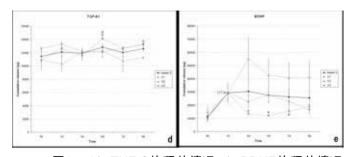


图6:d) TNF-ß的释放情况e) BDNF的释放情况

BMP-2在第8天时的积累达到最大值(图6 F,G)而IGF-1在第6天时的积累达到最大值。

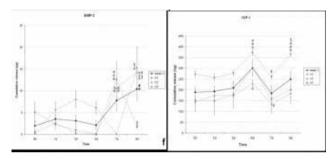


图6:f) BMP-2的释放情况g) IGF-1的释放情况

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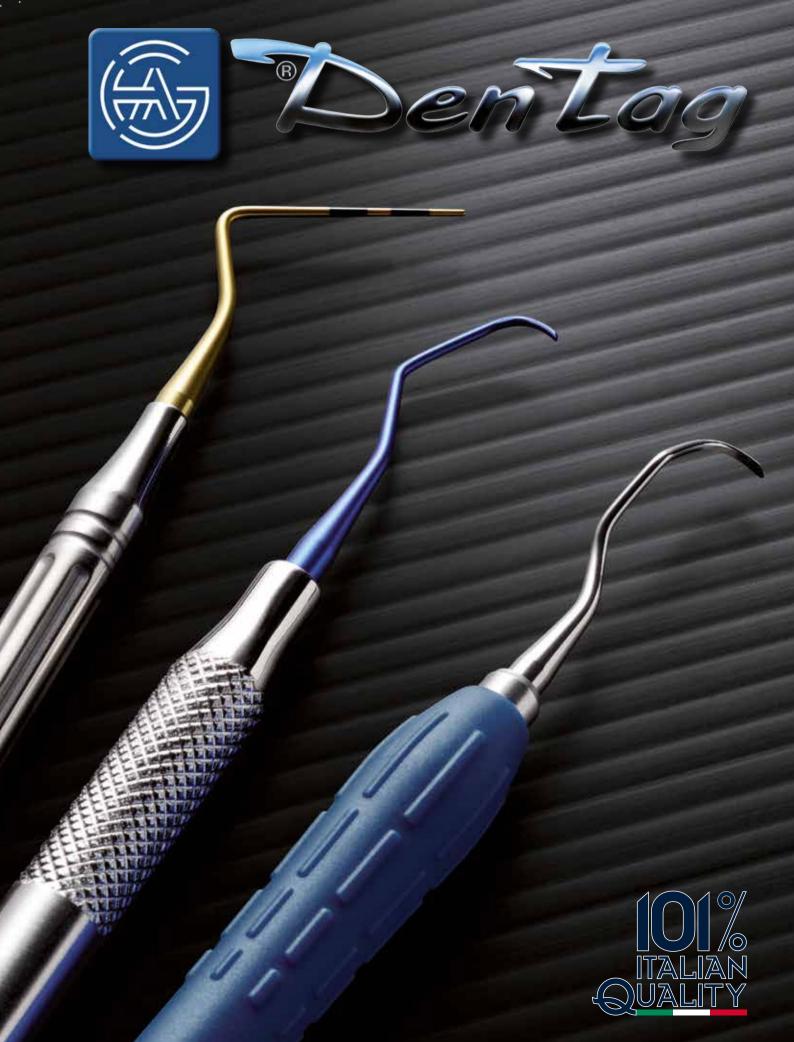
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以传统工艺和制作品质最好的刀和剪刀而闻名于世界的小镇,位于意大利东北部的马尼亚戈, **DenTag**就安家于此。从1950年代初开始,一队制作刀具的专家工匠成立了 **DenTag**,——很容易想象——刀具会作为他们的最初的产品。

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控制和测试,包括中间过程和最终,以及为了保证产品的质量,某些需要精细操作的重要阶段,还是必须交由公司内部经过培训的经验熟练的工匠检查制作。

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公司一直坚持与许多大学和终端用户保持沟通, 便于利用的所有最新的科学与技术技发现, 根据市场的发展需求, 调整生产。

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我们坚信,在第三个新千年,总额的概念和实际的质量是注定要变得越来越重要,特别是迅速成为市场的主导因素的非凡的全球化水平。

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然而,我们也总是意识到市场的变化和新趋势,它们发展迅速,甚至有 时连方式都令人意想不到。

我们不停的收到需要更轻的器械的需求,但同时要求品质和不锈钢一样可靠。因为我们不能使用不同的材料制作工具头,为了减轻器械的重量,我们只能改变工具手柄。出于这个原因,我们已经开始生产一套新的塑料制成的工具手柄。

显然,这个解决方案以前被其他公司采用过。因此,我们设计了这个新系列的工具手柄,从现有的工艺水平的研究开始,尝试利用已有优势,如果可能,提高已肯定功能,改进可能犯过的错误。

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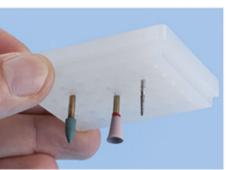
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自1993年成立至今,马克牙科(MaCo Dental Care)进入国际牙科器械市场中已超过20年之久。在这些年中,由于我们一直坚持着必胜的信念,并凭借产品的可靠度与广泛的产品种类建立了良好的企业信誉,这使我公司在国际市场中产生了无可置疑的广泛影响。

这家意大利公司的诞生始于其创始人Josè Felix Conte的创业意愿,作为一个牙科器械的实际操作者,他一直希望借助自己的丰富经验来创造属于自己的品牌。

就这样,马克牙科开始了它的创业之路。起初,作为一个国际市场上的牙科器械分销商来销售牙科产品;后来,公司决定开始由自己来生产牙科种植器械。

不久,就在那不勒斯以南不到100公里的小镇Buccino的工业园区内,建起了一个占地6000平米,并配备有先进设备和机器的工厂。在质量管理体系中,我们把器械是否具有最高的有效性和安全性作为标准,并保证可以毫无阻碍地通过ISO13485质量认证来获得资格证书,我们的所有产品都印有CE标识。

经过多年,马克牙科已经建立了其自己的产品目录,到 今天为止,其已上市的种植棒有六个不同的系列,还有 另外两个最新的产品也将马上进入市场,这将给牙科专 家们提供更多的选择,以满足他们在每个不同病例中的 特殊需求。 Maco



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马克牙科 (Maco Dental Care) 今年 也向市场推出了代表着他们创新能力的 产品,通过置入基台切换口,马克牙科进行 了对其最好的内六角种植棒Seventeen 系列的改进;这个创新最终使马克牙科 又向市场推出了两个新的种植棒系列。 其中 Conical Active 系列的特征是其锥 形锁柱的角度为8°,由于其具有防旋内 六方角并利用双螺旋原理, 保证了该系 列的种植棒在各种类型骨质中的稳定性。 另一个系列L'IM Macon则是一个短小 具有莫氏锥体的种植棒,他的特征之一是 容易使用,还能在不用紧固螺丝的情况下 保证假体部件的稳定性。两种类型种植棒 的表面均经过SLA技术处理(实际操作步骤 由本公司根据产品需要进行修改制定) 马克牙科这些高质量的产品无疑地给牙科 操作者们提供了一系列完整的假体部件和 专用外科手术套件。





马克牙科的总部设在Buccino,这些年来公司能够健康成长,不仅要归功于其自己投入种植器械的生产,可能它的商业发展策略扮演了还要更重要的角色。

事实上,马克牙科(MacoDental Care)的种植器械已经在市场上获得了越来越稳固的市场份额,他们的产品可以在世界各地广泛传播,证明了选择既保证相当高的质量水平又维持一个实惠的价格是保证成功的途径。在世界上的很多国家里,马克牙科(MacoDental Care)是通过参加行业内的各种国际展会和峰会来推广其产品的,通过这种方式,我们已经在销售方面取得了骄人的成绩。当然,我们还用一些其他途行,比如通过在当地建立分公司的形式来加强母公司的销售量,马克牙科(Maco Dental Care)墨西哥分公司的建立就是其中的一个例子,这几年来,在墨西哥的牙种植业中马克牙科已经变成了一个众所周知的品牌。

鉴于此因,公司还选择在墨西哥召开了本公司最早的两个国际研讨会。在阿卡普尔斯和维卡克鲁斯各举办了一个国际研讨会,两个研讨会均在行业内引起了很大反响,而且有越来越多参会者的趋势。这种合作形式不仅给第三次研讨会的召开奠定了基础,还使我们最后决定多安排一整个星期的培训课、会议和外科实习等活动给与会者,这期间分别由12个墨西哥的专业人士和马克牙科(MaCo Dental Care)派出的意大利意见领袖来负责主讲课程和主持活动。

借助在墨西哥取得的成功经验,马克牙科在其他国家也推行了同样的方法:比如在哥伦比亚的卡里市建立了第一个专门为牙医和牙科操作人员的继续教育培训中心,此外,马克牙科在西班牙的影响于几年前就已经得到了很好的巩固;今年的一月份本公司在摩洛哥玛拉客齐召开的第一个牙科和种植洲际会议中发挥了主导作用。

马克牙科最近的一个好消息是设在圣皮得堡的马克牙科俄罗斯的成立。伴随着这些成功经验,马克牙科(Maco Dental Care)已经把他的产品成功推广到了包括欧洲、北非、中东和南美等地区。

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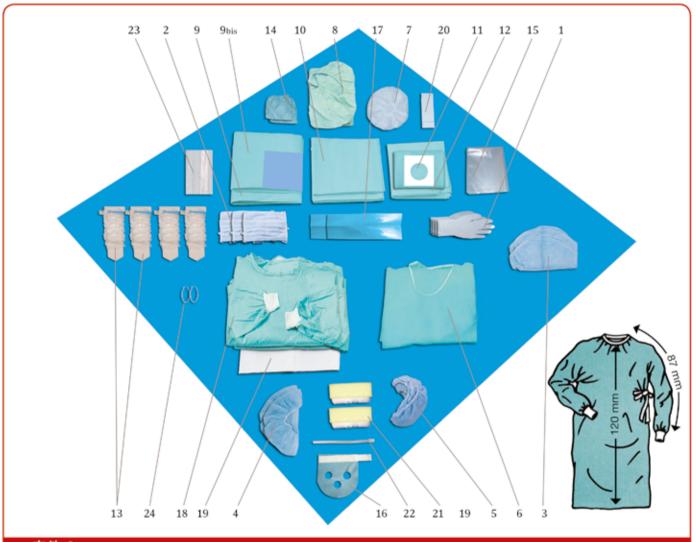


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- 16. 接管架带不干胶 (1)
- 17. 轻粘蓝色屏障膜
 - 2 张10 cm x 30 cm (2)
- 18. SMMS 手术服 L 号 (2)
- 19. 擦手巾(2)
- 20. 胶带700 mm x 50 mm (2)
- 21. 外科海绵刷 (2)
- 22. 排唾液泵 (1)
- 23. Ice System 袋 (1)
- 24. 无胶乳橡筋 (2)



First Impressions

Dr. Freedman offers a brief summary of new and exciting products and technologies in dentistry, based upon his clinical experience"

George Freedman, DDS, FAACD, FIADFE, FASDA



Dr. George Freedman is a founder and past president of the American Academy of Cosmetic Dentistry, a co-founder of the Canadian Academy for Esthetic Dentistry and a Diplomate of the American Board of Aesthetic Dentistry. He is a Visiting Professor at the MClinDent programme in Restorative and Cosmetic Dentistry, BPP University in London. His most recent textbook, "Contemporary Esthetic Dentistry" is published

by Elsevier. Dr Freedman is the author or co-author of 12 textbooks, more than 700 dental articles, and numerous webinars and CDs and is a Team Member of REALITY. Dr Freedman was recently awarded the Irwin Smigel Prize in Aesthetic Dentistry presented by NYU College of Dentistry. He lectures internationally on dental esthetics, adhesion, desensitization, composites, impression materials and porcelain veneers. A graduate of McGill University in Montreal, Dr. Freedman is a Regent and Fellow of the International Academy for Dental Facial Esthetics and maintains a private practice limited to Esthetic Dentistry in Toronto, Canada

Z-Prime Plus Bisco

There has been a rapid increase in the utilization Zirconia and Alumina metal oxide indirect restorations. Their high strength and physical integrity, even under extreme functional conditions, is well established. The early esthetic problems of this category have largely been solved. Most important for the practitioner, these crowns and bridges can be utilized with existing techniques of preparation and impression taking as well as the more innovative scanning and milling procedures. The major concern, until recently, was the uncertainty of the cementation method for Zirconia and Alumina; existing cementation technologies were NOT compatible with the metal oxide ceramic surfaces, functioning merely as luting (rather than adhesive) agents.

Bisco's Z-Prime Plus is a single-component priming agent used to enhance adhesion between indirect restorative materials and composite resin cements. It is indicated as a surface treatment Zirconia and Alumina, metals, alloys, composites, and endodontic posts. Z-Prime Plus has been designed to develop high bond strengths with both self-cure and light-cure cementation techniques. It has been shown to bond chemically to Zirconia, and significantly enhances the bond strengths of resin cements. The increased adhesive strength of the cement decreases the need for excessive tooth preparation and is ideal for short crown preparations, as well as Zirconia-based Maryland bridges. The convenient single bottle delivery offers easy dispensing and eliminates any possibility of clinical error. The technique is straightforward: I. Clean the internal surfaces of the restoration. 2. Apply a thin layer of Z-Prime Plus to the internal surfaces of the restoration. 3. Air dry 3-5 seconds. 4. Continue with the selected cementation technique. Z-Prime Plus offers excellent Zirconia cementation to the patient and peace of mind to the dentist.





Mirror Image Cosmedent

Provisional restorations must be strong and esthetic, yet easy to remove for final cementation. They must be easy to fabricate (particularly by an auxiliary where permitted) and simple to trim and polish. Ideally, a single provisional material should serve for both single and multiple unit indications. Working with dental practitioners, Cosmedent has recently developed Mirrorlmage, an auto-mixed, two component provisional in cartridges based on multifunctional methacrylic ester 10:1 chemistry. Its physical properties allow thin, translucent, and esthetic margins. Mirrorlmage is free of methyl methacrylate, and thus, it has a minimal exothermic reaction (never rising above 104°F) and low polymerization shrinkage. It has fast working and setting times, fits well, trims easily (for rapid customization), polishes rapidly (minimal oxygen inhibited layer), and requires minimal occlusal adjustment. The faster working and setting times are more comfortable for patients and more efficient for dentists. It is a very stress-free material for fabricating both short and longterm temporary crowns or bridges, inlays, onlays and veneers.

Mirrorlmage has a high degree of flexibility, making it particularly suitable for longer span provisional bridges. It protects the prepared dentition from sensitivity, staining, and other adverse external influences while preserving the occlusal dimension. For extended wear situations, it exhibits good abrasion resistance and excellent color stability. Mirrorlmage looks very natural, and is available in 5 shades (A1, A2, A3, B1 and OM2). It also has a natural fluorescence that shows under UV lighting. It is easy to repair (after it is polymerized) with any light-cure composite after appropriate preparation. Mirrorlmage brings esthetics to provisionals. Both patients (and practitioners) appreciate its high polish, strength, and durability.

Turbo Temp 3 Danville

Provisional materials must be strong enough to withstand normal occlusal forces from several weeks to several months and rigid enough to prevent decementation over the same time period. They must resist staining from a variety of oral discolorants and maintain excellent esthetics throughout their use. And, of course, they must dispense, handle, polymerize and polish with minimum fuss and bother. Turbo Temp 3, recently introduced by Danville, is an enhanced crown and bridge provisional material that offers improved physical properties as well as a lower price to practitioners. It provides predictable temporization for a range of indirect restorations, including single crowns to extended bridges, and polymerizes hard to grip the abutment tightly, eliminating costly recementation appointments. Turbo Temp 3, a syringeable bis-acryl composite chairside provisional material, is easily dispensed with minimal stress on the hands, from a 10:1 cartridge; existing Turbo Temp 2 "guns" are convertible to Turbo Temp 3 with free interchangeable sliders from Danville.

The rapid auto-mix delivery system assures a perfect chemistry every time, accurately reproducing tooth detail for a fully functional provisional restoration. There are 6 shades available, from A3.5 to Bleach white, offering a comprehensive esthetic palate. After the initial in-mouth polymerization (approximately 3 minutes), the material is very easy to trim with a scalpel or a sharp scaler, and in the unlikely case of voids or marginal discrepancies, can be readily repaired with a flowable resin. Turbo Temp 3 polishes and/or glazes to a very smooth finish that is retained throughout the service life of the provisional. Patients often report that these temporary restorations feel "smooth", even after months of continuous wear.







First Impressions

Nano-Brush for Endodontics - Denbur

The use of applicators to access the internal surfaces of a tooth during and after root canal treatment can be rather technique sensitive. Most available brushes are not long enough, non bendable enough to be angulated for comfortable access, not tufted for an effectively even application of cleansers and materials, and may inadvertently leave fiber brush filaments in the canal. Denbur's new Nano-Brush is an innovative applicator that follows the natural anatomy to access the root canal. It can be used to remove the pulp from the chamber, to clean the debris in the canal, or to apply cleansing and restorative materials onto the internal radicular surfaces in the canal. With its non-linting fibers, the Nano-Brush systematically and effectively cleans the root canals, permitting the precision application of materials, expediting more predictable endodontic treatment in a shorter time.

The Nano-Brush promotes deep penetration of resin sealers into the dentinal tubules and lateral canals. Made of a pliable material, the applicator shaft can be bent to any convenient angle, and may be used independently or with the extended access handle. The extension eliminates the need to secure the applicator with a nylon string as the handle gives ample holding space to have full control of the applicator while proceeding with the treatment. The Nano-Brush can be used with the access handle as well. In order to separate the extended handle from Nano-Brush, simply bend the bottle neck area above the access handle, bend again, then twist, bend and twist again. The long extended handle will separate from the access handle of Nano-Brush. Nano-Brush makes the practice of endodontics simpler and more efficient.



SplashMax DenMat

VPS impression materials have been with the dental profession for the past 35 years. While much easier to use than the earlier generation polysulfides (rubber base), they were hydrophobic, and thus performed poorly in the generally wet environment of the human mouth. This was particularly true in the fit-critical region of the sulcus, continually bathed in crevicular fluid. More accurate than alginates, PVS materials were also more difficult to pad-mix. The 1990's brought watershed advances to the impression industry: hydrophilicity and cartridge mixing, eliminating inaccuracies and technique sensitivities. Since then, there have been many advances that have fine-tuned dental impressiontaking, and today, this procedure is faster and easier than ever before.

DenMat has recently introduced SplashMax, delivering highly detailed and accurate impressions, with optimal VPS impression performance, and fewer retakes. It has excellent dimensional accuracy with a 99% recovery after stretching and compression, preventing permanent deformation of the impression after removal from the mouth. High elasticity and tear strength keep the impression from tearing during removal from mouth or separation from model. Instant hydrophilicity offers consistently high-detailed impressions in a moist environment. SplashMax's thixotropic consistency and excellent flow properties make the material self-contouring, and allow it to capture the finest anatomic details. Its wild berry scent reduces the patient's gag reflex, and promotes patient comfort. The material's high contrast colors offer an excellent visual analysis of the polymerized impression. SplashMax is available in a convenient 1:1 automix cartridge delivery system. There are four high contrast viscosities (xlite, lite, medium and heavy) and two polymerization times (2:15 & 4:30). SplashMax is an "everything" VPS impression material featuring instant hydrophilicity, excellent tear strength, high dimensional accuracy, and vibrant contrast colors.



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Vietnam

VIETNAM

Market Updates

Vietnam has an important asset to become one of the most interesting investment destinations globally:

a population of 93 million people, half of whom are below 30 years, internet penetration at 40% and an increasing middle-class, forecasted to double to 33 million by 2020; moreover, the gross domestic product (GDP) per capita is comparable to India and the Philippines, despite wages remain lower than in many other Southeast Asian countries.





Vietnam

Cover Photo

Vietnam Halong

Stock photo © sergwsq

landscape

acroeconomic stability was restored in 2012, although the restructuring of the banking sector and Stateowned enterprises remains a work in progress. GDP growth in the first guarter of 2015 was above expectations, at 6%. The future benefits of the Trans-Pacific Partnership (TPP) and the Regional Comprehensive Economic Partnership (RCEP), currently under negotiation, that will give Vietnam and other ASEAN countries improved access to Japanese and U.S. Markets, as well as the new legislation taking effect in 2015 regarding foreign Bay beautiful sunset ownership of property, bankruptcy and enterprises should help restructuring and support growth.

> Vietnam is also expected to benefit from China's move up the manufacturing value chain.

> The geographical proximity to China make it attractive particularly for more labor-intensive manufacturing segments, allowing them to continue to use their existing supply-chain network.

> It's not a surprise that Vietnam has been targeted by increased foreign direct investment (FDI) flows to the Mekong region, accounting for over 7% of all FDI inflows to ASEAN in 2013 (14.4% excluding Singapore), the fastest growth except Myanmar and Laos. Within the Mekong region, Vietnam attracts the second-largest amount of FDI after Thailand. The manufacturing sector is the biggest recipient, accounting for 70% of FDI flows. Vietnam is being targeted by several big investment projects from other countries:

- Korea: according to the South Korean embassy in Vietnam, Korea has over 4,000 businesses investing in Vietnam. The two countries now have a "strategic partnership" relationship under a free trade agreement that resulted in US\$28.8 billion bilateral trade in 2014. In 2011, Korea officially overtook Japan as the second largest supplier of goods to Vietnam after China. The key imports from Korea include electronic products, equipment and machines, parts and materials. Currently Korea is the largest investor in Vietnam with US\$38 billion, mainly invested in processing and manufacturing, high-tech, real estate, catering, construction, IT and communication. In the last months of 2014, some big South Korean projects were licensed in Vietnam, including the second phase of the US\$3 billion Samsung Thai Nguyen high-tech complex, US\$1.4 billion Samsung CE Complex and a US\$1 bn project invested by Samsung Display in Bac Ninh province.
- Japan, according to the country's trade agency JET-RO, considers Vietnam as the second most attractive investment destination in the Southeast Asia region after Thailand.

A framework of economic cooperation was signed between the two countries in 2012, bringing Japanese business delegations to Vietnam to support lapanese manufacturers to build incubators in Long Duc Industrial Park (Dong Nai province) and Vietnam-Japan Tech Park (Vie-Pan). Moreover, human resource development initiatives were taken in cooperation between the two countries.





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Vietnam

• USA: In the first half of 2014, there were three business delegations, including corporations such as Boeing, Apple, AIG Exxon Mobil visiting Vietnam. Recently, a group of more than 30 enterprises of the US - ASEAN Business Council travelled to Vietnam to find opportunities for cooperation in the field of construction. The TPP agreement is expected to turn the US into the leading investor and partner of Vietnam. In 1997, Ford became the first foreign automaker with an automobile assembly line in Vietnam, with an investment of \$123 millions. In 2014, Ford invested an additional \$6.1 million in its factory in Vietnam to prepare for assembly of the small SUV Ecosport. US investors are also diverting investment from China to Vietnam: in late 2014, Microsoft shifted its smartphone factories from China to Vietnam. To date, 39 production lines from plants in Komarom (Hungary), Beijing, Guangdong (China) and Reynosa (Mexico) have been moved to Bac Ninh province, turning Vietnam into a key point in the global supply chain of this group. With this shift, export sales of Microsoft Vietnam in 2014 reached \$2 billion. Microsoft has 15,000 employees in Vietnam but recently the company announced that it would invest \$3 million in three years for staff development and support of young leaders in Vietnam. Intel is also disbursing \$1 billion of capital in Vietnam, while closing its assembly/test site in Costa Rica to shift to Asia. In late 2014, dual-core CPUs for fourth generation computers were manufactured at Intel Vietnam factory; it is expected that by the end of 2015, 80% of the chips used in computers worldwide will be manufactured in Vietnam. According to the Foreign Investment Department of the Ministry of Planning and Investment, as of February 2015, the US had 729 investment projects in Vietnam with total capital of approximately \$11 billion. In the past five years, bilateral trade between Vietnam and the US has doubled, from \$14.2 billion in 2010 to \$36.3 billion in early 2015.

The Vietnamese tax policy favours investors in posing a lighter burden on businesses than in China and Philippines. The current

average VAT of 10% and corporate income tax of 22% are in line or lower than the surrouding countries. For smaller and medium sized FDI firms with annual revenue lower than US\$952,000, the CIT rate is even more attractive (20%). Regarding expropriation risks, investors are more confident towards Vietnam than China or Thailand, accounting for a better predictability.

However, Vietnam is much less attractive in terms of corruption, regulatory burden and quality of public services and infrastructure. Moreover, labour productivity remains a weakness of the Vietnamese market. It is rated among the lowest in the Asia-Pacific region, lagging behind other neighbouring countries such as Malaysia and Thailand. Labour productivity is an important indicator of a country's competitiveness and economic development and it needs scientific and technological investment to be enhanced. Vietnam's rapid transition from an agricultural economy to a manufacturing hub meant a long reliance on cheap labour and low input costs that has caused a delay in such investments.

One of the biggest deterrent for foreign investors is the foreign ownership limit on Vietnamese companies at 49% and for many popular companies the limit is already full. The absence of a foreign board where companies can trade at a premium the local shares makes finding stocks difficult. As a percentage of GDP, the total market cap of Vietnamese equities is currently 30%. By comparison, Thailand and the Philippines are trading at 116% and 95% of their GDP respectively.

Sources:

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Production Service Vietnam, "VIETNAM BUSINESS NEWS" The Economic Mirror Indochina's – June 2015 - http://produktionsservice-vietnam.com/archiv/6-2015%20PSV%20Newsletter.pdf

Photo

Local people on their bicycle along a rice field. People in Bac Son still use a bicycle as their communal transportation. Bac Son, Vietnam Stock photo © gnomeandi





Poznań, Poland **7-10 September 2016**



Social Media Marketing

SOCIAL MEDIA MARKETING

users' expectations

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Social Media Marketing



ommunications have changed and companies are responding to this evolving interactive scenario by redefining some very important concepts. In this article you will find different suggestions on what we should expect in the next months.

In 2014 you should consider that most of the brands have social media platforms. These changes are reflecting the importance of the customers' voice. As regards the opinions born on the Internet, especially on Facebook or Twitter, we have to admit that they require a fast reply.

Everybody needs fast answers, mostly during start-ups periods, when your brand isn't consolidated enough. If you think that customers using social media expect a response from you within an hour to enjoy a service... This is another reason to go towards customer service direction.

Apparently, during your company's start-up, your brand is still not so famous to support a lot of answers, but you have to consider that about ¼ of users can wait the rest of the day to receive your replies. This is the reason why start-ups must monitor online conversations providing fast answers to users. 2014 has been a very prosperous year regarding the growing use of social channels, both in terms of volume and ways of interaction between people.

In this topic I will try to give different suggestions on what we should expect in the next months. The global population has increased from 7 to 7.2 billion of people and the number of active Internet users has exceeded 3 billion users -12 months ago were 2.5 billion- (with a penetration that has reached 42% of the world population). Active accounts on social media are now more than 2 billion (29% penetration), this means that compared to 12 months ago the percentage has grown by 12%. If we take a look to data regarding mobiles, it is interesting to note that compared to an increase of 5% of mobile users, the number of people who actively use social media from their smartphone has grown of 23% (more than 313 million of people). The growth of these indicators truly represents a global phenomenon.

What happens in Italy? If a level of penetration data is higher than the average (60% vs 42% of the world average), observing the time spent online, we consider that the percentage of people who enters the internet from a desktop is lower than people who browse the net from mobile (2.2 hours per day, compared with an average of 2.7 hours). So, it seems that Italians prefer many sessions of a shorter duration compared to what happens in other countries: globally, the number of pages visited by desktop has decreased by 13% but has increased of 39% by smartphone (and 17% by tablet).

The analysis on the active use of social channels, highlights how year after year is important to let people interact and find the information they are seeking. Today there are more than 2 bil-

lion active accounts on social platforms (with a penetration of 29% of the total population): in Italy the penetration is 46% (the highest value is the one registered in Singapore - 66% - while in France, for example, is 45%, and in Germany 35%). Between all the platforms, the most used is still Facebook (1.36 billion active users), but it is interesting to notice the continuous growth trend of instant messaging services (as WhatsApp, that has exceeded 600 million users, compared to 400 million 12 months ago, Facebook Messenger that is used today by more than 500 million people and Wechat which has almost doubled its userbase, now reaching 468 million users). The big new entry in this ranking is Instagram, which is now used by more than 300 million people.

Italian people spend 6.7 hours a day on the internet (including mobile and personal computers: 2.5 hours are dedicated to the use of social channels against a world average of 2.4 hours (2 hours in France and 1.9 in Spain - to provide the terms of comparison). The 60% of Italians regularly browse the internet and the active accounts on social channels are now 28 million (22 million of logins are made from mobile devices).

Data regarding the access to social channels from mobile have seen the greatest increase in the last 12 months (11%), demonstrating a particular inclination to interact in mobility and actively with content that can be accessed online. We have noticed how WhatsApp and instant messaging platforms are more and more used worldwide, in particular in Italy: considering the total population, the most used service during a month is actually WhatsApp (even more than Facebook).

So, even in Italy, the mobile represents the mean by which people mostly access to platforms relationships and conversations online.

Therefore, Italians use their smartphones to complete various tasks, once delegated to larger screens: the use of video content is growing as well as the use of applications related to social platforms. It is also interesting to observe how the percentages of people seeking information about products to buy and who then actually buy from desktop are identical (39%), while there is a small deviation between those seeking from smartphones and those who complete a purchase by the same device (20% vs 19%). This happens probably because people prefer using personal computers to conclude transactions.

So, despite not being a lover of annual reports, it is interesting to take a look on how important has been 2014 for social medias, in order to understand what is the starting point of this 2015.

Let's start from some aggregated data.

Today nearly 3 out of 10 people are active users of at least one social platform. Social media have effectively reached a penetration of 28% on the total population, exceeding the 2 billion active users:

- Facebook has 1.3 billion users
- Google 343 millions
- 300 millions Linkedin



- Instagram 300 millions
- Twitter 280 millions
- Tumblr 230 millions

These are people who frequently enter these platforms, to which they dedicate more time. The 28% of the time spent online regards social channels (in particular children aged between 15 and 19 spend, on average, three hours a day interacting on social networks and those aged between 20 to 29, on average, two hours a day).

Companies are replying to the evolution of this scenario where they have to interact with people and they are doing it by redefining some important concepts. Five of these are the result of a rationalisation that I want to examine here below:

I. Real-time \neq Right-time

"Real-time marketing" was one of the terms used (and often abused) in recent months, but the focus is shifting now on finding a right-time, rather than the real-time. Even if 2014 has been characterized by the importance of thinking about how to deliver the right audience and the best content when they could create a real value of people.

2. Media and content are not two separate worlds

2014 has been also the year that changed the dynamics of content distribution: the quality of content now requires a dedicated media strategy that applies more leverage on a "copy-paste-do-it-yourself", but planned, anyway.

Each day grows the number of individual content products which are shared not only by users, but also by brands. Therefore is really important to develop together both strategy media and strategy contents in order to ensure visibility in important moments, especially for contents addressed to a specific audience.

Focusing on the brand is a decisive element, as customers identify their interest in products and services through this public spec of the company. Therefore, they become "Leads" in generating conversations that increase positive opinions and valorise the company on the market. The promotion carried out by the brand positioning, outlines the target of the real and the potential consumer. In this way, it is possible to make promotional campaigns more effective through a physiological segmentation of targets by attracting the specific and customized interest of the customer: that motivates the consumer to buy.



MARKET TRENDS

The promotion of content makes possible to segment more precisely and effectively the audience and to ensure that you can reach interesting and interested people at specific times, with content tailored to their needs.

3. The editorial approach is becoming more and more important

Brands are aware of the importance to create quality content which will give birth to a world that can excite and engage people. The 59% of companies expect to increase the budget dedicated to create content during the next 12 months.

4. The word Video doesn't mean only YouTube

Last months of 2014, were characterized by an historic overtake: for the first time Facebook collected more videos visualization than YouTube . This fact is important not only for the data in itself, but even because it represents the growing tendency to enjoy video contents from different platforms: YouTube is not the first media anymore, but right now new tools have appeared besides Facebook, such as Vine and Instagram.

It is important to understand what is the audience section that you want to reach and the project of the content you want to

For example, YouTube is the only platform that has got a very high penetration. But nowadays, there are several factors that we have to consider, as the different methods of access to content from people. And not only are the views to make Facebook an increasingly important channel for the creation of video, but also shares.

As regards Facebook, it has become an important channel for the creation of video not only for the high percentage of views but even for the high level of content sharing.

5. Time to answer.

Apparently, during your company's start-up, your brand isn't famous enough to support a lot of answers, but you have to consider that about a quarter of users can wait the rest of the day to receive your answers. This is the reason why start-ups must monitor online conversations and answer to users faster.

It's time to answer! Why?

Firstly because your potential customers need to receive immediately the information they need and, secondly because there are many information that can be easily reached and you have to reach them before your competitors.



Social Media Marketing



Illustrations

By Silvia Piscopiello

An outlook on the Italian dental industry

The Italian dental industry employs approximately 6,000 workers.

More than half of them work in the manufacturing industry,
while the retail and wholesale distribution sectors employ respectively around
one third and one sixth of the total workforce.



he largest share of the Italian dental production value is for the segment of equipment and devices for dental practices, that accounts for one quarter of the total. It is followed by consumable products, accounting for a slightly lower share and implantology (at a more distant 13%). Apart from x-ray devices, sterilization, hygiene products and consumables for dental technicians, respectively at 9, 7 and 6%, the other categories (precious and non precious metal alloys, equipment and devices for dental technicians, furnishing and lighting) remain around a range of 3 to 4%. Last come the pharmaceuticals and orthodontic products between 1.5 and 2%.

Comparing the growth forecasts for single product segments, it is interesting to note that the most relevant increase rates for 2014 over 2013 are reported for equipment and devices with almost 4% growth forecasted in 2014 (from €355 to 370 million). Moreover, consumable products as a whole enjoy good prospects with growth expected to be just one percentage point below the equipment segment (slightly less than 3%, from €225 to 231 million). The consumables for specialties such as implantology and orthodontics are a little less performing with growth limited to 1.7%, remaining substantially stable around €108 million.



Italian dental industry

At the other end of the chart we may find a negative trend for precious and non-precious alloys, plunging by 8% from €28 to 26 million, and services, whose value is expected to drop by 11% from 10 to 9 million.

The manufacturing sector is mainly destined to exports, accounting for over 60% of the total production value (roughly €740 mn), while the domestic market accounts for less than 40%. These figures confirm the latest years' trend towards an increasing export-oriented focus for the Italian dental manufacturers. It is also worth noticing that the Italian market as a whole, with an estimated value of over €1 billion, is supplied by imports for slightly over 60% of its value. This figure completes the previous picture, signaling the impact of the reduced domestic demand on the manufacturing industry, that tends to sell more in foreign markets than in Italy.

In particular, the remarkable difference between the export and domestic market is evident in the comparison of both sectors across the years 2010-2013. In this period, while sales towards the domestic market dropped by a total Compound Annual Growth Rate (CAGR) of almost 2% (with 3% peaks in 2011-13), the value of exports increased at a CAGR of 6%, reaching €465 million in 2013 and expected to

increase to €490 million in 2014. The export sector registered a 34% growth between 2008 and 2014, meaning a CAGR of almost 5% during this period. The composition of the Italian dental exports reveals that the most successful product segment remains equipment and devices for the dental practice (30%), followed by consumables for the dental practice (26%) and x-ray devices (13%). Their growth in 2014 is expected to be quite variable, with 6% increase for equipment, 4% decrease for consumables and 13% growth for implantology, a rather surprising figure but accounting only for a segment of limited size.

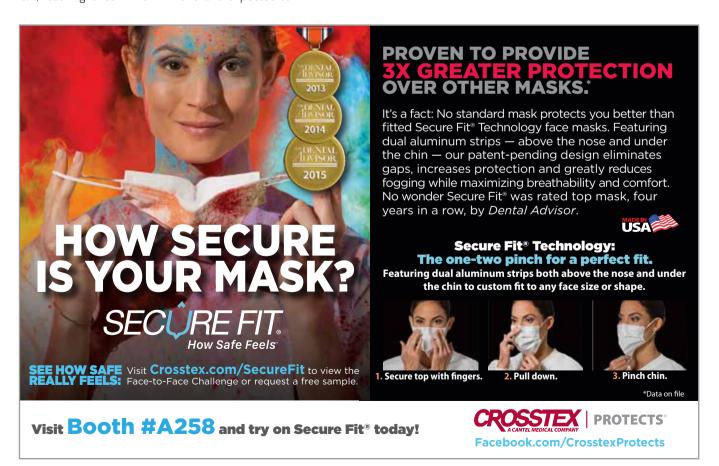
It is also interesting to see how the ratio of equipment and products sold to the domestic market was essentially the same of the exported products in 2008, when the two sectors accounted respectively for 48 and 52% of the total production value. The latter has therefore gained 10 percentage points in just about five years, showing how the contracting internal demand combined with the increasing international recognition gained by the Italian dental production shifted the balance in favour of exportoriented production.

Cover Photo

Beautiful sunrise in San Quirico d'Orcia, Tuscany, Italy Stock photo © Shaiith

Photo

Italy, Venice
Stock photo © Peter Zelei







This is particularly true for some product segments such as equipment and devices for dental practices (including furnishing) and hygiene/sterilisation, where export-oriented production accounts for almost two-third of the total, or x-ray equipment, where it becomes the prevalent destination with 84% export incidence. However, there are other products that show a reverse trend, namely implantology, orthodontics and precious/non-precious metal alloys, whose production is aimed at the domestic market with shares ranging from 70 to 85% (for implantology, the most remarkable product segment showing such a contrasting datum).

The distribution sector was the one suffering the most the contraction of internal demand, as it couldn't compensate the loss with sales in other markets. The trend between 2008 and 2014 was negative by 1.7%, with much of the drop concentrated in the period 2008-10 and 2011-12, but the introduction of new foreign technologies into the market has helped the sector regain some margin. The largest share of the wholesalers are in the product segments of consumables for the dental practice (over 30%), implantology (26%), followed by consumables for dental technicians and equipment for the dental practice at much lower shares (9% and 11%). Wholesalers in segments such as orthodontics, x-ray and alloys remain around 4-5%, followed by very limited numbers in the remaining categories (furnishing and lighting, pharmaceuticals, hygiene/ sterilisation, equipment for dental technicians).

When it comes to imports, after two significant drops occurred in 2009 and in 2012, a sustained 4% growth up to €380 million is forecasted for 2014, supported in particular by the new applications and technologies in the x-ray and CAD/CAM sector. At the same time, sales for large multinationals in implantology and pharmaceuticals stand quite still in terms of annual growth. The biggest import segment is consumables for the dental practice (over 30%), followed by implantology (22%). These two categories alone contribute to more than half of the total value of dental imports, with combined €190 million. Moreover, the categories of consumables for dental technicians, x-ray, equipment for the dental practice and dental technicians and orthodontics account for shares ranging from 8 to 11%.

The end-user market shows some signs of recovery after a series of negative years between 2008 and 2013, but they are still timid. The trend over the last five years is negative as well, but not as much as the industry feared in the midst of the crisis, with CAGR of -1.3%. The sales value follow guite closely the trends and shares of the import value, with sales concentrated in the same categories of consumables and implantology (respectively accounting for €315 and €241 million), with the addition of the segment of equipment for the dental practice, reporting a value of €135 million in 2013. Other important segments in terms of sales value are consumables for dental technicians, x-ray devices and orthodontics (€87 million for the first, around €68 million for the other two segments). Among the remaining categories, only three (equipment for dental technicians, precious/non-precious alloys and hygiene/sterilisation) reported a sales value above €30 million.

In the first quarter of 2015, distributors' spending trends showed a continuation of the preference for consumables rather than devices or equipment (respectively, almost 2% growth on the last quarter of 2014, against 0.3%).

In general terms, the recent crisis has determined a selection among the companies operating in the Italian dental sector. Only one-in-three companies is growing (from70% in 2005), while there has been an increase in the number of shutdowns (from 1% in 2005 to 10% in 2013). This trend is even visible in the export sector, where the share of companies that registered any growth showed a parallel decrease. In this context, however, the size of the company seems to bring an advantage in keeping on a growing path. As for the future outlook, the general sentiment is surely improved in comparison to the last few years, but diffidence remains tangible due to the close relationship of the domestic dental market with the general economic performance of the Italian economy.

Photo

Sunset in Manarola, Cinque Terre, Italy Stock photo © Francesco Ricca Iacomino

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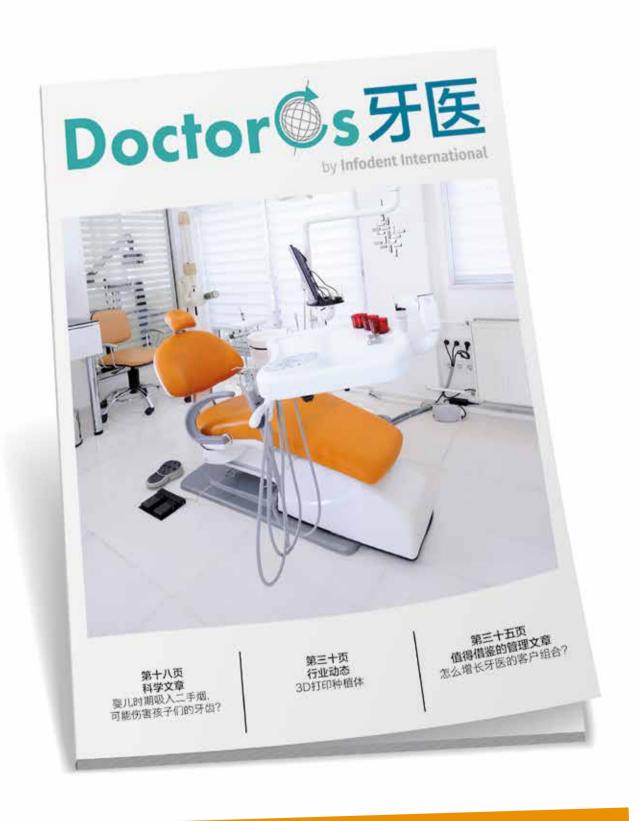
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