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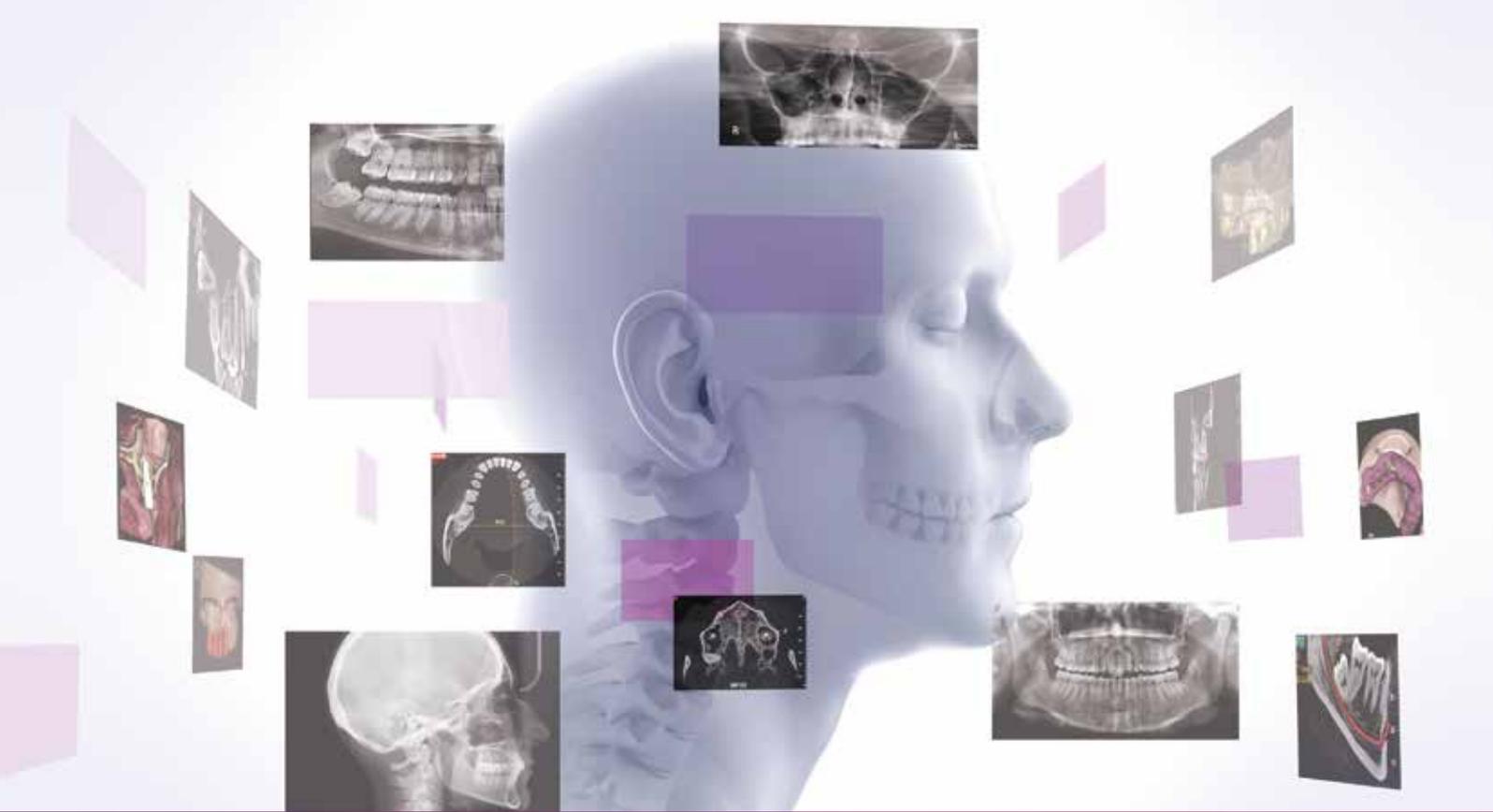


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United at a Distance **EDITORIAL**



A Tiny Island Moving Forward **FOCUS**

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HELPFUL TIPS

Given the current situation worldwide, we warmly invite you to check trade shows dates, venues and booths location listed in this magazine

United at a Distance



As the COVID-19 pandemic unfolds and develops into a tragic and disruptive force in Italy and the rest of the world, I am writing to you from my home, where I am following official guidelines to help contain the spread of the virus. Monitoring the situation carefully, I sincerely hope that you and your family are healthy and safe, fully trusting everyone's commitment to be prudent, responsible and united, because only if we fight together we will be able to defeat this global pandemic, the most tragic of the last 100 years. We are experiencing a very delicate moment in which we are all called to change our daily habits and behaviors, adjusting to a new reality. And in this context, we feel even stronger in our role, our responsibility and the need to be alongside our customers, to help them keep their business running, with new ideas and proposals, during this challenging time. Actively working remotely, all together, is what we have in mind.

Months of preparation and tens of thousands of dollars were lost as the Coronavirus panic led to the last-minute cancellation or postponement of most dental trade fairs around world. But this is a transitory event, and not the financial crisis of 2008 in which most business-to-business companies decided to play it safe and cut their marketing budgets. Now instead, it is time to adopt to a new strategy of shifting the funds allocated to participation in exhibitions to double the investment in online marketing. If you think about it, such a move makes perfect sense. Although it's frustrating to back away from face-to-face interactions, you can offset some of that impact by accelerating your online presence. Research conducted in 2018 by the Center for Exhibition Industry Research (USA) indicated that B2B marketers who participate in industry events allocated nearly 40% of their budgets to exhibitions and industry shows, almost five times more than the 8% spent on online marketing. Even if only a small fraction of the events' budgets is shifted to online marketing, it would translate into a massive growth in web marketing and leads.

While it might be tempting to hold back the budget amid concerns about an impending recession, halting spending now could have an even more crippling impact on your future opportunities. In a crisis like this one, silence is the worst possible response. The conversation will continue with or without you. Even if your customers aren't buying right now, you can stay at the top of their minds by considering their needs and providing value through challenging times. Scientific and technical content on your products, for example, will always be in demand. No matter who your customers are, they will expect to hear a proactive response from you, basic information, like how you are handling the crisis, what they can expect from you in the weeks to come or, if you're open for business, let them know! Continuing to market your business through the Coronavirus can be as simple as letting customers in need know that you're here, and you can provide your product or service like

And in this context, we feel even stronger in our role, our responsibility and the need to be alongside our customers, to help them keep their business running, with new ideas and proposals, during this challenging time.



usual. At some point, the Coronavirus will pass. When that time comes, do you want to be starting from scratch with your marketing again? Or building on the efforts you've already put in for the past few months? We know that most business owners are long-term-minded, so don't let the Coronavirus stop you from that forward-thinking mindset.

We, in Infodent International, are fully operating, continuing our mission of connecting manufacturers with importers worldwide, for now digitally. Doing all we can to keep your projects on schedule, keeping you company with our on-line magazines and their content on oral health markets insights, trade novelties, hot topics and product highlights. Check our dental calendar, in our website, to keep updated with the new dates or cancellations of trade shows around the world. If all trade shows have been cancelled, we have a "Virtual Trade Show" with international companies exhibiting their products and dealers called to visit. In the middle of this unprecedented situation we have found newer opportunities of using remote technology to its fullest for the benefit of all professionals. We are now all looking forward and preparing to return to "business as usual"!

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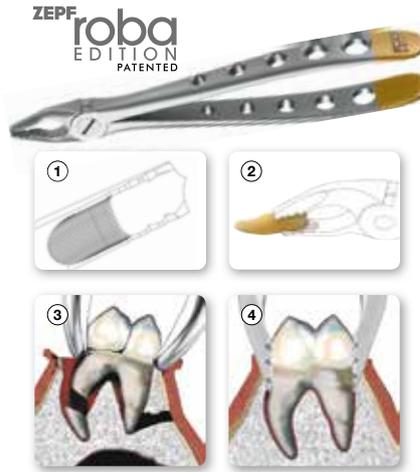




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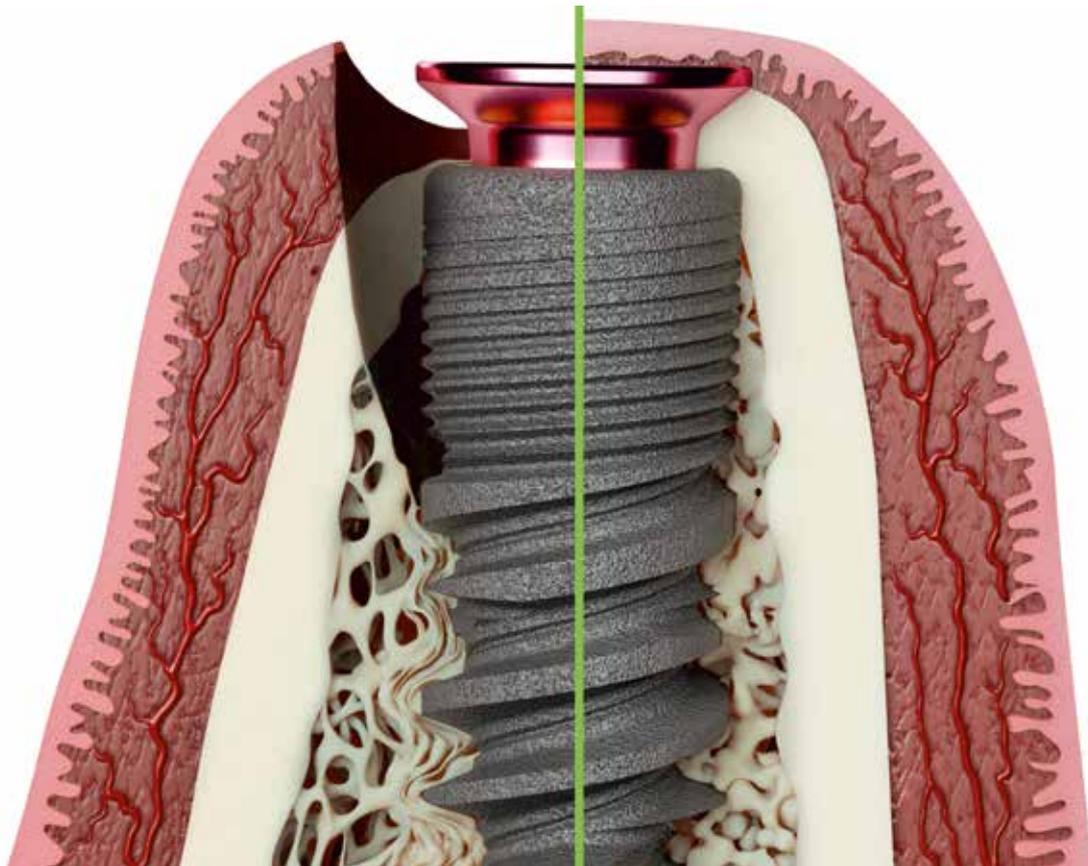
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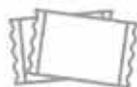
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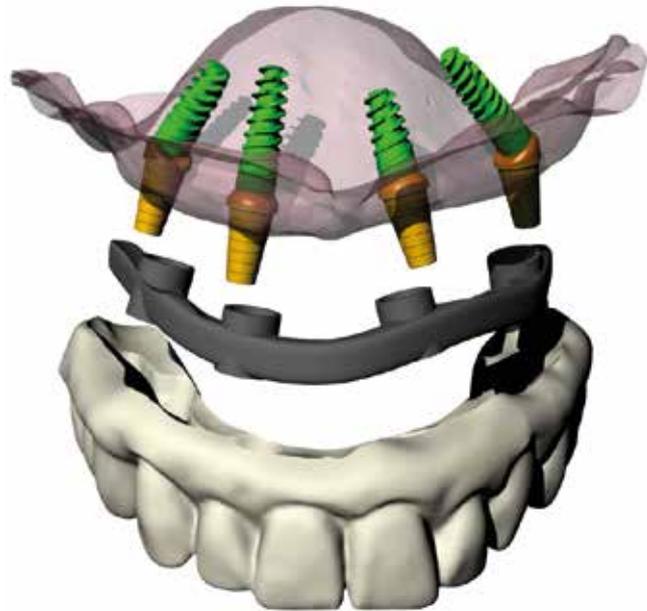
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Thanks to the libraries of the prosthetic components of all the major implant companies included in the RealGUIDE® CAD software and to a simple and intuitive workflow, it is possible to design in a few steps, both permanent restorations and temporary prostheses with immediate loading and export the files in STL format, with orientation for direct management in CAM programs and the manufacturing of customized prostheses.



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HIGHLIGHTS

XTCERA-All in one dental milling machine

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World's Top 5 Dental Milling Machine Manufacturer

Milestone Achieved : 1000 Units Sold In 2019

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X-MILL500

X-MILL300

3D Multilayer

Color: Cervical ↔ Incisal
Transparency: 43% → 55%
Strength(MPa): > 1100 → > 750

SHT Multilayer

Color: Cervical ↔ Incisal
Transparency: 47%
Strength(MPa): > 1050

SHT Pre-shaded

Color: Pre-colored
Transparency: 47%
Strength(MPa): > 1050

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3D. takes your diagnoses to a higher level, an essential dimension to give more value to your job. Thanks to 10 FOV (from 4x4 to 13x16 cm), Hyperion X9 pro is the ideal tool to meet all clinical needs, including temporomandibular joint examinations and ENT applications.

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- **Regular (High Resolution)** primary diagnosis and treatment planning
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Reference:	080214	080216
Height:	300 mm	275 mm
Length:	360 mm	360 mm
Width:	330 mm	330 mm
Weight:	2.6 kg	2.8 kg
Voltage:	230 V, 50/60 Hz	230 V, 50/60 Hz
Light:	Interior LED	Interior LED

The generous viewing window, the multipoint LED lighting which eliminates shadows while offering a colour tone similar to sunlight.

The suction hood is strategically located so that it doesn't obstruct. The hood is connected to an external suction tube at the rear through a pivotable outlet.



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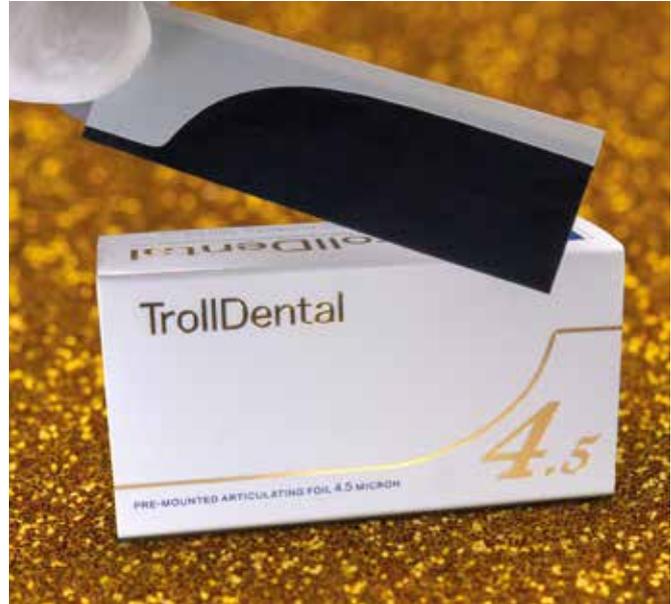
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TrollFoil has been on the market for 20 years, proving itself with dentists every day.

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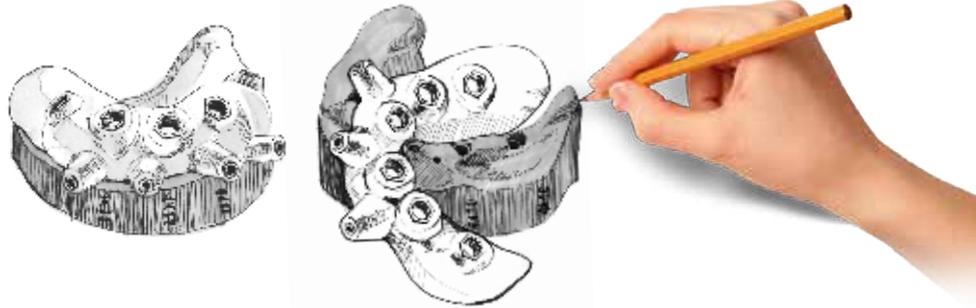
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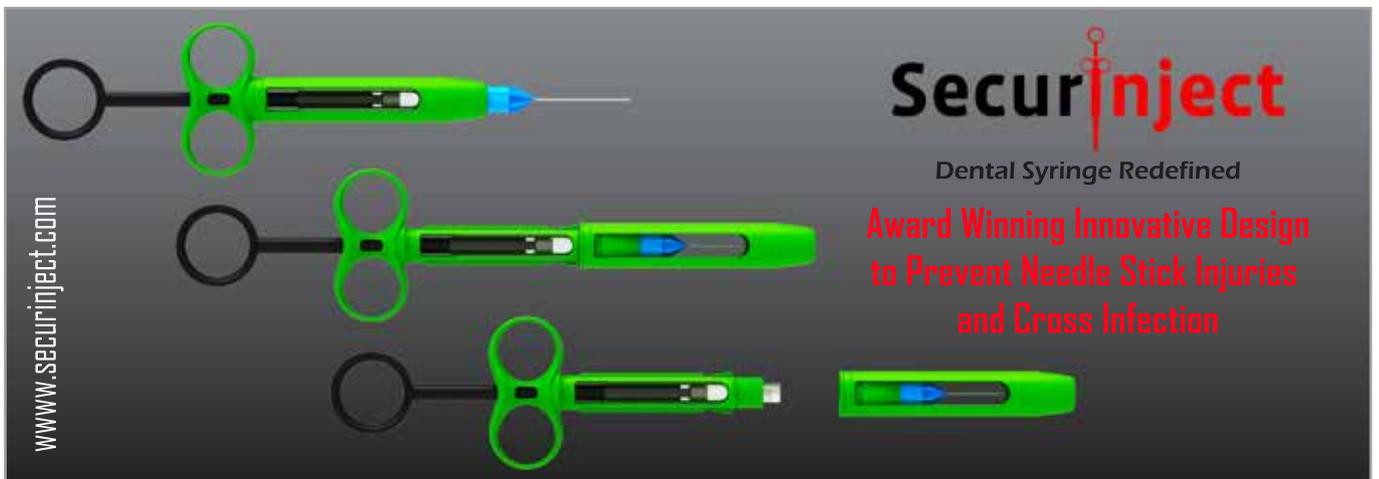
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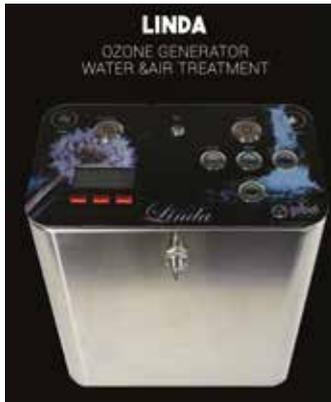
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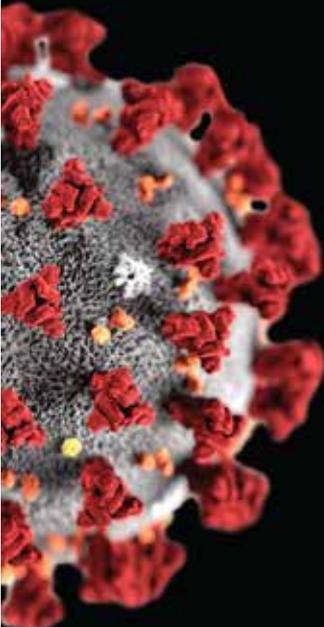
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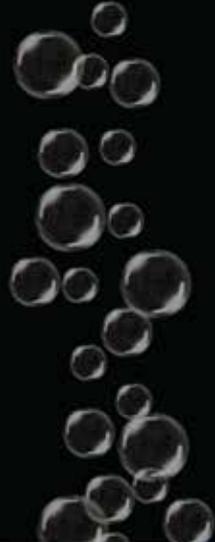
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The platelet growth factors have extremely high efficiency in every biological process, in which it is necessary to stimulate tissue repair, growth and modulation of cell life and self-control of the immune system. The technique of platelet concentrates moves plasma rich in growth factors from the blood to the treatment area, speeding and tracking the natural processes of healing.

Concentrated Growth Factors (CGF), developed by Sacco in 2006, is a special type of platelet preparation with great potential for clinical application.

At the base of the regenerative process, three factors are particularly important: the scaffold (organic, natural or synthetic), growth factors and autologous cells. All these elements are present in the CGF which is obtained by a "one-step" centrifugation process of the blood samples, using a special centrifuge (Medifuge Mf 200, Silfradent srl, Forli, Italy), without

the addition of exogenous substances. Its main characteristic lies in its consistency; in fact CGF is an organic matrix rich in fibrin, thus more dense than other platelet concentrates, able to "trap" a large amount of platelets, leukocytes and growth factors, (Rodella et al. 2011) showing regenerative properties and versatility.

These features, together with the simple and standardized centrifugation protocol MEDIFUGE, make the CGF a superior autologous product which can be used in different areas of regenerative surgery; for example in dentistry, maxillofacial surgery, cosmetic surgery and orthopedics.

Its clinical efficacy, has so far been demonstrated in various situations ranging from filling of extraction sockets (Tadić et al., 2014), to the filling of the cavities after cystectomy (Mirković et al., 2015), to interventions of sinus lift and augmentation of the crestal profile (Kim et al., 2014; Del Fabbro et al., 2013; Sohn et al., 2011). In addition, CGF features, make it suitable to be used both alone and with bone particulate or autologous biomaterials (Gheno et al., 2014). In conclusion, if it is true that the blood is the "source of life" for the organism, platelets in it play an important role in the body's regenerative processes.

The research, however, does not stop and Silfradent has still in progress studies at several universities in Italy (University of Bari, University of Brescia), Europe (ACTA Amsterdam University, Dental School-Medical University Vienna; University of Warwick - UK) and also outside Europe (IPK center Hospital Havana-Cuba; Almejiera center Hospital Havana-Cuba).



CGF biological membrane



Bio-Poncho with CGF



Fibrin clots



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FOCUS

A Tiny Island Moving Forward

Author: Silvia Borriello
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GDP
per capita
(EUR)
26,398

Malta's budget surplus reached 3.8% in 2017, higher than any other EU country and fourth highest in the world

Malta's main drawcard is the ease of doing business and the cost of operations on the island, generally 20 to 30% cheaper than the more established European centers, while a company's seed capital may last 3 to 5 times longer

It only gained independence from Britain in 1964



Analysts and international institutions all agree that the country's investment appeal has been crucial in attracting capital from Europe, Asia and the US, positioning Malta as one of

the world's most forward-looking nations. The country's internalization across all sectors, including health, is high on the agenda and will remain a key driver of future growth.

At 1,348 persons per km², Malta has the highest population density in Europe, with population growth over 7% in the last decade, though it remains the smallest EU Member State by population

Strong economic growth and career prospects have attracted a large expat population, with foreign nationals accounting for 12% of the population

WHO's global healthcare ranking marked Malta 5th in the world at the turn of the 21st century. The U.S. and the U.K. ranked 37th and 18th respectively, which illustrates the quality of the Maltese system.

The archipelago is so small that could fit into London five times. The main island, Malta, is 27 km long and measures 14.5 km at its widest point, crossing Malta rarely takes longer than one hour.

Malta is a tiny island located at the southern tip of Europe and on the doorstep of North Africa. Its capital city, Valletta, is both the administrative and business center of the country, while Sliema and St Julian's are the most popular seaside towns. The archipelago also comprises the islands of Gozo, Comino and two uninhabited islets, Cominotto and Filfla. With virtually no natural resources and a population little over 483,000 inhabitants, Malta has always had to be versatile in adapting to the changing realities of the global economy.

Since its membership to the EU (2004) and Eurozone (2008), the island has significantly diversified its economy and the export of services across the EU member states is today a prime driver of economic growth. **Despite its small size, Malta has turned into a hotbed for high-value manufacturing multinationals, global finance firms, pharma producers, IT and software developers, games studios and blockchain start-ups.** Their growth and success helped Malta emerge as one of Europe's best performing economies, accord-

Their growth and success helped Malta emerge as one of Europe's best performing economies, according to the International Monetary Fund.

The country's decision to focus on sector-specific regulations, infrastructure, talent and technologies is paying off and driving investment into Malta.

ing to the International Monetary Fund. The country's decision to focus on sector-specific regulations, infrastructure, talent and technologies is paying off and driving investment into Malta. Finance and insurance are the dominant sectors for foreign direct invest-

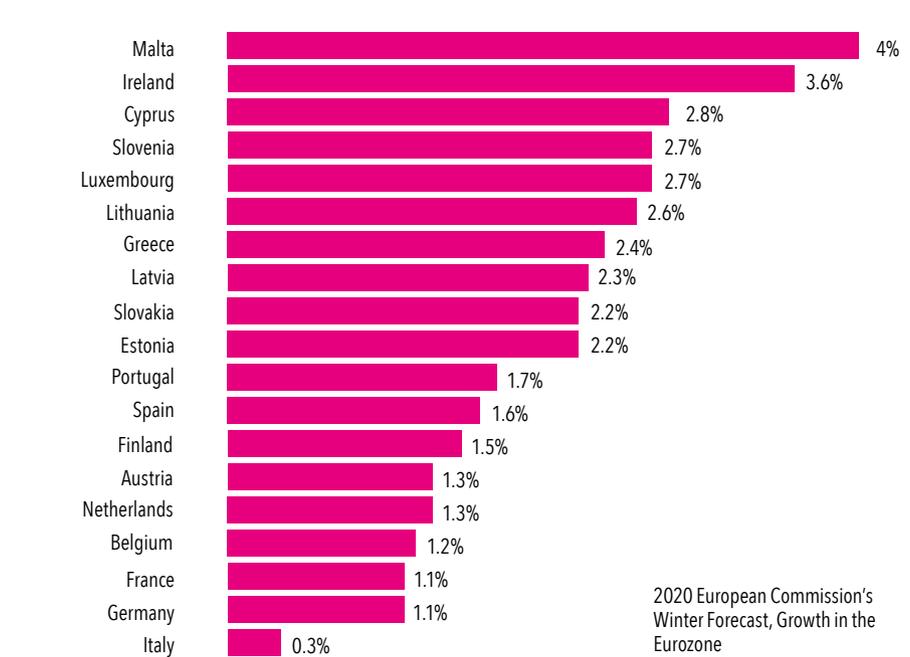
ment (FDI), accounting for around 11% of the country's GDP. Tourism remains a key pillar of the economy, contributing more than 25% of its GDP and the maritime industry is one of the oldest. The country has long recognized that traditional investment incentives are not



enough to attract foreign companies to its shores and is now setting the conditions for the next generation of FDI. Manufacturing is moving into Industry 4.0 and companies comment favorable on Malta's ICT infrastructure and connectivity. Research and development, robotics, blockchain technologies and Internet of Things (IoT) solutions are gaining in importance in Malta's economic mix and are attracting companies from Europe, Asia and beyond. **Entrepreneurs and startups are attracted to Malta due to the island's drive to nurture new industries by providing dedicated regulations.** For instance, Malta's decision to regulate online gaming two decades ago meant it has become the global capital of iGaming (accounting for 10% of the Maltese economy), the place to be for the largest and most innovative players in the industry. The island is working to become a major player in the Blockchain and Distributed Ledger Technologies (DLT) industry. In 2018, blockchain start-ups began to move into Malta after the island introduced the world's first holistic regulatory framework. A new industry, expected to add to GDP growth and create jobs, is the production of medical cannabis, due to lack of regulations in other European countries.

The island has thus bolstered its status of a key business hub in the Euro-Mediterranean region by marrying a still relatively inexpensive and business-friendly environment close to major European and North African markets and a skilled workforce. Malta's reputation as a safe investment location has also been boosted, in contrast to other countries in Southern Europe, which have seen their economies stall amidst the debt crisis. A steady GDP growth within the last six years, hitting historic high of 7.4% in 2015 and 5% in 2016, and record-low unemployment (3.5%) have helped the island emerge as the most dynamic in the Eurozone and even if growth is projected to 4% in 2020, Maltese economy remains robust, still comfortably outperforming the Eurozone average.

Strong economic growth has transformed Malta into a confident nation which is now seeking to strengthen its position and compete at an international level, quietly positioning itself as an attractive alternative for companies seeking an address in the European Union. **The government has committed itself to making Malta the hub of choice for a wide range of sectors turning it from the best in Eu-**



Source: https://www.corriere.it/economia/finanza/20_febbraio_13/crescita-2020-italia-ultima-ue-pil-crescera-solo-03per cento-stime-commissione-975a1318-4e49-11ea-977d-98a8d6c00ea5.shtml

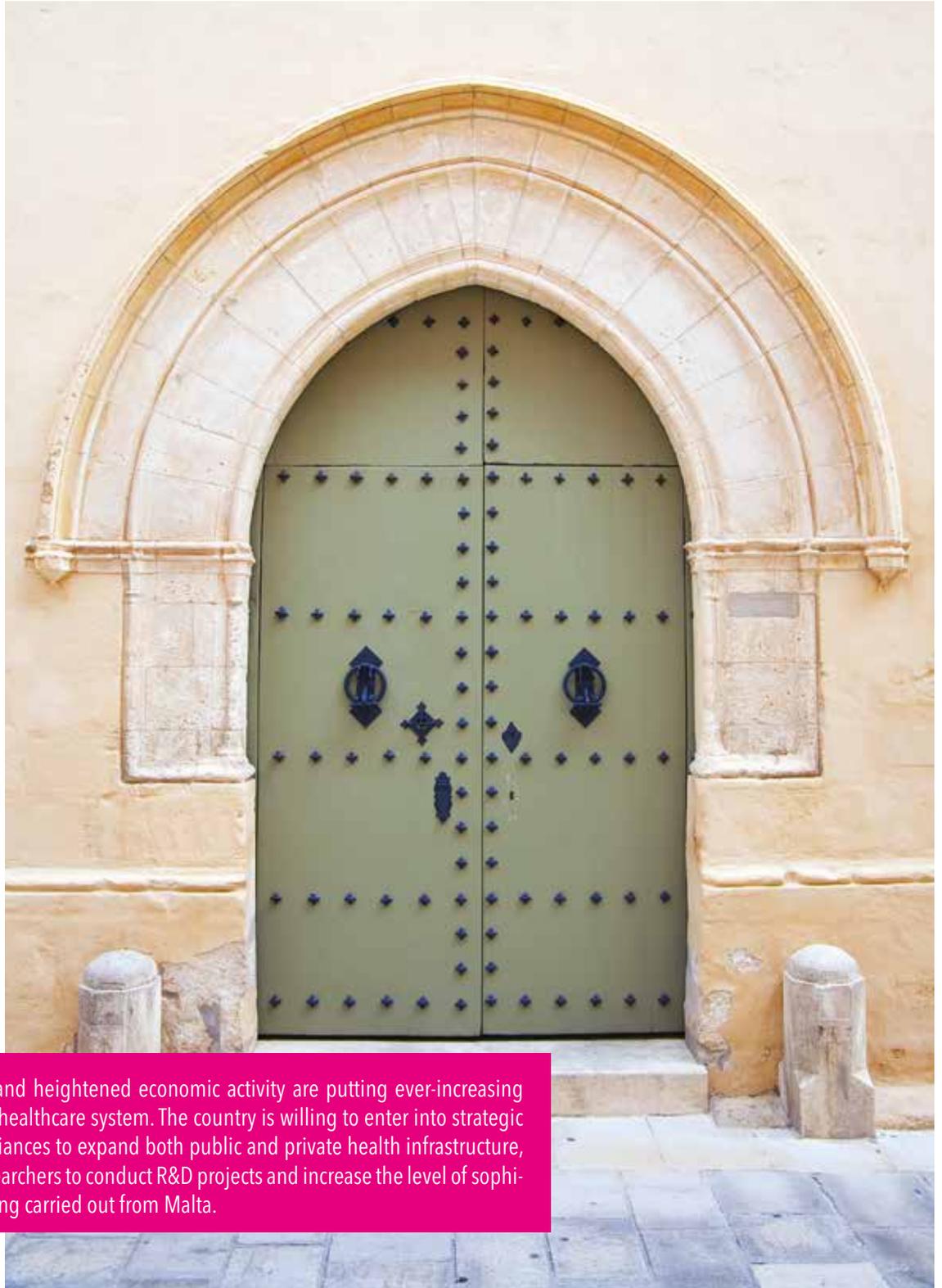
Strong economic growth has transformed Malta into a confident nation which is now seeking to strengthen its position and compete at an international level, quietly positioning itself as an attractive alternative for companies seeking an address in the European Union.

rope into the best in the world, emulating the success of global business locations such as Singapore and Dubai. As its expanding economy will continue to attract more companies and capital, and the island might see its population grow at a steady rate, Malta needs to safeguard macroeconomic stability and ensure future economic growth; keeping costs in check and maintaining Malta's competitive tax and regulatory frameworks are two powerful ingredients to do this. While capacity constraints in the infrastructure sector and a shortage of talent in certain industries

are putting upward pressure on the island's cost competitiveness, traffic-congestion is also affecting economic growth and quality of life. Downside risks could also derive from ongoing political corruption allegations, which could suppress policymaking. Forging a path for future growth thus requires capacity enhancing investment in areas such as transport, energy and the environment that are capable of genuinely transforming Malta from a European success story into a truly open, global economy that attracts the best and the brightest.

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A Healthcare System Looking Ahead



Population growth and heightened economic activity are putting ever-increasing pressure on Malta's healthcare system. The country is willing to enter into strategic partnerships and alliances to expand both public and private health infrastructure, as well as attract researchers to conduct R&D projects and increase the level of sophistication of work being carried out from Malta.

Today Malta has both a public healthcare system, where healthcare is free at the point of delivery, and a private sector complementing the provision of health services, particularly in the area of primary healthcare.

Malta has a long history of providing publicly funded healthcare which dates back to 1372, when Malta had its first functioning hospital. Today Malta has both a public healthcare system, where healthcare is free at the point of delivery, and a private sector complementing the provision of health services, particularly in the area of primary healthcare. **The public healthcare system is the key provider and offers universal coverage to a comprehensive basket of services, ranging from pregnancy and childbirth through to surgery and rehabilitation (including hospitalization), that are free for every citizen who lives in Malta. A few services, such as elective dental care, optical services and some medicines are means-tested.** There are no user charges or co-payments for public health services.

Primary and ambulatory care is readily available through the public and private sectors. Many choose to access primary care services in the private sector because they offer better continuity of care. In addition, some services, especially for long-term and chronic care, are also provided by the private sector, the Church and other voluntary organizations. **The private sector accounts for about two-thirds of the workload in primary care and is remunerated on a fee-for-service basis and will be taking on an increasing role in hospital provision as well, through the new public-private partnership which is also expected to attract international patients.**

The nation has a strong tradition of general practitioner (GP) led primary care. In the public sector, patients are seen by the GP on duty within the health centers and citizens are not required to register with a doctor in the Maltese system. There are 8 health centers, seven in the mainland and one on the island of Gozo, that provide comprehensive healthcare to non-paying patients, without distinction on income and wealth. GPs in the public sector function as gatekeepers, referring patients to specialists (both public and private), hospital outpatient facilities and accident and emergency departments. On the contrary, with privatized care, patients need to initially register with a GP in their area to be referred to specialist doctors within public healthcare. Free (public) dental services can be accessed directly by the patient and do not require a GP referral. Dentists in the public sector can refer patients to emergency or hospital outpatient departments if needed, furthermore private GPs, specialists and dentists

can all refer patients to the public and private outpatient hospital services and the emergency departments.

Secondary and tertiary care is mainly provided by specialized public hospitals of varying sizes, with private hospitals playing a complementary role. **Specialized ambulatory care services are provided both in hospitals and in health centers in the public health sector. In the private sector, services are provided in a range of settings - from clinics operating adjacent to or embedded within local community pharmacies, through to fully fledged licensed private clinics and private hospitals.** Nearly all pharmacies offer private GP services between specific times, with some even providing specialized private doctors.

Outpatient services at public general hospitals are available for practically all specialties. Patients are referred by their private GP, by a health center GP within the public primary care sector, or by another specialist from the private or public health sectors. Access to specialists in the private sector does not require GP referral; this generally allows for the quick setting of appointments and access to care.

The Mater Dei (972 beds), commissioned in 2007, is the primary hospital site, located in Msida. It is a general and teaching hospital, offering standard and specialist services, one of the biggest medical sites in Europe. On the island of Gozo, public secondary care is provided at the Gozo General Hospital (143 beds). Other hospitals include, a new cancer hospital, Sir Anthony Mamo Oncology Centre (86 beds), built and opened in 2015 (using EU funding). Patients needing rehabilitative services refer to the Karin Grech Rehabilitation Hospital. There is one public psychiatric hospital, Mount Carmel Hospital (501 beds) and a dermatology hospital, at Sir Paul Boffa Hospital (48 beds), which has also been converted into a long-term care nursing facility. When it comes to the provision

of highly specialized care for the treatment of rare diseases or specialized interventions, patients are sent overseas, through reciprocal agreements with European countries, as neither cost-effective nor feasible to conduct locally.

The private system is market-driven and comprised of autonomous, independent health providers. In 1995, following an amendment to the laws regulating provision of private healthcare, private hospitals were opened and private clinics were able to register as hospitals provided they satisfied the regulations. A higher number of residents are in fact purchasing private healthcare insurance, which has led to an increase in the volume of private clinics and hospitals and many doctors working in the public system also have their own private practices. The island's focus on the internationalization of sectors such as education and health, has managed to attract foreign investment from private companies, such as the recent opening of a new private hospital in Gozo and a medical school seeking to attract students from across the world. There are 6 licensed private hospitals, 4 licensed private day care clinics and 9 licensed mental health facilities. All hospitals are located in Malta with the exception of one hospital on the island of Gozo; among them are St James Capua Hospital (79 beds), St James Hospital, Żabbar (6 beds) and St Thomas Hospital (33 beds), which opened its doors in September 2016. There are also several private clinics which patients access without referral and pay for care out-of-pocket or through private insurance.

Both public and private sectors have the same highly regarded level of medical technology available at their disposal. There is no capping on investment in complex technology. Medical equipment is mostly hospital-based, but there is an in-

Medical equipment is mostly hospital-based, but there is an increasing availability of medical imaging devices such as X-ray machines at specific primary healthcare centers on a 24-hour basis and in private clinics.

creasing availability of medical imaging devices such as X-ray machines at specific primary healthcare centers on a 24-hour basis and in private clinics. When compared to the OECD average, Malta has a low number of both MRI and CT exams per 1000 population, but the island emerges as having a high ratio of PET scanners per capita (one in the public and the other in the private sector).

In the private sector providers are paid a fee-for-service, either directly by the patient or indirectly via voluntary health insurance (VHI). The only time that private providers receive public funds is when certain procedures – typically surgical procedures with a waiting list in the public sector – are outsourced to the private sector; this has only become a notable payment mechanism since 2014.

The private sector already carries out a significant amount of activity in the ambulatory and primary care sectors and its role in the hospital sector is also set to increase following a public-private partnership contract for 3 existing public hospitals agreed in 2016 between an international profit-making healthcare organization, Vitals Global Healthcare, and the Government of Malta. This agreement effectively transfers responsibility for the management of Gozo General Hospital, St Luke’s Hospital and Karin Grech Hospital to the private sector organization for a period of

30 years; although the government will continue to remain responsible for the funding of the care provided and those publicly funded healthcare services will remain free of charge at the point of use to all those entitled. This is an innovative development for the Maltese health system, although similar arrangements have been in place for several years in the long-term care system.

Thus, the historical role of the Ministry for Health being responsible for both regulation and provision of health services in what has hitherto been mostly an integrated public system of health services organization, financing and delivery, is substantially moving towards greater private sector involvement where the Ministry’s role is shifting from being a direct provider of services to ensuring standards of care through its regulatory function.

The public portion of Maltese healthcare is funded through general taxation. All those economically active that earn more than the minimum threshold pay income tax. Rates of contribution for income taxation are set by Parliament and are progressive, rising according to income (starting from 15% up to 35%) and whether the worker is single, married or a parent. **National Insurance (Social Security Contribution) is only paid by those**

who are active in the labor market. Retirees and the unemployed do not pay National Insurance. National Insurance is shared between the employer and the employee in a 1:1 ratio, each contributing 10%. Self-employed persons pay a higher rate. The Department of Inland Revenue is asked with collecting these two contributions, as well as all other sources of government revenue, all pouring directly into the general government revenue.

Total health expenditure as a percentage of GDP is slightly higher than the EU average, amounting to around 9.75%, although both per capita spending and public expenditure as a percentage of total health expenditure remain among the lowest in Western Europe.

In recent years the increase in private spending has outpaced public health expenditure growth. Public expenditure comprises almost 69% of total health expenditure while out-of-pocket payments and Voluntary Health Insurance make up most of the remaining spending.

The relatively high proportion of out-of-pocket payments, amounting to 29% of total health expenditure (compared to EU average of 15%), remain the main source of funds for purchasing medicines and paying private GPs and are also still widely used for private ambulatory specialist consultations; thus, accounting for a significant part of the total payment for private healthcare (over 80%). Two reasons may explain this trend. Persons with a certain level of education and income have traditionally been accustomed to seeking primary and ambulatory services in the private sector to receive more personal attention, to have better continuity of care by seeing the same provider, to set appointments at convenient times. These services remain relatively affordable for a considerable segment of the population. The second reason is to bypass rather long waiting lists for specialist ambulatory care and elective diagnostic and therapeutic interventions in

	Malta	Italy	Spain	UK	Germany
Total Health expenditure per capita Int. USD	2,304	2,700	2,354	4,356	4,592
Total health expenditure as % of GDP	9.6	9.0	9.2	9.9	11.2
General government expenditure on health as % of general government expenditure	14.2	13.4	14.9	18.5	21.4

Source: World Health Statistics 2018, WHO

The high rate of out-of-pocket expenditure presents a stark contrast to the low level of unmet need for care, indicating that those in need can easily access healthcare services in Malta. This is thought to be the result of a high volume of relatively low-cost transactions taking place in the primary care and ambulatory care sectors, as well as expenditure on medicines not covered by the public healthcare system. **Only 1.1% of the population reports feeling unable to access needed medical and dental care because either too expensive, too far to travel or due to waiting lists; even despite elective dental services are not being covered for all persons under the public healthcare system.** Whilst there have not been any health sector specific measures to strengthen financial protection, general government measures to protect low-income persons include the recent decision not to tax pensioners earning up to €13,000 annually.

Health status - Maltese people spend on average close to 90% of their lifespan in good health, longer than in any other EU country and life expectancy is higher than the EU average. **Increases in longevity are largely due to declining death rates from all causes; Malta has the lowest rates of preventable mortality in the EU.** Obesity is the principal public health problem, with 25% of the adult population and 27% of children (aged 11–15 years) being obese: the highest rate in the EU. Diabetes and HIV also have a relatively high prevalence compared to other European countries. Frailty associated with ageing remains a major challenge facing the whole population, as does the old age dependency ratio, which rose from 19.3% (2005) to 27.6% (2015). Projections depict a rapidly ageing population, with the ratio estimated to reach 32.7% in 2020, exceeding the EU average of 31.8. This ratio is expected to climb steadily and reach 40.5% by 2030, when the EU average is projected to be 39.0%.

Human Resources - The health sector in Malta is one of the largest employers. In 2015, 30.3% of total Ministry for Health recurrent expenditure was allocated for salaries. Education and training are being further strengthened in order to retain more specialist skills in Malta. **Most healthcare workers are trained at the University of Malta Faculty of Health Sciences and Faculty of Medicine and Surgery; the school is publicly funded.** The degree courses for Doctor of Medicine and Surgery, Pharmacy and Nursing do not operate a fixed number clause to limit the number of places available but there are fixed numbers of students for the Faculty of Dental Surgery and most allied health degree courses. **The dentistry course opens on a yearly basis and up to 6 EU students and 2 students from third country nationals are accepted.** These 2 overseas

	Malta	Italy	Spain	Germany	UK
Life expectancy at birth, total (2016)	81.5	82.8	83.1	81.0	81.4
Mortality due to noncommunicable diseases, Probability of dying from any of CVD, cancer, diabetes, CRD between age 30 and exact age 70 (%), 2016	10.8	9.5	9.9	12.1	10.9
Maternal mortality ratio (per 100 000 live births, 2015)	9	4	5	6	9
Under-five mortality rate (per 1000 live births), 2016	6.8	3.3	3.3	3.8	4.3

Source: World Health Statistics 2018, WHO

places are not necessarily filled. The University Admissions Board controls the applications. There is no obligatory vocational training. A graduate dentist has a license to practice after the 5 years' training course. **Only two dental specialties are recognized in Malta, oral surgery and orthodontics.** The Malta College for Science, Arts and Technology plays an important role in training care workers and clinical aides to medical professions. There are several regulatory councils responsible for the registration of qualified practitioners. These include the Medical Council (doctors, dentists), the Pharmacy Council, the Council for Nurses and Midwives and the Council for Professions Complementary to

Medicine. These are all regulated under the Health Care Professions Act. In addition, with regards to doctors, there is also a Specialist Accreditation Committee which certifies doctors who have completed their specialist training within the different respective fields. **As an EU Member State, Malta is now obliged to implement Continuous Professional Development as per Directive 2013/55/EU but there are no revalidation mechanisms in place yet.** On this regard, the Dental Association of Malta, together with the Faculty of Dental Surgery, and the Dental Public Health Unit have been organizing regular lectures and courses which award CPE points to the participants.

The health sector in Malta is one of the largest employers. In 2015, 30.3% of total Ministry for Health recurrent expenditure was allocated for salaries.

Medical Personnel (2015)	Per 100 000 Population
Physicians (inclusive of specialist trainees) 65% working in hospitals	391
General Practitioners (GPs)	83
Nurses	867
Midwives	47
Dentists	49

Source: Azzopardi-Muscat N, Buttigieg S, Calleja N, Merkur S (2017). Malta: Health system review. Health Systems in Transition, 2017; 19(1):1–137.

Malta

Oral Healthcare



Only 1.1% of the population reports feeling unable to access needed medical and dental care because either too expensive, too far to travel or due to waiting lists; despite elective dental services are not being covered for all persons under the public healthcare system.

Dental care in Malta is provided by both private and public dental services. However, most oral healthcare is provided in wholly private practice and patients pay directly, mostly out-of-pocket, for the dental treatment received. Public dental services are provided in health centers and dental departments at the main hospitals, Mater Dei (approx. 26 dentists, figures from 2013) and Gozo General Hospital (approx. 2 dentists, figures from 2013) where only diagnostic, preventive and emergency care is provided together with minor and major oral surgery, under local or general anesthesia, free of charge to all patients. Some services, such as restorative dentistry and prosthetics (mainly acrylic dentures) are provided only to patients in low-income brackets (means tested). The public service also offers comprehensive free treatment to all children below the age of 16, including orthodontic care (which includes any form of removable appliance therapy) while fixed appliance therapy is provided for free to those children who are considered as high priority, such as cleft lip and palate patients, patients with hypodontia and those pa-

tients about to undergo orthognathic surgery. There is no payment for any treatment carried out by the public dental service. **Private practice contributes significantly and private medical insurance (VHI schemes) only covers limited procedures, such as surgical extractions.** Private fees are fully “free market” and they are determined in agreements between dentists and their patients. It is not possible to identify the proportion of expenditure on oral healthcare that is private. The normal frequency for routine oral examinations is, on average, 6 months. A Mobile Dental Unit was set up in 2015 by the University of Malta in collaboration with the Dental Public Health Unit (government)

with the main intention of visiting different localities in Malta and Gozo and providing free dental check-ups and personalized advice to the population. The Mobile Dental Unit is also used for data collection for the National Oral Health Survey. In 2015, the Dental Clinic at St Vincent de Paul Residence was refurbished as part of an agreement signed between the University of Malta and the Ministry for Health, as part of the initiative to further increase the provision of services. In addition, the Dental Public Health Unit is striving to update standards for dental clinics to ensure that they provide a minimal standard with regards to quality of care and ensure the provision of safe dental health practice.

	Malta	Italy	Spain	UK	Germany
Density of physicians (per 1000 population) 2007-2016	3.9	4.0	3.9	2.8	4.2
Density of dentistry personnel (per 1000 population) 2007-2016	0.5	0.8	0.7	0.5	0.9

Source: World Health Statistics 2018, WHO

Number of Dentists, 2013	230
Population to (active) dentist ratio	2,479
Dental student intake	8
Percentage female	38%
Number of Dental Hygienists, Female / Male	15 / 6
Practicing Dental Hygienists: Full-time / Part-time	12 / 3
Number of Dental Hygienists in private / public sector	4 / 14
Number of Dental Technicians	53
Number of Dental Assistants (estimate)	100

Source: Azzopardi-Muscat N, Buttigieg S, Calleja N, Merkur S (2017). Malta: Health system review. Health Systems in Transition, 2017; 19(1):1-137.

Malta has a low number of dentists per population (49 per 100 000), well below the EU average (2015).

This could be explained by the fixed number clause capping the number of dental students accepted by the University of Malta at eight per year.

Malta has a low number of dentists per population (49 per 100 000), well below the EU average (2015). This could be explained by the fixed number clause capping the number of dental students accepted by the University of Malta at eight per year. Most dental hygienists are employed in the public sector although a handful are employed in private dental practices (general or specialist) on part time basis. Training is for 3 years, by the Faculty of Dental Surgery, University of Malta and the Board for Professions Supplementary to Medicine is responsible for the registration of dental hygienists. Dental technicians also train for 3 years in the government hospital, organized by the Faculty of Dental Surgery, University of Malta and the Board for Professions Supplementary to Medicine holds the register. **Dental technicians work in commercial dental laboratories, although, legally, they must not have direct contact with the public, it is reported that people have their dentures repaired directly by them.** Most dental technicians work in the public sector (29) but over a third work solely in private practice. Some of those who work in the public sector also work in private practice. Like hygienists, the 29 dental technicians are nor-

mally salaried when working in the public sector. Dental Chairside Assistants (DSAs) are now officially qualified, since 2007. Those working in the public sector are trained DSAs but some of those working in the private sector have no qualifications and were trained by the dentist who employed them. It is estimated that 85% of dentists in private practice have an assistant working with them. There were 30 nurses working as DSAs in the public sector in 2013.

Dental specialties have been recognized only since the Health Professions Act was fully implemented in 2004. Even if only orthodontics and oral surgery are recognized specialties, some dentists have additional qualifications in specific areas of dentistry. Whilst not recognized officially as specialists, patients are referred to them by other dentists.

Most dentists working in the public sector also work in private practice. About 50% of private practitioners work in single dentist practices. There are some dentists who own a practice and have a dentist who also works in the practice and earns on average 50% of the amount that the patient pays for the treatment. There are some group practices where the overall

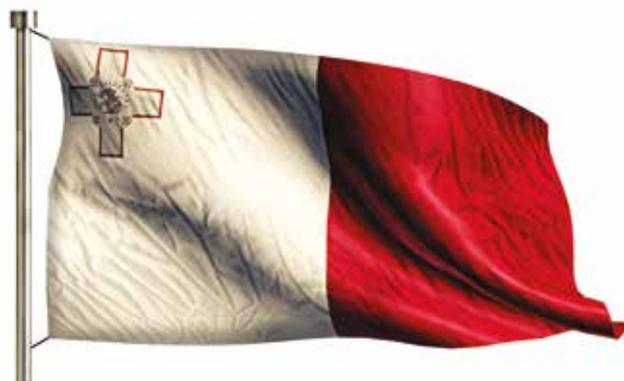
Specialists, 2013

Orthodontics	7
Oral Surgery	9
OMFS	1

Pedodontics	2
Periodontics	3
Prosthodontics	3
Oral Radiologists	1
Gerodontology	2
Dental Public Health	3
Oral Pathology	1

Source: EU Manual of Dental Practice 2015 Edition 5.1

expenses are shared between the partners, but the income from the patient fees is on a separate basis. The number of such group practices is increasing. There are no official fee scales and pricing is unregulated in Malta. Any dentist holding a valid warrant issued by the Medical Council may open a dental surgery anywhere. Dentists in Malta are the only professionals who are taxed (€230 a year) to be able to practice in their place of work. Practices are normally sited in apartments or small houses converted into clinics. There are no rules which limit the size of a dental practice in terms of number of associate dentists or other staff. A dentist in Malta would typically look after 1,000 to 1,500 patients on their "list". There are three dental associations - the Dental Association of Malta, the Malta Post-Graduate Dental Association and the Malta College of Dental Surgeons. None of these associations



are trade Unions. The main national association is the Dental Association of Malta with over 76% of dentists as members. The Dental Association of Malta is a founder member of the Malta Federation of Professional Associations. The Dental Hygienists have also set up an association, in 2013 (the Malta Association of Dental Hygienists, MADH). The Dental Technologists have another association, which is the Malta Dental Technologists Association (MDTA). Dentistry is incorporated under the Medical Council with appropriate representation of the dental profession on the body. Oral health has been included in the strategy document on non-communicable diseases, with targets set for 2020, although currently there is no direct monitoring of the quality of dental health services. The publishing of the first National Oral Health Survey in adults is currently underway however a study, carried out 2 years ago in the island of Gozo on 332 people (babies to over 80), who attended the Mobile Dental Unit over a three-month period, shows worrying results with three-year-old children having 20% erosion compared with the 7% found in Malta. According to the report, compiled by the University of Malta Medical School and published in the Journal of the Malta

Chamber of Scientists, 76.8 % of the patients had plaque deposits while 78% required restorative treatment in their gums. The report noted that most of the people over 50 had less than 10 remaining functional units, defined in the study as "pairs of teeth in contact" and two thirds of those over 20 had missing teeth. Gozitans' oral healthcare was found to be far from the 2020 targets Malta is trying to achieve. These results point to poor oral hygiene among Gozitans, the need for provision of better dental services in Gozo, re-orientation of existing services to focus on prevention and introduction of evidence-based preventive strategies in schoolchildren. **The Maltese population in general also found to have decaying oral hygiene, with the researchers noting preschool and schoolchildren had a significant increase in tooth erosion.** This erosive wear was significantly associated with an increased consumption of carbonated drinks, flavored water and packaged juices, posing fiscal and cultural challenges within Malta that need to be addressed by the whole dental community.

Practices in Malta, 2013

General (private) practices	167
Public dental services	35
University	24
Hospital	31
Public administration	3
General practice as a proportion is	98%
Number of general practices	102

Source: EU Manual of Dental Practice 2015 Edition 5.1

Focus on Malta, among main Sources:
 -Extracts from: *EU Manual of Dental Practice 2015 Edition 5.1, Council of European Dentists, Authors: Dr Anthony S Kravitz OBE and Professor Alison Bullock Professor Jon Cowpe with Ms Emma Barnes*
 - Extracts from: *Azzopardi-Muscat N, Buttigieg S, Calleja N, Merkur S (2017). Malta: Health system review. Health Systems in Transition, 2017; 19(1):1-137.*
 -*World Health Statistics 2018, WHO-World Health Organization*
 -Extracts from: *MaltaProfile, powered by Country-Profiler, https://maltaprofile.info/article/economy*
 -*International Federation of Dental Hygienists (IFDH), http://www.ifdh.org/wk_abroad/malta.html*
 -"Report points to poor oral hygiene among Gozitans"; *https://timesofmalta.com/articles/view/report-points-to-poor-oral-hygiene-among-gozitans.703423*

These results point to poor oral hygiene among Gozitans, the need for provision of better dental services in Gozo, re-orientation of existing services to focus on prevention and introduction of evidence-based preventive strategies in schoolchildren.

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Hot Topic

Author: Luca Maria Pipitone

Degree in Biotechnology

Sucrose, a Sugar Hard to Handle

Refined sugar, more precisely sucrose, is a plant-origin disaccharide dear to many that is today produced worldwide at a rhythm of about one and a half billion tons per year. Thanks to this compound and its low price, the confectionery industry has developed enormously within the last century, giving the world an endless number of recipes able to satisfy everyone's palate. It's hard to resist to the sweetness of a cake or a biscuit and even harder it is for a child that seems to be instinctively attracted to it. But it's no wonder that this molecule exerts such a magnetism since sucrose, more specifically the glucose contained in it, is one of our body's favorite fuel. The brain function, for example, is strongly linked to the concentration of blood glucose (glycemia) which, if it were to drop dramatically (hypoglycemia) would inevitably lead

to conditions such as loss of consciousness or, in most severe cases, to coma. Although the body's cells see this compound as a valuable energy resource, it is not unusual to hear experts define it as "poison" and consequently associate it with something toxic and harmful. Glucose is a sugar without which life on the planet would be very different from what we know and without which the human body would not be able to work, however its excessive use represents a serious risk to human health. Starting from the amount we put in coffee every morning to the quantity contained in soft drinks and snacks, the abuse of this food is largely widespread in the population worldwide. In the two-year period 2005/2006, according to Crea-Inran data, daily sugar consumption in the USA amounted to about 124 grams per day, in Italy instead to

around 90 grams. As much as Italians may seem more moderate in consumption than Americans, there's not much to celebrate, it must be remembered that the daily sugar consumption recommended by WHO is about 25 grams per day; almost a quarter of that currently consumed by the Italian population. Considering that sugar is very much loved, which are the risks that those not capable to contain themselves run? Surely overweight and obesity, a condition that today in Italy, according to ISTAT, belongs to 25 million people: among these, almost half of the adult population and a quarter of young people (under 18). Overweight and obesity in turn greatly increase the likelihood of certain types of cancer, type 2 diabetes and cardiovascular diseases. But, before leading to these pathologies, sugar damages an organ



which is very sensitive to it: teeth. This is strongly correlated to the fact that sugar is the favorite growth substrate of a group of oral microorganisms, mainly bacteria, which, during their activities, release acids such as lactate and acetate which dissolve hydroxyapatite crystals, that make up the dental enamel, weakening it. Thus, special attention must be paid to acid foods such as fruit juices and soft drinks which have, as well as high sugar content, citric and phosphoric acids as preservatives. In any case, caries formation is not exclusively associated to added sugars consumption, but the same goes for any fermentable carbohydrates like starch, lactose, fructose, maltose etc. However, this doesn't mean that carbs consumption brings to caries development; genetic predisposition, nutrition (during the whole life), saliva pH and oral hygiene probably represent the factors that mostly determinate the onset of this multifactorial pathology. Whilst it's not possible to control saliva pH or personal gene pool, on the other hand we can manage our own oral hygiene and nutrition, right? Yes, in theory. In practice though it's not so simple. Everyone has their own food preferences, foods and drinks they don't want to give up, linked to traditions, culture or, in worse cases, to psychological addictions. This will inevitably affect teeth life and health but, if a balanced diet is observed and if some precautions are taken (for example brushing teeth after the consumption of acid foods) cariogenic bacteria activity will be hindered and, consequently, the enamel can protect the teeth for as long as possible. All this might seem obvious, but it's clear that all the care and attention we give to that thin layer of fragile mineral are the most powerful weapons we possess against bacteria that we can't defeat, but only slow down.

[1] Hujoel PP, Lingstrom P., "Nutrition, dental caries and periodontal disease: a narrative review", J Clin Periodontol (2017); 44 (Suppl. 18): S79-S84. doi: 10.1111/jcpe.12672.

[2] Feldens C.A., Kramer P.F., Vargas-Ferreira F., "The role of diet and oral hygiene in dental caries", Pediatric Restorative Dentistry (2019), https://doi.org/10.1007/978-3-319-93426-6_4.

[3] <https://www.corriere.it/dataroom-milena-gabanelli/zucchero-dose-giornaliera-non-superare-tumore-cancro-dieta-sovrappeso-alimentazione/60d3338e-70b9-11e8-8f08-e72858c58491-va.shtml>.

[4] <https://www.ilfattoquotidiano.it/2019/04/09/obesita-quasi-un-italiano-adulto-su-due-e-in-sovrappeso-problema-piu-diffuso-al-sud-e-tra-i-non-laureati/5097375/>.

[5] https://it.wikipedia.org/wiki/Produzione_dello_zucchero.



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Trade News

ALIGN TECHNOLOGY TO ACQUIRE GLOBAL DENTAL CAD/CAM SOFTWARE LEADER EXOCAD

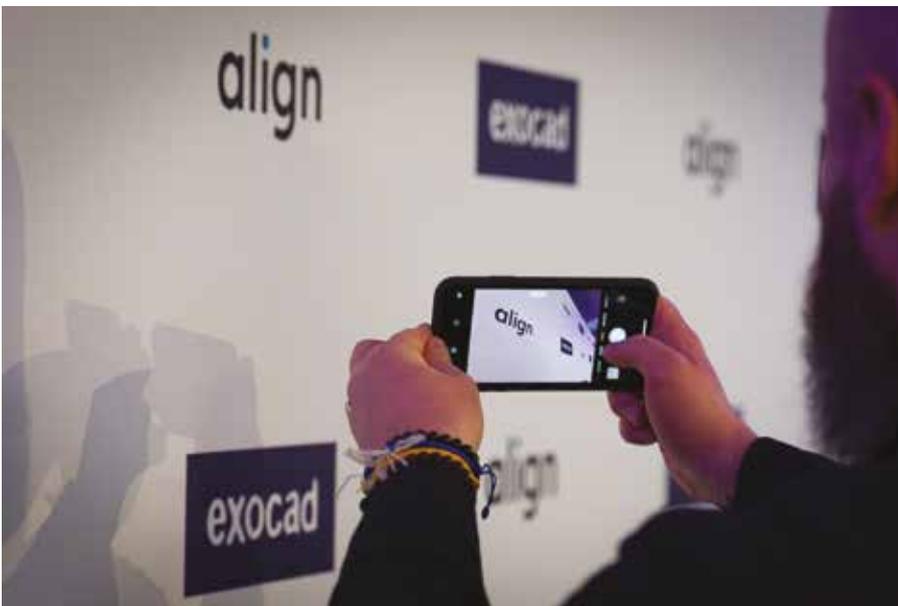
- **exocad's restorative expertise and dental CAD/CAM solutions broaden and strengthen Align's digital dentistry platform for doctors, labs, and partners worldwide**
- **Expands the orthodontic market opportunity for doctors by integrating clear aligner orthodontics and restorative treatment with flexible, reliable, and easy-to-use CAD/CAM software and digital workflows**

SAN JOSE, Calif., and DARMSTADT, Germany, March 4, 2020 - Align Technology, Inc. (Align) (Nasdaq: ALGN) announced that it has signed a definitive agreement to acquire privately held exocad Global Holdings GmbH (exocad) for approximately EUR376 million in cash. exocad is a global leader in the dental CAD/CAM software market and offers fully integrated workflows to dental labs and dental practices via a broad customer base of partners, and resellers in over 150 countries. The acquisition of exocad strengthens the Align digital platform that delivers innovative

tools and features for diagnostic, restorative, implant, and orthodontic workflows. The acquisition brings exocad's expertise in restorative dentistry, implantology, guided surgery, and smile design to the Align technology portfolio, extending Align's Invisalign and iTero digital solutions and paving the way for new, seamless cross-discipline dentistry in lab and at chairside. exocad also broadens Align's platform reach in digital dentistry with close to 200 partners and more than 35,000 licenses installed worldwide. "Dentistry today is evolving digitally, with technology advances and consumer awareness driv-

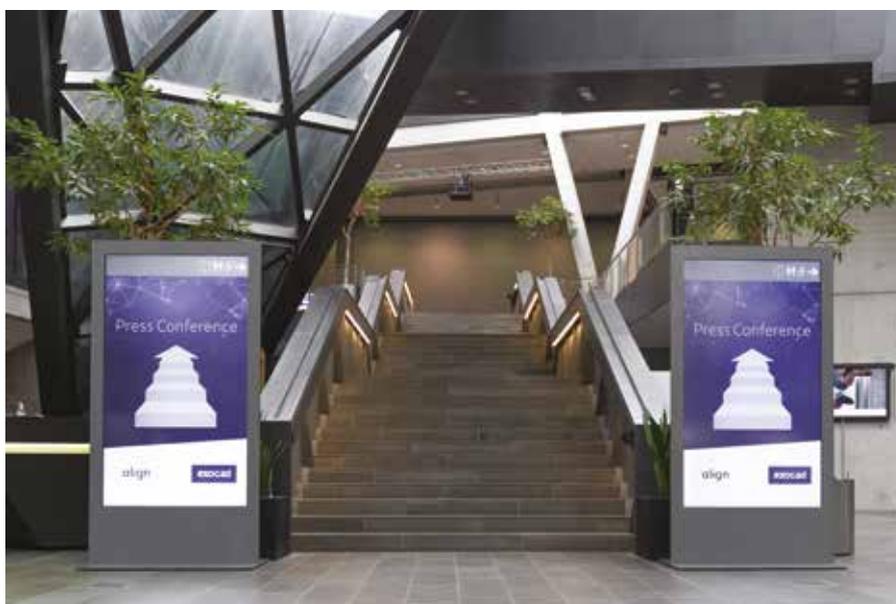
ing new opportunities in ortho-restorative and comprehensive treatment. Align is in a unique position to lead the digital transformation of dentistry by reimagining comprehensive treatment planning and by reinventing the way orthodontists and GPs practice with our digital platform for transforming smiles," said Joe Hogan, Align Technology president and CEO. "exocad allows us to broaden and deepen Align's digital platform by addressing restorative needs in our end-to-end digital platform that facilitate ortho-restorative and comprehensive dentistry and accelerates adoption of Invisalign treatment among the more than 300 million potential patients worldwide."

This acquisition is a natural next step in the collaboration between Align and exocad that started in 2017 with the seamless integration of Align's iTero intraoral scanners and exocad Chairside CAD software. The collaboration later expanded to a fully-validated workflow that enabled in-house milling of dental restoration on any compatible milling machine, and most recently, at the Chicago Midwinter Meeting 2020, we announced the unique exocad Connector. "I am excited by the enormous growth opportunity for exocad and its customers that comes with being a part of Align Technology," said Tillmann Steinbrecher, CEO and co-founder of exocad. "Together, we will further strengthen exocad's position as a key technology provider for the dental CAD/CAM industry and drive continuous innova-





Align and exocad held their first joint press conference in Darmstadt/Germany on March 12, 2020. Representatives of both companies shared some insights: Novica Savic, exocad CCO, Christophe Dorian, Director GPM Restoratives Align Technology, Larry Bodony, President exocad America, Tillmann Steinbrecher, CEO and co-founder of exocad, and Vianne Battle, Senior Director EMEA, Align Technology, (from left).



tion with the open and integrated approach that is the foundation of our company."

exocad will continue to operate as it exists today, enabling it to support a broad ecosystem of partners and end-users and continue to deliver hardware-independent software solutions. exocad co-founders Tillmann Steinbrecher and Maik Gerth, along with their team, are expected to remain after the transaction closes and report into John Morici, Align Technology, senior vice president and CFO. "The acquisition of exocad adds a talented and passionate team as well as a highly innovative, industry-leading product suite to our portfolio, providing an excellent complement to our current workflow solutions," said Morici. "We will continue to invest in and build on exocad's

leadership in the dental CAD/CAM market and look to them to make significant contributions to Align's overall strategy."

Under the terms of the agreement, Align will pay approximately EUR376 million in cash to acquire exocad, which is majority owned by Carlyle Europe Technology Partners (CETP). The acquisition is expected to close during the second quarter of 2020. Goldman Sachs & Co. LLC is serving as exclusive financial advisor to Align. UBS Investment Bank is serving as exclusive financial advisor to exocad and funds managed or advised by CETP.

Align anticipates that the acquisition of exocad is expected to be gross margin accretive, reflecting the strength of exocad's software

business. We expect GAAP EPS to be dilutive for the fiscal year 2020, due to acquisition-related costs.

About Align Technology, Inc.

Align Technology designs and manufactures the Invisalign® system, the most advanced clear aligner system in the world, and iTero® intraoral scanners and services. Align's products help dental professionals achieve the clinical results they expect and deliver effective, cutting-edge dental options to their patients.

Visit www.aligntech.com for more information. For additional information about the Invisalign system or to find an Invisalign doctor in your area, please visit www.invisalign.com. For additional information about iTero digital scanning system, please visit www.itero.com.

About exocad GmbH

exocad GmbH is a dynamic and innovative software company committed to expanding the possibilities of digital dentistry and providing OEMs (Original Equipment Manufacturers) with flexible, reliable, and easy-to-use CAD/CAM software for dental labs and dental practices. exocad software has been chosen by leading OEMs worldwide for integration into their dental CAD/CAM offerings, and thousands of exocad DentalCAD licenses are sold each year. For more information and a list of exocad reseller partners, please visit www.exocad.com.

At a Glance

By Jayme McNiff Spicciatie



The GNYDM Exceeds Expectations in 2019

The Greater New York Dental Meeting thanks you for making the GNYDM the largest dental event in the United States. At its 95th Annual session, there were 52,614 attendees from all 50 states and 156 countries, including 19,758 dentists.



This year's event reached a significant milestone with 13,458 international attendees. This record-breaking number is the largest ever for a U.S. Meeting. Also, the GNYDM registered 2,592 Dental Students, 3,835 Dental Assistants and 3,705 Dental Hygienists. **With a total attendance of 52,614, the GNYDM continues to be the largest Dental Convention and Event in the United States.**

The Greater New York Dental Meeting hopes that you were able to take the opportunity to make new friends, renew old acquaintances and make new contacts with decision-makers and partners for your continued success.

The exhibit floor was packed with special discounts and giveaways. **Professionals roamed aisle after aisle and visited over 1,600 exhibit booths and over 650 companies.** The GNYDM's creativity paid dividends for exhibitors and attendees with a raffle on Wednesday, offering (8) \$250 golden tickets for attendees to spend on dental products and equipment. It was a great week of business, learning, and networking.

The GNYDM education included 350+ seminars, hands-on workshops, and essays, with programs in Spanish, French, Korean, and Russian. There was also a designated workshop room for live Portuguese translation for all morning and afternoon sessions held in that specific room. The GNYDM included a Free Health

Screening Fair on the Sunday of the Meeting, including Body Mass Index, Diabetes Education, Oral Cancer Screening, Caries Screening, Hearing Screening, Blood Pressure Tests, Vision Screening, Flu Shots, Pneumonia Vaccination, and Shingles Vaccination. The fair was open to numerous private sectors and to the public who needed care. With 7 Specialty Meetings and expanding with new visions for a special needs program, the GNYDM gives other Dental Shows a run for their money, including a World Implant EXPO, Global Orthodontic Conference, Pediatric Dentistry Summit, Sleep Apnea Symposium, 3D Printing & Digital Dentistry Conference, and Public Health Symposium. The Specialty Meetings each continue to increase in attendance and revenue for the GNYDM, as they welcome world-renowned clinicians to New York City. Seminars and hands-on workshops were offered daily with over 70 different specialty options. New for the GNYDM was the expanded Nurse's Program with a collaborative effort to train nurses about proper oral health and the importance of referring nurses to dentists for yearly checkups and overall health care. The GNYDM hopes to continue this program in 2020. The "Live" Dentistry arena filled over 550 seats daily with standing room only for all four days including additional sessions during the lunch break. This revolutionary concept took place right on the

show floor with NO tuition costs to attendees. As the holiday season is a time for giving and helping others, the Greater New York Dental Meeting once again hosted the "Greater New York Smiles" fun and child-friendly program. The GNYDM, along with Colgate and DentaQuest, helped teach 1,500 NYC Public School children about the importance of proper oral health.

The Celebrity Luncheon featured John Quiñones, who combined a moving life story, an exceptional career, incomparable insights, and a powerful presence on the dais along with dignitaries from around the world.

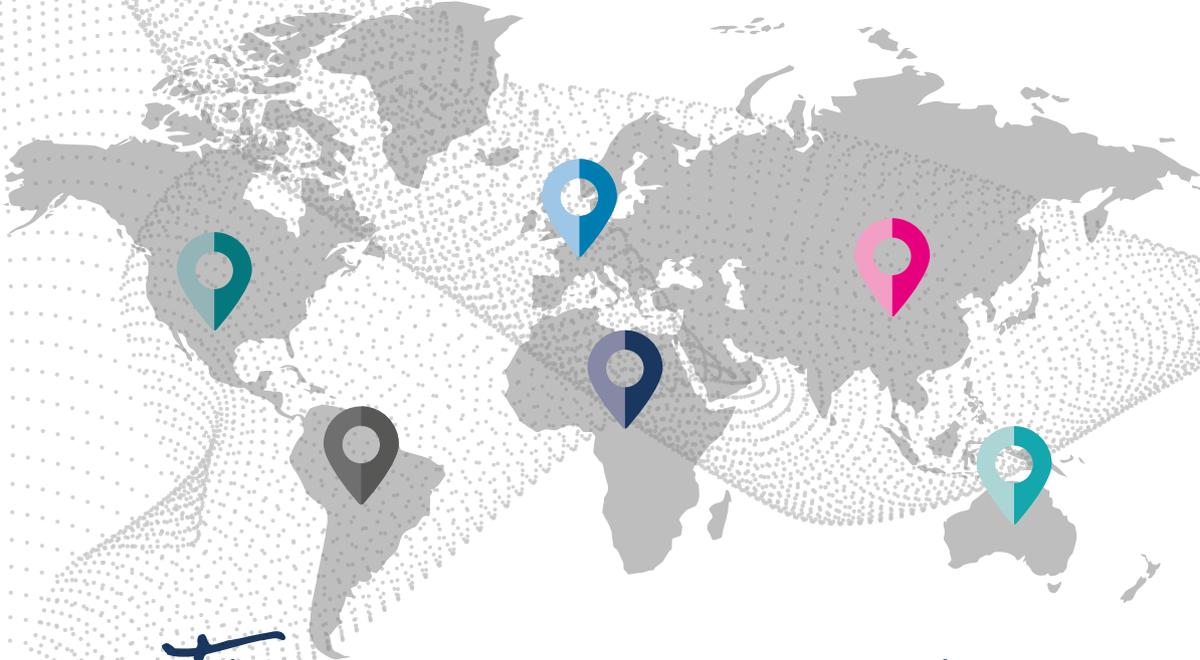
As the number of dentists, hygienists, and assistants continues to grow, the Greater New York Dental Meeting works to expand its educational programs and sales opportunities for attendees and exhibitors in 2020.

SAVE THE DATE FOR 2020

**Greater New York Dental Meeting
November 27th - December 2nd
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• Given the current situation worldwide, we warmly invite you to check trade shows dates, venues and booths location listed in this magazine

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Safe SIDEX, new paradigm SIDEX preparation

SIDEX organizing committee plans to keep monitoring serious COVID-19 situation and prepares the event without any problems. Moreover, SIDEX will be set with the top priority for the safety of members, visitors and participants when it is held, while preparing for any contingency.

Total of 1,129 booths from 262 companies, the largest ever, have completed their applications until now. For the first time in SIDEX's history, Hall A on the first floor, COEX's main exhibition hall, as well as Hall C and Hall D1 on the third floor will be used as exhibition halls.

The scientific congress has already been completed. However, due to domestic and international circumstances, the lectures for foreign speakers were replaced by domestic speakers, and the organizing committee will be working hard to strengthen preventive measures to become a safe and efficient SIDEX.

- Given the current situation worldwide, we warmly invite you to check trade show dates, venues and booths location listed in this magazine



SEOUL INTERNATIONAL DENTAL EXHIBITION & SCIENTIFIC CONGRESS 2020 (SIDEX 2020)

Period:

Scientific Congress : June 6th (Sat) - 7th(Sun), 2020

Exhibition : June 5th(Fri) - 7th(Sun), 2020

Venue:

Scientific Congress : June 6th(Sat) - 7th(Sun), 2020

Exhibition : COEX Hall A, Hall C, Hall D1

Organized by: Seoul Dental Association

Managed by: SIDEX 2020 Organizing Committee

Groups of Exhibits: Unit Chair and Relative / Implant Dentistry / Radiography and Dental X-ray System / Sterilizer /Other Relative Disposable Apparatus

Application & Contact:

SIDEX 2020 ORGANIZING COMMITTEE

257 Gwangnaru-ro Seongdong-gu, Seoul 04802, Korea

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Virtual Dental
Exhibition
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Poland: new date and location of CEDE 2020

29. Central European Dental Exhibition CEDE 2020 will take place December 3-5 in Łódź. All confirmed exhibitor reservations are retained.

CEDE was originally to take place September 24-26 in Poznań, but the COVID-19 pandemic thwarted plans of the organisers, who decided to postpone the event and additionally change the location.

– In the current situation it is hard to assure anything, though we decided the end of the year could be a better time to organise our event. At the moment, there is a government ban in Poland to organise mass events until further notice, and the dental market has certainly suffered from the COVID-19 epidemic. It is difficult to say whether the situation will normalize by September. Why Łódź and not Poznań? CEDE's roots are in Łódź, for years we have been asked by exhibitors to return to this city. We hope that if the conditions allow, we will organise an event attractive to everyone. In September, CEDE will host the Virtual Dental Exhibition by CEDE (September 24-26).

More detail on that to come in May. Nevertheless, we would already like to encourage you to take part in the project. VDE by CEDE will not be a virtual version of CEDE, available only to exhibitors, but a global enterprise. We plan to organise thematic and national pavilions. Everyone has a chance to present their offer in an original, adapted to the pandemic situation way – says Łukasz Sowa, managing director at Exactus, which has been the organiser of CEDE since 1991.



The organisers assert that all reservations made at CEDE 2020 in Poznań are transferred to CEDE in Łódź. However, they point out that due to the completely different infrastructure of the EXPO Łódź facility, a new arrangement of the pavilion will be made. Soon, exhibitors will be able to increase or decrease the registered stand area in the online form.

Change of date and location does not affect the pricing, which remains the same (available in A form in the exhibitor's panel). The exhibitor who registers by August 31, 2020 will ad-

ditionally receive a virtual stand at the Virtual Dental Exhibition by CEDE on September 24-26, 2020.

At www.cede.pl you can find Q&A to CEDE 2020 and Virtual Dental Exhibition by CEDE.

24-26.09.2020

VIRTUAL DENTAL EXHIBITION by CEDE



www.vcede.pl



Virtual Dental
Exhibition
by CEDE



Central European Dental Exhibition

BACK TO ŁÓDŹ

December 3-5, 2020



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● **Skani-X Radiology Devices S.p.A.**, once called C.E.I., is one of the oldest European modern factories of X-ray tubes, having been founded in Bologna/Italy in 1956. Skani-X realizes stationary-anode tubes for: Dental, Medical, Non-Destructive Testing applications. Skani-X is a Qualified Laboratory for the Italian Ministry of University Studies and Research.
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● We are looking to distribute dental lab materials, dental anaesthesia, flexible dentures equipment and materials, dental consumables. We are based in Nairobi Kenya and we seek to spearhead the digitization of dentistry in Kenya and East Africa.

Duncan Mathenge Kenya
unodentlab@gmail.com
 +254 7 2160 5128



Baolai Medical focuses on developing and manufacturing piezo ultrasonic scaler and offers ODM/OEM services for world top brands for 10 years. Products have kept CE&FDA certificates and 33 patents. We're looking for distributors worldwide. T: +86 771 381 5998

info@boool.com
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Rolence Enterprise Inc. has engaged in dental manufacturing, products research & developments and dental export since 1981, our core strength is mainly related to the know-how of manufacturing & innovation on small equipment of Ultrasonic Scaler, LED Curing Light, and the newly introduced Portable X-Ray & Digital Sensor. We keep up with the innovative and creative design concepts into the dentistry by incorporating the dentists' needs into the product design, and eventually to make our products to be user-friendly with ease & convenience.

www.rolence.com.tw



Thermoplastic Comfort Systems, Inc. (TCS, Inc) is an ISO 13485 Certified Company, established in USA. Now one of the leading manufacturers of BPA/metal-free flexible partial and full denture resins and equipment. TCS is still looking for distributors. Contact: Abraham Cortina, VP of Business Development and International Sales, **abraham@tcsdentalinc.com** for information on becoming a distributor.

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Christian Godoy cgodoy@laresdental.com
 +1 530 717 3145

● **Masa Medical Foundation** is one of the Saudi national institutions established in 2009. It concentrated its activities in the field of dental. Masa is characterized by supplying of materials for dental clinics and dental laboratories. It's also officially registered in the SFDA. We are looking for partnerships with factories in dental materials.

info@masa-medical.com
sales@masa-medical.com
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VOCO GmbH Marco Döhning (Area Manager Italy, Nordic Countries & Baltic States)

m.doehring@voco.de
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● We are a dental depot operating in Hungary. Our company has been operating for 28 years and we are interested in every product used by dentists.

Medi-Cont - Hungary
borsos@medi-cont.hu
www.medi-cont.hu
 +36 96 516 360

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Seliga Microscopes Sp. z o.o., ul.

Aleksandrowska 127, 91-205 Łódź

Paulina Polit **export@seliga.pl**

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● Since 1994 we have three branches in different cities. Licensed by the Ministry of Health and Trade of Iraq, we provide our services to private clinics, dental colleges and government health departments. We are distributors of many products from international companies.

Maher Office Trade Dental Devices & Supplies

Iraq

maher_alhadi2001@yahoo.com

● Our company, Ets Chic Method (CM) - based in Togo - is seeking for manufacturers, wholesalers and suppliers who would be interested to supply their products to Togo at competitive prices. Please contact Mr Koami Adoko. **Ets Chic Method (CM)** Togo - **ets.chicmethod01@gmail.com**
 +228 9983 1312

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cementumsolutions@gmail.com

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exocad GmbH Natalia Gonsior (Product Marketing Specialist) ng@exocad.com
www.exocad.com



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● **DynaFlex** is a world class manufacturing and distribution company located in St. Louis, Missouri offering a full range of high-quality Orthodontic products. DynaFlex is seeking International Distributors for our product line and looking to expand distribution opportunities worldwide.
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● **Addent, Inc.** is a dealer oriented company located in the USA that manufactures and exports high quality advanced dental products. Over the past 19 years we have supplied major distributors in the USA and overseas. A combination of good service, quality, and affordability enables us to retain and attract customers. **www.addent.com**

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HELPFUL TIPS

Given the current situation worldwide, we warmly invite you to check trade shows dates, venues and booths location listed in this magazine

Calendar

Here our trade shows selection.
Discover all worldwide dental exhibitions at
www.infodent.com/calendars/tradeshows

NOVEMBER / DECEMBER

06-08 11 2020

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**Global Summit - 2nd Edition
- International Association
of Paediatric Dentistry**

Taipei - Taiwan

For more info please contact:
secretariat@iapdsummit.org
Venue: The Howard, Plaza Hotel Taipei
Taipei
Taiwan

<https://iapdsummit.org/>



29/11-02/12 2020

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New York City - USA

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24-26/09/2020

VDE by CEDE 2020 - The Virtual Dental Exhibition by CEDE

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www.cede.pl/2020/en/news/cede-virtual-dental-exhibition-in-poland

03-05/12/2020

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Łódź - Poland

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Email: info@exactus.pl, cede@cede.pl,
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Website: www.exactus.pl

Venue: EXPO Łódź
Łódź - Poland

www.cede.pl/2020/en/news/cede-virtual-dental-exhibition-in-poland

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