



New site shows dentists the way

Bath Spa Dentistry is delighted to announce the launch of its new website

www.bathspadentistry.co.uk a useful communication tool for dentists wishing to refer patients for restorative, aesthetic and implant dentistry.

In addition to providing a comprehensive overview of the practice, its services and treatments, the site has been designed to make it easy for dentists to refer patients by giving them their own personal space and the option of using an on-line referral form.

Alternatively call the practice for a referral pack or email dermot@bathspadentistry.co.uk

Dermot McNulty and his team are happy to visit a practitioner to discuss treatment options for specific patients, and as Dermot explains: "We work closely with you to keep all parties fully informed throughout a treatment programme. It goes without saying that patients referred to the practice will be seen for that reason only and not for any General Dentistry. In no situation will a referred patient be allowed to remain at the practice. The

practice will operate on a referral only basis and it will certainly not be in our interest to retain referred patients." Full treatment planning and reports will be sent to the referring dentist, who will be invited to join in any part of the treatment planning and treatment process, if they so wish.

For dentists using the site, they should use the password 'implant'. The site is easy to navigate and features before and after images of the restorative treatments which patients also find particularly helpful and interesting.



Leading the way for implants

Implantology is one of the newest and fastest growing areas of dentistry. Yet a report by the General Dental Council (GDC) reveals that there is a distinct lack of guidance for dentists, and circumstances in which a dentist has not been adequately trained poses a risk to patients.

One body that is keen to ensure the industry is portrayed in a positive light, and that all involved carry out this invasive procedure to the highest standard is the Association of Dental Implantologists (ADI). Lead by its new president, Paul Stone, the Association has a number of aims including establishing core guidelines and a registerable qualification.

One of the concerns of the ADI is the perception put forward by many of the implant manufacturers that placing implants is a relatively straightforward and rewarding area of dentistry. Prospective dentists can be trained over a few weekends and then can place implants at will. Although in some cases implantology can be straightforward, the potential dental and medical pitfalls can be huge. Whilst the GDC is not responsible for the setting

of detailed clinical standards in particular areas of dentistry, it is clear that action is needed to protect patients.

Paul says: "There is understandable confusion among the public and our colleagues in the dental profession as to who is appropriately trained and experienced."

He adds: "In my opinion, a qualification should be available to all, but would be of a sufficiently high standard that most dentists intending to present for assessment would require significant additional training."

As to who delivers the training, sets the standards, and examines to assess for such a qualification to be recognised by the GDC is yet to be decided, but through the efforts of the ADI, the industry is making considerable headway towards agreeing appropriate training and competence.

Dermot McNulty has been actively involved in the placing and restoring of implants since 1987 and in the formation of the ADI, attending countless post-graduate programmes in the UK, Europe and the United States.

In order to formalise his expertise in this area, Dermot is about to complete the 18-month post-graduate Diploma in Implantology, leading to the Masters of Science Degree.

The diploma is awarded by the Faculty of General Dental Practitioners (FGDP) at the Royal College of Surgeons, London. It is a joint programme between the FGDP and Frankfurt and Tubingen Universities in Germany.

Dermot has been accepting referrals from practitioners for over 12 years. He has also attended a number of 12-month courses on restorative and aesthetic techniques and remains committed to excellence in all aspects of advanced restorative and implant dentistry.

If you are interested in referring patients to Dermot for implants and/or advanced restorative dentistry, please call the practice for a referral pack on 01225 464346 or email Dermot on dermot@bathspadentistry.co.uk. Alternatively, visit our website at

www.bathspadentistry.co.uk

Win a case of fine wines

Here's your chance to win one of three superb cases of fine wines. Simply answer the question below, complete the form and send in your entry and you could soon be receiving a www.justwine.com Gold Selection case of wines, courtesy of Bath Spa Dentistry.

Q. The Branemark Dental Implant is commonly perceived to be the first commercially available root form dental implant, however in Germany a ceramic implant was also available and was originally developed for immediate implantation into extraction sockets.

WHAT WAS THE NAME OF THIS IMPLANT SYSTEM?

A.
 Name:
 Practice name and address:
 Email: Phone:

- Please can: You send me a Bath Spa Dentistry Referral Pack
 You send me a Bath Spa Dentistry brochure
 Dr McNulty contact me by telephone



Please send your answer to Bath Spa Dentistry, 19a James Street West, Bath, BA1 2BT. The first three correct entries drawn after 30th July 2005, the closing date for entries will each receive a Gold Selection Case of Wine. No cash alternative will be offered. Winners will be contacted by phone.

Example of full mouth rehabilitation of multi discipline dentistry

1.1 Patient attended with broken teeth, crowns falling out at the front and back of the mouth and some missing molars.

The patient wanted to be able to smile again and was fed up with the continual patching he had received over the years.



Start of case showing gross overclosure

1.2 After models and full mouth wax ups were prepared, full mouth provisional shell crowns were fabricated at the appropriate vertical dimension.

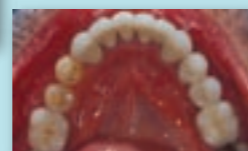
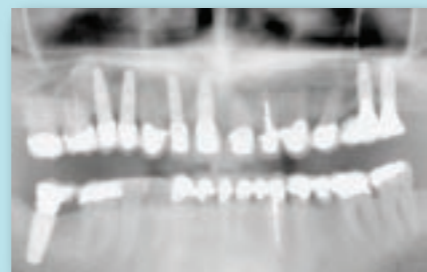


provisional shell crowns

wax up showing raised vertical dimension

1.3 Restorative dentistry included endodontics and crown lengthening, sinus augmentation was required to the left and right maxilla followed by implants at tooth position 12, 11, 47. and 15, 14, 26, 27 into augmented sinuses.

After further provisionalisation on uncovering of implants, definitive porcelain fused metal crowns were constructed and fitted.



Example of advanced restorative case using full mouth procera crowns

2.1 Patient attended unhappy with smile, teeth broken down and crooked.



2.2 PROCEDURE – Wax ups – full upper arch provisionals at desired vertical dimension and shape after full discussion with patient. Restorative dentistry included cores, root canal procedures and crown lengthening upper right and left molar regions



Provisionals worn for 6 months for fine tuning. Definitive Procera crowns were then constructed and fitted to replicate final provisionals.



Computer imagery helps show the way

In more complex restorative cases where Dr McNulty is concerned about the proximity of anatomical structures, he is able to prepare a pre-surgical treatment plan using advanced medical imaging technology.

Patients are referred to the Bristol Royal Infirmary and other approved sites for a CT scan after which Dr McNulty uses Image Diagnostic Technology (IDT) software to help him achieve the best possible results for dental implantology and reconstructive surgery.

Developed by IDT Ltd, a London-based medical imaging processing company, the superb programme makes it possible to place 'virtual' implants into an interactive 3D model of a patient's bony anatomy, assessing bone quality and availability. Having determined their proposed locations and orientations, a series of laser-fabricated surgical drill guides are made so that the treatment can be accurately transferred to the surgery for each patient.

