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الجمعية السعودية لأمراض وجراحة اللثة
Saudi Society of Periodontology



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الجمعية تحت إشراف



الهيئة السعودية للتخصصات الصحية
Saudi Commission for Health Specialties



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الجمعية السعودية لأمراض وجراحة اللثة
Saudi Society of Periodontology



Dear colleagues,

Here we are coming back to you with a new issue of your favorite society newsletter carrying plenty of new information, easy knowledge, and prodigious updates.

Once again, I would like to extend our thankfulness to the predecessor editorial team who have accomplished their mission successfully. Now, the new team is excited and can't wait to present to you a rich issue. Enjoy!

Dr. Adnan Almaghlouth
Editor in Chief

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CASE REPORT 1

Guided Tissue Regeneration With Hyaluronic Acid in Infrabony Defects

Name of author: **Rahaf Talal Alosaimi**
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INTRODUCTION

The regeneration of periodontal attachment apparatus is the ultimate goal of periodontal treatment. In infra-bony defects the mixture of growth factors, bone graft materials with guided tissue regeneration (GTR) has been proved to be a successful option of periodontal regenerative therapy.

CASE REPORT

Systemically healthy patient with advanced periodontal disease have multiple quadrants with infra-bony defects ranging from two to three bony wall defects, assigned to test hyaluronic acid (HA) mixed with Xenograft and bioresorbable membrane, the Probing pocket depth (PPD), clinical attachment level (CAL), radiographic assessment were taken at baseline and at 6 months post-surgery.

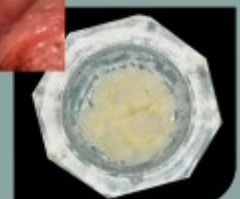
TREATMENT RESULTS

At 6 months, there is reduction in PPD, CAL gain and great reduction of radiographic defect depth.

DISCUSSION

The results showed that the use of HA led to significant improvement in PD and CAL at 6 months compared to baseline.

Posttreatment Pictures / Radiographs



CASE REPORT 1

Guided Tissue Regeneration With Hyaluronic Acid in Infrabony Defects

Name of author: **Rahaf Talal Alosaimi**Institute: **Umm AlQura university**Email: **rahaf-talal@live.com**

Few studies have deal with the use of HA in dentistry, Eliezer et al studied Twenty four infrabony defects in 20 patients were randomly assigned to test (HA in combination with bioresorbable membrane) and control (bioresorbable membrane alone) treatment groups, and the result showed significantly higher clinical attachment level gain, statistically significant greater reduction of radiographic defect depth was observed in the test group.

The most reliable outcome variable for assessing periodontal regeneration is human histology. Due to ethical considerations and patient management limitations, no histological evidence was obtained to establish the proof of periodontal regeneration.

CONCLUSION

HA with GTR shown to be a successful modality for the treatment of infra-bony defects as resulted in gain of CAL, PPD reductions and radiographic defect fill.

Posttreatment Pictures / Radiographs



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CASE REPORT 2

Palatogingival Groove : An Unseen Culprit

Name of author: **Dr. Shiraz Qadir**

INTRODUCTION

Morphological defects in dental structure can be predisposing factors for the onset of inflammatory process in the periodontal / pulpal tissues. These defects predominantly affect the maxillary incisors. One among them is cinguloradicular Groove¹. Other synonyms for such tooth anomaly are palatogingival Groove², distolingual Groove³ and radiculolingual Groove⁴.

CASE REPORT

A 19 year old female patient reported to our office with a complaint of pain in the upper right front tooth region since 3months. Periodontal examination revealed 6mm pocket associated with a deep cinguloradicular groove in relation to the maxillary right lateral incisor on its palatal surface (figure 1). There was neither caries nor any history of trauma in relation to the concerned tooth. Pulp of the tooth revealed a negative response to an electronic pulp tester. An intraoral periapical radiograph revealed a diffused periapical radiolucency involving the apical one third of the root in relation to 12 and also extending to involve 13 (figure 2). Since bilateral occurrence of the palatoradicular groove is possible, tooth 22 was also examined, but no evidence of a palatoradicular groove was found after sulcular probing. The resulting condition was diagnosed as chronic periapical abscess associated with localised periodontitis resulting from cinguloradicular groove. The case was conducted in accordance with the Declaration of Helsinki (1964). An informed consent was taken from the patient before performing the treatment.

Figure(s)



Figure 1: 6mm periodontal pocket in relation to 12



Figure 2: Pre operative radiograph

CASE REPORT 2

Palatogingival Groove : An Unseen Culprit

Name of author: Dr. Shiraz Qadir

TREATMENT PLAN

Treatment plan comprised of thorough scaling, root planning and root canal therapy followed by periodontal surgery for the treatment of pocket elimination, groove repair and apicectomy. Access opening was done under rubber dam isolation. After extirpation of pulp, the working length was determined. Biomechanical preparation was done using K files of ISO size 50. Calcium hydroxide was placed as intracanal medicament and access cavity was temporarily sealed with cavit (zinc oxide eugenol). The patient was recalled after 7 days and obturation was done with gutta purcha cones using lateral condensation technique. The access cavity was sealed with glass ionomer cement (Fuji II, GC corporation). One week after root canal therapy, the periodontal flap surgery was done. Following local anesthesia full thickness mucoperiosteal flap was reflected on labial and palatal aspect of 13, 12, 11 and 21 (figure 3). On the palatal aspect of 12 a shallow cinguloradicular groove was detected which was extending into the radicular area and a horizontal bony defect was noted. Prior to restoration of groove, it was widened by using a round bur (figure 4). This process is called Saucerisation. Acid etching was done and was restored with flowable composite (figure 5, 6, 7). On the labial aspect, flap was extended beyond mucogingival junction to view the bony defect created by abscess (figure 8). A wide defect was noted surrounding the root apex of 12. Thorough debridement was done in the defect area (figure 9).

Figure(s)



Figure 3:
After elevation of full thickness flap.



Figure 4:
Saucerisation of the groove.



Figure 5:
Sealing of the groove with flowable composite .



Figure 6:
During composite light curing.



Figure 7:
After sealing with flowable composite.



Figure 8:
Bony defect at the root apex.



Figure 9:
After thorough debridement.

CASE REPORT 2

Palatogingival Groove : An Unseen Culprit

Name of author: **Dr. Shiraz Qadir**

Apicectomy was done to remove 3mm of root apex and retrograde filling was done with GIC (figure 10).

The wide bony defect is filled with PRF (Platelet Rich Fibrin) and bovine bone (G-Graft) (figure 11, 12, 13, 14). Flap was approximated and sutured with non resorbable suture (figure 15). Periodontal dressing was placed (figure 16).

Post operative instructions were given and patient was adviced to use 0.12% chlorhexidine mouth wash for 4 weeks. The patient was recalled after 10 days for suture removal.¹⁰

Figure(s)



Figure 10: After elevation of full thickness

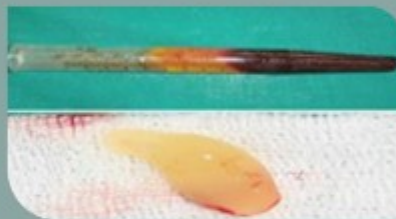


Figure 11: Preparation of platelet rich fibrin



Figure 12: A mixture of bone graft and PRF



Figure 13: Placement of graft and PRF into the defect site



Figure 14: After placement of graft and PRF into the defect site



Figure 15: After suture placement



Figure 16: After periodontal dressing placement

CASE REPORT 2

Palatogingival Groove : An Unseen Culprit

Name of author: **Dr. Shiraz Qadir**

Results

Post operative examination revealed satisfactory healing (figure 17). Post operative healing radiographs were taken after 1month, 3months and 6months (figure 18, 19, 20). Periodontal probing depth was decreased to 3mm after 1month and 3months (figure 21, 22), 2mm after 6months (figure 23). As we have used a radiolucent retrograde filling material i.e. GIC, it was not visible in the post operative radiograph.

Figure(s)



Figure 17: Post operative healing after 1 month



Figure 18: Post operative radiograph after 1 month



Figure 19: Post operative radiograph after 3 months

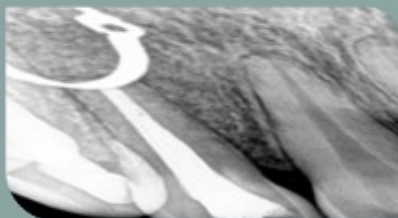


Figure 20: Post operative radiograph after 6 months



Figure 21: Periodontal probing depth after 1 month



Figure 22: Periodontal probing depth after 3 months



Figure 23: Periodontal probing depth after 6 months

Palatogingival Groove : An Unseen Culprit

Name of author: **Dr. Shiraz Qadir**

DISCUSSION

Several studies have been conducted in order to determine the prevalence of cinguloradicular groove. Its prevalence is approximately 2.8%–8.5%^{5,6}. A study by JP Ennes¹⁰ compared the morphological analysis of the root developmental groove with the palato-gingival groove and found many similarities between the two, such as the increased cementum thickness, decreased dentin thickness, pulp compartment surface alteration, irregularity of the dentin–cementum junction and of the cementum surface.

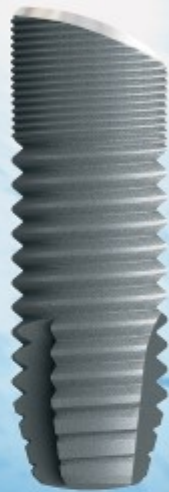
Kogon et al⁸ observed extracted teeth of 1786 maxillary lateral incisors after staining with methylene blue under microscope. He found 100 of them exhibiting palatogingival groove. Out of these 100 grooves 77 originated in cingulum, 15 in lateral fossa, 7 at cemento-enamel junction and 1 on root proceeding apically. Out of 100 grooves 13 were located on the mesial side, 25 were located on the distal side and 62 on the mid palatal surface. In the present case, the groove was located on the mid palatal surface.

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OUR WORLD IS NOT FLAT

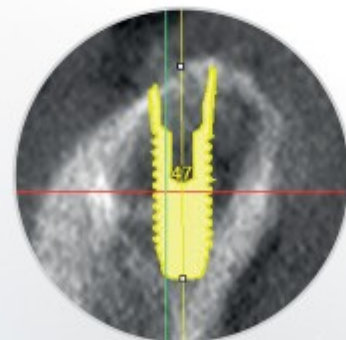
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Guidance for Treating Emergency/Urgent Dental Cases

BACKGROUND

COVID-19 was announced by the world health organization as a pandemic on March 11th, 2020. Since then and as of August 6th 2021 WHO reported ~201 M confirmed cases, and ~4.3 M deaths worldwide. Even though reported vaccine doses are quickly rising worldwide, variants of the corona virus continue to emerge, it is thus prudent to continue to practice precautionary measures in the dental office. Infection rates of healthcare workers are still lower than those outside of a healthcare setting, this is probably a result of the protective measures followed in healthcare settings prior and in response to the pandemic.

Transmission of COVID-19 occurs through respiratory droplets and secretions, either by direct exposure or via touching contaminated surfaces.

GUIDANCE

To date there is no standard global guidance to follow for COVID-19 in the dental office. Such guidance by authoritative bodies worldwide are local to their geography and continue to be updated according to available information.

In the Kingdom of Saudi Arabia, a guidance for treating emergency/urgent dental cases was provided by the ministry of health in 2020, and another one updated by the Saudi Patient Safety Centre on May 18th, 2020. Summary of the guidance is below:

Contact patients before their arrival in the dental office to inquire about COVID-19 symptoms.

Use telehealth whenever applicable, available, and possible to assist patients remotely and reduce unnecessary flow of patients into the clinic.

Guidance for Treating Emergency/Urgent Dental Cases

Entrance check-in at the dental office/facility should be available and visible to immediately inform the reception of possible COVID-19 symptoms.

All healthcare providers involved in direct patient care should adhere to the strict use of personal protective attire including gowns, N95 masks, and protective goggles (or face shield) or disposable plastic wrap around glasses.

Hand hygiene, using correct hand washing technique, is recommended at multiple instances throughout patient treatment as per WHO, these are: before touching the patient, when performing clean/aseptic procedures, after body fluid exposure risk, after touching a patient, and after touching patient surroundings.

COMMENTARY

While many research works have been published on measures to follow for elective dental treatments since their re-activation in KSA during the COVID-19 pandemic, none are by an authoritative body. It is important nevertheless to continue to exercise applicable cautionary measures recommended in the emergency guidance provided above, stay informed, and exercise good professional judgement.

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Health Care Attire

In Covid 19 pandemic days, people shall deliberately observe their behavior for the public safety to prevent spread out a very serious infectious disease. I am confident, today's community is aware the transmission velocity of Covid 19 virus between individuals. Sadly enough, it was noticed that few health care staff pass by other places after they finish their shifts in health care institute (ex: hospital, dental clinic, or polyclinic). As result, they might contribute to transmission of corona virus or any other diseases.

Medical scrubs were designed to protect patients who were going through major surgery in operation room. On the other hand, people outside the hospital earn to be protected from all illness threaten health of the population. As the centers for Disease Control and Prevention states the classic method for coronavirus transmission is through respiratory droplets. These droplets can be emitted from infected person and adhere to medical staff cloth. According to Susan M. Perry, PhD, CRNA, ARNP, FAAN, who served as an infection control officer in the U.S. Air Force in the 1990s, wearing scrubs and healthcare gowning in public is a valid concern. Major concerns involve infectious, viruses, bacteria and other species found are on the scrubs and being taken outside hospitals, exposing public at risk.

The Covid-19 outbreak has forced health care providers, administrative officials, and the public to be responsible to avoid harmlessness other human being. It may come as a surprise to many people, but health care workers may ignorantly spread Covid-19 in their communities simply by wearing scrubs in other public places. Scrubs–surgical gowns, caps, and shoe coverings–are carriers of virulent pathogens that present a danger to unsuspecting bystanders. Some scrub manufacturers state scrubs are antimicrobial and leave the impression that the nuisance of changing clothes can be avoided, but the scientific studies do not support this claim. A systematic review of the literature (Bacterial contamination of medical providers

Guidance for Treating Emergency/Urgent Dental Cases

white coats and surgical scrubs, Shreya Goyal BBA, 2019) shows that nearly two dozen studies found scrubs contained pathogenic hazards and transmitted multidrug-resistant bacteria, posing a threat to public health. A 2018 study found that nearly one-third of over 700 scrubs were contaminated with pathogenic bacteria. Other analyses of nurse uniforms record bacteria colony growth per square-inch of apparel averaged 5,795 for a night shift. These findings have been confirmed by large-scale studies, most notably the 2017 Antimicrobial Scrub Contamination and Transmission (ASCOT) Trial.

Droplets of Covid-19 will find their way onto scrubs and have been found to stick on materials for over a week and survive for even up to almost a full month in the air. As many as 25% to 50% of people infected with Covid-19 have no symptoms and, therefore, are completely unaware they are contagious.

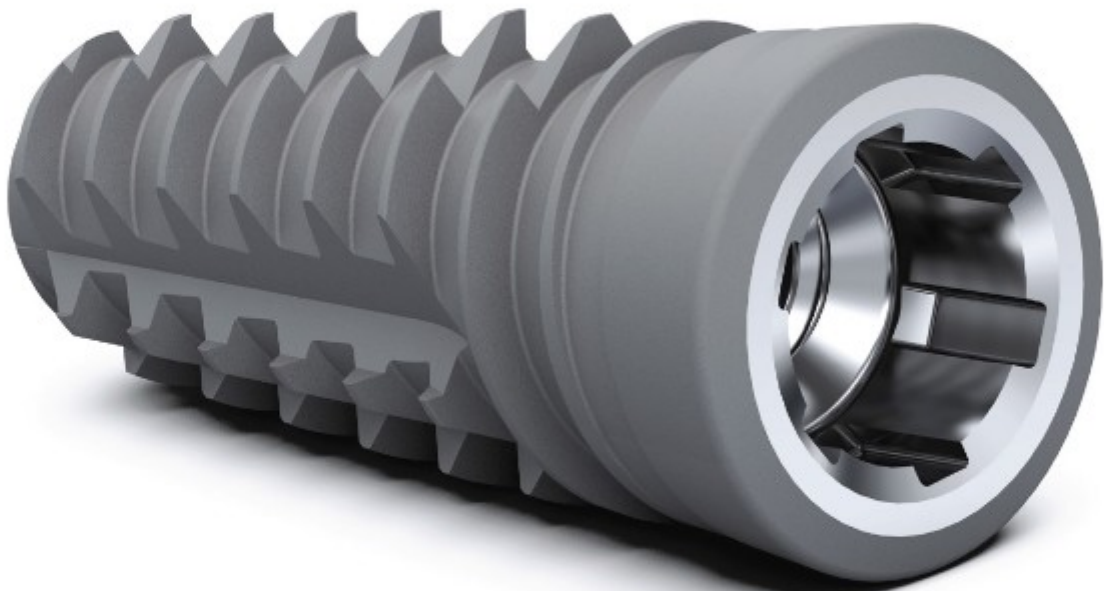
According to Dr. Perry et. al, scrubs have become popular over the years with some healthcare provider wear them continuously for comfort. Unfortunately, this habit had spread to other many employers, including dental offices, require staff to wear scrubs. Therefore, officials had agreed that "Health care workers should be advised to not wear scrubs anywhere in public during this time. It would be more considerate of the public concern to change out of scrubs before going into anywhere other than your workplace. That would mean either only wearing the scrubs to and from work and home or wearing other clothes into work and changing in and out of them at work. As right now, seeing scrubs in public could cause people to feel uneasy. It also sends the wrong message to the public about how careful the health care workers are being to protect the public. At times like this perception is reality."

Despite internal hospital regulations and policies, the expansion awareness among society, of the seriousness raise phenomenon appearance of wearing professional medical uniforms in public places, such as local markets, restaurants, or entertainment area for young children, is the first stride to maintain our children, family, relatives and self's protected.



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SSP Community Scientific Output

11 indexed publications from Saudi periodontists were noted for the 2nd quarter of 2021, well done!

| v | Name | Institution | Publication title | Link to the journal |
|---|--|---------------------------|--|---|
| 1 | Dr. Zuhair S Natto | King Abdulaziz University | Laser therapy for dentinal hypersensitivity | https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD009434.pub2/full |
| 2 | Dr. Adnan AlMaghlouth | King Fahad Medical City | Patient satisfaction with the emergency department services at an academic teaching hospital | https://www.jfmpe.com/article.asp?issn=2249-4863;year=2021;volume=10;issue=4;spage=1718;epage=1725;aulast=Abass |
| 3 | Dr. Adnan AlMaghlouth | King Fahad Medical City | Improving Surgical Antibiotic Prophylaxis Compliance in Adults and Children Undergoing Surgery: a Quality Improvement Study | https://irispublishers.com/asoj/pdf/ASOAJ.MS.ID.000544.pdf |
| 4 | Dr. Reham Aljasser Dr. Razaan S Alageely Dr. Ibrahim A Alhogail Dr. Mohammed AlHaddab | King Saud University | Association between isotretinoin (Roaccutane) use and changes in periodontal clinical parameters and MMP-8 and MMP-9 salivary levels | https://www.researchgate.net/publication/353668236_Association_between_isotretinoin_Roaccutane_use_and_changes_in_periodontal_clinical_parameters_and_MMP-8_and_MMP-9_salivary_levels |
| 5 | Dr. Mohammed Alsarhan Dr. Musaad A Altammami Dr. Razaan S Alageely Dr. Ahmad AlEbdi | King Saud University | Short-Term Improvement of Clinical Parameters and Microbial Diversity in Periodontitis Patients via Indocyanine Green-Based Antimicrobial Photodynamic Therapy: A Randomized single-blind Split-Mouth Cohort | https://www.researchgate.net/publication/351814778_Short-Term_Improvement_of_Clinical_Parameters_and_Microbial_Diversity_in_Periodontitis_Patients_via_Indocyanine_Green-Based_Antimicrobial_Photodynamic_Therapy_A_Randomized_single-blind_Split-Mouth_Cohort |

SSP Community Scientific Output

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|----|---|--|--|---|
| 6 | Dr. Reham Aljasser Dr. Sundus Bukhary Dr. Mohammed Alsarhan Dr. Dalal AlOtaibi | King Saud University | Regenerative Therapy Modality for Treatment of True Combined Endodontic-Periodontal Lesions: A Randomized Controlled Clinical Trial | https://www.researchgate.net/publication/352231737_Regenerative_Therapy_Modality_for_Treatment_of_True_Combined_Endodontic-Periodontal_Lesions_A_Randomized_Controlled_Clinical_Trial |
| 7 | Dr. Reham Aljasser Dr. Mohammed Alsarhan Dr. Dalal AlOtaibi Dr. Salah Aloraini | King Saud University | Analysis of Prosthetic Factors Affecting Peri-Implant Health: An in vivo Retrospective Study | https://www.researchgate.net/publication/351834478_Analysis_of_Prosthetic_Factors_Affecting_Perio-Implant_Health_An_in_vivo_Retrospective_Study |
| 8 | Dr. Reham Aljasser Dr. Mohammed Alsarhan Dr. Dalal AlOtaibi Dr. Salah Aloraini | King Saud University | Evaluation of clinical performance and survival rate of Straumann dental implants in Saudi Population based on cross-sectional study | https://www.researchgate.net/publication/351317789_Evaluation_of_clinical_performance_and_survival_rate_of_Straumann_dental_implants_in_Saudi_Population_based_on_cross-sectional_study |
| 9 | Dr. Reham Aljasser Dr. Abdulelah Alsubaie Dr. Fayes AlShehri | -King Saud University -Imam Abdulrahman bin Faisal University | Effectiveness of beta-tricalcium phosphate in comparison with other materials in treating periodontal infra-bony defects around natural teeth: a systematic review and meta-analysis | https://www.researchgate.net/publication/351212487_Effectiveness_of_beta-tricalcium_phosphate_in_comparison_with_other_materials_in_treating_periodontal_infra-bony_defects_around_natural_teeth_a_systematic_review_and_meta-analysis |
| 10 | Dr. Salwa Aldahlawi Dr. Dalia Nourah Dr. Sebastiano Andreana | Umm Al-Qura University | Should the quality of glycemic control guide dental implant therapy in patients with diabetes? Focus on implant survival. Part I | https://www.dovepress.com/should-quality-of-glycemic-control-guide-dental-implant-therapy-in-pat-peer-reviewed-fulltext-article-CCIDE |
| 11 | Dr. Salwa Aldahlawi Dr. Dalia Nourah Dr. Sebastiano Andreana | Umm Al-Qura University | Should Quality of Glycemic Control Guide Dental Implant Therapy in Patients with Diabetes? Focus on: Peri-Implant Diseases | https://pubmed.ncbi.nlm.nih.gov/33911902/ |

SSP Webinar Scientific Activities

The Saudi Society of Periodontology E-Learning Committee conducted 9 online Scientific Activities from April to August 2021. Speakers have brought great up to date knowledge and received a very good feedback from the attendees with total attendees of **22,226**.

| Activity Date | Speaker Name | Country | Lecture Title | CME Hours | No. of Attendees |
|---------------|--------------------------|-------------|---|-----------|------------------|
| 06-Apr-21 | Dr. Spyridon Silvestros | Greece | Peri-implantitis the Enemy of the New Era | 2 | 80 |
| 24-Apr-21 | Dr. Asim Alsuwaiyan | KSA | Options for Root Coverage | No | 2700 |
| 01-May-21 | Dr. Sawsan Fadhl Almwala | KSA | The Road to US Postgraduate Dental School : Everything You Need to Know | No | 1494 |
| 26-27 May 21 | Dr. Ehab Tawfiq | KSA | Autogenous Tooth Graft: A Literature Review | 4 | 2936 |
| | Dr. Alhassan Ajeebi | KSA | Periodontal Esthetic Management | | |
| 29-May-21 | Dr. Suzan Banjar | KSA | Treatment of Gummy Smile within Facial Esthetics and Dentistry | 2 | 6059 |
| | Dr. Shaimaa Alharthi | KSA | From a Hopeless Tooth to an Implant. What Do We Need to Think about? | | |
| 09-Jun-21 | Dr. Khalid Nazmi Said | Qatar | Covid19 and Periodontal Health | 1 | 2646 |
| 19-Jun-21 | Dr. Giles De Quincey | Netherlands | Socket Grafting: Making a Challenge into a Success! | 2 | 2395 |
| | Prof. Ali Tahmaseb | KSA | Current Status of (Pre-) Implant Surgery | | |
| 24-Jul-21 | Dr. Bandar Almaghrabi | KSA | Clinical Application of Vascularized Interpositional Periosteal Connective Tissue Graft (VIP-CT) in Implant Dentistry | 2 | 2404 |
| 28-Aug-21 | Dr. Wesam Alsalman | KSA | Maxillary Sinus and implant - Update | 2 | 1512 |
| | Prof. Mona M. Aboelnagga | KSA | Oral Rehabilitation of Aggressive Periodontitis with Immediate Partial Denture | | |

**The Saudi Society of Periodontology
is pleased to welcome our new Periodontist
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Dr. Mohammed Alqarzaee
Bachelor's degree:
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"Peri-Implantitis the Enemy of the New Era"
April 28, 2021 | 2100 - 2300 KSA Time | Riyadh



SPEAKER
DR. SPYRIDON SILVESTROS
DDS, PhD, FICD Assistant Professor,
Department of Prosthodontics,
School of Dentistry,
National and Kapodistrian
University of Athens, Greece

Short Abstract

Implant therapy, nowadays, has become a well-established treatment modality with high survival rates. Nevertheless, biologic complications including peri-implant mucositis and peri-implantitis may occur with the latter being more serious, as the damage of the peri-implant tissues is irreversible only up to specific goals.

Many risk factors of peri-implantitis have been identified, as implants have distinct differences from teeth, but the most important part in therapy while aim is elimination of peri-implant tissue inflammation, to that extent that stops the progress of their damage and regeneration of lost tissues where it feasible.

Therapy includes non-surgical techniques, with mechanical and chemical agents, as well as surgical resective and regenerative techniques with the ultimate goal being achievement of re-osseointegration.

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"Options for Root Coverage"
April 24, 2021 | 1000 KSA Time | Riyadh



SPEAKER
DR. ASIM ALSUWAYAN
Consultant of Periodontics
Implant Dentistry
Diplomate of the American Board of
Periodontology

Short Abstract

Gingival recession is a common problem that compromise dental aesthetic, may cause functional limitations, and interfere with proper oral hygiene. Multiple etiological factors can lead to gingival recession and may result in different clinical presentations.

There are several successful treatment options for gingival recession. Each option depends on the clinical findings and other related factors. This presentation will summarize these options and help clinicians in case selection and clinical decision-making.

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"The Road to US Postgraduate Dental School : Everything You Need to know"
May 01, 2021 | 0400 - 05:00 PM | Riyadh



SPEAKER
DR. SAWSAN FADH ALMWALA
Teaching Assistant
Periodontology Department
Tabah University

MODERATORS: Dr. Khalid Bahammam
Dr. Ruba Alsaf

By the end of this lecture, you will be able to know:

- Saudi Scholarship Programs
- How to choose a University for postgraduate studies?
- US Dental Schools' Requirements (TOEFL, IELTS, NBDE, GRE, etc)
- US Dental School Application Process
- How to increase the chance of acceptance?

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"Treatment of Gummy Smile within Facial Aesthetics and Dentistry"
27th May 2021 | 1930 - 2100 Riyadh Time | Riyadh



SPEAKER
DR. SAEED BINAGOR
DMD, MSc, MEd, FRCR, FRCR
Consultant in Facial Implantology and Reconstructive
Dentistry, Consultant in Orthodontics, Riyadh, KSA

Short Abstract

Gummy smile can be a cosmetic problem that can impact the patient's appearance. There are several treatment options available, ranging from a surgical blepharoplasty to a lip lift. This presentation will discuss the various treatment options available for gummy smile, including the use of Botox and lip lift surgery.

"From a Hopeless Tooth to an Implant : What Do We Need to Think about?"
28th May 2021 | 2130 - 2200 Riyadh Time | Riyadh



SPEAKER
DR. SHAIMA ALJANKI
MSc, BDS, MSc, FRCR, FRCR
Head of Implantology and Reconstructive
Dentistry at the Hospital of
Dentistry, King Fahad Bin Abdulaziz
University, Riyadh, KSA

Short Abstract

Reconstructive dentistry is a part of comprehensive dental care. There are many options available for the treatment of hopeless teeth, including the use of implants. This presentation will discuss the various treatment options available for hopeless teeth, including the use of implants.



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ONLINE SCIENTIFIC ACTIVITY

"COVID 19 and Periodontal Health"
June 09, 2021 | 0800 - 1030 PM | Riyadh



SPEAKER
DR. KHALID NAZMI SAID
BDS, MSc, Fellow,
Diplomate American Board of Periodontology
and Implant Surgery
Senior Consultant of Periodontics,
Hansal Medical Corporation, Qatar



DR. JOSE NART MOLINA
Doctor in Dental Surgery (DDS) and PhD in Dentistry, Spain
Diplomate, American Board of Periodontology,
Professor, Chairman and Program Director, Department of
Periodontology UIC, Barcelona (EFP accredited program)
Vice president, Spanish Society of Periodontology and
Quadrangulation (SEPA).



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ONLINE SCIENTIFIC ACTIVITY

"New Techniques in Implant Dentistry"
07 June 2021 | 0830 - 1000 PM | Online - Riyadh Based

SPEAKERS



"Socket Grafting : Making a Challenge into a Success"
PROF. GILES NICHOLAS DE QUINCEY
Associate Clinical Professor of Periodontology
Consultant in Periodontics, Oral Pathology,
and Maxillofacial Surgery



"Current Status of (Pre-) Implant Surgery"
PROF. ALI TAHASEB
Professor of Oral and Maxillofacial Surgery

MODERATOR



DR. ADNAN ALMAGRABI
Board Member of Saudi Society of Periodontology
Consultant in Implantology, Oral Implant



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ONLINE SCIENTIFIC ACTIVITY

"Clinical Application of Vascularized Interpositional Periosteal Connective Tissue Graft (VIP-CT) in Implant Dentistry"
18th July 2021 | 0830 - 1030 PM | Online - Riyadh Based

SPEAKER



DR. BANDAR ALMAGRABI
Clinical Associate Professor & Assistant Director of
Implant Dentistry Center, University of Buffalo
Consultant in Periodontology, Dental, Esthetics,
and Implant Dentistry, KSA

MODERATOR



DR. TALAL ZAHID
Associate Professor in Periodontology,
Board Member of the Saudi Society of Periodontology,
Board Member of the Saudi Board Council in
Periodontology at Saudi Commission for Health
Specialties, KSA



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"12th RESIDENT DAY"
May 25 to 27, 2021 | 0800 AM - 10:30 PM | Online | Riyadh Based

DAY 1: LECTURE TITLE: "Autogenous Tooth Graft: A Literature Review"

KEYNOTE SPEAKER:



DR. CHAF T. HTMALKU EDDIS, DMD
Consultant of Periodontics

Short Abstract

Although the direct composite resin technique offers tooth substitutes, tooth transplants have remained the standard of care for replacement of the tooth. This presentation will discuss the various treatment options available for tooth transplants, including the use of autogenous tooth grafts.

DAY 2: LECTURE TITLE: "Periodontal Esthetic Management"

KEYNOTE SPEAKER:



DR. ALHASAN M. AZEEB
Consultant of Periodontics
Board Member of Saudi Society of
Periodontology

Short Abstract

Periodontal esthetic management is a challenging task for the clinician. This presentation will discuss the various treatment options available for periodontal esthetic management, including the use of periodontal surgery.



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ONLINE SCIENTIFIC ACTIVITY

"Maxillary Sinus and Implant : Update"
28th August 2021 | 0830 - 1030 PM | Online - Riyadh Based



DR. WESAM TALAL ALJALSMIR
Periodontist and Implantologist
Oral Implantology



"Oral Rehabilitation of Aggressive Periodontitis with Immediate Partial Denture"
PROF. HANA M. ABDEL NAGDA
Consultant in Periodontics
Associate Professor of Prosthodontics,
College of Dentistry, Tabah University, KSA
Faculty of Dentistry Ain Shams University, Egypt

MODERATOR



PROF. MAHA BAHAMMAM
Professor and Consultant in Periodontics
Board Member of Saudi Society of Periodontology



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Description: This is a Calcium-Phosphosilicate bone graft material based on NovaBone's bioengineered technology platform that offers enhanced handling characteristics with unparalleled performance.

Delivery System: available in multiple delivery mechanisms: clamshells, syringes, and a disposable uni-dose cartridge. Cartridges are available in various sizes and are used in conjunction with NovaBone's cartridge delivery system.

Link of Brochure: <http://www.novabone.com/NB/dentalputty.html>.

Platelet rich fibrin:(A-PRF and I-PRF)

Description: I-PRF – Injectable liquid form Plasma Rich Fibrin. It's a modern and unique technology of regeneration of human tissues.

A-PRF: Advanced platelet rich fibrin (APRF) first described in 2014 as a new concept for cell-based tissue engineering with decreasing the rpm while increasing the time of standard platelet rich fibrin (PRF). More platelets were found in distal part of A-PRF compare to standard PRF.

Delivery System: This technology is based on withdrawing patient's autologous blood and after specific centrifuging system, plasma rich fibrin can be used in areas targeting regeneration with various forms.

Link of Brochure:

<https://www.biofixt.be/uploads/catalogues/brochure-duo-quattro-prf-system.pdf>

BRANDE NAME: AmnioExcite™

Description: This new technology of resorbable membrane which is a lyophilized, full-thickness placental membrane allograft decellularized with LifeNet Health's proprietary Matracell® process and patent pending technology and intended for

Delivery System: homologous use as a barrier membrane.(1) Inclusion of the intact amniotic and chorionic membranes, as well as the trophoblast layer, makes it thicker than most available amniotic-only or amniotic-chorionic allografts, and provides a robust protective covering while also delivering superior handling.

Link of Brochure:

<https://www.salvin.com/Salvin-AmnioExcite-Amnion-Chorion-Membrane-20mm-x-30mm-pluAMNIO-MEM-20x30.html>

CALENDAR OF EVENTS

September 23-25, 2021



Dentsply Sirona World 2021

<https://web.cvent.com/event/1c6379ad-4b77-432e-98c8-bcb817743a3c/summary?rp=00000000-0000-0000-0000-000000000000>

October 1-2, 2021



International Team of Implantology Congress

International Team of Implantology Congress

November 4-7, 2021



107 Annual Meeting

<https://registration.experientevent.com/showper211/flow/ATT#!/registration/Login/>

November 24-27, 2021



Periodontology and Oral Health Conference – Sevilla : Sepa21

https://www.sepa.es/web_update/

September 11, 2021



Hypersensitivity in Dentistry

<https://saudiperio.org/upcoming-events/>

September 18, 2021



Multidisciplinary Management in the Esthetic Zone

<https://saudiperio.org/upcoming-events/>

October 28-30, 2021



The Art and Beauty of Prosthodontics

<http://spsconference.com/>

October 30- November 01, 2021



Makkah International Dental Conference and Exhibition

<https://makkahdental.com/>

The SaudPerio2021- 2nd International Conference is officially open for registration!
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“WHEN TO GIVE TEETH A CHANCE”

📅 November 18 to 20, 2021



Prof. Giovanni Zucchelli



Prof. Hom-Lay Wang



Prof. Mariano Sanz



Prof. Jeanie Suvan



Prof. Leandro Chambrone



Prof. Søren Jepsen



Prof. David Herrera



Prof. Filippo Graziani



Prof. Ali Alghamdi



Dr. Ignacio Sanz Martin



Dr. Antonio Liñares



Prof. Nicola West



Prof. Naheed Mohamed



Prof. Cristiano Tomasi



Dr. Fahad Alshehri



Dr. Sharif Said



Dr. Luca De Stavola



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Saudi Society of Periodontology

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