Planmeca makes CAD/CAM easier than ever

State-of-the-art solutions for dentists

Planmeca’s open-interface-based CAD/CAM solutions introduce, above all, quality, cost-efficiency and precision to the daily workflow at dental clinics or laboratories. Petri Kajander, Product Manager for Planmeca’s CAD/CAM solutions, explains the revolutionary features of these new products.

Planmeca PlanScan – Super Fast Intraoral Scanner

The new Planmeca PlanScan is a digital and powder-free intraoral scanner that scans the patient’s dentition quickly and accurately. The scanner produces real-time digital impressions from one-tooth to full-arch scans. Thanks to the open STL data, the scanned files can be sent to any dental laboratory for design work. This is the world’s first dental unit-integrated intraoral scanner that can also be connected to a laptop.

“The scanner has only one cable, so it is extremely easy to move from one place to another, for example between different treatment rooms or clinics,” says Product Manager Petri Kajander. In addition, the scanner is delivered with a laptop, so the device can be flexibly shared between different users. In other words, Planmeca PlanScan offers value for your investment: it is not a device for just one dentist but can be used by the entire clinic.”

The scanner utilises blue laser technique. It projects a pattern on the surface of the teeth and then analyses it from different directions while calculating distances. In this way, the device is able to calculate a model that is extremely accurate. “You can view the result as a real-time video image. The video recording and the dental surface identification algorithm make the device extremely flexible to use. Thanks to these features, you can pause the scanning at any time and continue later on at any point from where data is already available.”

The scanner includes a range of exchangeable tips in various sizes, the smallest of these facilitating access to the posterior parts, particularly with small children and trauma patients. The tips can be autodslaved for efficient infection control. In addition, the scanner is extremely durable since it has no other moving parts inside except for a fan that removes warm air. “Thus, the device stays calibrated and is not subject to mechanical wear”, explains Kajander.

Planmeca PlanCAD Easy – Efficient Design Tool for Prosthetics

Planmeca also offers dentists a new kind of open software solution for 3D design. Planmeca PlanCAD Easy is seamlessly integrated in Planmeca Romexis software and it is a user-friendly design tool for the design of inlays, onlays, veneers, crowns and bridges.

“The software runs on the so-called floating licence basis. This means that if it is not tied to just one computer or workstation, but the work is saved on the Planmeca Romexis server. In this way, the scanning station can be used only for scanning, while another workstation is used for the actual design work. This is actually a unique feature, which allows work to be continued straight away on another computer, while the scanner is freed for more productive operations”, says Kajander.

Every dentist designing his or her own prosthetic works will also face cases that require assistance from a dental laboratory. For this reason, Planmeca’s system utilises an open STL file format that allows the work to be sent immediately to a partner via the Planmeca Romexis Cloud service.

Since Planmeca PlanCAD Easy is integrated in Planmeca Romexis software, soft tissue scans can also be conveniently paired with the patient’s CBCT image. This combined data provides valuable information for implant planning, for example, because in addition to the soft tissues, it visualises the crown that is designed for the occlusion. This facilitates the planning of the implant screw’s location.

The Planmeca PlanCAD Easy workflow from preparation to the finished result includes just five easy stages: work description, scanning, marking of the margin line, automatic design, and sending the work to the mill. “Once the work has been sent to the mill, it is transferred there in its entirety and the mill’s computer finishing the work. In this way, the software and scanner are immediately freed for a new assignment.”

The software is very user-friendly. All design phases are saved automatically, and if further impressions are needed, previous phases can be re-accessed. The automatic design software automatically takes into account the adjacent tooth’s cusps and marginal ridge in addition to the contact areas defined by the user. This creates a design that always fits its surroundings.

Planmeca PlanMill 40 – Fast and Precise Milling Unit for Dental Clinics

Planmeca PlanMill 40 is an extremely precise four-axis milling unit supporting the open STL file format. Planmeca PlanScan Lab scanner is an accurate desktop scanner utilising blue light for scanning gypsum models and impressions. The device scans gypsum models fast and effortlessly with an accuracy of 15 micrometres.

Designing takes place in the open Planmeca PlanCAD Premium laboratory software, which can be used for the design of all prosthetic pieces, ranging from one-tooth units to full-arch structures. The software can also be used to design individual abutments, implant bridges and bars for cemented and screwed solutions.

Designing begins with defining the margin line, after which the path of insertion is selected and the structural design of the crown, bridge or implant. Several automatic functions assist in the design work, and as the design progresses, the software shows the contact areas, material thickness and distance to the antagonist or adjacent tooth. A diagnostic wax-up made in the laboratory or anatomic models saved in the software can be utilised in the design work.

The software has an Order Manager page that brings efficiency to the workflow by reporting the stage of each work. In this way, several work orders can be entered in the software in one go. The last phases always saved in memory so working can be continued fairly at the same time. In addition, precise values can be set to each work for the cement gap and milling unit’s blade.

Since the STL file is created as a result of the design work, and it can be manufactured with all milling units supporting the open STL format, including the Planmeca PlanMill 50. This milling unit can be used for the milling of all most common materials, excluding metals. In addition, the open STL file can be sent to a milling centre for manufacturing, such as Plandent’s own PlanEasyMill milling centre.
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VITA presents extension of its DISC product line

With discs now also available in zirconium dioxide, German company VITA Zahnfabrik aims to meet current user requirements for the fabrication of high-quality restorations for patient-specific aesthetics. Launched already in March 2013, VITA In-Ceram YZ DISC Color and VITA YZ DISC HT are extensions to VITA’s DISC product line for the partially yttrium-stabilised zirconium dioxide material VITA In-Ceram YZ and are CAD/CAM processed. Both products are available in the usual sizes (a diameter of 98 mm and a height of 14 mm or 18 mm).

According to the manufacturer, VITA In-Ceram YZ DISC Color comes pre-coloured in monochromatic shades: light, medium and intense. In addition, colouring with VITA In-Ceram YZ COLORING LIQUID can be carried in order to achieve even subtler shade variations. Based on industrial standards, this controlled colouring process is claimed to provide shades of uniform quality, thereby avoiding time-consuming and error-prone manual colouring.

A high-translucency material variation was also added to the proven VITA In-Ceram YZ DISC for the efficient fabrication of monolithic, fully anatomical zirconium dioxide restorations. Owing to the high translucency of the new VITA YZ DISC HT, veneering is not required, providing a relatively inexpensive yet attractive alternative to non-veneered or partially veneered metal restorations. According to VITA, the HT DISC is also suitable for use as a substructure material in restorations intended to exhibit natural translucency.
to always be a touch more efficient.

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In theory, narrow diameter implants—usually defined as anything under 3.5 mm—make it possible to treat almost all cases involving narrow interdental spaces, especially in situations where there is only minimum amount of hard tissue. However, they have to be strong enough to survive demanding biomechanical loading and torsion, despite their small dimensions.

With its NobelActive implant, the Swiss manufacturer Nobel Biocare has a 3.0 mm implant in its portfolio, that was specifically designed for the replacement of single-unit maxillary lateral incisors as well as mandibular lateral and central incisors. These very visible single-tooth sites require highly aesthetic restorative solutions that, according to the company, can be reliably delivered with the NobelActive 3.0 implant for the long-term. Since there is not much bone to work with in areas like the ones recommended for this implant, maximum bone preservation has been a key priority in engineering aspects of the new design, the company said. Therefore, the apex of NobelActive 3.0 was equipped with integral drilling blades, that allow for a smaller initial osteotomy.

In addition to the drilling blades on the tip of the implant, reverse cutting flutes allow clinicians, who are experienced with NobelActive implants, to adjust the implant position to achieve optimal restoration orientation. This Nobel Biocare said is particularly useful in the extraction sites that are common in single-tooth anterior restorations.

Dowing to its expanding tapered implant body with double-helix thread design, NobelActive 3.0 compresses bone gradually, which is minimising trauma and providing high initial stability even in compromised bone situations. Built-in platform shifting is also part of the design to ensure maximum soft tissue volume for natural-looking aesthetics. An internal conical connection with hexagonal interlocking is supposed to provide a tight seal and secure positioning of the abutment, a must-have characteristic for any first-class, bone-anchored, single-tooth restoration.

Three-year data from an ongoing five-year study with NobelActive 3.0 demonstrate continued positive trends consistent with the first two years’ results. In short, bone remodeling occurred during the first three months of the study, followed by increasing or stable bone levels, Nobel Biocare reported. Soft tissue variables have been stable throughout the study and the survival rate very high.

Dr Scott MacLean from Halifax in Canada finds NobelActive 3.0 to be the perfect complement to the larger diameter NobelActive implants that he has been using for years. “It is a great implant to use in tight, aesthetically demanding areas of the arch. Like the others in the Nobel Active family, it provides excellent results due to its principles of design.”

“...The platform shift with conical connection maintains a solid, tight connection that is easy to restore. The thread dimensions and design make it the perfect implant for placement in upper lateral and lower incisors. I am familiar to place and restore,” he added. For Dr Philippe Russe from Reims in France, NobelActive 3.0 has also become the implant of choice for excellent aesthetics in challenging single-tooth anterior situations. “The extra bony volume around the implant supports longer papillae, improving the aesthetic outcome of usually difficult cases. With its well-known excellent initial stability, platform shifting and conical connection, the new NobelActive 3.0 has everything you need in a small diameter implant specially designed for narrow anterior spaces”, he said.

NobelActive 3.0 is widely available throughout the company’s sales channels around the world.

Intraoral imaging plate system from Soredex to enhance diagnostics

The DIGORA Optime by Soredex is advertised as a smart and reliable intraoral imaging plate system for dental radiography that was developed to make the daily imaging workflow in dental practices easier and more efficient.

According to the Finish manufacturer, it can be used for all intraoral operations and patient sizes and provides excellent clinical results for improved diagnostics.

With DIGORA Optime, clear and sharp high contrast images that provide accuracy to the smallest clinical details can be obtained under a familiar film-like workflow within just seconds, the company said.

A smart auto-optimization function allows the user to operate it with one hand, leaving the other hand free for holding the mirror. “The platform shift with conical connection maintains a solid, tight connection that is easy to restore. The thread dimensions and design make it the perfect implant for placement in upper lateral and lower incisors. I am familiar to place and restore,” he added. For Dr Philippe Russe from Reims in France, NobelActive 3.0 has also become the implant of choice for excellent aesthetics in challenging single-tooth anterior situations. “The extra bony volume around the implant supports longer papillae, improving the aesthetic outcome of usually difficult cases. With its well-known excellent initial stability, platform shifting and conical connection, the new NobelActive 3.0 has everything you need in a small diameter implant specially designed for narrow anterior spaces”, he said.

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For almost a century, SHOFU Dental (Booth C78–81) has been an international household name for dental clinical and lab products. However, the company has also manufactured and selling equipment for digital dentistry and photography, but only in its home-market in Japan. With the introduction of the new EyeSpecial C-II, SHOFU brought a new digital camera to FDI 2014 in Greater Noida, exclusively developed for use in dentistry.

Made completely in-house in cooperation with experts in photography and cosmetic dentistry, the camera was conceptualized to be useful for a wide range of dental applications including intraoral photography, shade selection and detailed image taking of anterior teeth. It comes with eight pre-set dental modes, which according to SHOFU Dental’s Asia-Pacific Managing Director Patrick Locke, are combined with a built-in proprietary flash system and a number of image processing functions like colour-calculation and auto-cropping to simplify the process of dental photography significantly. He added that the camera is extremely lightweight and features a large LCD touchscreen display, making it possible for the user to operate it with one hand, leaving the other hand free for holding the mirror or cheek retractor. Another unique feature of the camera is that it enables photos to be transferred immediately from camera to PC, Smartphone, iPad, etc.

“This camera is so simple and predictable that it provides a fool-proof solution for dentists, enabling even those without any in-depth knowledge of dental photography to take accurate photos even in the most difficult situations. The entire dental team, even in multi-specialty practices, will benefit from it,” Locke told WorldDental Daily in Greater Noida.

Prior to its premiere here at FDI 2014, the camera has been showcased at large dental meetings in the US, China and Singapore. But now it is here, in India, that the EyeSpecial C-II was presented to a large community of South Asian dental professionals for the first time.

“We believe that FDI 2014 is the most suitable event in India to launch the EyeSpecial C-II as it will give this unique product regional exposure in South Asia,” explained Locke.

He said that further development into shade taking and restorative simulating functions is anticipated for the camera in the future.

In addition to the camera, SHOFU also has a number of products for restorative dentistry on display, including the universal direct aesthetic restorative Beautiful Injectable and BeautifulSeatant, a product for sealing deep grooves and fissures without the need for a conventional phosphoric acid etchant.

SATURDAY & SUNDAY, 2014

Dental photography made simple by SHOFU

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**EMBASSIES AND CONSULATES**

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