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CONGENITALLY MISSING MAXILLARY LATERAL INCISORS: TREATMENT

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Congenitally missing maxillary lateral incisors are the second most common dental agenesis, exceeded only by third molars. Hypodontia, the absence of one or a few teeth, arises from a disturbance early in the tooth formation process during initiation or proliferation of the tooth bud. As a rule, if a tooth is absent, the most distal tooth of a type will be affected. Tooth malformations result from later disturbances during the differentiation stages of dental development, and these are most commonly manifested as size variations. Other dental anomalies that are frequently associated with congenitally missing teeth include microdontia, delayed dental development, and certain discrete ectopic eruption of the tooth. This presentation discusses factors in determining whether to close an open space or to open enough space for a prosthetic treatment for congenitally missing maxillary lateral incisors. Further, the importance of a total treatment approach using an interdisciplinary dental specialty team to maximize function, aesthetics, and oral health is discussed.

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NEED OF MAGNIFICATION

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You may remember the first time you saw a dentist wearing magnifying loupes or using a microscope; you probably thought the person must have a severe vision defect and is gadget freak. That certainly was my opinion as I observed renowned dentist using them to accomplish an oral treatment procedure. I had that naive opinion for the first few years of my dental career since magnification was not a popular aid to dental practice in India. Although I'm blessed with nearly perfect vision, I always felt the need to see more clearly some of the aspects of dental practice. After a few years of watching excellent dentists routinely using magnification and getting great results, I finally became inquisitive enough to try the concept myself. I found the extra armamentarium and extra time being taken to begin with in all the procedures with these gadgets. This put few doubts in my mind about moving along with magnification or not? However, after a few days of forcing myself, I was convinced that my treatment was being accomplished at a higher level of quality because of the magnification. My friends & colleagues asked me if I had started to use a new technique, because I was able to do complicated procedures easily and in a better way. This presentation poses some of those questions about magnification and answers from scientific information, personal experiences and my work with many dentists in study clubs whether the need of microscopes is really a need of the hour.

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