On behalf of the European Association for Osseointegration and in collaboration with the French Society of Periodontology and Oral Implantology, we are delighted to welcome you to attend the 13th Annual Scientific Meeting in Paris.

I wish to take this opportunity to extend my gratitude to the EAO Board in acknowledgement of their support and help during the 2 years and a half which have been necessary to prepare this meeting.

The past EAO meetings have been highly successful events and we are most confident that the Paris conference will, again, demonstrate the quality and innovation of a rich scientific programme.

Researchers and clinicians will, no doubt, draw high benefits from the many topics which are addressing the current and latest progresses and outcomes in the field of osseointegration.

Paris has been selected for this event and the Convention Centre, ideally located in the close vicinity of the capital, is offering an ideal location to house the conference.

I hope you will enjoy the place and its many attractions.

I am looking forward to welcoming you here.

Franck Renouard
Chairman, EAO Paris 2004 Meeting

In the name of the European Association for Osseointegration, we are proud to welcome you to the EAO 2005 Congress in Munich next 22 to 24 September 2005.

All the past meetings have been very successful events where a large number of delegates have been able to learn the latest discoveries in the domain of Osseointegration and Implantology.

The Munich Congress will allow researchers and clinicians to access the state of the art information in the field of Oral Implantology.

Munich, as a venue, has been chosen for its cultural environment as well as for its easy access and closeness to the main means of transportation.

Georg Watzek
President, EAO 2003-2004

It is a great pleasure for me and for all the members of the SFPIO Board to receive EAO in Paris. I am proud that SFPIO has been chosen to help EAO organise its 13th annual scientific meeting. The scientific programme promises to be excellent and I hope the French Society members will be numerous in their presence.

Franck Renouard, Chairman of the congress, a highly experienced implantologist in France, has prepared a very interesting programme focused on the patient profile and the choice of the clinician through the treatment options available today. Three exciting days that nobody should miss! The location of the congress (Disneyland Resort Paris) and the proximity of one of the most beautiful capital cities of the world will allow the accompanying persons to enjoy an exciting visit of all the sites in Paris.

We look forward to welcoming you to Paris in September.

Philippe Lemaitre
Chairman, French Society of Periodontology and Oral Implantology

THE EAO PARIS 2004 MEETING
IS ORGANISED UNDER THE AUSPICES OF THE MAYOR OF PARIS
# Synopsis

## WEDNESDAY
15 Sept.
- 8h30: Master Clinics
- 9h: Pre-Congress Course
- 10h: Dissection Cadaver Course: Bone Grafting Procedure (full day)

## THURSDAY
16 Sept.
- 8h30: Master Clinics 1
- 9h: Pre-Congress Courses
- 10h: Master Clinics 1
- 11h: Plenary Session 1: The Right Candidate
- 12h: Master Clinics 2
- 14h: Plenary Session 2: The Best Surgical Treatment
- 15h: Plenary Session 3: The Best Aesthetic Result
- 16h: Plenary Session 4: The Daily Practice in the Future

## FRIDAY
17 Sept.
- 9h: Time Square
- 10h: Clinical Advances
- 11h: Time Square
- 12h: Best Oral & Poster Awards
- 15h: Time Square
- 16h: Time Square
- 17h: Time Square

## SATURDAY
18 Sept.
- 9h: Time Square
- 10h: Research Competition
- 11h: Time Square
- 12h: Time Square
- 15h: Time Square

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**5 Founding Gold Sponsors Courses**

**Research Award Committee**
- Chairman: Jean-Pierre Gardella, France
- Other members: Alain BORGHETTI, France; Jean-Louis GIOVANNOLI, France; Klaus GÖTTFREDSEN, Denmark; Christoph HAMMERLE, Switzerland; Sacha JOVANOVIC, USA; Marc QUIRYNEN, Belgium; Mariano SANZ, Spain; Massimo SIMION, Italy; Georges TAWIL, Lebanon; Maurizio TONETTI, United Kingdom

**Scientific Programme Committee**
- Xavier ASSEMAT-TESSANDIER, France
- Alain BORGHETTI, France
- Paulo MALO, Portugal
- Franck RENOUARD, France
- Massimo SIMION, Italy
- Jean F. TULASNE, France

**EAO Council**
- Chairman: Daniel van STEENBERGHE, Belgium
- Other members: David HARRIS, Ireland; Wolfgang BOZL, Germany; Klaus LANG, Switzerland; Massimo SIMION, Italy

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**Local Organisation Committee**
- Martine ASEMATT-TESSANDIER, Paris
- Marianne POURDIEU, Paris
- Thierry ROUSSEL, Paris
Pre-Congress Courses

Wednesday, 15 September 08:30 - 17:00

**DISSECTION CADAVER COURSE: BONE GRAFTING PROCEDURE**
Fresh cadaver dissection.
Bone harvesting technique from the chin and the ramus.
Monoblock bone graft and sinus lift procedures.

**Venue:** Faculté de Médecine de Paris

**Speakers:**
Jean-François GAUDY, France
Bernard CANNAS, France
Jean-Luc CHARRIER, France
Luc GILLOT, France
Thierry GORCE, France

SAPO Implant / SAPO Clinic

Important: This course is being held in central Paris, at the Faculté de Médecine, Dept. of Functional Anatomy Laboratory, University René Descartes, Paris V, and not at the Convention Centre.

Thursday, 16 September 10:00 - 12:30

**ANATOMICAL RISK IN IMPLANT SURGERY: KNOWING ANATOMY PROVIDES BETTER AND SAFER TREATMENT**
Chairman: Georges TAWIL, Lebanon

**Room:** Radio City 1

**Speakers:**
Luc GILLOT, France
Bernard CANNAS, France
Thierry GORCE, France

**DECISION-MAKING IN IMPLANTOLOGY: A SCIENTIFIC APPROACH**
Everything you always wanted to know about “evidence based” (but were afraid to ask)
Chairman: Philippe BOUCHARD, France

**Room:** Radio City 2

**Speakers:**
Philippe BOUCHARD, France
Mariano SANZ, Spain
Jean-Louis GIOVANNOLI, France

**IMPLANT PRACTICE MANAGEMENT: HOW CAN YOU GROW YOUR IMPLANT PRACTICE WITH MORE THAN 60% IN A YEAR?**
Chairman: Jean-Pierre GARDELLA, France

**Room:** Radio City 3

**Speakers:**
Goran URDE, Denmark
Thursday, 16 September, 2004

13:30

OPENING CEREMONY

- Georg WATZEK
- Daniel BUSER: speech in memory of Prof. André SCHROEDER
- Franck RENOUARD

Plenary Session 1

14:15 - 17:45

THE RIGHT CANDIDATE

Chairman: Georg WATZEK, Austria

14:15 
**Introduction** By Daniel BUSER, Switzerland

14:25
- Positive and negative factors interfering with bone healing in implant surgery
  
  Ernst HUNZIKER, Switzerland

15:10
- Influence of the pre-existing infectious pathologies on the implant success rate
  
  Marc QUIRYNEN, Belgium

15:55 - 16:25 
**Coffee-break**

16:25
- Parafunction and implant prosthodontics: the times they are a-changin
  
  Patrick SIMONET, France

17:10

**DISCUSSION**

Moderator: Daniel BUSER, Switzerland

- Could we still consider contra indications in implant dentistry?
Master Clinics 1

14:30 - 18:00

ROOM: RADIO CITY

Chairpersons:
Carlos APARICIO, Spain
Philippe BOUCHARD, France

14:30
- The benefit of navigation system: implant treatment from months to hours
  Patrick PALACCI, France

15:15
- Strategies for bone augmentation and osseointegration
  Lars RASMUSSON, Sweden

16:00 - 16:30
- Coffee-break

Chairpersons:
Chantal MALEVEZ, Belgium
Jean-Pierre ARNOUX, USA

16:30
- Short implants in the treatment of partial or total edentulism: long-term results
  Georges TAWIL, Lebanon

17:15
- New generation magnetic attachments for implant overdentures: minimum number of implants for maximum occlusal support
  Yoshinobu MAEDA, Japan
Plenary Session 2

Friday, 17 September, 2004

THE BEST SURGICAL TREATMENT
Chairman: Patrick HENRY, Australia

09:00 - 12:30

ROOM: TIME SQUARE

09:00
Introduction
By Massimo SIMION, Italy

09:15
- Loading of dental implants - when is the perfect time-point?
  Markus HÜRZELER, Germany

10:00
- A new, fully synthetic tissue engineering system for bone and periodontal regeneration: clinical implications
  Samuel E. LYNCH, USA

10:45 - 11:15
Coffee-break

11:15
- Bone and soft tissue integration with different implant surfaces: relevance for immediate loading
  Peter SCHÜPBACH, Switzerland

12:00
DISCUSSION
Moderator: Massimo SIMION, Italy
- Is it possible to have 100% of success in implant surgery
Clinical Advances

09:00 - 12:30

ROOM: RADIO CITY

Chairpersons:
Klaus GOTFREDSEN, Denmark
Wolfgang BOLZ, Germany

09:00
- Implant supported prosthesis on severely resorbed jaws. A retrievable titanium infrastructure with Procera ceramic individual teeth - "CM Bridge- ceramic" -. A retrospective clinical study of 20 bridges with 2 years of follow-up.
Carlos MOURA GUEDES, Portugal

09:30
- Biomechanical aspects of tooth-implant supported fixed partial dentures: a finite element analysis of the influence of implant length.
David NISAND, France

10:00
- A small size CT scanner for new clinical applications.
David SARMENT, USA

10:30 - 11:00 Coffee-break

Chairpersons:
Philippe KHAYAT, France
Giovanni POLIZZI, Italy

11:00
- Surface properties of oxydized titanium implants and reinforcement of osseointegration.
Young-Taeg SUL, Sweden

11:30
- Vertical and horizontal augmentation for dental implant site development with GBR using e-PTFE membranes and particulated autograft: 2-years clinical follow-up.
Istvan URBAN, Hungary

12:00
- Three types of dental implants following 18 months occlusal loading. A histomorphometric study in baboons.
Georg WATZAK, Austria
Friday, 17 September, 2004

14:00 - 18:00

> Founding Gold Sponsors Course

ROOM: RADIO CITY 1

Bioactive Implants?

Moderator: Björn DELIN, Sweden

- Bio-management for treatment improvement - Astra Tech keeps pole position in implant surface development
  Anders HOLMÉN, Sweden

- Fluoride-modified titanium provides improved bone formation and bone bonding at dental implants
  Jan Eirik ELLINGSEN, Norway

- Clinical implications from guided osteoblast behavior and improved bone formation
  Lyndon F. COOPER, USA

- Early loading and basic requirements for a safe procedure
  Georges KHOURY, France

- Oral implant surfaces - where were we, where are we and where do we go?
  Tomas ALBREKTSSON, Sweden

ROOM: GAUMONT 1

Beauty and Speed

Concepts for your implant success

Languages: English, simultaneous translation to French and Russian

- Immediate loading: faster than ever
  Share with us the latest clinical results of accelerated implant therapy and experience in "real time" the world's fastest immediate loading procedure.
  Bernd GIESENHAGEN, Germany
  Sven RINKE, Germany

- Esthetics by soft tissue management
  Presentation of anterior cases incl. ceramic restorations.
  Fouad KHOURY, Germany

- Esthetics in ceramics: your future with Cercon
  Learn about the advantages of zirkonium oxide restorations and see how you can provide outstanding esthetic results with these newest generation ceramic abutments.
  Henry SALAMA, USA
  Sven RINKE, Germany
Interactive video forum on emerging concepts in Tissue Management & Immediate Loading

Moderator: Mithridate DAVARPANAH, France
Panel members: Richard LAZZARA, USA
Alan MELTZER, USA
Tiziano TESTORI, Italy
Frédéric CHICHE, France
- Case 1: Patient Presents with a Severly Periodontal and Restoratively Compromised Mandibular Arch
  Alan MELTZER, USA
- Case 2: Impatient Patient Presents Needing a Single Unit Replaced in the Aesthetic Zone
  Frédéric CHICHE, France
- Case 3: Patient with High Aesthetic and Functional Demands Presents with a Unilateral, Partially Edentulous Ridge
  Tiziano TESTORI, Italy

New Clinical Solutions for Your Patients - C&B&ITM
- Immediate Patient Satisfaction
  Patrick HENRY, Australia
- Immediate Function™ thru a New Efficient Treatment Concept - Live Transmission via Satellite
  Paulo MALO, Portugal
- Soft Tissue Esthetics thru Soft Tissue Integration™
  Peter SCHÜPBACH, Switzerland
- Soft Tissue Esthetics with NobelDirect™ & NobelPerfect™
  Antonio ROCCI, Italy
  Jan GOTTLOW, Sweden
- NobelEsthetics™ - the Next Generation of Procera® with New Materials and Products
  Ernst HEGENBARTH, Germany
- Esthetic Art with Procera® on Implants and Natural Teeth
  Dario ADOLFI, Brazil

High-end esthetics in private practices
- The relevance of predictable long-term esthetic results with the Straumann® Dental implant System
 Introductory note by Urs BELSER, Switzerland
- Ultimate Implant Esthetics: the perception of “An American in Paris”
  Scott KEITH, USA
- A perfect illusion: the European philosophy of esthetic implant restoration
  Bruno SCHMID, Switzerland
- Natural esthetics with implants - my way with Straumann implants
  Ralf MASUR, Germany
- How to achieve esthetics outcomes in compromised sites
  Mario ROCCUZZO, Italy

Important: Rooms Gaumont 1 & 2 are located outside the Conference Centre, within 4-min walking distance

ROOM: RADIO CITY 3

ROOM: TIME SQUARE

ROOM: GAUMONT 2
Plenary Session 3

Saturday, 18 September, 2004

THE BEST AESTHETIC RESULT

Chairman: Dario ADOLFI, Brazil

09:00 - 12:30

ROOM: TIME SQUARE

THE BEST AESTHETIC RESULT

Chairman: Dario ADOLFI, Brazil

09:00

Introduction
By Ueli GRUNDER, Switzerland

09:15

Long-term stability of aesthetic implants
Urs C. BELSER, Switzerland

10:00

Clinical elements in achieving Natural Implant Aesthetics
Sascha JOVANOVIC, USA

10:45 - 11:15

Coffee-break

11:15

Presentation of EAO 2005 Congress
Friedrich W. NEUKAM, Germany

11:20

Advantage of the prosthetic approach to improve aesthetic result
Yves SAMAMA, France

12:05

DISCUSSION
Moderator: Ueli GRUNDER, Switzerland

Do the components make the difference?
## Research Competition

**09:00 - 12:00**

### Room: RADIO CITY

**Room:** RADIO CITY

**09:00**

27. **Evaluation of implants with microthreaded crest module and SLA surface**
   - (Seoul, Republic of Korea)

28. **Effects of different amelogenin-peptides on SaOs and OHS osteoblasts**
   - E.A. Riksen, H. Berner, J. Reseland, J. Ellingsen, S. Lyngstad (Oslo, Norway)

29. **The rehabilitation of the severely atrophic posterior upper jaw with sinus floor elevation combined with vertical ridge augmentation procedure**
   - F. Fontana, G. Rasperini, C. Maiorana, E. Simion (Milano, Italy)

30. **Collagen sponges for ridge preservation in rabbit jaw trepan defects**
   - R.S.R. Buch, W. Kleis, W. Wagner (Mainz, Germany)

**10:00**

31. **Time sequence of bone healing around 2 implant systems in minipigs**
   - D. Carmagnola, S. Abati, M. Chiapasco, E. Romeo, G. Vogel (Milano, Italy)

**10:15 - 10:45**

Coffee-break

**10:45**

32. **Immediate loading and Brånemark Novum® concept: a retrospective multicentric study**

33. **The characteristic of tissue-engineered bone and the relation to osseointegrated dental implants for clinical approach**
   - Y. Yamada, M. Ueda, K. Ito, M. Ohya, H. Hibi, S. Baba (Nagoya, Japan)

34. **Single-step versus staged implant approach: 5-year clinical prospective study**
   - O. Hanisch, C. Hammacher, A. Charrat, M. Yildirim, H. Spiekermann (Köln, Germany)

35. **Simvastatin stimulates osteogenesis around titanium implants in osteoporotic rat**
   - Y. Ayukawa, A. Okamura, Y. Tsukiyama, K. Koyano (Fukuoka, Japan)

36. **Heterotopic bone formation by Endogain® and Bio-Oss®**
   - N. Donos, L. Kostopoulos, M. Tonetti, N. Lang, T. Karring (London, United Kingdom)

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**Chairpersons:**
- Jean-Pierre GARDELLA, France
- Jean-Louis GIOVANNOLI, France
- Mariano SANZ, Spain
- Maurizio TONETTI, United Kingdom

**Jury:**
- Jean-Pierre GARDELLA, France
- Jean-Louis GIOVANNOLI, France
- Christoph HAMMERLE, Switzerland
- Marc QUIRYNEN, Belgium
- Mariano SANZ, Spain
- Maurizio TONETTI, United Kingdom
Plenary Session 4

Saturday, 18 September, 2004

13:45 Best Oral Award
Awarded by:
Jean-Pierre GARDELLA, Chairman of the Jury
Franck RENOUARD, Chairman of the Meeting

Best Poster Award
Awarded by:
Georg WATZEK, President EAO 2003-2004
Xavier ASSEMAT-TESSANDIER, Chairman of the Jury

14:00 - 17:30

THE DAILY PRACTICE IN THE FUTURE
Chairman: Xavier ASSEMAT-TESSANDIER, France

14:00 Introduction
By Daniel van STEENBERGHE, Belgium

14:15 Immediate implantation-immediate function. Indications and limits
Giovanni POLIZZI, Italy

15:00 The impact of dental implants on traditional removable and fixed prosthodontics
Thomas TAYLOR, USA

15:45 - 16:15 Coffee-break

16:15 Peridontal treatment Vs. Implant. The best choice for the long term
Maurizio TONETTI, United Kingdom

17:00 DISCUSSION
Moderator: Daniel van STEENBERGHE, Belgium

Implant practice in the future. For specialist or for General Practitioner?
Master Clinics 2

14:00 - 18:00

Room: Radio City

Chairpersons:
Friedrich NEUKAM, Germany
Jean-François TULASNE, France

14:00
- Alveolar distraction vs bone graft prior implant placement: indications and limits
  Paul ROUSSEAU, France

14:45
- Recommended techniques for increased success with autogenous block grafting
  Fouad KHOURY, Germany

15:30 - 16:00
Coffee-break

Chairpersons:
Georges TAWIL, Lebanon
Alain BORGHETTI, France

16:00
- Anterior maxilla: immediate temporization in compromised sites
  Pascal VALENTINI, France

16:45
- The importance of communication between dentists and technicians in face of procer technology
  Dario ADOLFI, Brazil

17:30

EAO General Assembly

Room: Radio City
Posters

Visit of the Jury to the poster area: Friday, Sept. 17 from 13:30 to 14:30.

Jury for the best Poster Award:
Carlos APARICIO, Spain
Xavier ASSEMAT-TESSANDIER, France
Alain BORGHETTI, France

Klaus GOTTFREDSEN, Denmark
Daniel van STEENBERGHE, Belgium
Georg WATZEK, Austria

37 Retrospective study of 55 cases of mandibular immediate loading
A. Felino, R. Oliveira, N. Oliveira, F. Brito, A. Magalhaes
(Porto, Portugal)

38 Alveolar ridge augmentation for insertion of endosseous implants: a 1-10 year follow-up study
D. Zabaras, S. Bouboulis, A. Spanos, A. Koudouri,
I.G. Gisakis (Athens, Greece)

39 TUTODENT® with/without PRP in sinus lift: human histology
P. Rucci, S. Rocco, P. Trisi (Pescara, Italy)

40 Effects of titanium and enamel matrix derivative on osteoblast
Y. Yu, S. Park, S. Choi, Y. Ku, S.B. Han
(Seoul, Republic of Korea)

41 Art and science of esthetically and biologically optimized implant restorations
W. Trumm (Hanau, Germany)

42 Bone volume analysis of various bone grafting materials in man
G.L. Sfasciotti, F. Tonoli, A. Scarano (Roma, Italy)

43 Bone growth in the pore of the oxidized implant
H.S. Um, Y.S. Jeong, Y.T. Sul, C. Johansson, W.B. Kim
(Gangneung, Republic of Korea)

44 Direct loading of implants in the totally edentulous maxilla
B. Sunzel (Malmo, Sweden)

45 New augmentation devices (Vertical and Horizontal Control)
E. Fuchs (Zug, Switzerland)

46 The effect of magnetism (Neodymium magnet) on bone formation around titanium implants inserted into the tibia of rabbit
S.B. Lee, Y.T. Hwang, H.P. Weber, B.B. Choi
(Seoul, Republic of Korea)

47 Evaluation of Astra implants with individually shaped emergence profiles
V. Schmidt- Schaffer, C. Schulda, L. Gallardo- Lopez,
A. Rütt, H. Staveling (Heidelberg, Germany)

48 The sinus floor elevation with phycogenic bone substitute
A. Simunek, M. Cimery, D. Kopecka, A. Kohout, J. Bukac,
D. Vahalova (Hradec Kralove, Czech Republic)

49 Comparative study of three different techniques of alveolar nerve surgery related to oral implants
D. Morales Schwarz, G. Crespo Rueda (Valladolid, Spain)

50 Influence of postoperative complications of 305 consecutive sinus elevations upon treatment outcome
W.A. Wegscheider, W.A. Wegscheider, M. Lorenzoni,
C. Pertl, M. Nebgl-Vogl, N. Jaksie (Graz, Austria)

51 Dental and otolaryngology planning of sinus-lift under condition of chronic diseases of maxillary sinus
M. Uhryn (Lviv, Ukraine)

52 An angulated implant for the anterior maxilla; development and evaluation
D.G. Howes, G. Blackbeard, J. Boyes Varley
(Johannesburg, South Africa)

53 Immediate setting-up of a definitive mandibular bridge with transmucous implants
J.J. Chalard, M. Chalard, O. Fregnacq, P. Benetiere
(Lyon, France)

54 The accuracy of spiral tomography for the preoperative planning of implants
M.R. Wespi, F.R. Cairoli (Binningen, Switzerland)

55 Natural looking and ceramic implant abutment: choice criteria and implementation
P. Margossian, G. Laborde, P. Larroix (Marseille, France)

56 Evaluation of Bone Quality for Implant Treatment using CT Scan
T. Nakamura, K. Miyoshi (Kumamoto, Japan)

57 Implants and orthodontics in periodontal patients
W. Trumm (Hanau, Germany)

58 An up to 3-year follow-up of Immediately loaded FBR-coated Pitt-Easy implants
L. Malchiiodi, G. Massi, P. Masotto, G. Bartolini,
M. Cassetta, A. Della Rossa, G. Del Prete, E. Calloni,
G. Cordioli, S. Szmukier-Moncel (Brescia, Italy)
59 The split-crest procedure with Piezo-Bone Surgery. Results of a 3 year experience
C. Blus, S. Szmukler-Moncler (Torino, Italy)

60 A 5-year Life table analysis of early loaded ITI-SLA implants
(Geneva, Switzerland)

61 In vitro corrosion resistance of Titanium in fluorinated environment
P. Fogliobonda, U. Garagiola, V. Rocchetti
(Novara, Italy)

62 Treatment of alveolar bone defects by porous β-TCP and PRP
P. Polenik, Z. Strnad (Plzen, Czech Republic)

63 CTG with enamel matrix derivate in papilla augmentation procedure
V. Lekovic, Z. Aleksic (Belgrade, Yugoslavia)

64 Tensile strength of cement-retained single implant prosthesis by various provisional cements and surface treatment
H.S. Lee (Uijongbu, Republic of Korea)

65 Surgical factors influencing implant angulation
M. Payer, M. Lorenzoni, G. Bertha, W. Wegscheider, N. Jakse, C. Pertl (Graz, Austria)

66 Effect of bFGF combined with different bone grafts in bone regeneration
X. Derekas, C. Markopoulou, E. Pepelassi, A. Mamalis, I. Vrotsos (Athens, Greece)

67 Effect of platelet-rich plasma on rat bone marrow cells
Y. Ogino, Y. Ayukawa, K. Koyano (Fukuoka, Japan)

68 Post-operative alveolar bone level in aesthetic zone
K. Miyoshi, T. Nakamura (Tokyo, Japan)

69 Zygomatic implant stability resonance frequency measurements. Results after abutment connection
S. Nejadnik, M. Abarca, P. Daelemans, C. Malevez
(Brussels, Belgium)

70 Reconstruction of the edentulous maxilla with autogenous bone and PRP
M. Abboud, B. Koeck, H. Stark, G. Wahl, R. Paillon (Bonn, Germany)

71 Growing of fibroblasts on 9 implant surfaces
P. Schüpbach, R. Glauser, B. Guggenheim
(Horgen, Switzerland)

72 Bone reactions with different microgap designs in one-stage implants
(Würzburg, Germany)

73 Maxillary sinus augmentation in rabbits: a comparative histologic-histomorphometric study between Mesenchymal stem cells and autogenous bone

74 Effects of GBR on experimental grafted segmental bone defects
(Ribeirao Preto, Brazil)

75 Simvastatin reduces osteoclast activity during bone healing in rats
E. Yasukawa, Y. Ayukawa, A. Okamura, Y. Tsukiyama, K. Koyano (Fukuoka, Japan)

76 Effects of implant diameter and bone quality on osseointegration
D. Sarment, J. Brink (Ann Arbor, USA)

77 Clinical performance of implants in the posterior maxilla and mandible relative to implant diameter
H. Yoon, S. Eckert, E. Keller (Rochester, USA)

78 A clinical study of one- and two-implant-supported single molar replacement
H. J. Yoon, S. Eckert, E. Keller (Rochester, USA)

79 Clinical experience with “scalloped” implants: evaluation 30 months after loading
I. Corcolis (Porto San Giorgio, Italy)

80 Comparison of immediately loaded and unloaded implants in identical individuals after 30 to 60 months
W.A. Wegscheider, M. Lorenzoni, C. Pertl, E. Pancche, N. Jakse (Graz, Austria)

81 Radiological and clinical success of immediately loaded single-tooth implants
M. Abboud, S. Kock, H. Stark, G. Wahl, R. Paillon (Bonn, Germany)

82 Evaluation of in situ biofilms on machined, acid-etched and oxidized titanium surfaces
P. Schüpbach, R. Glauser, B. Guggenheim (Horgen, Switzerland)

83 A report of 713 consecutively placed implants in 297 augmented sinus sites
W.A. Wegscheider, M. Lorenzoni, C. Pertl, M. Nebi-V联谊, N. Jakse (Graz, Austria)

84 Comparative clinical and radiographic analysis of immediate dental implants placed in periodontally-compromised conditions
S. Tehemar (Alexandria, Egypt)

85 A 2-3 year follow-up of immediate occlusally loaded Brämerk System TiUnite implants
R. Glauser, A. Lundgren, J. Gottlow, L. Sennerby, P. Ruhtaller, S. Windisch, C. Hämmerle (Zürich, Switzerland)

86 Implant integration in bone defects with or without adjunctive therapies
(Ribeirao Preto, Brazil)

87 Zirconia implant abutments: a new era of fracture toughness, light dynamics and biocompatibility
P. Gehrke (Mannheim, Germany)
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<td>Influence of implant geometry and surface characteristics on primary stability and osseointegration</td>
<td>L. Molly, M. Quirynen, D. van Steenbergh (Leuven, Belgium)</td>
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<td>One-year prosthetic outcomes with implant overdentures using Dalbo-plus® attachment: a preliminary report</td>
<td>C. Rignon-Bret, M. Daas, F. Descamp, F. Renouard (Paris, France)</td>
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<td>New insights on implants for orthodontic treatment: micro-implants</td>
<td>F. Philippart (Paris, France)</td>
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<td>Immediate loading of unsplit titanium implants supporting an overdenture. Results after 5 years of function</td>
<td>L. Bozzi (Comacchio, Italy)</td>
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<td>Immediate loading of implants: influence of surface characteristics</td>
<td>T. Hanser, L. De Stavola, J. Neugebauer, F. Khoury (Olsberg, Germany)</td>
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### Faculty

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CARMAGNOLA D. (Milano, Italy)       RIKSEN E.A. (Oslo, Norway)
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CHARRIER Jean-Luc (Paris, France)       SANZ Mariano (Madrid, Spain)
GAUDY Jean-François (Paris, France)     URDE Goran (Copenhagen, Denmark)
GillOT Luc (Paris, France)              

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HOLMÉN Anders (Sweden)                                        TESTORI Tiziano (Italy)
KEITH Scott (USA)                                              
The importance of communication between dentists and technicians in face of procera technology

News materials and technological developments have been utilized by many dentists and technicians in order to improve the esthetic expectation for patients. Therefore a good communication between dentists and technicians will be helpful to evaluate and optimize the esthetics as well as the biologic and functional aspects.

How to use these materials and technology is one of the most challenging tasks for esthetic outcomes and will be highlighted in this presentation.

Long-term stability of esthetic implants

Partially edentulous patients who are treated with endosseous implants, increasingly tend to expect that the respective prosthetic suprastructures cannot be recognized as such. The primary therapeutic objective being the predictable achievement of a long-term esthetic and functional result. This trend represents a particular challenge as implants are more and more utilized in clinical situations where conventional toothborne fixed partial dentures (F.P.D.s) with a well-established potential prognosis would be possible. Under these specific circumstances it becomes of paramount importance that an implant represents the apical extension of an optimally located and designed (emergence profile) prosthesis instead of the opposite. Consequently, restoration-driven and not primarily bone-driven implant placement is the goal. Achieving both functionally and esthetically adequate implant supported prosthetic suprastructures in the partially edentulous patient can be particularly challenging when dealing with potential implant sites within the esthetic zone that are not in harmony with the adjacent or opposing dentition. In this context, the maintenance of a harmonious soft tissue contours around multiple anterior maxillary implants is particularly difficult. This presentation will focus specifically on selected aspects such as a recently developed novel implant design and new ceramic components for optimal periimplant tissue stability and contours.

Furthermore, multicenter data on clinical long-term stability of esthetic implant restorations, comprising more than 100 implants, will be discussed. Based on an observation period of 7 to 12 years, it can be concluded that in patients with appropriate oral hygiene, the intra-crevicular position of the restoration margin does not appear to adversely affect peri-implant health and stability.

Curriculum Vitae

Born in Zurich, Switzerland, in 1947. Undergraduate studies at the Dental Institute, University of Zurich; graduated as «Eidg. dipl. Zahnarzt» in 1972. Doctor's degree (Dr. med. dent.) in 1976. Postgraduate training in Fixed Prosthodontics and Occlusion 1973-1976. Assistant Professor and then, Senior Lecturer at the Department of Fixed Prosthodontics and Dental Materials of the University of Zurich (chairman: Prof. Dr. Peter Schaerer, M.S.) from 1976 to 1980. Visiting Assistant Professor (1980-1982) at the Departments of Oral Biology (Prof. Dr. A.G. Hannam) and Clinical Dental Sciences (Prof. Dr. W.A. Riten), Faculty of Dentistry, University of British Columbia (Canada). 1982-1983, Senior Lecturer at the Department of Fixed Prosthodontics and Dental Materials in Zurich (Prof. Dr. P. Schaerer). Since 1st October 1983, Full Professor and Head of the Department of Fixed Prosthodontics and Occlusion of the Université de Genève, Dental Institute.


Saturday a.m.

Saturday p.m.
Positive and negative factors interfering with bone healing in implant surgery

In dental-implant surgery, foreign metallic material is introduced into the body to secure the artificial tooth within the bone bed and to promote local bone formation, thereby facilitating integration of the implant and its long-term stability, which is required to re-establish the functionality of the masticatory apparatus. The process whereby the desired end is achieved is, however, unphysiological, since the body tends to reject any foreign material that is not tissue-compartment specific. Notwithstanding this augury, the anticipated adverse tissue reactions can be overcome or circumvented if appropriate measures are taken. The problems arise chiefly at the interface between the implant and the surrounding native bone. In this presentation, the adverse and favourable factors operating during implant integration within the bony tissue compartment are dealt with systematically.

Loading of dental implants – when is the perfect time-point?

The treatment concepts in implant dentistry have dramatically changed over the last few years. The classic concepts of delayed healing and loading do not apply to all situations. In many instances, implants may be placed into extraction sockets and achieve very high success. Also, certain case types can be immediately loaded at the time of implant placement. The definition of the final goal becomes more and more a crucial issue regarding the right time-point for loading implants. When focusing on esthetic the harmony of the soft tissue becomes the most important issue. There is clinical evidence that the “single step procedure” increases the risk for failures by overstretching the mechanical and biological factors. In cases where the function is the most important issue for the patient immediate implant placement and immediate loading can be achieved with a high success rate. This presentation will discuss the different mechanical and biological parameters which have to be taken into consideration to plan the simple as well as the complex implant case from an esthetic and/or functional standpoint.
Clinical elements in achieving Natural Implant Aesthetics

Since the introduction of osseointegration to dentistry, many advances in treating implant patients have been achieved. Four key factors in aesthetic implant dentistry have emerged: the preservation and regeneration of bone tissue; implant design and surface; soft tissue emergence profile; and the prosthetic design. These factors have allowed a very precise 3-dimensional implant position resulting in inter-implant bone and papilla support and a natural ceramic restoration.

Indications, clinical guidelines, and results with standard, scalloped and one-piece implants will be presented. Clinical procedures representing flapless immediate tooth replacement and ridge augmentation procedures with and without implants will be discussed.

Recommended techniques for increased success with autogenous block grafting

Since 1984, autogenous bone grafting were utilised in conjunction with implants for aesthetic and functional rehabilitation. In the majority of cases the bone block grafts were harvested from the mandible using specially designed instrumentation (Microsaw). This bone was used for various augmentation procedures (e.g. onlay grafting and sinus floor elevation). Based on the results of this long-term study, a concept was developed to minimise complications such as graft infection and non-integration through the following parameters:
- The technique of augmentation with mandibular bone block were modified to increase the number of regenerated and vital osteocytes in the grafted area.
- Bone grafts are protected with two-layer membrane as well as the biology of soft tissue around teeth and implants.
- Bone grafts are protected with two-layer closure. In the maxilla, this was accomplished with a palatal connective tissue flap.
- The risk of exposure of large onlay bone grafts was reduced through a tunnel preparation.
- Temporary implants are used to protect augmented areas from early loading.

A seven-year study with these modifications showed a complication rate of less than 3%. Harvesting bone from the ramus with the Microsaw also demonstrated a high degree of success. In over 3,000 grafts harvested from this area, complications occurred in only 0.5% of the cases. There were no incidences of injury to the mandibular nerve. The influence of various parameters on the resorption of the grafted bone will be also discussed.
A new, fully synthetic tissue engineering system for bone and periodontal regeneration: clinical implications

Brief description:
This lecture will present a new totally synthetic system for improving the regeneration of bone, periodontium and gingivae. The system is composed of a powerful wound healing protein, platelet-derived growth factor (PDGF) produced synthetically and a synthetic calcium phosphate bone matrix. The clinical and pre-clinical development of this material will be presented, including the results of a randomized double-blind controlled FDA pivotal clinical trial which evaluated its safety and effectiveness.

Objectives:
1. Describe a new technique for improving tissue healing.
2. Summarize the data of a FDA pivotal trial using this new regeneration system
3. Present treatment planning implications using clinical cases.

New generation magnetic attachments for implant overdentures: minimum number of implants for maximum occlusal support

New generation magnetic attachments have overcome problems such as corrosion, decrease in retention and allowance for denture-base movements. They can also provide us the chance to apply the minimum intervention concept for edentulous patients with implants. In this presentation, the concept and method for achieving “Minimum number of implants for maximum support” with magnetic attachments will be discussed.
Implant supported prosthesis on severely resorbed jaws. A retrievable titanium infrastructure with Procera ceramic individual teeth - "CM Bridge-ceramic". A retrospective clinical study of 20 bridges with 2 years of follow-up."

The rehabilitation concept for the total edentulous with implant supported fixed prostheses has been suffering great changes in the last years. The introduction of new surgical techniques using less implants (All-on-4; All-on-6; Novum), requires prosthetic structures with better mechanical characteristics and fitting, while Dentists and patients are more demanding in terms of aesthetics. The rehabilitation concept for the total edentulous with implant supported fixed prostheses has been suffering great changes in the last years. The introduction of new surgical techniques using less implants (All-on-4; All-on-6; Novum), requires prosthetic structures with better mechanical characteristics and fitting, while Dentists and patients are more demanding in terms of aesthetics. Another factor that becomes increasingly important, given the longevity of this kind of rehabilitation is the capacity of solving problems that will appear, such as fractures, etc. This lecture will present a new type of prosthetic rehabilitation (using a titanium structure and individual Procera crowns), its protocol and results. The CM-Bridge ceramic concept, consists in using a CADD-CAM Titanium structure together with individual Procera crowns cemented over that structure. This lecture will discuss not only the protocol used for obtaining these structures, but also the clinical results obtained with the systematic use of these structures in the rehabilitation of the total edentulous, and the solutions for the problems found.

Bio-mechanics aspects of tooth-implant supported fixed partial dentures: a finite element analysis of the influence of implant length

In partially edentulous patients, the possibility of combining an implant with a natural abutment should be considered when sufficient implants are lacking due to anatomical conditions, unfavourable distribution of remaining teeth or loss of implants. However, mechanical as well as tooth complications could occur as a result of the difference in mobility between natural teeth and implants. Nevertheless, it has been demonstrated that Branemark implants has lateral flexibility because of a combination of elasticity of the supporting bone and resiliency of the implants components. Moreover, finite element analysis have demonstrated that flexibility increase with the reduction of implant length. Clinically, the tooth-short implants connection did not demonstrate any negative influences on the overall success rates in a study comparing implant and tooth-implant supporting fixed partial dentures at 10 years. The aim of this presentation is to analyze through finite element analysis the influence of implant length in the distribution of load in a three-unit tooth-implant model. This investigation demonstrate that the reduction of implant length lead to the diminution of stress distribution around implant in a tooth-implant model. The compensation of the difference in mobility by the improvement of flexibility (implants movement under loading) may explain this result.
**Patrick PALACCI**

Curriculum Vitae

DDS, Visiting professor
Dr Patrick Palacci obtained his DDS degree at Marseille University, Marseilles, France, in 1975. He continued his post-graduate education in periodontology at Boston University from 1977 to 1981 and was appointed as a visiting professor at Boston University in 1982. Dr Palacci is a private practitioner in Marseilles and is at the head of Brånemark Osseointegration Center in Marseilles. He developed several techniques in relation with optimal implant positioning, papilla regeneration technique and esthetic implant dentistry. He is the author of numerous scientific articles and two textbooks published by Quintessence in 1995 and 2001. Dr Palacci got the first NobelPharma Award in 1995. Dr Palacci presently conducts as number of courses in his private clinic. He has been invited as a speaker to scientific meetings all around the world.

The benefit of navigation system: implant treatment from months to hours

For decades, implant placement has been related with the use of conventional tomography and of surgical guides. With the new technologies, such as scanners, precision in imaging became more obvious and we could start having a more precise idea of the anatomy of the implant sites. The use of programs such as Simplant became a new way of treating patients by being able to visualize the positioning of implants at the time of radiographic analysis and pre-surgical analysis. A huge step was made in the relationship between surgical placement and computerized imaging. Then came assisted computerized placement with the surgical guide in relation with pre-surgical treatment plan, giving even more precision but at the time the brain, the hands and the skill of the surgeon could compete all this imaging technologies. The latest innovation in this field is related with the placement of implants together with the prosthetic restoration, everything being pre-determined on a computer programme. Such a process allows immediate loading with a prefabricated prosthetic restoration, thus enabling patients to come with no teeth and leave an hour later with a fixed restoration.

**Giovanni POLIZZI**

Curriculum Vitae

MD, DDS
After graduating with honors in Medicine and Surgery, Dr. Polizzi completed his postgraduate studies in Anesthesiology and Intensive Care at the University of Milan. For the next three years, he worked in the Emergency Department at the Ospedale Maggiore di Milano. He turned to dentistry in 1977 and completed his postgraduate specialization in dentistry and prosthodontics in 1980 at the University of Padova. Following clinical training at the Universities of Lund and Gothenburg in 1985, Dr. Polizzi has devoted his practice to tissue-integrated intra-oral reconstruction. His private practice is limited to oral implant surgery.

Immediate implant - immediate function: Indications and Limits

The classic two stage procedure, developed by P-I Bränemark, at the beginning of 60ties, was the safest approach. This treatment modality, well documented in several long term studies (1-4), should be considered always the safest one. During the last years, trying to satisfy the increased demand of a more rapid treatment and to reduce the discomfort, during the healing period, a modified protocol has been tested with several clinical trials. These procedures have become routine in the treatment of edentulous lower jaws and consist in delivering a fix-bridge the same day or in a few days after the implant placement (Immediate or Early loading implants). With these protocols it has been achieved similar predictable results than the classic two stages approach. Some controlled studies have demonstrated also good results when implants are immediately in function in partial edentulism and in upper maxilla and even when they are immediately placed in fresh extraction sockets. It will be discussed the possible indications and limits of the last technique and the inclusion and exclusion criteria followed to reach the best results.
Influence of pre-existing infectious pathologies on the implant success rate

Even with stringent rules for peri-operative sterility and a-traumatic surgery, a minority of implants show post-operative complications and/or non-integration. Besides peri-operative contamination, a residual suture, a poorly seated cover screw, trauma by antagonistic teeth, or persisting bone pathology may explain such early failures. Root remnants, an unhealed granuloma, a cyst and/or an endodontic pathology of a neighboring tooth can indeed provoke a peri-apical infection around the implant (sometimes even an exfoliation). These aspects should therefore be considered as compromising factors for implant surgery.

This presentation will review early failures that occurred after insertion of an implant to replace a single missing tooth. There are strong indications, based on a retrospective study within our department, that the presence of a remaining granuloma/scare tissue or a history of a failed endodontic procedure are indeed linked with early implant failures (either non integration or a retrograde peri-implantitis). The critical defect size for radiological detection of cysts, granulomata, or defects within the medullar bone (involvement of cortical layer is prerequisite), explains why most lesions remain un- or under-diagnosed. A thorough evaluation of the radiographs including a comparison with the situation before tooth removal, an analysis of the axial slices in case of CT or tomography, and the evaluation of the vitality of neighboring teeth are thus mandatory.

Strategies for bone augmentation and osseointegration

Insufficient bone volume in the maxillofacial region often requires reconstructive surgery for ridge augmentation to make placement of endosseous implants possible. The Scientific data also point out the local factors are more important than systemic for the treatment outcome, i.e. long-term implant survival rate. This lecture will cover aspects of biomechanics and integration of implants in bone grafts. Treatment options for minor and major augmentation needs will be discussed and scientific data presented. The possible positive effects of local growth factors on the healing and preservation of bone grafts are frequently debated. Theoretically, the use of bioactive factors that could prevent graft resorption and enhance the remodelling process is most exciting. Where are we today? Experimental and clinical data on the effects of BMPs and Platelet Rich Plasma (PRP) on the graft maturation and implant integration are growing. One-year results of a controlled prospective 5-year study on reconstruction of the severely resorbed maxilla with autogenous bone, PRP and implants will be presented.
INVITED SPEAKERS

Paul ROUSSEAU

Yves SAMAMA

Two articles about implantology and bone grafting.

Curriculum Vitae

Docteur en Chirurgie Dentaire
CES de biomatériaux, CES de parodontologie.
Ancien Médecin Dentiste Assistant invité au Service de Chirurgie Orale de l’Ecole de Médecine Dentaire de Genève, Suisse.
Attaché Hôpital Universitaire - Université Paris V.
Exercice Privé Exclusif d’Implantologie et de Chirurgie Orale.

Alveolar Distraction Vs Bone Graft prior implant placement: Indications and Limits

The best treatment for edentulous areas is the placement of a dental prosthesis connected to a dental implant. The reconstruction of the alveolar bone loss is essential for the placement of osteointegrated implants. Osteogenetic distraction allows predictable vertical alveolar bone augmentation.

The osteogenetic distraction can be used as an alternative method to reconstruction of the alveolar defect. Reconstruction the site with alveolar distraction may produce an enlargement of the bone mass available for the placement of an implant and a significant increase in the quantity of the alveolar mucosa.

In contrast, with autogenous onlay bone grafting and guided bone regeneration techniques, the increase in the bone mass is limited by the mucosa’s capacity to cover the operative site as dehiscence may occur in severe bone defects.

Indications of the A.D.: Different areas can be treated with the alveolar distraction procedure: upper anterior sites, lower anterior sites, upper posterior sites, upper posterior sites. The edentulous area can involve one or more teeth. A significant bone gain of 10 millimeters or more can be achieved, even if local anesthesia and a much less surgical procedure. The patient recovery time is minimal. When the bone loss is major, a small bone segment (2 millimeters) can be distracted.

Limits of the A.D.: The shape of the original bone site dictates the direction of the free bone segment’s movement since the device is placed directly against the bone in front of the distracted area. The proximity of the sinus floor limits the alveolar distraction and may require a second procedure to fill the sinus cavity. In some cases, the distractor can be pulled towards the palate by the mucosa’s resistance to being stretched.

Conclusions: In comparison with the bone graft procedure, we propose some indications for the alveolar distraction. We propose also a predictable surgical procedure to obtain a significant bone gain with the Alveolar Distraction to allow implant placement.

The advantage of the prosthetic approach in improving aesthetic results

The difficulty in evaluating aesthetic problems connected with the implant-supported prosthesis has often led to disappointments or failures. To our mind, such difficulties often seem related to a poor understanding of the various problems concerning different types of tooth loss, each involving differing levels of tissue damage. In situations where initial conditions are unfavourable to an implant approach (limited coronal space, extensive osteo-mucosa defects in patients with a poly-traumatic condition) the efforts undertaken may sometimes appear over exaggerated; it is interesting to consider the ease with which fixed prosthetic restorations are carried out in certain cases.

In other cases, the surgical reconstruction of extensive lost osteo-mucosa tissue is often long and laborious. The prosthetic device can partly compensate for such problems, enabling us to optimise the chances of an aesthetic final result. Treatment length can be reduced, especially for patients with multi-loculated fractures.

Curriculum Vitae

Dr. Yves SAMAMA was born in Tunis on 11th Nov., 1949. He received his dental surgeon diploma at the University of Paris V in 1972. There he met Raymond Leibowitch in the Fixed Prosthesis Department where he became his protégé, his associate in private practice, and ultimately, his successor; Starting as a tutor, and later a teaching assistant, Dr Samama became an assistant professor in 1976, while obtaining post-graduate certificates in buscal biology, fixed prosthodontics, periodontics and endodontics from 1973 to 1978. Yves Samama has published 40 articles and presented 350 international lectures. He has also contributed to many books in the field of fixed prosthodontics and has had his own private practice in Paris since 1973.

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Invited Speakers

David SARMENT

Curriculum Vitae
Dr. David P. Sarment is a Diplomate of the American Academy of Periodontology and a Clinical Assistant Professor at the University of Michigan School of Dentistry. Dr. Sarment maintains a private practice that specializes in periodontics and periodontal prostheses. He is also the author and co-author of scientific articles and book chapters, as well as the Manual of Clinical Dental Implants. Implantology has been a major focus of his research, and he has been engaged in investigations of precise implant placement methods, as well as advanced diagnostic tools.

A small size CT scanner for new clinical applications
A new cone-beam CT scanner will be presented. It acquires all head and neck regions with high precision, high contrast and low radiations. This clinical presentation will introduce CT scanning methods, and in particular cone-beam technology. We will then present clinical evidence of the scanner capacities by showing implant surgical planning, and establish the potential utilization of in-office small scanners for 3D evaluation.

Peter SCHÜPBACH

Curriculum Vitae
Peter Schüpbach studied natural sciences at the Federal Technical High School of Switzerland and did in 1979 his doctor degree. He spent over 20 years at the Dental Institute of the University of Zurich as a head of a histologic group. He has a PhD in biology and was lecturer at the Faculty of Medicine in Zurich for "Oral Biology and Patho-physiology". Peter Schüpbach is member of several international organisations and author of over 50 publications in the fields of implantology, bone substitution, tissue regeneration, carioloogy and oral microbiology. Today he runs his own company which offers services in histology, microscopy and microimaging.

Bone and soft tissue integration with different implant surfaces: relevance for immediate loading
The histological background for early and firm bone and soft tissue integration to implants with different surfaces will be given. The importance of the surface characteristics for early bone formation, allowing for immediate implant function and leading to enhanced long-term osseointegration, will be discussed. Further, the role of the functional epithelium to form an effective barrier and a compartment of peripheral defense towards the oral cavity and the possibilities to improve the connective tissue attachment will be presented. It will be shown how all these features may lead to safer clinical procedures, simpler treatment protocols and enhanced esthetics. Especially, immediate function has proven to give predictable results with high success rates in combination with a potential of improved esthetic outcome, based on less invasive surgery and an improved preservation of bone and natural soft tissue anatomy.
Parafunction and implant prosthodontics: the times they are a-changin

Parafunctional forces on implants, as on teeth, have long been recognized as harmful and are, very often, the most difficult to contend with on a long-term basis. Stress, represented by repeated or sustained occlusion, is a particular entity expressed as "force". As a result, any factor that increases force, magnifies the stress.

In the past, these extra forces have represented a contraindication for implant prosthodontics. Today however, in the light of enhanced clinical experience and more accurate scientific knowledge, the times could be changing.

The purpose of this presentation is twofold:
1. Review the data on the possible mechanical and biological implications in implantology as it relates to excessive function and/or parafunction
2. Discuss the factors that may influence and lower the negative impact of parafunction on the implant, the bone and the final restoration.

Surface Properties of Oxidized Titanium Implants and Reinforcement of Osseointegration

Over the last 10-15 years, great effort of surface innovation of clinical implants has been carried out, particularly focusing on topographically altered 'rougher' surfaces. Methods that are being used, are for example plasma spray, acid etching and blasting, resulting in "intermediary roughened surfaces". Moreover, various surface oxide properties has demonstrated to be of on significance for improved bone tissue response. In particular, Mg-, Ca-, incorporations in titanium oxides results in fast and strong integration of implants in bone and these implants can thus be regarded as having bioactive surface chemistry. The hypothesis that is currently most favored for surfaces chemistry is biochemical bonding as an action mode of reinforced osseointegration.
Invited Speakers

Georges TAWIL

Curriculum Vitae


Short implants in the treatment of partial or total edentulism: long term results

Bone resorption following tooth loss often limits the quantity of bone available for implant placement. The treatment options may include either augmentation procedures or the use of short implants. Clinical strategies to improve the success rate of short implants have included the use of large diameter implants, rough-surface for greater bone-to-implant contact or simply a greater number of implants. Several factors may influence the outcome of therapy and the decision making process. They have been defined as functional, prosthetic, anatomic, occlusal, related to the hardware or technical. In this presentation, the long term survival rate of short implants placed in different forms of edentulism will be reported. The failures will be critically analysed. Short implants will be compared to longer implants placed in similar clinical situations, often paired in the same patients in a class I form of edentulism. The bone response following loading will be described. Some unusual healing patterns, part of a modeling/remodeling process will be reported. The prosthetic factors influencing the survival and complication rate will be analysed namely, the crown-to-implant ratio, the dimension of the occlusal table, the type of occlusion, the magnitude of the occlusal forces, the point of application of these forces as to the long axis of the implant and the mesial and distal cantilever. Long term results tend to confirm the predictability of short implants in the treatment of partial or total edentulism provided the bone is of a good quality, the surgical and prosthetic management have been precisely conducted and the indications properly defined.

The impact of dental implants on traditional fixed and removable prosthodontics.

The introduction of osseointegration into mainstream dentistry during the first half of the 1980’s was a watershed event in restorative and prosthetic treatment planning and therapy. This presentation will explore the evolution of treatment philosophy from the early days of osseointegration to the present. Treatment planning choices and predictive outcomes of prosthodontic care will be discussed in detail.

Thomas D. TAYLOR

Curriculum Vitae

BS, DDS, MSD, FACP
Dr. Taylor is Professor and Chairman, Department of Prosthodontics and Operative Dentistry at the University of Connecticut. He is involved in both clinical and laboratory research and has published extensively in the prosthodontic literature.

Dr. Taylor is prosthodontic editor and abstract editor for the International Journal of Oral and Maxillofacial Implants. He currently serves as Executive Director of as well as being Past President of the American Board of Prosthodontics and he is Past President of the American College of Prosthodontists. He is currently president of the International Team for Implantology (ITI).

Dr. Taylor maintains a part-time practice limited to prosthodontics.

The impact of dental implants on traditional fixed and removable prosthodontics.
Periodontal Treatment vs. Implants. The Best Choice for the Long Term

The introduction of osseointegrated implants has profoundly changed the treatment of the severe periodontal patient. The use of implant and tooth-supported restorations, in particular, has led to radical alterations to the design of periodontal prostheses. In many instances, implants have become the first choice solution to the replacement of periodontally compromised teeth. Such approach is based on clinical need on one side and on the assumptions that: i) implants perform better than periodontally compromised teeth as abutments for complex reconstructions; and ii) that the individual susceptibility to periodontal infections “dies with the teeth” and that periodontitis patients do not represent a high risk group for implant survival. This presentation will critically assess these assumptions and provide a reading light to make clinical decisions in daily practice.

Maurizio S. TONETTI

Clinical research interest is the success of bone augmentation procedures and the long-term success rates of dental implants, placed in regenerated bone.

Friday a.m.

Saturday p.m.
Anterior maxilla: Immediate temporization in compromised sites

Traditionally the healing time before the final crown cementation is about 8 months for implants inserted in the anterior maxilla. This extended treatment period and the need for a removable prosthesis during the healing phase may be uncomfortable to certain patients. Furthermore, osseous and gingival tissue loss following extraction may compromise esthetics. In order to eliminate these drawbacks, it is interesting to use early temporization for preserving the existing osseous and gingival architecture and regenerating bony defects around implants.

Three types of dental implants following 18 months occlusal loading. A histomorphometric study in baboons

Watzak G., Zechner W., Tang L. St., Busenlechner D., Ulm Ch., Tepper G., Donath K., Watzek G. (Vienna, Austria)

The purpose of this study was to determine the effects of functional loading on "bone area" (BA) and "bone-to-implant contact" (BIC) of dental implants with different designs and surface modifications. Three types of dental implants with fixed partial dentures were placed in the posterior jaws of adult baboons (commercially pure Titanium screws, CpTi; grit-blasted acid etched screws, GBAE; and titanium plasma sprayed cylinders). After 18 months of functional loading histologic and histomorphometric analyses were carried out. Analysis of BA within 1 mm around implants showed significant differences between CpTi (50.5%) and TPS (39.7%) (±2.72 SEM; p < .01) in the maxilla. Significant differences were found between the absolute BIC of CpTi (23.9 mm) and TPS (15.1 mm) and between GBAE (26.5 mm) and TPS (19.6 mm) (±1.05 SEM; p < .01) in the maxilla and between GBAE (26.5 mm) and TPS (19.6 mm) (±1.42 SEM; p < .01) in the mandible. Overall, the data indicate that, in the maxilla, screw-shaped implants showed more absolute BIC than cylindrical implants, which had less maxillary than mandibular absolute BIC after 18 months of functional loading.
Moderators & Chairpersons

> Carlos Aparicio

Curriculum Vitae

• MD (Magna Cum Laude) University of Navarra, 1973.
• DDS Barcelona University of Barcelona, 1983.
• DENTAL LABORATORY TECHNICIAN, Escuela Ramón y Cajal de Barcelona, 1984.
• MIC Biomaterials Science University of Barcelona, 1988.
• VISITING PROFESSOR to Periodotics Programme, University of Oslo, University of Barcelona, Universitat Oberta de Catalunya, to Diploma in Rehabilitation and Maxillofacial prostheses, University of Barcelona to the Prothesis on Implants, Universitat Oberta de Catalunya.
• HOMEROMY PROFESSOR at Centro de Perfeccionamiento in Odontopediateria. Universitat Oberta de Catalunya.
• AUTHOR of many scientific articles in different international scientific journals.
• LECTURER de numerosos cursos nacionales e internacionales de implantes osteointegrados.
• PhD candidate in The Department of Biomaterials Handicap Research Group. University of Gothemburg, Sweden.
• PRESIDENT of the Osseointegration Foundation (American Academy of Osseointegration).
• DIRECTOR of "Diploma in Implant Dentistry" University of Gothemburg in collaboration with University of Barcelona. Co-directors: Professor Tomas Albrektsson and Domingo Ruano.
• DIRECTOR of "Diploma in Clinical Periodontology" Co-directors and Professors: Raul G. Caffesse and Jose Javier Echeverría.
• BOARD DIRECTOR of the European Association of Osseointegration (EAO).
• DIRECTOR of CLINICA APARICIO in Barcelona, exclusive practice in Implantology, Periodontology and Teaching.

> Xavier Assemat-Tessandier

Curriculum Vitae

Xavier ASSEMAT-TESSANDIER is graduated of the Dental University of Paris V in 1974. He occupied successively several university and hospital functions in the prosthodontic department of the University of Paris V. He started as a tutor and after being teaching-aid, he then became assistant professor in 1976. He left university in 1983, to work full-time as prosthodontist in his private practice in Paris. He obtained post-graduate certificates in fixed prosthodontics, removable complete prosthodontics, removable partial prosthodontics and implant prosthodontics.

He published scientific articles and books on partial dentures, bonded bridges and implant dentistry. He lectured extensively nationally and internationally on the same topics. Editor-in-chief since 1999 of "Implant", the main french publication on implantology. Member of the editorial board of "Les Cahiers de Prothèse" since 1994, "Clinic" since 1995 and "Implant" from 1995 to 1999. Member of the European Association of Osseointegration since 1992.

> Jean-Pierre Arnoux

Curriculum Vitae

Dr. Arnoux received his dental degrees from Montpellier University and University of Southern California. He received his postdoctoral training in Periodontics-Implantology at the University of Pennsylvania. Dr Arnoux serves as Assistant Professor in the Department of Periodontics at the University of Pennsylvania. He maintains a private practice in Lawnvereille ( New jersey). He has lectured nationally and internationally and published articles.

> Wolfgang Bolz

Curriculum Vitae

Dr. Wolfgang Bolz studied dental medicine at the University of Munich and opened up his own practice in 1977. Several educational programs led him to Switzerland, Schweden and the USA. He was General Secretary of the German Society of Periodontology (DGP) from 1989 to 1998, founding member of the European Association for Osseointegration and from 1991 to 2000 Secretary General of the EAO. He was founder and editorial board member of the journal "Parodontologie". In 1999 the DGP elected him specialist for Periodontology.

After organizing the international meetings of Osseointegration in Munich he founded together with Prof. Dr. Hannes Wachtel the Institute for Periodontology and Implantology (IPI) in Munich in 1994 and opened up a new practice Drs. Bolz, Wachtel, Hürzeler, Z ihn in 1998. He is organizer of numerous national and international meetings and workshops.
Moderators & Chairpersons

> Alain BORGHETTI
Curriculum Vitae
- Doctor in Dental Surgery, Doctor in Odontology Sciences, Doctor at the University of Aix-Marseille 2
- Private practice in exclusive Periodontology and Implantology
- University Senior Lecturer – Hospital practician, Odontology Faculty of Marseille
- Scientific president of the French Society of Periodontology and Oral Implantology
- 50 national and international articles and 1 book on Periodontal Plastic Surgery

> Daniel BUSER
Curriculum Vitae
Prof. Daniel Buser, University of Berne.
Dr. Daniel Buser is Professor and Chairman of the Department of Oral Surgery and Stomatology, School of Dental Medicine, University of Berne in Switzerland, where he also graduated in dental medicine 1980. He stayed twice in the US, at Harvard School of Dental Medicine in Boston (1989-91), and at Baylor College of Dentistry in Dallas (1985).
His main research areas are in bone regeneration, surface technology of dental implants, and Guided Bone Regeneration, and he has authored and co-authored more than 160 publications and book chapters.
He received several awards by professional organizations. Among them:
- the Andrée Schroeder Research Prize by the International Team of Implantology (ITI)
- the Osseointegration Foundation Research Award by the Academy of Osseointegration (AO),
- the Honorary Membership Award by the American Academy of Periodontology (AAP), and
- the Daniel M. Laskin Award by the American Association of Oral and Maxillofacial Surgeons (AAOMS).

> Jean-Pierre GARDELLA
Curriculum Vitae
Jean-Pierre Gardella has got his DDS at Marseille University in 1985. Post graduate in Periodontics, Implantology, Prosthodontics and Advanced Surgery, he is in charge of post graduate education in many French universities.
He has a private practice limited to Periodontics and Implantology: he is the author of many papers and lectures concerning aesthetic (both perio and implants), immediate loading and bone reconstruction.

> Klaus GOTFREDSEN
Curriculum Vitae
Presently, Dr. Gotfredsen is associate professor at the Department of Prosthetic Dentistry, Faculty of Health Sciences, University of Copenhagen.
Graduated in Dentistry 1984 from the University of Aarhus, Denmark. Received a Danish Ph.D. degree in 1990 from University of Copenhagen, Denmark and obtained a Swedish Ph.D. degree at Department of Periodontology in 2001 from Göteborg University.
Dr. Gotfredsen has been employed at Department of Prosthetic dentistry as well as at Department of Oral & Maxillofacial Surgery in Copenhagen. He has mainly researched in clinical and experimental implant dentistry and have published more than 50 scientific papers in the field of implant dentistry.
Dr. Gotfredsen has been in the board of European Association for Osseointegration for 5-years and was president for the organization in 1999. He is presently in the board of Scandinavian Society of Prosthetic Dentistry and Danish Society of Implantology.
Dr. Ueli Grunder received his DMD degree from the University of Zurich, Switzerland, in 1982. His post-graduate education in advanced fixed prosthodontics also came from the University of Zurich, where he is senior lecturer since 1987. He maintains a private practice since 1989 in Zollikon-Zurich and has published numerous papers and extensively lectured nationally and internationally on the surgical and prosthetic aspects of implant dentistry. Dr. Grunder is President of the Swiss Society of Oral Implantology (SSOI) and President of the European Academy of Esthetic Dentistry (EAED) for the years 2005 and 2006.

Patrick Henry is the Director of the Branemark Center in Perth, Western Australia. Practice limited to implant prosthodontics. Co-author of 8 textbooks and over 100 scientific journal publications.

Dr. Khayat received his dental degree from the University of Paris in 1979. In 1986, he graduated from the University of Washington where he received his Certificate in Perio-Prosthodontics and his Master of Science in Dentistry (MS). Dr. Khayat is Affiliate Assistant Professor at the University of Washington, Department of Restorative Dentistry. He is an active member of the Academy of Osseointegration, the American Dental Club of Paris and many other French institutions. Dr. Khayat is also Past President of the French Society of Esthetic Dentistry. He has published articles in several French and international journals including the Journal of Prosthetic Dentistry, Practical Periodontics and Esthetic Dentistry, the International Journal of Oral and Maxillofacial Implants. Dr. Khayat has lectured extensively internationally. He currently maintains a private practice that is limited to oral implantology in Paris, France.

M.D, D.D.S Professor at the Faculty of Medicine (Free University of Brussels: ULB) teaching the management of the edentulous patient and implant technologies President of the D.E.S (postgraduate education) of Periodontology in the same university and Vice-president of the Certificate in Implantology. Clinical chief and responsible of the department of Maxillo-facial surgery and Dentistry at the Children’s hospital of Brussels treating congenital maxillo-facial deformities. Attached clinical chief at the department of maxillo-facial surgery at the academic Hospital Erasme, developing oral rehabilitation by means of osseointegrated implants. Member of the team of the cleft palate center at the children’s hospital of Brussels. Member of scientific Societies: E.A.O, A.O, E.A.C.M.F.S., Royal Belgian Society of Maxillo-facial Surgery. Lectures internationally and publishes in the fields of periodontology and implant surgery in edentulous patients as well as in maxillo-facial deformities.
Moderators & Chairpersons

Friedrich NEUKAM

Curriculum Vitae

Massimo SIMION

Curriculum Vitae
Degree of Medicine and Surgery at the University of Milan in 1979. Specialization in Odontostomatology and Dental Prosthodontics at the University of Milan in 1982. From 1987 to 1994 Consultant Professor at the School of Specialization of Odontostomatology of the University of Milan. Since 1996 Consultant Professor at the University of Parma. Scientific Secretary and Founder of the Italian Society of Osseointegration. Member of the Board of the European Association for Osseointegration (EAO) since 1996. President elect of EAO for the year 2001. He works half time in his private practice, limited to periodontics and implant surgery, and half time at the University of Milan. He published several papers and he is international lecturer about the topic osseointegration and guided bone regeneration.

Jean-François TULASNE

Curriculum Vitae

Daniel van STEENBERGHE

Curriculum Vitae
Curriculum Vitae

1970  MD degree, Medical School, Univ. of Vienna
1973  Speciality board examination in dentistry (DDS)
1974  Residency at Dept. of Oral and Maxillofacial Surgery, University of Vienna
1976  Fellowship at Columbia University, New York
1978  Residencies at Neurosurgery and ENT Department, University of Vienna
1979  Speciality board examination in Oral and Maxillofacial Surgery
1982  Appointed senior resident
1982- Head of Dept. of Oral Surgery, Dental School, Univ. of Vienna
1983- President of the Austrian Society of Oral Surgery and Implantology
1987-1999  Head of the Dental School of the University of Vienna
1988-1993  President of the Austrian Society of Dentists and Stomatologists
1991  Honorary member of the Hungarian Society of Dentists and Stomatologists
1995-1997  Visiting Professor at the University of Pennsylvania
1996-  Head of the Dental School of the University of Vienna
2003  President of the European Association for Osseointegration (EAO)

Author of 7 textbooks and over 200 publications
Research Competition Presenters

> H. ANTOUN

N° 32
Immediate loading and Brånemark Novum® concept: a retrospective multicentric study

> Y. AYUKAWA

N° 35
Simvastatin stimulates osteogenesis around titanium implants in osteoporotic rat

> R.S.R. BUCH

N° 30
Collagen sponges for ridge preservation in rabbit jaw trepan defects

> D. CARMAGNOLA

N° 31
Time sequence of bone healing around 2 implant systems in minipigs

> N. DONOS

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> F. FONTANA

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The rehabilitation of the severely atrophic posterior upper jaw with sinus floor elevation combined with vertical ridge augmentation procedure
> O. HANISCH

N° 34
Single-step versus staged implant approach: 5-year clinical prospective study

> S.K. MUN

N° 27
Evaluation of implants with microthreaded crest module and SLA surface

> E.A. RIKSEN

N° 28
Effects of different amelogenin-peptides on SaOs and OHS osteoblasts

> Y. YAMADA

N° 33
The characteristic of tissue-engineered bone and the relation to osseointegrated dental implants for clinical approach
Pre-Congress Courses Speakers

> Philippe BOUCHARD
Philippe Bouchard, PU-PH Chair
Department of Periodontics
U.F.R. Odontologie
Université Paris 7 - Denis Diderot
Paris, France

Co-founder of SAPO Implant and SAPO Clinic, DDS, University Consultant, Department of Functional Anatomy Laboratory, Université René Descartes, Faculté de Medecine Paris V

> Jean-Luc CHARRIER
Lecturer, Department of Functional Anatomy Laboratory, Faculté de Médecine, Université René Descartes, Paris V

> Jean-François GAUDY
Professor, in charge of the Department of Functional Anatomy Laboratory, Faculté de Médecine, Université René Descartes, Paris V

> Luc GILLOT
Co-founder of SAPO Implant and SAPO Clinic, DDS, University Consultant, Juridic Expert, Department of Functional Anatomy Laboratory, Université René Descartes, Faculté de Médecine Paris V

> Jean-Louis GIOVANNOLI
- Dental School - University of Paris VI (France)
- Residency in Periodontology - University of Washington (USA)
- Master in Education - University of Florida (USA)
- Former Assistant Professor - University of Florida (USA)
- Charge de Cours - University of Paris VII
- Former President of the French Society of Periodontology
- Former President of the European Federation of Periodontology
- Private practice limited to Periodontology and Oral Implantology
- Scientific Director of Quintessence International

> Bernard CANNAS
Co-founder of SAPO Implant and SAPO Clinic, DDS, University Consultant, Department of Functional Anatomy Laboratory, Université René Descartes, Faculté de Medecine Paris V
PRE-CONGRESS COURSES SPEAKERS

> Thierry GORCE

Co-founder of SAPO Implant and SAPO Clinic, DDS, University Consultant, Department of Functional Anatomy Laboratory, University René Descartes, Faculté de Médecine Paris V

> Mariano SANZ

• MD – Degree - Universidad Complutense de Madrid
• Specialist in Stomatology, Universidad Complutense de Madrid
• Specialist in Periodontology, University of California, Los Angeles (UCLA)
• Doctor en Medicine (PhD degree), Universidad Complutense de Madrid
• Professor of Periodontology, Universidad Complutense de Madrid
• Vicedean of the Faculty of Odontology, Universidad Complutense de Madrid
• Director of the Graduate Programme “Master in Periodontology”, Universidad Complutense de Madrid
• Past-President Association for Dental Education in Europe (ADEE)
• Secretary General of the European Federation of Periodontology (EFP)
• Past-President of the Spanish Society of Periodontology (SEPAP)
• Past-President of the European-Continentad Division of the International Association for Dental Research (IADR-CED)
• Board Member International Association for Dental Research
• Has published scientific articles and book chapters in Periodontology, Implant Dentistry and Dental Education.

> Goran URDE

Personal data:
• Name: Göran Urde, D.D.S
• Date of birth: August 16, 1951
• Nationality: Swedish
• Married to Annika. Two children, Is and Cecilia
• Address: Fiskarevägen 4, SE-236 35 Höllviken

Education:
• Captain, Royal Swedish Navy
• Dr Urde received his dental degree from Faculty of Odontology, Karolinska Institute, Stockholm, in 1979, and was registered as a duly qualified dental surgeon the same year.

Experience / Positions:
• Assistant Professor, Department of Prosthetics, The Bränemark Clinic, University of Gothenburg, January 1988 – January 1993 Dr Urde has during this period treated more than five hundred implant cases, been responsible for and lecturing on courses at the Bränemark Clinic as well as lecturing extensively world-wide.
• Honorary Dental Surgeon, Eastman Dental Hospital, London, UK
• Honorary Tutor, United Medical & Dental Schools of Guy’s & St. Thomas’ Hospitals, London, UK
• Prosthodontist at Copenhagen Implant Centre, Copenhagen, Denmark, September 2001-
• Research Fellow, Department of Biomaterials, Institute for Surgical Sciences, Sahlgrenska Academy, University of Gothenburg, Sweden, 2003-
• Dr Urde lecture extensively nationally/internationally on Implants and implant related topics as well in Practice Management.
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General Information

Date and Venue
The 13th EAO Congress will be held at Disney’s Hotel New York® Convention Centre of Disneyland® Resort Paris from Thursday 16 September to Saturday, 18 September 2004. Disneyland® Resort Paris is located 32 km east of the French Capital by motorway and is only 35 mins from the 2 main airports (Roissy Charles de Gaulle and Orly) with regular airport shuttles.

Contacts
Congress Office:
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Fax: +33 1 44 64 15 16
eao2004@colloquium.fr

EAO Office:
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Mr Simon Croker
1 Wimpole Street, London, W1G 0AE - UK
Ph: +44 (0)20 7290 3851
Fax: +44(0)20 7290 2989
EAO@rsm.ac.uk

Congress official language
The official language of the congress is English. Plenary sessions will be translated into French. Simultaneous translation may also be provided for other languages upon request depending on the number of delegates and relevant budget.

Message Board
A Message Board is at your disposal in the web café area.

EAO Association
History
The EAO was founded in Munich in 1991 following the recommendations made by an international group of clinicians and research workers. The EAO was formed as an international, interdisciplinary and independent forum for all professionals interested in the art and science of osseointegration.

Membership
The annual membership fee is 225 € with a one-time application fee of 50 €.

Registration
Registration fees for delegates include:
• Admission to all congress sessions, poster areas and technical exhibition
• The opening ceremony
• Congress documents (final programme, abstracts books, congress bag)
• Lunches and coffee breaks

Terms of payment:
• By check payable to EAO 2004 C/o Colloquium
• By credit card: Visa, Euro or Master cards, Amex

Registration fees:

Before 1 June and 4 Sept 2004

EAO members 330 €
SFPIO Members 330 €
Non-members 440 €
Medical students 180 €

On-site

400 €
400 €
520 €
210 €

Registration fees include VAT (19.6%)

Cancellation Policy
Before 1 May: total amount will be refunded except for 50 € for administrative fees. With no payment received before cancellation, these 50 € will still remain due.
Between 1 May and 1 July: Reimbursement of 50% of the fees and hotel deposit paid. With no payment received before cancellation, this amount will still remain due.
After 1 July: No refund. With no payment received before that date, the total amount (registration and hotel deposit) will still remain due to the Congress office.

VAT
The Value Added Tax is included in all fees of the congress. According to the European Tax legislation, organisers of International congresses and exhibitions and services companies have to invoice all services with 19.6% French Value Added Tax (TVA in French). Companies may also contact directly our French Tax Representative: TEVEA International, specialized in handling VAT refund claims at the following address:
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64 rue Ranelagh – 75016 Paris
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General Assembly
The EAO General Assembly will take place on Saturday, 18 September at 17:30 at the Disney’s Hotel New York® Convention Centre where the congress is being held.
Excursions

City tour of Paris and fashion show
Half day Rate: 115 € Bus departure: 14:00
A sightseeing bus tour of Paris where you will discover some of its most beautiful monuments: the famous Champs Elysées and the Arc de Triomphe (tomb of the unknown soldier), Chaillot Palace with its magnificent view of the Eiffel Tower, the Military Academy and the Invalides (Napoleon’s Tomb), the Alexander III Bridge, the immense Place de la Concorde, the Louvre Museum…. From the bank of the River Seine one can see the towers of Notre Dame de Paris, France’s most famous Cathedral. At Espace Pierre Cardin, you will delight in a fashion-show, exhibiting the most beautiful fashion creations of this very famous artist.

Château de Fontainebleau
Half day Rate: 60 € Bus departure: 09:00
In the morning, we will visit the former Autumn residence of the Kings of France. Besides great Kings such as François I (Renaissance) and Louis XV (baroque style), Napoleon also lived in this Château, the south wing of which is today devoted to the Napoleonic period, with rooms dedicated to his victories, as well as the bedrooms of his son and Marie Louise. The Château also houses beautiful pieces of furniture, tapisseries and paintings created by some of the finest artists from the Renaissance period up to the 19th century.

Château de Vaux le Vicomte
Half day Rate: 60 € Bus departure: 14:00
Nicolas Fouquet, the Minister of Finances, built the Château de Vaux in the Versailles style. King Louis XIV, jealous of Fouquet’s unlimited expenditure in constructing his chateau, sent the minister to prison until his death. Vaux is now a private residence, but its magnificent decorations, unique furniture and its “French” gardens still play tribute to the French style of life in the 17th Century.

Versailles
Full day Rate: 180 € Bus departure: 08:30
Under Louis XIV, VERSAILLES was the capital of France, as it was a much bigger city at the time. The whole court, the Royal Family, merchants and shops settled there for a hundred years. Versailles is not only the magnificent classical Chateau that everybody knows. There are also different buildings for different purposes: the Trianons, where the King loved to go to get away from the ceremonial life at court; Marie Antoinette’s HAMELET, was built at the time of love for nature as exposed in the works of J.J. Rousseau. In the 19th Century, in order to save the chateau from ruin, the French government decided to turn it into a museum dedicated to the history of France, where paintings depicting famous facts of French history are still exhibited. Lunch at Versailles.

Giverny
Full day Rate: 160 € Bus departure: 08:30
In the morning, you shall arrive at Giverny, a temple to the impressionist movement where Claude Monet settled near the end of his life. You will visit his house, restored with the furniture and bright colours of the time and see his collection of Japanese prints. As you will stroll through the French and Japanese gardens, both created by Monet with impressionist colours, you will come to the lily pond that provided the inspiration for his last works of art. After lunch in the village of Giverny; take the opportunity to visit the Terra Foundation for the Arts, a contemporary American museum dedicated to landscape and impressionist arts.

Social event

Saturday, 18 September: Farewell Party
LAVINIA is a space exclusively dedicated to wine. With more than 6 500 different wine references displayed originating from 43 countries in the world, it is a very unique place where wine is the king of the feast. Located close to La Madeleine, one of the most beautiful areas in Paris, you will have the unique opportunity to taste very rare wines in perfect harmony with savoury dishes specifically chosen to accompany them and learn their history from an oenologist. LAVINIA has been exceptionally privatized on the occasion of the EAO Paris 2004 Congress.

Bus departure: 19:15 in front of the New York Hotel
Soft Tissue and Esthetic Considerations in Implant Therapy

Anthony G. Sclar

This long-anticipated book presents advanced surgical techniques for preserving and restoring natural dental esthetics in implant therapy. Written for the novice and expert alike, each chapter builds on the information in the preceding chapters in a clear, well-illustrated, and easy-to-follow format. Following a discussion of the rationale and biologic basis for creating a stable peri-implant soft tissue environment, the author presents a systematic approach to the patient evaluation, including quantification of the positive and negative elements that enhance and detract from an individual’s smile; specific surgical maneuvers for managing peri-implant soft tissues, including various innovative flap designs; the surgical and prosthetic protocols of a technique for preserving the natural hard and soft tissue anatomy in patients undergoing tooth removal; soft tissue grafting techniques for augmenting attached tissues around natural teeth and implant restorations; and an innovative technique for reconstructing large-volume hard and soft tissue defects in the anterior maxillary area. The final chapter presents advanced cases that demonstrate the use of these procedures in various situations, along with algorithms to guide the implant surgeon in their selection and sequencing. For those who want to master new techniques for treating esthetic implant patients with a high level of predictability, this book is a must-have.

Contents

• Beyond Osseointegration
• Surgical Techniques for Management of Peri-implant Soft Tissues
• Systematic Evaluation of the Esthetic Implant Patient
• The Bio-Col Technique
• Soft Tissue Grafting in Implant Therapy
• The Vascularized Interpositional Periosteal Connective Tissue (VIP-CT) Flap
• Esthetic Implant Therapy

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Membership Information:
To become a member of the EAO, please write or email to EAO office in London.
Annual membership fee is 225 € with a one-time application fee of 50 €.
The Munksgaard journal “Clinical Oral Implants Research” is included in the annual membership fee.
Address: EAO Office - 1 Wimpole Street - London W1G OAE - United Kingdom
Tel +44-20-7290 3851, Fax +44-20-7290 2989, Email: EAO@rsm.ac.uk

According to Sponsors confirmation at the date of 1 March, 2004

See you in Munich!
14th Annual Scientific Meeting
22nd to 24th September 2005