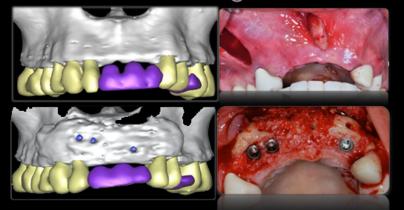
Predictable strategies in

Alveolar Bone Augmentation

Management of Minor & Major Bone Defects



Homa H. Zadeh

July 10-11, 2021

VISTA Institute for Therapeutic Innovations

Speaker



Homa H. Zadeh, DDS, PhD

Dr. Zadeh is a diplomate of the American Board of Periodontology and fellow, American Academy of Esthetic Dentistry (AAED). He received his doctor of dental surgery degree from the University of Southern California (USC) Ostrow School of Dentistry. He has also completed advanced clinical education in Periodontology and earned a PhD degree in immunology from the University of Connecticut, Schools of dental medicine and medicine. Dr. Zadeh is internationally recognized for his clinical and scientific expertise. He served as the president of the Western Society of Periodontology in 2017. Dr. Zadeh directs the VISTA Institute for Therapeutic Innovations with blended educational pedagogy on a variety of clinically-relevant topics. He also maintains a private practice limited to periodontology and implant surgery in Southern California.

Course Description

Patients with atrophic alveolar bone have a variety of different presentations, including vertical versus horizontal atrophy, anatomic features such as flat vs sloped defect walls or concavities, various bone density (eg cortical vs cancellous bone). Each of these features can affect the efficacy of bone augmentation, either in a favorable or unfavorable manner. The oral location (posterior vs anterior maxilla, post vs anterior mandible) requires special considerations. Therefore, the approach utilized needs to thoroughly analyze and classify the site and patient characteristics in order to select an appropriate technique, material and protocol. Another consideration is the potential of complications for the selected protocol and a risk assessment to determine the likelihood of encountering negative outcomes, based on patient features. Modular Bone Augmentation (MBA) refers to an approach, which is based on the convergence of several components required for successful bone regeneration. MBA will employ different components based on requirements of individual patient and site. The components of MBA include 1) Scaffold, 2) osteogenic cells, 3) osteogenic signals, 4) blood supply, 5) and wound stabilization. Many controversies remain, including whether, a) membrane are really necessary, b) primary closure or open healing concept, The application of MBA to regeneration of alveolar bone and mucosa in will increase the likelihood of successful outcome and reduces the potential for complications.

Educational Objectives

Diagnosis

Classification of alveolar ridge deficiencies

Risk Assessment:

- Patient and site characteristics
- Management of patient/site risks

Material Selection:

- Autogenous: methods & location of harvesting
- Xenograft: effects of sintering temperature
- O Allograft: DFDBA, FDBA, cortical, cancellous
- o Alloplastic: HA, TCP, biphasic HA/TCP
- Platelet Rich Fibrin (PRF):
 - Biology
 - Protocol
 - Applications
 - Forms: liquid PRF, solid matrix PRF
- Membrane selection:
- Resorbable vs non-resorbable
- Cross-linked vs native collagen

Evidence-based therapy

Evidence on efficacy of GBR and other techniques

Biology

- Biology of wound healing
- Integration of various bone graft material

Flap design:

- Flap design in posterior maxilla
- o Flap design in posterior mandible
- o Flap design in anterior maxilla
- o Flap design in anterior mandible
- Achieving tension-free flap
- Management of failed sites with scarred periosteum
- o VISTA: vestibular access for bone augmentation

Suture material & techniques:

- Resorbable vs non-resorbable suture
- Suture techniques for effective flap adaptation
- Prevention of graft exposure

Graft and membrane stabilization

- o Fixation system:
 - MODfix/UNIfix
 - Tenting screws
 - Membrane fixation

Decortication Soft tissue management:

- o Timing & staging: before, during or after GBR
- o Material:
 - Native xenogenic Collagen (Mucograft)
 - Form-stable xenogenic Collagen (FibroGide)
 - Connective tissue graft
 - Free gingival graft
- Vestibuloplasty
- FIVE (Fibrin Immobilization Vestibular Extension)

Complications:

· Prevention and management

Pre- and post-operative Care:

- Antibiotics and antiseptics
- Analgesics
- Anti-inflammatory agents
- Nutritional and herbal supplements

Hands-on Workshop Simulated Exercises	Live Surgery Demo		
Flap design in			
GBR in posterior maxilla	GBR		
Flap design for lateral window antrostomy	Platelet Rich Fibrin (PRF):		
Flap design for crestal osteotomy	Preparation		
Piezosurgery	Liquid PRF, solid matrix PRF		
Platelet Rich Fibrin (PRF):			
Preparation			
Liquid PRF, solid matrix PRF			
Membrane fixation			
Fixation system:			
MODfixUNIfix			
Tenting screws			
Membrane fixation			
Suture techniques: to prevent graft exposure			
Graft and membrane stabilization			
Decortication			
Soft tissue management			
Vestibuloplasty			
Educational Format			
This course offers flexible educational format to accommodate all clinicians' needs and interests. Participation may take place either:			

- In-person or remotely (held over Zoom)
- Live or on-demand
- Lecture only or lecture plus hands-on workshops

Regardless of mode of participation, online resources are available to supplement live lecture material. This information is accessible on an on-demand basis.

Schedule for live session

CE units

\$1995 Live in-Person: Lecture + Workshop	hands-on workshop and live	Saturday July 10, 2021
\$1495 Remote Learning: Lecture + Workshop \$995 Remote Learning: Lectures Only Tuition for remote workshops includes two-way shipment of all supplies to allow participants to complete the workshops in their own facility.	surgery demonstration 4 hours of on-demand online education	7:00 to 8:00 AM Registration &
		Sunday July 11, 2021
		7:00 to 8:00 AM Breakfast 8:00 to 10:00 AM Homa Zadeh Lecture 10:00 to 10:30 AM Break 10:30 to 12:30 PM Homa Zadeh Lecture 12:30 to 1:30 PM Lunch 1:30 to 2:30 PM Hands-on workshop 3:00 to 5:00 PM Live Surgery

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