

Carl Botvinick  
 Richard Somerlott  
 Michael Glass  
 Allan Jacobs  
 Richard Rubinstein  
 Richard Gardner  
 Gerald Dietz, Jr.  
 Mark Dylewski  
 Alayne Evans

Edward Fitzpatrick  
 Michael Hoen  
 Stephen Navarre  
 Mark Robinson  
 Thomas Vokal  
 Jason Lang  
 Tiffeny Chimelak  
 Craig Duhaime

*Emeritus*  
 Gerald Dietz, Sr.  
 Melvyn Eder  
 John Dylewski

**Bloomfield Hills - Troy**  
 50 W. Big Beaver, Ste. 200  
 Bloomfield Hills, MI 48304  
 248 647-7930

**Waterford - Pontiac**  
 2335 Pontiac Lake Rd., Ste. D  
 Waterford, MI 48328  
 248 683-2300

**Clinton Twp. - Sterling Heights**  
 15870 19 Mile Rd., Ste. 110  
 Clinton Twp., MI 48038  
 586 286-3390

**Rochester - Lake Orion**  
 1460 Walton Blvd., Ste. 208  
 Rochester, MI 48309  
 248 656-1626

**Farmington Hills - W. Bloomfield**  
 31410 Northwestern Hwy., Ste. C  
 Farmington Hills, MI 48334  
 248 737-1360

**St. Clair Shores - Roseville**  
 18303 E. Ten Mile Rd., Ste. 150  
 Roseville, MI 48066  
 586 773-2000

**Clarkston - North Oakland**  
 6770 Dixie Highway, Ste. 300  
 Clarkston, MI 48346  
 248 620-0002

**Sterling Heights - Troy**  
 43114 Dequindre  
 Sterling Heights, MI 48314  
 586 254-1110

**Ann Arbor - Ypsilanti**  
 315 E. Eisenhower Pkwy., Ste. 220  
 Ann Arbor, MI 48108  
 734 761-3166

**Commerce Twp.**  
 2900 Union Lake Rd.  
 Commerce Twp., MI 48382  
 248 363-9345

## Unique Clinical Case

*Case report by Dr. Tiffeny Chimelak*

A 56-year-old male presented to our office for evaluation of the area between #21 and #22. The patient reported no history of symptoms but described a gingival swelling that began a few months earlier. Clinical and radiographic examinations were completed. Teeth #21 and #22 had no sensitivity to percussion or bite. Both teeth had a non lingering cold response and periodontal probings less than 4 mm. A palpable, but firm swelling in the attached gingiva between #21 and #22 was observed. Digital images demonstrated a 9 x 5 mm well defined radiolucency between the roots of #21 and #22. The lamina dura of both teeth appeared intact.



Digital radiograph  
 #21 and #22

All findings suggested the swelling and radiographic lesion were of non-endodontic origin. The patient was referred to an oral surgeon for evaluation, biopsy and subsequent treatment.

The biopsy specimen measured 10 x 5 x 2 mm. The microscopic description was a cyst lined by thin, non-keratinized stratified squamous epithelium. The cyst wall consisted of fibrovascular connective tissue and chronic inflammatory cells. Small fragments of undecalcified viable bone were also noted. The diagnosis was a lateral periodontal cyst.

Although identification of the lateral periodontal cyst is initially based on clinical findings, histologic evaluation is required for diagnosis. A review of the lateral periodontal cyst is described (left).

*Our goal is to provide the highest quality of dentistry. This case points out the importance of working very close with the general dentist and other local specialist to achieve maximum results for the patient. ■*

References: Neville, Damm, Allen, and Bouquot. Oral and Maxillofacial Pathology, 2nd edition. 2002

### **Incidence and occurrence:**

- < 2% of all epithelial lined jaw cysts
- Most commonly occurs in the fifth to seventh decade of life
- 75-80% occur in the mandibular premolar-canine-lateral incisor area

### **Radiographic findings:**

- Well circumscribed radiolucency lateral to roots of vital teeth
- Usually < 1 cm

### **Differential diagnosis:**

- Lateral periodontal cyst
- Odontogenic keratocyst

### **Treatment:**

- Conservative enucleation and follow-up
- Recurrence is unusual

# The Road to the Final Four in Detroit

The crown jewel of the NCAA Men’s Basketball Season, the Final Four, was played at Detroit’s Ford Field on Saturday, April 4, with the Championship Game on Monday, April 6. For anyone that follows college basketball, the NCAA Tournament, familiarly known as March Madness, is three weeks of great competition, exciting upsets, and collegiate fan passion. Endodontic Associates Bloomfield engaged in the madness with their referral network of dentists. Thirty-two dentists were randomly paired with two teams each with the chance to attend the sold-out Final Four games at Ford Field.

The premise was very simple. If one of the teams the dentist was paired with won, the dentist moved on from round to round. Dentists were “alive” in the challenge until both of their teams were eliminated. The weekend of March 19 – 22 (first and second rounds) knocked out 18 of the 32 dentists. The Sweet 16 Round eliminated another nine dentists. Only seven dentists were left for the Elite 8 Round (**Dr. Hanson** had two teams alive entering the weekend of March 28 – 29.)

The following dentist’s teams carried them to the Final Four, and they each received two tickets to the National Semifinals on Saturday, April 4:

**Villanova – Dr. Vander  
North Carolina – Dr. Carmody**

**Michigan State – Dr. Charnesky  
Connecticut – Dr. Parsons**

In the Final Four, hometown favorite, Michigan State beat Connecticut, and North Carolina beat Villanova. **Dr. Carmody** and **Dr. Charnesky** each received four tickets to the National Championship Game on Monday, April 6, to see North Carolina defeat Michigan State. ■

## MIDDOOR Event

With the alarming rate of uninsured Metro Detroiters skyrocketing, a group of doctors from Endodontic Associates teamed up with the University of Detroit Mercy Dental School for the 2009 Michigan Day of Oral Health Outreach. The event provided more than \$250,000 in free dental care to over 250 low-income



adults. Licensed dentists gave people in need of dental care services they could otherwise not afford. Endodontic (continued on page 4)

**Dr. Michael Glass** provides root canal treatment

## Summer Staff Parties

*Even though cool temperatures ushered in summer 2009 in Michigan it didn’t stop EA from kicking off the summer with their annual staff parties.*

### Clinton Township

The Clinton Township office hosted their staff party at Villa Penna on Thursday, June 18. The reputation of this summer event continues to grow, as over 260 staff enjoyed a night of music, food and friends.

Also known for their great raffle prizes, this year’s grand prize was a pair of outstanding seats to a “sold out” first place Detroit Tigers game. Other prizes included Coach bags and gifts certificates to local restaurants and retail establishments.

### Roseville

The Roseville office hosted their referring Dentists & staff to dinner at Andiamo’s Lakefront in St. Clair Shores on Wednesday, June 24. Over 90 guests came out from 6:00 pm – 9:00 pm for a warm summer night overlooking Lake St. Clair. With plenty of frozen drinks and gourmet Italian food to go around, everybody enjoyed the night. The raffle prizes included Detroit Tigers baseball tickets, movie packages complete with



EA Roseville staff greets guests

snacks and gift certificates for a night out to local restaurants.

Now that the Endodontic Associates staff parties have arrived, it is officially summer in Michigan. It is through

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## AAE Annual Session: **ENGAGE - ENERGIZE - EDUCATE**

From April 29 through May 2, the American Association of Endodontists held their annual session in Orlando, Florida. Endodontic Associates was well represented again this year with Doctors **Alayne Evans, Michael Hoen, Jerry Dietz Jr., Richard Rubinstein, Richard Gardner, Mark Dylewski, and T.J. Vokal** in attendance. The theme for this year's session was "engage, energize, educate." With over 110 education opportunities, 9 hands-on workshops and countless networking opportunities, our doctors came home energized from the Floridian sun.

Over the past few years, **Dr. Richard Rubenstein's** Endodontic Microsurgery workshop has been one of the best attended sessions, and this year was no

exception. His hands-on seminar featured detailed instruction on how to correctly identify and utilize the microsurgical armamentaria, use a surgical operating microscope, and advance their skills in performing apical microsurgery.

**Dr. Michael Hoen** continues to lead the country in the education and implementation of evidence-based endodontics and dentistry. His seminar highlighted how to locate and use electronic endodontic evidence in a clinical setting accessing online databases, search engines, webinars, videos and podcasts.

**Dr. Jerry Dietz Jr.** participated on a panel in the Affiliate Leadership Meeting and presented as a mentor to the new leadership in endodontics,

addressing the benefits of risk management insurance for affiliates. He also completed his final year of a 6 year commitment as a Board member on the American Association of Endodontist's Foundation Board of Trustees. Where he was responsible for overseeing the shepherding of funds to research and education on behalf of the Association.

Endodontic Associates has a long tradition of commitment and service to the AAE. They continue to represent Michigan endodontists in multiple AAE disciplines including clinical teaching, evidence based research, and marketing and public affairs. Endodontic Associates will continue to stay politically active on a national level to work for the advancement of dentistry and endodontics. ■

## Anesthetic Efficacy Of a Repeat Intraosseous Injection

Several studies of intraosseous injections for pulpal anesthesia have reported success rates of more than 90% in mandibular first molars and maxillary lateral incisors. Onset is immediate, but the degree of profound pulpal anesthesia decreases steadily over 60 minutes.

Jensen et al from Ohio State University conducted a prospective, randomized, single-blinded crossover study to determine the anesthetic efficacy of a repeat intraosseous injection given 30 minutes after a primary intraosseous injection. Fifty-five patients (18 women, 37 men) aged 19–41 years (average 26 years) received an intraosseous injection of 1.4 mL of 2% lidocaine with 1:100,000 epinephrine (Xylocaine; AstraZeneca LP, Wilmington, Del.). Thirty minutes later, the patients randomly received either another intraosseous injection of 1.4 mL Xylocaine or a placebo. At a later

appointment, the procedure was repeated in reverse; thus, each patient served as his or her own control. All injections used the X-tip intraosseous anesthesia system (Dentsply Inc., York, Pa.).

Following the initial injection, the first molar and adjacent teeth were pulp-tested every 2 minutes until the second injection was administered. After a 6-minute hiatus, testing resumed every 2 minutes, for a total period of 120 minutes. The criterion for pulpal anesthesia was defined as no response from the patient when the pulp tester was set at maximum output (a reading of 80) for 2 consecutive readings within 10 minutes.

Success of the initial intraosseous injection was 100% for the first molar, 95% for the second molar and 86% for the second premolar. In the teeth that received an initial intraosseous injection followed by placebo, pulpal anesthesia steadily declined over 60 minutes. For the

first molar, pulpal anesthesia began declining at 15 minutes; by 30 minutes, approximately 30% no longer had pulpal anesthesia. There were significant differences between the repeat injection group and the placebo group from minutes 36–84 (first molar), minutes 36–82 (second molar) and minutes 37–73 (second premolar).

### Conclusion

Repeating the intraosseous injection 30 minutes after an initial intraosseous injection provided an additional 15 minutes of pulpal anesthesia. Clinicians should evaluate the requirements for onset, success and duration of pulpal anesthesia when selecting a technique.

Jensen J, Nusstein J, Drum M, et al. Anesthetic efficacy of a repeated intraosseous injection following a primary intraosseous injection. *J Endod* 2008;34:126-130. ■

*MIDDOOR Event* (continued from page 2)

Associates **Dr. Michael Glass, Jay Lang** and **T.J. Vokal**, worked diligently with other endodontists to perform root canals and other clinical services. Michigan Governor Jennifer Granholm trumpeted these efforts in her State of the State address in February, and came to get a first-hand glimpse of the program in action. While attending the event at the University of Detroit Mercy Dental School, Governor Granholm personally thanked the volunteers for giving their time and effort to people who so desperately need their help. Endodontic Associates is honored to participate in this program and give back to our community. ■



**Dr. Jay Lang** volunteers for MIDDOOR

*Summer Staff Parties* (continued from page 1)

these casual parties that we get to know our referring staff network on a personal basis which allows us to be a true “extension of your practice” in treating your patients. We want to thank everyone that attended these events which helped make the evening a great success. ■

# Take Notice...

## New **EA Commerce** Office Now Makes “10” Convenient Locations!!

Look for complete profile on this office in our Fall issue



## Chimelak in Training...



I am so excited! On October 18th, I will be running my first half marathon AND will be running for a great cause.



**Dr. Tiffeny Paulson (Chimelak)**

I'm training for the Detroit Free Press/Flagstar Half Marathon with The Leukemia & Lymphoma Society's Team In Training. As a member of their training program, I have accepted two important challenges...to get in shape and prepare to run 13.1 miles and also to support the fight against leukemia and blood-related cancers.

I have the ability to run, and with that gift I can help many. If you like, check out my webpage at <http://pages.teamintraining.org/mi/detroit09/tpaulson>.

I am completing my first half marathon in honor of all individuals who are battling blood cancers. These people are the real heroes on our team and we need your support to cross the ultimate finish line - a cure!

On behalf of myself and The Leukemia & Lymphoma Society and the lives they touch, thank you for helping me reach my goal!

— Dr. Tiffeny Paulson (Chimelak)

### Did you know...

- Every 4 minutes someone is diagnosed with a blood cancer
- Every 10 minutes someone dies from a blood cancer.
- Leukemia is the number one disease killer of children, but it strikes ten times as many adults.
- Society-funded research has directly contributed to many breakthrough cancer treatments, such as, chemotherapy, bone marrow and stem cell transplantation, and new, targeted oral therapies such as Gleevec™.