

Carl Botvinick	Neema Mehrkhodavandi
Michael Glass	Tony Tran
Richard Rubinstein	Mark Shallal-Ayzin
Richard Gardner	John Lindell
Gerald Dietz Jr.	Cara McCary
Alayne Evans	<i>Emeritus</i>
Stephen Navarre	Gerald Dietz Sr.
Mark Robinson	Melvyn Eder
Tiffany Chimelak	John Dylewski
Craig Duhaime	Edward Fitzpatrick
James Nowicki	Michael Hoen
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EA GIVES THANKS *by Hosting Education Seminars*

Endodontic Associates was busy this fall hosting referring dentists from their Clarkston, Waterford, Ann Arbor, Farmington, Commerce and Novi offices at three educational seminars to provide CE credits to those in attendance.

The Ann Arbor office, partnered with the Farmington, Commerce and Novi offices to bring **Dr. Mohamed I. Fayad, DDS, MS, PhD**, to Detroit from Chicago for their seminars. The Ann Arbor office event hosted by **Drs. Richard Gardner, Alayne Evans** and **Mark Robinson**, was attended by over 50 dentists at Zingerman's Greyline on Wednesday, September 25. The Farmington, Commerce and Novi offices event hosted by **Drs. Richard Rubinstein, Tiffany Chimelak, Chad Speirs, Mark Shallal-Ayzin, Tony Tran, John Lindell, and Cara McCary** was attended by over 70 dentists at the Hotel Baronette in Novi, on Thursday, September 26.

Dr. Fayad's presentation, "To Scan or Not to Scan? 3-D Imaging in Dentistry: A new era in diagnosis and treatment," covered how to apply CBCT imaging in the following cases: Diagnosis of pain, cracked teeth, vertical root fractures, and resorptive defects. He also covered how to utilize 3-D information to establish the correct strategy to achieve a good prognosis well before the beginning of the treatment (nonsurgical, surgical endodontics or single tooth implant).

continued on page 2



Clarkston, Waterford - *Fountains Golf and Banquet*

EA GIVES THANKS *continued from page 1*

The Clarkston and Waterford offices hosted over 40 dentists at Fountains Golf and Banquet Center in Clarkston on Wednesday, October 23. The afternoon speaker was **Theodore Schumann II**, who covered Practice Management, Financial Planning and Tax Strategies. The evening speaker was **Dr. Martin Trope, DMD** from the University of Pennsylvania Department of Endodontics, who covered an understanding of the general properties and characteristics of bioceramic materials in endodontics; the application of bioceramics in a wide variety of endodontic procedures; and up to date advantages of the newer bioceramics.

The EA doctors hope everyone that attended gained some useful and practical information on patient care and practice management. Part of Endodontic Associates' mission is to be a useful resource for all of your endodontic needs, including hosting educational seminars to provide CE credit.



Ann Arbor - Zingermans Greyline



Farmington, Commerce, Novi - Hotel Baronette

USE OF LASERS IN ENDODONTICS?

While lasers have become more prevalent in medicine and dentistry, the value of this technology in conventional root canal therapy remains uncertain at this time. Below is an excerpt from the American Association of Endodontists' most current position statement on lasers.

Root canal preparation using laser light has not been proven to be more effective than mechanical shaping and comes with several significant disadvantages. Root canal spaces are often curved in at least two dimensions. Conventional root canal instruments follow the curvatures in a root. In contrast, laser light will only travel in a straight path; laser probes must therefore continue to be fabricated in a way that the laser light emerges laterally, uniformly interacting with the root canal wall. Further, the interaction between laser energy and tissue can cause a rise in temperature that can affect the canal space as well as the outer surfaces of the tooth. The resulting injury to dentin, soft tissue, and the surrounding bone may result in ankylosis or the eventual loss of the tooth. Moreover, cycles of melting and resolidification of radicular wall dentin apparently have no positive effect on clinical outcomes.

The use of lasers as an aid in disinfection has been researched extensively in the last few years. Currently, there exists a body of evidence from in vitro /in vivo studies on the antibacterial efficacy of high-power laser and photodynamic therapy, and in vitro experiments with PIPS in root canals. However, their effects on the clinical outcomes of root canal therapy are not known at this point. While the FDA has approved one laser A(diode) as an adjunct for removal of pulp tissue in a pulpotomy and apicoectomy, more research is required to develop laser energy for use in non-surgical endodontics that is equal to and perhaps one day, superior to present treatment modalities.

AAE Position Statement: Use of Lasers in Dentistry. 2019

Quote
of the
Quarter

“I cannot do all the good that the world needs.
But the world needs all the good that I can do.”

– Jana Stanfield



Maxillary Sinusitis of Endodontic Origin

Written By Cara McCary DMD

Maxillary sinusitis of endodontic origin has been well documented in the literature. It is generally accepted that approximately 10-12% of all maxillary sinusitis cases are odontogenic in origin. However, it has also been reported to be as high as 86%.^{1,2} This is not surprising due to the proximity of the maxillary posterior teeth root apices to the maxillary sinus. Visualization of periapical pathology can also be difficult in a traditional two-dimensional periapical radiograph, due to superimposition of anatomical structures, (notably the zygomatic process and the maxillary sinus). The following case report exemplifies the application of advanced imaging technology to arrive at the correct diagnosis and ultimately protect a patient from unnecessary treatment procedures.

A 50 year-old female presented for evaluation of unilateral sinus congestion of the left side, lasting for over eight months. The patient reported a sinus surgery was recommended and completed eight months prior with no resolution of her symptoms. A second sinus surgery was scheduled and she had been prescribed multiple antibiotic regimens. Though the patient was not suffering from dental pain or swelling, her treating physician prudently recommended evaluation by a dentist.

Thorough clinical examination was completed. No tenderness to percussion and palpation were demonstrated on any tooth in the upper left quadrant. Teeth #'s 12 and 13 tested vital and normal to the cold test while teeth #'s 14 and 15 did not respond to cold. Two-dimensional radiographs were exposed and reviewed. A heavily restored tooth #14 and previously treated tooth #15 with full coverage crown (Figures 1 & 2) were observed; no periapical pathology was visible on two dimensional radiographs.

After obtaining a CBCT scan, Critical evaluation revealed a periapical lesion encompassing the distobuccal root of tooth #14 and mesiobuccal root of tooth #15. The lesion appeared to perforate the sinus floor (Figure 3). Significant inflammation of the Schneiderian membrane and complete occlusion of the air spaces were observed. This additional information led me to a final diagnosis: maxillary sinusitis secondary to endodontic infection of teeth #'s 14 and 15.

Once root canal therapy was completed, the patient reported significant resolution of sinus congestion (Figures 4 & 5). Due to the limitations of two-dimensional radiographs and lack of dental symptoms, the etiology

of the sinusitis was left undiagnosed for several months. With the help of CBCT along with a thorough endodontic evaluation, an accurate diagnosis and proper treatment could be provided.

1. Maloney PL, Doku HC. Maxillary sinusitis of odontogenic origin. J Can Dent Assoc 1968;34:591-603.
2. Bomelli SR, Branstetter BF, Ferguson, BF. Frequency of a dental source for acute maxillary sinusitis, Laryngoscope 2009; 119(3):580-84.



Left: Figure 1
Right: Figure 2



Figure 3
CBCT Image



Left: Figure 4
Right: Figure 5

Quality Time with Good Friends

Endodontic Associates enjoys hosting the staff of referring doctors at their annual “staff night out” parties. Giving our staff and your staff a chance to get together, share some laughs, and make memories, allows everyone in the treatment team the opportunity to deepen friendships and strengthen bonds.

In that spirit, Endodontic Associates Clinton Township and Farmington Hills offices hosted social events this year:

EA Clinton Township closed down Bar Louie at Partridge Creek on Tuesday, October 1 and hosted over 70 staff from 23 dental offices! Twenty guests won gift cards, raffle prizes, and enjoyed dinner and drinks.

Our staff and **Drs. Stephen Navarre, Tony Tran and Neema Mehrkhodavandi** enjoyed visiting with other dental office staff members in the relaxed, casual environment.

EA Farmington Hills hosted 60 dentists and staff at the new Craft Brew City, in Farmington Hills on Tuesday, October 22. Twenty-four guests won gift card raffle prizes and there was even a “dance off” for the final gift card of the evening, won by Krista, from **Dr. Howard Topcik’s** office. Way to go, Krista!

EA Staff and **Drs. Richard Rubinstein and Cara McCary**, were happy to share the evening with colleagues. Catching up with long-time friends and making some new ones helps make working in dentistry even more fulfilling. We feel it enhances patient care as well, by encouraging a trusting and open line of communication between our practice and yours.



Clinton Township



Farmington Hills



Annual Receptionist Meeting

Endodontic Associates held its 3rd annual receptionists meeting on Saturday, September 21. What is quickly becoming a valuable part of the Endodontic Associates culture, this meeting of 21 receptionists and the administrative staff keeps the nine EA offices aligned and moving forward to best service our patients and referring dentist network.

The EA team brings over 325 years of combined experience every day to Endodontic Associates to ensure that we are patient focused and providing the best service.

The meeting was held downtown at the Atheneum Hotel, concluding with dinner at Fishbones and then some casino fun. This continues to be a rewarding event for the EA Team.



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