



"We respect Dentistry, Dental Technology and Science which makes us stand out from our competition"
Kash Qureshi, Managing Director

All Ceramic Quick Guide Table:

Dental Laboratory Newsletter /August 2019

All Ceramic	Flexural Strength	Clinical Indications	Aesthetics or Function	Anterior or Posterior
Lithium Disilicate IPS e.max	360 MPa to 400 MPa	Inlays, onlays, 3/4 crowns, single unit crowns, veneers, short span FPD's in anterior and premolar region, implant abutments.	Aesthetics	Mainly Anterior
Full Contour Zirconia Zirlux	900 MPa - 1,200 MPa	Inlay/onlays, full contoured crowns and bridges, copings, frameworks, retainers, custom implant abutments, hybrid bridges and layered ceramic crowns.	Function	Mainly Posterior
Layered to Zirconia Cercon	900 MPa - 1,200 MPa	Single unit anterior crowns (dark stump shades), single unit posterior crowns, large span anterior and posterior bridges, implant abutments, crowns & bridges.	Aesthetics	Anterior or Posterior

Dentist

(n.) Similar to parents, but they criticise your teeth instead of your lifestyle.

@HipDict

Dental Fact:

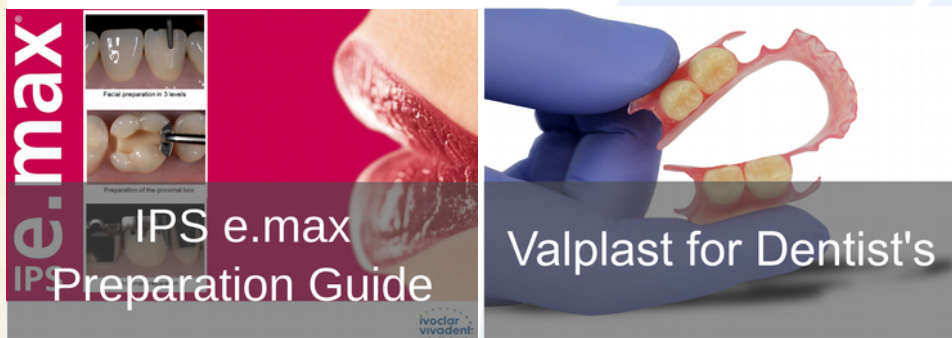
Smiling burns calories and lifts the muscles in the face to make you look younger!



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IMPORTANT! NEW NHS PRACTICES

We are no longer accepting any **NEW** clients for our NHS services within our Crown & Bridge and Prosthetics services until further notice . Pressure forming (night/mouth guards, whitening trays etc) only.

This will not affect any of our existing clients or practices that are currently using our NHS service. We are only accepting new Private clients and practices for the full range of our services: digital, implants, prosthetics, crown & bridge, orthodontics and pressure formed appliances.

We would like to thank all of our Dentist's who recommend and refer Bremadent to other Dentist's for the quality of our work.



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'Kois Deprogrammers' are used as a diagnostic tool for evaluating patients with occlusal dysfunction, this can cause problems with mastication, facial and joint pain which can lead to worn, broken, loose teeth with frequent chipping due to abnormal occlusal attrition.

A 'Kois Deprogrammer' is a removable, acrylic device that covers the palatal aspect of the maxilla and creates a single point of contact between the anterior bite platform on the upper central and the lower central incisor. This is used to evaluate the patient's bite and assist Dentist's in trying to locate a patient's optimal jaw position or distinguish between the three types of abnormal occlusal attrition – Constricted Path of Closure (PCP), Occlusal Dysfunction and Parafunction (bruxism).



'Kois Deprogrammers' work when the lower central incisors is in contact with the upper anterior bite plane which prevents the mandible and maxilla from occluding thus gradually relaxing the mandible into an ideal position.

This causes the lateral pterygoid muscles to relax and allows the TMJ to seat in its most comfortable and natural position as it removes occlusal interferences and habitual functional movements the patient has developed to avoid pain.

Patients may be asked to wear this device for a period of one week to one month to make sure old muscle memory has been erased (deprogrammed). Signs of successful deprogramming is when the patient has a reproducible bite without assistance as per contact whilst wearing the 'Kois Deprogrammer'.



DAMAS Accreditation 2019

DAMAS is the 'Dental Appliance Manufacturers Audit Scheme'. It is a quality management system designed specifically for the manufacturers of custom made dental appliances.

DAMAS is the most commonly used annually inspected quality system within the dental laboratory industry that provides a framework for an effective quality management system which enables dental laboratories to prove to their clients that they are operating within the law (Medical Devices Regulations MDR).

DAMAS is more than just a quality control mechanism. It encompasses control beyond just inspection and testing and requires a structured approach to prevention of quality problems through planned activities that include reviews, monitoring and documentation.

DAMAS provides laboratories with a set of processes that ensure a common sense approach to the management of the organisation. The system ensures consistency and improvement of working practices, which in turn should provide products and services that meet customer's requirements.

Bremadent have passed the DAMAS audit and have been accredited since 1997. www.damas.co.uk



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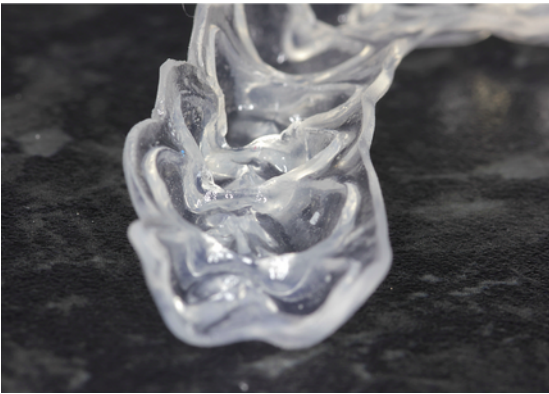


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Whitening Trays

'Whitening trays' are made from a 1.5 mm Ethylene Vinyl Acetate (EVA) based material and is used for professional and home tooth whitening. The material is comfortable, flexible with enough rigidity to allow for many sessions of tooth whitening. Buccal reservoirs are commonly needed when the gingival areas are scalloped which can provide a tight seal gingivally to limit the amount of saliva ingress and gel activation. Studies have shown, utilising buccal reservoirs and scalloped gingival areas can give a better overall shade reduction from incisal edge to the necks of the teeth.

Night Guards

'Night Guards' (Mouth guards) are made from a 3mm Ethylene vinyl acetate (EVA) based material and is a commonly used appliance to help with bruxists from grinding their teeth during the night and also is used to prevent breakages to crowns, bridges or teeth. The material is comfortable, flexible with a degree of rigidity and displays excellent energy absorbing properties which makes it ideal for night time wear.

Gumshields / Sports Guards

'Gumshields / Sports Guards' are used to protect the teeth and surround areas whilst contact sport activity is taken place and comes in a variety of colours, designs, patterns and personal customization of names and logos. All gum shields are at a 5mm thickness and is safely locked into the bite to aid mandibular stabilisation whilst the patients activity is taken place with our high impact absorbing polymer. The comfort is obtained via our polished and rolled peripheral edge with precise gingival, fissure and tooth adaptation that is retentive and functional.

Essix Retainers

'Essix Retainers' is a polypropylene pressure formed material that is used in conjunction with orthodontic treatment for patients who have received fixed treatment. By utilising a retainer the patient may be able to prevent teeth from shifting and reforming back to its original position, the effectiveness of an essix retainer is reliant on patient compliance. They range in thickness sizes of 0.75mm, 1mm and 1.5mm and are designed to sit above the undercut of the gum, in severe undercut cases this will be blocked out prior to vacuum forming.

All of our 'Pressure Formed Appliances' are formed under 4.6 psi bars of pressure to make sure every appliance is fitting accurately with precise gingival, fissure and tooth adaptation that is retentive and functional .

www.bremadent.co.uk/pressure-formed



“ Do you think 'Quality' Laboratory work is worth the extra cost?”.

This proposition comes across as very appealing, increase profits by paying less dental laboratory fees, but “if it sounds too good to be true, it probably is”!

In the last month, I have had many Dental Practice's ring Bremadent and enquiry about our services. The question I always ask is “Why have you left your current laboratory”? No answer is the same, apart from one “The lab I was using has closed down”.

Dental Laboratories in the UK are in competition with each other to manufacture dental appliances quicker, cheaper and better with various influences in oversea dental labs entering the competition via outsourcing. In any business, in order to facilitate quicker and cheaper goals, there are numerous strategies most laboratories will employ to achieve this. Some of them are:

- Use cheaper materials
- Employ less skilled staff
- Increase production on skilled staff
- Decrease quality control, standards and communication
- Reduce steps in manufacturing
- Outsource all laboratory work

This is a successful recipe in providing 'Quicker' and 'Cheaper' dental laboratory work, but at what cost?, Quality defined as “The degree of excellence”. So the foremost question for all Dentists is “ Do you think quality is worth the extra cost?”.

Turn around times and laboratory fees is something all laboratories can accommodate but quality is always more difficult to measure.

Quality laboratory work is not only set via the dental laboratory, it's dependent on the standards set by the Dentist, as one Dentist definition of quality' will vary from another Dentist perception of quality

To measure the quality of the current laboratory work, a Dentist should evaluate based on the following questions:

- 1.) Am I satisfied with the final results?
- 2.) Are my patients satisfied with the final results?
- 3.) Is my profit margin acceptable?
- 4.) Are my patients willing to pay more for a 'Better' result?

If it's a “Yes” to questions 1-3, then the laboratory work quality is acceptable and there is no need to change dental lab.

If it's a “No” to questions 1-3 and a yes to question 4, then this is an indication that a dental laboratory producing quality work will be needed.

In this case, Dentist's should first seek help in upgrading case acceptance skills. This will enable them to work with more a higher quality dental laboratory in order to satisfy the Dentist, patient and the business.

In any form of business, high quality and low prices' rub against each other to create friction, it's very rare for both to be consistently achieved, the question is “What's the right recipe for you?”

Contact Bremadent Dental Laboratory on 0208 520 8528 to discuss a case or ask questions via office@bremadent.co.uk.

