

8. Study Club Meeting

Donnerstag, 14. März 2024
19.00 - ca. 21.30 Uhr

2,5 Std. praxisrelevante Fortbildung

📍 Hotel Widder
Rennweg 7
CH-8001 Zürich

ICCO ASSOCIATION

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Interdisciplinary Competence Center of Orthodontics

Zweck und Ziele

Das ICCO will den Fortschritt auf dem Gebiet der Kieferorthopädie vorantreiben, um die Lebensqualität betroffener PatientInnen zu verbessern.

Die Ziele des ICCO sind die Förderung und Verbreitung interdisziplinären Wissens aus der Kieferorthopädie und verwandten Gebieten. KieferorthopädiInnen, ZahnmedizinerInnen und andere SpezialistInnen werden durch Lernen, Diskussion, Austausch und soziale Kontakte in ihrer täglichen Arbeit unterstützt und gefördert.

Leistungsumfang

- Dokumentation klinischer Verfahren
- Aus- und Weiterbildungsangebote
- Entwicklung von Behandlungsprotokollen
- Verbreitung von Fachinformationen

Erfahren Sie mehr unter icccortho.org

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Ort Hotel Widder, Rennweg 7, 8001 Zürich
Sprache Deutsch und English

Agenda

Welcome, Introduction

T. Eliades

Gingival recessions in orthodontic patients: long-term progression and interdisciplinary treatment approach

C. Katsaros

in-between: Apéro

All

Questions, Answers, Discussion

All

Farewell, Next Meeting

T. Eliades

Ihre Vorbereitung

Fachfrage

Als Ihr persönlicher Beitrag für die Diskussion bitten wir Sie, eine Fachfrage vorzubereiten, die Sie unter Umständen schon länger beschäftigt und die Sie in der Gruppe diskutieren möchten. Sie können die Frage auch vorgängig an info@iccoortho.org senden.

«bring a friend»

Im Rahmen unseres «bring a friend»-Programms dürfen Sie gern eine Kollegin oder einen Kollegen zum 8. ICO Study Club Meeting mitbringen. Diese Einladung ist für zwei Personen gültig.

Anmeldung

Bitte bestätigen Sie Ihre Teilnahme via E-Mail an info@iccoortho.org

SPEAKER



Prof. Christos Katsaros

**DDS, Dr med dent,
Dr hc, PhD**

Director, Department of Orthodontics and Dentofacial Orthopedics, University of Bern (since 2008)

- Christos Katsaros obtained his dental degree from the University of Thessaloniki (GR), and received his 4-year orthodontic training under Professor Rolf Berg at the University of Saarland (DE), where he also completed his doctoral thesis ("Dr. med. dent.") and his "Habilitation".

- Prof. Katsaros worked also as a researcher at the Göteborg University (SE), where he completed a Ph.D. ("Odont. Dr. /Ph.D.").

- 2000 - 2002 he served as an Associate Professor, and 2002 - 2008 as a Professor of Orthodontics at the Department of Orthodontics and Oral Biology, Radboud University Nijmegen Medical Centre, Nijmegen (NL).

- In 2023 he was awarded an honorary doctorate ("Dr. h.c.") by the University of Medicine and Pharmacy "Carol Davila" Bucharest.

- Prof. Katsaros is author or co-author of over 200 publications and regularly lectures internationally. His current research interests include the elucidation of the molecular mechanisms that control face development and wound healing in CLP; the prevention and therapy of gingival recession in orthodontic patients; and the clinical aspects of long-term orthodontic retention.

- In 2022 he was awarded the Sheldon Friel Memorial Lecture from the European Orthodontic Society (EOS).

- Prof. Katsaros serves as Associate Editor for the American Journal of Orthodontics and Dentofacial Orthopedics since 2015 and he is editorial board member or reviewer for several international scientific journals. He is Past-President of the EOS and an Active Member of the Angle Society of Europe.

Gingival recessions in orthodontic patients: long-term progression and interdisciplinary treatment approach

ABSTRACT Understanding the association between orthodontic tooth movement and the development of gingival recession is important given the large number of adolescents and adults undergoing orthodontic treatment every year. Active orthodontic tooth movement can induce gingival recession when teeth are moved outside the alveolar envelope. However, the available scientific evidence does not give a definitive answer to the question whether orthodontic treatment is a major risk factor for the development of gingival recession in the long-term. The same is true regarding the role of individual patient-related or treatment-related contributing factors. Also fixed orthodontic retention can induce unwanted tooth movement of retained tooth unit(s) through the transfer of forces by an active retainer that remains attached and clinically intact. These tooth movements manifest more frequently as inclination and torque changes and are progressive. Although orthodontic retreatment in these cases is usually possible, permanent damage such as bone dehiscence, gingival recession or loss of tooth vitality due to severe root displacements outside the bony envelope cannot be excluded, particularly if the complications remain undetected at an early stage. This is a very timely issue considering the increasing trend towards life-long retention. When treating gingival recession in orthodontic patients, special care must be given in the analysis of the specific topographic characteristics of the individual case as this will dictate the need for orthodontic preparation prior to surgical intervention.

This presentation will: (a) discuss the role of active orthodontic treatment and fixed retention in the development of gingival recession, and (b) illustrate the clinical situations that need orthodontic preparation prior to surgical coverage of gingival recession.