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PINS & POSTS

VOL 9 ISSUE 1





HAPPY
2024
NEW YEAR

Wishing you a year filled with happiness,
health, and prosperity

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2024

EDITORIAL DESK



DR RASHMI NAIR

IACDEians, have you wondered why the air on Dec 31st feels heavy????

Filled with highs, lows, joys and sorrows, love and challenges; people worldwide joined hands to bid farewell to the old year and welcome the new year. What's so great about this day??? Ever thought about it????

Jan 1st, the first day of the first month of the year. It is more than just turning over a new page of the book titled "MY LIFE". It symbolizes a fresh start to this year forgetting all the ups and downs, mistakes, problems that were faced last year thus creating a sense of hope, encouraging the people to set goals and seize new opportunities.

Resolutions made, resolutions broken... dreams made, dreams broken... seasons come and go...today I am good, tomorrow I am not... nothing is constant.

Every emotion, pain or thought is only a perception. Our emotions are our own and the responsibility of being happy rests only on us.

HAVE A BLASTING 2024!!!!

EDITORIAL TEAM

EDITOR



DR. RASHMI NAIR
PROFESSOR & HOD
CDCRI
RAJNANDGAON

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DR. KANWALPREET
KAUR BHULLAR
HOD
SGRD DENTAL COLLEGE,
AMRITSAR



DR. D L MALINI
READER
GDC & H , VIJAYWADA

SECTION HEADS

DESIGN & LAYOUT



DR. RAKSHA BHAT
READER
AB SHETTY MEMORIAL
INSTITUTE OF DENTAL
SCIENCES, NITTE DU

ENTERTAINMENT



DR. NEETU MAURYA
SENIOR LECTURER
CDCRI
RAJNANDGAON

PRESIDENT'S DESK

Esteemed Colleagues,

I trust this message finds you in good health and safety.

As we approach the forthcoming New Year, my heartfelt wishes extend to each of you for a year filled with prosperity and robust health.

Addressing you through this newsletter is an honor as I embark on my presidency, and I express gratitude for the overwhelming support and confidence that led to my election as the President of IACDE for 2023-24.



Leading an organization as active and impactful as IACDE is a significant challenge, a challenge underscored not only by its role but by the remarkable contributions of its members.

The Pins and Posts newsletter, a testament to our growth since 2016, initially served to connect academic and clinical achievements, keeping our global association informed. Under the guidance of Dr. Rashmi Nair, the publication has evolved into a multifaceted resource, showcasing members' diverse talents and hobbies, and I commend the team for their exceptional efforts.

My vision for IACDE is anchored in maintaining our commitment to addressing members' needs and supporting the promotion of oral health on a global scale. Heartfelt congratulations to all members who participated in recent events; your hard work has significantly impacted our specialty, garnering well-deserved attention and appreciation. I am proud to be associated with such a committed and motivated group.

Our academic activities and patient awareness programs have been immensely successful, making a tangible difference in the community. By sharing our knowledge, we have positively influenced the lives of patients—a collective achievement we can all take pride in.

As we progress, I encourage all members to sustain the enthusiasm witnessed during recent events. Let us continue working collaboratively, leveraging the collective expertise and knowledge within our association to make a lasting positive impact on our community. I am confident that together, we can accomplish even greater feats in the years to come, seizing the opportunities that lie ahead.

In closing, I express gratitude to everyone for your unwavering commitment and dedication to our shared goals. It has been an honor supporting these objectives with you, and I eagerly anticipate future collaborations. Pins and Posts offers a unique opportunity to connect with our cohesive association, appreciating, valuing, and invigorating one another. 'Pins and Posts' has consistently been the torchbearer, highlighting activities and events in our field, contributing to awareness about the latest developments in Conservative Dentistry and Endodontics.

Our association, along with its leadership, remains cognizant of the changing landscape in Conservative Dentistry and Endodontics. Through continuous surveys, we acknowledge the valid concerns of Endodontics on a wide range of issues affecting the future of our specialty, and we actively listen and act.

In conclusion, I emphasize that unity is indeed strength. Through effective teamwork and collaboration, we can achieve remarkable outcomes. I look forward to the collaborative efforts that lie ahead, ensuring that together, wonderful things can be achieved.

A handwritten signature in black ink, consisting of the letters 'D' and 'S' followed by a horizontal line, representing 'Dr. Deepak Sharma'.

Dr Deepak Sharma



38TH ANNUAL CONFERENCE

INDIAN ASSOCIATION OF CONSERVATIVE DENTISTRY & ENDODONTICS

30TH NOVEMBER TO 3RD DECEMBER 2023

The Organising Committee led by Dr. Debashis Banerjee left no stone unturned to make the 38th IACDE Annual Conference Kolkata 2023 a grand success. And a grand success it was. The Delegates and Post graduate students were awestruck and extremely happy.

The Conference started with the Preconference courses, 5 Preconference courses, 4 in Hotel Hindusthan International and 1 in Dr. R Ahmed Dental College and Hospital on 30th November 2023. Dr. Dibyendu Mazumder, President, Dental Council of India inaugurated the Preconference course in Dr. R Ahmed Dental College and Hospital.

There were 5 Preconference courses in all: Dr. Taha Ozyurek painstakingly introduced Microscopic Endodontics to the participants in Dr. R Ahmed Dental college. The course had to admit 34 participants instead of 20. In the 2nd Course, Dr R S Mohan Kumar, introduced the enthusiastic participants to the very basics of Veneers. Again the course was oversubscribed. In the 3rd Course, Dr. Yohan Chacko showed how to get rid of the black triangle in the BioClear course, 3rd course to be more than full. In an unique evening chat with Prof. Dr. Bart Van Meerbeek, PG Trainees to Delegates spent the evening followed by dinner. Which was Limited to 40 attendees but 60 attended eventually. Dr. Narasimhan Bharadwaj demonstrated the clinical significance of magnification in complex canals through a hands-on session. Last but not the least CBCT in endodontics was properly trained by Dr. Shaon Mukherjee.



The Registration opened from 29th November, 2023 at 4pm. The PG Trainees trickled in from all Parts of India to a smooth queue free registration. The total number of PG Papers crossed 700 and PG Posters crossed 300. It was conducted by Dr. Chikoy Wang and his team in 12 paper halls and 6 Poster halls. Participants were very glad for the arrangements made. The evening had a “Street Food Festival” in the venue, Science city complex. Almost all of the mouth-watering delicacies of Street side Kolkata were served. Starting with Phuchka (Panipuri), Fish Finger, Momos, Beguni {Fried brinjal in Besan}, Jhalmuri, Victoria Chat, Dahivada, Dosa, Aloor chop with Mughlai Paratha, Egg roll, Chicken roll, Egg Chicken Roll, Malpua, Kulfi faluda; you name it, it was there.

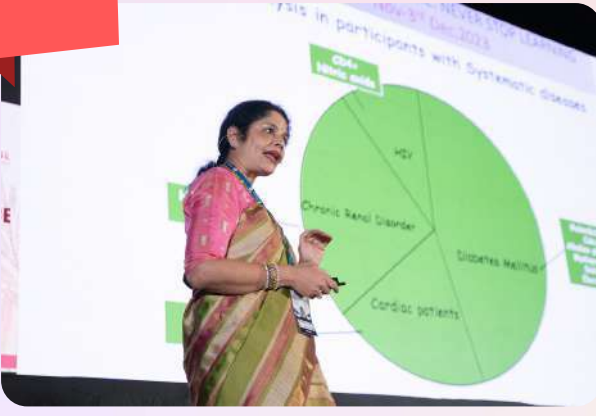


1st of December saw the opening of Grand Scientific session which continued till 3rd December afternoon. The Luminaries in Conservative Dentistry and Endodontics from all over the world included Dr. Paul Abot, Dr. Bart Van Meerbeek, Dr. Anil Kishen, Dr. Kim, Dr. Javier Tapia Guadix, Dr. Prasanna Neelakantan, Dr. Taha Ozyurek, Dr. Venkateshbabu Nagendrababu, Dr. Sanjay Tewari, Dr. Ajay Logani, Dr. Mithra N. Hegde, Dr. Shishir Singh, Dr. Jagat Bhushan, Dr. Yohan Chacko, Dr. Prashant Dhanapal, Dr. Vibha Hegde, Col. Dr.Sonali Sharma, Dr. Nimisha Shah, Dr. R S Mohan Kumar, Dr. Vipul Srivastava... List goes on...

Dr. R S Mohan Kumar demonstrated on the stage live on a dental chair; the tooth preparation and temporization of a veneer. The hall was packed to capacity. Prof. Javier Tapia Guadix gave a live demonstration in a specially prepared hall a 3 hr Demonstration on composite resin restoration. It was beyond description in words. All attended the Symposiums; Career, Scope and Opportunities after MDS and Regenerative Endodontics.

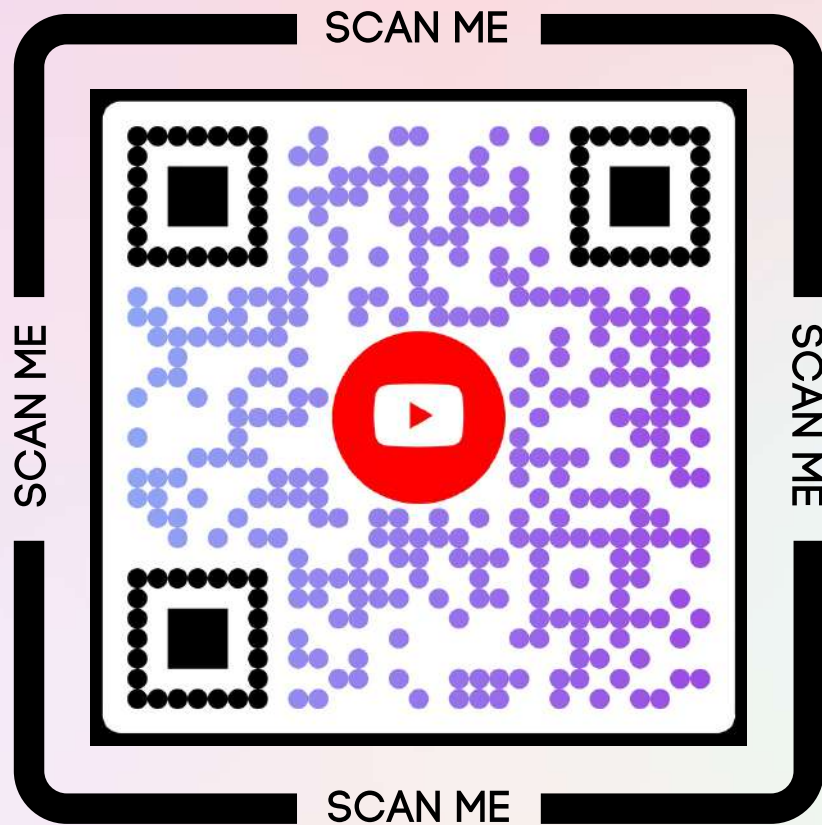








The Grand Inauguration on 1st December Evening was by His excellency Governor State of West Bengal, Dr. C V Anand Bose. The Chief Guest at the inauguration of the Conference was Dr Sukanta Majumdar, Honourable Member of Parliament, Lok Sabha, and Dr Dibyendu Mazumdar, President, Dental Council of India, were the Guests of Honour.



SCAN TO WATCH THE INAUGURATION HIGHLIGHTS HERE

Dr Jagat Bhushan, President, Indian Association of Conservative Dentistry and Endodontics, and Dr Prahlad Saraf, Secretary of the Association also graced the occasion. As a part of the Inauguration Ceremony, “Lifetime Achievement Award” was conferred by Indian Association of Conservative Dentistry and Endodontics (IACDE) to Professor Dr Utpal Kumar Das, former Professor and Head, Department of Conservative Dentistry and Endodontics at Dr R Ahmed Dental College and Hospital and Guru Nanak Institute of Dental Sciences and Research, Kolkata, in recognition of his exceptional contribution to the art and science of Conservative Dentistry and Endodontics. IACDE also honoured Professor Dr Dibyendu Mazumdar, President, Dental Council of India, who had already received the “Lifetime Achievement Award” in 2016, with the “Pillar of Strength Award” during the inaugural ceremony. The Inauguration was followed by unique song with narrations by IACDE West Bengal Members. The IACDE Excellence awards were announced following the inaugural ceremony.





Congratulations

**IACDE LIFETIME ACHIEVEMENT
AWARD**

Dr. Utpal Kumar Das

**IACDE OUTSTANDING
ACHIEVEMENT AWARD**

Dr. Vibha Hegde

**IACDE ACADEMIC EXCELLENCE
AWARDS**

Dr. Nimisha Shah

Dr. S.Pradeep





Congratulations

IACDE CLINICAL EXCELLENCE AWARDS

**Dr. N.Velmurugan
Dr. Ratheesh Rajendran**



IACDE HUMANITARIAN AWARD

Dr. Rubi Kataki

IACDE RISING STAR AWARDS

**Dr. Ajay Singh Rao
Dr. Kritika Selva Kumar
Dr. Preethesh Shetty**



Congratulations

IACDE RESEARCH GRANT 2023

Dr. B. Saravana Karthikeyan

Dr. Raksha Bhat

Dr. Sanitra Hegde



IACDE YOUNG ACHIEVERS AWARD - UNDERGRADUATES

1ST PLACE - Dr. Neha Rathod

2ND PLACE - Dr. Anmol Jain

3RD PLACE - Dr. Akshita Gupta



Congratulations

IACDE YOUNG ACHIEVERS AWARD - POSTGRADUATES

**1ST PLACE - Dr. Nishmitha Hegde
Dr. Aishwarya Awati**

**2ND PLACE- Dr. Nishita Arun
Dr. Jambagi Shweta**

**3RD PLACE - Dr. Kavina Desai
Dr. Vedika Talwar
Dr. Shruthi ST**



IACDE CASE OF THE YEAR AWARDS 2023

**1ST PLACE - Dr. Shanmathi Babu
Dr. Neha Singh**

**2ND PLACE- Dr. Niral Kotecha
3RD PLACE- Dr. Immanuel R**



Presidential dinner was hosted at The Orchid Lakeside Banquet, with a lavish menu with a live Band. Delegates enjoyed till midnight. The Banquet was held at a grand venue with none other than Javed Ali enthralling the audience. With more than 200 varieties, the guests were confused about what to eat and leave. Overall, the quantity of food in breakfast, lunch and dinner was excellent. Another highlight was the well-attended quiz. It was preceded by an Online Quiz at the venue which decided the finalists. Final day also saw the finalists on the stage of the PG Paper and Poster competition. The final First, Second and Third runner ups were decided. All the subcommittees under their conveners performed very well.

But everything had to end. Whoever attended 38th IACDE in Kolkata, it will never be forgotten.







Meet Our Team

IACDE OFFICE

BEARERS

2022-23



DR DEEPAK KUMAR SHARMA

PRESIDENT



DR ADITYA MITRA

PRESIDENT ELECT



DR JAGAT BHUSHAN

IMM. PAST PRESIDENT



DR R S MOHAN KUMAR

HON. GEN. SECRETARY



DR ARAVIND A

JOINT SECRETARY



DR ABHISHEK LAHA

TREASURER



DR DIBYENDU MAZUMDAR

PERMANENT EC MEMBER



DR KIRAN KUMAR N

VICE PRESIDENT



DR SANTHOSH HUGAR

VICE PRESIDENT



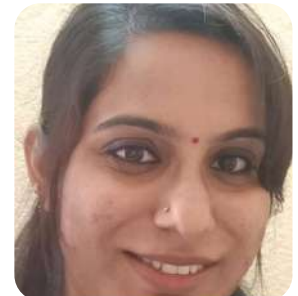
DR MUKUT SEAL

VICE PRESIDENT



DR SHISHIR SINGH

JOURNAL EDITOR



DR RASHMI NAIR

NEWSLETTER EDITOR



DR RATNAKAR P



DR VIBHA HEGDE



DR CHANDRASHEKAR V

PAST PRESIDENTS

EXECUTIVE COMMITTEE MEMBERS



**DR LUGU BURU
MURUMU**



**DR MAMTA
KAUSHIK**



DR D L MALINI



**DR N M DHANYA
KUMAR**



**DR KANWALPREET
KAUR BHULLAR**



**DR SUNITA
SHIVANAND**



**DR SHAMIM
ANJUM**



**DR RAJESHWARI
GOPAL**



**DR KUNTAL
CHOWDHARY**



**DR SONALI
KAPOOR**



**DR VEERENDRA
PATIL**



**DR SUPARNA
GANGULY SAHA**



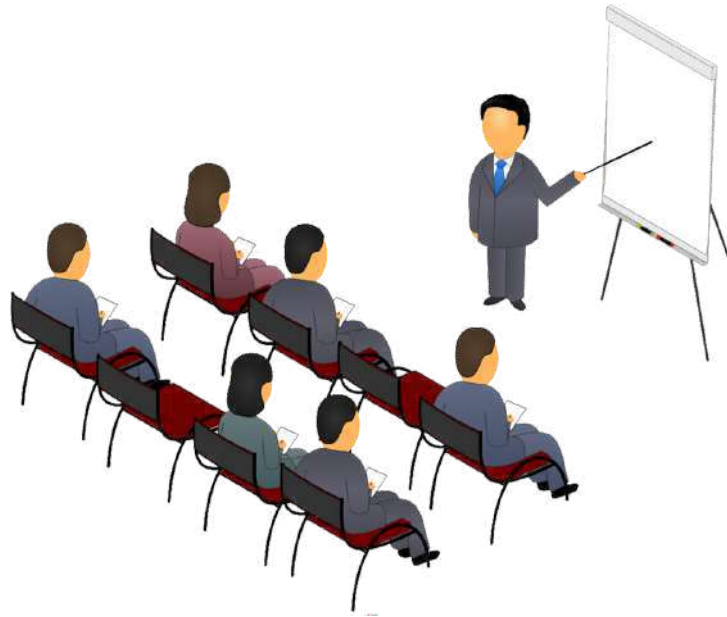
**DR NAVJOT SINGH
MANN**



**DR SWARUPANANDA
BERA**



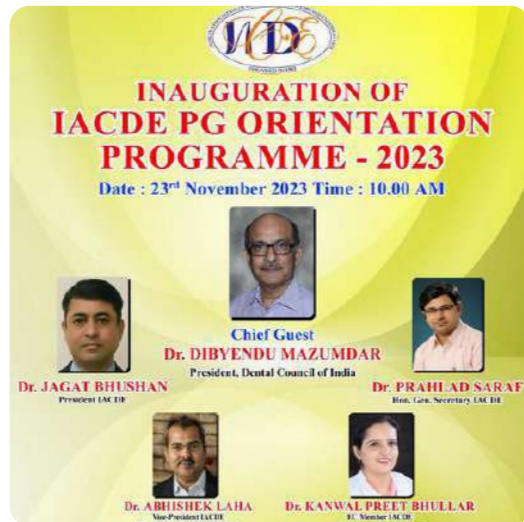
**DR MOHAMMAD KHWAJA
MOINUDDIN**



ACTIVITIES at IACDE



IACDE PG ORIENTATION PROGRAM 2023



**CONSERVATIVE BUT NOT
CONSERVATIVE**

DR. P. KARUNAKAR



**MICRORESTORATIVE
DENTISTRY**

DR. R S MOHAN KUMAR



**COMPREHENSIVE EXPLORATION OF
THE VITAL ROLE OF RESEARCH IN
DENTISTRY**

DR. MITHRA N HEGDE



THE GUIDING LIGHT

**DR. KANWALPREET
BHULLAR**



**TECHNOLOGICAL ADVANCES IN
ENDODONTICS**

DR. AJAY LOGANI



MACROENDODONTICS

DR. ABHISHEK PARMAR



**FROM START TO END -
PUBLISHING RESEARCH**

DR. SHISHIR SINGH



**CARIOLOGY :
UNRAVELING OF AN
ENIGMA**

**COL. DR. SONALI
SHARMA**



**PRECLINICAL PRACTICE -
CARVING THE GLIDE PATH TO
CLINICAL PERFECTION**

DR. SONALI TANEJA



**POST GRADUATE
SEMINAR - WHAT, WHY
& HOW**

DR. NIMISHA SHAH



**LASERS IN CONSERVATIVE
DENTISTRY & ENDODONTICS**

DR. KIRAN KUMAR

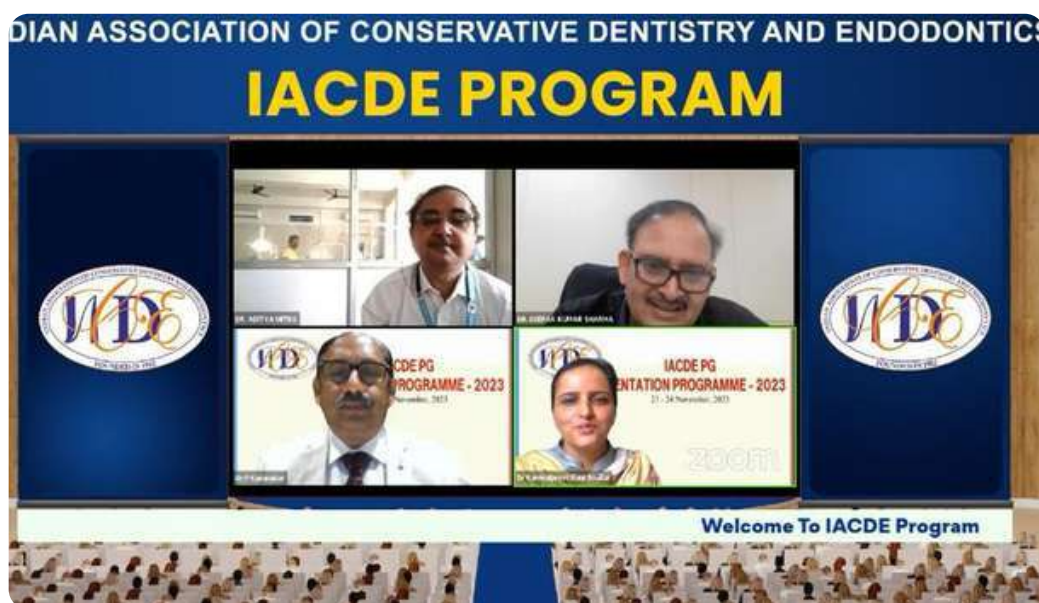


**RIGHT CHOICE OF RESEARCH TOPIC FOR
DISSERTATION**

DR. PRADEEP AR & DR VELMURUGAN



"Stay inspired. Never stop learning."



The PG Orientation Program 2023, organized by the Indian Association of Conservative Dentistry and Endodontics (IACDE), commenced on November 23, 2023, in an online format, benefitting post-graduates across India. It was held under the auspices of Dr. Dibyendu Mazumdar, President of DCI, who was the patron and chief guest, and under the guidance of Dr. Jagat Bhushan, President of IACDE, and Dr. Prahlad A Saraf, Honorary General Secretary of IACDE. The organizing team, led by Dr. Abhishek Laha, Vice President of IACDE and chief coordinator of the program, along with Dr. Kanwalpreet Kaur Bhullar, EC member and program coordinator, ensured smooth execution.

The program commenced with an inauguration by Dr. Dibyendu Mazumdar, followed by a presidential address from Dr. Jagat Bhushan.



It was a 2-day program with an array of informative sessions designed to guide incoming PG students through their academic journey in dentistry. It was highly celebrated event, with ample participation from incoming PG students. Notably, there were no fees for PG students to attend, ensuring accessibility for all. The diverse topics covered and the engaging discussions provided valuable insights to the participants, preparing them for their academic journey. The smooth conductance of the program further enhanced the overall experience, fostering an environment conducive to learning and collaboration.



TRAIN THE TRAINER PROGRAM 2024



The Department of Conservative Dentistry And Endodontics at Government Dental College & Research Institute, Bengaluru, in collaboration with the Indian Association of Conservative Dentistry & Endodontics (IACDE), organized a groundbreaking two-day Training of Trainers (TOT) program on February 16th and 17th, 2024. Dr. Kiran Kumar N., Professor & Head at GDCRI, Bangalore, served as the Organizing Chairperson. This inaugural Teachers Training Program by IACDE aimed at fostering continuous professional development, enhancing teaching skills, embracing technology, and improving learning outcomes. his inaugural Teachers Training Program by IACDE aimed at fostering continuous professional development, enhancing teaching skills, embracing technology, and improving learning outcomes.

The event drew an impressive response with 26 delegates, who were teachers from esteemed college in Bangalore. The two-day program featured three insightful lectures by distinguished speakers and hands-on workshops covering Dental Operating Microscope, All Tissue Laser, and Aesthetic Dentistry. On February 16th, the program commenced with a welcome address by Dr. Savitha Naik., followed by enlightening lectures from Mr. Amit Gupta on "Mechanics Of Dental Operating Microscope," which was moderated by Dr Seema and lecture cum demo by Dr. Adarsh M. S. on "Fundamentals of Dental Operating Microscope," which was moderated by Dr Biji. Afternoon Dr. Madhu Hariharan lecture on "All Tissue And Diode Laser – Fundamentals And Applications, followed by a patient demonstration which was coordinated by Dr Shwetha."

On February 17th, the program was officially inaugurated by Dr. Deepak Kumar Sharma, President of IACDE, and presided over by Dr. Girish B. Giraddi, Dean Cum Director, GDCRI. Dr. Mohan Kumar R.S. delivered a compelling lecture on "U, Me And Composites." All the lectures garnered high appreciation and excellent feedback from the participants. Following the lectures, hands-on workshops were conducted for all participants which was coordinated by Dr Rashmi Dr Sourab and Dr Dhanalakshmi. The Training Program concluded with the distribution of certificates to the participants, and Dr. Kiran Kumar N. expressed gratitude in the Vote of Thanks, marking the successful culmination of the event.



SCAN TO WATCH THE HIGHLIGHTS HERE

UPCOMING ACTIVITIES




SRI RAMACHANDRA
INSTITUTE OF HIGHER EDUCATION AND RESEARCH
(Category - I Deemed to be University) Porur, Chennai

24th IACDE

NATIONAL PG CONVENTION 2024

RRR (RECOGNIZE, RESTORE, RECUPERATE)

SPECIAL ATTRACTION

 29th February – 03rd March 2024

**SPORTS
EXTRAVAGANZA
(EPL)**



Sri Ramachandra University Auditorium
SRIHER (DU), Chennai , Tamilnadu

ORGANIZING COMMITTEE



DR. MATHAN RAJAN R
Organizing Chairman



DR. RAJESWARI GOPAL .K
Organizing Secretary



DR. SESHAN RAKKESH R
Treasurer



DR. ARASAPPAN R
Scientific Chairman

WOMENS DAY CELEBRATIONS



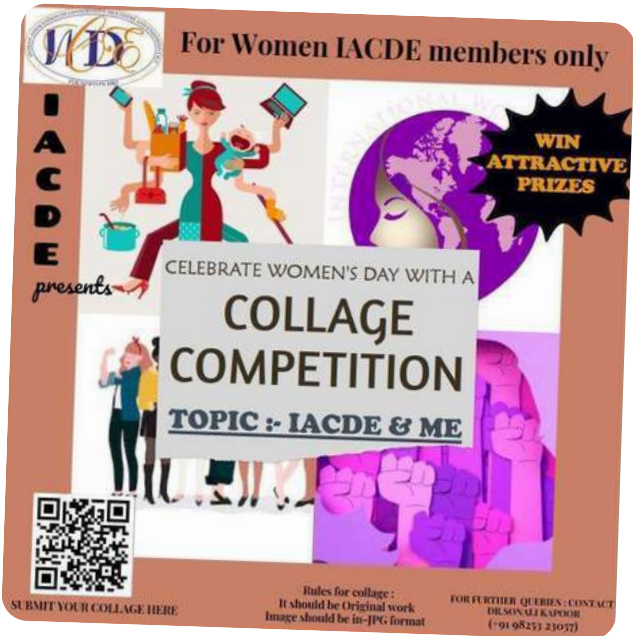
WDS Creativity Takes Courage
UNLEASH THE DESIGNER INSIDE

LOGO DESIGN COMPETITION

Symbol for
'Woman Endodontist'

Contest is in online mode | Image should be in JPEG/PDF format | Image should be original work of the participant | Maximum size: 2MB | Entries should include name of candidate, name of institution and IACDE membership no. | Results shall be announced at the PG-Convention in Chennai | Attractive prizes to be won.

Last date for submission: 20th February 2024
Submit your designs at iacdevents2024@gmail.com



WDS For Women IACDE members only

IACDE presents

CELEBRATE WOMEN'S DAY WITH A COLLAGE COMPETITION

TOPIC :- IACDE & ME

WIN ATTRACTIVE PRIZES

Submit your collage here: [QR Code]

Rules for collage:
It should be Original work
Image should be in-JPG format

FOR FURTHER QUERIES: CONTACT
DR. SONALI KAPOOR
(+91 9825323057)



ENTER TO WIN PRIZES



WDS International women's day

Open to all IACDE Members

Join the Meme Competition!

Grin & Win- Fun with Dentistry

Scan here for rules: [QR Code]

For further queries: contact
DR. SONALI KAPOOR
(+91 9825323057)



IACDE Presents!

Get involved....
Create a Slogan for IACDE...

ENTER TO WIN PRIZES

RULES

- Theme for Slogan is "IACDE"
- Only one slogan per participant
- The slogans must be sent by 20th Feb 2024 at iacdevents2024@gmail.com
- Slogan should be within 8-10 words
- Slogan should be submitted in English
- The competition is open for all the students and life members of IACDE.

NATIONAL CONSEUDO DAY CELEBRATIONS 2024

MARCH 5TH IS NOT JUST A DATE ON THE CALENDAR; IT'S A VIBRANT SYMPHONY OF CELEBRATION, A DAY THAT PULSATES WITH THE RHYTHM OF OUR UNIQUENESS.

This year, March 5th 2024 will be earmarked as a carnival of expertise, a day we proudly embrace as National ConsEndo day! On this special occasion, our passion for conservative dentistry and endodontics takes center stage, glittering in the spotlight of celebration.

This day marks an anthem of unity for Conservative Dentists & Endodontists Nationwide. March 5th is the canvas where we paint the portrait of our profession, each stroke embodying dedication, skill, and innovation. It's a day when every dental college becomes a stage, and every student, professor, and practitioner becomes a star, shining bright in the constellation of dental excellence.

Let's intertwine our efforts, transcending geographical boundaries, and make this ConsEndo day a spectacle of success. It's not just about celebrating our achievements but also about casting a spotlight on conservative dentistry, fostering awareness that resonates beyond our community.

So, on March 5th, let's stand united, a collective force, to create ripples of recognition for our profession. Happy ConsEndo day - where our dedication leaves an indelible mark on the canvas of dental history!



CHRONICLES

**PARADIGM
SHIFT FROM
POSTS TO NO POSTS**

I, Dr. Jayalakshmi K.B, completed Masters in 1989-90 from Bapuji Dental college and Hospital. Ours was the 3rd batch of MDS programme., and it was two years program then. We were fortunate to get the guidance from the stalwarts of our subject Dr. Sharad Bhagwat. We were also lucky to have Dr. Vasundhara as faculty and I remember all our batch mates used to follow the footsteps of her., it is true even for custom cast POST-CORE.



DR JAYALAKSHMI K.B
• **HEAD OF THE DEPARTMENT**
KRISHNADEVARAYA COLLEGE OF
• **DENTAL SCIENCE & HOSPITAL** •

It is hard to forget those days when we get post-core patients all students used to assemble and it was a feast to watch seniors doing the case.

If I have to list the difficulties rather the differences that we see in current techniques of post & Core fabrication, it will be as follows---

All though endodontic and periodontics evaluation of selected cases was emphasized BIO-MECHANICAL EVALUATION of the cases was not given importance.

The concept of conservation of tooth was given little importance rather ease of canal impression with wax was considered. Elliptical cross section canals were made circular for easy wax impression. Gates and Pessio reamers were used then also to prepare the canals and flare the canals.

The metal which we used to use was JAPANESE GOLD ALLOY or ORDENT Alloy which looks like gold but not gold, though patients were under the impression that gold is been used.

However we have seen the cases with dislodged post due to corrosion, of this alloy and catastrophic fracture of the tooth.

Of course for university examinations we were made compulsory to use 22 Carat gold for both Post-core and Inlay.



Custom made dowels were used for anterior teeth and for posterior teeth it used to be large size endodontic instrument customized to fit in to distal or palatal canals using zinc phosphate cement.



Currently the technique of fabrication of custom cast posts is revolutionized because of advancements in material science and technique.

All about fibre posts



Dr Adarsha.M.S
Professor
V.S Dental college and hospital,
Bangalore

Dr. Adarsha M.S completed his MDS in 2007 from M.R.Ambedkar Dental College & Hospital, Bangalore.

The prognosis of endodontically treated teeth depends not only on the success of the endodontic treatment, but also on the type of reconstruction. These considerations include the decision of whether or not to use posts. Post cementation is indicated when the remaining tooth structure is insufficient to ensure the retention of the restoration.

length of the root canal is enough for adequate post placement; and remaining apical seal having minimal length of 4 mm. When planning for post-and-core treatment, the condition of the remaining root and amount of residual coronal material is important in order to provide at least 2 mm of ferrule, which has been shown to improve the longevity of the restoration. However, when the overall prognosis of the tooth is doubtful, extraction and implant placement might be a better option.


The first evidence of a published article on dental fiber posts was in 1990, by Duret et al. Fiber posts are manufactured from pre-stretched fibers impregnated within a resin matrix. Containing fibers like carbon, glass/silica, and quartz, embedded in resin materials like Epoxy resins, BisGMA or Polyimide. In recent years there have been significant advances in the development of bondable, fiber-reinforced and ceramic esthetic posts to reinforce endodontically treated teeth. Depending on the type of fiber composition fiber posts are classified into, Carbon fiber post, Prefabricated glass or quartz-fiber posts, Hollow fiber posts, Individual glass fiber posts and Polyethylene fiber posts.

Prefabricated glass or quartz-fiber posts are most commonly used posts in the clinical practice. As they have excellent esthetic properties, flexural and fatigue strength, modulus of elasticity similar to that of dentin, easy to handle allowing one-visit therapy, biocompatibility and are relatively cheap. The disadvantages are difficulty in placing a single fiber post closely fitted in the flared canal, so the cement thickness increases that affect its physicochemical properties. The bonding strength, core stabilization, and the retention are affected which may compromise the long-term prognosis. These limitations are usually related to polymerization effectiveness, difficult in creating a water-wet substrate, reduced number of dentinal tubules, deposition of cementum and secondary dentin. As bonding to root dentine is still unpredictable, it may affect the longevity and the clinical performance of the restorations. The stability of the resin-root dentine interface is also affected by the presence of the endogenous enzymes activated during etching procedures. These are in part responsible for the hybrid layer's degradation and reduction of the longevity of post-endodontists restorations performed with the use of root canal posts.

Various efforts to enhance the longevity of the interface between root canal dentine and FRC posts have been advocated. Surface treatment of fiber posts by Air abrasion using aluminium oxide with particle size of 50 μm , 2.5 bars for 5 seconds and from a distance of 30 mm. Silane agent pretreatment, a easy chair side procedure. Literature suggests using silane along with other surface treatments to enhance bond strength. Commonly available etchants like 37% phosphoric acid and 10% hydrogen peroxide can facilitate the micromechanical retention of resin cement to the post, achieving the desired results. A newer agent like methylene chloride (CH_2Cl_2) showed enhanced interfacial bond strength between the post and the luting agents. It removed the superficial layer of the resin matrix and exposed the fibers for better retention results.

Lasers like Nd:YAG, Er: YAG, 70% alcohol, hydrofluoric acid have also been used for the surface treatment. Ar, N₂ and H₂+N₂ plasma treatments seem to improve the shear bond strength of types of fiber posts. UV radiation used from a distance of 1 cm for 3 min, seem to activate the epoxy resin matrix of the surface of fiber post inducing chemical binding with resin cement without destroying surface structure of fiber posts. UV irradiation demonstrated stronger effect than silane and is much less destructive to the surface of the post than the other chemical and mechanical treatments. This technique is a less expensive, more applicable way to improve interfacial adhesion without affecting the integrity of fiber posts.

The occurrence of gaps, voids, and cavities may occur at the interface between the dentin and restorative material or at the interface of the post and restorative material due to filling shortage and polymerization shrinkage. A new direct core build-up method was developed by Inaba et al., comprising the preparation of a hollow Fiber Reinforced Plastic (FRP) post and a method of applying the restorative material by injecting it into the bottom of the root canal through the hollow post. The posts are characterized by an empty central cylindrical canal extended along the whole length. Have a rounded tip and a diameter of 1.2 mm in the cylindrical portion. The structure is characterized by the presence, for more than 60% of the volume, of tensioned silica fibers parallel to the longitudinal axis of the post. This distinctive shape allows the use of the post also as carrier for the cementation resin. Individual glass fiber posts are based on minimizing the preparation need to the deeper parts of the root canal thus allowing addition of higher quantity of FRC material to the coronal root canal opening of the tooth. In this way, the concept saves the dentin, minimizes stress at the apical parts of the post and enables stiff and fracture resistant post with larger diameter to the core that forms strong support for the core.



The everStick Post (GC Europe NV, Finland) is introduced to avoid the large root preparation. It is a soft, flexible, minimally invasive and resin-impregnated unpolymerized fiber post with unique interpenetrating polymer network. The post can be individually precision-shaped and cured in-situ to an atypical anatomic shape of any root canal and to maximize the adhesive surface before light-activation while offering high micromechanical bonding and flexural strength after polymerization. EverStick post allows equal distribution of occlusal stresses along the root surface and has an elastic modulus nearly similar to the dentin, thus minimizing the risk of the root fracture. Furthermore, the everStick post does not result in metal corrosion or allergic reactions and can be easily removed from a root canal in case of endodontic failures.

A fiber composite laminate endodontic post and core system based on woven polyester bondable ribbon had been introduced known as Ribbond Fibers. Ribbond is a colourless and pliable material which adapts readily to tooth morphology and dental arch contour. Its translucency allows aesthetic restoration and it can be cured with light-cured composites. This reinforcement material is composed of plasma treated ultra-high molecular weight polyethylene fibers woven into three dimensional structure, leno wave or triaxial braid. Due to special patterns of cross-linked threads, a higher mechanical interlocking is provided. Also, the fiber's superficial tension is reduced due to cold gas plasma pretreatment in order to ensure good chemical bond to resin materials. It has been shown that polyethylene-reinforced resin provides adequate retention required for clinical success of a post and core system and good fracture resistance with increased incidence of repairable fractures in structurally compromised canals. The high price of polyethylene fibers limits their use in daily practice despite the excellent characteristics shown by these posts.

Recently, a novel variation in post technology was introduced to the market that utilizes bundled clusters of glass fiber-reinforced resin posts (Rebilda Post GT [VOCO]). Bundles of fine posts are easily visualized when fanned out by pressing them against a working surface. This system provides 3 advantages. First, the individual fiber flexibility allows for navigation around gentle curves in canal architecture where rigid fiber systems cannot without risk of canal or root violation. Second, the bundled grouping allows for three-dimensional distributions of the individual fine posts across asymmetrical canal spaces that can range in shape (ie, oval, ribbon, or C-shaped). Finally, as the bundled fine posts emerge from the post space orifice and the carrier sleeve is removed, they automatically distribute themselves three-dimensionally within the coronal portion of the remaining tooth like a bouquet, providing an optimal scaffolding for the core buildup. Since esthetics is of primary concern, it has become common to use these posts with cores of composite/ceramic, in fact it has become a quality mark because these posts being esthetically pleasing are also biocompatible and have excellent physical properties

Post Space Preparation



**Post Placement
(Distobuccal and palatal canals)**

Core-build up



Crown Preparation

"From Traditional Metal Posts to Minimally Invasive No Post Concept, Prioritizing Dentin Conservation for Prolonged Tooth Longevity"

Today aesthetic dentistry and minimally invasive dentistry go hand in hand. Minimal invasive dentistry which is nothing but 'a Systematic respect for original tissue'. The introduction of predictable adhesive technologies is a giant leap in interest of minimally invasive dentistry, and it bridges the gap between the traditional and the modern treatment options for similar conditions.

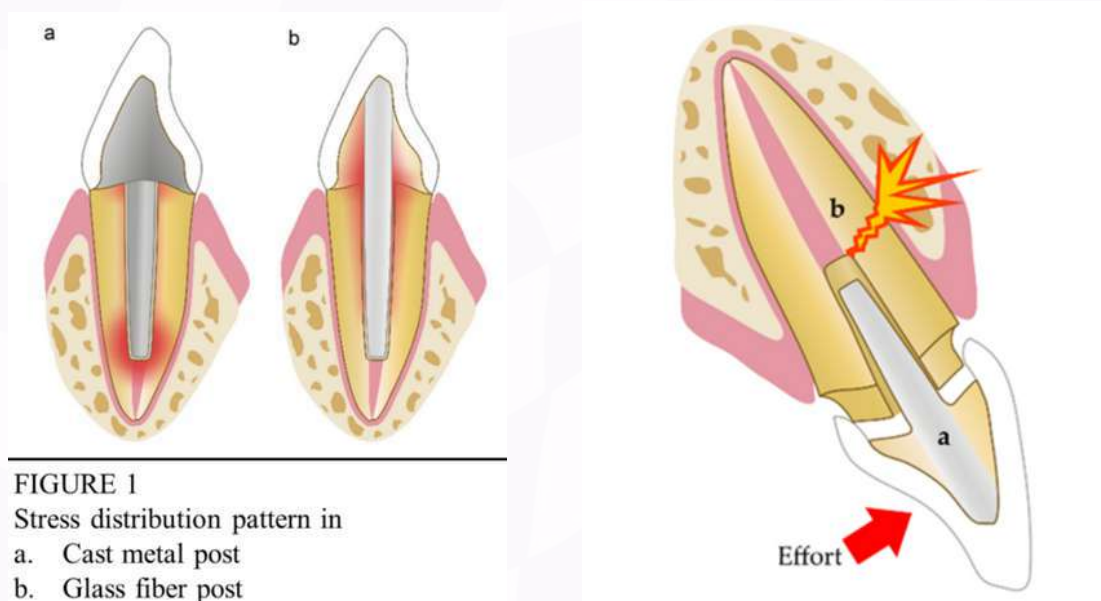


• Dr Nimisha Shah
• Professor & HOD
• K.M.ShahDental College & Hospital
• Sumandeep Vidyapeeth, Vadodara

When we come across any broken or fractured tooth which has less than 50% of tooth structure left, we recommend post & core to the patient. The reason for recommending post & core was to build up a core on the existing fractured tooth structure so that it can retain crown, as the existing tooth structure is not enough to retain the crown, we take support from the radicular portion of the tooth to retain the core. This was needed as restorations in the older times were metallic and cemented.

In the past around 1950s, where metallic restorations were preferred material of choice for restoring any fractured or decayed tooth, cast metal post and core was recommended for restoring fractured anterior and posterior tooth. Cast metal post and core were having advantages like it could adapt well to the internal anatomy of the canal, you could change the angulation while restoring, both post and core is made up of the same material so chances of fracture is less and can be used for smaller canals like mandibular central incisor etc.

Cast metal post and core were having advantages like it could adapt well to the internal anatomy of the canal, you could change the angulation while restoring, both post and core is made up of the same material so chances of fracture is less and can be used for smaller canals like mandibular central incisor etc. But at the same time it requires excessive removal of radicular portion of the tooth structure to receive post, the MOE of the cast metal is very high in comparison to dentin hence both work as different unit under the function and high MOE will lead to increase wedging forces more directed towards the apical portion of the tooth and leads to oblique or vertical root fracture (Figure 1) and last most important limitation, it was not compatible with all ceramic crowns.



With the development of bonded dentistry, there was an increase in the preference of resin-based materials which adhere firmly to the surface of the dentin and creates monoblock. In contrast to the metal restorations, resin-based materials require less removal of dentin as they adhere to dentin and enamel. Gradually, metal posts were replaced by fiber posts as they were aesthetic, bonded and have MOE nearly same as dentin. So, most of the problems which were faced for metal pots were eliminated. And hence they are popular since last three decades for restoration of badly mutilated teeth.

But fibre posts do require some intra canal preparation to receive post and reduction in the outer coronal structure to receive crown. (Figure 2) The dentin which we are losing in the preparation is the most crucial peri cervical dentin (4 mm above and below CEJ) which provides maximum fracture resistance to the tooth structure according to Clark and Khademi in 2008. (Figure 3) When the tooth is under the function the most stresses are exerted near the neck of the tooth hence it is important to preserve peri cervical dentin. Later in 2013 James Gutmann gave a concept of minimally invasive endodontics where he emphasised on preservation of healthy tooth structure.

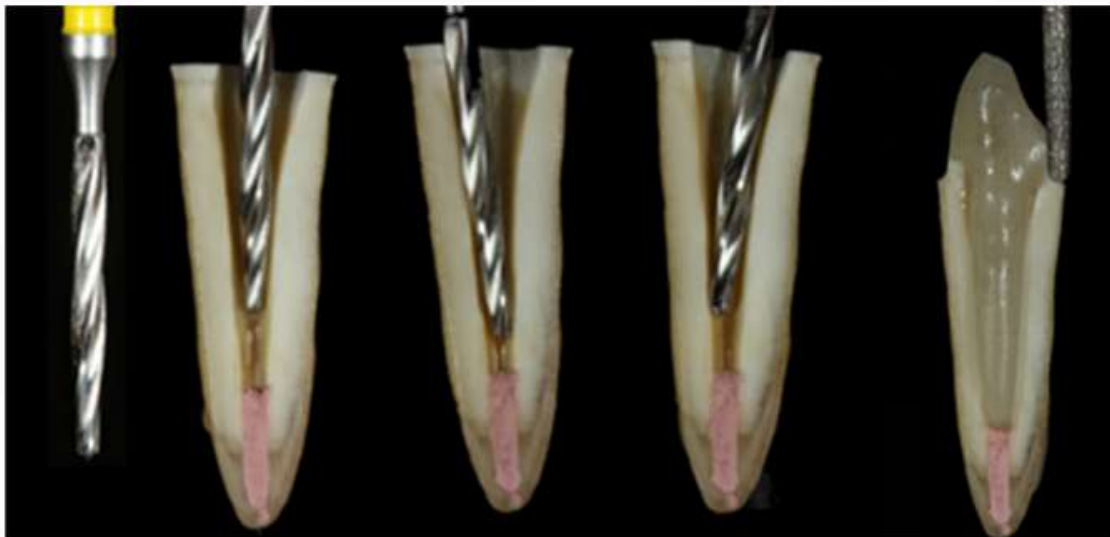


Figure 2
Intraradicular preparation and core preparation : required for fiber post.

Dentin Preservation should be the motto of an operator while providing any sort of dental treatment to the patient. Conservation of tooth will increase the treatment outcome and long span survival of tooth. The concept of minimally invasive endodontics was given, as there was development of newer composites & bonding agents, bio ceramics and advanced equipment like Dental operating microscopes, CBCT.



FIGURE 3
Peri-cervical dentin

Following the above concept there is a new way to manage the badly broken down anterior or posterior tooth -THE NO POST CONCEPT. In this technique after root canal obturation, gutta-percha 4-5 mm below CEJ is removed using heated instrument and this radicular space is reinforced by glass fibre/ polyethylene fibre or fibre reinforced composites. The fibres are extended 2-3 mm above coronal tooth structure, and the fractured crown is restored by direct composite restoration.

Glass/ polyethylene fibres are reinforcing fibres which strengthen the cervical portion of the tooth, and these fibres prevent crack propagation. Hence they are used in the no post concept to strengthen the cervical portion of the tooth. Recently, due to the improved bonding protocols under strict rubber dam isolation with the help of magnification it is possible to give life- like restorations to these fractured teeth using dentin, body, and enamel shade of composites along with tints. The main advantage of this technique is no additional dentin reduction is done both coronally and apically and hence we are preserving the most crucial peri cervical dentin as well as radicular dentin. The fibers reinforce the cervical portion of the tooth and in future, if fracture will occur in future, it will be in the composite only which is favourable in nature. There are many case reports in the social media by different aesthetic group like style Italiano recommending the new way of restoring the fractured tooth. Out of curiosity few cases were done by me using the same protocol and they are performing well since last one year.



PRE- OPERATIVE



RUBBER DAM ISOLATION



PLACEMENT OF FIBERS



DIRECT COMPOSITE RESTORATION

To further verify, I did a FEA to evaluate the stress concentration of No post technique using short fibre reinforced composite and polyethylene fibres. The results showed very mild to moderate stresses mainly near the neck of the tooth. These forces are 1/7th in magnitude than the fibre post and core (1/7 to 1.9 Mpa in no post system & 16.7 Mpa in Fibre post system) They were mainly present on the outer periphery of the root dentin and did not extend in the deep dentin. This further proves that dentin conservation is the key in providing long life to the tooth.

Hence, as a Conservative Dentist every effort should be made to preserve healthy tooth structure by using ultra conservative treatment approach which will ultimately improves life of the tooth.

ASK THE EXPERT



Dr. Manoj Mahadeo Ramugade
BDS, MDS, MA, LL.B., LL.M., Ph.D. (Scholar)
Associate Professor,
Department of Conservative Dentistry and
Endodontics,
Government Dental College and Hospital, Mumbai





IGNORANCE IS NOT AN EXCUSE.....



TERMINOLOGIES & CONSENT

to be continued

CONSENT

It's not a Medical term originally.

Section 13 of the 'Indian Contract Act (ICA), of 1872' defined consent as, "Two or more person are said to consent when they agree upon the same thing in the same sense." i.e. voluntary permission given or quasi-agreement made by the patient with the respective doctor to carry out some investigative or therapeutic procedure for curing their illness.

NEGLIGENCE

Negligence means the breach of the legal duty or obligation which is cast on the professional by their professional morals and ethics.

- Law of Tort (Law of civil wrong, liability, and Remedy) i.e. Doctor is under the professional obligation to take care of their patient and if he fails to do so, he is found negligent.





STANDARD OF CARE

The degree of prudence and caution required by the professional under the obligation of the duty to take care. i.e. Dental practitioners should have sufficient knowledge and skills to perform the treatment and are bound to have a certain standard of duty and care in the practice. A breach of duty to take utmost care causes negligence.

LIABILITY

In Tort, liability means that someone is held accountable for his/her wrong actions (other than made by contract.) i.e. If the wrong tooth is extracted, the dentist is held liable for the act of negligence and has to pay compensation to the patient.

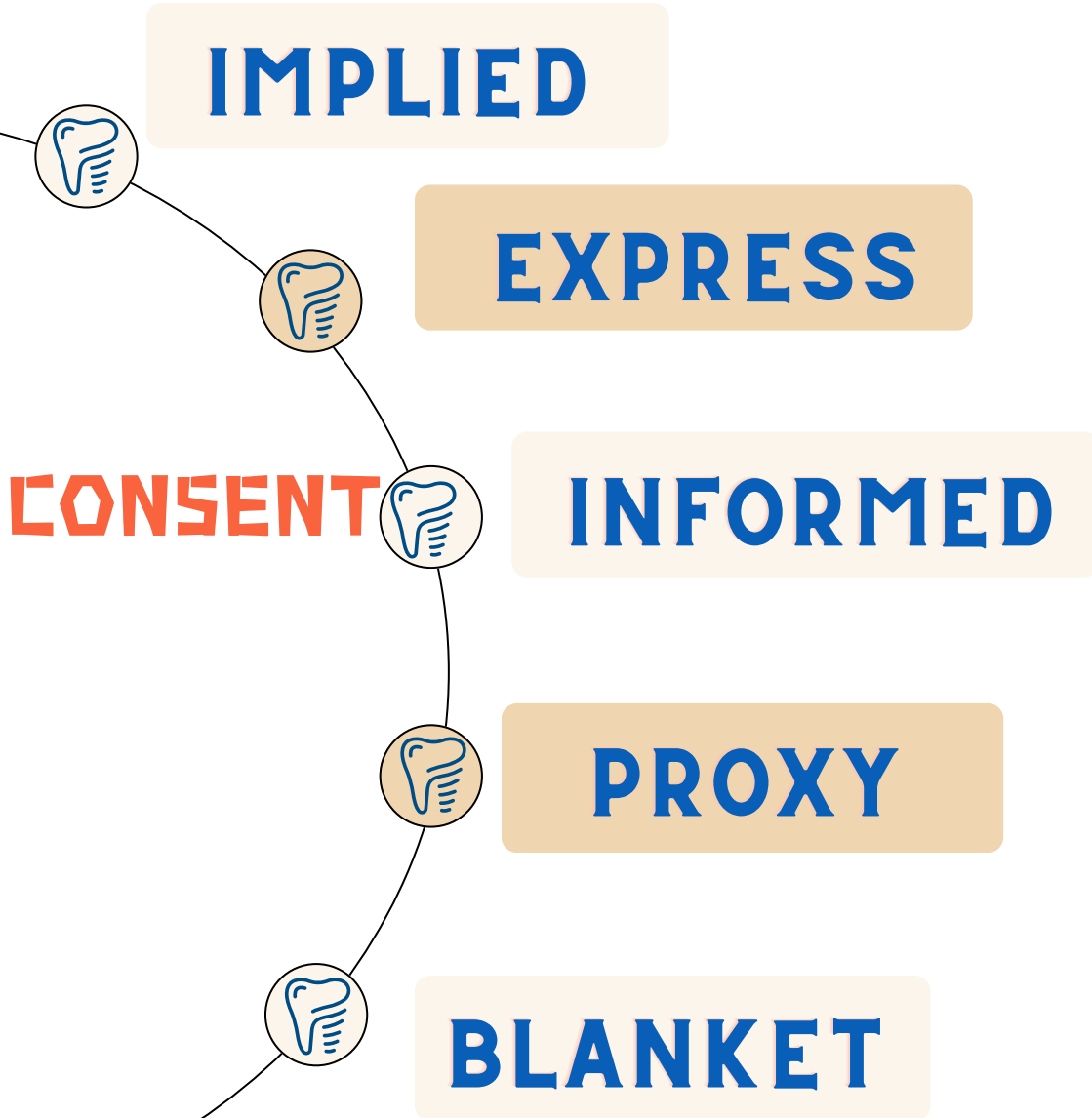
INDEMNITY

A contract by which one party promises to save the other from loss caused by him by the conduct of the promisor himself or by the conduct of any other person. i.e. The insurance company (of the registered doctor) is liable to pay the compensation to the patient in case damage occurs to the patient and the doctor acts legally and not negligently).





Every individual as a patient has the right to know the nature of their disease, investigations - tests prescribed, available treatment options along with their advantages and complications. The ultimate goal of the medical profession is that every patient should be treated as a human being i.e. as a unique and individual person as per their illness. Thus, for any treatment, the operating doctor must get permission i.e. Consent from the patient before initiation of any procedure including dental treatment without compromising their right to privacy and freedom.





IMPLIED CONSENT

It is also called “Tacit consent.” A tacit is a silent understanding of no objection inferred from the circumstances. Though, this is the most common type of consent in medical and dental practice it is not valid in the Court of Law. When a patient approaches a doctor for a cure for his illness implies that the patient has agreed to medical examination. However, it does not mean that he has agreed to complex medical procedures like palpation, radiographic examination, or surgery.

EXPRESS CONSENT

Consent other than implied consent is express consent; which may be oral or written. In medical practice, written consent is usually obtained for intensive or invasive procedures like rectal or vaginal examination, aspiration, radiography, surgery, etc. In dentistry, written consent is usually obtained for procedures like radiographs, root canal treatment, extraction, crown preparations, maxillofacial fractures, etc.



INFORMED CONSENT

The most common type of written consent used in Dentistry and Medicine. This kind of consent has arisen as a result of the many court cases against doctors. Patients usually alleged that they did not understand the nature of the disease and the medical procedure they had consented. Thus, informed consent should have all elements of valid consent.

PROXY/SUBSTITUTE CONSENT

This kind of consent is usually given by parents or guardians. They consent on behalf of the child or a close relative in case of an unconscious patient or mentally unsound patient.

BLANKET CONSENT

Consent taken on a pre-printed form covering almost all procedures a doctor or a hospital do to a patient, without mentioning specific details. Blanket consent is legally inadequate in the Court of Law.

VALID CONSENT



INVALID CONSENT

VS

1) Free consent (Section 14 of ICA): Consent is said to be free when it is not caused by coercion, undue influence, fraud, misrepresentation, or mistake.

2) Any conscious person and above 12 years of age {provided under Section 88 and Section 90 of Indian Penal Code, 1860 (IPC)} and 18 years of age provided under ICA i.e. major.

3) A person is competent to contract (According to Section 11 of ICA) who is of the age of majority according to the law to which he is subject i.e. 18 years of age, and who is sound mind and is not disqualified from contracting by any law.

1) Consent given by a person who is not competent to contract i.e. below 18 years of age.

2) A person with an unsound mind due to mental capacity as in lunatic, drunken, and under the influence of intoxication.

3) When consent would have been given due to the existence of coercion, undue influence, fraud, misrepresentation, or mistake.

4) Consent is given by a person when its implications are not known to them.

“Consent in Dentistry’ to be continued

References:

1. World Medical Association (2004) Declaration of Helsinki. Ethical principles for medical research involving human subjects.
2. Chaturvedi A (2000) Consent- Its Medico-legal Aspects. Medicine Update, pp: 883-887.
3. Yadwad BS, Gouda H (2005) Consent--its medico legal aspects. J Assoc Physicians India 53: 891-894.
4. Ramugade M. M. Legality of consent in today's dental practice. Int Jrnl Curr Med And Pharm Res. 2017;3(5):1681-83.
5. Sharma A, Chhabra A, Bopiah C. Patient Consent in Dentistry: Are we Legally Safe? J Oral Health Comm Dent. 2011;5(2): 68-72.

SPOTLIGHT

DR VIBHA HEGDE



PRESTIGIOUS MOMENT INDEED!!!!

Dr Vibha Hegde, Dean, Dental Faculty ,Maharashtra University of Health Sciences at the release of the 'Blueprint of Bachelor of Dental Surgery (BDS) curriculum' of MUHS in the August presence of His excellency Governor of Maharashtra (Chancellor), Shri Ramesh Bais, Honourable Health minister Hasan Musharif (Pro Chancellor), Vice chancellor Dr Madhuri Kanetkar, Pro Vice Chancellor Dr Milind Nikumbh, Vice Chancellor of KLE Academy of Higher Education and Research Belgaum Dr. Nitin Gangane alongwith All Dean faculties of MUHS on 23rd February 2024



BEYOND DENTISTRY



COL.DR.SONALI SHARMA

OLIVE GREEN A LIFE LESS ORDINARY

**Not all women wear pearls and heels to work
Some wear ranks and combat boots!!**

Life is an agglomeration of the choices you make, the chances you take, and the opportunities that you miss. Coming from a family of high achievers being a dreamer can be a challenge but to have the courage and resiliency to dynamically script one life despite the brutal and harsh realities of life and live it as a dream, is truly a blessing. After graduation one comes to a crossroads in life. As a young adult, the mind meanders through a maze of lofty dreams and unrealistic perceptions of life and seesaws with periods of confusion and self-doubt.



I chose to continue in my alma mater and teach the subject Pediatric Dentistry which was closer to my role model, my father's domain (Prof and Head of Pediatrics). Another reason for choosing Pedodontics was I got to teach the topic that intrigued me - Dental Caries 1994 onwards. 1997 I was again at a crossroads of what next? The circumstances veered me to follow the lofty footsteps of my father Brig Dr BR Sharma and join the armed forces.

As an army officers child or Army brat life is totally a bed of roses but when one dons the uniform one wakes up to a totally different world, a world which is less glamourless and filled with toil, grime and unexpected challenges especially for the Lady Officers. So it was time to remove the rose tinted glasses and see the world as a Lady officer.



At times the only source of comfort and contact in a desolate post be the four legged one. The challenging field tenure shapes you and prepares you for any calamity and makes you embrace solitude with elan Or give you the confidence to trek to the highest post for dental inspection and be the only lady officer standing tall with brother officers and troops



The uniform gives the greatest moment of pride to serve the nation during Kargil conflict and helping the locals deal with its aftermath by Sadhbhavna Camps. It gives one the opportunity to be at a place where the supreme sacrifice of Kargil hero is etched not just in a stone but in our hearts. An emotional moment of paying homage to the slain war warrior which the nation would long have forgotten but still gives me goosebumps and tears still run down my cheeks. The anger and helplessness of losing a young life to irrational conflict is writ on my face.



The designation "Lady officer" does not align with the portrayal depicted by the bevy of Bollywood beauties on celluloid. In reality, it is a beautiful but deglamorized version where the lady officer face the same challenges, trials, and tribulations as their brother officer but with a sense of purpose. There is no distinction and no concessions for being from planet Venus, one uses the same dugouts for the soldiers. The rules, the regimentations are strict and clear," you are an officer not a lady". Not just the uniform, the length of hair, size of the earring stud is also specified. Deglamourized? No the glamour quotient is that being a lady officer gives you so much confidence to take on the world single-handedly and with dignity.



Stay at places where the faint-hearted will fear to tread. Where Tololing and Tiger Hill which were just names the journalists mouthed during the Kargil Conflict, but for us it was where we woke up to heavy artillery fire. To wait for days and week to be able to get a phone call to our near and dear ones and dispel their fears. To pack ones bag each day when I stepped out for camps in the highly volatile areas. I did not know whether I will come back and keep everything packed so that my family should get all my personal effects.





Not many would be fortunate to pay homage and pray at the highest battlefield Sarv Dharam Sthal.



The uniform also gave me the rare distinction of being selected as the first lady officer and only lady officer in an all-male contingent for the first-ever historic medical camp to Maldives. It was an honor and privilege to treat Maldivian Dignitaries and bring laurels to our nation





The uniform also gave me one of the greatest honors, of being selected by the first citizen of our country, his excellency, the supreme commander of the tri-services, the then President of India as his treating Endodontist.



The army does not just throw challenges at you, but gives you the opportunity to conquer ones fear and become a more rounded and confident individual. In short, the uniform becomes your second skin. The armed forces also recognizes your contribution and I have been awarded 3 commendations by the Armed Forces including 2 Chiefs of the Army Staff Commendations



The army also gave me many first to my credit. I was the first permanent commissioned Endodontist, The first classified specialist in Endodontics of the tri-services of Armed forces. I was the first officer in Army Dental Corps to have been Conferred with PhD a doctorate in Cariology. In the armed forces, I spearheaded the post-graduation training program as the first Professor & Head of the Department of Conservative Dentistry & Endodontics in Army Dental Centre Research and Referral Hospital Delhi





1997



2022

Donning the uniform is a matter of pride and its not toil and trials and tribulations, we also celebrate our triumphs with poise and dignity mingled with gaiety.

Life is a summation of Milestones. Donning the uniform has been my identity for 25 years and will be my identity till the last breath of my life.

JAI HIND

YOUTH HUB

What's Your
New Year
Resolution?



LET'S SEE THE STUDENT
RESOLUTIONS FOR THE
UPCOMING YEAR



Invest More
Money

Learn
New Skill



Be More
Confident



**NEW
YEAR**
NEW ME



Start a
Journal



**DR SIDDHESH
MOKHAL
KLE BELGAUM**



This year I resolve, To never turn my back on a patient, no matter how rushed or busy I am, and no matter how unappointed or late they are!



**DR APOORVA
WALIA
MCODS-
MANGALURU**



In the new year, I resolve to turn root canals to root laughs, one tooth at a time



**DR MIHICA MOHAN
INSTITUTE OF
DENTAL
SCIENCES, SOA
UNIV,
BHUBHANESHWAR**



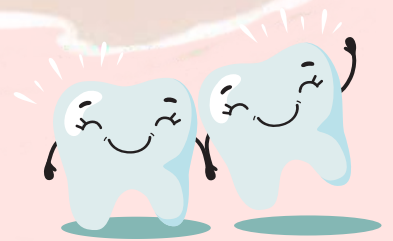
My new years resolution is to grow academically and make newer connections. They can be EnDosts.



**DR MUSTAFA
HAJOORI**
KARNAVATHI
COLLEGE OF
DENTAL
SCIENCES,
GUJRAT

Hey, I'm Dr. Mustafa Hajoori, cruising through dental adventures at Karnavati School of Dentistry! Mornings kick off with engaging seminars and journal club sessions - the only time I willingly open my eyes before noon. After that, it's a mix of doing patient work and tackling academic stuff like finishing up my thesis or writing a manuscript. Amidst the academic hustle of thesis battles and manuscript wrangling, I make time for quality hangouts with post-grad pals from different dental dimensions. When I'm not fixing cavities or conquering academia, catch me in a cinematic saga - because even dentists need a reel break.

Weekends? Out and about with friends, giving those pearly whites a break from work stress. My New Year's resolution? Stay on the cutting edge of Endodontics - because why just fill cavities when you can do it with futuristic flair? Here's to balancing root canals along with fun!



**DR. LABDHI
MALOO**
CDCRI,
RAJNANDAGAON

This year I will be Trying to get better just because, I am the owner of your CROWN👑🦷 and always getting to the ROOTS of the problem!!





**DR. TANYA
UBEROI**
AB SHETTY
MEMORIAL
INSTITUTE OF
DENTAL
SCIENCES
NITTE DU



This year I am mastering
the art of
gutta percha packing,
achieving cone fits so
precise even bacteria will
weep (silently, of course).
Bring on the complex canals



**DR.
MOHAMMAD
NEMAT SACHE**
SAVEETHA
DENTAL
COLLEGE AND
HOSPITAL
CHENNAI



I shall channel my inner sloth,
mastering the art of ultimate
relaxation and embracing slow living.
Instead of rushing through life like
a caffeinated hamster, I will walk
with the measured grace of a snail,
nap with the dedication of a cat,
and prioritize leisure like a retired
flamingo. Forget hustle culture, I'm
all about the chillage.



**DR. POOJA
CHADCHAN**
DY PATIL DENTAL
COLLEGE &
HOSPITAL, NAVI
MUMBAI



This New Years I am
determined to get on
your nerves to get to
the root of the
problem.



**DR. KHUSHBHU
WAGHMARE.**
CDCRI,
RAJNANDAGAON



This year I wont leave you
with hard feelings but hard
fillings.
In the new Year I resolve
to get paid to go on your
nerves.

This Year I resolve to get
to the root of the problem.

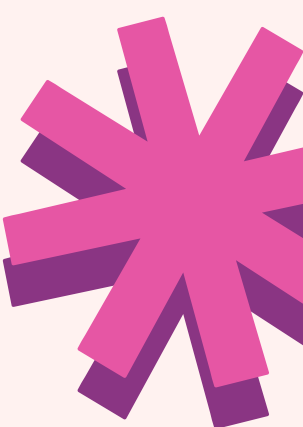



**DR. SHREYA
GHOSH**
MCODS-
MANIPAL



For me 2024 will be
about creative and
skillful
"ENDO"rphins kicking in!





ENTERTAINMENT GALLORG



ROOTPLAY

ARCADE

FUN GAMES - BIG PRIZES TO BE WON -



**ARE YOU READY TO TEST YOUR
KNOWLEDGE AND CHALLENGE YOUR
FRIENDS? JOIN US FOR THE
TRIPLETRIVIA AT IACDE**

GUIDELINES



Welcome to the RootPlay Arcade, featuring three engaging challenges

1. RestEndo RiddleRevelry: Experience the thrill of solving 5 "What am I???" questions, where your answers will be based on carefully crafted clues.
2. SmileQuest Cartoon Conundrums: Dive into two captivating tales presented through cartoons. Conclude each story with a precise diagnosis and treatment plan.
3. RootRush Crossword: Engage in the challenge of deciphering 6 hints leading to the completion of the password in our RootRush crossword.

Competition Details: Winners will be determined by the highest number of correct answers achieved within the shortest duration. The coolest part? The top two champs will snag some awesome prizes! 🏆✨

How to Participate:

- We kindly request all participants to thoroughly review the arcade before commencing the form completion process, as the form is specifically designed for entering answers only.
- Enter your details through the provided link and initiate the quiz by clicking the link embedded within the page. To start the quiz [Click here](#)

Submission Guidelines: All answers must be submitted in uppercase letters.

Important Dates: The Google link will be accessible for participants from 2nd March 2024, 9:00 am to 5th March 2024, 12:00 am.

Results Announcement: Stay tuned for the results, which will be disclosed on 15th March 2024, exclusively on the IACDE__ official page on Instagram. Scan the QR Code provided at the end of this newsletter to follow our page.

JOIN US FOR AN EXHILARATING EXPERIENCE AT
ROOTPLAY ARCADE, WHERE KNOWLEDGE AND QUICK
THINKING LEAD TO TRIUMPH!

RESTENDO
RIVELRY

RIDDLE



What am I ??



1

?????
I am a chemical substance used in endodontics to dissolve organic tissue in the root canal system?

2

?????
I reside in your oral cavity and I am mostly referred by you as enigma to endodontists?

3

?????
I come in a paste form and often have a distinctive yellow color, and I contribute to the formation of a barrier in the root canal?

4

?????
I am the timely remedy, a procedure that wards off infections and rescues your natural tooth from extraction!

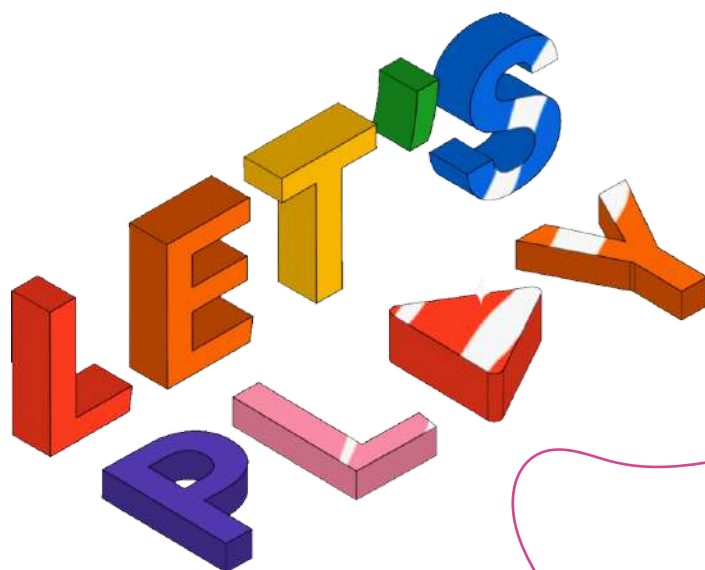
5

?????
I am commonly used when the tooth's natural crown structure is insufficient to retain a traditional restoration?

SMILEQUEST

CARTOON CONUNDRUMS

Whats your
plan???



1

TIM'S TOOTHACHE TALE



TIM started losing sleep due to the constant throbbing pain

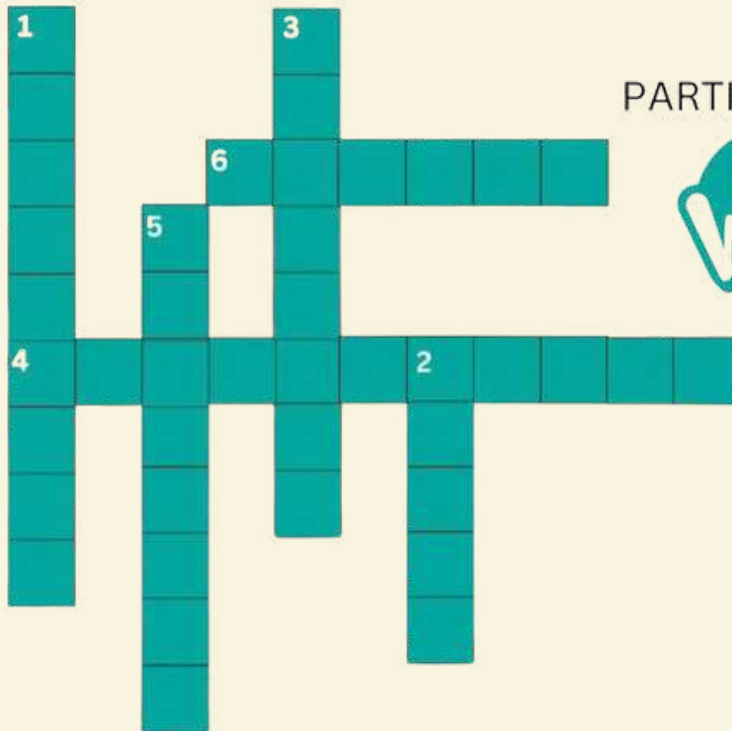
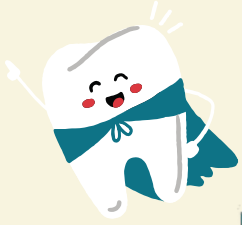


2

SPARKLE'S GLEAMING GRIN TALE



RootRush Crossword



PARTICIPATE &



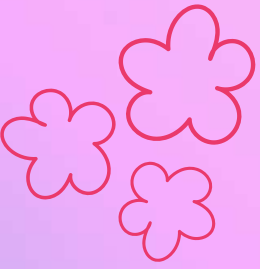
HORIZONTAL:

4. This condition can be treated using mouthwashes and toothpastes containing potassium nitrate or fluorides?
6. Which consistency of cements is checked through string test?

VERTICAL:

1. Material for the direct restoration in aesthetic zone?
2. Bond formed by GIC with tooth structure?
3. Element which reverses early stages of decay?
5. Technique consists of GIC+composite?

Wishing all the
ladies



HAPPY

International

WOMEN'S
DAY

8TH MARCH

WOMEN ARE WONDERFUL
♥
WOMEN ARE WONDERFUL



WHERE THERE IS A WOMAN THERE IS MIRACLE

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