UNIVERSITAS INDONESIA

FKG

PROGRAM BOOK

KPPIKG 2023

JAKARTA CONVENTION CENTER
2-4 FEBRUARY 2023

19TH SCIENTIFIC MEETING AND REFRESHER COURSE IN DENTISTRY
FACULTY OF DENTISTRY, UNIVERSITAS INDONESIA

CONTENTS

SECTION

A

WELCOME REMARKS

WELCOME REMARK FROM

THE DEAN OF FACULTY OF DENTISTRY UNIVERSITAS INDONESIA

Dear honourable participants and colleagues,

I am delighted to welcome you to the 19th International Scientific Meeting and Refresher Course in Dentistry (KPPIKG 2023). This triennial event has been held since 1967 by the Faculty of Dentistry, Universitas Indonesia.

In 2023, KPPIKG will carry out the theme's event of "Reshaping Innovation, Knowledge and Skills through Digital Transformation towards Excellent Service and Education in Dentistry". Advanced digital technology is rapidly changing the world nowadays, as well as transforming the field of dentistry. Along with new aesthetic materials and robust manufacturing and prototyping tools, we are witnessing a real evolution in dental care. The adoption of digital technologies in dentistry aims to bring efficient processes, replacing outdated techniques to improve overall treatment outcomes. These innovations also bring conveniences for dental research and teaching activities. In this event, we are bringing up the current and advanced topics in dentistry through seminars, lectures and 30 hands-on given by renowned international and regional speakers, using the latest technology in dentistry.

I believe it would be beneficial for all of us to discuss and share our knowledge to provide the best practice, education, and research in this era of digitalization in dentistry. Paralel with the scientific events, KPPIKG 2023 is holding the Dental Trade Exhibition, where over 45 exhibitors will showcase their latest technology in dental supplies, instruments, and equipment.

I want to thank all distinguished speakers for contributing to this event. Wishfully, this event will allow us to enhance knowledge among colleagues to provide better care and service in our work field.

Also, I want to express my gratitude to our honourable participants. After the Covid-19 pandemic, finally, we can gather and meet our colleagues in person. I hope that you will have enjoyable moments during KPPIKG 2023.

Thank you very much to the organizing committees and sponsors, who have worked hard to perform this event.

Warmest greeting,

Dr. drg. Nia Ayu Ismaniati, MDSc., Sp.Ort(K)
Dean Faculty of Dentistry, Universitas Indonesia

WELCOME REMARK FROM

THE CHAIRMAN OF KPPIKG 2023

Dear colleagues,

It is my privilege and great pleasure to welcome you all to the 19th Scientific Meeting & Refresher Course in Dentistry (KPPIKG 2023). With the theme of "Reshaping Innovation, Knowledge, and Skills Through Digital Transformation Towards Excellent Service and Education in Dentistry", KPPIKG 2023 aims to bring together regional dental professionals and academicians as well as clinicians to share knowledge and the best practices through this era of digitalization in Dentistry.

We are bringing you current and advanced topics in dentistry through seminars, workshops, poster presentations, popular lectures and courses given by renowned international and regional speakers. We also offer 30 hands-on and demonstration using the latest technology in dentistry. These scientific programs are performed to enrich our knowledge and enhance our clinical skills in dentistry.

KPPIKG 2023 is also holding various social events, such as the Opening Ceremony, Gala Dinner to appreciate our honorable speakers as well as an opportunity for socializing and networking while enjoying Indonesia's finest cuisine. Another events that are just as exciting are craft workshop and talk show on investment topics. Lastly, the official Closing Ceremony to close this exciting 3-day event.

KPPIKG is also known for its dental and UMKM exhibition. For this year, we are accommodating more than 45 reputable dental companies and suppliers, where you can shop the latest technology in Dentistry available on the market today.

I hope that you will find KPPIKG 2023 as the most welcoming, exciting, inspirational, and memorable scientific meeting.

Thank you.

Dr. drg. Aditya Wisnu Putranto, Sp.KG, Subsp.KR(K)
Chairman of KPPIKG 2023

SECTION
B

General Information

KPPIKG 2023
19th Scientific Meeting and Refresher Course in Dentistry
Faculty of Dentistry, Universitas Indonesia

Theme
"Reshaping Innovation, Knowledge, and Skills Through Digital Transformation Towards Excellent Service and Education in Dentistry"

Date
2-4 Februari 2023

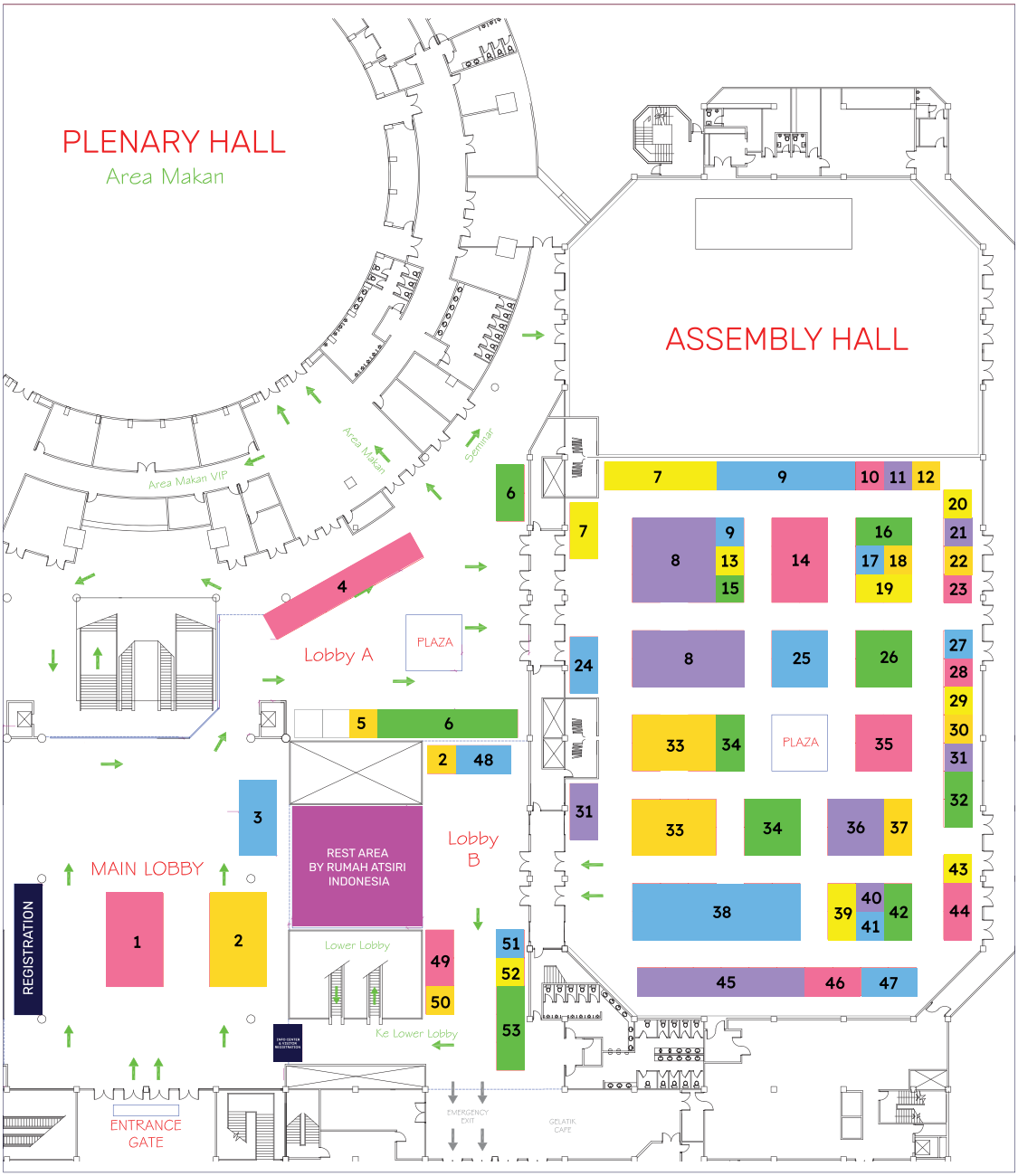
Venue
Jakarta Convention Center

Programs
SCIENTIFIC PROGRAMS
- Keynote Lecture
- Main Lecture
- Integrated Lecture
- E-poster Presentation
- Hands On
- Pepsodent Scientific Awards

EXHIBITION
- Dental Exhibition
- UMKM Exhibition

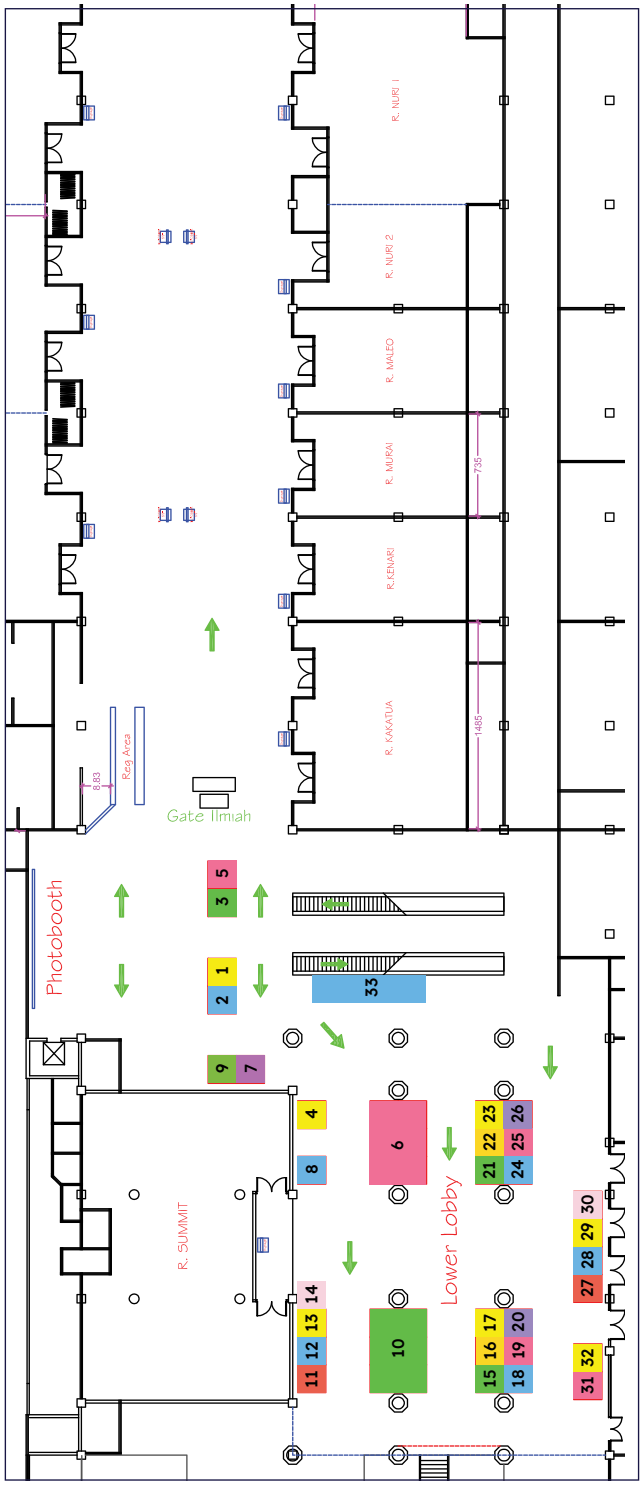
NONSCIENTIFIC PROGRAMS
- Opening Ceremony
- Workshop KPPIKG x Rumah Atsiri Indonesia
- Iluni Gathering
- Closing Ceremony

FLOOR PLAN
MAIN LOBBY



FLOOR PLAN

LOWER LOBBY



LIST OF COMMITTEE KPPIKG 2023

Councelor	Prof. Ari Kuncoro, S.E., M.A., Ph.D
Advisor	Dr. drg. Nia Ayu Ismaniati, MDSc., Sp.Ort(K) Dr. drg. Ria Puspitawati, PBO drg. Kartini Sally, M.M
Steering Committee	drg. Nieka Adhara Wahono, Sp.KGA(K), Ph.D. drg. F. R. Habsari Eko Prapti, M.Kes Lidya, S.E
Chairman	Dr. drg. Aditya Wisnu Putranto, Sp.KG(K)
Secretariat	drg. Astari Larasati, Sp.Pros Dr. drg. Ike Dwi Maharti, Sp.KG(K)
Team	Juli Kusdwiastini, S.AB
Marketing, Publication, & IT	
Coordinator	drg. Fakhrana Ariani Ayub, Sp.Pros
Team	drg. Adityo Widaryono, Sp.Perio(K) Rezka Herlambang, S.E., M.I.Kom drg. Sandra Mega, M.DSc, Sp.Ort Dimas Abdul Kadir Ahmad Romdhoni Lita Septira, S.I.Kom
Treasurer	
Coordinator	Dr. drg. Fatimah Maria Tadjoedin, Sp.Perio(K)
Team	drg. Herlis Rahdewati, Sp.Perio Laila Sari Bariza, S.E. Yuyun Damayanti, A.Md Imam Sifantoro Suryo Budiman, S.E.
Registration	
Coordinator	drg. Syurri Innaddinna Syahraini, M.Biomed
Team	drg. Inka Saraswati, M.Sc drg. Zhiara Aulia drg. Andin Rahmania Putri
Scientific Program	
Head of Scientific Program	drg. Erik Idrus, Ph.D.
Team	drg. Azizah Nur Hanifah drg. Ligar Galarliyasa

Scientific Award & Proceeding Coordinator	Dr. drg. Dini Asrianti, Sp.KG(K). drg. Atik Ramadhani, Ph.D.
Main Lecture Coordinator	drg. Citra Kusumasari, Sp.K.G(K)., Ph.D. drg. Citra Fragrantia Theodorea, M.Si., Ph.D.
Short Lecture Coordinator	drg. Dimas Ilham Hutomo, Sp.Perio drg. Iffi Aprillia, Sp.KG(K)
e-Poster Coordinator	drg. Ariyanti Rezeki, Sp.Pros drg. Mohammad Adhitya Latief, Sp.BM(K)
Hands-on Coordinator	drg. Sylva Dinie Alinda, M.A.R.S., Sp.K.G(K) drg. R.M. Tri Ardi Mahendra, Sp.
Fund and Exhibition	
Coordinator	drg. Aryo Megantoro, Sp.K.G(K)
Vice Coordinator	drg. Dwita Pratiwi, Sp.Ort
Team	drg. Muhammad Sulaiman Kusumah Adiwirya, M.M., Sp.Ort(K) drg. Dewi Ghina Nisrina Aulia drg. Layli Pinaringaning Gusti
Non Scientific Program	
Head of Non Scientific Program	drg. Shalina Ricardo, Sp.K.G(K)
Coordinator	drg. Widya Kusumadewy, Sp.Ort(K) drg. Linda Puspita., Sp.KG
Team	drg. Desandra Puspita Nugraha Rani Triastuti, S.E.
Food & Beverage	
Coordinator	drg. Anandina Irmagita, Sp.PM.
Team	Maulidia, A.Md
Equipment	
Coordinator	drg. Ichwanul Muslim, Sp.KG
Team	drg. Yudy Ardilla Utomo, Sp.BM(K) drg. Muhammad Ramaditto, Sp.BM Sukeri Muhammad Naufal, A.Md.T.G.
Transportation & Accomodation	
Coordinator	drg. Aloysius Putut Wijanarko, M.Sc
Team	drg. Indra Suherdian Topanesa, Sp.KG

SECTION
C1

Conference Schedule

CONFERENCE SCHEDULE

DAY 1

Thursday, 2nd February 2023

	ASSEMBLY HALL 1	MERAK 1	MERAK 2	MERAK 3	SUMMIT	NURI 1
07.00-08.00	RE-REGISTRATION					
08.00-08.15	OPENING CEREMONY & KEYNOTE LECTURE at Assembly Hall 1 **Budi Gunadi Sadikin** Minister of Health Republic of Indonesia					
08.15-08.30						
08.30-08.45						
08.45-09.00						
09.00-09.15						
09.15-09.30						
09.30-09.45						
09.45-10.00						
10.00-10.15						
10.15-10.30						
10.30-10.45	KEYNOTE LECTURE at Assembly Hall 1 **Advanced Minimally Invasive Dentistry in New Normal Era** Prof. Junji Tagami, DDS, Ph.D					
10.45-11.00						
11.00-11.15						
11.15-11.30						
11.30-11.45						
11.45-12.00						
12.00-12.15	LUNCH					
12.15 - 12.30						
12.30 - 12.45						
12.45 - 13.00						
13.00 - 13.15	**ML01** **Ledge Prevention and Management** Dr. Fillippo Cardinali	**ML06** **Ortodonti ĐOrtopedi Dentofasial pada Pasien Anak dalam Periode Tumbuh Kembang** Prof. Dr. drg. Miesje Karmiati P., S.U, Sp.Ort(K)	**ML03** **Clinical Consideration in Endodontic Treatment** drg. Bambang Nursasongko, Sp.KG, Subsp.KR(K)	**ML04** **Basic Tissue Requirements Periimplant Tissue Health** drg. Adityo Widaryono, Sp.Perio(K)	**IL01** **Microbiome in Conservative Dentistry** Dr. drg. Dewa Ayu N.P.A., Sp.KG, Subsp.KE(K) drg. Aryo Megantoro, Sp.KG, Subsp.KR(K)	**IL02** **Integrated Oral Care in Head and Neck Cancer Therapy** Dr. dr. Sonar Soni Panigoro, Sp.B, Subsp.Onk(K), M.Epid., MARS dr. Gregorius Ben Prajogi, M.Pd.Ked., Sp.Onk.Rad(K) Prof. Dr. drg. Ratna Meidyawati, Sp.KG (K) Dr. drg. Febrina Rahmayanti, Sp.PM(K)
13.15 - 13.30						
13.30 - 13.45						
13.45 - 14.00						
14.00 - 14.15						
14.15 - 14.30						
14.30 - 14.45	**ML09** **Bugs, Bioactives and Bioinspiration: Towards Dental Tissue Repair and Regeneration** Prof. Alastair J Sloan, BSc, Ph.D, PGCert, FHEA, CBiol, FRSB, FICD, FFDRCSI	**ML02** **Beyond the Obvious Benefits of Implants** Prof. Dr. MED. Dr. MED. DENT. Ti-Sun Kim, EMBA	**ML07** **Make It More Personal and Powerful: Introducing Artificial Intelligence and Spatial Analysis for Dental Healthcare Marketing** Dr. drg. Taufan Bramantoro, M.Kes	**ML08** **Gelation and Characterization of Chiral Compound Monomer** Sri Fitriyani, S.Si., M.Si.,Ph.D	**IL03** **Overview of Sleep Apnea** Prof. drg Laura S Himawan, Sp.Pros(K) Prof. Dr. drg. Ira Tanti, S p.Pros(K) drg. Astari Larasati, S p.Pros drg. Ariyanti Rezeki, S p.Pros drg. Pinta Marito, S p.Pros drg. Fakhrana Ariani Ayub, Sp.Pros	**ML16** **Recent Advances Treatment in TMJ: From Conservative to Arthroscopy** drg. Dhanni Gustiana, Sp.BM
14.45 - 15.00						
15.00 - 15.15						
15.15 - 15.30						
15.30 - 15.45						
15.45 - 16.00						
16.00 - 16.15		**IL04** **Multidiscipline in Orthognatic Surgery Cases/ CLP** Dr. drg. Krisnawati, Sp.Ort(K) & drg. Cathy Sitepu Dr. drg. Nada Ismah, Sp.Ort(K) Dr. drg. Sariesendy, Sp.Ort(K) drg. Yudy Ardilla Utomo, Sp.BM(K)	**ML11** **Developmental Dental Defect of Primary Teeth and its Consequences in Children** drg. Nieka Adhara, PhD, Sp.KGA, K-KKA	**ML12** **Application of Teledentistry in Indonesia** Dr. drg. Anandina Irmagita, Sp.PM(K)	**ML 13** **Human Identification: Dentist's Forefront Role in Delivering Scientific Evidence** drg. Nurtami, Ph.D., Sp, OF(K)	**IL05** **Comprehensive Approach in Management of Radicular Cyst** drg. Iffi Aprilia, Sp.KG, Subsp.KR(K) Dr. drg. Vera Julia., Sp.BMMF, Subsp.TMF-TMJ(K)
16.15 - 16.30						
16.30 - 16.45						
16.45 - 17.00						
17.00 - 17.15						
17.15 - 17.30						
17.30 - 17.45						
19.00 - selesai	GALA DINNER					

CONFERENCE SCHEDULE

DAY 1

Thursday, 2nd February 2023

	NURI 2	KENARI	MURAI	MALEO	KAKAKTUA
13.00 - 13.15	**HO 3**	**HO 2**	**HO 1**	**HO 4**	**HO 5**
13.15 - 13.30					
13.30 - 13.45					
13.45 - 14.00	**The Orthodontic Referral: How to Make Wise Decision**	**Cementation Protocol and Utilizing Digital in Your Indirect Restoration**	**Practical Guide for Dentoalveolar Fracture and Wound Closure in Dental Emergencies**	**Post Endodontic Restorative Treament on Anterior Primary Teeth**	**Oral Care for the Older People: Preparing Oral Health Professionals for Ageing Population**
14.00 - 14.15					
14.15 - 14.30					
14.30 - 14.45					
14.45 - 15.00	Dr. drg. Retno Widayati, Sp.Ort(K) Dr. drg. Fadli Jazaldi, Sp.Ort(K) drg. Dwita Pratiwi, Sp.Ort drg. Muhammad Sulaiman Kusumah Adiwirya, MM, Sp.Ort	Dr. drg. Tri Ardi Mahendra, Sp.Pros(K)	Dr. drg. Lilies Dwi Sulistyani, Sp.BM(K)	Dr. drg. Eva Fauziah, Sp.KGA, K-PKOA drg. Annisa Khairani, Sp.KGA	Prof. Dr. drg. Lindawati S Kusdhany, Sp.Pros(K) drg. Mellissa Adiatman, Ph.D Dr. drg. Dewi Priandini, Sp.PM
15.00 - 15.15					
15.15 - 15.30					
15.30 - 15.45					
15.45 - 16.00					
16.00 - 16.15	**HO 9**	**HO 7**	**HO 8**	**HO 6**	**HO 10**
16.15 - 16.30					
16.30 - 16.45					
16.45 - 17.00	**Rationalization in Manual Rotary Endodontic**	**Advanced Technology with Improved Legacy Rotary System for Predictable Result in Endodontics**	**Step by Step for Successful Bridge Restoration**	**Immediate Implant Placement for Tissue Preservation**	**Ledge Prevention and Management**
17.00 - 17.15					
17.15 - 17.30					
17.30 - 17.45					
17.45 - 18.00	drg. Bambang Nursasongko, Sp.KG, Subsp.KR(K) drg. Citra Kusumasari, PhD., Sp.KG, Subsp.KR(K) (Moderator)	Dr. drg. Dini Asrianti, Sp. KG, Subsp.KE(K) drg. Shalina Ricardo, Sp.KG, Subsp.KE(K)	Dr. drg. Saraventi, Sp.Pros(K) drg. Lia Kartika Wulansari Sri Gunoro, PhD., Sp.Pros(K) drg. Farisza Gita Mahiddin, Sp.Pros(K)	drg. Dimas Ilham Hutomo, Sp.Perio(K) drg. Adityo Widaryono, Sp.Perio(K) drg. Nadhia A. Harsas, Sp.Perio(K)	Dr. Filippo Cardinali
18.00 - 18.15					
18.15 - 18.30					
18.30 - 18.45					
18.45 - 19.00					

CONFERENCE SCHEDULE

DAY 2

Friday, 3rd February 2023

	ASSEMBLY HALL 1	MERAK 1	MERAK 2	MERAK 3	SUMMIT	NURI 1
07.00-08.00	RE-REGISTRATION					
08.00 - 08.15	POSTER & SHORT LECTURE SESSION					ML19 **Root Canal Treatment of Challenging Cases** Assoc. Prof. Dr. Jeeraphat Jantarat, D.D.S, M.D.Sc, Ph.D
08.15 - 08.30						
08.30 - 08.45						
08.45 - 09.00						
09.00 - 09.15	ML14 **3D Printing in Modern Dentistry- Benefits in Various Clinical Workflows (Prosthetics, Implantology, Splints, Bleaching)** Dr. Gerd Frahsek	ML15 **Update on Bioactive Bioceramic Materials in Dentistry** Arief Cahyanto, DDS., M.Eng., Ph.D	ML05 **Digitally-Guided Direct Composite Restoration Reshaping the Minimally Invasive Concept** Prof. Keiichi Hosaka, DDS., Ph.D	ML17 **The Daily Use of CBCT** Lect. Penporn Luangchana, D.D.S, M.Sc.	ML18 **Faktor Resiko Maloklusi Anak Selama Proses Pertumbuhan dan Perkembangan Komplek Kraniofasial** Prof. Dr. drg. Sarworini B Budiardjo, SpKGA, K-KKA	
09.15 - 09.30						
09.30 - 09.45						ML25 **Geriatric Dentistry: How Dentist Should Prepare for Treating Aging Patients** Prof. Dr. drg. Lindawati S. Kusdhany, Sp.Pros(K)
09.45 - 10.00						
10.00 - 10.15						
10.15 - 10.30						
10.30 - 10.45	ML20 **The Ultimate Bosster to Increase the Quality of your Endodontic Treatment** Dr. Fillippo Cardinali	ML21 **When Teeth are not Teething** Assoc. Prof. Pattarawadee Leelataweewud, DDS, MS	ML22 **Customized Oral and Maxillofacial Surgery based on 3D-Printing Technology and Related Research on XR and AI** Prof. Jin-Woo Kim, DDS, MS, Ph.D	ML23 **Morphology Driven Tooth Preparation for Indirect Restoration** drg. Leonard C. Nelwan, Sp.Pros, FISID, FITI	ML24 **The Mechanism of Bone Resorption Induced by Infiltration of Oral Squamous Cell Carcinoma** Prof. Tohru Ikeda, D.D.Sc., Ph.D	ML26 **Overview SCD and Taiwan Experience** Dr. Hsin-Ming Chen
10.45 - 11.00						
11.00 - 11.15						
11.15 - 11.30						
11.30 - 11.45						
11.45 - 12.00						
12.00 - 12.15	LUNCH (Move to Plennary Hall)					
12.15 - 12.30						
12.30 - 12.45						
12.45 - 13.00						
13.00 - 13.15	ML27 **Preservation and Restoration of Tooth Structure** Prof. Hien Chi Ngo, BDS, MDS, Ph.D, Grad Cert HED, FPFA, FADI, FICD	ML28 **Quality Control in Dental Education: Malaysian Perspective** Prof. Dato Dr Mohamed Ibrahim Abu Hassan, FASc DSPN, BDS, MDSc, PhD, FDS RCPS, FICD	ML29 **Implant Treatment Decisions & What Happens When You Take the Wrong Path** Assoc. Prof. Roy Judge, BDS, LDS RCS, MDSc, Ph.D	ML30 **A New Device to Purify Platelet-Rich Plasma (PRP) from Leukocytes based on Cell Dimension Rather Than Density** Subhaini, S.Si., M.Si., M.Sc., Ph.D	IL06 **The Importance of Pregnancy Mother and First Thousand Days Children: a Lifelong Investment in Oral Health** Dr. drg. Eva Fauziah, SpKGA, K-PKOA Dr. drg. Anggraini Margono, Sp.KG, Subsp.KE(K)	ML31 **Facing the Aging Society: Oral Hypofunction** Prof. Chuan-Hang Yu, DDS, MS, Ph.D
13.15 - 13.30						
13.30 - 13.45						
13.45 - 14.00						
14.00 - 14.15						
14.15 - 14.30						
14.30 - 14.45	ML32 **Visualization of Cleft Palate Speech to Improve the Quality of Articulation Using a Novel Neural Network System** Prof. Norifumi Nakamura, DDS, Ph.D	ML33 **Application of Tissue Engineering Approach for Alveolar Bone Regeneration** Prof. drg. Muhammad Ruslin, M.Kes, Ph.D, Sp.BM(K)	IL07 **Orthodontic Treatment during Growth and Development Period** Dr. drg. Nia Ayu Ismaniati, MDSc., Sp.Ort(K) drg. Akhila Ramanitya drg. Deo Develas, Sp.Ort drg. Desyanne Winardi	ML 34 **Pencegahan dan Penanggulangan Dini Kelainan Orthopedik dan Orthodontik Gangguan Dentokraniofasial pada Anak Secara Holistik** Prof. drg. Heriandi Sutadi, PhD., Sp.KGA, K-KKA	ML 35 **Risk Factors of Dental Caries in Indonesia** Dr. drg. Iwany Amalliah Badruddin, M.Epid	IL08 **Special Care Dentistry** Prof. Dr. drg. Yuniardini S. Wimardhani, M.Sc. Dent drg. Astari Larasati, Sp.Pros drg. Shalina Ricardo, Sp.KG(K) drg. Mellissa Adiatman, Ph.D
14.45 - 15.00						
15.00 - 15.15						
15.15 - 15.30						
15.30 - 15.45						
15.45 - 16.00						
16.00 - 16.15		IL09 **Current Updates in Oral Biology (Eukaryote, Prokaryote, and Physiology Point of View)** drg. Erik Idrus, Ph.D drg. Citra Fragrantia T., M.Si., Ph.D Ratna Ramadhani, S.K.G., Ph.D	ML10 **The Evolution of Technology in Conservative Dentistry: From Endodontic to Restorative Treatment** Dr. drg. Aditya Wisnu Putranto, Sp.KG, Subsp.KR(K)	IL10 **Dental Management for Special Needs Children** Prof. Dr. drg. Margaretha Suharsini Soetopo, S.U, Sp.KGA, K-AIBK drg. Astri Kusumaningrum, Sp.KGA drg. Amrita Widyagarini, Ph.D, Sp.KGA, K-AIBK		ML36 **Biomarkers of Early Childhood Caries and Caries Risk Assessment Tools** Prof. Stuart Dashper
16.15 - 16.30						
16.30 - 16.45						
16.45 - 17.00						
17.00 - 17.15						
17.15 - 17.30						
18.00 - Selesai	ILUNI GATHERING					

CONFERENCE SCHEDULE

DAY 2

Friday, 3rd February 2023

	NURI 2	KENARI	MURAI	MALEO	KAKAKTUA
07.00-08.00	RE-REGISTRATION				
08.00 - 08.15 08.15 - 08.30 08.30 - 08.45 08.45 - 09.00	POSTER & SHORT LECTURE SESSION				
09.00 - 09.15 09.15 - 09.30 09.30 - 09.45 09.45 - 10.00 10.00 - 10.15 10.15 - 10.30 10.30 - 10.45 10.45 - 11.00 11.00 - 11.15 11.15 - 11.30 11.30 - 11.45 11.45 - 12.00	**HO 13** **STROBE Guideline** drg. Mellissa Adiatman, PhD drg. Atik Ramadhani, PhD	**HO 12** **How to Manage Curved Canals** Assoc. Prof. Dr. Jeeraphat Jantarat, D.D.S, M.D.Sc, Ph.D drg. Ichwanul Muslim, Sp.KG (moderator)	**HO 11** **Digital Planning and Prosthetic Consideration in Dental Implant Treatment** Dr. drg. Ratna Sari Dewi, Sp.Pros(K) Dr. drg. Tri Ardi Mahendra, Sp.Pros(K)	**HO 14** **Gingivectomy in Case of Lower Molar Operculum** Dr. drg. Natalina, Sp.Perio(K) Prof. Dr. drg. Sri Lelyati S.U., Sp.Perio(K)	**Beauty Demo: Flawless Make Up by Wardah**
12.00 - 12.15 12.15 - 12.30 12.30 - 12.45 12.45 - 13.00	**LUNCH** (Move to Plennary Hall)				
13.00 - 13.15 13.15 - 13.30 13.30 - 13.45 13.45 - 14.00 14.00 - 14.15 14.15 - 14.30 14.30 - 14.45 14.45 - 15.00 15.00 - 15.15 15.15 - 15.30 15.30 - 15.45 15.45 - 16.00	**HO 16** **Virtual Dental Implant Planning by OnDemand Software** Lect. Penporn Luangchana, D.D.S, M.Sc.	**HO 17** **Arthrocentesis TMJ: Teknik, Indikasi dan Kontraindikasi** drg. Dhanni Gustiana, Sp.BM	**HO 18** **Post-endodontic Class II Esthetic Indirect Onlay Workflow** Dr. drg. Ike Dwi Maharti, Sp.KG(K) drg. Sylva Dinie, MARS, Sp.KG(K)	**HO 19** **Morphology Driven Tooth Preparation for Indirect Restoration** drg. Leonard C. Nelwan, Sp.Pros, FISID, FITI	**HO 20** **Ledge Prevention and Management** Dr. Filippo Cardinali
16.00 - 16.15 16.15 - 16.30 16.30 - 16.45 16.45 - 17.00 17.00 - 17.15 17.15 - 17.30 17.30 - 17.45 17.45 - 18.00 18.00 - 18.15 18.15 - 18.30 18.30 - 18.45 18.45 - 19.00	**HO 21** **Look Beyond the Teeth: Oral Cancer Screening** Dr. drg. Indriasti Indah Wardhany, Sp.PM(K) drg. Ambar Kusuma Astuti, Sp.PM(K)	**HO 22** **Diagnosis of Periodontitis and Its Management in Accordance with the EFP/AAP 2017 Guidelines** drg. Benso Sulijaya, Sp.Perio(K), Ph.D Dr. drg. Fatimah Maria Tadjoedin, Sp.Perio(K)	**HO 23** **Digital Implantology - Live Demonstration from Implant Planning to the Final Restoration using Digital Impressions, CBCT, CADCAM and 3D Printing** Dr. Gerd Frahsek	**HO 24** **Oral Pathology Interpretation on Odontogenic Tumor, OPMD and OSCC Cases** Prof. Tohru Ikeda, D.D.Sc., Ph.D	**HO 25** **Prosthodontic Approach in the Management of Sleep Apnea** Prof. drg. Laura S Himawan, Sp.Pros(K) Prof. Dr. drg. Ira Tanti, Sp.Pros(K) drg. Pinta Marito, Sp.Pros drg. Ariyanti Rezeki, Sp.Pros drg. Fakhrana Ariani Ayub, Sp.Pros drg. Astari Larasati, Sp.Pros

CONFERENCE SCHEDULE

DAY 3

Saturday, 4th February 2023

	ASSEMBLY HALL 1	MERAK 1	MERAK 2	MERAK 3	SUMMIT
07.00-08.00	RE-REGISTRATION				
08.00 - 08.15		POSTER & SHORT LECTURE SESSION			
08.15 - 08.30					
08.30 - 08.45					
08.45 - 09.00					
09.00 - 09.15	**ML37**	**ML38**	**ML39**	**ML40**	**HL01**
09.15 - 09.30	**Intralesional Steroid Therapy in Management of Oral Mucosa Disease**	**Orthodontics in Patients with Clefts - Outcomes and Pitfalls**	**Use of Laser for Dentistry: Beyond Cutting & Burning**	**Dentistry and the Pandemic: The Present and Future of Esthetic Dentistry**	**Prevention and Examination of Oral Health: an Update**
09.30 - 09.45					
09.45 - 10.00					
10.00 - 10.15	Dr. Nathaniel Simon Treiser	Prof. Anne Marie Kuijpers-Jagtman, DDS, Ph.D, FDSRCSEng	Dr. Henry Ho	Kara Monica Marie P. Achacoso, DMD	drg. Mellissa Adiatman, PhD Prof. Dr. drg. Yuniarti Soeroso, Sp.Perio(K)
10.15 - 10.30					
10.30 - 10.45	**IL12**	**ML41**	**ML42**	**ML43**	**ML44**
10.45 - 11.00	**Concept and Strategy in Regenerative Endodontics**	**Present and Future Perspectives on Dental Nanomaterials: Synthesis and Characterization**	**Preservation and Restoration of Tooth Structure**	**Beyond the Prevention - What Should We Do To Follow**	**The Caries Prevention in Children for Indonesia 2030 Free Caries Programe**
11.00 - 11.15					
11.15 - 11.30	Prof. Dr. drg. Anggraini Margono, Sp.KG, Subsp.KE(K) Dr. drg. Dini Asrianti, Sp.KG, Subsp.KE(K) Dr. drg. Ike Dwi M, Sp.KG, Subsp.KE(K) drg. Sylva Dinie A, MARS, Sp.KG, Subsp.KE(K)	Prof. Dr. Eng. I Made Joni, M.Sc	Prof. Hien Chi Ngo, BDS, MDS, PhD, Grad Cert HED, FPFA, FADI, FICD	Prof. Bo-Hyoung Jin, DDS, MSD, PhD	Dr. drg. Mochamad Fahlevi Rizal, Sp.KGA, K-PKOA
11.30 - 11.45					
11.45 - 12.00					
12.00 - 12.15		LUNCH (Move to Plennary Hall)			
12.15 - 12.30					
12.30 - 12.45					
12.45 - 13.00					
13.00 - 13.15		**ML45**	**ML46**	**ML47**	**ML48**
13.15 - 13.30		**The Present and Future of Periodontics**	**Changes in Cortical Bone Organisation and Structure with Aging**	**Full Jaw Rehabilitation: Final Prosthesis**	**Shades of Colour: Facets of Oral Medicine**
13.30 - 13.45					
13.45 - 14.00					
14.00 - 14.15					
14.15 - 14.30		Prof. Koichi Tabeta, DDS., Ph.D	Dr. Rita Hardiman, Ph.D, GCUT	drg. Marik Guizot, Sp.BM	Dr. Amanda Phoon Nguyen
14.30 - 14.45	CLOSING CEREMONY				
14.45 - 15.00					
15.00 - 15.15					
15.15 - 15.30					
15.30 - 15.45					
15.45 - 16.00					
16.00 - 16.15					

CONFERENCE SCHEDULE

DAY 3

Saturday, 4th February 2023

	NURI 1	NURI 2	KENARI	MURAI	MALEO	KAKAKTUA
07.00-08.00	RE-REGISTRATION					
08.00 - 08.15	POSTER & SHORT LECTURE SESSION					
08.15 - 08.30						
08.30 - 08.45						
08.45 - 09.00						
09.00 - 09.15	**IL11** **Current Concept of Dental Caries and Adhesive Management in Conservative Dentistry** Prof. Dr. drg. Ratna Meidyawati, Sp.KG, Subsp.KR(K) drg. Citra Kusumasari, SpKG, Subsp.KR(K), Ph.D		**HO 27** **Fiber Post Utilization for Post Endodontic Treatment** drg. Aryo Megantoro, Sp.KG, Subsp.KR(K)	**HO 28** **Post Endodontic Cavity Preparation prior to Indirect Restoration & Digital Approach in Restorative Dentistry: 3D Intraoral Scanner Workflow** Dr. drg. Aditya Wisnu Putranto, Sp.KG, Subsp.KR(K)	**Workshop KPPIKG x Rumah Atsiri Indonesia**	**HO 29** **Immediate Implant Placement: Clinical Decisions and Considerations** drg. Yudy Ardilla Utomo, Sp.BM(K)
09.15 - 09.30						
09.30 - 09.45						
09.45 - 10.00						
10.00 - 10.15						
10.15 - 10.30						
10.30 - 10.45	**IL13** **Impact of Covid 19 on Dentistry** Prof. Dr. drg. Haru S. Anggani, Sp.Ort(K) Prof. Dr. drg. Yuniarti Soeroso, Sp.Perio(K) Prof. drg. Endang Winiati Bachtiar, M.Biomed., Ph.D., PBO	**HO 26** **Intralesional Steroid Therapy in Management of Oral Mucosa Disease** Dr. Nathaniel Simon Treiser				
10.45 - 11.00						
11.00 - 11.15						
11.15 - 11.30						
11.30 - 11.45						
11.45 - 12.00						
12.00 - 12.15	**LUNCH** (Move to Plennary Hall)					
12.15 - 12.30						
12.30 - 12.45						
12.45 - 13.00						
13.00 - 13.15	**ML49**		**HO 30**	**HO 15**		**HO 31**
13.15 - 13.30	**Recent Development in Various Tissue Expansion Models and The Role of Digital Transformation in Assisting Clinical Dental Practice, Education and Research** Prof. Dr. Zamri Radzi		**Brilliant Componeer: A Smile Made Easy** Kara Monica Marie P. Achacoso, DMD	**Improved Composite Injection Molding Technique** Prof. Keiichi Hosaka, D.D.S., Ph.D		**Immediate Implant Placement: Clinical Decisions and Considerations** drg. Yudy Ardilla Utomo, Sp.BM(K)
13.30 - 13.45						
13.45 - 14.00						
14.00 - 14.15						
14.15 - 14.30						
14.30 - 14.45	**ML50**					
14.45 - 15.00	**Lasers Therapy for Oral Mucosal Diseases** Prof. Marco Meleti					
15.00 - 15.15						
15.15 - 15.30						
15.30 - 15.45						
15.45 - 16.00						

SECTION

C2

ORAL & POSTER PRESENTATION SCHEDULE

DAY 2

Friday. 3rd February 2023

08.00-09.00

ORAL PRESENTATION

MERAK 1

No	ID	Paper Title	Author
1	OP-02A	Ilmu Pengetahuan dan Teknologi Mutakhir di Bidang Ortodonti	Dr. drg. Retno Widayati, Sp.Ort(K)
2	OP-02A-01	A Surgery-first Approach in Surgical-orthodontic Treatment of Skeletal Class-III Malocclusion	Evie Lamtiur Pakpahan
3	OP-02A-02	Thermoplastic Material Selection for Orthodontic Aligners: A Literature Review	Riandri C. Runizar, Miesje Karmiati Purwanegara, Retno Widayati
4	OP-02A-03	Removable Orthodontic Appliance for Adult Patient with Mild Crowding, Is It still Working?: A Case Report	Dwijaya Shavira, Farih Aminah, Dwita Pratiwi, Sigit Handoko

ORAL PRESENTATION

MERAK 2

No	ID	Paper Title	Author
1	OP-02B-01	Surgical Endodontic on Previously Treated Endodontic Retreatment at True Cyst Lesion in Central Left Incisivus Mandible: Case Report	Elizabeth, Dewa Ayu Nyoman Putri Artiningsih
2	OP-02B-02	Management Of Type 2 Vertucci Root Canal Treatment On The Lateral Insisives And The Mandibular Caninus	Fitri Yuli Mardiyati, Dini Asrianti
3	OP-02B-03	Root Canal Treatment on Mandibular First Molar with Radix Entomolaris and Middle Mesial Canal	Hana Tania Rahmaputri, Dewa Ayu Nyoman Putri Artiningsih

DAY 2

Friday. 3rd February 2023
08.00-09.00

ORAL PRESENTATION
MERAK 3

No	ID	Paper Title	Author
1	OP-02C-01	Gingival Depigmentation On Thin Gingival Biotype Using Combination Rotary Fine Abrasive Bur And Scalpel Technique: A Case Report	Dewi Sari Mumpuni, Pratidina Fitri Ramadhani, Riska Mutia Ersyari , Benso Sulijaya
2	OP-02C-02	Host Modulation Therapy with Natural Agents in Periodontal Treatment: A Systematic Review	Ketherin , Fathia Agzarine Deandra, Rieska Rachmasari , Benso Sulijaya

ORAL PRESENTATION
SUMMIT

No	ID	Paper Title	Author
1	OP-02D-01	The Importance of Stevens-Johnson Syndrome/Toxic Epidermal Necrolysis Induced By Valproic Acid In Bipolar Patient Multidisciplinary Approach Management: A Case Report	Ni Putu Yessy Karmila Putri, Indriasti Indah Wardhany, Ika Anggraini
2	OP-02D-02	The Impact of Early Recognition of Secondary Syphilitic Lesions in HIV-Positive Patient on Dentist Clinical Decisions: A Case Report	Yanti Yulianti, Indriasti Indah Wardhany

DAY 3

Friday. 3rd February 2023

08.00-09.00

ORAL PRESENTATION

MERAK 1

No	ID	Paper Title	Author
1	OP-03A-01	Molecular Docking Metabolites of Caulerpa racemosa as Potential Antibacterial Agents of initial colonizer Streptococcus mutans and Veillonella parvula in Biofilm Formation	Christopherous Diva Vivo, Citra Fragrantia Theodorea, Erik Idrus
2	OP-03A-02	Molecular Docking Interaction of Caulerpa racemosa ligands with Porphyromonas gingivalis and Treponema denticola Bacterial Receptors in the Late Stage of Biofilm Formation	Aurelia Ardityaningrum, Citra Fragrantia Theodorea, Erik Idrus

ORAL PRESENTATION

MERAK 2

No	ID	Paper Title	Author
1	OP-03B-01	Management of Maxillary First Molar Endodontic Treatment with Pulp Stone Using Ultrasonic Endodontic Scaler: A Case Report	Johan Adiyasa, Ratna Meidyawati
2	OP-03B-02	Intraoral Scanner to Fabricate Single-Unit Porcelain Fused to Metal Crown in Unstable Occlusion Patient: A Case Report	Natasya Hillary , Citra Kusumasari
3	OP-03B-03	Oval Shape Root Canal Treatment On Mandibular Second Molar Using Fiber Reinforced Composite Post: A Case Report	Aan Midad Arrizza, Citra Kusumasari

DAY 3

Friday. 3rd February 2023
08.00-09.00

ORAL PRESENTATION
MERAK 3

No	ID	Paper Title	Author
1	OP-03C-01	The protective and harmful effects of smoking behavior on oral ulcer	Aisyah Rachmadani Putri Gofur, Taufan Bramantoro, Dwi Ariani, Wahyuning Ratih Irmalia
2	OP-03C-02	Oral Health Problems and Healthcare-Seeking Behavior in Children with Hearing Impairment: a Narrative Review	Amandita Parameswari, Armasastra Bahar, Melissa Adiatman
3	OP-03C-03	Instrumen Pengukuran Literasi Kesehatan Oral	Laksmi Vidjajanti, Herry Novrinda , Diah Ayu Maharani

ORAL PRESENTATION
SUMMIT

No	ID	Paper Title	Author
1	OP-03D-01	Improved Biocompatibility of Hydroxyapatite Composite Nanoparticles – Poly Vinyl Alcohol with Addition of Poly Lactic-Co-Glycolic Acid for Bone Regeneration: In Vitro Study	Feni Istikharoh, Hidayat Sujuti,Edi Mustamsir, Lalita El Milla
2	OP-03D-02	X-ray Fluorescence (XRF) Analysis and Degradation Test of Combination of Gypsum Puger Hydroxyapatite Scaffold, Gelatin and Alginate (Sargassum sp) as Bonegraft Material	Amiyatun Naini, Nurmay Farah Lumantya, Hengky Bowo Ardhiyanto,
3	OP-03D-03	Cell Viability and Biocompatibility of Hydroxyapatite Synthesized from Fish Scales	Sinta Candra Wardani, Hidayat Sujuti, Edi Mustamsir, Diwya Nugrahini Hapsari

DAY 3

Friday. 3rd February 2023
08.00-09.00

ORAL PRESENTATION

NURI 1

No	ID	Paper Title	Author
1	OP-03E-01	Removal of Broken File in the Upper First Molar Using an Ultrasonic Instrument and Dental Microscope : A Case Report	Ferinda Utami, Ratna Meidyawati
2	OP-03E-02	The Management Of Separated File In The Lower Left First Molar Using An Ultrasonic Instrument And Dental Operating Microscope	M. Mahathir, Aditya Wisnu Putranto
3	OP-03E-03	Management of Furcal Perforation in Lower Right Molar using Mineral Trioxide Aggregate under Dental Operating Microscope	Kalya Putri, Aditya Wisnu Putranto

ORAL PRESENTATION

NURI 2

No	ID	Paper Title	Author
1	OP-03F-01	Modification of Hotz's Plate with Nasal Extension in Unilateral Cleft Lip and Palate as Presurgical Nasoalveolar Molding	Nur Aini, Muhammad Syafrudin Hak
2	OP-03F-02	Lower Lip Pit in Van der Woude Syndrome: Rare Case	Ken Ayu Miranthy, Nur Aini, Muhammad Syafrudin Hak

POSTER PRESENTATION
Screen 1

No	No. Poster	Paper Title	Author
1	P1-01-01	Head And Neck Tumour Histopathological Image Representation With Pre-Trained Convolutional Neural Network And Vision Transformer	Ranny Rahaningrum Herdiantoputri, Daisuke Komura,Tohru Ikeda, Shumpei Ishikawa
2	P1-01-02	The Preliminary Study Of Chitosan Nanoparticles As Antibacterial Agent On Enterococcus Faecalis Biofilm	Raras Ajeng Enggardipta,Minato Akizuki, Kazumitsu Sekine, Kenichi Hamada, Akikazu Murakami, Hiromichi Yumoto
3	P1-01-03	Characteristics Of Temptooth Materials In The Online Market	Hasya N. Fathan, Dudy S. Soebawi, Yosi K. Eriwati
4	P1-01-04	Comparative Evaluation Of Compressive Strength And Flexural Strength Of Microhybrid, Nanohybrid, Nanofill And Universal Flow Composite Resins	Dudy Soebawi, Hasya N. Fathan, Yosi K. Eriwati
5	P1-01-05	Endodontic Management Of C-Shaped Root Canals With Dental Operating Microscope And Warm Vertical Compaction Obturation Technique: Case Report	Senyan Dwiseptyoga, Aditya Wisnu Putranto
6	P1-01-06	Kaping Pulpa Indirek Dengan Material Bioaktif Mineral Trioxide Aggregate: Laporan Kasus	Grace Riska, Aditya Wisnu Putranto

DAY 1

Thursday. 2nd February 2023
13.00-14.00

POSTER PRESENTATION

Screen 2

No	No. Poster	Paper Title	Author
1	P1-02-01	Penatalaksanaan Lesi Kombinasi Endo-Perio Pada Gigi Molar Mandibula	Farah Diba, Dewa Ayu Nyoman Putri Artiningsih
2	P1-02-02	Geroendodontic Treatment Challenges : Obliteration and Curved Canal Case Report	Arianti Amalia P.Y., Dini Asrianti
3	P1-02-03	Management Of Root Canal Obliteration In Previously Treated Tooth	Ibramanto Warganegara, Dini Asrianti
4	P1-02-04	Bio-ceramic-based Reparative Cement as A Successful Apical Plug Material on Lower Second Molar	Rachendra Tiara Putri, Citra Kusumasari
5	P1-02-05	Management of internal bleaching of discoloration nonvital anterior tooth due to trauma: case report	Indira Larasputri; Ike Dwi Maharti
6	P1-02-06	Multiple Anterior Restoration Using Digital Workflow: A Case Report	Ingrid Amelia, Dini Asrianti

POSTER PRESENTATION
Screen 3

No	No. Poster	Paper Title	Author
1	P1-03-01	Endodontic Management Of Mandibular Third Molar With Curved Canal In Elderly Patient	Elizhabet Napitupulu, Ratna Meidyawati
2	P1-03-02	Direct pulp capping using Mineral Trioxide Aggregate (MTA) in permanent molar with cariously exposed pulp	Herdina Wiyono, Ratna Meidyawati
3	P1-03-03	Internal Bleaching as Management of Internal Discoloration of Tooth: Case Reports	Agita Meiskya, Citra Kusumasari
4	P1-03-04	Management Of Insisif Central Maxila With Ellis Class-IV Fracture : A Case Report	Yulita Resti Anggreni, Ratna Meidyawati
5	P1-03-05	Root Canal Treatment Of Maxillary First Premolar With Vertucci Type II Configuration	Anggita Dini Nofarina, Anggraini Margono
6	P1-03-06	Endodontic Management of First Molar Mandibula with Vertucci Type II Root Canal Configuration in the Distal Root	Romilda Rosseti, Ike Dwi Maharti

DAY 1

Thursday. 2nd February 2023

13.00-14.00

POSTER PRESENTATION

Screen 4 (Poster Looping Group D)

No	No. Poster	Paper Title	Author
1	P2A-01-01	Perawatan Endodontik Gigi Molar Dua Maksila Dengan Kurvatur Berat Menggunakan Sistem File Trunatomy	Valeria Widita Wairooy, Anggraini Margono
2	P2A-01-02	Management Of Non-Surgical Endodontic Treatment On Mandibular Fisrt Molar With Endo-Perio Lesion: A Case Report	Redho Sara Pratiwi, Anggraini Margono
3	P2A-01-03	Anatomical Fiber Post Restoration On Second Mandibular Premolar Teeth : A Case Report	Dahmar Luciana Jufri, Dewa Ayu Nyoman Putri Artiningsih
4	P2A-01-04	Root Canal Treatment of Curved Root Canal Configuration of 41° Schneider's Dilacerated Root of Mandibular Third Molar	Lilis Jamilah. Dini Asrianti
5	P2A-01-05	Masseter Muscle Activity in Patients with Temporomandibular Joint Disorder before Orthodontic Treatment: An Electromyographic Study	Nasytha Vikarina Siregar, Nia Ayu Ismaniati Noerhadi, Maria Purbiati
6	P2A-01-06	Efficacy Of Papain-Based Gel As Chemo-Mechanical Caries Removal Agent For Children And Environment-Friendly: An Alternative Of Conventional Method	Aninda Kartika Dewi
7	P2A-01-07	Effectiveness Of Edamame Extract (Glycine Max L.Merril) In Hibiting Streptococcus Mutans In Ceramic Brackets	Leliana Sandra Devi Ade P, Afit Datus Solechah, Rudy Joelijanto

DAY 2

Friday, 3rd February 2023
08.00-09.00

POSTER PRESENTATION
Screen 1, Session 1

No	No. Poster	Paper Title	Author
1	P2A-01-01	Perawatan Endodontik Gigi Molar Dua Maksila Dengan Kurvatur Berat Menggunakan Sistem File Trunatomy	Valeria Widita Wairooy, Anggraini Margono
2	P2A-01-02	Management Of Non-Surgical Endodontic Treatment On Mandibular Fisrt Molar With Endo-Perio Lesion: A Case Report	Redho Sara Pratiwi, Anggraini Margono
3	P2A-01-03	Anatomical Fiber Post Restoration On Second Mandibular Premolar Teeth : A Case Report	Dahmar Luciana Jufri, Dewa Ayu Nyoman Putri Artiningsih
4	P2A-01-04	Root Canal Treatment of Curved Root Canal Configuration of 41° Schneider's Dilacerated Root of Mandibular Third Molar	Lilis Jamilah. Dini Asrianti
5	P2A-01-05	Masseter Muscle Activity in Patients with Temporomandibular Joint Disorder before Orthodontic Treatment: An Electromyographic Study	Nasytha Vikarina Siregar, Nia Ayu Ismaniati Noerhadi, Maria Purbiati
6	P2A-01-06	Efficacy Of Papain-Based Gel As Chemo-Mechanical Caries Removal Agent For Children And Environment-Friendly: An Alternative Of Conventional Method	Aninda Kartika Dewi
7	P2A-01-07	Effectiveness Of Edamame Extract (Glycine Max L.Merril) In Hibiting Streptococcus Mutans In Ceramic Brackets	Leliana Sandra Devi Ade P, Afit Datus Solechah, Rudy Joelijanto

POSTER PRESENTATION
Screen 2, Session 1

DAY 2
Friday, 3rd February 2023
08.00-09.00

No	No. Poster	Paper Title	Author
1	P2A-02-01	Patient Safety Related To Clinical Risk Management In Dentistry (Scoping Review)	Didin Mirandani, Taufan Bramantoro, Dini Setyowati
2	P2A-02-02	Implications of Sugar Consumption on Dental Caries in Children and Adolescents: Literature Review	Vita Vianti, Atik Ramadhani, Anton Rahardjo
3	P2A-02-03	Knowledge and Attitude Dental Students Toward Oral Manifestation of Viral Infection: Study at Dental Hospital of Universitas Syiah Kuala	Yuli Fatzia Ossa, Vera Yulina, Nuzulul Ismi
4	P2A-02-04	Prosthetic Rehabilitation on Maxilla Defect Post Ameloblastoma Surgery with Metal Frame Hollow Bulb Obturator	Kadek Asri Asmita Pradnyana Putri, Ni Made Ista Prestiyanti, Riki Kristanto
5	P2A-02-05	Surgical Extraction Technique Of Fourth Molars: A Case Report	Kamila Febrian , M. Aryaditha Yunial , Yudy Ardilla Utomo , Lilies Dwi Sulistyani
6	P2A-02-06	Sialolithiasis progressing to sialadenitis and fistula in the neck region of the right submandibular gland (Case report)	Intan N. Dhewayani , Rima D. Januarti , Wenny Yulvie, Dwi Ariawan
7	P2A-02-07	The Effect Of Mangosteen Peel Extract (Garcinia Mangostana L.) As Denture Cleanser On Acrylic Resin Dentures Teeth Toward Colour Changes	Dewi Kristiana , Achmad Gunadi , Maria Yustina Asri Dian Pramesti

POSTER PRESENTATION
Screen 3, Session 1

No	No. Poster	Paper Title	Author
1	P2A-03-01	Impact Of Preoperative Malnutrition As A Risk Factor For Postsurgical Fistula Formation In Cleft Lip And Palate Surgery	Hirono MigitaHirono Migita, Mohammad Farid Ratman, Shinki Serizawa, Ayano Shiigi, Masahiro Tezuka, Hajime Suzuki, Norifumi Nakamura
2	P2A-03-02	"Preoperative, Perioperative, and Intraoperative Management of an Odontogenic Myxoma Case in Patients with Hepatitis B"	Depsi Indri Papilaya Simanjuntak , Dwi Ariawan, Wenny Yulvie
3	P2A-03-03	Ranula In A 39-Year-Old Woman : A Case Report	Awaludin Wibawa, Muhammad Ramaditto Reksoprodjo, Wenny Yulvie
4	P2A-03-04	Surgical Management of a Giant Radicular Cyst on a 14-Years Old Boy	Ghina Humaira, Lilies Dwi Sulistyani, Wenny Yulvie
5	P2A-03-05	Mesenchymal Stem Cell for Cartilage Regeneration of Temporomandibular Disorders	Ni Made Ista Prestiyanti, Kadek Asri Asmita Pradnyana Putri, Riki Kristanto
6	P2A-03-06	Silent Presentation Of Malignant Non-Hodgkin's Lymphoma In The Gingiva	Cut Yulian, Vera Julia, Addys Rino Hariar
7	P2A-03-07	Root Canal Treatment Of Maxillary Second Premolar With Vertucci Type V Configuration: A Case Report	Amanda Laksmi Dharmawati , Dewa Ayu Nyoman Putri Artiningsih

DAY 2

POSTER PRESENTATION

Friday, 3rd February 2023

Screen 4, Poster Looping Group G

08.00-09.00

No	No. Poster	Paper Title	Author
1	P2B-01-01	Periodontitis An Influence On The Risk Of Development Inflammatory Bowel Disease	Cahyaning Wulan Sasri, Meivi, Popy Sandra
2	P2B-01-02	Periodontal Diseases And Conditions In Passive Smoker: A Systematic Review	Esti Cahyani Adiati, Deby Santy Arisandy, Meivi, Natalina
3	P2B-01-03	Open Flap Debridement Combination With Platelet-Rich Fibrin As A Growth Factors For Reducing Pocket Periodontal: A Case Report	Vilia Wibianty, Anggun Alfreda Devina, Mardikacandra Manggala Putra, Yuniarti Soeroso
4	P2B-01-04	Pre-Prosthetic Free Gingival Graft Supported Vestibuloplasty On Edentulous Posterior Mandible: A Case Report	Vanessa Paramitha, Felita Clarissa, Yani Hastutik, Benso Sulijaya
5	P2B-01-05	Influence Of Electronic Cigarettes On Periodontal Tissues Based On Periodontal Clinical Parameter: A Literature Review	Nevada Permata Anvini, Nurul Khairiyah, Rifkifani Susanto Putra, Stanley Aditya Kurniawan , Ette Soraya Shahnaz Tadjoedin
6	P2B-01-06	Gingival Thickness In Smokers: PRISMA-Adapted Systematic Review	Melinda Rabekka Purba, Felita Clarissa Halim, Popy Sandra, Benso Sulijaya

DAY 2

POSTER PRESENTATION

Screen 1, Session 2

Friday, 3rd February 2023

13.00-14.00

No	No. Poster	Paper Title	Author
1	P2B-01-01	Periodontitis An Influence On The Risk Of Development Inflammatory Bowel Disease	Cahyaning Wulan Sasri, Meivi, Popy Sandra
2	P2B-01-02	Periodontal Diseases And Conditions In Passive Smoker: A Systematic Review	Esti Cahyani Adiati, Deby Santy Arisandy, Meivi, Natalina
3	P2B-01-03	Open Flap Debridement Combination With Platelet-Rich Fibrin As A Growth Factors For Reducing Pocket Periodontal: A Case Report	Vilia Wibianty, Anggun Alfreda Devina, Mardikacandra Manggala Putra, Yuniarti Soeroso
4	P2B-01-04	Pre-Prosthetic Free Gingival Graft Supported Vestibuloplasty On Edentulous Posterior Mandible: A Case Report	Vanessa Paramitha, Felita Clarissa, Yani Hastutik, Benso Sulijaya
5	P2B-01-05	Influence Of Electronic Cigarettes On Periodontal Tissues Based On Periodontal Clinical Parameter: A Literature Review	Nevada Permata Anvini, Nurul Khairiyah, Rifkifani Susanto Putra, Stanley Aditya Kurniawan , Ette Soraya Shahnaz Tadjoedin
6	P2B-01-06	Gingival Thickness In Smokers: PRISMA-Adapted Systematic Review	Melinda Rabekka Purba, Felita Clarissa Halim, Popy Sandra, Benso Sulijaya

POSTER PRESENTATION
Screen 2, Session 2

DAY 2
Friday, 3rd February 2023
13.00-14.00

No	No. Poster	Paper Title	Author
1	P2B-02-01	Patient Safety Related To Clinical Risk Management In Dentistry (Scoping Review)	"Edlyn Dwiputri , Kartika Dhipta , Geraldi Hartono, Benso Sulijaya , Fatimah Maria Tadjoedin , Yuniarti Soeroso, Sri Lelyati , Ette Tadjoedin"
2	P2B-02-02	Causal Association Between Obesity and Periodontitis	Ayusha Dia Fawnia, Mirsarinda Anandia Leander, Sofia Zaematul Arifah, Zalfa Karimah, Robert Lessang, Endang Winiati Bachtiar
3	P2B-02-03	Pengaruh Diabetes Gestasional Terhadap Jaringan The Influence of Gestational Diabetes to Periodontal Tissues: a Relationship between the Inflammatory Mediators- a Literature review	Ignatia Rosadi Nugroho, Berliana Rosa, Minessa Mahardika, Widya Rakhmawati, Yuniarti Soeroso
4	P2B-02-04	Osteogenic Activity Of Chitosan Combination As A Scaffold In Periodontal Tissue Engineering	Viona Yosefa , Maria Savvyana , Nadhia Anindhita Harsas, Yuniarti Soeroso
5	P2B-02-05	Creating A Supracrestal Tissue Attachment On Abutment Teeth: A Case Series	Charly Esmond Siagian, Valdy Hartono, Yoga Setiadharma , Benso Sulijaya
6	P2B-02-06	Tingkat Pengetahuan, Sikap, Dan Perilaku Orang Tua Tentang Risiko Karies Pada Siswa Sekolah Dasar Luar Biasa Negeri 1 Gianyar, Bali	Luh Wayan Ayu Rahaswanti, Mia Ayustina Prasetya,Desak Nyoman Ari Susanti , Ayu Bintang Rena Sanjiwani Budhiarta

DAY 2

Friday, 3rd February 2023
13.00-14.00

POSTER PRESENTATION
Screen 3, Session 2

No	No. Poster	Paper Title	Author
1	P2B-03-01	The use of Nance Holding Arch and Lingual Holding Arch in orthodontic treatment of bimaxillary dental protrusion case	Wulan Sri Utami, Haru Setyo Anggani, Wulandani
2	P2B-03-02	Relapse After Orthodontic Treatment	Evie Lamtiur Pakpahan, Ida Bagus Narmada, A. Retno Pudji
3	P2B-03-03	Orthodontic treatment using Self-Ligating System on Class II malocclusion in Pandemic COVID-19	Astrid Dinda R Hutabarat , Haru Setyo Anggani
4	P2B-03-04	Orthodontic Rehabilitation of Occlusion Before Restorative Treatment in Patient with Deepbite and Prolonged Retention of Primary Teeth	Bernadetta Kristi Wijayanti , Haru Setyo Anggani
5	P2B-03-05	Orthodontically Induced Inflammatory Root Resorption (Oiirr) And Prevention	Ayu sukma
6	P2B-03-06	The Correction Of A Skeletal Class Iii Malocclusion With Camouflage Orthodontic Treatment Using Preadjusted Edgewise System	Eva Gracia Dameirisca, Maria Purbiati.

DAY 2

POSTER PRESENTATION

Screen 4, Poster Looping Group J

Friday, 3rd February 2023

13.00-14.00

No	No. Poster	Paper Title	Author
1	P3A-01-01	External Root Resorption of An Immature Non-Vital Tooth following Avulsion Case	Zsa Zsa Syarifatun Nissa, Mochamad Fahlevi Rizal
2	P3A-01-02	Management Of Anterior Restoration Developmental Defects Of Email In Children Aged 2 Years Case Report	Prida Sulistyarsi, Mochamad Fahlevi Rizal
3	P3A-01-03	Factors Related to Periodontal Status in Adolescents In Indonesia (Indonesian Riskesdas Data Analysis 2018)	Putri Sri Wahyuni, Herry Novrinda, Prof, Anton Rahardjo, Risqa Rina Darwita
4	P3A-01-04	Psychological Effects on the Elderly with Dental Care Needs during the Covid-19 Pandemic	Arinny Shafira Khairunisa, Muslita Indasari, Saraventi
5	P3A-01-05	Guidance and rationale for the immediate implant placement in the maxillary molar	Mi Young Eo, Kezia Rachellea Mustakim, Ju Young Lee, Soung Min Kim
6	P3A-01-06	Significance of medication discontinuation on bisphosphonate-related jaw osteonecrosis in a rat model	Kezia Rachellea Mustakim, Mi Young Eo, Yun Ju Cho, Soung Min Kim

POSTER PRESENTATION
Screen 1

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POSTER PRESENTATION
Screen 2

DAY 3
Friday, 4th February 2023
08.00-09.00

No	No. Poster	Paper Title	Author
1	P3A-02-01	Microhardness And Color Changes Of Nanofill And Nanohybrid Resin Composites After Exposure To Green Tea Solution	Decky J Indrani, Bambang Irawan, Audryan Heriansjah, Fannesha Ristananda
2	P3A-02-02	"Psychometric Properties of Theory of Planned Behavior Questionnaire to Predict Indonesian Dentist's Behaviors in Delivering Caries Prevention for Preschool Children "	Safira Khairinisa, Risqa Rina Darwita, Diah Ayu Maharani, Febriana Setiawati

POSTER PRESENTATION
Screen 3

DAY 3
Friday, 4th February 2023
08.00-09.00

No	No. Poster	Paper Title	Author
1	P3A-03-01	Anatomical Post In Distal Root Canal Mandibular Molar After Endodontic Treatment	Vini Isa Kanadanty, Dewa Ayu Nyoman Putri Artiningsih
2	P3A-03-02	Salivary Ureum As A Diagnostic Tool In Children With Thalassemia Beta Major	Putu Gyzca Pradypta,Indah Titien, Putri Kusuma
3	P3A-03-03	Management Of Class II Division 1 Malocclusion With Complete Palatal Bite And Hypodivergent Growth Pattern	Mahardhika Setya Nugroho, Krisnawati
4	P3A-03-04	Sistem Penilaian Risiko Karies dan Rujukan Menggunakan Caries Risk Assesment and Referral Tool (CRA-RT) pada Early Childhood Caries (Tinjauan Naratif)	Siti Hajar Leni Siregar, Atik Ramadhani , Melissa Adiatman
5	P3A-03-05	Traumatic Dental Injuries pada Anak Berkebutuhan Khusus	Ivan Surija, Eva Fauziah
6	P3A-03-06	Factors Associated With Dental Care Utilization In Depok City During The Covid-19 Pandemic: A Cross Sectional Study	Kurnia Permitasari, Herry Novrinda , Risqa Rina Darwita, Armasastra Bahar

SECTION
D1

Main Lecture Abstracts

KEYNOTE LECTURE

Prof. Junji Tagami, DDS, Ph.D

Tokyo Medical & Dental University

DATE

2nd February 2023

VENUE:

ASSEMBLY 1

TIME:

10.00 – 12.00

ADVANCED MINIMALLY INVASIVE DENTISTRY IN NEW NORMAL ERA

The concept of minimal invasive dentistry(MID) is widely accepted in all over the world. It is believed that the natural teeth are expected to be effectively preserved for the whole life long according to the MID concept. However, the big decay or missing tooth that requires the conventional crown & bridge restorations are not discussed as apart of the MID. Recent developments of adhesive and composite resin materials enabled the large direct restoration with the aesthetic results. Direct crown restoration and direct bridge restoration are recently reported to show excellent clinical performances though these restorations do not require the cutting tooth substance. Furthermore, recent restorative materials with the surface pre-reacted glass ionomer filler(S-PRG filler) are expected to prevent biofilm attachment on their surface and also increase the acid resistance of adjacent tooth substance. This function is believed to be provided by various ions released from the S-PRG filler. This function is also very effective to prevent caries around the orthodontic brackets when the S-PRG containing adhesive is used. At the same time de-bonding brackets became very easy because of the less invasive tooth surface treatment for bonding. Furthermore, an innovative technology to enable the reversible bonding with a light irradiation is expected to be applied to various dental treatments in near future. The advanced MID is believed to be promoted by those developments in dental materials.

Fillippo Cardinali

Style Italiano
Endodontics

DATE

2nd February 2023

VENUE:

ASSEMBLY 1

TIME:

13.00 – 14.15

LEDGE PREVENTION AND MANAGEMENT

Endodontic treatment is a predictable procedure with high success rates: shaping plays a very important role in the outcome of the therapy.

During the shaping, the original anatomy respect allows preparing the canal saving radicular dentine, creating an ideal shape for a deep cleaning and a three-dimensional obturation. The execution of shapes that fit and meet the original anatomy decreases the risk of creating alterations of the root canal itself, such as ledges or transport, regarded by the international scientific literature as factors leading to the failure of the therapy. The respectful shaping of the root canal system is achievable using a proper shaping technique and getting the benefits of the evolution of the rotary file systems: thanks to the heat treatment of the rotary files, a totally mechanical shaping can be safely performed by the clinician, getting high quality and original anatomy respectful shaping, even in complex anatomies and even using a reduced number of instruments. The creation of a ledge during the shaping is the most common iatrogenic damage to the endodontic anatomy and it can be created by manual and rotary files. Once created, its management is crucial to complete the shaping the cleaning and the obturation at the proper working length to not decrease the outcome of the treatment. Aim of the lecture is to focus first the attention on the proper use of the rotary files in order to get a shaping respectful of the original endodontic anatomy, sharing protocols and tips to manage complex anatomies in the daily practice; the second part of the lecture focus on the ledge management, showing tips to ease the re-negotiation of the canal up to the working length.

Aim of the lecture is to highlight how the knowledge of the shaping techniques are more important than the rotary files, sharing protocols and tips to manage even iatrogenic mishapes once created

ML02

Prof. Dr. MED. Dr. MED. DENT. Ti-Sun Kim, EMBA

University of Heidelberg

DATE

2nd February 2023

VENUE:

MERAK 1

TIME:

13.00 – 14.15

BEYOND THE OBVIOUS BENEFITS OF IMPLANTS

Decades after the first dental implant was set, the placement of dental implants nowadays is considered to be a reliable therapy option. It has a high 10-year survival rate if the correct indication is given and the procedure is done according to the guidelines.

However, this is just one part of the reality. To get a 360 degree view we, as dentist, have to consider the risks for the patients in term of peri-mucositis, peri-implantitis, its therapy options/prognosis, its impact on general health in long-term, especially considering the aging population.

In this lecture a critical reflection on implants is done and how we can most likely reduce an unfortunate outcome.

CLINICAL CONSIDERATION IN ENDODONTIC TREATMENT

drg. Bambang Nursasongko, Sp.KG, Subsp. KR(K)

Universitas Indonesia

DATE

2nd February 2023

VENUE:

MERAK 2

TIME:

13.00 – 14.15

Endodontic treatment/RCT has become a common procedure in treating pulpal and periradicular diseases. Successful RCT is characterized by the absence of clinical symptoms and without radiographic evidence of periodontal involvement. The accepted basic principles of successful endodontic therapy are the endodontic triad such as access opening, root canal cleaning and shaping, and 3D hermetic obturation. Without knowledge of the axioms and anatomy of the pulp chamber it will be difficult to fulfill these requirements. Incorrect access opening can cause perforation in various directions. This procedure is sometimes also not always able to be done from the occlusal/lingual because the position of the teeth is not possible. Perception of the shape of the pulp chamber in theory and clinical reality is very important to understand with the many anastomosis and additional root canals. Knowledge of root canal sterilization and medication will be very influential in getting good treatment results. Giving systemic drugs such as antibiotics is often a routine thing to do even though it is not always necessary. The use of rubber dams is currently the ideal gold standard for isolation. But unfortunately it is not always possible because of the availability of it and the ability of the patient. Various modern root canal preparation and obturation tools and techniques have been introduced. The diversity of types of tools that exist often makes operators trapped in changing tools and systems which ultimately becomes confusing. Therefore, to get the success of treatment, it is necessary to do a good clinical consideration.

ML04

drg. Adityo Widaryono, Sp.Perio(K)
Universitas Indonesia

DATE
2 February 2023
VENUE:
MERAK 3
TIME:
13.00-14.15

BASIC TISSUE REQUIREMENT FOR PERIIMPLANT TISSUE HEALTH

The success of dental implants is not only measured by the success of implant placement surgery. Restoration of masticatory function and long-term implant tissue health are more appropriate to describe the success of dental implants. One of the factor for periimplant tissue health is the availability of adequate hard and soft tissue. The references state that there is a minimal dimension of periimplant tissue that related to the health of that tissue and the long-term maintenance of the implant. On this occasion, we will discuss the minimum requirements for periimplant tissue to increase long-term implant success

DIGITALLY-GUIDED DIRECT COMPOSITE RESTORATION RESHAPING THE MINIMALLY INVASIVE CONCEPT

Prof. Keiichi Hosaka, DDS., Ph.D
Tokushima University

DATE

3 February 2023

VENUE:

MERAK 3

TIME:

09.00-10.15

Over the past decades, the evolution of adhesive dentistry has expanded the range of applications of direct composite restorations and revolutionized modern restorative treatments. Direct composite restorations are frequently provided as esthetic and functional clinical treatments following the minimal intervention dentistry concept, even in extended cavities including endodontically treated teeth, replacing missing teeth, and full mouth reconstruction.

However, free-hand recreation of anatomical morphology using resin composites may be technique sensitive and challenging, especially for the aforementioned complicated cases. It is evident that a better outcome is possible if the appropriate morphology is planned and simulated before treatment and can be accurately transferred to the treated tooth.

The lecture and hands-on workshop will introduce digitally driven direct composite restoration with highly filled single-shade injectable resin composites and different designs of clear indices fabricated with a partial or full digital workflow and comprehensively describe related clinical procedures and advanced adhesive/resin composite materials.

ML06

ORTODONTI – ORTOPEDI DENTOFASIAL PADA PASIEN ANAK DALAM PERIODE TUMBUH KEMBANG

Prof. Dr. drg. Miesje Karmiati P., S.U, Sp.Ort(K)

Universitas Indonesia

DATE

2nd February 2023

VENUE:

MERAK 1

TIME:

14.30-15.45

Ilmu Ortopedi merupakan cabang ilmu Kedokteran yang memiliki fokus pada sistem muskuloskeletal serta tata laksana perawatan pada tulang, sendi, ligamen dan tendon. Selain itu, ilmu Ortopedi juga berkaitan dengan tindakan bedah atau manipulasi sistem muskuloskeletal. Saat ini, ilmu Ortopedi telah berkembang secara signifikan untuk mengatasi semua masalah dan penyimpangan yang mempengaruhi sistem muskuloskeletal pada individu dari segala usia, baik secara operatif, maupun non operatif. Tujuan utama dari perawatan ortopedi adalah untuk mempertahankan atau memulihkan sistem muskuloskeletal.

Ilmu Kedokteran Gigi memilik beberapa cabang keilmuan, termasuk di dalamnya ilmu Ortodonti dan Ortopedi Dentofasial. Ortodonti merupakan ilmu Kedokteran gigi spesialistik yang bertujuan mendiagnosis, mencegah dan mengoreksi malposisi gigi serta malrelasi skeletal, sedangkan Ortopedi Dentofasial meliputi tindakan yang bertujuan untuk mengarahkan potensi tumbuh kembang kompleks dentokraniofasial dengan pemberian aplikasi gaya dan/atau stimulasi gaya melalui berbagai macam alat miofungsional serta ortopedik dentofasial.

Kedua tujuan tersebut bersinergi di dalam perawatan Ortodonti - Ortopedi Dentofasial yang proses perawatannya mencakup melakukan supervisi, memandu, dan mengoreksi pertumbuhan dan perkembangan struktur dentofasial; perbaikan posisi gigi; perbaikan malrelasi dan malformasi struktur terkait; serta penyesuaian relasi antara gigi geligi dan lengkung rahang. Intinya, tahap perawatan Ortopedi Dentofasial memandu potensi pertumbuhan dan perkembangan kompleks dentokraniofasial, yang sebagian besar terjadi pasien anak dalam periode tumbuh kembang; yang kemudian dilanjutkan dengan tahap perawatan Ortodonti untuk mendapatkan susunan gigi dan oklusi yang harmonis antar kedua lengkung rahang.

Dr. drg. Taufan Bramantoro, M.Kes

Universitas Airlangga

DATE

2 FEBRUARY 2023

VENUE:

MERAK 2

TIME:

14.30-15.45

MAKE IT MORE PERSONAL AND POWERFUL: INTRODUCING ARTIFICIAL INTELLIGENCE AND SPATIAL ANALYSIS FOR DENTAL HEALTHCARE MARKETING

Marketing efforts of professional dental healthcare services that was carried out without correct analysis and planning will result into the risk of determining wrong target of market and lead into the market cost inefficient and the risk of violating regulations and codes of ethics related to promote health services. Currently, marketing efforts have shifted from being only focused on product or service offerings to be more focused on the presence of service providers as solutions to the problems experienced by the target market. The precise positioning of the presence in service provider as a solution for customers requires a more comprehensive, dynamic, and sharp analysis of the target market mapping. The existence of Artificial Intelligence (AI) technology and spatial analysis with the ability to analyze data comprehensively and dynamically has enormous potential to meet the needs of demographic analysis and consumer behavior patterns in order to identify, maintain, and strengthen the value of dental health service profession in the target market. The application of AI and spatial analysis can make the application of marketing strategies for dental health services more personal and powerful.

ML08

Sri Fitriyani, S.Si., M.Si.,Ph.D

Faculty of Dentistry,
Universitas Syiah Kuala

DATE

2 February 2023

VENUE:

MERAK 3

TIME:

14.30-15.45

GELATION AND CHARACTERIZATION OF CHIRAL COMPOUND MONOMER

Gelation has been applied in many applications such as dentistry, drug delivery, wound healing, biosensor, chiral recognition, capture pollutant and removal, etc. Chirality is one of the most important structural features in the biological systems. Chiral moleculs are available in nature or can be synthesized. The self-assembly of chiral moleculs in the solvent occurs through non-covalent bonding interactions including hydrogen bonding, van der Waals bonding, and π-π stacking or chemical interaction. Transformation of Sol-Gel state can be induced by solvent, light, pH, temperature, etc. The construction of gelation depends on the design of the molecule. These are some fundamental concepts to have a strong understanding of the gelation process. However, the lack of direct observation and focus on the entire process limits the current understanding of the gelation process. Here, we focus on the synthesized of chiral monomer based on cholesterol derivatives and natural chiral monomer of dental alginate to study the gelation properties. Then, characterization of the gelation used some instruments including Fourier-Transform Infrared Spectroscopy (FTIR), Temperature dependent 1H-NMR, Circular Dichroism (CD), UV–vis, Transmission Electron Microscopy (TEM), Scanning Electron Microscope (SEM) and Thermogravimetric Analysis (TGA) for investigating the gelation process, network structure, interaction and Tgel concentration. One predesigned chiral steroid base compound cholesteryl and two achiral compounds with various alkyl chain length have been successfully synthesized. Formation of asymmetric self-assembled constructions via self-assembly of achiral molecules in chiral environment was investigated. Due to steric hindrance, cholesterol derivative could not form gel in any kind of organic solvents. On the other hand, Achiral molecule formed achiral gels in many kinds of solvent. The results suggest that polarity, side branch and intermolecular forces are the key factors for the gelation. Based on the Temperature-dependent 1H NMR analysis of the fabricated gels show that van der Waals forces and π- πinteractions are key factors leading to self-assembly of molecules result in three-dimensional networks. In addition, Cholesterol derivative was used as a chiral dopant added into achiral compounds forming asymmetric self-assembled constructions. The results indicate that doping of cholesterol derivative into achiral gelators giving a chiral environment leadinto the formation of helical constructions. Dental alginate can form gel in water. Gelation time depends on the W/P ratio, type of dental alginate (normal or fast set), and temperature. The construction of gel dental alginate was observed by SEM and the temperature stability of gel formation was measured by TGA.

BUGS, BIOACTIVES AND BIOINSPIRATION: TOWARDS DENTAL TISSUE REPAIR AND REGENERATION

Prof. Alastair J Sloan, BSc, Ph.D, PGCert, FHEA, CBiol, FRSB, FICD, FFDRCSI

Melbourne University

DATE

2 February 2023

VENUE:

ASSEMBLY

TIME:

14.30-15.45

Our mechanistic understanding of the biological processes underpinning key events during dental tissue repair can be translated into novel therapies to improve on the relatively inefficient traditional restorative approaches and may provide a translational solution to address the effects of dental disease and improve the longevity of restorations. However, control of the polymicrobial infection is critical if any subsequent tissue regeneration strategies are to be employed. Current materials have little or no antimicrobial activity. To develop novel treatment modalities for vital pulp therapy and 'regenerative' endodontics, it is essential that morphological, functional and easily manipulated model systems are employed to facilitate the understanding of pulpal infection and subsequent tissue repair responses. Understanding how opportunistic pathogens colonise the pulp and direct the disease process can be improved by using appropriate 3D model systems which allows for observation of bacterial growth patterns and host tissue responses. From a regeneration viewpoint, it is widely accepted that progenitor/stem cells reside within the post-natal dental pulp and studies suggest several niches of mesenchymal progenitor cells may be present. These progenitor cells are essential for dentine regeneration following injury. Understanding the nature of these progenitor cell populations, their ability to function in highly compromised environments and determination of their potentialities in terms of specificity of regenerative response may help direct new clinical treatments including development of biologically based new generations of clinical materials. This talk will highlight some of our work developing liposomal carriers for antimicrobials for dental treatment and how we have developed 3D tissue models to understand bacterial interaction with dental tissues, assess novel treatment modalities to control infection and also improve our understanding of dental pulp stem cell function to facilitate tissue repair – both for dentine/pulp and also for bone.

ML10

Dr. drg. Aditya Wisnu Putranto, Sp.KG, Subsp. KR(K)

Universitas Indonesia

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

16.00-17.15

THE EVOLUTION OF TECHNOLOGY IN CONSERVATIVE DENTISTRY: FROM ENDODONTIC TO RESTORATIVE

Nowadays, restorative and endodontic and restorative treatment keep challenging. An introduction of a new material lead to enhancement the quality and predictability of the result. Endodontic treatment has been changed for last several years because of the introduction rotary NiTi combined with pre-heat treatment instrument that make it more flexible but still have a good performance when shaping the root canal compared to conventional NiTi instrument. Restoration in conservative dentistry can be improve by using the latest material such as universal adhesive that can adapt to a dentine /enamel in any moisture condition; nano-ceramic composite resin that easier to sculpt and polish; and bulk-fill material that can be applied 4 to 5 mm thickness of material in the cavity before curing without any loss of polymerization. Those materials combined with a good light-cure device and polish tools will give an esthetic result. All of these treatment in conjunction with a magnification tools (dental loupes or dental operating microscope) and good isolation procedure (rubberdam technique) can lead to predictable and excellent result. In conclusion vast majority of restorative and endodontic treatment can be done effectively with care and right armamentarium.

drg. Nieka Adhara, PhD, Sp.KGA, K-KKA

Universitas Indonesia

DATE

2 February 2023

VENUE:

MERAK 2

TIME:

16.00-17.15

DEVELOPMENTAL DENTAL DEFECT OF PRIMARY TEETH AND ITS CONSEQUENCES IN CHILDREN

Developmental dental defects (D3) in primary teeth are now considered a common problem with long-life consequences in children. It shows the alteration in quantity and quality of dental hard tissue. Parents' awareness, due to the myth that permanent teeth will replace the primary teeth, and unfavourable infants' behaviour towards oral home care may increase the susceptibility of dental caries in primary teeth with D3. Early childhood caries (EEC) is still the main issue worldwide, including Indonesia. ECC may disrupt the development of the stomatognathic system, as well as the growth and development of permanent teeth, and affect the children's quality of life. D3 can be localized or generalized and associated with etiological factors that originated genetically or environmentally. Any events during the prenatal period may lead to D3 in primary teeth, such as malnutrition, infection, and metabolic syndromes. Dental practitioners should be able to identify D3 in primary teeth as soon as the primary teeth emerge in the oral cavity, provide effective dental health education (DHE) to parents/caregiver, plan recalls for monitoring the child's dental health and reinforce parents'/caregiver's awareness of the dental health. Dental practitioners also need to consider a collaborative strategy through an interprofessional approach during antenatal care until childhood period in order to prevent the occurrence and morbidity due to D3 in primary teeth.

ML12

PERI-IMPLANT SOFT TISSUE MANAGEMENT

Dr. drg. Anandina Irmagita, Sp.PM(K)

Universitas Indonesia

DATE

10 OCTOBER 2019

VENUE:

NURI 1,2

TIME:

13.00-14.00

Indonesia, as an archipelago which consists of more than 17.000 islands, has some difficulties in delivering thorough and proper even dental services to the community. This condition happened due to the uneven distribution of general and specialistic dental health personnel in this country. Teledentistry can be offered as one of the solutions to overcome this obstacle, although its application has not been widely used in Indonesia prior the COVID-19 pandemic era. The pandemic status also influences the growth of teledentistry in Indonesia. Several studies, regarding teledentistry performed during the pandemic period, which includes dentists' perceptions toward its application and also from patients' perspective, had already been done. Majority of teledentistry services that was provided in Indonesia during this time were teleconsultation, disease screening, and treatment planning. The application of teledentistry in Indonesia might poses some challenges, however its potency of to be further developed and explored are still wide open.

HUMAN IDENTIFICATION: DENTIST'S FOREFRONT ROLE IN DELIVERING SCIENTIFIC EVIDENCE

drg. Nurtami, Ph.D., Sp, OF(K)

Universitas Indonesia

DATE

2 February 2023

VENUE:

SUMMIT

TIME:

16.15-17.30

Human identification covers the scope of living and dead individuals to investigate crime, negligence, fraud, or abuse in forensics. Fingerprints, dental, and DNA are the primary methods for human identification. Dental professionals may be involved in the process, review, evaluation, and presentation of objective dental and DNA evidence for legal purposes. A competent dentist must be able to perform a comparative dental method in human identification by comparing dental antemortem and postmortem information. A forensic-trained dentist can give additional information on race, sex, age estimation, rugoscopy, cheiloscopy, and bitemarks, as required in the identification process. Forensic-trained dentists can also obtain DNA from dental and oral cavities, although DNA profiling requires special biomolecular analysis skills. Thus, understanding basic dental science, clinical dentistry, and medicolegal places the vital role of dentists in delivering scientific evidence in human identification.

ML14

LECTURER OF CAD/CAM (CEREC, INLAB, CERAMIC MATERIALS, 3D-PRINTING) AND 3D-IMAGING INCLUDING INTEGRATED IMPLANTOLOGY, GUIDED SURGERY AND IMPLANT RESTORATIONS IN GERMANY, EUROPE, MIDDLE EAST AND ASIA

Dr. Gerd Frahsek

Department of Dentomaxillofacial Radiology, Medical University of Lublin, Poland

DATE

3 February 2023

VENUE:

ASSEMBLY

TIME:

09.00-10.30

In the last years 3D printing became more and more important in dentistry. Various clinical cases that benefit from this technology will be demonstrated. The most modern 3D printing system, Primeprint Solution made by Dentsply Sirona, will be shown and compared to other devices in regards to handling, reliability, efficiency and safety, especially for the production of medical appliances.

In prosthetics 3D printing can be used to create models to check, adjust or finalize restorations e. g. through veneering. For prefabricated (shell) temporaries and prototypes of complex restorations 3D printing is ideal. If individual trays cannot be avoided, 3D printing is an efficient way of production. Printed surgical guides for guided implantology workflows as well as splints have an even better fit compared to milled appliances.

UPDATE ON BIOACTIVE BIOCERAMIC MATERIALS IN DENTISTRY

Arief Cahyanto, DDS., M.Eng., Ph.D

University of Malaya

DATE

3rd February 2023

VENUE:

MERAK 1

TIME:

09.00 – 10.15

Bioactive bioceramic materials are a breakthrough in the medical and dental fields. These materials are capable to induce cell proliferation, differentiation and support tissue regeneration. Recent research trends in bioactive bioceramics led to application in bone, dentin, and pulp regeneration, namely as bone substitute, endodontic sealers, cements, root repair or filling materials as well as material of choice for vital pulp therapy in pulp exposure cases. . The superior advantages of these materials include their high biocompatibility, bioactivity and excellent physicochemical properties. The bioactivity performance are supported by the release of Ca^{2+}, PO_4^{3-}, and CO_3^{2-} ions which attract the osteoblast and osteoclast at bone as well as fibroblast, cementoblast, odontoblast and pulp cell differentiation in vital pulp structure. Here we will discuss the updates happening and further study trends on bioactive bioceramic materials in the dental field application.

ML16

drg. Dhanni Gustiana, Sp.BM

DATE

2 February 2023

VENUE:

NURI 1

TIME:

14.30 – 15.45

RECENT ADVANCES TREATMENT IN TMJ: FROM CONSERVATIVE TO ARTHROSCOPY

Symptoms of Temporo Mandibular Joint (TMJ) disorders sometimes go away without any treatment, however, symptoms of TMJ disorders often persist and require treatment. In order, the initial therapy for TMJ disorders is the administration of medicine, with the purpose is relief of pain or as an adjuvant to other therapies. Medicine that are generally given are analgesics, anti-depressants and muscle relaxants. The next stage is the use of occlusal appliances and physiotherapy,

If the abnormality persists or the initial diagnosis indicates a diagnosis that requires surgery, the surgical options of choice are arthrocentesis, trigger point injection, arthroscopy, modified condylotomy, open surgery and total joint replacement. There is no primary choice for the treatment of TMJ disorders, often all types of treatment are carried out together because TMJ disorders can occur in all TMJ structures, nerves, muscles, bones, blood vessels, synovial membranes and discs. For this reason, the accuracy of the diagnosis of TMJ is very crucial.

Currently, TMJ intra-articular surgery can be performed using arthroscopy, which is a minimally invasive procedure using a camera with 3 levels of care, level 1 (arthroscopic lavage), level 2 (arthroscopic lysis, “blind sweep” and lavage), Level 3 (removal). Of pathology, disc repositioning and needle working instrument)

THE DAILY USE OF CBCT

Lect. Penporn Luangchana, D.D.S, M.Sc.

Mahidol University

CBCT is the 3-dimensional x-ray regularly used in the dental field. There are many advantages over medical CT, such as its accuracy, lower costs and lower radiation dose. However, its dose is higher compared to 2-dimensional imaging. The justification before the CBCT x-ray is mandatory. CBCT is commonly used in dental implant planning, guided surgery, impacted evaluation, and endodontics. This lecture will review basic knowledge of the CBCT machine, its function, and its application in dental practice. This knowledge will improve the utilization of CBCT in daily practice including the new technology (Low dose technology) and example of clinical practice.

DATE

3rd February 2023

VENUE:

MERAK 3

TIME:

09.00 – 10.15

ML18

Prof. Dr. drg. Sarworini B Budiardjo, SpKGA, K-KKA

Universitas Indonesia

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

09.00 – 10.15

FAKTOR RESIKO MALOKLUSI ANAK SELAMA PROSES PERTUMBUHAN DAN PERKEMBANGAN KOMPLEK KRANIOFASIAL.

The head, face, and oral cavity are craniofacial complexes in the form of human body structures that are different from the structure of the body in general. The craniofacial complex structure gives an individual a unique identity, consisting of the maxilla, mandible, palate, temporomandibular joint (TMJ), and teeth, each of which offers valuable paradigms for studying development, structure, and function. Growth patterns, variability, and timing for the development of craniofacial complexes are associated with various mechanisms of stomatognathic function. It begins from the initial stage of development of human growth in the intra-uterine period, the foetus is 4-6 weeks old. The craniofacial apparatus forms parts of the stomatognathic system, which collaborate with each other to carry out stomatognathic functions. Knowledge of the mechanisms that promote the formation of mandibles, palate, TMJ, and teeth will provide the basis for developing new regenerative strategies aimed at restoring normal structure and functioning.

HOW TO MANAGE CURVED CANALS

Assoc. Prof. Dr. Jeeraphat Jantarat, D.D.S, M.D.Sc, Ph.D

Mahidol University

DATE

3 February 2023

VENUE:

NURI 1

TIME:

08.00 – 09.15

Management of curve canal is always challenging. Many dentists facing with some complications such as ledge and separate instrument. Curve canals can be classified in many types and some are not as difficult to manage as it appears. Modern rotary instrument can reduce chance of those complications The course will present modern technology to manage root canal procedures in complex anatomy case such as curve canal, and to make clinicians understanding its complexities, and possibilities and limitations of current available techniques. The clinician will practice root canal instrumentation and demonstration of obturation with warm vertical technique. After the course, the participants will learn how to instrument curve root canal effectively and safely

ML20

Dr. Fillippo Cardinali

Founder Style Italiano Endodontic

DATE

3rd February 2023

VENUE:

Assembly Hall

TIME:

10.30 – 11.45

THE ULTIMATE BOSSTER TO INCREASE THE QUALITY OF YOUR ENDODONTIC TREATMENT

The Outcome of the Endodontic treatment depends not only in the proper shaping, cleaning and packing of the canal, but even on the maintenance of an high level of infection control during the whole treatment. Infection Control in Endodontics, is often associated to the Cleaning during the treatment; cleaning is an important stage of the Endodontic treatment ad it means the removal of bacteria from the root canal system, but it's just one out two components of the Infection Control. The second one is the Asepsis and it's at least as important as the Cleaning. Asepsis means to prevent bacteria contaminate the root canal system and the operator do take care of the Asepsis for the whole treatment. A good Asepsis increases the efficiency of the Cleaning in Endodontics and prevents an early failure due to microleakage in Restorative Dentistry, never forgetting even that prevents transmission of virus as the coronavirus through aerosols formed during medical procedures. The Rubber Dam plays a crucial role on the Infection Control and its proper use increases, according with the international scientific literature, the success rate of the endodontic treatments. The application of the rubber dam is an easy, essential and accessible step for all practitioners and it represents a simple and affordable solution for the practitioners who want to perform their job according to correct biological and ethical guidelines.

Aim of this lecture is to go deep in protocols useful to easily apply the rubber dam during Endodontic treatment even in complex cases.

WHEN TEETH ARE NOT TEETHING

Assoc. Prof. Pattarawadee Leelataweewud, DDS, MS

Mahidol University

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

10.30 – 11.45

Anomalies in tooth forming and eruption are not uncommon. Many children and adolescents are suffering from these anomalies. The prevalence of missing teeth has been reported and varied among population, unknown for anodontia, oligodontia as 0.3%, hypodontia ranges from 1.6 to 6.9%. Most etiologies are inherited, syndromic or non-syndromic but could also be acquired both by local and systemic factors. Many disorders related to delayed tooth development and eruption. Tooth developmental process takes time and is highly sensitive which might be interrupted by variety of causes. Some medical treatment for systemic involved diseases or disorders can disturb these processes as well. Prevention, detection, investigation, dental and multidisciplinary approaches are important and timewise.

Common and relatively rare condition, and consequences dentists may come across in children and adolescents will be reviewed with example of cases. Diversity of clinical manifestations urges systematic approach of each case. Interprofessional and multidisciplinary care are in need.

ML22

Prof. Jin-Woo Kim, DDS, MS, Ph.D

Ewha Womans University

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

10.30 – 11.45

CUSTOMIZED ORAL AND MAXILLOFACIAL SURGERY BASED ON 3D-PRINTING TECHNOLOGY AND RELATED RESEARCHES ON XR AND AI

Recent developments in 3D printing technology and the introduction of digital dentistry have made it possible to fabricate patient-customized simulations and individualized dental devices. CAD/CAM technology has enabled preoperative virtual simulation according to the treatment plan, while 3D printing technology plays a role in the application of the virtual preoperative simulation to the surgical field. In addition, metal 3D printing using selective laser sintering allows the fabrication of individualized bone fixation plates and bone reconstruction materials.

Virtual preoperative simulations facilitate precise diagnosis and treatment planning, while the integration of 3D printing technology enables accurate implementation of the treatment plan in the operation. Although several studies have described computer-assisted virtual planning for dentistry, especially for jaw reconstruction and orthognathic surgeries, accurate application of the prefabricated device to the determined location during surgery remains a challenge, along with the lack of evaluation of the effectiveness and accuracy of 3D-printed plates and osteotomy guide for surgical implementation.

In this lecture, the accuracy, safety, and stability of individualized oral and maxillofacial surgery based on 3D-printing technology would be demonstrated. Also, I'd like to share my current research regarding XR (eXtended reality) for collaborative simulation and actual application in operation room, and AI-based diagnosis and prediction.

drg. Leonard C. Nelwan, Sp.Pros, FISID, FITI

President of Indonesian Prosthodontic Society and Fellow of International Team of Implantology (ITI)

DATE

3 February 2023

VENUE:

MERAK 3

TIME:

10.30 – 11.45

MORPHOLOGY DRIVEN TOOTH PREPARATION FOR INDIRECT RESTORATION

The development of technology in dentistry continues to give us innovations and new treatment procedures which allow the preservation of tooth structure. The more tooth structure is preserved, the more durable an indirect restoration will be. In the past, we were taught to prepare teeth with a certain thickness to compensate for the manufacture of indirect restorations which require minimal material thickness to prevent the restoration from fracture due to chewing pressure. In the new era, with the development of zirconia materials, dentists can perform minimal preparation but still produce strong and esthetic restorations. Impression accuracy can also be done with an easier and faster protocol using CAD-CAM technology. Therefore, to establish one tooth preparation, it is required to have a comprehensive knowledge in tooth structures, material and the occlusion

ML24

THE MECHANISM OF BONE RESORPTION INDUCED BY INFILTRATION OF ORAL SQUAMOUS CELL CARCINOMA

Prof. Tohru Ikeda, D.D.Sc., Ph.D

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

10.30 – 11.45

Bone destruction caused by direct invasion or hematogenous metastasis of tumors is not rarely seen in patients of many kinds of cancers. It is well known that prostatic cancer and breast cancer are highly metastatic to the bone. Direct invasion into the bone is seen with relatively high frequency in oral cancers, most of which is oral squamous cell carcinoma (OSCC). Except for prostatic cancer, tumor invasion into the bone induces osteolysis, which leads to bone destruction, poor QOL and poor prognosis of the patients. Biological mechanism of bone resorption has been clarified to be induced by RANKL, which is expressed by osteoblasts and osteocytes. Interaction of RANKL and the receptor RANK, which is expressed in macrophage-derived osteoclast progenitor cells maintained with M-CSF dedicates osteoclast progenitor macrophages to differentiate into osteoclasts and finally induces osteoclastogenesis. However, RANKL is not widely expressed in OSCC. It has been reported that certain factors expressed in OSCC cells stimulates RANKL expression in stromal cells. In addition, TNF-α, which is expressed in OSCC might participate in the bone resorption. However, information to support these kinds of hypotheses is limited, the accumulation of supportive data is needed, and other unknown common mechanisms might be present. We have been studied the mechanism of OSCC-induced bone resorption and found that many of OSCC cells possessed potent osteoclastogenic properties from macrophages exposed to RANKL for 24h, which are defied as osteoclast precursor cells (OPC), but not from RANKL untreated osteoclast precursor macrophages. OPC do not express any osteoclast functions and are unable to differentiate into osteoclasts without further stimulation by RANKL. The osteoclastogenesis induced by OSCC cells was resistant to RANKL inhibitory agents, denosumab and osteoprotegerin, in contrast to conventional RANKL-induced osteoclastogenesis. We also found that OSCC-induced osteoclastogenesis was partly induced by extracellular microvesicles (ECV) generated by OSCC cells. Furthermore, we found that the osteoclastogenesis was effectively attenuated by cannabidiol, one of the cannabinoids that does not express psychotomimetic functions, effectively attenuated osteoclastogenesis induced by OSCC cells and did not affect RANKL-induced osteoclastogenesis. Recently, we analyzed soluble factors generated by OSCC cells and found that IL-1 expressed in OSCC cells stimulated both OSCC-induced osteoclastogenesis and conventional RANKL-induced osteoclastogenesis, and IL-1 inhibitors significantly attenuated the stimulatory effects on both osteoclastogenic pathways. In this meeting, effects of IL-1 on OSCC-induced osteoclastogenesis will be introduced and will consider the mechanism of bone resorption induced by infiltration of OSCC into the bone tissue.

HOW DENTISTS SHOULD PREPARE FOR TREATING AGING PATIENTS

Prof. Dr. drg. Lindawati S. Kusdhany, Sp.Pros(K)

Universitas Indonesia

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

10.30 – 11.45

The population of older adults continues to increase globally, including in Indonesia. It is estimated that the population will continue to increase up to 28.8 million or approximately 11% (eleven percent) of the population in Indonesia. This condition increased medical complexities, reduced mobility and cognitive function, and more. Improved medical management of various health conditions of older adults leads to increasing demand for dentists to have extensive knowledge of oral manifestations of systemic diseases. Dentists must consider if they are prepared to serve their aging patients properly. Dentists should be aware of multiple common oral conditions when treating older adults. The OSCAR approach and P3G instruments (Pengkajian paripurna Pasien Geriatri) will be considered a comprehensive treatment plan for older and geriatric patients. Communicating with older patients is an essential component. Maintaining the oral health status of older adults needs multiple approaches that should focus on prevention and dental treatment. These topics are also included in the presentation

ML26

Dr. Hsin Ming Chen

Chung Shan Medical University

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

11.00-12.00

TITLE: OVERVIEW OF SPECIAL CARE DENTISTRY AND TAIWAN EXPERIENCE

Special care dentistry (SCD) is a new speciality comparing with the other specialities in Dentisty. Special care dentistry or special needs dentistry is defined to care people with physical, sensory, intellectual, mental, medical, emotional or social impairment or disability, or a combination of all. In American, Special Care Dentistry Association includes three boards, they are Academy of Dentistry for Persons with Disabilities, American Association of Hospital Dentists, and American Society of Geriatric Dentistry. In Taiwan, Taiwan Association of Disability and Oral Health defines five fileds to be the work for people with special needs, they include dentistry for people with disability, hosipital dentistry, geriatric dentistry, long term care dentistry, and early intervention dentistry. In this talk, the story of SCD in Taiwan will be illustrated, it includes the construction of SCD system, the education, the insurance, and the system of specialists. Finally, the prospective blueprint of SCD in Taiwan also will be explained.

PRESERVATION AND RESTORATION OF TOOTH STRUCTURE

Prof. Hien Chi Ngo, BDS, MDS, Ph.D, Grad Cert HED, FPFA, FADI, FICD

Oral health centre of Western Australia

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

13.00-14.15

The modern approach to clinical dentistry relies on dentists taking the dual role of physician and surgeon. So, there is a need for a systematic approach to the clinical management of a healthy oral environment. Patients present with a range of different conditions and circumstances and while no single intervention is effective in all cases, it is possible to develop specific strategies and protocols that incorporate monitoring of outcomes for managing individual patients.

Despite continuing major advances in dental materials and techniques. The average longevity of a direct tooth coloured restoration is still hovering around 10 years. Restorative materials are still poor substitute for natural tooth structure. Teeth can withstand high mastication load because they are built using two very different materials, so it has been suggested that we should also replicate this design when rebuilding a tooth.

Minimal Intervention dentistry has changed the way we manage dental caries and the FDI had issued three important policy statements on this topic:

- Minimal Intervention in the Management of Dental Caries (2002),
- Classification of Caries Lesions of Tooth Surfaces and Caries Management Systems (2012),
- Salivary Diagnostics (2013).

It has now been clearly demonstrated that individuals can benefit substantially from the Minimal Intervention (MI) approach in managing dental caries. MI is based on a patient-centered non-surgical management of the disease and surgical repair of dental defects. When it comes to surgical repair, this should be done using Minimally Invasive techniques with the overall objectives being the preservation of tooth structure and tooth vitality.

Today, technological innovations have provided dental professionals with new tools and science has provided us with many possible ways of handling the above issues. This lecture aims at identifying important factors that govern clinical success, reviewing possible solutions and demonstrating practical ways at preserving and restoring tooth structure.

ML28

QUALITY CONTROL IN DENTAL EDUCATION: MALAYSIAN PERSPECTIVE

Prof. Dato' Dr Mohamed Ibrahim Abu Hassan, FASc DSPN, BDS, MDSc, PhD, FDS RCPS, FICD

Universiti Teknologi MARA Sunga Buloh Campus

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

13.00 – 14.15

The first dental school in Malaysia was established in 1971 and by 2012 there were 13 dental schools of which six are government and seven were private. During the early days there were no proper mechanism in monitoring the standards of delivery of dental education as school who would want to start a dental degree programme, would prepare their documentation and send to the Ministry of Higher Education their curriculum for approval. A joint technical committee was formed between Malaysian Dental Council (MDC) and Malaysian Qualification Agency (MQA) ro develop a standard to asses and monitor the delivery of dental programme. Every school will be assessed by a panel of three (3) member appointed by the committee. However, sometimes the assessment can be very subjective as panels may have their own perception or compare with their own school instead of the standards. Later as rubric system was develop to be aid the panels in the evaluation and this system gives a more objectives evaluation, unbiased and fairer.

IMPLANT TREATMENT DECISIONS & WHAT HAPPENS WHEN YOU TAKE THE WRONG PATH.

Assoc. Prof. Roy Judge, BDS, LDS RCS, MDSc, Ph.D

Melbourne University

During the provision of implant care there many critical steps that potentially impact on outcomes. This lecture will focus on the identifying some of the key treatment decisions and their impact on patient care. The evidence base for this lecture is a large practice based clinical study carried out by the Melbourne Dental School looking at the clinical outcomes of over 8000 implants placed and restored in Victorian practices. The data set recorded 104 variables per implant allowing for a large database which has subsequently been published via several journal articles.

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

13.00 – 14.15

ML30

A NEW DEVICE TO PURIFY PLATELET-RICH PLASMA (PRP) FROM LEUKOCYTES BASED ON CELL

Subhaini, S.Si., M.Si., M.Sc., Ph.D

Universitas Syiah Kuala

DATE

3 February 2023

VENUE:

MERAK 3

TIME:

13.00 – 14.15

Platelet-rich plasma (PRP) can stimulate the proliferation of stem cells and have a positive effect on tissue repair. Although many commercialized PRP preparation kits are already on the market, first-line clinical workers are still not satisfied with most of the PRP kits. The work of commercial PRP kits is based on the density of blood elements. However, the blood elements are very close in density which makes the separation challenging. Therefore, the mentioned commercialized kits are generally contaminated by leucocytes and erythrocyte. In this study, a home-designed PRP device was developed to use a separation membrane with adequate cut-off pore size of 5 µm, 3 µm and 2 µm for the groups of H5M, H3M, and H2M, respectively, to be placed in the middle of the centrifuge tube. The home-designed H2M showed a very promising results regardless of the final volume (1.82±0.09 ml), platelet yield (8.39±0.44 %), Red Blood Cells (0 %), White Blood Cells (0 %), and Relative Concentration of Platelet Increment value (225.09 %). Further, it showed a good result in cell viability and cytotoxicity and confirmed a good multilineage potentials. The concentration in PRP prepared by group H2M was relatively stable and far above average. All the fibrin fibers were linked together as bridging strands or strings and turned into an inter-connected porous structure for nutrients transportation and regenerative cell migration. We believe that the home-designed group H2M should have a great potential to develop into the final product to meet the requirements of first-line clinical workers.

FACING THE AGING SOCIETY: ORAL HYPOFUNCTION

Prof. Chuan-Hang Yu, DDS, MS, Ph.D

Chung Shan Medical University

DATE

3 February 2023

VENUE:

NURI 1

TIME:

13.00 – 14.15

Many studies reported that broken root canal instrument can be due to several things, that is from its characteristic of rotary NiTi Instrument, canal geometry and tooth type, operator experience, and instrumentation technique. A treatment protocols for removing brokend instruments involves an orthograde or surgical approach. Instrument retrieval by an orthograde approach is often considered rather than surgical approach and the success rate for its technique ranging from 55% to 87%. An orthograde approach consist of bypassing the instrument and removing the instrument by using ultrasonic device, microtube extraction, forceps/pliers, and other methods. The use of dental operating microscope into to retrieve the separated instrument is essential, allowing the operator to gain better visualization of the coronal aspect of the broken instrument. The combination of dental operating microscope and developed technique have made broken instrument removal more predictable.

ML32

Prof. Norifumi Nakamura, DDS, Ph.D

Kagoshima University

DATE

3rd February 2023

VENUE:

ASSEMBLY

TIME:

: 14.30 – 15.45

VISUALIZATION OF CLEFT PALATE SPEECH TO IMPROVE THE QUALITY OF ARTICULATION USING A NOVEL NEURAL NETWORK SYSTEM.

The goal of cleft palate (CP) repair is to achieve normal speech, but there is no standard procedure to ensure that patients' speech will reach the same level as that of noncleft children. I have been working with Indonesian oral surgeons since the 1990s to develop cleft lip and palate treatment, but I still encounter the presence of serious speech problems in patients with CP, despite the development of cleft lip and palate surgery in this country. In addition, recent patient-reported outcome (PRO) measures have shown that patients are less satisfied with their speech. The bottleneck in improving speech outcomes in CP patients is that the surgeon cannot visualize the speech, making it difficult to feedback to the next surgery.

At Kagoshima University Hospital, we have established a surgical strategy for palatal repair, consisting of modified V-Y palatoplasty allowing conservation of the periosteum in the anterior maxilla, sufficient retropositioning of the palatal muscles, and production of a symmetrical levator sling. Postoperatively, speech management was provided by speech therapists, and the resonance of CP patients improved to almost the same level as that of Japanese noncleft children. However, with regard to articulation at age 4, 70% acquired normal speech, with the remainder showing abnormalities, including backing of the site of articulation.

To further improve speech performance, we are conducting speech visualization using artificial intelligence (AI) by medical engineering collaboration. With the newly developed Neural Network (NN) system for speech visualization, digital data on a patient's voice are immediately characterized by speech feature extraction, and the site of articulation using the system can be analyzed and classified into seven articulation areas: labial, alveolar, postalveolar, palatal, velar, uvular, and glottal. Thus, speech visualization of articulation disorders using the NN system successfully demonstrates changes in the site of articulation due to secondary palatal repair and speech therapy, allowing the surgeon to understand whether the palatal repair is helping to resolve the patient's abnormal speech.

I hope that this presentation will lead to a better understanding of cleft palatal speech and promote the development of CP treatment that will help patients in Indonesia be more satisfied with their speech.

APPLICATION OF TISSUE ENGINEERING APPROACH FOR ALVEOLAR BONE REGENERATION

Prof. drg. Muhammad Ruslin, M.Kes, Ph.D, Sp.BM(K)

Universitas Hasanudin

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

14.30 – 15.45

Background: While dental caries is a largely preventable condition, it still remains an important global public health problem, affecting 60–90% of schoolchildren and the vast majority of adults. The World Health Organisation (WHO) has officially endorsed the use of fluorides for population based prevention of dental caries since the late 1960s. The goals of community-based public health programmes are generally to provide regular, low-level exposure to fluoride in the community through appropriate means such as fluoridated water, salt, milk and fluoride toothpaste, maximising caries reduction while minimising fluorosis. Assessment of total fluoride intake in the population is challenging due to exposure to multiple dietary and non-dietary sources of fluoride as well as the difficulty in measurement of the amount of unintentional swallowing of toothpaste by young children and the difficulties in quantifying fluoride exposure. Due to practical difficulties in quantifying fluoride exposure, from all sources in individuals and at a population level, fluoride biomarkers have been suggested as alternative approaches to monitor deficient or excessive intakes of bioavailable fluoride. Fluoride concentrations in plasma, saliva, milk, sweat and urine have been suggested as biological markers for assessment of present or very recent exposure to fluoride whereas the fluoride content of nails and hair reflects intake over longer periods of time, whilst fluoride in bone and teeth are regarded as historic biomarkers. Results: Among the suggested fluoride biomarkers, urine is currently regarded as the most useful biomarker of recent exposure at a community level, with established normal values for 24h urinary fluoride excretion in children being published. More studies are needed to explore the best fluoride biomarker and quantify normal fluoride concentration of these biomarkers for populations exposed to wide ranges of fluoride, from very low water fluoride areas to endemic fluoride areas. Conclusion: In this presentation we will explore the association between total fluoride intake and recent biological markers of exposure to fluoride in children and suggestions on the best methods for monitoring fluoride exposure.

ML34

PENCEGAHAN DAN PENANGGULANGAN DINI KELAINAN ORTHOPEDIK DAN ORTHODONTIK GANGGUAN DENTOKRANIOFASIAL PADA ANAK SECARA HOLISTIK

Prof. drg. Heriandi Sutadi, PhD., Sp.KGA, K-KKA

Universitas Indonesia

DATE

3rd February 2023

VENUE:

MERAK 3

TIME:

14.30 – 15.45

Interseptik orthodontik dan orthopedik merupakan ilmu yang mempelajari perawatan kelainan gangguan maloklusi pada anak, sesuai definisi anak yang dimulai sejak pertumbuhan dan perkembangan janin dampai anak itu menjelang dewasa yaitu sekitar 18 tahun.

Berbagai teori dan perkembangan keilmuan, telah dipublikasikan sebagaimana perawatan interseptik ini tidak hanya meliputi geligi saja akan tetapi meliputi pertumbuhan dan perkembangan tulang kraniofasial dan yang erat kaitannya dengan faktor yang secara langsung dengan geligi seperti ; pertumbuhan tulang maxilla, mandibula, tulang sendi, Sedangkan yang tidak langsung dan erat hubungannya seperti ; postur berdiri, kebiasaan makan satu sisi. kebiasaan buruk mengisap jari, bernafas melalui mulut, menggigit benda tertentu, dsb

Adanya kelainan yang erat hubungannya dengan dentokraniofasial perlu segera ditanggulangi, agar kelainan yang akan bertambah parah atau bahkan merusak dapat segera dilakukan pencegahan bahkan perawatannya,

Berbagai pencegahan dan perawatan dilakukan dengan berbagai macam alat dan tehnik atau bahkan teori prediksi pertumbuhanpun telah diterapkan dan dilakukan untuk menanggulangi kasus ini, Akan tetapi tehnik cara, teori maupun alat yang digunakan masih terus dikembangkan. Sebagai contoh :

Upaya penanggulangan kasus cleft sudah mulai dilakukan semenjak dalam kandungan, baik dengan pencegahan maupun tindakan operasi dalam janin.

Penggunaan alat alat sudah berkembang dari yang sederhana sampai yang modern.

Tehnik pencabutan untuk menanggulangi kekurangan ruang sudah mulai ditinggalkan dan menggantinya dengan distalisasi dan pengambilan gigi molar 3.

Perawatan yang meliputi tindakan surgeri telah banyak dilakukan dan hal ini tidak bisa dilakukan secara sendiri sendiri akan tetapi dilakukan secara integrasi meliputi beberapa kompetensi agar tindakan dapat optimal dengan hasil yang sempurna..

Pada makalah ini akan dibahas apa saja yang perlu dipersiapkan dan dilakukan untuk pencegahan dan penanggulangan kelainan yang meliputi dentokraniofasial pada anak secara holistik.

RISK FACTORS OF DENTAL CARIES IN INDONESIA

Dr. drg. Iwany Amalliah Badruddin, M.Epid

Universitas Indonesia

DATE

3 February 2023

VENUE:

Summit

TIME:

14.30 – 15.45

Introduction. Dental caries is a global health problem and has the highest prevalence among all dental and oral diseases. The increasing trend of dental caries prevalence in Indonesia occurs in all age groups as shown from the 2007 to 2018 National Basic Health Research (RISKESDAS) data. The aim of the study was to examine the risk factors that influence the caries experience using Indonesian population data. **Methods.** RISKESDAS 2018 for oral health was carried out in 26 provinces by the Indonesian Ministry of Health as a cross-sectional study with a stratified/staged sampling technique. General health information, oral health, biomedical, and household data were collected. A multiple logistic regression analysis was used to obtain a risk factors prediction model for dental caries using the 2018 RISKESDAS secondary data for five age groups according to WHO criteria, namely 5, 12, 15 years old, adults and the elderly. **Results.** The prevalence of dental caries in each age group was 93.4%, 68.8%, 68.1%, 92.1% and 95.2%. The most influential risk factor in the group of children and adolescents, was the perception of dental health problems, with the association value of Odds Ratio (OR) ranging from 3.1 to 11.7. Socioeconomic factors and utilization of dental health services also showed a significant relationship with the caries experience of children and adolescents. The active smoking factor showed a strong association in the adult group (OR=1.7;95%CI 1.4-2.1) and the elderly (OR=1.3;95%CI 1.02-1.6). Other risk factors were gender in the adult group, and the adequacy of dentistry at the puskesmas at the provincial level for the elderly group. **Conclusion.** The risk factors for dental caries are different in each age group. This can have implications for dental caries prevention programs.

ML36

Prof. Stuart Dashper

Melbourne University

BIOMARKERS OF EARLY CHILDHOOD CARIES AND CARIES RISK ASSESSMENT TOOLS

The oral microbiome plays major roles in many oral diseases including early childhood caries (ECC). ECC afflicts up to 70% of children in some populations, with a subset of these children suffering from severe disease that can necessitate general anaesthesia and removal of multiple teeth. Saliva is an easily obtainable bodily fluid that contains oral bacteria indicative of the whole oral microbiome and may reflect the dysbiosis in oral bacterial communities associated with the clinical manifestations of ECC. Our studies demonstrate an ordered temporal development of the oral microbiome starting immediately after birth, describe a limited core oral microbiome and indicate that saliva testing of infants may help predict ECC risk. Caries risk assessment tools (CRATs) for individuals are currently being used in clinical dental practice, although the evidence for their efficacy is often limited, especially in children. The incorporation of microbiomic, or other biological data into CRATs is likely to increase their sensitivity and specificity and enable them to become useful tools for the prediction of ECC prior to irreversible tissue damage.

DATE

3 February 2023

VENUE:

NURI 1

TIME:

16.00 – 17.15

Dr. Nathaniel Simon Treiser

Harvard University

DATE

4 February 2023

VENUE:

ASSEMBLY HALL

TIME:

09.00 – 10.15

INTRALESIONAL STEROID THERAPY IN MANAGEMENT OF ORAL MUCOSAL DISEASE

Immune-mediated oral mucosal diseases represent a heterogeneous group of conditions characterized by mucosal inflammation, swelling, and ulceration, and associated pain, disability, and compromised oral-health-related quality of life. Locally directed immunomodulatory therapies are the mainstay of treatment, while certain situations require use of systemic agents. Even when topical or systemic therapies are effective, there can be residual areas of mucosal inflammation that remain refractory and continue to be symptomatic. Intralesional corticosteroid therapy is a simple office-based outpatient procedure that effectively delivers a locally intensive dose directly to the site of inflammation and can be highly efficacious in cases of isolated, localized, difficult to access, and refractory oral mucosal lesions. This talk provides a practical overview of the use of intralesional steroid therapy in management of oral mucosal inflammatory conditions, with emphasis on proper case selection, treatment protocols, and appropriate follow-up care.

ML38

Prof. Anne Marie Kuijpers-Jagtman, DDS, Ph.D, FDSRCSEng

University of Groningen

ORTHODONTICS IN PATIENTS WITH CLEFTS – OUTCOMES AND PITFALLS

The healthcare burden of children with clefts and their families is high, but there is no doubt that much has changed to the benefit of patients with orofacial clefts. The principal role of the interdisciplinary CLP team is to provide integrated care for children with clefts, and to assure quality and continuity of patient care and longitudinal follow-up. The orthodontist has proven to be an essential partner in the cleft palate team, n ot only responsible for the orthodontic and facial orthopedic treatment, but more importantly, he or she is also the guardian of the child's maxillofacial growth. Cleft orthodontists must have a long-term treatment perspective in mind for every step they take. I will present long term outcomes of treatment and the pitfalls and problems that may be encountered during the long orthodontic journey of a patient with an orofacial cleft.

DATE

4 February 2023

VENUE:

MERAK 1

TIME:

09.00 – 10.15

Dr. Henry Ho

USE OF LASER FOR DENTISTRY: BEYOND CUTTING & BURNING

The current impression of dental lasers by both general and specialists dental practitioners is an expensive tool with limited applications, used for cutting and burning hard and soft tissues.

In this presentation, different uses of dental laser for numerous disciplines in dentistry will be demonstrated with Fotona laser using both Nd:Yag and Er:Yag. We will show clinical cases with radiographic and histological outcomes and follow ups.

DATE

4 February 2023

VENUE:

MERAK 2

TIME:

09.00 – 10.15

ML40

Kara Monica Marie P. Achacoso, DMD

Dental Scientific Specialist

DATE

4 February 2023

VENUE:

Merak 3

TIME:

09.00 – 10.15

DENTISTRY AND THE PANDEMIC: THE PRESENT AND FUTURE OF ESTHETIC DENTISTRY

The outbreak of COVID-19 brought uncertainty to the World and effectively disrupted the Dental Practice as Dentists have increased risk of airborne infection with pathogens such as SARS-CoV-2. Exposure to high level of droplets and aerosols produced during specific dental procedures were primary concern and these unavoidable circumstances put a hold on the Dental World as emergency cases were only treated, and routine dental practices were suspended.

As the pandemic is not fully behind us, it is vital that we look beyond treating urgent dental care needs and recognize how to safely and effectively recommence routine dental care and find ways to care for those who are still hesitant to come to the dental clinic for the foreseeable future. To adapt to this complicated new reality in the Dental Clinics, we need to understand practical solutions for treatments to be implemented for patient safety as well as the dental staff. We recognize the different long lasting and esthetic dental procedures that minimize chair time as well as procedures that require less visits as a crucial step in ensuring treatments that are effective and will not prolong time in the dental clinic.

Prof. Dr. Eng. I Made Joni, M.Sc

Universitas Padjadjaran

DATE

4 February 2023

VENUE:

MERAK 1

TIME:

10.30 – 11.45

PRESENT AND FUTURE PERSPECTIVES ON DENTAL NANOMATERIALS: SYNTHESIS AND CHARACTERIZATION

Many studies have examined the development and use of novel materials, enhancing the performance of existing dental composites and improving methods for restoring tooth structure. In recent years, nanotechnology-based techniques have been used to develop a variety of nanomaterial-based dental materials. These new nanomaterial-based materials offer improved physicochemical and mechanical properties, combined with enhanced aesthetics, making them superior restorative materials in several dental procedures. Nevertheless, how these nanomaterials work, what makes them unique, and whether they are superior to traditional dental materials are not always clear to dentists and researchers. Therefore, the objective of the presentation is to give an overview of the principles of nanomaterials and basic research and applications of dental nanomaterials. The fundamentals of the materials science of nanomaterials as well as their advantages and disadvantages are elaborated in terms of their synthesis and characterization. The study is mainly based on a brief review of the recent literature and our experiences in developing dental nanomaterials. Nanomaterials have unique structures and properties that distinguish them from other materials. The characteristics and properties of dental nanomaterials cover the investigation of nanocomposites, nanoparticles, and antimicrobial nanomaterials, and include a set of unique properties and challenges in the preparation of these materials. The small particle size allows for enhanced permeation into deeper lesions, and reduction in porosities of dental composites for higher mechanical strength. The large surface area to volume ratio allows for enhanced bioactivity such as bonding and integration, and more intense action toward microorganisms. Their specific benefits will be better appreciated by understanding the physical principles, strengths, and limitations of dental nanomaterials. Dental nanomaterials have the potential for the future though currently do not always exhibit superior properties.

ML42

Prof. Hien Chi Ngo, BDS, MDS, PhD, Grad Cert HED, FPFA, FADI, FICD

Oral Health Centre of Western Australia

DATE

4 February 2023

VENUE:

MERAK 2

TIME:

10.30 – 11.45

PRESERVATION AND RESTORATION OF TOOTH STRUCTURE

The modern approach to clinical dentistry relies on dentists taking the dual role of physician and surgeon. So, there is a need for a systematic approach to the clinical management of a healthy oral environment. Patients present with a range of different conditions and circumstances and while no single intervention is effective in all cases, it is possible to develop specific strategies and protocols that incorporate monitoring of outcomes for managing individual patients.

Despite continuing major advances in dental materials and techniques. The average longevity of a direct tooth coloured restoration is still hovering around 10 years. Restorative materials are still poor substitute for natural tooth structure. Teeth can withstand high mastication load because they are built using two very different materials, so it has been suggested that we should also replicate this design when rebuilding a tooth.

Minimal Intervention dentistry has changed the way we manage dental caries and the FDI had issued three important policy statements on this topic:

- Minimal Intervention in the Management of Dental Caries (2002),
- Classification of Caries Lesions of Tooth Surfaces and Caries Management Systems (2012),
- Salivary Diagnostics (2013).

It has now been clearly demonstrated that individuals can benefit substantially from the Minimal Intervention (MI) approach in managing dental caries. MI is based on a patient-centered non-surgical management of the disease and surgical repair of dental defects. When it comes to surgical repair, this should be done using Minimally Invasive techniques with the overall objectives being the preservation of tooth structure and tooth vitality.

Today, technological innovations have provided dental professionals with new tools and science has provided us with many possible ways of handling the above issues. This lecture aims at identifying important factors that govern clinical success, reviewing possible solutions and demonstrating practical ways at preserving and restoring tooth structure.

Topics covered include

- Management of caries and hypersensitivity
- Understanding the role of Glass Ionomer Cements
- Conservative restorative techniques, alternative options for restoration, and maintaining restored dentitions
- Understanding appropriate materials selection and gaining maximum benefits

BEYOND THE PREVENTION - WHAT SHOULD WE DO TO FOLLOW

Prof. Bo-Hyoung Jin, DDS, MSD, PhD

DATE

4 February 2023

VENUE:

MERAK 3

TIME:

10.30 – 11.45

Oral health is a key indicator of overall health, well-being and quality of life. It covers a wide range of diseases and conditions, including dental caries, periodontal disease, tooth loss, oral cancer, oral trauma, and more.

Most oral diseases and conditions share modifiable risk factors with major non-communicable diseases (cardiovascular diseases, cancer, chronic respiratory diseases and diabetes). These risk factors include tobacco use, alcohol consumption and unhealthy diets high in free sugars, all of which are increasing worldwide.

Poor oral health afflicts millions of people to suffer from pain and increases the out-of-pocket financial burden on society and can affect an individual's effectiveness at school and work and can cause personal and social problems.

Inflammation of the gums and systemic microbial access contribute to systemic inflammation which drives exacerbation of dysglycemia and promotes progression of non-communicable diseases and onset of complications. The mutual exacerbation of these conditions is attributed to chronic inflammatory processes, altered immune response, and macro- and micro-vascular pathogenesis. Therefore, we must focus on managing these diseases from multiple directions.

During COVID-19, the need for tele-dentistry has increased to provide and support dental care delivery, diagnosis, consultation, treatment, transfer of dental information and education. It can replace the existing oral care system, however, there are some problems in implementing it. Therefore, I would like to point out these problems based on Korea's experience.

This presentation discusses oral disease prevention at the individual level, including access to oral health services. In addition, I would like to propose a new model for implementing integrated medical-dental care to solve non-communicable disease and introduce tele-dentistry, which will be dealt with in dentistry in the future.

ML44

Dr. drg. Mochamad Fahlevi Rizal, Sp.KGA, K- PKOA

Universitas Indonesia

DATE

4 February 2023

VENUE:

Summit

TIME:

10.30 – 11.45

THE CARIES PREVENTION IN CHILDREN FOR INDONESIA 2030 FREE CARIES PROGRAME

The Indonesian government's program through the Ministry of Health of the Republic of Indonesia in 2015 targets Indonesian children aged 12 years to be free of caries (cavities) in 2030. There are only seven years left, while we as practicing dentists still find that the number of caries in children is still high. This is also in accordance with the results of research that has been published both conducted by government agencies, educational institutions and private institutions. The remaining time available needs to be optimized by Indonesian dentists to make the program a success. Efforts to prevent caries for a dentist in his position as a clinician need to be carried out comprehensively for pediatric patients who come to his practice. Various aspects need to be understood and specific actions to be taken. Specifically, there are several components that a dentist needs to master to prevent caries in children, both in terms of bacteria, substrate and host. The results of research conducted by outside academics as well as by the Department of Pediatric Dentistry and other departments within the Faculty of Dentistry, University of Indonesia, are subject for study adapted to Indonesian conditions. The strategy implemented by dentists for these three components is very specific from the patient's point of view, so adequate analysis is needed for each patient who comes. It is hoped that the mastery of proper prevention methods from a dentist can be a contribution for Indonesian dentists in the 2030 caries-free Indonesia program.

THE PRESENT AND FUTURE OF PERIODONTICS

Prof. Koichi Tabeta, DDS., Ph.D

Niigata University

DATE

4 February 2023

VENUE:

MERAK 1

TIME:

13.00-14.15

The incidence of periodontal disease remains high and outcome of treatment is not always satisfactory in periodontics in spite of the past efforts. Recently, accumulation of knowledge along with advances in science and technology lead us to reconsider the etiology in periodontitis and correct the strategy for treatment of it. I would like to present current understanding and issues of periodontology and periodontics, regarding recent etiology of the disease (bacterial infection and host responses) and therapy (antimicrobial and regeneration), introducing our research project in the topic.

ML46

ADVANCEMENTS IN UNDERSTANDING OF CORTICAL BONE QUALITY AND STRUCTURE, PRODUCED BY RESEARCH SUPPORTED BY THE MELBOURNE FEMUR RESEARCH COLLECTION

Dr. Rita Hardiman, Ph.D, GCUT

Melbourne University

DATE

4 February 2023

VENUE:

MERAK 2

TIME:

13.00-14.15

As longer-living, land-dwelling vertebrates, humans rely on their skeletal system to adapt to changing conditions and to repair damage. A number of factors affect our bones' ability to maintain function over a lifetime. These include sex differences, changes as we age, and varied levels of physical

activity. This presentation introduces some recent projects involving the Melbourne Femur Research Collection: a contemporary resource enabling important research to answer questions about cortical bone structure and behaviour- from macroscopic investigations into sexual dimorphism to support the identification of unknown human skeletal remains, to changes in bone quality with age.

FULL JAW REHABILITATION: FINAL PROSTHESIS

drg. Marik Guizot, Sp.BM

Full jaw rehabilitation in dentistry become more popular since the introduction of all on x concept. People are able to have immediate temporary right after surgery. Its improve quality of life and attracts more patients with removable dentures to convert to fixed prosthesis. But the variety of workflow is abundant. From analogs to digitalized. From classic impressions to intraoral scan or even with photometric appliance. Here on my lecture we will discuss the variety of workflow and understand which is the best for your daily practices with or without in-house dental laboratories in your practice

DATE

4 February 2023

VENUE:

MERAK 3

TIME:

13.00-14.15

ML48

SHADES OF COLOUR: FACETS OF ORAL MEDICINE

Dr. Amanda Phoon Nguyen

The University of Western Australia

DATE

4 February 2023

VENUE:

SUMMIT

TIME:

13.00-14.15

will discuss a variety of oral mucosal diseases and causes of oral burning, with focus on conditions and situations that you will encounter with your patients. She will also discuss tips for diagnosis and management of certain oral mucosal diseases, performing a comprehensive head and neck examination and medical history taking.

Prof. Dr. Zamri Radzi

University of Malaya

DATE

4 February 2023

VENUE:

Nuri Room

TIME:

13.00-14.15

RECENT DEVELOPMENT IN VARIOUS TISSUE EXPANSION MODELS AND THE ROLE OF DIGITAL TRANSFORMATION IN ASSISTING CLINICAL DENTAL PRACTICE, EDUCATION AND RESEARCH.

In this presentation, a brief history of hard tissue expansion in craniofacial region will be discussed. It will include the current concept of palatal tissue expansion from the biological viewpoint and the various types of expanders available for clinical use.

It will be followed by the discussion on the role of soft tissue expansion in oral and craniofacial facial surgery. It will include the current concept of tissue recruitment to be utilized for soft tissue reconstruction. This tissue expansion process makes use of the viscoelastic nature of the host tissue to produce additional surface area. The advantage of this tissue expansion technique is that it allows for reconstruction of the defects with adjacent tissue of similar colour, texture, sensation, and thickness. In clinical practice, this soft tissue manipulation can be combined with various hard tissue augmentation to produce a functional unit.

Lastly, the role of digital transformation in clinical dentistry will be discussed. The utilization of 3D technology in capturing the images and the reconstruction of the anatomical models for surgical planning and prediction of the outcome will be highlighted. This patient-specific 3D printed model can be useful as an educational tool as well as material for research. This digital technology has transformed how we treat the patient, how we store the data and how the data mining can be utilized for various clinical applications.

ML50

LASERS THERAPY FOR ORAL MUCOSAL DISEASES

Prof. Marco Meleti

University of Malaya

DATE

4 February 2023

VENUE:

NURI

TIME:

14.30-15.45

Lasers have been widely employed in the management of many conditions affecting the oral cavity. Different wavelengths can interact selectively with hard or soft tissues offering a wide range of option to the clinician.

Neodymium Yttrium Aluminium Garnet (Nd:YAG), diode and Erbium (Er):YAG lasers has been reported to be useful for treatment of benign, vascular and potentially malignant disorders (PMDs) of the oral mucosa as well as for a number of disease of the jawbones. Some controversies of laser surgery concern the accuracy of pathological diagnosis as well as the control of thermal damage on the target tissue. However, if precise operative procedures and the appropriate power and frequency parameters are used it seems possible to reduce thermal injuries and support the wound healing processes.

Good haemostasis with less peripheral tissue injury and post-operative pain than cold blade and electrosurgery and a more rapid recovery are reported in the literature for both these wavelengths. Because of intra-operative control of bleeding and anti-bacterial and bio-stimulating properties, Nd:YAG and Er:YAg lasers undoubtedly offers a chance for the surgical treatment of PMDs.

Quantic Molecular Resonance (QMR scalpel) is a new technique that applies high frequency waves and it is indicated for several surgical treatments. It is a remarkable advance from conventional electrosurgery, and consists of non-traumatic cutting of tissue and possibly contemporary coagulation. The cut is achieved by the explosion of intracellular and infracellular liquids resonating with a special frequency.

The lecture is focused on long-term experience of the surgical treatment of disease of the oral mucosa through new technologies such as Nd:Yag and Er:Yag lasers and QMR scalpel.

MICROBIOME IN CONSERVATIVE DENTISTRY

Dr. drg. Dewa Ayu N.P.A., Sp.KG, Subsp.KE(K)

drg. Aryo Megantoro, Sp.KG, Subsp.KR(K)

Universitas Indonesia

DATE

2 February 2023

VENUE:

SUMMIT

TIME:

13.00 – 14.30

Dental caries is a multifactorial disease, which one of the factors is bacteria involvement. Todays understanding in relationship between bacteria and the teeth are evolving from single bacteria to a complex relation between microorganisms and the teeth, and the role of microbiome in oral environment. By understanding the mechanism of bacteria involvement, we can measure someone's caries risk. Microbiome is a complex environment itself that can affect teeth condition and therefore creating caries disease. Research nowadays trying to expose the role of microbiome in oral cavity and its role in oral health. Early research found that microbiome in dental caries varies depends on many factors, such as cavity depth, diet patterns, geographic, and many others.

Caries, if not treated, will be a progressive disease, and once hit the pulp tissue, it will cause pulpal and periapical problems. Just like caries from enamel and dentin, pulpal and periapical diseases also involving microorganisms in the process. Different microbiome known as the depths of the cavities varies, hence microbiome in pulpal and periapical diseases are different than the microbiome in the caries process.

IL02

RADIOTERAPI PADA KANKER KEPALA DAN LEHER

dr. Gregorius Ben Prajogi, M.Pd.Ked., Sp.Onk.Rad(K)

Radiation Oncologist at Cipto Mangunkusumo National General Hospital

DATE

2 February 2023

VENUE:

NURI 1

TIME:

13.00-14.30

Radioterapi merupakan salah satu komponen utama dalam penatalaksanaan pasien dengan kanker kepala dan leher. Diperkirakan bahwa antara 74% pasien dengan kanker kepala dan leher membutuhkan radioterapi sebagai bagian dari tatalaksana penyakitnya, baik dalam konteks definitif, adjuvan maupun paliatif. Pertimbangan pemberian radioterapi sebagai modalitas definitif dan adjuvan dipengaruhi oleh berbagai faktor seperti stadium lokoregional tumor, resektabilitas, kemungkinan preservasi fungsi organ, dan risiko kekambuhan pasca operasi.

Radioterapi pada kanker kepala dan leher umumnya diberikan dalam fraksi konvensional (1.8 – 2 Gy per fraksi, 5 fraksi per minggu) hingga total dosis 60-70 Gy dalam 6-7 minggu. Pada konteks definitif, umumnya diberikan pula kemoterapi secara concurrent. Dalam keadaan tertentu, radioterapi dapat diberikan dengan fraksi non-konvensional, misalnya hiperfraksinasi (lebih dari 1 fraksi per hari) atau akselerasi (total dosis diberikan dalam waktu kurang dari 6 minggu). Radioterapi dengan skema fraksinasi non-konvensional memiliki pengaruh terhadap profil efek samping jangka pendek maupun jangka panjang yang dapat ditemui.

Teknik Intensity Modulated Radiotherapy (IMRT) merupakan standar penatalaksanaan radioterapi pada kanker kepala leher saat ini, karena sebaran dosis yang lebih baik dibandingkan teknik radioterapi konvensional sehingga memungkinkan kontrol lokoregional yang lebih tinggi dan efek samping jangka panjang yang lebih rendah. Teknik IMRT saat ini semakin banyak tersedia di pusat-pusat pelayanan radioterapi di Indonesia. Namun demikian, berbagai faktor di luar sebaran dosis memiliki pengaruh pula terhadap luaran penatalaksanaan pasien. Kolaborasi multidisiplin yang erat dibutuhkan untuk memperoleh hasil yang optimal.

Dokter Gigi berperan penting dalam penatalaksanaan pasien pra dan pasca radioterapi pada daerah kepala dan leher. Dari segi diagnosis, Dokter Gigi memiliki peran potensial yang cukup besar dalam identifikasi dini lesi-lesi prakanker dan tumor stadium awal. Dokter Gigi memiliki peran yang penting pula dalam pencegahan, diagnosis dan tatalaksana mukositis, xerostomia, demineralisasi gigi, atrofi gingiva, trismus, radionekrosis dan efek samping lainnya yang dapat dialami pasien pada rongga mulut.

TERAPI BEDAH ONKOLOGI PADA KANKER KEPALA LEHER

Dr. dr. Sonar Soni Panigoro, Sp.B, Subsp.Onk(K), M.Epid.,MARS

Department of Surgery
Faculty of Medicine
Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 1

TIME:

13.00 – 14.30

Diperkirakan 4% dari semua kanker adalah dari rongga mulut atau oropharyngeal. Saat ini, penatalaksanaan kanker mulut meliputi pembedahan, radioterapi, dan kemoterapi baik tunggal maupun kombinasinya. Masing-masing teknik ini memiliki kelebihan dan kekurangannya. Pembedahan merupakan modalitas utama dengan melakukan pengangkatan jaringan kanker dan sebagian jaringan sehatnya yang dapat menyebabkan kecacatan dan atau gangguan fungsional. Dengan tehnik rekonstruksi yang makin baik, morbiditasnya dapat dikurangi. Radioterapi memiliki efek samping yang cukup nyata seperti mucositis,xerostomia. Dengan munculnya metode pengobatan yang lebih baru seperti terapi target, terapi imun dan terapi gen, hasil pengobatan menjadi lebih baik dengan efek samping yang lebih sedikit. Secara umum dengan penanganan yang bersifat multidisiplin dapat direncanakan pengobatan yang optimal yang bertujuan meningkatkan kesintasan dan kualitas hidup pasien.

IL02

EFFECT OF HEAD AND NECK CANCER RADIOTHERAPY ON DENTAL HARD TISSUE AND ITS PREVENTIVE EFFORTS

Prof. Dr. drg. Ratna Meidyawati, Sp.KG(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 1

TIME:

13.00 – 14.30

Radiotherapy is one of the treatment modalities carried out on head and neck cancer patients, and the therapy is performed on the patients facial area. The effects of radiotherapy may directly or indirectly cause changes, leading to disorders within the oral cavity. In the oral cavity, the effect of radiation influences the salivary glands, soft tissue, dental hard tissue, and bone. Radiation can reduce salivary flow, buffer capacity, pH, and self-cleaning ability which causes an increased risk for the development of caries. Caries may also develop more easily because the radiation is able to alter the mineral composition of the dental hard tissue and can cause disruption in the vascularization of the pulp tissue, leading to a decrease in the tooths defense mechanism. It is imperative to take precautions before radiation therapy to minimize the side effects that can occur. Periodic dental evaluations during and after radiation therapy is also necessary to monitor and treat the dental disorders that occur.

THE THERAPEUTIC EFFECT OF CANCER ON THE SOFT TISSUES OF THE ORAL CAVITY

Dr. drg. Febrina Rahmayanti, Sp.PM(K)

Department of Oral Medicine, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 1

TIME:

13.00 – 14.30

Interventional therapy in cancer in addition to treating its malignancy also has side effects that can cause problems in the oral mucosa. Oral complications that can occur such as mucositis, xerostomia, bacterial, viral or fungal infections, especially in neutropenia patients. In addition, dental caries can also occur, decreased taste ability and osteoradionecrosis. Chemotherapy and radiotherapy can affect the regulation of epithelial cell turnover which can cause damage to the mucosa. Patient oral cancer or with a history of cancer or who are undergoing cancer therapy can come to the dentist because the complaints in their mouth are related or unrelated to the cancer therapy being undergone. The dentist needs to recognize the abnormalities that can occur in patients with cancer therapy and be able to provide adequate therapy according to competence to minimize side effects that occur in the oral mucosa. Here, we will discuss the abnormalities that occur, and provide management strategies for the dental practitioners.

IL03

OVERVIEW OF SLEEP APNEA

Prof. drg Laura S Himawan, Sp.Pros(K)

Prof. Dr. drg. Ira Tanti, Sp.Pros(K)

drg. Pinta Marito, Sp.Pros

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 1

TIME:

14.45 – 16.15

Sleep Apnea adalah suatu gangguan pernapasan yang berhubungan dengan tidur termasuk diantaranya adalah mendengkur dan obstructive sleep apnea (OSA). Obstructive sleep apnea adalah gangguan yang disebabkan oleh penyempitan saluran pernapasan. Seseorang yang mengalami gangguan ini akan terbangun mendadak atau kualitas tidur menjadi kurang baik, sehingga mengakibatkan timbulnya sakit kepala di pagi hari, konsentrasi kerja terganggu, mengantuk di siang hari, dan lain-lain. Evaluasi dan pemeriksaan pasien yang tepat, antara lain riwayat medis dan keadaan dalam rongga mulut, obesitas, merupakan langkah penting untuk membantu mengidentifikasi individu yang berisiko OSA secara klinis. Sleep test juga merupakan salah satu tahap yang perlu dilakukan untuk penegakan diagnosa. Dokter gigi dapat membantu penanganan OSA katagori ringan sampai sedang dengan pembuatan mandibular advancement devices (MAD). Pada sesi ini akan dijelaskan mengenai teori tidur, OSA, pemeriksaan OSA dan penanganan OSA secara umum dan macam-macam MAD.

MANAGEMENT OF CLASS III MALOCCLUSION WITH A RETROGNATHIC MAXILLA AND A PROGNATHIC MANDIBLE WITH ORTHODONTIC AND ORTHOGNATHIC SURGERY TREATMENT (CASE REPORT)

Dr. drg. Krisnawati, Sp.Ort(K)

Department of Orthodontic, Faculty of Dentistry, Universitas Indonesia

drg. Cathy Sitepu

Postgraduate Student in Department of Orthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MERAK 1

TIME:

16.00 – 17.30

Introduction: Prevalence of Class III malocclusion varies globally between 0% to 26%. In Southeast Asia, the prevalence rate reaches 15.8%. Treatment of class III malocclusions is very challenging. Class III malocclusion can be caused by a retrognathic maxilla, a prognathic mandible, or combination of both. Treatment for class III in growing patients may involve functional therapies, whereas for adult patients, treatment options would be between camouflage treatment or multidisciplinary approach involving orthodontic treatment and orthognathic surgery. Case report: A 21-year-old female patient came to RSKGMP FKG UI with a chief complaint of protruded lower jaw. Patient presented with a dolichofacial facial type and a concave profile. Anterior and posterior crossbites were found in a class III skeletal base, with a retrognathic maxilla and a prognathic mandible. Patient was diagnosed with a severe skeletal discrepancy and was indicated to receive a combination of orthodontic and orthognathic surgery treatment. Patient accepted the treatment plan involving surgery. Bimaxillary surgery was planned with Le Fort I for the maxilla, and Bilateral Sagittal Split Osteotomy (BSSO) for the mandible. Orthodontic treatment was performed before and after surgery. Conclusion: Orthognathic surgery would be the best treatment option for severe class III discrepancies in order to obtain a dental and skeletal correction with long term stability.

IL04

MANAGEMENT OF SEVERE SKELETAL CLASS III MALOCCLUSION WITH COMPLEX ORTHOGNATHIC SURGERY (CASE REPORT)

Dr. drg. Nada Ismah, Sp.Ort(K)

Department of Orthodontics, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MERAK 1

TIME:

16.00 – 17.30

A 19-year-old man came with the chief complaint of a forwardly placed lower jaw when compared to the upper jaw and inability to bite using his front teeth. The clinical findings confirmed a Class III Malocclusion with abnormalities in the transverse, vertical and sagittal directions. The severity of this case involves skeletal and dental abnormalities. Abnormality in the transverse direction (antero-posterior) was seen in the form of prognathism ANB= -5o (normal maxilla and protruded mandible), concave facial profile, -8mm overjet; mesiocclusion of molar and canine relationships, proclination of the upper incisors, and retroclination of the lower incisors. The clinical findings of vertical abnormality (supero-inferior) were an open bite of 6mm and the greater height of the lower part of the face. Sagittal abnormality (medio-lateral) was seen from the presence of right and left posterior crossbites. Orthognathic surgery was planned after the growth period is complete. Treatment began with the decompensation stage to eliminate crowding, continued with aligning the teeth and getting the ideal incisor inclination. Odentectomy was performed on teeth 18, 28, 38, and 48 before entering the orthognathic surgery stage. Orthognathic surgery with Le Fort 1 osteotomy and bilateral sagittal split osteotomy (BSSO) as well as genioplasty was done to achieve better occlusion, stability, and facial esthetics. After the orthognathic surgery treatments, orthodontic treatment was continued to complete the final stage of dental occlusion repair

COMPREHENSIVE APPROACH IN MANAGEMENT OF RADICULAR CYST

drg. Iffi Aprilia, Sp.KG, Subsp. KR(K)

Dr. drg. Vera Julia., Sp.BMMF, Subsp. TMF- TMJ(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

Department of Oral and Maxillofacial surgery, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 1

TIME:

16.15 – 17.45

Bedah endodontik adalah manajemen penyakit periapikal gigi melalui pendekatan bedah. Tindakan ini dilakukan melalui reseksi ujung apeks gigi disertai pembersihan jaringan patologis pada daerah periapikal. Bedah endodontik biasanya diindikasikan pada kasus gagalnya perawatan endodontik konvensional akibat kurang adekuatnya prosedur cleaning, shaping, dan filling. Berdasarkan literatur, sebanyak 10-15% hasil perawatan endodontik konvensional biasanya masih menimbulkan keluhan pada pasien yang muncul secara spontan dan persisten. Keluhan yang biasanya muncul adalah nyeri, pembengkakan, pembentukan fistula, disertai dengan adanya gambaran radiolusensi pada daerah periradikuler. Selain akibat reinfeksi, bedah endodontik juga diindikasikan pada beberapa kasus seperti kelainan anatomis akar gigi yang menyulitkan prosedur debridement dan obturasi, lesi periapikal besar yang tidak hilang pasca perawatan endodontik, fraktur akar horizontal, perforasi pada dinding inferior saluran akar, benda asing pada daerah periapikal, dan lain lain. Pada sesi seminar kali ini akan dibahas secara komprehensif tentang indikasi dan kontraindikasi, rencana perawatan, dan dasar-dasar teknik bedah endodontik

IL06

HOW PREVENT CARIES IN CHILDREN USING CARIES ASSESMENT (CAMBRA)

Dr. drg. Eva Fauziah, Sp.KGA, K-PKOA

Department of Pediatric Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

13.00 – 14.15

In Indonesia, the prevalence of dental caries among preschoolers was 92.6%. Therefore, dental caries should be prevented in young preschoolers (ages 0–5). Caries is a multifactorial disease. The progression of the caries will be determined by the different interrelated aspects in caries balance and imbalance. These conditions have a special impact on the risk of caries.

There are various ways to assess the risk of caries, but dentists typically do so when patients attend the clinic in order to advise them of the dangers and educate them on how to prevent caries. The CAMBRA evaluation approach uses particular treatment recommendations, including as behavior modification, chemical variables, and non-invasive treatments, to increase the effectiveness of caries risk management.

Programs for educating parents about their children's dental health can be a useful intervention strategy in the prevent caries. Since technology is more easily accessible in the digital age, using applications to educate the public is a convenience that keeps up with the times.

An variation of the cariogram test called a software-based caries risk predictor study was conducted in Indonesia. A CAMBRA caries risk assessment for children ages 0 to 5 application was also invented in Indonesia and now parents can use a caries risk application "SKOR GIGI"

THE IMPORTANCE OF DENTAL CARE DURING PREGNANCY

Prof. Dr. drg. Anggraini Margono, Sp.KG, Subsp.KE(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

SUMMIT

TIME:

13.00 – 14.15

Pregnancy can make women more prone to periodontal disease and cavities. Oral health may be considered an important part of prenatal care, given that poor oral health during pregnancy can lead to poor health outcomes for both the mother and baby. Due to bad oral health in pregnancy, women can experience premature delivery, low birth weight baby, pre-eclampsia, gingival tissue ulcerations, pregnancy granuloma, gingivitis, pregnancy tumors (epulis gravidarum), loose teeth, and dental erosions. Some issues arise regarding to the fact whether is it safe for woman to have dental treatment during pregnancy. On the other side, conducting an oral health assessment during their first prenatal visit, could reduce the transmission of potentially caries producing oral bacteria from mother's to their infants. This review provides an insight and an update about various aspects of clinical updates regarding to the fact that most dental services and procedures can be done safely during pregnancy. Treatment of the pregnant patient has the potential to affect the lives of two individuals eg the mother and the unborn fetus. Certain principles must be considered in the treatment of the pregnant patients so that, it benefits to the mother while minimizing the risk to the fetus. Appropriate dental care and prevention may reduce poor prenatal outcomes and decrease infant caries.

IL07

GROWTH MODIFICATION WITH MYOFUNCTIONAL THERAPY IN ORTHODONTICS

Dr. drg. Nia Ayu Ismaniati, MDSc., Sp.Ort(K)

Department of Orthodontics, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

14.30 – 16.00

Patients with a class 2 division 1 malocclusion usually found with a convex face and a large overjet, and sometimes a deep bite. The inclination of the maxillary teeth is often protrusive and the maxilla tends to be more hyperplastics and grow more dominantly than the mandible. During the growth and development period, patients with class 2 division 1 malocclusions can be treated with myofunctional therapy using functional devices which consist of various options according to their indications. The changes that occur are a combination of various efforts to modify the direction of growth, so that the dominance of one jaw is more balanced using the capabilities of the various appliances available in the market. Changes that occur in the modification process to optimize jaw growth as an effect of using functional appliances and maxillary-mandibular harmonization will be explained. Various arguments related to the contradictions in the use of myofunctional appliances will also be discussed.

drg. Akhila Ramanitya

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

14.30 – 16.00

ORTHODONTIC TREATMENT IN GROWING AGE USING REMOVABLE MYOFUNTIONAL APPLIANCE

Orthodontic functional appliances are considered as orthopedic devices used in growing children. Most of the functional appliances are used to treat class II division 1 malocclusion. Many studies said that the cause of class II malocclusion lies in the retrognathic mandible. Functional appliances can utilize facial muscles to modify the growth and development of the jaw and dentition. Activator was the first removable functional appliance, found by Dr. Viggo Andresen. Afterwards, there were several types of functional removable appliances with various modifications. We will discuss the indications, contraindications, advantages and disadvantages, as well as the pros and cons of removable functional appliances according to several classic sources and literature.

IL07

drg. Deo Develas, Sp.Ort

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

14.30 – 16.00

TREATMENT OF CLASS II MALOCCLUSION WITH DEEPBITE AND FUNCTIONAL ASYMMETRY USING HEADGEA

Treatment of class II skeletal malocclusion in growing patient has the advantage of utilizing growth modification to correct skeletal and dental disharmony by altering the growth direction. Headgear is one of the orthopedic appliances which can modify the growth of maxilla while letting the mandible grow normally to correct class II malocclusion. When used properly, Headgear can be a very useful method to correct disharmony in anteroposterior, vertical, and transversal plane as well as asymmetrical problem. This case report demonstrates the use of combination headgear and orthodontic fixed appliance for treatment of class II div 1 malocclusion with deepbite and facial asymmetry in a 13-year-old boy. Treatment result showed a satisfying straight facial profile, class I molar, canine, and incisor relationship, and symmetrical face.

drg. Desyanne Winardi

DATE

3 February 2023

VENUE:

MERAK 2

TIME:

14.30 – 16.00

ORTHODONTIC TREATMENT IN GROWING AGE USING FIXED MYOFUNTIONAL APPLIANCE

Class II division 1 malocclusion is the most common malocclusion. One of the treatment options for class II division 1 malocclusion is to use functional devices during the growth and development period. Functional appliances have been used since the 1930. Functional appliances are devices that utilize muscle activity by changing the position of the mandible sagittally and vertically, resulting in orthodontic and orthopedic transformation. Functional appliances are divided into two categories, removable and fixed functional appliances. Removable functional appliances require a high level of patient compliance. Meanwhile, fixed functional appliances which are often referred to as Non-compliance Class II correctors are very beneficial for operators because they do not depend on patient compliance. Several types of fixed functional appliances will be discussed regarding their use, method of action, and effectiveness in treating patients with class II malocclusions.

IL08

DENTAL MANAGEMENT OF MEDICALLY COMPROMISED PATIENT

Prof. Dr. drg. Yuniardini S. Wimardhani, M.Sc. Dent

Department of Oral Medicine, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

NURI 1

TIME:

14.30 – 16.00

It is estimated that the number of older adults are increasing worldwide. It is expected that millions of them will have systemic illnesses that can compromise their ability to maintain good oral health and receive dental care as the world's population ages. The dental management of these medically compromised patients can be problematic in terms of oral complications, dental therapy, and emergency care. This lecture focuses on a brief overview on some medical problems that dentists might encounter in daily practice that necessitate extra knowledge and care to prevent potential complications.

GOOD COMMUNICATION SKILLS IN GERIATRIC DENTISTRY

drg. Astari Larasati, Sp.Pros

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

NURI 1

TIME:

14.30 – 16.00

Providing patients with the best dental treatment possible requires effective communication between dentists and patients. The development of a trusting connection between the patient and the dentist depends on how good they communicate. Elderly and geriatric patients generally have conditions where there has been degeneration of their organs and senses as well as a decline in cognitive function due to the aging process creating a challenge for dentists to communicate effectively. This lecture will discuss several conditions that might affect communication in elderly and what strategies can be done so that effective communication can be established, dental treatment success can be achieved and at the end quality of life in elderly can be improved.

IL09

INTERACTION OF *AGGREGATIBACTER ACTINOMYCETEMCOMITANS* AND OSTEOCLAST

drg. Erik Idrus, Ph.D

Department of Oral Biology, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

16.00 – 17.30

Various pathological conditions in the oral cavity are generally caused by disharmony between microbiota, such as oral bacteria, and host cells, which can trigger inflammation and result in tissue damage. Direct interactions between oral bacteria and host cells, such as epithelial cells and bone cells (osteoblasts, osteoclasts), are inevitable in the oral cavity, especially when bacteria invade the deeper dental supporting tissues, as observed in periodontitis. Contact between bacteria and host cells can facilitate bacteria to avoid immune cells by performing internalization into host cells, resulting in increased bacterial virulence and subsequent destruction to the surrounding tissue. In this talk, we will report the results of our study on direct interaction experiments between Aggregatibacter actinomycetemcomitans and osteoclasts, including analysis of internalization of A. actinomycetemcomitans into osteoclast precursor cells and expression analysis of A. actinomycetemcomitans virulence factor genes. We will also report the expression of genes involved in osteoclasts differentiation and activation after direct contact with A. actinomycetemcomitans. This study is expected to elucidate the further consequences of the direct connection between oral bacteria and osteoclasts and, thus, support the invention of anti-bacterial therapeutic medications by disrupting bacteria and osteoclast interaction.

ORAL VEILLONELLA SPECIES: UNRECOGNIZED BY MANY BUT A KEY MEMBER OF MICROBIOME IN ORAL DYSBIOSIS

drg. Citra Fragrantia T., M.Si., Ph.D

Department of Oral Biology, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

16.00 – 17.30

The oral cavity has unique characteristics and consists of various microorganisms that interact with each other. In conditions of a healthy oral cavity (eubiotic) microorganisms are symbiotic together with the host in the process of physiological development. However, if there is an imbalance (dysbiotic) in the microorganism community, it can cause disease in the oral cavity.

Veillonella is a microorganism with a prevalence of 10% of the total cultivable anaerobic bacteria. However, with the development of the currently popular gene sequencing method, it is informed that Veillonella are also among the most prevalent species detected in saliva and dental plaque. The prevalence and abundance of these organisms in the oral cavity is a reflection of their prominent role within the microbial ecology of oral biofilms. Veillonella are considered bridge species due to their diverse array of intergeneric coaggregation/coadhesion interactions as well as their ability to stimulate the growth of numerous organisms through metabolic complementation.

Therefore, the role of Veillonella which is not widely known in the condition of oral dysbiosis will be studied. The results of this study are expected to increase understanding of the characteristics of oral Veillonella and potential future studies of this genus

IL09

Ratna Ramadhani, S.K.G, Ph.D

Department of Oral Biology, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MERAK 1

TIME:

16.00 – 17.30

DIFFERENCES OF PARASYMPATHETIC AND SYMPATHETIC NERVOUS SYSTEM IN THE REGULATION OF BLOOD FLOW IN THE OROFACIAL AREA

Blood flow (BF) is important in the maintenance of orofacial functions and disturbance of BF is related to various dysfunctions in the epithelial tissues and muscles. Different BF changes mediated by the autonomic neural system exist and may be important for orofacial hemodynamics. This study thus sought to examine the differences in changes in the BF and vascular conductance (VC) between the masseter muscle (cholinergic) and lower lip (non-cholinergic) mediated by parasympathetic and sympathetic nervous system (PNS and SNS) in order to elucidate specific autonomic regulatory system of BF in orofacial tissues in deeply urethane-anesthetized, artificially ventilated rats. Electrical stimulation of the central cut end of the lingual (LN) or cervical vagus nerve (CVN) elicited BF increases in the masseter muscle and lower lip accompanied by a significant increase in arterial blood pressure (ABP). Cervical sympathetic trunk stimulation consistently decreased BF at both sites; the decreases were greater in the masseter than in the lip. The LN stimulation induced a biphasic change in the VC in the masseter muscle consisting of an initial decrease and a successive increase. The decrease of VC in the masseter muscle was positively correlated with changes in ABP and was diminished by pre-treatment with guanethidine. These results indicate that the PNS, mediated by sensory inputs from cranial nerves, is important in the maintenance of the hemodynamics in the orofacial muscles and epithelial tissues. The SNS may be more involved in the regulation of BF in the muscles than in epithelial tissues in the orofacial area.

DENTAL MANAGEMENT FOR SPECIAL NEEDS CHILDREN: INTEGRATED LECTURE

Prof. Dr. drg. Margaretha Suharsini Soetopo, S.U, Sp.KGA, K-AIBK

drg. Astri Kusumaningrum, Sp.KGA

drg. Amrita Widyagarini, Ph.D, Sp.KGA, K-AIBK

Department of Pediatric Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

SUMMIT

TIME:

09.00 – 10.30

The demand for dental treatment for children with special healthcare needs is increasing. Unfortunately, the dental management for special needs children is challenging and often requires multidisciplinary approach. High-skilled experience dentists are needed to deliver the dental treatment for the special needs children. In this context, the dentist must have the ability to identify dental problems while need to manage the psychological approach and to consider the general health status or underlying disease of the children. Moreover, the decision making of treatment plan will be varied from one case to another. The aim of this review is to assist dentists in the best dental management choice for special needs children. We divide three sections in this review in attempt to guide dentist to perform dental treatment for special needs children.

IL11

REMINERALIZATION OF AFFECTED DENTIN AS A MINIMAL INTERVENTION CONCEPT

Prof. Dr. drg. Ratna Meidyawati, Sp.KG, Subsp.KR(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

NURI 1

TIME:

09.00 – 10.30

The shifting concept in conservative dentistry from extension for prevention to minimal intervention changes the understanding of the dentin caries layer, consisting of infected dentin and affected dentin. Affected dentin is a demineralized dentin layer; however, it contains intact collagen and free bacteria. Thus, allowing affected dentin for the remineralization process. Dentin remineralization can happen in two ways, natural process and guided tissue remineralization (GTR), so it can preserve the pulp vitality.

SMEAR-LAYER DEPROTEINIZATION FOR INCREASING BONDING TO AFFECTED DENTIN

drg. Citra Kusumasari, SpKG, Subsp.KR(K), Ph.D

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

NURI 1

TIME:

09.00 – 10.30

Affected dentin represents a common substrate in daily clinical tooth restoration. However, it produces lower bond strengths than normal dentin, regardless of the type of adhesive system. The use of 'mild' self-etch adhesive systems was popular among clinicians; unfortunately, it created the hybridized smear layer which considered a weak link at the adhesive interface. A concept for increasing the bonding to affected dentin of self-etch adhesives, using the non-specific or enzymatic proteolytic activity thus, can facilitate the infiltration of the self-etch adhesives into the underlying dentin, eliminating the hybridized smear-layer, was introduced, and it was called as smear-layer deproteinization.

IL12

REGENDO: BARRIERS AND STRATEGIES FOR CLINICAL TRANSLATIONAL

Prof. Dr. drg. Anggraini Margono, Sp.KG, Subsp.KE(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

ASSEMBLY

TIME:

10.30-12.00

Despite the recent explosion of investigations on dental pulp regeneration using various tissue engineering strategies, the transaltion of the findings from such studies into theurapeutic applications has not been properly achieved. Regenerative endodontics has encountered substantial challenges toward clinical translation. The adoption by the American Association of Endodontic of evoked pulp bleeding in immature permanent teeth is an important step for regenerative endodontics. Simple recapitulation of cell therapy and tissue engineering strategies that are under development for other organ systems has not led to clinical translational in regeneration endodontic. Recent work using novel biomaterial scaffolds and growth factors that orchestrate the homing of host endogenous cells represents a departure from traditional approaches and may accelerate clinical translational. Inspite of the various approaches of regenerative endodontics, there are several major challenges that remain to be improved. Generally, current clinical protocols and recent studies have shown a limited success of the pulp-dentin tissue regeneration. Throughout the various approaches, the development and application of biomimetic microenvironments of pulp-dentin tissue is the key concept of the tissue engineering based regenerative endodontics. The biomimetics microenvironments can delivered selective bioactive molecules and may recruit multipotents stem cells from the vicinity of the pulp apex.

BIOACTIVE MATERIAL SCAFFOLD IN REGENERATIVE ENDODONTIC THERAPY

Dr. drg. Ike Dwi M, Sp.KG, Subsp. KE(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

ASSEMBLY

TIME:

10.30-12.00

Regenerative endodontic therapy (RET) has showed significant progress in recent years. It has four pillars, which are stem cells, biomaterials, growth factor, and synergistic interaction between. The use of an appropriate biomaterial is essential, clinical outcomes could be improved with regenerative approaches of acellular biomaterial. RET's biomaterial consists of host-derived, natural and synthetic biomaterials. Both natural and synthetic biomaterials could act as drug delivery or scaffolds carriers for tissue regeneration. Biomaterial scaffolds not only serve as support for the growing tissue, but also act as drivers of regeneration especially in acellular approaches. There are several basic properties of biomaterials for RET: biodegradability, biocompatibility, interconnected macroporosity, and bioactive-based material. These are designed to integrate and regenerate with surrounding tissues. Some examples of natural and synthetic biomaterials are alginate, hyaluronic acid, chitosan, hydrogel, collagen, HA, bioceramic-based cement and Bioglass.

IL12

Dr. drg. Dini Asrianti, Sp.KG, Subsp.KE(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

ASSEMBLY

TIME:

10.30-12.00

SECRETOME OR EXOSOME: THE FUTURE DIRECTION IN REGENERATIVE ENDODONTICS

Many studies have proven the effectiveness of platelet based secretomes as supplemented conditioned media for dental pulp regeneration. Previous studies have verified the potential effectivity of 10% platelet-rich plasma (PRP), 10% human platelet lysate (hPL), concentrated growth factor, 5 to 25% advanced platelet-rich fibrin (A-PRF), 5 to 25% platelet-rich fibrin lysate (PRF-L), and 10% platelet-rich fibrin exudates (PRF-E) for migration, proliferation, differentiation, and angiogenesis of hDPSCs in-vitro. Nevertheless, there have been reports of the potential bias of studies on platelet-based conditioned media, which may explain the variation in the results and may alter the performance of such media in the clinical setting. This finding was led the transformation from secretome to exosome as future conditioned media in regenerative endodontics. Exosome form of platelet base media have been reported to be more effective than secretome and could be a potential cargo of bioactive proteins, mRNAs, and miRNAs that plays crucial roles in cell-to-cell communication, that was important in tissue regeneration. Recent studies have reported the promising result of Platelet based Exosome in dental pulp regeneration, such as in their odontogenic potential, vasculogenesis potential and their ability to to fix the mitochondria cell function. Thefore in the future exosome could be potential as a cargo of drug delivery system in regenerative endodontic procedure.

BIOLOGICAL SCAFFOLD IN ENDODONTIC REGENERATION

drg. Sylva Dinie A, MARS, Sp.KG, Subsp.KE(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

ASSEMBLY

TIME:

10.30-12.00

Tissue engineering involves an interdisciplinary field in process engineering, materials science, biology, chemistry, physics, and medicine, which focuses on developing tissue analogs to support the successful regeneration of lost or damaged tissues and organs. The ideal pulp regeneration creates a natural and precise structure, including the dentinal pulp complex, blood vessels, and nerves, thereby achieving the reconstruction of the dentinal pulp complex with angiogenesis and neurogenesis, as well as physiological functions.

In tissue engineering, the scaffold provides a three-dimensional area to support cellular components and regulate their growth. The biological scaffold can offer a three-dimensional growth space for cells and control stem cell behavior influenced by the niche environment. The role of the scaffold in providing a proper context and supporting the natural extracellular matrix (ECM) is critical, as the scaffold must provide mechanical integrity and biological functionality for cell adhesion and differentiation. The nature of the scaffold will affect cellular proliferation, differentiation, and attachment.

Natural scaffolds that can release biological signals are essential in cell-homing strategies to mobilize cells from the periapical tissues and regulate their behavior towards regenerating the pulp-dentin complex. Appropriate biological signals can create a favorable microenvironment to support the self-repair ability and multipotency of pulpal stem cells, resulting in tissue regeneration.

Natural scaffolds have been investigated for pulp regeneration because they are biocompatible, biomimetic, readily available, inexpensive, and can form various preparations. The decellularized extracellular matrix is also a type of biological scaffold without donor cells and antigens while maintaining the structure of the ECM and being a suitable regenerative niche for stem cells. The scaffold acts as a platform for cell housing and should allow cell infiltration for functional tissue development. An ideal scaffold should be biodegradable and replaced by native components after tissue regeneration is complete and regular physiological function restored.

IL13

Prof. Dr. drg. Haru S. Anggani, Sp.Ort(K)

Department of Orthodontics, Faculty of Dentistry, University of Indonesia

DATE

4 February 2023

VENUE:

NURI 1

TIME:

10.30-12.00

ORTHODONTIC TREATMENT MANAGEMENT STRATEGY IN THE POST-COVID-19 PANDEMIC

The pandemic SARS-CoV-2/Covid-19 had awaken us on the importance of maintaining cleanliness in all aspects of our lives. The presence of the coronavirus that infects the respiratory tract has caused the deaths of millions of people around the world in a short time. The dental health facilities in particular are the ones that get the most attention because that is where the risk of transmission of this virus is getting bigger. PDGI as the main professional organization of Indonesian dentists, has released a letter with reference number : 2776/PB PDGI/III-3/2020, containing an appeal to postpone several kind of dental treatment and recommend on prevention to reduce the risks to get infected from corona virus. Furthermore, several steps have been recommended that are expected to reduce the risk of transmitting the corona virus. Meanwhile, for orthodontic treatment, it is necessary to observe and apply some special things to make it more comfortable and safe for patients and orthodontist not only during an emergency but throughout the treatment period in this new normal era.

Summary : Orthodontic treatment should be managed so that comfortable and safe treatment can be carried out for both patients and orthodontist in particular. This aims to anticipate the possibility of a pandemic case either due to corona virus or another.

THE RELATIONSHIP BETWEEN PERIODONTITIS AND COVID-19 INFECTIONS

Prof. Dr. drg. Yuniarti Soeroso, Sp.Perio(K)

Department of Periodontology, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

NURI 1

TIME:

10.30-12.00

Periodontitis is a multifactorial chronic inflammatory disease initiated by oral bacterial dysbiosis with the characteristics of supporting tissue destruction. The role of the oral cavity in COVID-19 has been controversial and the exposure of oral disease as a risk of increased severity of COVID-19 has not been demonstrated. Periodontitis is one of the most prevalent chronic inflammatory diseases, and it may play a role in the relationship between periodontitis and COVID-19 severity. Periodontal pockets could act as a viral reservoir of periodontopathic bacteria and might aggravate a receptor for SARS-CoV-2 by inducing the expression of angiotensin-converting enzyme 2, and inflammatory cytokines in the lower respiratory tract. Another study reported that ACE2 expression can be detected in the saliva of patients with COVID-19 which might contribute toward developing an oral dysbiosis and its association with C. albicans and Gram-negative. Periodontal disease can increase the risk of systemic disease, since inflammatory and dysbiotic factors as well as comorbidities affect systemic health, it is possible that periodontal status indicates the risk of complication of COVID-19. A case-control study was performed that patients with a history of periodontal therapy were associated with significantly lower D-dimer levels than those without periodontal therapy. Many factors and comorbidities have been closely associated with Periodontal diseases such as diabetes, smoking, obesity, aging, and hypertension. The relationship between periodontitis and COVID-19 are still debated even though these two diseases have the same associated with many comorbidities.

IL13

COVID-19 AND DENTISTRY: AN UPDATED OVERVIEW FROM THE DENTAL PERSPECTIVE

Prof. drg. Endang Winiati Bachtiar, M.Biomed., Ph.D., PBO

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

NURI 1

TIME:

10.30-12.00

The relationship between oral health and clinical manifestations of the severity of COVID-19 has been widely studied. Host immune responses, changes in the oral microbiome, and supramolecular biomarkers present in samples from the oral cavity may reflect features of oral host-pathogen interactions in COVID-19 patients. This paper will present how the potential of oral samples in COVID-19 patients to show biologically relevant bacterial- SARS-CoV-2 relationships that can influence clinical manifestations of COVID-19 disease. Our ongoing project related to COVID-19 research has demonstrated that oral microbiome profiles and immune response biomarkers as well as supramolecular miRNAs will be addressed in this paper.

THE CURRENT CONCEPT OF MANAGEMENT DENTIN HYPERSENSITIVITY

Prof. Dr. drg. Yuniarti Soeroso, Sp.Perio(K)

Department of Periodontology, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

SUMMIT

TIME:

09.00-10.30

Now adays the management of dentine hypersensitivity (DH) has been developed and advanced. DH is describes as sharp, short pain in the response to certain stimuli that arise from exposed dentin, such as temperature. DH also known as sensitive teeth is a common dental problem. The hypersensitivity is a highly prevalent cause by gingival recession and tooth whitening, acids from foods and drinks. After scaling and periodontal therapy, the root sensitivity could occurs for 1 to 3 weeks and it will slowly decreases. Teeth wear (attrition), erosion and parafunctional habits (bruxism) also caused enamel Loss and dentin exposed. Very important to make proper diagnosis of dentin hypersensitivity in the management of dentin sensitivity. The management basic principles for dentin sensitivity are to occlude dentinal tubules and interfere with the transmission of neural impulses. Professional treatment of DH in-office or at home can treat mild and moderate conditions. Mild generalized dentin hypersensitivity can be treated at-home or over-the-counter treatments include self-medication to relieve dentin sensitivity by using desensitizing toothpastes.

SECTION
D2

Short Lecture Abstracts

DATE	**: 3 February 2023**
VENUE	**: Merak 1**
TIME	**: 08.00-09.00**

OP-02A

Latest Science And Technology In Orthodontic

Dr. drg. Retno Widayati, Sp.Ort(K)

Orthodontics is the specialty of dentistry concerned with the supervision, guidance, and correction of the growing and mature dentofacial structures, including those conditions that require movement of teeth or correction of mal-relationships and malformations of related structures by the adjustment of relationships between and among teeth and facial bones by the application of forces and/or the stimulation and redirection of the functional forces within the craniofacial complex. The science of orthodontics continues to experience development through research in various fields, which aims to improve the quality of orthodontic care services in cases of skeletal, dental, functional malocclusions, and craniofacial in children, adolescents, and adults. Therefore orthodontists need to understand and adapt to the latest technological developments in the field of orthodontics, including the development of bracket systems, archwires, Temporary Anchorage Devices (TAD), aligners, and digital technology

OP-02A-01

A Surgery-first Approach in Surgical-orthodontic Treatment of Skeletal Class-III Malocclusion

Evie Lamtiur Pakpahan

Class-III malocclusion is associated with a deviation in the sagittal relationship of both jaws. It is characterized by a deficiency of the maxilla, or by prognathism of the mandible. One treatment option for severe skeletal class-III malocclusion is by orthognatic surgery. Purpose: Conventional orthodontic surgery for dentofacial anomalies requires a variable period of pre-surgical orthodontic treatment of unpredictable length. In the “Surgery-first Approach” (SFA), the presurgical orthodontic treatment phase is eliminated. This facilitates the primary purpose of the technique; reduction in total treatment duration as well as shortens the latency period to achieving the most aesthetically-tangible steps without compromising the occlusion. Case report: A 24-year-old female with skeletal Class-III malocclusion (negative overjet -5mm, overbite +2mm, concave profile, protrusive chin). The patient was treated by SFA consisting of BSSO mandibular set back and non-extraction therapy. The patient received orthognathic surgery a week after bracketing of the teeth. The patient benefitted from immediate improvement of the facial profile after surgery, and a much shorter treatment period. There results were uncompromised. After an active treatment of 12months, improved facial profile, facial proportions, and a significant reduction of mandibular prognathism were achieved. The treatment results were stable after a 1-year follow-up of the treatment. Conclusion: In appropriate cases, SFA is an efficient and effective treatment alternative. The patient benefitted from immediate improvement of the facial profile after surgery, and a much shorter treatment period while the results were uncompromised.

OP-02A-02

Thermoplastic Material Selection for Orthodontic Aligners: A Literature Review

Riandri C. Runizar, Miesje Karmiati Purwanegara, Retno Widayati

Introduction: Aligners or clear removable appliances have become an alternative to fixed braces for patients who values esthetic, and oral hygiene. Aligners are made from thermoplastic polymers which are heated in a thermoforming device and then pressed onto the patient's model set-up. The thermoplastic aligner will exert forces which induce orthodontic tooth movement. Therefore, the present paper aims to review the most used materials in fabricating aligners, focusing on their mechanical and physical performances, according to the current state of literature.
Article Review: The data collection for this literature review was conducted through an electronic search of the articles through the databases: PubMed, Embase, and Scopus. The research included human studies, clinical trials, in vitro studies, and literature reviews published between 2012 and 2022. All references are reviewed based on PRISMA guidelines.
Discussion: The most used materials for aligners are Polyethylene Terephthalate Glycol (PETG), Thermoplastic Polyurethane (TPU), and multilayer material such as SmartTrack by Invisalign. The thermoplastic aligner should be stiff enough to exert orthodontic forces, but flexible to be taken in and out of the mouth. Analysis of the material's mechanical properties and physical properties, such as transparency and color stability in the oral environment, are conducted from studies included in the review.
Conclusion: A better understanding of thermoplastic material for aligners is an advantage in selecting the optimal material that provides esthetic values and is able to exert constant forces to elicit biological response for orthodontic movement.

OP-02A-03

Removable Orthodontic Appliance for Adult Patient with Mild Crowding, Is It still Working?: A Case Report

Dwijaya Shavira, Farih Aminah, Dwita Pratiwi, Sigit Handoko

Aim: Everyone deserve a beautiful smile as it's the first thing people notice. One of the elements affects smile aesthethic is the position of anterior teeth. Malposition of the teeth could be treated by orthodontic appliance. Unfortunately, orthodontic appliances and treatment modalities are known to be expensive. In mild to moderate crowding case, removable appliance could be a promising alternative to correct the malposition of the teeth. Case report: The patient was a 21 years old Indonesian female came with a chief complaint of irregular upper front teeth and its unaesthetic appearance. The patient had no significant medical and dental history. Patient has straight profile, class I skeletal, class I dental malocclusion type I anterior crowding, diastema, class I molar and canine relationship. Patient was treated with removable appliance comprise of labial bow incorporating Z and simple spring. After 8 months of treatment, the chief complaint of the patient was resolved, anterior crowding were corrected and diastema were closed. Conclusion: With the patient's compliance and periodic control, removable appliance serves as a favourable alternative in treating adult patient with mild crowding to achieve better smile.

DATE	**: 3 February 2023**
VENUE	**: Merak 2**
TIME	**: 08.00-09.00**

OP-02B-01

Surgical Endodontic on Previously Treated Endodontic Retreatment at True Cyst Lesion in Central Left Incisivus Mandible: Case Report
Elizabeth, Dewa Ayu Nyoman Putri Artiningsih

Goals: Inadequate endodontic treatment will trigger persistent lesion and gradually will increase proinflammatory sitokin to prevent the expand of lesion to systemic area through chronic lesion. In time, this process will lead to true cyst formation that will only respond on surgical retreatment.
Case presentation: A 52-year-old male was referred to RSKGM FKG UI with complaints of discomfort at mandibular left front teeth because of swelling on inner lingual side of gum since few years ago and felt pain while chewing. This tooth had been done endodontic treatment. Treatment for this case contain endodontic retreatment and 6 months evaluation show persistent of swelling at lingual area. Endodontic surgery is indicated in this case and was performed with intrasulcular trapezoidal flap, cyst enucleation, apicoectomy, retrograde preparation, retrograde filling with Bio-C repair. Bone graft and membrane (GTR technic) was applied and reposition of gum. 1 week evaluation show diminish of lingual swelling and asymptomatic. 3 months, 6 months, and 1 year evaluation is needed to evaluate healing process.
Conclusion: 6 months evaluation of non-surgical retreatment show the persistence of lesion in lingual region and symptoms. True cyst will only respond on surgical endodontic to achieve healing process.

OP-02B-02

Management Of Type 2 Vertucci Root Canal Treatment On The Lateral Insisives And The Mandibular Caninus
Fitri Yuli Mardiyati, Dini Asrianti

The purpose of this case report is to report the management of root canal treatment of anterior lateral incisors and mandibular canines with Vertucci type 2 configuration. Case Report: A female patient, 36 years old, came to the RSKGM FKG UI Conservation Clinic complaining of a large cavity in her lower left front tooth and uncomfortable when biting. Objective examination of teeth 32 and 33 with caries to the pulp, vitality (+), percussion (+). The radiograph shows radiolucency caries to the pulp with a root canal showing a Vertucci type 2 configuration and widening of the periodontal ligament in the periapical teeth of 32 and 33. Diagnosis of teeth 32 and 33 Asymptomatic Irreversible Pulpitis with Asymptomatic Apical Periodontitis. Minimally invasive heat treated Niti file (Trunatomy TM , Dentsply) was use because of its ability to preserve natural shape the root canal system and conserve optimal dentinal structure. Conclusion: The Prevalence of type 2 Vertucci root canal configuration in mandibular anterior teeth is important for operators before starting root canal treatment procedures.

OP-02B-03

Root Canal Treatment on Mandibular First Molar with Radix Entomolaris and Middle Mesial Canal

Hana Tania Rahmaputri, Dewa Ayu Nyoman Putri Artiningsih

Objective: Knowledge about morphology of root canal system and its variation affect the success of root canal treatment. Prevalence of radix entomolaris mandibular first molar on Asian population was 25,04% and middle mesial canal was 28,3%. The aim of this article is to report root canal treatment on mandibular first molar with radix entomolaris and middle mesial canal, from identification, root canal preparation, and obturation. Case Report: A 36 years old male patient came with chief complaint uncomfortable on left side of mouth when chewing. On clinical examination, there was pulp involved cavity on mandibular first molar with vitality test (-) and tender on percussion. On radiograph examination there was a diffuse radiolucency on 1/3 apical of root. The tooth diagnosed as pulp necrosis with asymptomatic apical periodontitis. After access opening, a canal on additional root in distolingual side of pulp chamber and three canals on mesial root were located. Root canal preparation was done with rotary engine driven Nickel Titanium instrument with 4% and 6% taper, followed by root canal obturation and intermediate restoration with composite. Conclusion: Root canal traeatment showed success with loss of clinical symptom and normal function. Identification of radix entomlaris and middle mesial canal with visualization using a dental operating microscope, use of an ultrasonic scaler, and confirmation by periapical radiograph, resulted in adequate root canal preparation and obturation to support successful treatment.

DATE : 3 February 2023
VENUE : Merak 3
TIME : 08.00-09.00

OP-02C-01

Gingival Depigmentation On Thin Gingival Biotype Using Combination Rotary Fine Abrasive Bur And Scalpel Technique: A Case Report

Dewi Sari Mumpuni, Pratidina Fitri Ramadhani, Riska Mutia Ersyari , Benso Sulijaya

Introduction: Oral pigmentation is discoloration of the gingiva or oral mucosa, associated with several exogenous and endogenous factors. Etiological factors are varied which include the racial-physiological pigmentation and mostly localized at the anterior labial mucosa with prevalence more affecting females than males, this condition leads to aesthetic problems particularly in patients with a high smile line. Objective: The present case describes a simple and effective surgical depigmentation on thin gingival biotype by combining bur and scalpel technique. Case: A middle-eastern, 28-year-old female patient came to the Periodontic Unit, Dental Teaching Hospital Faculty of Dentistry FKG UI with chief complaint of physiologic gingival hyperpigmentation that affects low self-esteem. Intra oral examination shows moderate clinical pigmentation of maxillary labial gingiva between tooth #14 to #24 and minimal pigmentation spot also present on the gingiva between tooth #33 and #43 with 2 mm thickness of gingival biotype. Pigmentation score 2 and based on the distribution this gingival pigmentation index score 3. A combined gingival depigmentation technique was done by using bur on attach gingival area

and scraped by a scalpel in the interdental papilla to avoid bone exposure. Analgesics and periodontal dressing were applied to reduce post-operative pain after surgery.
Discussion: Gingival depigmentation can be considered a periodontal plastic procedure whereby the gingival hyperpigmentation is removed. This procedure is cost-effective which has good results with high patient satisfaction.
Conclusion: This gingival depigmentation can be performed with excellent outcomes in less operative time, minimal bleeding and postoperative pain, and rapid healing time.

OP-02C-02

Host Modulation Therapy with Natural Agents in Periodontal Treatment: A Systematic Review

Ketherin Ketherin, Fathia Agzarine Deandra, Rieska Rachmasari , Benso Sulijaya

Introduction: Naturally derived agents have been proposed to enhance the outcome of periodontal therapies while minimizing the adverse effects of synthetic host modulation therapy (HMT) agents which are known to have anti-inflammatory and antioxidant properties. This systematic review aimed to evaluate whether naturally derived agents can substitute synthetic HMT agents in lipopolysaccharide (LPS)-induced periodontitis.
Article Review: Literature searches were conducted from PubMed and Wiley using keywords "host modulation therapy AND probiotic OR herbal OR melatonin AND periodontal regeneration" from 2016-2021. The results were comprehensively reviewed and elaborated following the PRISMA guidelines.
Discussion: From the initial 217 publications, 44 full-text articles were evaluated and 25 were included in the study. Evidence suggests that the use of probiotics downregulates inflammation through the regulation of Toll-Like Receptor 4 (TLR4) and the production of fatty acid, targeting Reactive Oxygen Species (ROS). Other studies suggested that baicalein and andrographolide inhibits pro-inflammatory cytokines and mediators through the suppression of Mitogen- Activated Protein Kinase (MAPK) and Nuclear Factor-κB (NF-κB), similar to the works of melatonin. Meanwhile, Ayurvedic herbals suppress bone resorption by inhibiting pro-inflammatory mediators such as Tumor Necrosis Factor alpha (TNF-α) and interleukin. Lastly, improvement of periodontal pocket depth and gingival index was seen in a group given melatonin as an adjunct treatment.
Conclusion: Evidence suggested a favorable outcome of probiotics, herbals, and melatonin as naturally derived host modulation therapy agents targeting different aspects in the LPS-induced inflammation pathway in periodontitis with less adverse effects.

DATE : 3 February 2023
VENUE : SUMMIT
TIME : 08.00-09.00

OP-02D-01

The Importance of Stevens-Johnson Syndrome/Toxic Epidermal Necrolysis Induced By Valproic Acid In Bipolar Patient Multidisciplinary Approach Management: A Case Report

Ni Putu Yessy Karmila Putri, Indriasti Indah Wardhany, Ika Anggraini

Introduction: Stevens-Johnson Syndrome (SJS)/Toxic Epidermal Necrolysis (TEN) were life threatening hypersensitivity reaction which often triggered by drugs and present as widespread epidermal detachment and widespread necrosis. This case report aims to describe the the importance of SJS/TEN overlap induced by valproic acid in bipolar patient mutidiciplinary approach management. Case Report: A 20-year-old female SJS/TEN inpatient was consulted by Universitas Indonesia Hospital (RSUI) Dermato-Venerology Unit to the Oral Medicine Unit for management of the extensive oral lesions. Lip and mucosal lesions started from 3 days ago and became more extensive and painful (Visual Analogue Scale:8), causing eating difficulties. The suspected drug was Valporic acid that was used to treat patient's bipolar disorder. Extra oral examination: severe skin erosion on circum oral and hemorrhagic lips crusts acompanied with erosion areas. Intra oral examination: extensive erosion, atrophic, and sloughing on all oral mucosal site along with generalized desquamative gingivitis. The multidisciplinary approach was
carried out mainly by dermatologist, oral medicine specialist and internist. Pharmacological therapy given for skin lesion was intravenous dexamethasone, tapering down swish and spit dexamethasone solution for intra oral lesion and alternate corticosteroid cream-antibiotic cream for lips lesion. Non-pharmacological therapy includes the education for maintaining the oral hygiene by using sterile gauze soak in NaCl 0,9% twice daily. Lip and oral lesions respond very well to therapy thereby improving the patient's complaints and eating quality. Conclusion: A comprehensive multidisciplinary approach with good communication has significantly improve patients' quality of life and contribute to a better prognosis in SJS/TEN overlap patients.

OP-02D-02

The Impact of Early Recognition of Secondary Syphilitic Lesions in HIV-Positive Patient on Dentist Clinical Decisions: A Case Report

Yanti Yulianti, Indriasti Indah Wardhany

Objective: The oral manifestations of three stages of syphilis are non-specific and can mimic other diseases. This case report aimed to describe the impact of early recognition of secondary syphilitic lesions in HIV-positive patient on dentist clinical decisions. Case Report: A 34-year-old male outpatient came to the Universitas Indonesia Dental and Oral Hospital, complained of a 3-week painful full mouth cancer sore, accompanied by mild fever, sore throat, difficulty swallowing, and patches on the extremity palms. The patient was on 8-month antiretroviral therapy, homosexual, promiscuous, and has a history of having protected oral and anal sex. Extra oral examination: multiple erythematous rashes on extremity palms. Intra Oral examination: multiple erosion and ulceration with various shapes (round/oval/irregular) and sizes mixed with white plaque, scattered on all the oral mucosa.

Treponemal and Non-treponemal laboratory result for syphilis was reactive. Definitive diagnosis established was mucous patches as oral manifestation of secondary syphilis. Pharmacological therapy carried out by internist using penicillin injection. We give Doxycycline solution swish and spit for oral lesions and multivitamin to boost immunity. Patient approach includes conducting examinations and patient management in private rooms, implementing the highest levels of infection control, and collaborating with other health professionals. The patient complaint was improved, and the lesion showed significant remission within 2 weeks. Conclusion: The early recognition of secondary syphilis oral manifestation is important, especially in HIV-positive patients with risky sexual behavior. Dentist clinical decisions regarding the management of oral lesions will have great impact on prognosis and prevent further complications.

DATE : 4 February 2023
VENUE : MERAK 1
TIME : 08.00-09.00

OP-03A-01

Molecular Docking Metabolites of Caulerpa racemosa as Potential Antibacterial Agents of initial colonizer Streptococcus mutans and Veillonella parvula in Biofilm Formation

Christopherous Diva Vivo, Citra Fragrantia Theodorea, Erik Idrus

Introduction: The high prevalence of dental (45.3%) and gingival problems (14%) inIndonesia (Riskesdas 2018) is caused by a lack of awareness to maintain good oral hygiene.It is necessary to explore preventive agents to deactivate virulence factors and inhibit the attachment of colonizing bacteria that lead to oral dysbiosis conditions due to imbalance of oral biota from oral biofilm formation.3,4 Method: In Silico study was carried out through a molecular docking process, to examine the molecular interactions between Caulerpa racemosa extract ligands against Streptococcus mutans bacteria receptors (Ag I/II, Gbp, and Gtf) and Veillonella parvula (Glucosyltransferase family 9) as the initial colonizer at the stage of oral biofilm formation (Salivary Agglutinin Glycoprotein / g340). Numerical data were analyzed by One-Way ANOVA test. Results: The results showed that there was an inhibitory effect of the initial colonizer bacteria S. mutans (Ag I/II, Gbp, and Gtf) and V. parvula (Glucosyltransferase family 9) when they were docked with C. racemosa ligand, then compared with host surface receptor g340 (SAG) as a positive control. Conclusion: C. racemosa extract is a potential antibacterial agent that contributes to a significant reduction in the adherence of initial colonizer bacteria to oral biofilms. The bactericidal activity of C. racemosa and its toxicity to host cells need to be studied further.

OP-03A-02

Molecular Docking Interaction of Caulerpa racemosa ligands with Porphyromonas gingivalis and Treponema denticola Bacterial Receptors in the Late Stage of Biofilm Formation

Aurelia Ardityaningrum, Citra Fragrantia Theodorea, Erik Idrus

Introduction: National Riskesdas data from 2018 states that there is a prevalence of caries of 88.8%, root caries of 56.5%, and periodontitis of 74.1% in the entire population of Indonesia. 1 One of the cause of these conditions is uncontrolled activity of oral biofilm formation that is dominated by the presence of Porphyromonas gingivalis and Treponema denticola bacteria. Methods: In Silico study through molecular docking to examine the molecular interactions between Caulerpa racemosa ligands that contains active ingredients with bacterial receptors in the late stage of oral biofilm formation, such as Porphyromonas gingivalis and Treponema denticola. The interaction results obtained are then analyzed using the One-Way ANOVA test. Results: Existence of an interaction between Caulerpa racemose extract ligands with bacterial receptors of Porphyromonas gingivalis and Treponema denticola. Conclusion: Caulerpa racemosa has the potential to be a herbal antibacterial agent that can prevent or reduce uncontrolled formation of oral biofilms through in silico studies. However, further research is needed on the properties of Caulerpa racemosa to find out other potentials of this herbal plant.

DATE	**: 4 February 2023**
VENUE	**: MERAK 2**
TIME	**: 08.00-09.00**

OP-03B-01

Management of Maxillary First Molar Endodontic Treatment with Pulp Stone Using Ultrasonic Endodontic Scaler: A Case Report

Johan Adiyasa, Ratna Meidyawati

Aim: Reporting the clinical predictable workflow of maxillary first molar endodontic treatment with pulp stone utilizing ultrasonic endodontic scaler. Case report: A 21-year-old-man was referred to Conservative Dentistry Specialist Clinic at Universitas Indonesia Dental Hospital for endodontic treatment of first right maxillary molar. On access opening, a mass of pulp stone was found inside the pulp chamber, covering the visualization of orifices. The presence of pulp stone prevents the optimal chemomechanical debridement of the root canal system. In the past, clinician might remove pulp stone using burs, but ultrasonic instrumentation with special tips make the removal less invasive and more predictable. Ultrasonic endodontic scaler (Acteon® by Satelec, France) and tip (ET18D) were utilized to dissect the pulp stone (a 3x3x2mm size) thus after which an orthograde endodontic treatment could be performed. Conclusion: The clinical approach presented on this paper allows clinician to perform a predictable workflow using ultrasonic endodontic scaler in managing endodontic treatment in tooth with pulp stone by avoiding potential complications like perforation and unnecessaryremoval of hard tissue that will likely weaken the remaining tooth structure.

OP-03B-02

Intraoral Scanner to Fabricate Single-Unit Porcelain Fused to Metal Crown in Unstable Occlusion Patient: A Case Report

Natasya Hillary , Citra Kusumasari

Introduction: Intraoral Scanners (IOS) play a paramount role in digital workflow by replacing the conventional impression, reducing procedure time, and allowing better communication between dentists, dental technicians, and patients. However, IOS is still being developed to obtain accuracy that resembles conventional techniques, especially in patients with multiple tooth losses. This case report aims to present the use of IOS to fabricate single-unit crowns in partially edentulous patients. Case Report: The 63-year-old female patient continued post-endodontic restoration treatment on her right upper front tooth. The patient has a considerable loss of teeth with one occlusion point in the left anterior region. Vertical dimensions, bite stability, and occlusion load of the patient was analyzed. Then, the fabrication of a partially veneered metal porcelain crown began using IOS Prime Scan Connect SW 5 (Dentsply-Sirona Dental Systems, Bensheim, Germany) in collaboration with the dental laboratory using the STL format and Exocad application. Conclusion: Through understanding patient occlusion and digital scanning algorithms, the use of IOS in making artificial crowns on patients with unstable occlusion can be carried out effectively and efficiently.

OP-03B-03

Oval Shape Root Canal Treatment On Mandibular Second Molar Using Fiber Reinforced Composite Post: A Case Report

Aan Midad Arrizza, Citra Kusumasari

Objective: This case report aims to explain the use of fiber-reinforced composite (FRC) post in providing a good adaptation between the post and the distal oval shape root canal on the mandibular second molar. Case Report: A 24-year-old female patient, came to the Conservation Clinic of the RSKGM FKG UI with chief complaints of a large cavity in her lower left molar and discomfort when eating food. The diagnosis was Asymptomatic Irreversible Pulpitis with Asymptomatic Apical Periodontitis. After root canal treatment and post-space preparation, an experimental sizing and fabrication of an anatomical FRC post (EverStick PostTM, GC Corporation, Tokyo, Japan) were attempted into the oval root canal at the distal root of tooth 37, then its cemented with self-adhesive resin cement. Afterwards, core fabrication was carried out using FRC (EverXTM, GC Corp, Tokyo, Japan) dan bulk-filled composite resin (FiltekTM One Bulk Fill, 3M ESPE). Then, the tooth crown is prepared for the manufacture of artificial zirconia crowns. Conclusion: The use of fiber-reinforced composite post is easy and advantageous for oval-shaped canals, with minimal preparation and creating a good monoblock system from inside the root canal to the artificial crown.

DATE : 4 February 2023
VENUE : MERAK 3
TIME : 08.00-09.00

OP-03C-01

The Protective and Harmful Effects of Smoking Behavior on Oral Ulcer

Aisyah Rachmadani Putri Gofur, Taufan Bramantoro, Dwi Ariani, Wahyuning Ratih Irmalia

Introduction: Oral ulcer is one of oral lesion that is often found in oral mucous and affects around 20-25% in population. Life style such as smoking may be one of bad habits that will affect human body, especially oral cavity. The number and intensity of smoking peers individually affect smoking propensity. The prevalence of smoking in young adults higher than any other age group. The objective from this study is to show the protective and harmful effects of smoking behavior toward oral ulcer.
Methods: This study used data from secondary data analysis Indonesia Family Life Survey in 2014 with 9.094 samples. Data that were obtained then analyzed using correlation statistical analysis between characteristics and smoking behavior of respondents and oral ulcer using spearman correlation test and multivariable analysis were performed using logistic regression test to estimate the odds ratios (OR) of experiencing oral ulcer and their 95% confidence intervals (95%CI). Statistical significance of association was evaluated at p<.001.
Result: The result showed that the duration of smoking had significant correlation to oral ulcer (p<0.001), the respondents who had been smoking for less than 10 years were more susceptible to oral ulcer, with OR=0.712 [95% CI 0.636-0.789]. Meanwhile, respondents that experienced depression more often, had bigger tendency to experience oral ulcer and it was significantly correlated to oral ulcer prevalence, same with respondents who were only moderate smoker (p<0.001).
Conclusion: Smoking is not beneficial to prevent occurrence of oral ulcer and there is significant correlation of smoking behavior on oral ulcer.

OP-03C-02

Oral Health Problems and Healthcare-Seeking Behavior in Children with Hearing Impairment: a Narrative Review

Amandita Parameswari, Armasastra Bahar, Melissa Adiatman

Background: Children with hearing disability face challenges on accessing healthcare services caused by their lack of ability to express their oral health problems and affect their oral health status. This narrative review aims to explore oral health status in hearing impaired children and discuss in detail about oral healthcare-seeking behavior in children with hearing impairment. Article Review: Many studies assessed oral health status of children with hearing impairment. A comprehensive retrieval of the English literature from 2012 to 2022 was done in Pubmed, ScienceDirect and Proquest and article selection was done using PRISMA guidelines. Oral health assessments including caries, gingival problem and periodontal condition. Healthcare seeking behavior assessment influenced by healthcare facility and individual health-related knowledge and attitude.
Discussion: Hearing impaired children have a high prevalence of caries, high caries activity and poor gingival condition compared to their counterparts. There are unmet dental treatment needs due to their dependence on parents or caregiver

on decision making. Most of the studies show that knowledge associated with oral health problems and dental healthcare utilization.
Conclusion: There are variety of oral health problems and high unmet dental treatment needs in children with hearing impairment. The use of dental services is low. Proper educational method on oral hygiene practices for hearing impaired children and their parents or caregiver is needed to enhance their ability on oral hygiene behavior.

OP-03C-03

Instrumen Pengukuran Literasi Kesehatan Oral

Laksmi Vidjajanti, Herry Novrinda , Diah Ayu Maharani

Introduction Measurement of individual health literacy is intended to evaluate potential risks to general health and oral health. The purpose of this paper is to determine the various instruments for measuring oral health literacy currently available. Method: used in writing this article is a Narrative review, which is a literature published in the last 10 years using various existing databases Pubmed, Springer, Proquest, Science Direct, Google Scholar, 24 literature used in this study Results: Commonly used instruments are: Rapid Estimate of Adult Literacy in Dentistry-30 (REALD-30); Rapid Estimate of Adult Literacy in Dentistry-99 (REALD-99); Test of Functional Health Literacy in Dentistry (ToFHLiD); and the Oral Health Literacy Instrument (OHLI), CMOK, HeLD with various structures and the ability to assess literacy skills. Conclusion: Various instruments for measuring Oral Health Literacy that have been developed are used in various countries with cross cultural adaptation processes and are used in various populations and various groups. age, indicating a valid and reliable instrument.

DATE : 4 February 2023
VENUE : SUMMIT
TIME : 08.00-09.00

OP-03D-01

Improved Biocompatibility of Hydroxyapatite Composite Nanoparticles – Poly Vinyl Alcohol with Addition of Poly Lactic-Co-Glycolic Acid for Bone Regeneration: In Vitro Study

Feni Istikharoh, Hidayat Sujuti,Edi Mustamsir, Lalita El Milla

Introduction Alveolar bone damage often occurs after tooth extraction, odontectomy, and enucleation. Bone damage can impact the process of mastication, esthetics, and periodontitis. Generally, alveolar bone reconstruction uses bone graft. Conventional bone grafts have disadvantages, including relatively expensive costs, long handling times, and the risk of rejection reactions by the body. Hydroxyapatite nanoparticles (HANP) are biomaterials with a size of less than 100 nm. Polyvinyl alcohol (PVA) is a hydrophilic polymer that has high flexibility. HANP- PVA composite can improve dimensional stability as a synthetic bone graft. Polylactic-co-glycolic acid (PLGA) is a new-generation polymer widely used as a drug carrier in biomedicine. This study aimed to determine the biocompatibility of the HANP-PVA composite combined with PLGA in MC3T3-E1 cells. Methods for preparing HANP-PVA composites and HANP-PLGA-PVA composites with 20% HANP (w/w); 20% PLGA (w/w) using freeze drying -20oC. Cell line MC3T3-E1 was cultured and divided into two groups: HANP-

PVA group (K1) and HANP-PLGA- PVA group (K2), incubated for three days. Each group was treated with 18.8 L of MTT reagent and incubated for 4 hours; then, the absorbance was measured on a plate reader OD 570 nm. The test was carried out four times. The absorbance results are averaged and converted to a percentage of the number of cells—statistical analysis using homogeneity test and independent T-test ($p<0.05$). Results On the third day, the results of the MTT assay K1 were 992.3% cells, while K2 was 1111.18% cells ($p<0.05$). Conclusion Addition of PLGA can increase the biocompatibility of HANP-PVA composites in MC3T3-E1 cell culture.

OP-03D-02

X-ray Fluorescence (XRF) Analysis and Degradation Test of Combination of Gypsum Puger Hydroxyapatite Scaffold, Gelatin and Alginate (Sargassum sp) as Bonegraft Material

Amiyatun Naini, ,Nurmay Farah Lumantya, Hengky Bowo Ardhiyanto

Background: The cases of oral tumors in Indonesia are very high. Oral tumors will cause extensive bone damage, thus requiring the reconstruction of bone defects with a bone graft. Bone grafts can be made from several materials which are formed into a scaffold. Gypsum Hydroxyapatite Scaffold (HAGP) can be combined with biopolymer material from alginate (Sargassum sp) to improve material properties. This study aimed to analyze X-ray fluorescence (XRF) and degradation test of the combination of gypsum puger-alginate (Sargassumsp) hydroxyapatite scaffold as a bone graft material. Research Methods: Experimental laboratories research design. This study consisted of 3 groups, the HAGP / Gelatin-Alginate group with a composition of 100: 0; 70:30; 50:50 (%wt). HAGP / Gelatin-Alginate (Sargassum sp) samples conducted XRF testing and degradation testing. Results: XRF (X-ray Fluorescence) analysis on the HAGP / Gelatin-Alginate scaffold contained dominant Ca and P elements, the results of the degradation test of the addition of alginate to the HAGP scaffold affected the rate of degradation, the percentage of weight loss, and the release of Ca ions in the HAGP / Gelatin-Alginate scaffold sample group has decreased mass. Conclusion: XRF analysis of the HAGP / Gelatin-Alginate (Sargassum sp) scaffold contains elements of Ca and P as bone-forming elements. The degradation test obtained a percentage value of 2.14% in the combination of HAGP / Gelatin-Alginate scaffold composition with a ratio of 50:50 (%w/w), which can facilitate the process of bone regeneration.

OP-03D-03

Cell Viability and Biocompatibility of Hydroxyapatite Synthesized from Fish Scales

Sinta Candra Wardani, Hidayat Sujuti, Edi Mustamsir, Diwya Nugrahini Hapsari

Introduction – The need for bone graft as a bone regeneration material has resulted in various innovations of biomaterial sources to produce allografts. Some of the natural materials used include vertebrate animal bones, egg shells, oyster shells, coral, and also fish scales. These materials are synthesized into hydroxyapatite which has biocompatible and osteoconductive properties. In addition, hydroxyapatite is also considered an ideal bone graft material because it has a structure of inorganic components similar to human bones and teeth. Methods – In this study, hydroxyapatite synthesized from fish scales was applied to the MC3T3-E1 preosteoblast cell line with various concentrations of 200 µg/ml, 100 µg/ml, 50 µg/

ml. After incubation for 72 hours, the viability test was carried out with the MTT test. Subsequently, a flowcytometry test was performed with a concentration of 50 µg/ml to observe cell apoptosis and assess the biocompatibility of the material. Results – The best cell viability after 72 hours was shown in cells with a concentration of 100 g/ml hydroxyapatite but showed no significant difference between groups. While the results of the flowcytometer test showed cell apoptosis below 10%. Conclusion – Hydroxyapatite from fish scales has good cell viability and biocompatibility so it has the potential to be used as bone regeneration material.

DATE : 4 February 2023
VENUE : NURI 1
TIME : 08.00-09.00

OP-03E-01

Removal of Broken File in the Upper First Molar Using an Ultrasonic Instrument and Dental Microscope : A Case Report

Ferinda Utami, Ratna Meidyawati

Aims: This report explains the use of an ultrasonic device and a dental microscope to remove a broken file in the apical third of mesiobuccal root canal of an upper first molar. Case Report: A 40-year-old female patient was referred for continued root canal treatment of the upper left first molar. The tooth was undergoing root canal treatment a few weeks earlier but could not be completed due to a broken file. The patient previously had a history of pain in the tooth but at this time the tooth was not in a state of pain and felt uncomfortable when used for chewing. Radiographic examination showed image of a broken file in the mesiobuccal root canal in the apical third of the root and radiolucency in the apical. File retrieval started by making a staging platform with an ET20 ultrasonic tip (Acteon ® by Satelec, France) under a microscope. Then proceed with the ET25 tip in a counter clockwise direction in order to remove the broken file. Conclusion: Technological advances such as dental microscope and ultrasonic device have made the successful extraction of broken file in root canals more predictable. In this case report, removal of a broken file at the apical mesiobuccal root of the maxillary first molar can be performed using ultrasonic tips ET20 and ET25 with the aid of a dental microscope without any

OP-03E-02

The Management Of Separated File In The Lower Left First Molar Using An Ultrasonic Instrument And Dental Operating Microscope

M. Mahathir, Aditya Wisnu Putranto

Objective. It has been recorded that the incidence of separated files is 0.25% for hand-file instruments and 1.68% - 2.4% for rotary-file instruments and frequently occurs 5% in molars compared to anterior and premolar teeth. The combination of endodontic ultrasonic tip armamentarium and dental operating microscopes (DOM) typically improves success rates in file removal from 33% to 95%. This case report explains how to remove the separated file using ultrasonic instruments visualized by DOM. Case Report. A 21-year-old female patient had previously initiated therapy at the lower left first molar. There was radiolucency at mesial apical roots and the presence of broken files in the 2/3 coronal distolingual root. A rubber dam isolation was used in this case The retrieval workflow began with the creation of a staging platform using ET20 endodontic ultrasonic tip under high magnification by using DOM and ET25 surrounding the separated file instrument. Each step of the procedure is interspersed with 2.5% NaOCl irrigation and 17% EDTA then dried before the use of endodontic ultrasonic tips. Conclusion. The energy applied will create vibration to the separated file and causes the instrument to become loose and can be removed from the root canal. An endodontic ultrasonic tip instrument and DOM increased the probability of separate file retrieval from the root canal.

OP-03E-03

Management of Furcal Perforation in Lower Right Molar using Mineral Trioxide Aggregate under Dental Operating Microscope

Kalya Putri, Aditya Wisnu Putranto

Introduction: Furcal perforation in endodontic treatment of lower molar is one of the most common iatrogenic injury with the prevalence up to 17,6%. Precision repair of the furcal perforation can be done using bioactive material with good mechanical properties such as Mineral Trioxide Aggregate (MTA) under magnification of dental operating microscope (DOM). Case Report: Female patient, 23 years old, came to FKG UI Dental Hospital with the chief complaint of chipped temporary filling and chewing discomfort in the lower right molar. Three years ago, the tooth had been previously treated in Public Health Center but not finished. Patient also felt some recurrent swelling with fluctuation on the gum near the tooth. On clinical examination, tooth 46 was non-vital, with sensitivity to percussion and palpation. There was noticeable fistula on the buccal gingiva. On radiograph examination, there was radiolucency in the pulp chamber floor which communicate the pulp chamber to alveolar bone in the furcation area, and diffuse radiolucency in the apical area. On the first visit, the temporary filling was removed and the pulp chamber floor was visualized using DOM. The pulp chamber floor perforation was 2 mm in diameter, then repair using MTA was done. The root canal was then cleaned and shaped using crown-down technique and obturated using warm vertical compaction (WVC). Tooth-colored onlay was chosen as definitive restoration for the tooth. Conclusion: MTA has excellent biocompatibility and mechanical properties to be material of choice in furcal perforation repair, as it favors local wound healing. Magnification of the perforation area using DOM and placement of MTA as bioactive material can be effective treatment procedure in the furcal perforation repair.

DATE	**: 4 February 2023**
VENUE	**: NURI 2**
TIME	**: 08.00-09.00**

OP-03F-01

Modification of Hotz's Plate with Nasal Extension in Unilateral Cleft Lip and Palate as Presurgical Nasoalveolar Molding

Nur Aini, Muhammad Syafrudin Hak

Objective - To describe the function of modification Hotz's plate with nasal extension to facilitate lip repair Case Report – Five patients with complete unilateral cleft lip and palate in Cleft Center RSAB Harapan Kita were using modified Hotz's plate followed by Cronin's method lip repair and primary rhinoplasty. The plate applied on the second visit prior lip repair Conclusion - Application of modified Hotz's plate facilitates minimal rhinoplasty intervention as well as overcome the feeding problem. It has simple design and easy to apply for the mother and more comfortable for baby. Furthermore, it can also facilitate the growth of alveolar.

OP-03F-02

Lower Lip Pit in Van der Woude Syndrome: Rare Case

Ken Ayu Miranthy, Nur Aini , Muhammad Syafrudin Hak

Objective - To obtain better understanding about the characteristic of lower lip pit in Van der Woude syndrome which is a rare case in craniofacial anomaly. Case Report – From 2006 to 2015, we found 11 cases of lower lip pit associated with Van der Wouder syndrome. These 11 patients underwent treatment protocol in Cleft Center, Harapan Kita Mother and Children Hospital. Diagnosis was made based on subjective and objective examination. Surgical excision with consideration for tissue preservation is performed to remove lip pit entirely with the sinus tract. Conclusion – Clinical presentation might vary from one to another. Thorough examination needed to prevent misdiagnose of lower lip pit with another lesion. Surgical excision is the treatment of choice to achieve good aesthetic result.

SECTION
D3

Poster Presentation Abstracts

SCREEN 1
DATE : 2 February 2023
TIME : 13.00 – 14.15

P1-01-01

Head And Neck Tumour Histopathological Image Representation With Pre-Trained Convolutional Neural Network And Vision Transformer

Ranny Rahaningrum Herdiantoputri, Daisuke Komura, Tohru Ikeda, Shumpei Ishikawa

Introduction: Producing image representation with machine learning is an approach to quantitatively represent histopathological images of head and neck tumour for future application of artificial intelligence-assisted pathology diagnosis system. This study aims to compare between image representation produced by pre-trained convolutional neural network and pre-trained vision transformer with different magnification levels. Methods: Histopathology slides of 5 oral tumor categories (n=319 cases) were collected from TMDU Hospital and scanned in 40x magnification to create whole slide images. Regions of interest were annotated and extracted into image patches of 4096; 2048; and 1024 pixels then compressed into 256 pixels. Image representation was calculated using pre-trained VGG16 block4_conv3 and ViT-L/14. Logistic regression or multi-class Support Vector Machines was used to create a supervised learning model for binary or multiclass classifications, respectively. The performance of each category is measured using precision, recall, and F1-score at the case level. Result: The highest performance of VGG16 for benign and malignant salivary gland tumor (BSGT and MSGT) is achieved with 1024 pixels (F1=0.703 and 0.803). The performance of ViT for BSGT and MSGT are lower than VGG16's with all magnification levels. The highest performance of VGG16 for maxillofacial bone tumor (MBT), odontogenic cyst (OC), and odontogenic tumor (OT) is achieved with 2048 pixels. However, the scores are lower than ViT's for each category (F1= 0.780; 0.874; 0.751). Conclusion: Being more texture-biased, VGG16 performs better in representing BSGT and MSGT in high magnification while a more shape-biased ViT-L/14 outdo its performance in representing MBT, OC, and OT.

P1-01-02

The Preliminary Study Of Chitosan Nanoparticles As Antibacterial Agent On Enterococcus Faecalis Biofilm

Raras Ajeng Enggardipta, Minato Akizuki, Kazumitsu Sekine, Kenichi Hamada, Akikazu Murakami, Hiromichi Yumoto

Introduction: Chitosan nanoparticles (CNPs) has antibacterial activity against Gram positive bacteria which has capacities to challenge endodontic treatment success. This study was to evaluate the effects of different concentrations and different treatment times of chitosan nanoparticles on Enterococcus faecalis biofilm. Methods: Two types of chitosan, low molecular weight (LMW) and high molecular weight (HMW), were prepared to form chitosan nanoparticles using modified ionic gelation methods and characterized by measuring the particle size using a dynamic light scattering (DLS) unit and observing the morphology under the scanning electron microscope (SEM). Enterococcus faecalis biofilm was formed on the hydroxyapatite plates for 2 weeks. Biofilms were exposed to various concentrations of chitosan nanoparticles (0.5%, 5%, 10%, 20%, and 30%) at different treatment times (30 seconds, 1 minute, and 10 minutes). The ATP assay was used to analyze the bacterial viability of the biofilms. Bacteria solutions were plated on brain-heart-infusion (BHI) agar

for colony counts. The one-way ANOVA, Kruskal-Wallis, and Mann-Whitney tests ($p<0.05$) were used for data analysis. Results: The 30 seconds of treatment time was effective to reduce the bacterial viability and the viable numbers of Enterococcus faecalis bacteria. The bacterial viability of the Enterococcus faecalis was reduced in all treated groups compared with the negative control group. Especially, the CNPs HMW significantly showed a reduction in bacterial viability. The 30% CNPs HMW showed significantly lower number of viable bacteria (CFU/ml) than the negative control at 30 seconds. Conclusion: Chitosan nanoparticles has the potential to be developed as an antibacterial agent for endodontic treatment.

P1-01-03

Characteristics Of Temptooth Materials In The Online Market

Hasya N. Fathan, Dudy S. Soebawi, Yosi K. Eriwati

Temptooth material has been circulating rapidly in the online market and it can be easily purchased and used by the community. This product claims that it can be used easily to fill the gap of missing tooth without consulting to a dentist. However, in the KORTUGI website, some dentists found dental diseases that occurred due to the use of temptooth resulting in inflammation of the gums. This study aims to determine the characteristics and properties of Temptooth materials.
After the manipulation and setting of Temptooth materials, the mechanical properties such as surface microhardness, compression and flexural strength test (with a load of 5kN and a crosshead speed test of 0.5mm/min) were carried out to the materials. The FTIR test, water absorption and solubility test were done to determine the composition, the absorbed water, and the ability of the compounds to dissolve in a solvent. The absorption and solubility tests were carried out by immersing the specimen in an artificial saliva solution pH 5.5 for 7 days in an incubator at 37°C. FTIR analysis showed a graph of polybutadiene material which has thermoplastic properties. The results of compression strength: 122.10±15.57 MPa, flexural strength: 15.24±0.59 MPa, water absorption value is 45.11 ±5.08 µgr/mm3. and the solubility is 15.00 ±1.42 µgr/mm3. It can be concluded that Temptooth material can only be used as a provisional material and should not be recommended to be use without advice from dentist.

P1-01-04

Comparative Evaluation Of Compressive Strength And Flexural Strength Of Microhybrid, Nanohybrid, Nanofill, And Universal Flow Composite Resins

Dudy S. Soebawi, Hasya N. Fathan, Yosi K. Eriwati

Dentists need to consider the mechanical properties of restorative composite resins used to provide the best restoration outcome. Restorative materials should resist the load caused by from mastication forces in the mouth, that include compressive and flexural forces. This study aimed to determine the comparison between compressive strength and flexural strength of microhybrid, nanohybrid, nanofill and universal flow composite resins used in dentistry. A total of forty-eight specimens from 4 types of composite resins were divided into two types of tests which were: 24 specimens for compressive test and 24 specimens for Flexural strength test. The restorative materials were microhybrid (Master Fill), nanohybrid (Filtek Z250XT), nanofill (Filtek Z350XT) and universal flow composite resins (Filtek Supreme Flowable), and the test method were based on ISO Standard 4049:2019. The mechanical tests used Universal Testing Machine with a crosshead speed of 0.5mm/min and a maximum automatic load of 5kN, and the data were statistically analyzed by One-way-Anova. The results

showed significant differences in the value of compression strength and flexural strength test (p-value<0.05) between four types of composite resin. The highest to lowest compression strength were Filtek Supreme Flowable (272,52±22,65 MPa), Filtek Z250XT (260,33±30,22 MPa), Filtek Z350XT (249,98±24,16 MPa) and Master Fill (184,39±6,26 MPa) respectively. While the highest to lowest flexural strength were Filtek Z250XT (151,72±12,83 MPa), Filtek Z350XT(114,54±4,851 MPa), Filtek Supreme Flowable (114,39±8,12 MPa) and Master Fill composite resins (104,16±10,17 MPa). It can be concluded that compressive strength values were higher than the flexural strength of all types of composite resins.

P1-01-05

Endodontic Management of C-Shaped Root Canals with Dental Operating Microscope and Warm Vertical Compaction Obturation Technique: Case Report

Senyan Dwiseptyoga, Aditya Wisnu Putranto

Endodontic treatment aims to treat root canals infection from microorganism. One of the challenges of endodontic treatment is anatomical variant of root canals such as C-shaped root canal system. Aims: This case report aims to report the management of C-shaped root canals anatomical variant with the help of dental operating microscope and warm vertical obturation technique to achieve successful treatment outcome. Case Presentation: Female patient 52 years come with big cavity reaching pulp chamber on lower right molar that has been previously treated. Radiograph and clinical findings showed signs of C-shaped root canals system. Endodontic procedure was done using dental operating microscope to find all the canals that is located deeper and different configuration from normal tooth. Warm vertical compaction obturation technique was used to fill the root canals system three-dimensionally. Conclusion: Dental operating microscope gives accurate magnification and lighting for visualization that helps with the treatment of C-shaped root canals system. Warm vertical compaction obturation technique filled the root canals system more hermetically than conventional techniques that increase the long-term prognosis of the treatment.

P1-01-06

Indirect Pulp Capping Using Mineral Trioxide Aggregate as Bioactive Material: Report of Cases

Grace Riska, Aditya Wisnu Putranto

Vital pulp therapy aims to maintain pulp vitality and stimulating reparative dentin formation. The success rate of pulp capping treatment using bioactive material such as Mineral Trioxide Aggregate (MTA) was higher. Objective: The aim of the report of cases was to analyze two cases of indirect pulp capping using MTA. Case Report: The first case, 25-years-old man, complained of large cavity in his right lower tooth which hurts only when he eats food or drinks. The second case, 25-years-old female patient, complained loose old filling on her right upper tooth. The diagnosis of both cases was reversible pulpitis, and the treatment plan was pulp capping using MTA. Indirect pulp capping using MTA had reported as an effective treatment because it is biocompatible, bioactive, hydrophilic, radiopaque, and has good sealing ability. Conclusion: Both cases met several success criteria, including the absence of subjective complaints, preservation of pulp vitality, percussion tests were not sensitive and absence of periapical abnormalities from the radiographic after 1 and 3 months of evaluation.

SCREEN 2
DATE : 2 February 2023
TIME : 13.00 – 14.15

P1-02-01

Penatalaksanaan Lesi Kombinasi Endo-Perio Pada Gigi Molar Mandibula

Farah Diba, Dewa Ayu Nyoman Putri Artiningsih

Objective: This case report aims to describe the management of true combined endo perio lesion on mandibular molars. Starting from diagnosis, treatment protocol and evaluation of lesion healing. Case Report: A 23-year-old female patient complained large cavities on her right mandibular first molar, food is often tucked in, swollen gums since one week ago and pain when chewing. Clinical examination of tooth 46 revealed carious-exposed pulp, percussion and palpation was sensitive and presence of fistula. Periodontal examination showed deep, narrow periodontal pocket on the mesial and buccal aspects, grade II mobility and grade II furcation involvement (Glickman classification). Radiographic examination showed radiolucency involving with pulp and radiolucency with indistinct borders at the bifurcation and periapical. The diagnosis of tooth 46 was true combined endo-perio lesion. The initial treatments for this tooth were scaling and root planning, occlusal adjustment and root canal treatment to eliminate etiology factors. At the reevaluation stage, 5 months after root canal treatment, there was still a pocket persistence on tooth 46 that exceeded 4 mm and grade II furcation involvement, so the treatment was continued with open flap debridement. Evaluation 2 months after surgical treatment showed that the teeth and periodontal tissues has healed, so restorations were performed with lithium disilicate crown. Conclusion: Root canal and periodontal tissue treatment on tooth 46 was successful. It was characterized by patient having no subjective, objective complaints and the results of the radiographic evaluation showed bone repair in the periapical and bifurcation areas. Root canal treatment can reduce the number of biofilm colonies while scaling and root planning, occlusal adjustment and open flap debridement can help reduce inflammation in the periodontal tissues.

P1-02-02

Geroendodontic Treatment Challenges: Obliteration and Curved Canal Case Report

Arianti Amalia P.Y, Dini Asrianti.

Objectives: Endodontic treatment in elderly requires special consideration because physiological and pathological changes in the oral or systemic. Morphological changes of dentin such as obliteration make canal negotiation in the elderly more difficult. Curved canal also make challenge in endodontic procedures, especially in elderly patients. The aim of this case report is to discuss endodontic treatment with obliteration and curved canal in an elderly patient. Case Report: Female patient, 85 years old with ASA II category and the Basic ADL value is 5, came with complaint a cavity in her right upper tooth. Percussion test (+), mobility (-) and no pain. From the radiograph, there is a widening of the apical periodontal space and a severe curved canal in the mesiobuccal root canal. Tooth 16 was diagnosed with pulp necrosis with asymptomatic apical periodontitis. Endodontic treatment in this patient was carried out by observing the patient's systemic condition. Access preparation using a diamendo bur followed by a satelec acteon tip ET 20 with magnification to locate the mesiobuccal and distobuccal root canal orifices. Root canal preparation using

a rotary protaper gold instrument with 2.5% NaOCl irrigation and 17% EDTA. Then the tooth is restored with an onlay. Conclusion: Endodontic treatment in geriatric patients (geroendodontic) can be done by taking into account the patient's systemic condition with appropriate and short treatment procedures. The difficulty in this case can be overcome by the use of magnification, satelec acteon and the use of rotary protaper gold instruments for the preparation of curved canals.

P1-02-03

Management Of Root Canal Obliteration In Previously Treated Tooth

Ibramanto Warganegara, Dini Asrianti

Introduction: Root canal obliteration is defined as a deposition of hard tissue within the root canal space often present endodontic treatment challenge. The endodontic treatment performed under these circumstances pose the risk of iatrogenic errors such as fractured instrument and perforation. The aim of this case report was to discuss endodontic management of root canal obliteration in previously treated tooth. Case report: A 23-year-old female patient referred with previously treated tooth with root canal obliteration in tooth 36. Endodontic retreatment was done with combination of retreatment and contemporary endodontic techniques to negotiate the canal obliteration to the apex followed by root canal preparation and obturation. The permanent restoration was done with onlay restoration. Conclusion: The appropriate management approaches and treatment strategies need to be selected in order to achieved successful endodontic retreatment.

P1-02-04

Bio-ceramic-based Reparative Cement as A Successful Apical Plug Material on Lower Second Molar

Rachendra Tiara Putri, Citra Kusumasari

Objectives: In the absence of apical constriction, conventional root canal filling cannot be performed, therefore apical plug is recommended. Apical plug is a major challenge in long-term treatment and prognosis. This case report aims to describe the management of apical plug on the distal root canal of lower second molar using a bio-ceramic-based reparative cement.
Case Report: A 22-year-old female patient came with a chief complaint of pain in her right lower second molar right tooth during mastication. Clinical examination showed damaged temporary filling on the occlusal side, non-vital, and was positive for percussion and palpation. Radiographic examination showed underfilled obturation, radiopaque on root canal, pulp chamber to occlusal and radiolucent periapical area. After retreatment root canal was performed, apical plug on the distal root canal of lower second molar was achieved using a bio-ceramic-based reparative cement. Apical plug placement was aided with magnification followed by MTA carrier and a modified gutta percha.
Conclusion: Management of apical plug was successfully performed using bio-ceramic-based reparative cement. The difficulty in this case can be overcome by the use of magnification and a modified gutta percha.

P1-02-05

Management of Internal Bleaching of Discoloration Nonvital Anterior Tooth Due To Trauma: Case Report

Indira Larasputri, Ike Dwi Maharti

Objective: Dental trauma on permanent anterior teeth is a type of trauma that is often encountered due to physical activities/accidents. As a result, the teeth become nonvital and discolored. It will disturb the aesthetics and self-confidence of the patient, so internal bleaching treatment is usually needed. However, improper management of internal bleaching can cause side effects in the form of internal resorption. This case report aims to describe the management of internal bleaching using the walking bleach technique on nonvital maxillary lateral incisors due to trauma. Case report: A 32-year-old female patient complained of painless grey discoloration of her upper front teeth. Clinical examination of tooth 1.2 presented exposed pulp chamber, D4 color discoloration, negative vitality test, insensitive percussion and palpation. A radiographic examination of tooth 1.2 showed well-defined radiolucent apical to the tooth. The diagnosis of tooth 1.2 was previously initiated therapy; asymptomatic apical periodontitis (AAE, 2013). Root canal treatment is performed with continuous wave compaction obturation technique to obtain hermetic results. Hydrogen peroxide 35% was applied for seven days as the bleaching agent. The procedure is repeated until the desired color is reached. The desired color (A2) was achieved on second application. Then, the tooth was filled with composite resin seven days after the last application. Conclusion: Internal bleaching treatment on nonvital discolored maxillary lateral incisor showed good esthetic results characterized by natural tooth color reversion and no signs of internal resorption were seen in four weeks treatment evaluation.

P1-02-06 Multiple Anterior Restoration Using Digital Workflow: A Case Report

Ingrid Amelia, Dini Asrianti

Purpose: Digital workflow in dentistry has increased in recent years due to the headway made in technologies such as intraoral scanners and software programs. Digital Smile Design (DSD) is a digital tool that provides better communication between dentist and patient, and also an improvement in the expected outcome of the treatments. Another important tool that integrates the digital workflow are the intraoral scanners that allow an immediate determination of the quality of the impression, thus reducing expense and time. This case report highlights how to implement digital workflow in multiple anterior restorations. Case presentation: A 31-year-old female patient came to Conservative Clinic, RSKGM FKG UI with chief complaint of fractured upper front teeth, and she felt unsatisfied with her smile. The clinical examination revealed that tooth 21 was non-vital and sensitive to percussion, and secondary caries in teeth 11,12,22. The patient had been using orthodontics before and has a deep bite. The dental midline is off center and the zenith line for anterior teeth isn't aligned. Initial digital impression was captured with Intraoral scanner (PrimeScan, Dentsply, Germany) for initial DSD. The patient satisfied with the plan and design of the initial DSD than continued with mock up and transfer it to patient. Final digital impression after preparation of teeth was captured with Intraoral Scanner and send the file to dental laboratory for Computer-aided manufacturing (CAM) phase. Conclusion: Digital workflow using intraoral scanners and DSD provide predictability and excellent alternative treatment for the esthetic correction and reshaping of anterior teeth.

SCREEN 3
DATE : 2 February 2023
TIME : 13.00 – 14.15

P1-03-01

Endodontic Management Of Mandibular Third Molar With Curved Canal In Elderly Patient

Elizhabet Napitupulu, Ratna Meidyawati

Introduction: To present the complexity of endodontic management in mandibular third molar with curved canal in elderly patient. Case Report: A 69-year-old female patient came with chief complaint a throbbing pain on her lower back right tooth in the last three days. The woman is an elderly patient with no systemic disease. The occlusal of the tooth was restored with amalgam. The patient wanted the tooth to be restore because the tooth was the abutment of her metal framework removable denture. Clinical examination showed that tooth 48 had secondary caries, vitality test was positive, percussion test was positive and palpation test was negative. Radiographic examination showed radiolucency under the amalgam restoration reached the pulp horn and there was a curved in mesial canal. Tooth was treated with ProTaper Gold and restored with fiber post and porcelain fused to metal crown. Conclusion: Complexities of the case were overcome with clinician's thorough knowledge about mandibular third molar anatomical variations, good visualisation, and flexible rotary endodontic instruments. Endodontic management in elderly patient needs special dental management that suites the elderly conditions.

P1-03-02

Direct pulp capping using Mineral Trioxide Aggregate (MTA) in Permanent Molar with Cariously Exposed Pulp

Herdina Wiyono, Ratna Meidyawati

Objective To present the use of Mineral Trioxide Aggregate (MTA) as a direct pulp capping material for cariously exposed pulp. Case Report A 44-year-old female had a chief complaint of food impaction in her upper left back tooth and sensitivity when drinking cold beverages and gargling for the last 2 weeks. The patient experienced sharp pain on the consumption of cold beverages which lasted shortly and relieved a few seconds after. Clinical examination showed that tooth 26 had disto-occlusal old underfilled restoration, vitality test was positive, percussion and palpation tests were negative. The radiograph showed a radiolucency in the distal of the crown under the old restoration involving the enamel, dentin, and approaching the pulp horn. Diagnosis of tooth 26 was reversible pulpitis. Caries removal was carried out, MTA was placed on the pulp exposure area, and composite resin restoration was performed 1 month later. Conclusion The success of direct pulp capping treatment was evaluated through 6 months follow-up. The tooth was asymptomatic, vitality test was positive indicating that the pulp remains vital, percussion test was negative, and the absence of periapical abnormalities on radiograph.

P1-03-03

Management of Internal Discoloration in Maxillary and Mandibular Anterior Teeth using Walking Bleach Technique: Case Reports

Agita Meiskya, Citra Kusumasari.

Introduction: Internal discoloration in the anterior tooth is the main concern in patient. Caries and trauma can cause internal discoloration that can be treated with internal bleaching using walking bleach technique after root canal treatment. The aim of the report is to present the success of internal bleaching of internal discoloration in maxillary and mandibular anterior teeth caused by pulp necrosis because of caries and trauma. Case: Case 1, a 26-year-old female complained about her discolored upper right incisor and discomfort while eating. The initial shade was C2 and the final shade was A1. There was a resin composite filling and secondary caries was found. Case 2, a 32-year-old male complained about his discolored lower incisor after trauma 19 years ago. Both cases presented internal discoloration in anterior teeth. The initial shade was A3 and the final shade was B2. Etiology of internal discoloration of both cases was pulp necrosis, caused by caries and trauma. Discussion: Internal bleaching using walking bleach technique with 35% hydrogen peroxide was done successfully in both cases after endodontic treatment. Conclusion: Internal discoloration of maxillary and mandibular anterior teeth caused by pulp necrosis can be treated successfully with minimal invasive management, which is internal bleaching using walking bleach technique with 35% hydrogen peroxide.

P1-03-04

Management Of Insisif Central Maxila With Ellis Class-Iv Fracture : A Case Report

Yulita Resti Anggreni, Ratna Meidyawati

Introduction : Dental trauma can result in injuries involving the tooth, the supporting structure, dental displacement, tooth vitality, esthetic problem, and discoloration. Treatment performed to eliminate bacteria and endotoxin so that the tooth can be functional and esthetic. The aim of this case report is to discuss management of insisif central maxilla post trauma. Case Report : Female, 37 years old with frakture on coronal insisif central maxilla after accident twenty years a go, fistula on gingiva labial, palatal swelling, labiovertion, discoloration, positive on percussion and palpation. Radiographic examination periapikal radiolucency, lamina dura is severed, ligament periodontal widening. Tooth 11 was diagnosed with pulp necrosis; chronic apikal abscess (AAE). Classification of tooth fracture : Ellis class-IV fracture. Non- vital root canal treatment was performed with irrigation using NaOCl 2,5% and EDTA 17% and activation with endoactivator, root canal medication with calcium hydroxide and final restoration with lithium disilicate crown. Conclusion : endodontic treatment of maxillary central insisif post trauma was said to be successful because absence of subjective,objective and radhiographic complaints. Lithium disilicate crown aims to restore inclination and esthetic factors.

P1-03-05

Root Canal Treatment of Maxillary First Premolar with Vertucci Type II Configuration

Anggita Dini Nofarina, Anggraini Margono

Objective: This case report aims to describe the management of root canal treatment of maxillary first premolar with Vertucci type II canal morphology. Case Presentation: A 55-year-old female patient came with a complaint of her maxillary right first premolar was broken while she was eating and she didn't feel any pain. The patient wanted the tooth to be filled. Clinical examination on tooth 14 showed caries in the distooclusal, percussion test was positive, palpation and vitality test was negative. Radiographic examination showed a radiolucent appearance reaching the pulp chamber. Periapically diffuse radiolucency was shown in the apical third. The diagnosis of tooth 14 was pulp necrosis with asymptomatic apical periodontitis. This case showed vertucci type II root canal configuration was identified on radiograph after preparation was done and followed by fiber post restoration and porcelain fused to metal crown. Conclusion: The success of root canal treatment on maxillary first premolars with vertucci type II root canal configuration is due to several factors including accuracy of diagnosis, identification of configuration, preparation in root canal configuration, obturation, adequate restoration and it was shown by the disappearance of subjective complaints and good objective examination result on the evaluation carried out 1 week after root canal filling.

P1-03-06

Endodontic Management of First Molar Mandibula with Vertucci Type II Root Canal Configuration in the Distal Root

Romilda Rosseti, Ike Dwi Maharti

Purpose: Presenting endodontic management of mandibular first molar with Vertucci type II in the distal root. Thorough knowledge of root canal anatomy and morphology has an important role in the success of endodontic treatment. Vertucci (1978) reported variations of the anatomy of distal root first molar mandibular: type I(70%), type II(15%), type IV(5%) dan type V(8%) Case Presentation: A 22 years old male patient had a history of gingival swelling and pain during mastication in left mandibular molar. Clinical examination showed that tooth 3.6 had a large inadequate composite resin restoration, vitality was negative, percussion and palpation tests were positive. A gingival swelling and fistula was observed in gingival left first molar mandibular. The radiograph showed a diffused radiolucent in periapical area extending until middle third root. Vertucci type II was revealed in the distal root via SLOB technique radiographic. The distal root of tooth 3.6 was found to have two separated root canals then joining before exiting with a single apical foramen. The diagnosis was pulp necrosis; chronic apical abscess (AAE,2013). Dental loupe was used for better procedure observation. Endodontic treatment was done using crown down technique (ProTaper Gold™). Warm vertical compaction technique was performed to achieve hermetic obturation. Conclusion: Successful endodontic treatment was achieved 2 months follow-up. The tooth was asymptomatic, percussion and palpation tests were negative.

SCREEN 1, SESSION 1
DATE : 3 February 2023
TIME : 08.00 – 09.00

P2A-01-01

Perawatan Endodontik Gigi Molar Dua Maksila Dengan Kurvatur Berat Menggunakan Sistem File TruNatomy

Valeria Widita Wairooy, Anggraini Margono

Objective: This case report aims to explain the endodontic management of maxillary second molar with severe curved canal using TruNatomy file. Case Report: 30 years old female came to RSKGM FKG UI with chief complaint there is throbbing pain at night and food retention on her upper left tooth. Clinical examination showed that coronal part of tooth 27 intact, vitality and percussion test were positive, palpation test was negative. Periapical radiograph showed radiolucency on coronal that expands to the pulp, widened periodontal ligament space, and curved mesiobuccal root canal. From those examinations, tooth 27 was diagnosed as asymptomatic pulpitis irreversible with asymptomatic apical periodontitis (AAE). Curvature measurement using Schneider's technique showed that the mesiobuccal root canal was categorized as severe curvature. Mesiobuccal root canal preparation was done with TruNatomy™ system. Warm vertical compaction technique was used to achieve a hermetic obturation. Lithium disilicate partial cap onlay was chosen as post endodontic restoration. Conclusions: Successful endodontic management of maxillary second molar with severe curvature using TruNatomy was done by maintaining root canal's shape without canal transportation and broken instrument during the procedure. Clinical symptom disappeared and one month post-operative radiographic examination showed repair of periapical lesion.

P2A-01-02

Management Of Non-Surgical Endodontic Treatment On Mandibular Fisrt Molar With Endo-Perio Lesion: A Case Report

Redho Sara Pratiwi, Anggraini Margono

Objective: This case report aims to describe the management of nonsurgical endodontic treatment with endodontic-periodontal lesion on mandibular first molar teeth. Case Report: A 23-year-old female patient came to Conservative Clinic, RSKGM FKG UI with a chief complaint there is pain on her lower right tooth. Clinical examination showed that tooth 46 had temporary restoration on occlusal side, vitality test was negative, percussion and palpation test was positive. Radiographic examination showed an extensive radiolucent lesions on 46 bifurcations extending to the mesial and distal root. Periodontal examination showed deep periodontal pocket in midbucally 10 mm. The diagnosis of tooth 46 according to the Association of Endodontists (AAE) was pulp necrosis;chronic apical abscess. Classification of endo-perio lesions according to Simon et al. It is a primary endo secondary perio lesion. This case have nonsurgical endodontic treatment with zirconia onlay restoration. Conclusions: This case report showed that nonsurgical endodontic treatment with endo perio lesion could be done successfully as seen by the disappearance of subjective and objective complaints from the patient as well as the disappearance of lesions in the midbuccal region seen on radiographs. Evaluation was carried out 1 month after root canal filling, and bifurcation area showed significant healing with a decrease in the midbuccal pocket to 4mm.

P2A-01-03

Anatomical Fiber Post Restoration On Second Mandibular Premolar Teeth : A Case Report

Dahmar Luciana Jufri, Dewa Ayu Nyoman Putri Artiningsih

Objective: This case report aims to describe the management of anatomical fiber post restoration in the oval-shaped mandibular second premolar root canal. Case Report: A 20-year-old male patient came with a complaint of discomfort in his lower right tooth when chewing. Clinical examination on tooth 45 showed that temporary fillings in the distoocclusal area, percussion test was positive, palpation and vitality test was negative. Radiographic examination showed a radiopaque appearance in the crown area reaching the pulp chamber in the form of a temporary filling, the root canal anatomy of tooth 45 wide in the cervical third. The diagnosis of tooth 45 is previously initiated therapy; asymptomatic apical periodontitis. Case management was carried out by diagnosing, continuing root canal treatment, making anatomical fiber post restorations with zirconia crowns. Conclusions: Root canal treatment on mandibular second premolars restored with anatomical fiber posts and zirconia crowns is successful, the use of prefabricated posts shaped according to the anatomical shape of the root canal could be the right choice for restoring teeth with ovoid root canal shape, because it creates a thin and uniform layer of cement between the post and the surface of the root canal wall and provides good density with the root canal, thereby increasing fracture resistance.

P2A-01-04

Root Canal Treatment of Curved Root Canal Configuration of 41° Schneider's Dilacerated Root of Mandibular Third Molar

Lilis Jamilah, Dini Asrianti

Objective: This case report aims to report root canal treatment of mandibular third molars with severe curvature. Case Report: A 42-year-old female patient came to Dental Conservation Clinic of the RSKGM FKG UI and complained of a large cavity in her left lower tooth. There are no complaints of pain but sometimes feel uncomfortable when used to bite. Clinical examination results were non-vital on tooth 38 with temporary fillings on the mesiooclusal, sensitive to percussion. Radiograph shows radiopaque appearance in mesiooclusal to the pulp horn, widening of the periodontal ligament, curved root canal configuration of 41° (Schneider's method). Diagnosis was pulp necrosis; asymptomatic apical periodontitis. Access preparation using Endo Access bur (Dentsply, Germany) and endodontic ultrasonic scaler Satelec-Tip CAP 1. Initial scouting of all the root canals was done with pre bended K-file no. 10, the patency of root canals was established, glide path with proglider. Preparation using heat treated Niti File (Protaper GoldTM, Dentsply). Preparation of root canal results continuous taper form while maintaining anatomical curvature. The treatment showed successful result that was seen clinically and radiographically. Conclusion: Root canal treatment of third molars are considered to have a high risk of failure due to the most posterior location and morphology of the root canal, hence extraction was the treatment of choice. Therefore, determination of the degree of root canal curvature and the selection of appropriate instrumentation techniques are needed to avoid iatrogenic occurrence in this treatment.

P2A-01-05

Masseter Muscle Activity in Patients with Temporomandibular Joint Disorder before Orthodontic Treatment: An Electromyographic Study

Nasytha Vikarina Siregar, Nia Ayu Ismaniati Noerhadi, Maria Purbiati, Manfaluthy Hakim

Aim This study aimed to analyze the influence of temporomandibular joint disorder (TMD) on the surface electromyographic activity of the masseter muscles in patients with malocclusion before orthodontic treatment. Materials and Method Twenty-two patients with malocclusion aged 18–35 years were divided into two groups (11 patients with TMD and 11 patients without TMD as controls). The masseter muscles were evaluated using standardized electromyography during 5 seconds of maximum voluntary contraction (MVC) through cotton-roll biting. For statistical analysis, the root mean square (RMS) value of masseter muscles was calculated and compared between the two groups by independent t-test. The correlation between TMD and the RMS value was determined by Spearman's correlation coefficient (r) test.Result The TMD group displayed a lower electromyographic activity than the non-TMD group during maximum chewing (MVC), with no significant differences in the right and left masseter muscles between these groups. Furthermore, a weak negative correlation and no statistically significant differences were found between TMD and the electromyographic activity of masseter muscles.
Conclusion Patients with TMD had a lower electromyographic activity in the masseter muscles than those without TMD. Thus, electromyography can be an objective parameter to assess muscle activity for TMD diagnosis.

P2A-01-06

Efficacy Of Papain-Based Gel As Chemo-Mechanical Caries Removal Agent For Children And Environment-Friendly: An Alternative Of Conventional Method

Aninda Kartika Dewi

Introduction: Currently, caries removal procedure is still using conventional technique by using a drill, which causes an uncomfortable experiences, requires local anesthesia, causes heat that can irritate the dental pulp, increases the use of electricity and not environmental friendly, thus CMCR (Chemo-Mechanical Caries Removal) method using papain-based gel is developed. This literature review aims to determine the efficacy of papain-based gel as CMCR compared to conventional method in clinical practice, especially in pediatric patients. Method: A comprehensive search was conducted in the PubMed, Science Direct, and GoogleScholar databases on articles published in the last 10 years using the keywords: "Papain-Based Gel", "CMCR", "child teeth", and "environmental friendly". Result: Papain-based gel as CMCR's efficacy were very similar and even better than conventional method in terms of the process to prepare dental cavity which did not cause pain, the time to prepare was relatively short, and more healthy tissue around the teeth cavity was maintained. The CMCR papain-based gel method could be used for pediatric patients, anxious or fear patients, patients with high-risk medical conditions and special needs. The use of papain-based gel was also more environmental friendly because it only required hand instruments, more energy saving, and minimized medical waste. Conclusion: Papain-based gel as CMCR is a method of envoromental-friendly caries removal that is effective for patients, especially pediatric patients and in the current and future Covid-19 conditions.

P2A-01-07

Effectiveness Of Edamame Extract (Glycine Max L.Merril) In Hibiting Streptococcus Mutans In Ceramic Brackets

Leliana Sandra Devi Ade P., Afit Datus Solechah, Rudy Joelijanto

Background: Ceramic brackets have a surface roughness that causes plaque accumulation and bacterial colonization, namely Streptococcus mutans. Prevention of plaque accumulation can use mouthwash as an additional effort after brushing teeth. This is due to the inability of the bristles to reach food debris in areas that are difficult to reach by a toothbrush, such as the interdental area and the edge of the bracket in fixed orthodontic appliance users. The organic material used is Edamame because it contains isoflavones, steroids, and saponins as antibacterial. Purpose: The purpose of this study was to determine the antibacterial power of edamame (Glycine max L. Merril) extract in inhibiting S. mutans on ceramic brackets. To determine the effective concentration of edamame (Glycine max L. Merril) extract in inhibiting the growth of S. mutans on ceramic brackets. Methods: This type of research is experimental laboratory with a post test only control group design. This study was divided into 3 groups, namely the control group (sterile distilled water), the 50% edamame extract group, and the 75% edamame extract group. Observations were made by counting the number of colonies on MHA solid media using the Total Plate Count (TPC) method. Results: The results showed that the control group did not have any inhibition on the growth of S. mutans bacteria. Between the 50% and 75% groups, the one with the greatest inhibition was the 75% group. Conclusion: The conclusion of this study is that the antibacterial power of edamame extract (Glycine Max L. Merril) was effective in inhibiting the growth of S. mutans on ceramic brackets. The 50% concentration of edamame (Glycine Max L. Merril) extract was effective in inhibiting S. mutans on ceramic brackets.

SCREEN 2, SESSION 1
DATE : 3 February 2023
TIME : 08.00 – 09.00

P2A-02-01

Patient Safety Related To Clinical Risk Management In Dentistry (Scoping Review)

Didin Mirandani, Taufan Bramantoro, Dini Setyowati

Background: The quality and safety of the services offered in dental practices are extremely important for the success of the treatment. Risk management in the field of dental services is an important part of improving patient safety as well as that of the dentists. risk management is expressed in the systematic, planned, and coordinated interaction of the individual components, as well as in the control, correction, and optimization of work process. This, in turn, leads to improved quality of dental services, increased patient safety, unproblematic and efficient work processes, better treatment results, and greater satisfaction for both patients and medical staf. Objectives : The aims of the study is to gather information about were the risk management model that can be used to prevent incident in dental practice. Methods: The main search engines used for literature review were PubMed, Science Direct and Proquest. Articles were limited to those published within the past ten

years. The article types were all types of review studies, only English language, no duplicate studies and for human. Result : Following abstract screening, and initial qualitative synthesis, 13 studies were found to meet the inclusion criteria . Conclusion: There is no analyzed the risk of slipping in dental practices for the last two years. There is seven strategies for overcoming failure in daily dental practice were identified. These related to the dentists themselves (reflecting, learning, cor- recting), colleague dentists (asking, referring), patients (communicating), and advances in dentistry (adopting). Clinical risk management indicating the importance of accurate medication histories, the treatment of low risk patients in primary dental care, counselling of poorly informed patients, the fear of litigation and perceived low priority of oral health in the context of general health and well-being.

P2A-02-02

Implications of Sugar Consumption on Dental Caries in Children and Adolescents: Literature Review

Vita Vianti, Atik Ramadhani, Anton Rahardjo

Introduction: Dental caries affects 80% of the world's population. Dental caries treatment is an expensive and negative impact on well-being. Fermentable sugars are an important risk factor for dental caries. Children and adolescents are vulnerable groups to the development of dental caries. This study aims to present evidence from recent research reports on the implications of sugar consumption on dental caries in children and adolescents. Article Review: An electronic search was conducted in PubMed, ProQuest, and Science Direct for articles published from 2012 to 2022. 10 articles were selected with 7 cross-sectional study designs and 3 designs for a systematic review. Discussion: Global studies show that sugar consumption in the form of Sugar-Sweetened Beverages (SSB) is increasing high, especially in children and adolescents. Nearly half (44.4%) of the adolescents studied reported that sugary drinks were often or always available at home. The DMFT index in participants who had never consumed SSB was 39% lower than those who had consumed the drink SSB every day. Conclusion: There is clinical evidence that children and adolescents consume a lot of sugar in the form of SSB which is associated with a high prevalence of dental caries. An understanding of the effect of SSB drinking on dental caries plays an important role in prevention strategies as well as dental health care planning.

P2A-02-03

Knowledge and Attitude Dental Students Toward Oral Manifestation of Viral Infection: Study at Dental Hospital of Universitas Syiah Kuala

Yuli Fatzia Ossa, Vera Yulina, Nuzulul Ismi

Introduction: Majority of viral infections can manifest in the oral cavity with similar clinical appearances. This study aims to determine knowledge and attitudes of dental student in recognizing oral manifestation of viral infections. Method: Cross-sectional study on clinical dental students of Universitas Syiah Kuala using questionnaire that had been tested for validity and reliability. The questionnaire consisted of demographic data, knowledge of disease etiology, oral manifestation of viral infection, knowledge of clinical photos of lesions, and respondents' attitude towards infection control procedures. Questionnaires were distributed via google form to respondents. Result: The number of respondents was 205, 24.9% were male

and 75.1% were female. The majority of respondents knew etiology of herpes labialis (92.7%) but 51.7% did not know the etiology of herpangina and hand foot mouth disease. 62% knew the signs and symptoms of Covid-19 in the oral cavity. Knowledge of clinical photos of lesions related to viral infection were answered incorrectly as stomatitis aphthous recurrent major (52.7%), oral hairy leukoplakia (52.7%), and pseudomembranous candidiasis (62.4%) were not caused by virus. Self-protection from being infected is seen from vaccination status. 37.6% of respondents have been fully vaccinated with Covid-19 vaccinate only 33.7% had been vaccinated against hepatitis. The majority of respondents have applied the principle of universal precautions when working with patients. Conclusion: The level of knowledge of research respondents is good in recognizing the etiology and oral manifestations of viral in recognizing the etiology and oral manifestations of viral infections, but the ability to recognize clinical photos of lesions still low. The level of vigilance to protect their self from viral infections seems to be still low based on vaccination status, and attitudes of self-protection when working is already good. Dental students need to learn more about viral infection related to oral cavity so that they become more skilled in treating patients with viral infection.

P2A-02-04

Prosthetic Rehabilitation on Maxilla Defect Post-Ameloblastoma Surgery with Metal Frame Hollow Bulb Obturator

Kadek Asri Asmita Pradnyana Putri, Ni Made Ista Prestiyanti, Riki Kristanto

Post-ameloblastoma surgery can cause maxillary and mandibular defect, and also teeth surroundings defect. The defect has impacts on patient's functional, esthetic, phonetic and psychologic. The purpose of this case report is present rehabilitation post ameloblastoma surgery with metal frame hollow bulb obturator. Female patient, 53 years old reported with chief complaintof "hole" in her palate and loss many teeth that disturb phonetic function and mastication. The patient was using an obturator since 7 months which was not comfortable for the patient. Clinical findings shown Aramany class IV maxillary defect and edentulous 17,16,15,14,13,12,11,21,22,26, 34 and 44. First visit was making study model. Second visit was making working model and fabrication metal frame baseplate in laboratorium. Third visit was baseplate try in and recording maxillo-mandibular relationship (MMR). Baseplate was sent back to laboratory for fabrication two piece hollow bulb obturator and arrangement of dental elements. Fourth visit was obturator prosthesis try in. Obturator prosthesis was sent back to laboratory for acrylic resin processing. Fifth visis was insertion and application of soft liner. During insertion we found that the good retention, stabilitation, esthetic, phonetic and patient's comfort. During control there wasn't any complaint. The conclusion is rehabilitation on maxillary defect patients with metal frame hollow bulb obturator could improve patient's confidence to have normal activities and improve social life.

P2A-02-05

Surgical Extraction Technique of Fourth Molars: A Case Report

Kamila Febrian, M. Aryaditha Yunial, Yudy Ardilla Utomo, Lilies Dwi Sulistyani

Aim of the study: This study aimed to report a case of impacted distomolar and its surgical extraction technique due to the low frequency of impacted mandibular fourth molars. Case Report: In this case, the patient complained of intermittent

pain in the left and right lower posterior tooth since one month before admission, especially on the left lower posterior tooth. The radiographs revealed the presence of impacted third and fourth molar in the left mandible. The patient was admitted for removal of third and fourth impacted lower molars under general anesthesia. Conclusion: Distomolar is a relatively uncommon dental anomaly and it's rare for patients to have distomolar or impacted fourth molars in daily dental practice. A safe surgical extraction procedure is required to remove the distomolar without injury to the associated anatomical structures.

P2A-02-06

Sialolithiasis progressing to sialadenitis and fistula in the neck region of the right submandibular gland (Case report)

Intan N. Dhewayani, Rima D. Januarti, Wenny Yulvie, Dwi Ariawan

Objective: To report a rare case where the condition of sialolithiasis became sialadenitis resulting in a fistula in the neck region. Case Report: A 39-year-old woman came to the Oral Surgery Department at Ciptomangunkusumo Hospital. The patient complained of a lump in the sublingual dextra region since five months ago, and a fistula appeared in the neck region two months later. The patient has performed a CT scan and a panoramic x-ray. The patient was diagnosed with sialolithiasis of the submandibular gland with sialadenitis and fistula in the neck region. The patient had a treatment sialolithectomy by the oral and maxillofacial surgeon and soft tissue reconstruction in the neck region by the plastic surgeon. Conclusion: Sialolithiasis can progress to sialadenitis and become chronic inflammation, causing drained pus secretions in the neck region. Early diagnosis and accurate management of sialolithiasis can prevent the progression of the disease.

P2A-02-07

The Effect Of Mangosteen Peel Extract (Garcinia Mangostana L.) As Denture Cleanser On Acrylic Resin Dentures Teeth Toward Colour Changes

Dewi Kristiana, Achmad Gunadi, Maria Yustina Asri Dian Pramesti

Objective: This study aimed to evaluate the color stability of acrylic denture teeth after being immersed in 30% and 19% mangosteen peel extract for 4 and 19 days. Materials and Methods: This laboratory experimental study used 30 denture teeth which were divided into 6 groups. The acrylic denture teeth were immersed in distilled water in the control group. Meanwhile, in the treatment group, the acrylic denture teeth were immersed in 30% of the mangosteen rind extract solution and 60% of the mangosteen peel extract solution for 4 and 19 days. Color measurements were carried out before and after immersion using the Precise Color reader, and the color changes were calculated using the CIE Lab scale. The overall color change (ΔE) of the six groups was analyzed using the Two-Way ANOVA test. Then, a further comparative test was conducted using Tukey-HSD. Results : Two-Way ANOVA showed a significant color change ($p < 0.05$) in each group with different concentration of solution and immersion time. Based on the Tukey-HSD, there was a significant difference in color change ($p < 0.05$) between the acrylic resin denture teeth group immersed in sterile distilled water and the acrylic resin denture teeth group immersed in 30% and 60% mangosteen peel extract. Conclusion: There was a color change in acrylic resin denture teeth immersed in 30% mangosteen peel extract for 4 and 19 days and 60% mangosteen peel extract for 4 days which was still

tolerable. However, immersion in 60% mangosteen peel extract solution for 19 days, resulted in the greatest discoloration value in acrylic resin denture teeth that could not be tolerated.

SCREEN 3, SESSION 1
DATE : 3 February 2023
TIME : 08.00 – 09.00

P2A-03-01

Impact Of Preoperative Malnutrition As A Risk Factor For Postsurgical Fistula Formation In Cleft Lip And Palate Surgery

Hirono Migita, Mohammad Farid Ratman, Shinki Serizawa, Ayano Shiigi, Masahiro Tezuka, Hajime Suzuki, Norifumi Nakamura

Introduction: There are few data available on preoperative nutritional status in patients with cleft lip and/or palate (CLP), and few address the relationship between malnutrition and postoperative complications, including fistula. In this study, we retrospectively examined the prevalence of preoperative malnutrition and quantified malnutrition as a risk factor for the occurrence of postsurgical fistula. Methods: The study included 106 patients (55 males and 51 females) who underwent primary cleft lip or palate surgery at Kagoshima University Hospital between 2011 and 2014. We assessed acute and chronic malnutrition using World Health Organization Z scores of weight-for-age (WFA) and height-for-age (HFA), respectively, and performed multivariate logistic regression analysis to evaluate the factors related to the occurrence of postsurgical fistula at the age of 4. The study was conducted according to the guidelines of the Declaration of Helsinki and approved by the Institutional Ethics Committee of Kagoshima University (No. 210120). Results: At the time of the primary lip repair, 7.89% of patients with cleft lip were chronically malnourished, and 6.58% were acutely malnourished. Among patients who underwent primary palatoplasty, 29.03% were chronically malnourished, and 11.29% were acutely malnourished. Of 66 patients who underwent palatoplasty, 28 (42.4%) had a postoperative fistula. A lower WFA (OR: 0.008, p=0.033) at the primary palatoplasty was significantly associated with the occurrence of a postsurgical fistula. Summary: Preoperative malnutrition has been suggested as a risk factor for the occurrence of postoperative fistula. Future prospective investigations with a large sample size are needed to validate our findings.

P2A-03-02

Preoperative, Perioperative, and Intraoperative Management of an Odontogenic Myxoma Case in Patients with Hepatitis B

Depsi Indri Papilaya Simanjuntak, Dwi Ariawan, Wenny Yulvie

Objective: To describe the modifications in preoperative, perioperative, and intraoperative management of odontogenic myxoma cases in patients with Hepatitis B. Case Report: A 37-year-old woman came to the Oral and Maxillofacial Surgery Division of Dr. Ciptomangunkusumo Hospital complaining of a lump on the lower left front gum. Examination showed a lump in the anterior inferior labial region

measuring 2,3x2,1x1,5 cm with the same color as the surroundings, smooth surface, and absent ulceration. The characteristics of the lesion indicated the diagnosis of a benign tumor. Therefore, an excisional biopsy was planned under general anesthesia. The patient was found to have Hepatitis B from the lab results when carrying out the preoperative screening procedure. After that, further evaluation was carried out by the hepatology department, and it received mild surgery tolerance. Due to the patient's diagnosis of Hepatitis B, the medication used was reviewed and selected according to the indication. The operator performs the surgical procedure with universal precautions during the excisional biopsy procedure. The sample was then sent to the anatomical pathology section for further examination with a definitive diagnosis of odontogenic myxoma. The patient was instructed to maintain dental and oral hygiene and to consume a high-calorie, high-protein diet. Postoperative examination showed that the surgical wound was well mended without significant complications. Conclusions: Hepatitis B is a chronic systemic disease that is highly contagious, so various considerations and procedures need to be considered before carrying out elective surgery for patients. In managing odontogenic myxoma with excisional biopsy, surgery can be performed with particular attention to infection control and medication, with good clinical outcomes.

P2A-03-03

Ranula In A 39-Year-Old Woman : A Case Report

Awaludin Wibawa, Muhammad Ramaditto Reksoprodjo, Wenny Yulvie

Introduction : Ranula is defined as a mucus-filled cavity on the floor of the mouth and connected to sublingual glands with no tenderness and may deviate the tongue. Several etiology has been described such as direct trauma and trauma during surgery on the floor of the mouth. Ranula is reported commonly found on women (56.5%). The most common treatments are gland excision, marsupialization, and sclerotic agent injection. Objectives : This paper aims to report a case of ranula in a 39-year-old woman. Case Report : A 39-year-old female patient with a chief complaint of painless lump below the tongue since 2 months ago. The lump was frequently get bitten by patient's teeth. The size of the lump was not getting bigger nor smaller during that period. The intraoral examination showed swelling on the floor of the mouth between 46-47 region with the size of 2x1x0.5cm and no tenderness. Medical history of Auto Imune Hemolytic Anemia was recorded, under consumption of methyl prednisolone 4 mg once daily. The patient was then referred to RSCM for further treatment. A marsupialization was then performed to remove the Ranula under general anesthesia. Conclusion : Management of Ranula can be done by marsupialization, a simple treatment choice with low morbidity and minimal invasive

P2A-03-04

Surgical Management of a Giant Radicular Cyst on a 14-Years Old Boy

Ghina Humaira, Lilies Dwi Sulistyani, Wenny Yulvie

Introduction: To describe and present the surgical management of a giant radicular cyst that develops over a short period of time on a 14-years old boy. Case Report: A 14-years old boy was referred to the oral and maxillofacial clinic of Dr. Cipto Mangunkusumo Hospital with a chief symptom of a lump in the back of the right lower jaw for the past three months. Based on the dental history, the patient revealed a history of toothache with intermittent pain since six months ago.

Intraoral examination showed a retained root tooth 46 and a well-circumscribed swelling with cystic consistency on the 46 region. The working diagnosis for the patient was radicular cyst et causa gangrene radix tooth 46. The patient was treated with cyst enucleation and tooth extraction of 46 under general anaesthesia. After removal, the specimen was sent to the pathology anatomic, revealing a finding similar to the radicular cyst diagnosis. Postoperative examination showed good outcomes without any significant complications. Conclusions: Giant radicular cysts rarely develop in paediatric patients. Surgical management with enucleation under general anaesthesia was done for larger mass to improve patient compliance during treatment to accomplish optimum treatment result.

P2A-03-05

Mesenchymal Stem Cell for Cartilage Regeneration of Temporomandibular Disorders

Ni Made Ista Prestiyanti, Kadek Asri Asmita Pradnyana Putri, Riki Kristanto

Introduction Cartilage damage in the Temporomandibular Disorders (TMDs) is a challenging problem in the maxillofacial region. Treatment of cartilage defects presents many clinical challenges due to their avascular, aneural and alymphatic. The aim was to assess the impact of mesenchymal stem cell-based therapies on the treatment of temporomandibular disorders and the regeneration of cartilage. Article review The parameters used to search the literature and the eligibility criteria evaluation of these studies, have followed the recommendations of the PRISMA Statement. Data on preclinical and in vitro studies evaluating the efficacy of stem cell-based therapies for treating temporomandibular disorders were obtained from PubMed, Web of Science and Google Scholar. Manual searches of databases, reference lists of review studies, and relevant journals in the field were performed. Discussion Studies have reported encouraging results in terms of improved cartilage morphological, histological, and biochemical outcomes; improved subchondral bone regeneration and reduced pain behavior after mesenchymal stem cell based-therapies Conclution All these results demonstrated that the modulations of Mesenchymal Stem Cell (MSCs) plays an essential role in the cartilage regeneration in temporomandibular disorders. However, more investigations are needed to figure out the exact effective components among various factors produced by MSCs.

P2A-03-06

Silent Presentation Of Malignant Non-Hodgkin's Lymphoma In The Gingiva

Cut Yulian, Vera Julia, Addys Rino Hariar

Purpose : This study aims to report a diagnostic challenge in identifying Non-Hodgkin's lymphoma with gingival enlargement as its clinical manifestation. Patient numbness in the mandible may indicate lesion malignancy. This study confirmed the importance of early detection of malignant lesions, as early referral to the oncologist can prevent significant treatment delays. Case report : A 61-year-old female was referred with a chief complaint of swollen gum in the mandible three months prior to the visit. Initially, the patient felt a sharp pain around the gingival area followed by numbness in the chin. The patient also experienced drastic weight loss. The treatment of this case was an incision and biopsy, and the histological result confirmed the diagnosis of a malignant Non-Hodgkin lymphoma. Conclusion : The manifestation of malignant Non-Hodgkin's lymphoma as a gingival enlargement is a rare finding intraorally. Histopathological examination is the gold standard in determining the definitive diagnosis. Early lesion identification and referral to the oncologist ensure prompt treatment and a better outcome for the patient.

P2A-03-07

Root Canal Treatment of Maxillary Second Premolar with Vertucci Type V Configuration: A Case Report

Amanda Laksmi Dharmawati, Dewa Ayu Nyoman Putri Artiningsih

Introduction: Successful endodontic treatment depends on thorough knowledge in root canal morphology, appropriate assessment of pulp chamber floor, critical interpretation of radiograph, and on biomechanical preparation followed by three dimensional obturation of root canal system. The maxillary second premolars have a 9.6% chance of developing a type V Vertucci configuration meaning apical third root canal is divided into two separate root canals. Objective. This report explains the endodontic management of maxillary second premolar with Vertucci type V configuration. Case Report: A 35-year-old female patient came with complaint of discomfort on left side of mouth when chewing. On clinical examination of tooth 15, there was an overhanging glass ionomer restoration on maxillary second premolar with tender on percussion. Radiograph examination showed a diffuse radiolucency on apical 1/3 of root. The tooth diagnosed as pulp necrosis with asymptomatic apicalis periodontitis. After access was opened, the Vertucci type 5 configuration was identified and root canal preparation was performed with a Protaper Gold® on the straighter palatal root canal first throughout the work length and followed by the buccal root canal. Obturation of the root canal was carried out by using a warm vertical condensation technique using the gutta percha which was inserted along the work length in both canals, then both gutta percha were cut 5 mm from the apical and continued with backfill to the orifice. Treatment continued with dowel crown restoration. Conclusion: The root canal treatment in this case was successfully carried out with warm vertical condensation technique which was characterized by the disappearance of symptoms and the teeth could function normally.

SCREEN 1, SESSION 2
DATE : 3 February 2023
TIME : 13.00 – 14.00

P2B-01-01

Periodontitis An Influence On The Risk Of Development InflammatoryBowel Disease

Popy Sandra, Cahyaning Wulan Sasri, Meivi

Objective: Periodontitis has been related to inflammatory bowel disease (IBD). However, thereis not much evidence of a link between the two in the extant research. The aimof this systematicreview was to carry out periodontitis an influence on the risk of development IBD. Material sand methods: We searched articles in PubMed, until January 2022 using (periodontitis) AND(periodontal health) AND (Inflammatory Bowel Disease) as main keywords. The entire textsofthe selected papers were reviewed for inclusion. Results: The electronic search on two databasesusing the selected keywords rendered 78 titles and left 13 studies for further evaluationof titlesand abstracts after filtering with automation tools and duplicated studies were removed. Fourpapers were eliminated after titles and abstracts were screened. Nine potentially eligible articleswere assessed for eligibility, however, two of the papers did not meet the inclusion criteria. Conclusion: Some studies revealed a relationship between IBD and a higher risk of periodontitis, which is more frequent in Ulcerative

Colitis (UC) patients than Crohn disease (CD) patients, while others found no association between IBD and a higher risk of periodontitis. The riskoforal diseases in IBD patients cannot be clearly established due to the possible associationofanother factor. More research is needed to fully explore this relationship.

P2B-01-02

Periodontal Diseases and Conditions in Passive Smoker: A Systematic Review

Esti Cahyani Adiati, Deby Santy Arisandy, Meivi, Natalina

Introduction: Smoking is one of grade modifiers in periodontitis. Many studies have shown that tobacco or active smoking has a direct influence on the prevalence and severity of periodontal disease. Several studies have observed the effects of passive smokers on oral conditions. The author wants to determine the characteristic of periodontal conditions in passive smokers. Methods: Literature searches were conducted using PubMed and EBSCOHost to retrieve lists of potential articles for inclusion in the review. Articles published within the last ten years with full text in English were included, using keyword "(adults or adult or aged or elderly) AND (passive smoking or second-hand smoke or environmental tobacco smoke) AND (smokers or smoker or smoking or cigarette or cigarettes or nicotine or tobacco) AND (periodontal disease or periodontitis periodontal condition)". Result: 49 studies were retrieved from the online database, and 9 full-text articles were screened for eligibility. Finally, a total of 5 studies were included in this systematic review. Four studies included in this review shows the relation of environmental tobacco smoke (ETS) exposure to periodontal disease or conditions. ETS exposure was found to be positively related with the increase of periodontitis and oral pigmentation. In contrast, one study found there is no relationship between second-hand smoke exposure and the prevalence of periodontal disease. Conclusion: There is a positive correlation between passive smokers and periodontal diseases and conditions. Several periodontal conditions found in passive smokers, including an increased risk of periodontitis, prevalence and severity of gingival pigmentation.

P2B-01-03

Open Flap Debridement Combination with Platelet-Rich Fibrin as a Growth Factors for Reducing Pocket Periodontal: A Case Report

Vilia Wibianty, Anggun Alfreda Devina, Mardikacandra Manggala Putra, Yuniarti Soeroso

Introduction. Inflammation at the bottom of the pocket depth, initiating the destruction of periodontal tissue. Open debridement flap is a treatment to eliminate zone inflammation and creating area for periodontal tissue healing. Platelet-Rich Fibrin (PRF) is a methode to enhance periodontal tissue regeneration. Combination of this methods give a good result in regeneration also quality healing of periodontal tissue. Case Report. Male, 41-year-old, tooth 43 showed pocket depth of 6 mm and clinical attachment lost 9 mm. Open Flap Debridement for removing subgingival calculus and toxin combining with PRF at pocket area for growth factor regeneration periodontal tissue. Evaluation 3 months post treatment showed reducing pocket depth to 1-2 mm without clinical attachment lost. Discussion. Healing time process is vulnerable to host tissue strength to any inflammation or infectious agents. PRF is a biomaterial that acts as a binding site for both platelets and growth factors. It promotes tissue regeneration and wound healing capacities by increasing local

growth factors and act as scaffold. PRF is ease of preparation, low cost, minimal risks for the patients and possible outpatient use. Combination of PRF and OFD during the treatment of periodontal defects is having good and beneficial result in periodontal treatment. Conclusion. PRF is a new generation of platelet concentrate, novel step in regenerative periodontal treatment with simplified processing and without biochemical modification.

P2B-01-04

Pre-prosthetic Free Gingival Graft Supported Vestibuloplasty on Edentulous Posterior Mandible: a Case Report

Felita Clarissa, Vanessa Paramitha, Yani Hastutik, Benso Sulijaya

Introduction: The ideal denture-supporting ridge requires adequate bone support without undercut or sharp ridges, covered by adequate keratinized gingiva. This plays a crucial role in denture stability and function of mandibular prostheses. Vestibuloplasty is a surgical procedure to correct insufficient depth of the vestibule and the limited amount of keratinized gingiva. Oftentimes, relapsed muscle attachment presented when only vestibuloplasty was done. The use of autogenous soft tissue graft is considered to be the gold standard as it is proven to show favorable long term outcomes with minimum relapse rate. Case Presentation: A 63 year old Asian female patient presented with inadequate keratinized tissue and shallow vestibule at posterior left mandibular. The patient has been using a removable partial denture that was not properly seated due to the shallow vestibule. The treatment plan consisting of vestibuloplasty in conjunction with free gingival graft (FGG) was performed. The donor site was taken from the left palate, measured x x mm. The recipient site was prepared with a split thickness incision to establish a deeper vestibule. The graft then fixated on the recipient site with a resorbable polyglycolic acid sutures. A significant gain of KG and vestibule depth was observed at the site. Three months post-operative showed stable KG and vestibular depth with no significant relapse. Conclusions: The use of autogenous free gingival graft stabilized with suture is a predictable procedure that can increase keratinized gingiva and establish stable vestibule around edentulous site.

P2B-01-05

Influence of Electronic Cigarettes on Periodontal Tissues based on Periodontal Clinical Parameter: A Literature Review

Nurul Khairiyah, Nevada Permata Anvini, Rifkifani Susanto Putra, Stanley Aditya Kurniawan, Ette Soraya Shahnaz Tadjoedin

Introduction: Smoking is one of major risk factors in periodontitis. Recently, electronic cigarettes (e-cigarettes) are being used increasingly and gain popularity. It is considered a safe option but there is still lack of awareness of how e-cigarettes impact the periodontal tissue. This study discusses the influence of e-cigarettes on periodontal tissues and evaluates according to the periodontal clinical parameter: bleeding on probing (BOP), clinical attachment loss (CAL), probing depth (PD). Body/ Article Review : E-cigarettes have contents such as a mixture of propylene glycol (PG), glycerol or vegetable glycerine (VG), various flavorings and nicotine concentrations with sweetener added. Unlike conventional cigarettes, e-cigarettes operate by heating up and vaporizing. The combination of heat and chemical contents could harm the structure of gingiva mucosa. Discussion : A few in vitro studies found that

e-cigarettes aerosol can lower proliferation of cells and increase proinflammatory signalling including cytokines. Yet, the clinical effect of e-cigarettes on periodontium is still rarely discussed. The incidence level of BOP, CAL was observed among e-cigarettes users. There was an increased PD with e-cigarettes users but not as rapidly as with normal cigarettes users. Conclusion: It is concluded that even if the e-cigarette does not contain nicotine, e-cigarette users are still susceptible of having changes in the periodontium, based on some in vitro studies. However, more clinical findings are required to determine the impact of e-cigarettes on periodontium.

P2B-01-06

Gingival Thickness In Smokers: PRISMA-adapted Systematic Review

Melinda Rabekka Purba, Felita Clarissa Halim, Popy Sandra, Benso Sulijaya

Background: The periodontal tissue is usually classified based on their thickness or biotype, thick and thin. It is well known that smoking may affect the periodontal tissue in many different ways including gingival thickness. There is a wide range of literature available regarding the effect of smoking on the periodontal tissue, however very few are focused on the thickness of gingiva. Therefore, the objective of this systematic review is to analyze and compare gingival thickness or biotypes in smoker and non smoker patients. Methods: An electronic search was conducted on two databases, PubMed and Google Scholar. Preferred Reporting Items for Systemic Review and Meta-analysis (PRISMA)-adapted literature search was performed to find articles published in English from 2000 up to November 2021, using "smoking", "gingival thickness", "gingival biotype" as main keywords. Results: Total 2017 studies were retrieved, of which 19 full-text articles were screened for eligibility. Finally, a total of eight cross-sectional studies were included in this study and the results were divided into qualitative and quantitative outcome. From five studies, smokers have thicker gingival thickness or thick gingival biotype compared to non-smokers. According to the existing studies, the increase in gingival thickness in smokers is primarily due to epithelial dysplasia and increased keratinocyte mitosis. Conclusions: There is a link between smoking and gingival thickness/biotype. Smokers usually have a thick gingival biotype. Interestingly, increased epithelium thickness affects mechanical and protective function of the gingiva due to disruption of cell connections in keratinocytes and reduction in gingival inflammatory response.

SCREEN 2, SESSION 2
DATE : 3 February 2023
TIME : 13.00 – 14.00

P2B-02-01

Periodontitis-induced Model: Comparison of Several Induction Techniques In Vivo

Edlyn Dwiputri, Kartika Dhipta, Geraldi Hartono, Benso Sulijaya, Fatimah Maria Tadjoedin, Yuniarti Soeroso, Sri Lelyati, Ette Tadjoedin

Introduction. The use of the periodontitis model in mice is a method often used to study periodontitis, but its application is difficult due to the small and narrow size of the mice's oral cavity. The purpose of this study was to determine the most effective, safe, and simple method to induce a periodontitis model in mice by evaluating the body weight and the destruction of alveolar bone. Method. Male

Swiss-Webster mice were randomly assigned to 5 groups (Group 1: control group, Group 2: Porphyromonas gingivalis(Pg), Group 3: Pg and silk ligation on the incisor, Group 4: Pg and silk ligation on the molar, Group 5: Pg and modified wire ligation on the molar). Pg suspensions were given every 3 days. The body weight of the mice was weighed every day for 10 days and the alveolar bone destruction was assessed morphometrically. Results. All methods were considered safe because the weight of mice did not decrease in all test groups, with group 3 being excluded. The results of the morphometric test showed that group 5 had the most extensive destruction and was the best method because it was easy to perform compared to other methods. Conclusion. Mice-model of periodontitis with the combination of Pg suspensions and modified wire ligation on the molar is the most simple and effective. This method can overcome the difficulties of ligation and may play a significant role in experimental mice-model periodontitis.

P2B-02-02

Causal Association Between Obesity and Periodontitis

Mirsarinda Anandia Leander, Ayusha Dia Fawnia, Sofia Zaematul Arifah, Zalfa Karimah, Robert Lessang, Endang Winiati Bachtiar

Background: Obesity has reached epidemic proportions globally mainly due to increased consumption of high calories food and unhealthy lifestyle. More than 1 billion people worldwide are obese, which consists of 650 million adults, 340 million adolescents, and 39 million children. These numbers is still growing, even the WHO estimates that by 2025, around 167 million people (adults and children), will become unwell due to being overweight or obese. Obesity is recognized as a metabolic condition/disorder that affects the clinical attachment loss of periodontal tissue by affecting the periodontal inflammation, and also, obesity has been suggested to be a risk factor for periodontitis. Periodontitis can also affects obesity through several potential mechanisms, so it can be said there is a two-way relationship between obesity and periodontitis. Purpose: This literature review intends to find evidences and research studies about the causal association between obesity and periodontitis. Discussion: Research studies suggested that association between obesity and periodontitis is causal and bi-directional. Potential mechanisms that could play a role are inflammation, immunodeficiency, impaired of microcirculation, changes of pathogen microbes in oral cavity, hyposalivation, tooth mobility and tooth loss. Conclusion: There is a causal association between obesity and periodontitis, and potential factors/mechanisms that influence both.

P2B-02-03

The Influence of Gestational Diabetes to Periodontal Tissues: a Relationship between the Inflammatory Mediators- a Literature review

Ignatia Rosadi Nugroho, Berliana Rosa, Minessa Mahardika, Widya Rakhmawati, Yuniarti Soeroso

Diabetes mellitus (DM) is a metabolic disorder caused by defects in insulin secretion, insulin resistance, or both. DM consists of several types, namely DM type 1, type 2, gestational diabetes (DMG), and other forms of diabetes. The global prevalence of DMG in 2019 reached 223 million and it is estimated to reach 343 million in 2045. According to WHO in 2013, around 1.9-3.6% of pregnant women suffered from DMG. DMG develops during pregnancy as the need of insulin increases in

early pregnancy. As the body of pregnant women makes more hormones and other changes commonly body weight-gained, it can cause the using of insulin to be less effective, insulin resistance. Periodontitis is one of the six most common complications of DM. Diabetes has a considerable influence on periodontal tissue homeostasis through changes in the periodontal microbial environment. The pathogenesis of diabetes intersects with inflammatory processes in the body. This causes the diabetic condition to impair the process, the inflammatory response, and the healing process in general. Periodontitis is known to be a condition caused by an unbalanced inflammatory response to the microflora in the mouth. The inflammatory process also bridges the relationship between uncontrolled diabetes and periodontal tissue. Several studies have shown an increase in the number of inflammatory mediators such as IL-6, IL-8, TNF-Alpha, and IL-1-beta in patients with periodontitis with DMG. The presence of these two conditions can make the other condition worse, whereas treatment for one condition can reduce the risk of the other.

P2B-02-04

Osteogenic Activity Of Chitosan Combination as a Scaffold in Periodontal Tissue Engineering

Maria Savvyana, Viona Yosefa, Nadhia Anindhita Harsas, Yuniarti Soeroso

Background: Lately, chitosan has been used as an alternative biomaterial for periodontal tissue engineering. Chitosan has osteogenic potential, that can activate osteogenesis. Using chitosan for bone regeneration requires an increase in bioactivity, mechanical strength, and structural integrity, so combining it with synthetic or natural polymers. Methods: The purpose of this analysis was to evaluate the osteogenic activity of chitosan and its combination as a scaffold in periodontal tissue engineering. This review was conducted following the guidelines of Preferred Reporting Items for Systematic Review and Meta-Analysis (PRISMA). References were searched using an electronic database including PubMed then assessed independently by four reviewers. Results: Five randomized controlled trial studies were included in this review showing increasing activity of periodontal regeneration using chitosan and its combination as a scaffold. Discussion: Chitosan as a biomaterial scaffold due to its good material characteristics and bioactivity has various drawbacks, so it is necessary to combine it with polymeric biomaterials, growth factors, and stem cells to provide better stimulation for periodontal tissue regeneration. Chitosan with combinations of other biomaterials improves the characteristics of the material so that it can increase osteogenic activity and bioactivity properties. Conclusion: Chitosan as a scaffold combined with other biomaterials and growth factors provides better osteogenic activity in periodontal tissue regeneration therapy.

P2B-02-05

Creating a Supracrestal Tissue Attachment on Abutment Teeth: A Case Series

Charly Esmond Siagian, Valdy Hartono, Yoga Setiadharma, Benso Sulijaya

Objectives. We aim to report a series of patients that require for crown lengthening procedures. All of the cases have been evaluated at least once after the surgery is taken. Case Reports. We conducted three case reports, in which all patients were referred to the Periodontics Clinic, Faculty of Dentistry, Universitas Indonesia. The

teeth had no requisite depth for ferrule effect and diagnosed with short clinical crown: 1) Sixty-three-year-old male patient was referred for functional crown lengthening procedure on tooth 24, which had undergone root canal treatment and was intended for crown placement. The surgery was performed by scalpel and bur for the gingivectomy and ostectomy to exhibit more tooth structure. The evaluation was done two weeks afterwards and it showed additional abutment tooth structure; 2) Twenty-year-old male patient was referred for crown lengthening on tooth 46. Electrocautery device was used to remove excess soft tissue and bur for the ostectomy. After a week, new gingival margin position was found to be more apical from the planned restoration margin; 3) Twenty-eight-year-old female patient was referred for crown lengthening on tooth 25, which had been fractured. Conventional scalpel and bur were used for the gingivectomy and ostectomy, respectively. It exhibited additional structure of the abutment tooth after one week evaluation. Conclusion. Preserving supracrestal tissue attachment through crown lengthening is a mandatory procedure since its violation will cause further damage to the periodontal tissue and to achieve success of the treatment.

P2B-02-06

Tingkat Pengetahuan, Sikap, dan Perilaku Orang Tua tentang Risiko Karies pada Siswa Sekolah Dasar Luar Biasa Negeri 1 Gianyar, Bali

Luh Wayan Ayu Rahaswanti, Mia Ayustina Prasetya, Desak Nyoman Ari Susanti, Ayu Bintang Rena Sanjiwani Budhiarta

Background: Indonesia has a particularly high prevalence of caries. In five- to nine-year-old Indonesian children the caries prevalence rate is 92,6%. On top of that, only 10,2% of Indonesians have access to dental professionals. Children with special needs are often vulnerable due to dependency on their parents. Parents' roles are important for children with special needs. Therefore, it is important to know parents' levels of knowledge, attitude, and behaviour regarding caries risk for their children. Aim: To investigate the levels of knowledge, attitude, and behaviour of parents about caries risk in children with special needs at SDLB Negeri 1 Gianyar. Method: This research was conducted using a descriptive quantitative with cross-sectional approach. 110 parents of special needs children were interviewed with a questionnaire. Result: 68,20% of the parents with special needs children had a good level of knowledge, 28,20% had moderate and 3,60% had a poor level of knowledge about caries risk in their children with special needs. The data of Parents' level of attitude shows that 72,20% had good, 27,30% had moderate levels of attitude towards caries risk., and there are no parents with a poor level of attitude found in this research. Lastly,the data of parents' level of behaviour about caries risk split into two main groups: 58,20% had favourable, while 39,10% had moderate behaviour regarding caries risk, and only 2,70% of the parents have unfavourable behaviour. Conclusion: Majority of the parents with special needs children had a good level of knowledge, attitude, and behaviour about caries risk of children with special needs at SDLB Negeri 1 Gianyar.

SCREEN 3, SESSION 2
DATE : 3 February 2023
TIME : 13.00 – 14.00

The Use Of Nance Holding Arch And Lingual Holding Arch In Orthodontic Treatment Of Bimaxillary Dental Protrusion Case
Wulan Sri Utami, Haru Setyo Anggani, Wulandani

The convex soft tissue profile is one of the main problem of bimaxillary dental protrusion cases thus extraction of four first premolars are commonly performed. Even though the tooth discrepancy is not severe, it is needed to consider adequate anchorages to help preserving the extraction spaces in order to achieve a desired change of soft tissue profile. Objective: This case report aims to present the management of orthodontic treatment of Class I malocclusion with bidental protrusion by using nance holding arch (NHA) and lingual holding arch (LHA) as anchoring devices. Case report: A 16-year-old boy came to the Orthodontic Clinic of RSKGM FKG UI with complaints of crowding and protrusive teeth. The diagnosis results showed a class I malocclusion with bidental protrusion, accompanied by moderate crowding in both arches. Convex soft tissue profile with potentially competent lips was observed. This case was treated by extraction of the four first premolars using fixed orthodontic appliances with pre-adjusted MBT system accompanied by NHA and LHA. The result of the treatment showed that crowding in both arches was corrected with a significant changes in facial profile and lips. Conclusion: Changes in facial profile in cases of Class I malocclusion with bidental protrusion and moderate crowding can be achieved if followed by careful planning related to the space creation and anchoring devices. The combination of four premolars extractions with NHA and LHA anchoring devices proven to be effective in providing a straighter soft tissue profile for the patient.

P2B-03-02

Evaluation of Relapse Post Orthodontic Treatment: A systematic review and Meta analysis
Evie Lamtiur Pakpahan, Ida Bagus Narmada, A. Retno Pudji

Background: Relapse is the movement of teeth back to their original position after orthodontic treatment. Retention is an important part of almost every case of orthodontic treatment. Objective: To evaluate the amount of relapse of anterior crowding and the efficacy of retention appliances used after fixed orthodontic treatment according to the best scientific evidence available. Methods: A survey of articles published from 2017 - 2022 about the stability of dental alignment and retention in mandibular anterior teeth after fixed orthodontic treatment was performed using some electronic databases. Study Selection: Only randomized clinical trials investigating patients previously treated with multi-bracket appliances with a follow-up period longer than 3 months were included. Results: A total of 1124 references were found. After going through the analysis process, 6 randomized clinical trials (RCTs) were included in the integrative review and 10 articles were excluded. The data showed A significant change of Little's Index was found for the mandibular incisor irregularity between after debonding and up to 18 months after debonding with a mean difference of -0.40 mm (95% CI, 0.61 to 0.19). Conclusion: It can be concluded that relapse can occur after orthodontic treatment. Therefore, the type and adequate retention duration are needed to maintain the stability of the orthodontic treatment outcomes and prevent relapse. However the outcomes

of the meta-analysis are limited due to the heterogeneity of data, small number of studies, and inconsistent methods of evaluation. Further high-quality studies utilising standardised three-dimensional methodologies are required to improve the level of evidence.

P2B-03-03

Orthodontic treatment using Self-Ligating System on Class II malocclusion in Pandemic COVID-19

Astrid Dinda R Hutabarat, Haru Setyo Anggani

Introduction: SARS-COV-2 (COVID-19) is a Severe-Acute Respiratory Syndrome that infected more than 3.6 million people worldwide. The infection rate of COVID-19 among patients and healthcare providers is high therefore preventive protocols are established to contain the spread. It is a challenge to maintain quality and effectivity orthodontic treatment in these difficult times thus can be convenience for the patients. This case report aims to share class II skeletal malocclusion orthodontic treatment in COVID-19 pandemic era. Case Report: 17 years old female came to Orthodontic Clinic, RSKGM FKG UI with a chief complaint of anterior crowding. This case was diagnosed as class II skeletal malocclusion with severe anterior crowding. Patient has a dolicofacial with convex soft tissue profile. Patient has a narrow "V" shaped dental arc on maxillary and severe crowding on anterior mandibular with 8 mm overjet. A camouflage orthodontic treatment was conducted using Self-Ligating system. Conclusion: COVID-19 caused restrictions on individual daily activities and health services. Maintaining the quality of health care services, especially in orthodontic treatment should be a consideration during these difficult times. Class II skeletal malocclusion was treated with a camouflage orthodontic with a satisfying result within ten visits.

P2B-03-04

Orthodontic Rehabilitation of Occlusion Before Restorative Treatment in Patient with Deepbite and Prolonged Retention of Primary Teeth

Bernadetta Kristi Wijayanti, Haru Setyo Anggani

Introduction: Ideal occlusion serves as an important element in the long-term success of restorative treatment. Deep bite could impede the articulation of the jaw and determine the prognosis of the restoration of the teeth. Prolonged retention of primary teeth poses a challenge in planning the overall treatment. Rehabilitation of the occlusion that preceded the restorative treatment is needed to correct the articulation as well as to achieve a good prognosis and aesthetics smile. Case Report: A-22-year-old male complained about his two long upper front teeth. The patient presented 7 mm deep bite with a deep curve of spee, prolonged retention of primary teeth 52, 53, 62, 63, and 72 in the absence of permanent teeth. Horizontal movement of the jaw was inhibited. The patient was treated with a fixed orthodontic appliance to correct the occlusion prior to the restorative treatment in order to correct deep bite, curve of spee, articulation, and improve smile. Conclusion: Orthodontic treatment as a rehabilitation helps overcome the problem of horizontal and vertical malocclusion so it is a preliminary treatment that restorative treatment could be carried out perfectly with a good long-term prognosis.

P2B-03-05

Orthodontically Induced Inflammatory Root Resorption (OIIRR) And Prevention

Ayu Sukma

Background Orthodontics Treatment is purposeful care, put teeth in the correct position . On orthodontics movement often occur resorption root known with orthodontics Inflammed Induced Root Resorption (OIIRR) . Resorption root that occurs in treatment ortho is condition pathological and not desired in orthodontics treatment Objective To knowing about OIIRR. Methods google scholar , Ebsco , Pubmed , Google scholar , no There is a language limitation used , 10 years of writing last , with the keyword OIIRR. Article Review OIIRR increased with the application of heavy forces. This positive and siqnificant correlation between orthodontic force level and OIIRR was reported by several systematic reviews (Wellman B, 2010) and (Roacoe et al, 2015). Discussion The causes and risks of OIIRR are complex , depending on the size , type , strength mechanic , types of mechanical forces , direction and duration of force , tooth root morphology , the heavy rotational force and the compression area produce inflammation and resorption root. The detection methode for OIIRR with 1. Radiography methode with panoramic photos , periapical photos , lateral cephalogram , 3D Imaging techniques .2. Method using biological marker with the inflammatory markers, the bone remodeling marker and , Dentin matrix protein marker. Conclusion OIIRR is complications caused by force orthodontics . Avoiding heavy pressure , continuous force and greater amount of apical displacement over a long duration of treatment is recomemmended

P2B-03-06

The Correction Of A Skeletal Class III Malocclusion With Camouflage Orthodontic Treatment Using Preadjusted Edgewise System

Eva Gracia Dameirisca, Maria Purbiati

Introduction: Class III malocclusion has been the subject of interest in many studies, because of the challenges of its diagnosis, prognosis and treatment. Anterior cross bite is the typical characteristic of class III malocclusion and can be present in both class III skeletal malocclusion and pseudo-class III malocclusion. This case report is presented to show the diagnosis and correction of a skeletal class III malocclusion with non-extraction camouflage orthodontic treatment using preadjusted edgewise system.
Case Report: A 17 year old female came to orthodontic clinic at RSKGM FKG UI with the chief complaint of retruded upper teeth so the patient was not confident with her smile. Upon clinical examination, the patient presented a concave facial profile, anterior cross bite, anterior deep bite, irregular upper and lower teeth, teeth midline not coincidence with facial midline, then the patient had occlusal interference when doing articulation movement but no interference in centric occlusion. Radiograph examination revealed class III skeletal pattern with prognathic mandible and two impacted supernumerary teeth in the lingual of lower premolars apices. This case was successfully treated in just less than a year with non-extraction camouflage orthodontic treatment using preadjusted edgewise system.
Conclusion: The diagnosis of class III malocclusion with anterior cross bite should be considered carefully because appropriate treatment depends on correct diagnosis. Orthodontic camouflage treatment usually was chosen for mild class III skeletal malocclusion with no facial defect and minimal dental compensation.

SCREEN 1
DATE : 4 February 2023
TIME : 08.00 – 09.00

P3A-01-01

External Root Resorption of An Immature Non-Vital Tooth following Avulsion Case

Zsa Zsa Syarifatun Nissa, Mochamad Fahlevi Rizal

Introduction: Avulsion is a trauma that usually occurs in young permanent teeth aged 7-9 years. An avulsed tooth can be replanted back into the tooth socket. Injury trauma can affect the tissues around the teeth and stimulate the resorption process, such as external resorption. In the treatment procedure of a nonvital immature permanent tooth, endodontic treatment should be carried out to eliminate the pathogen and eradicate the infection in the periapical tissue. Apexification is a process in which a barrier is formed at the apical level in the open root of an immature permanent tooth so that root canal filling can be performed. Case Report: A 9-year-old boy with complaints of toothache and uncomfortable when eating. The tooth was avulsed one year ago and was replanted. Radiographic examination revealed periapical lesions and external root resorption. Endodontic treatment was performed to close the open root and fill the root canal using mineral trioxide aggregate (MTA). Patients were regularly monitored for one year, both clinically and radiographically. There were no subjective or objective complaints during the control period, and external root resorption had stopped. Conclusion: Complications from avulsed tooth undergoing replantation that can occur are pulp necrosis and external resorption. External resorption occurred due to massive inflammation from bacterial infection and osteoclast activity. Thus, root canal treatment using MTA was chosen because, aside from its ability to make an artificial barrier in an open apical root, it can maintain high pH in tissue and reduce inflammation, therefore, stopping the resorption process.

P3A-01-02

Management Of Anterior Restoration With Developmental Defects Of Email In Children Aged 2 Years Case Report

Prida Sulistyarsi, Mochamad Fahlevi Rizal

Developmental defects of enamel (DDE) can occur in primary teeth due to disruption enamel formation during the intrauterine period and the first year of life. This case report aims to describe the treatment of anterior primary teeth with DDE and behavior management when treating patients under three years. A 2 years old girl, came with her parents to the IKGA RSKGM UI to have her upper front teeth examined which were brownish yellow. Teeth 52, 51, 61, 62 caries dentin e.c enamel development defects. A complete examination was carried out, communication of information and education to the patient's parents regarding the treatment plan which included oral prophylaxis and GIC restoration on teeth 52, 51,61 and 62. GIC restorations were used as interim restorations until the patient could be more cooperative and allowed for a definitive restoration. The conclusion from the clinical evaluation when the controls were there were no complaints, the restorations were still intact, the children and parents felt more confident.

P3A-01-03

Factors Related to Periodontal Status in Adolescents In Indonesia (Indonesian Riskesdas Data Analysis 2018)

Putri Sri Wahyuni, Herry Novrinda, S. KG, M. Kes, Ph.D, Prof, drg. Anton Rahardjo, MSc (PH), Ph.D, Prof. drg. Risqa Rina Darwita, Ph.D

Background: Based on the 2018 Basic Health Research, the prevalence of the periodontal disease in Indonesia 74,1%. Periodontal disease is an inflammatory disease caused by bacterial biofilm on tooth surface and one of the main causes of tooth loss due to permanent periodontal tissue damage. Two types of periodontal disease are commonly named gingivitis and periodontitis. There is an increasing trend in the prevalence and severity of periodontal disease at all ages. Objectives: The purpose of this study is to examine the factor that influence periodontal status in adolescents in Indonesia. Methods: A cross sectional study using secondary data from the Riskesdas 2018 based on the age group according to World Oral Health (WHO), namely the 15-19 years old are sosiodemography characteristic variables including gender, marital status, parental education level, parental employment status, family economic status, and areas of residence, dental health behavior factors include perceptions of dental health problems, tooth brushing habits, smoking, consuming alcoholic beverages, stress, dental health service factors including utilization of dental health facilities, and access to health services, and systemic disease factors including pattern diet, diabetes mellitus, hypertension, and obesity. Results: The sample size is 3089 respondents. Prevalence of periodontal status in adolescents aged 15-19 years ranges from 91,3 % to 94,7%. Chi-square test showed a significant correlation between socioeconomic and alcohol consumption on periodontal status (p<0,05). Multinominal logistic regression test proved a significant correlation between socioeconomic and periodontal status (OR=1,570;95%CI 1.141-2.161). Conclusion: The factor that influence the periodontal status experience in adolescent is sosioeconomic. This has implications for the periodontal disease prevention program.

P3A-01-04

Psychological Effects on the Elderly with Dental Care Needs during the Covid-19 Pandemic

Arinny Shafira Khairunisa, Muslita Indasari, Saraventi

Introduction: The emergence of Covid-19 put elderly to be individuals who are most vulnerable of being infected to the virus which has an impact on decreasing physical condition and level of physical activity, to psychological aspects such as symptoms of depression, anxiety, and feelings of loneliness. Although there are measuring instruments that can be used to assess these conditions, including the Geriatric Depression Scale (GDS), the Covid-19 Anxiety Scale (CAS), and the Questionnaire for Assessing the Impact of the Covid-19 Pandemic and Accompanying Mitigation Efforts on Older Adults (QAICPOA), the development and use of CAS and QAICPOA has never been done previously in Indonesia. Methods: The development of an anxiety scale measuring instrument related to Covid-19 (CAS-Id) and QAICPOA was carried out through the cross-cultural adaptation method and continued with validity and reliability tests. Univariate analysis was performed on the three components of the psychological effects studied, consisting of depression, anxiety, and the impact of social isolation based on sociodemographic factors in the elderly. Total research subjects were 171 people. Results: The validity and reliability test on the Covid-19 Anxiety Scale (CAS) measuring tool in this study obtained a Cronbach's

alpha value of 0.783, r = 0.700, p-value 0.000 (p <0.05), thus a valid and reliable measuring instrument of anxiety scale related to Covid-19 is successfully achieved. The psychological effects on the elderly with dental and oral care needs indicate mild to moderate depression, moderate to high anxiety, and a sense of loneliness based on sociodemography factors. Conclusion: The CAS-Id measuring instrument can be used to properly measure anxiety related to Covid-19 in the elderly. The existence of psychological effects on the elderly is one of the factors that influence the elderly in obtaining dental and oral care during the Covid-19 pandemic.

P3A-01-05

Guidance And Rationale For The Immediate Implant Placement In The Maxillary Molar

Mi Young Eo, Kezia Rachellea Mustakim, Ju Young Lee, Soung Min Kim

Introduction: Although the reliability of immediate implant placement in the maxillary molar has been discussed, its significance is still questionable. Until now, there is no guideline for proper case selection and surgical technique for successful treatment outcomes of immediate maxillary molar implants. Therefore, in this study, we evaluated 26 cases and selected 8 representative cases of immediate maxillary molar implant to discuss the treatment guidance and its rationale.
Methods: From 2011 to 2019, we retrospectively analyzed 106 patients with 148 immediate implants at the Department of Oral and Maxillofacial Surgery, Seoul National University Dental Hospital. Inclusion and exclusion criteria were applied, and patient characteristics and treatment results were evaluated clinically and radiologically.
Results: A total of 29 tapered, sand-blasted, large-grit, and acid-etched (SLA) surfaced implants were placed in 26 patients. The mean age of patients was 64.88 years. Two implants failed and were reinstalled, resulting in a 93.10% survival rate. Fluctuating marginal bone level changes indicating bone regeneration and bone loss were observed in the first year following installation and remained stable after one year of prosthesis loading with average bone loss of 0.01 ± 0.01 mm on the distal and 0.03 ± 0.03 mm on the mesial.
Conclusion: This clinical study demonstrated the significance of immediate implant placement in maxillary molar as a reliable treatment with high survival rate using tapered SLA implant. With an accurate approach to the immediate implant, surgical intervention and treatment time can be reduced, resulting in patient satisfaction and comfort.

P3B-01-06

Significance Of Medication Discontinuation On Bisphosphonate-Related Jaw Osteonecrosis In A Rat Model

Kezia Rachellea Mustakim, Mi Young Eo, Yun Ju Cho, Soung Min Kim

Introduction: Bisphosphonate (BP) discontinuation has been advised as a measure to prevent the incidence of bisphosphonate-related osteonecrosis of the jaw (BRONJ), however, its efficacy remains controversial. This study aimed to analyze the efficacy of BP discontinuation in reducing BRONJ severity following tooth extraction in a rat model.
Methods: Thirty-four male Sprague-Dawley rats were divided into two BRONJ model categories: oral administration (PO) of alendronate (1 mg/kg) for 3 and 8 weeks and intraperitoneal (IP) injection of pamidronate (3 mg/kg) and dexamethasone (1 mg/

kg) for 20 days. The PO model was divided into five groups (a control group without BPs and four experimental groups with one-week discontinuation). The IP model was divided into two groups consisting of group I (without discontinuation) and group II (one-week discontinuation). One molar from both sides of the mandible was extracted. After extraction, the PO models were sacrificed at 3 and 5 weeks, and the IP models were sacrificed either immediately or at 2, 4, 6, and 8 weeks.
Results: Micro-CT showed non-significant differences among PO groups but significant differences were observed between IP groups. Most bone remodeling parameters within group I of the IP model differed significantly (p-value < 0.05). Histologically, group I showed a significantly higher percentage of necrotic bone than group II (51.93±12.75%, p < 0.05) and a higher number of detached osteoclasts in TRAP staining.
Conclusion: With discontinuation of medication for at least one week in rats, the effects of BPs on alveolar bone are suppressed and bone turnover and osteoclast functions are restored.

SCREEN 2
DATE : 4 February 2023
TIME : 08.00 – 09.00

P3A-02-01

Microhardness And Color Changes Of Nanofill And Nanohybrid Resin Composites After Exposure To Green Tea Solution

Decky J Indrani, Bambang Irawan, Audryan Heriansjah, Fannesha Ristananda

P3A-02-02

Psychometric Properties of Theory of Planned Behavior Questionnaire to Predict Indonesian Dentist's Behaviors in Delivering Caries Prevention for Preschool Children

Safira Khairinisa, Risqa Rina Darwita, Diah Ayu Maharani, Febriana Setiawati

Background: The theory of Planned Behavior (TPB) is one of the psychological models to understand and predict behavior in different settings, including dentists as oral health professionals providing care. This pilot study was conducted to gather pre-preliminary information and evaluate the validity and reliability of the Indonesian TPB questionnaire regarding a preventive provision in preschool children.
Methods: TPB questionnaire regarding dentists' intention to deliver caries prevention which consists of 12 question items from 4 domains (attitudes, subjective norms, perceptions of behavioral control, and intention to carry out preventive practices) was prepared according to the TPB framework and previous literature. The questionnaire was tested in this pilot study to measure its validity and reliability. Validity test was analyzed by Pearson product moment correlation test and reliability test was analyzed by Cronbach's alpha score and Interclass Correlation Coefficient (ICC). General dentists in Indonesia were recruited through convenience sampling in this cross-sectional study.
Results: 42 general dentists were agreed to participate in this study (85,7% female, mean age 39.7±11,9 years old with 13.9±10.9 years of work experience) and responded to the TPB questionnaire regarding dentist intention in providing preventive care to

preschool children. All indicators of attitude, subjective norms, perceived behavior control (PBC), and intention on dentist behavior towards preventive care were valid (p<0.05). The overall Cronbach's alpha of the questionnaire for internal consistency was 0.887. The test-retest reliability results were based on repeated administration in the same participant dentist measure at two-week intervals; the interclass correlation coefficient (ICC) was 0.886.
Conclusions: The results indicated that the TPB questionnaire used in this study shows adequate validity and reliability for evaluating Indonesian dentists' attitude, subjective norm, perceived behavior control, and intention in delivering preventive care for preschool children.

SCREEN 3
DATE : 4 February 2023
TIME : 08.00 – 09.00

P3A-03-01

Anatomical Post In Distal Root Canal Mandibular Molar After Endodontic Treatment

Vini Isa Kanadanty, Dewa Ayu Nyoman Putri Artiningsih

Objective: The prevalence of single distal root canal (type 1) in the mandibular first molar is 65.9% in the Asian population. Usually larger, flared, and oval or kidney-shaped buccolingually. This case report aims to describe the management of anatomical post using fiber post combined with composite resin and crown on mandibular molar after endodontic treatment with flared root canals and oval in cross-section.
Case Report: A 21-year-old male patient came to the Conservation Specialist Clinic of the RSKGM FKG UI with the chief complaint of pain in the lower right tooth when chewing. An objective examination of tooth 46 showed pulp caries in the occlusal area extending to the distolingual cusp. An oval-shaped distal root canal was found during access preparation. Distolingual residual dentinal less than 2 mm requires restoration of post and core crown. The anatomical post design fits the single distal root canal, flared and oval-shaped, allowing the post to adapt more easily and have better retention.
Conclusion: Anatomical identification of flared and oval-shaped distal root canal, accompanied with thin residual dentinal walls, the final restoration can be well retained by means of a post and core system, followed by a zirconia crown. On evaluation after one month, there were no subjective complaints and the functioning of teeth normal.

P3A-03-02

Salivary Ureum As A Diagnostic Tool In Children With Thalassemia Beta Major

Putu Gyzca Pradypta, Indah Titien, Putri Kusuma

Introduction: Children with thalassemia experience a synthesis of one of the beta chains of the globin gene, resulting in reduced hemoglobin formation. Children with beta thalassemia major require routine transfusions and iron chelation. Both of these cause impaired kidney function. Materials and Methods : Research subjects were children with beta thalassemia major in Moewardi Hospital Solo, Indonesia. Samples were taken by consecutive sampling technique from September to November 2018. The amount of blood transfusion and iron chelation and blood urea levels were secondary data from medical records. Unstimulated saliva was taken in the morning. Methods for measuring salivary urea levels was the urease method. The data was analyzed using Pearson correlation. Results: Significant relationship between blood transfusion with blood ureum (correlation coefficient 0,749), with saliva ureum (correlation coefficient 0,773). Significant relationship between iron chelation with blood ureum (correlation coefficient 0,785), with saliva ureum (correlation coefficient 0,710), Significant relationship between blood ureum and saliva ureum (correlation coefficient 0,775). Transfusion 1 time would increase blood ureum 0,013, Iron chelation 1 time increase blood ureum 0,017. Transfusion 1 time would increase saliva ureum 0,196 Iron chelation 1 time increase saliva ureum 0,134. Discussion :Positive correlation with blood ureum and saliva ureum. The mechanism of blood ureum migratred to saliva through 3 pathways ; passive diffusion, active transport, filtrartion. Conclusions: Saliva ureum could be used as a diagnostic biomarker for renal disoreders in thalassemia beta major.

P3A-03-03

Management Of Class Ii Division 1 Malocclusion With Complete Palatal Bite And Hypodivergent Growth Pattern

Mahardhika Setya Nugroho, Krisnawati

Introduction: Class II division 1 malocclusion is frequently encountered in Asian population. The anteroposterior skeletal discrepancy could be associated with retrognathic mandible, prognathic maxilla, or a combination of both. Meanwhile, the vertical skeletal pattern could either be normal, hypodivergent, or hyperdivergent. Thus, treatment option should consider the amount of skeletal discrepancy, dentoalveolar compensation, soft tissue profile, age, as well as stability of overjet reduction. Objective: Correction of Class II division 1 malocclusion with complete palatal bite and hypodivergent growth pattern. Case report: This case report discusses the orthodontic treatment of a male, 37 years-old patient with a Class II division 1 incisor relationship on a Class II skeletal pattern with prognathic maxilla, accompanied by complete palatal bite, multiple diastema, and hypodivergent growth pattern. Treatment plan included posterior extrusion, anterior retraction, and diastema closure. Orthodontic treatment was finished in 34 months using preadjusted edgewise (MBT) system, which resulted in a Class I incisors and canines relationship with normal overjet and overbite. Facial profile was straighter. Conclusion: Orthodontic treatment of Class II division 1 malocclusion in a non-growing adult patient could be approached with orthodontic camouflage to correct the dental relationship without changing the skeletal pattern. Treatment result showed improvement of intraoral and extraoral aspects, where anterior retraction for overjet reduction subsequently corrected the protrusive lips to be normal relative to the facial profile.

P3A-03-04

Sistem Penilaian Risiko Karies dan Rujukan Menggunakan Caries Risk Assesment and Referral Tool (CRA-RT) pada Early Childhood Caries (Tinjauan Naratif)

Siti Hajar Leni Siregar, Atik Ramadhani, Melissa Adiatman

In assessing the severity of Early Childhood Caries, it is necessary to develop a short and simple, and reliable method. Where this tool can be used to assess caries risk scores without clinical examination. Can be used by dentists in planning further treatment. The method is carried out by searching the literature related to caries risk assessment. One piece of evidence to provide referrals to toddlers, and it is found in supporting journals. The proposed tool contains an assessment of the presence or absence of behavioral risks or protective factors. Developed with 11 questions, which are simple non-invasive, do not require examination, do not require expensive equipment or a saliva test. Simple and can be used by non-medical and non-dental personnel, prints results quickly, within 3-5 minutes. It is hoped that dental professionals can use the Caries Risk Assessment – Referral Tool, to see the severity of Early Childhood Caries in children and how important it is to be referred for dental health services at Dental Health Service Facilities. This tool is very helpful, especially in pandemic conditions, where clinical examinations are very minimal.

P3A-03-05

Traumatic Dental Injuries pada Anak Berkebutuhan Khusus

Ivan Surija, Eva Fauziah

Pendahuluan: Traumatic Dental Injuries (TDI) pada anak merupakan masalah gigi mulut terbesar kedua yang memerlukan penanganan cepat dan tepat. TDI menyebabkan lesi pada gigi mempengaruhi struktur gigi, dan jaringan penyangga. Selain cedera lokal, TDI secara langsung maupun tidak mempengaruhi kehidupan individu seperti penampilan, bicara, posisi gigi, fungsional, estetik, psikologis, dan masalah sosial. Prevalensi TDI anak dan remaja bervariasi 7,3% - 58,6%. Prevalensinya meningkat pada populasi anak dengan berkebutuhan khusus (ABK), atlet olahraga, dan militer.Prevalensi TDI pada ABK secara umum beragam 9% - 57%. Sari Pustaka: Menurut American Academy of Pediatric Dentistry (AAPD) strategi pencegahan untuk ABK selain kesehatan gigi mulut juga meliputi cedera trauma seperti panduan antisipasi tentang risiko trauma, pembuatan mouthguard, dan hal yang perlu dilakukan ketika trauma dentoalveolar terjadi. Diskusi: Kelompok ABK dalam menjalankan aktifitas harian mengalami keterbatasan. Keterbatasan atau gangguan fisik, perkembangan, mental, sensorik, perilaku, kognitif, atau emosional tersebut menyebabkan mereka berisiko tinggi akan berbagai penyakit mulut sepanjang hidupnya, sehingga diperlukan penatalaksanaan, perawatan kesehatan, dan atau program pelayanan khusus termasuk program pencegahan. Edukasi pencegahan trauma dental untuk orang tua anak ABK, guru, pengasuh menjadi tanggung jawab dokter gigi menjadi hal penting. Sehingga saat terjadi trauma, penanganan darurat dapat segera diberikan oleh orang terdekat. Kesimpulan: Anak berkebutuhan khusus merupakan kelompok yang sangat rentan mengalami TDI. Tingkat kesadaran orang tua dan pengasuh yang rendah menyebabkan ABK tidak mendapatkan perawatan paska trauma dental yang memadai dan tepat. Diperlukan edukasi TDI pada orangtua atau pengasuh ABK untuk meningkatkan kesadaran, pengetahuan, dan kesiapan saat terjadi trauma dental pada kelompok ini.

P3A-03-06

Factors Associated With Dental Care Utilization In Depok City During The Covid-19 Pandemic: A Cross Sectional Study

Kurnia Permitasari, Herry Novrinda, Risqa Rina Darwita, Armasastra Bahar

Introduction: Visiting the dentist was a high-risk activity during the COVID-19 pandemic that affected the provision of dental and oral health services in Indonesia. Objective: to determine the factors related to dental care utilization and oral health services in Depok City during the COVID-19 pandemic. Methods: The cross-sectional study was conducted using an online and offline questionnaire that was carried out from November to December 2022. The stratified random sampling technique was used. Results: A total of 580 respondents were obtained. The result showed that 358 (61.7%) respondents did not utilize dental and oral health services during the COVID-19 period. Only 26.7% of respondents used government dental and oral health services. Almost half of the respondents (48.1%) said they did not need dental and oral health services. Bivariate analysis showed that the variables age, gender, marital status, medical history, education, occupation, knowledge of the disease, income, insurance ownership, and perceived needs had a statistically significant with the utilization of dental and oral health services in Depok City during the Covid-19 pandemic ($p < 0.05$). Conclusion: Factors related to the utilization of dental and oral health services during COVID-19 in Depok City are age, gender, marital status, medical history, education, occupation, knowledge of the disease, income, insurance ownership, and perceived needs.

SECTION
D4

Hands On Abstract

Dr. drg. Lilies Dwi Sulistyani, Sp.BM(K)

Department of Oral and Maxillofacial surgery, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MURAI

TIME:

13.00 – 15.30

PRACTICAL GUIDE FOR DENTOALVEOLAR FRACTURE AND WOUND CLOSURE IN DENTAL EMERGENCIES

1. Participant will learn:

- identifying oral and maxillofacial emergencies
- first treatment for dental trauma emergencies
- management for lasceration intra and extraoral
- management of dento alveolar fracture
- post treatment of dental trauma and outcomes

2. Practice:

- various suture technique in intra oral using model
- dentoalveolar fracture fixation using non rigid fixation
- making flaps incision for wound closure
- tips and tricks on dental emergencies.

H02

Dr. drg. Tri Ardi Mahendra, Sp.Pros(K)

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

KENARI

TIME:

13.00 – 15.30

CEMENTATION PROTOCOL AND UTILIZING DIGITAL IN YOUR INDIRECT RESTORATION

Participant will learn :

- How to cement indirect restoration (crown, veneer, bridge, SCRP implant) in multilink / variolink ivoclar protocol system
- Utilizing digital impression in daily practice
- Practice
- Tips and trick to prevent and cleaning excess cement
- Tips and trick to utilize intra oral scanner in daily practice

THE ORTHODONTIC REFERRAL: HOW TO MAKE WISE DECISION

Dr. drg. Retno Widayati, Sp.Ort(K)

Dr. drg. Fadli Jazaldi, Sp.Ort(K)

drg. Dwita Pratiwi, Sp.Ort

drg. Muhammad Sulaiman Kusumah Adiwirya, MM, Sp.Ort

Department of Orthodontics, Faculty of Dentistry Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 2

TIME:

13.00 – 15.30

Essential consideration of orthodontic case selection for general practitioner using removable appliance and when to refer to the orthodontist, which includes:

- Proper anamnesis
- Fundamental clinical examination, including extra and intra oral examination
- Radiographic examination, including cephalometric and panoramic x-ray
- Space analysis
- Appropriate diagnosis
- The decision for general practitioner to commence orthodontic treatment or To refer
- Treatment plan using removable appliance and its limitation
- Case report

Dr. drg. Eva Fauziah, Sp.KGA, K-PKOA

drg. Annisa Khairani, Sp.KGA

Department of Pediatric Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MALEO

TIME:

13.00-15.30

POST ENDODONTIC RESTORATIVE TREATMENT ON ANTERIOR PRIMARY TEETH

Caries still the most pathology infection issue in children's oral health. Due to chronic infection, caries process takes years to cause pain and complain in patient. So as the patient makes dental visit, the remains hard tissue in crown aspects will cause complexity in treatment. It will be considered to treatment option in anterior maxilla primary teeth.

Several treatment options vary from direct restoration to endodontic treatment prior to final restoration. For inflamed pulp tooth it will need endodontic treatment at first then continue to final restoration. The post endodontic restorative treatment for anterior primary teeth still considers the aesthetic beside functionality.

GI and composite resin are two material that can accept for aesthetic. However, GI have lower strength in mechanic load than composite resin. So composite resin is best option material for restore in anterior maxillary primary teeth.

In some circumstances such remains hard tissue are compromise that will lead to failure in final restoration, the decision is to add more retention. Additional retention can be achieved from stainless steel pins, fibber-reinforced bands, or even adding a GI material in the pulp chamber that extends to the core-shaped outer segment.

In this workshop, you will get the experience to restore anterior primary teeth post endodontic treatment with compromised crown. Hence we will train how to build up and shape the core using GI in primary teeth, then placement of final restoration with adhesive direct technique by using celluloid strip crown with composite resin material.



Prof. Dr. drg. Lindawati S Kusdhany, Sp.Pros(K)

drg. Mellissa Adiatman, Ph.D

Dr. drg. Dewi Priandini, Sp.PM

Department of Oral Medicine, Faculty of Dentistry, Universitas Trisakti

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

Department of Dental Public Health and Preventive Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

KAKATUA

TIME:

13.00-15.30

ORAL CARE FOR THE OLDER PEOPLE: PREPARING ORAL HEALTH PROFESSIONALS FOR AGEING POPULATION

Training module for Oral Care for Older People aimed at educating oral health care professionals (dentists, dental therapists) to look after older people's oral hygiene, to deal with their complex treatment needs and extended medical histories. This training also explores preventive measures that can be implemented to this population.

The training comprises on theoretical basis on process of ageing and how it affects oral health and simple day-to-day oral hygiene instructions. Through this programe, participants not only learn about different oral hygiene aids and techniques but also about common oral health issues, the association between oral and general health, and effective communication and behaviour management techniques.

Participants are also trained to assess, plan and implement individual oral care plans for older patients. This focuses on developing a plan based on individual need as ageing can lead to a different range of dental problems.

HO6

IMMEDIATE IMPLANT PLACEMENT FOR TISSUE PRESERVATION



drg. Dimas Ilham Hutomo, Sp.Perio(K)

drg. Adityo Widaryono, Sp.Perio(K)

drg. Nadhia A. Harsas, Sp.Perio(K)

Department of Periodontics, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MALEO

TIME:

16.00 – 18.30

- Detemining and Planing Case for immediate implant placement
- Surgery and Prosthetic Temporary Preparation
- Soft Tissue Management on Immediate Implant Placement

ADVANCED TECHNOLOGY WITH IMPROVED LEGACY ROTARY SYSTEM FOR PREDICTABLE RESULT IN ENDODONTICS

Dr. drg. Dini Asrianti, Sp. KG, Subsp.KE(K)

drg. Shalina Ricardo, Sp.KG, Subsp.KE(K)

Department of Periodontology, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

KENARI

TIME:

16.00 – 18.30

- The new paradigm of Minimally Invasive Endodontics was aim to preserve the maximum root canal structure during endodontic therapy. Therefore, mechanical enlargement and shaping of complex endodontic root canal systems to facilitate disinfection remain the main focus of endodontic treatment that follows this new paradigm. Advances in clinical dentistry have made more conservative access cavity and RCT preparations a viable option. ProTaper Ultimate that advanced in MIE, starts with a whole new mindset. The universal mindset that states, Always explore and 'secure' the canal prior to introducing any nickel titanium shaping file. It has shifted to a new paradigm that states once the canals are located, move directly to the ProTaper Ultimate Slider. The Slider progressive taper will negotiate down to estimated working length and, at the very same time, shape and cut an open glide path to aid in subsequent file usage. ProTaper Ultimate designed into more simple sequences after slider, shapers, then goes directly into finisher.
- The advanced technology with improved legacy rotary system with ProTaper Ultimate is a reliable technique approach that upgrades the benefits of crown-down techniques and was reported to be one of the best techniques to produce an optimal root canal preparation outcome nowadays. Along with MIE, appropriate methods and safe application of these techniques can prevent iatrogenic procedural errors from occurring which optimizes the quality of treatment outcome.

STEP BY STEP FOR SUCCESSFUL BRIDGE RESTORATION



Dr. drg. Saraventi, Sp.Pros(K)

drg. Lia Kartika Wulansari Sri Gunoro, PhD., Sp.Pros(K)

drg. Farisza Gita Mahiddin, Sp.Pros(K)

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

MURAI

TIME:

16.00 – 18.30

- Consideration for bridge restoration
- Case selection
- Treatment planning and sequence
- Skill's Lab: - Abutments preparation
- Bridge restoration provisional

RATIONALIZATION IN MANUAL ROTARY ENDODONTIC

drg. Bambang Nursasongko, Sp.KG, Subsp. KR(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

2 February 2023

VENUE:

NURI 2

TIME:

16.00 – 18.30

The success of a root canal treatment is mainly determined by the elimination of the zona of infection and sterilization without damaging the shape of the root canal. Various modern system of rotary file for root canal preparation have been introduced. This diversity is sometimes confusing in selecting the right files and systems, because they are not always available in clinics and also not necessarily accessible by patients. Operators who are used to and depend on endodontic engines will find it difficult to do preparations with manual rotary files which are often forced to do because the necessary facilities are not available. The technical using of SS files is very different from NITI rotary files, as well as manual and machine NITI rotary files. This HO will explain and facilitate root canal preparation using the manual rotary file to get maximum results and prevent fracture of files in root canal, as well as hermetic obturation methods.

HO10

LEDGE PREVENTION AND MANAGEMENT

Dr. Filippo Cardinali

Styleitaliano
Endodontics

DATE

2 & 3 February 2023

VENUE:

KAKATUA

TIME:

16.00-18.30

Endodontic treatment is a predictable procedure with high success rates: shaping plays a very important role in the outcome of the therapy.

During the shaping, the original anatomy respect allows preparing the canal saving radicular dentine, creating an ideal shape for a deep cleaning and a three-dimensional obturation. The execution of shapes that fit and meet the original anatomy decreases the risk of creating alterations of the root canal itself, such as ledges or transport, regarded by the international scientific literature as factors leading to the failure of the therapy. The respectful shaping of the root canal system is achievable using a proper shaping technique and getting the benefits of the evolution of the rotary file systems: thanks to the heat treatment of the rotary files, a totally mechanical shaping can be safely performed by the clinician, getting high quality and original anatomy respectful shaping, even in complex anatomies and even using a reduced number of instruments. The creation of a ledge during the shaping is the most common iatrogenic damage to the endodontic anatomy and it can be created by manual and rotary files. Once created, its management is crucial to complete the shaping the cleaning and the obturation at the proper working length to not decrease the outcome of the treatment. Aim of the lecture is to focus first the attention on the proper use of the rotary files in order to get a shaping respectful of the original endodontic anatomy, sharing protocols and tips to manage complex anatomies in the daily practice; the second part of the lecture focus on the ledge management, showing tips to ease the re-negotiation of the canal up to the working length.

Aim of the lecture is to highlight how the knowledge of the shaping techniques are more important than the rotary files, sharing protocols and tips to manage even iatrogenic mishapes once created.

DIGITAL PLANNING AND PROSTHETIC CONSIDERATION IN DENTAL IMPLANT TREATMENT

Dr. drg. Ratna Sari Dewi, Sp.Pros(K)

Dr. drg. Tri Ardi Mahendra, Sp.Pros(K)

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MURAI

TIME:

09.00 – 11.30

Pemasangan implan membutuhkan suatu pendekatan multidisipliner. Rencana restorasi harus terlebih dahulu dievaluasi sebelum pemasangan implan. Pemasangan implan tidak hanya tergantung pada tulang dan ruang yang tersedia, akan tetapi terutama adalah pada kondisi prostetik dan oklusal yang optimal. Untuk memperoleh posisi yang tepat dalam pemasangan implant diperlukan surgical guide, baik yang digital atau yang konbvensional. Surgical template adalah suatu alat yang dibuat untuk menuntun operator pada lokasi pemasangan implan sesuai dengan perencanaan. Pemakaian surgical template pada saat pemasangan implan akan mempermudah proses prostodontik serta memberikan hasil estetik, fonetik dan karakteristik estetik yang baik. Suatu perencanaan pemasangan implan dengan surgical guide secara digital dapat kita sebut dengan digital Implant Planning.

Untuk memulai digital planning, kita perlu menggabungkan hasil cbct pasien dengan hasil scan intraoral pasien. Setelah filenya tergabung, tahap berikutnya adalah melakukan penyusunan elemen gigi pada area edentulous sebagai panduan perencanaan pemasangan implant dengan prinsip prosthetic driven.

Apabila kita sudah menentukan site pemasangan implan yg paling ideal, dan posisinya sudah sesuai, file kemudian dapat di export dlm bentuk dicom files, dan dikirim ke lab yang mendukung untuk pembuatan surgical guide.

Pada Hands on ini akan dilakukan praktik melakukan digital Implant Planning dengan menggunakan software dan computer yang sudah disediakan. Masing masing peserta akan melakukan digital Implant Planning. Setelah itu dilakukan pemasangan implant, step by step pada model simulasi.

H012

HOW TO MANAGE CURVED CANALS

Assoc. Prof. Dr. Jeeraphat Jantarat, D.D.S, M.D.Sc, Ph.D

Mahidol University

DATE

3 February 2023

VENUE:

KENARI

TIME:

09.30-12.00

Management of curve canal is always challenging. Many dentists facing with some complications such as ledge and separate instrument. Curve canals can be classified in many types and some are not as difficult to manage as it appears. Modern rotary instrument can reduce chance of those complications

The course will present modern technology to manage root canal procedures in complex anatomy case such as curve canal, and to make clinicians understanding its complexities, and possibilities and limitations of current available techniques.

The clinician will practice root canal instrumentation and demonstration of obturation with warm vertical technique.

After the course, the participants will learn how to instrument curve root canal effectively and safely.

STROBE GUIDELINE

drg. Mellissa Adiatman, PhD

drg. Atik Ramadhani, PhD

Department of Dental Public Health and Preventive Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

NURI 2TIME:

13.00-14.30

H014

GINGIVECTOMY IN CASE OF LOWER MOLAR OPERCULUM

Dr. drg. Natalina, Sp.Perio(K)

Prof. Dr. drg. Sri Lelyati S.U., Sp.Perio(K)

Department of Periodontics, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MALEO

TIME:

09.00 – 11.30

During the process of tooth eruption, the soft tissue covering the crown area sometimes becomes infected. The term pericoronitis refers to inflammation of the gingiva in relation to the crown of an incompletely erupted tooth. The space between the crown of the tooth and the overlying gingival (i.e., operculum) is an ideal area for the accumulation of food debris and bacterial growth. The clinical picture is a red, swollen, suppurating lesion that is tender, pains to the ear, throat, oral malodor and trismus. The decision to retain a tooth with this condition is determined by the tooth position, quality of the soft tissues and the amount of space and vestibular depth. Treatment of pericoronitis is non-surgical therapy and combine with surgical therapy when the gingival tissue has not improved although the infection has decreased. Gingivectomy and gingivoplasty are options in cases where there are pseudo-pockets or gingival tissue covering the crown

IMPROVED COMPOSITE INJECTION MOLDING TECHNIQUE

Prof. Keiichi Hosaka, D.D.S., Ph.D

Tokushima University

DATE

4 February 2023

VENUE:

MURAI

TIME:

13.00 – 14.30

- How to make the index
- How to inject the flowable
- How to finish and polish
- What adhesive material to use
- What flowable composite to use

H016

VIRTUAL DENTAL IMPLANT PLANNING BY ONDEMAND SOFTWARE

Lect. Penporn Luangchana, D.D.S, M.Sc.

Mahidol University

DATE

3 February 2023

VENUE:

NURI 2

TIME:

13.00 – 16.00

A hands-on workshop will be hosted after the lecture which will give participants a chance to explore areas for implant placement such as the critical anatomical landmark, bone morphology, bone density, and the lesion associated with edentulous area by using OnDemand3D CBCT software. Moreover, to practice interpretative edentulous areas for dental implant placement and planning the virtual implant in the edentulous area.

TMJ ARTHROCENTESIS: TECHNIQUE, INDICATIONS AND CONTRAINDICATIONS

drg. Dhanni Gustiana, Sp.BM

Oral and Maxillofacial Surgeon in Kota Tangerang Selatan Hospital

DATE

3 February 2023

VENUE:

KENARI

TIME:

13.00-16.00

Temporomandibular joint disorder therapy consists of non-surgical and surgical methods. A nonsurgical approach is recommended for initial management, and if this fails, surgical intervention should be considered. However, operating in this region is associated with many risks. Arthrocentesis is commonly recommended in patients unresponsive to conservative therapy.

TMJ arthrocentesis is an effective technique for managing TMD. Arthrocentesis was defined as TMJ lavage without viewing the joint space using a sterile needle and sterile irrigation. Arthrocentesis relieves pain by removing inflammatory cells from the joint space and improves mandibular mobility by removing intra-articular adhesions, eliminating negative pressure within the joint, thereby clearing the disc space and fossa, however the Arthrocentesis procedure is associated with postoperative complications and sequelae. Appropriate arthrocentesis technique must be considered before undertaking treatment

H018

POST-ENDODONTIC CLASS II ESTHETIC INDIRECT ONLAY WORKFLOW

Dr. drg. Ike Dwi Maharti, Sp.KG(K)

drg. Sylva Dinie, MARS, Sp.KG(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

MURAI

TIME:

13.00 – 14.30

Root canal treatment is successful in that therapy can rehabilitate the tooth's shape and function. Post-endodontic restoration is a fairly complex discussion because it requires special considerations, i.e., the type of treated tooth and the remaining healthy tooth structure. Based on clinical and laboratory studies, the use of post in post endodontic restoration may increase retention in the core but weaken the root structure. The introduction of adhesive dentistry and the minimally invasive restorative treatment approach has changed this. The use of an adhesive post is not required but not contraindicated if performed with a conservative approach on the root canal. With the adhesive principle, various preparation designs include butt joint, shoulder, bevel, and ridge up. We can apply more than one preparation design to a single tooth depending on the indication, specific requirements, and the remaining healthy tooth structure. Besides preparation designs, onlay's cementation procedure, including luting and adhesive material, also becomes crucial for long-lasting esthetic restorative performance in the oral cavity.

MORPHOLOGY DRIVEN TOOTH PREPARATION FOR INDIRECT RESTORATION

drg. Leonard C. Nelwan, Sp.Pros, FISID, FITI

DATE

4 February 2023

VENUE:

MALEO

TIME:

13.00 – 16.00

- Perform the good and minimally invasive preparation
- Changing the paradigm in Indirect Dentistry
- How to choose a good bonding material for zirconia cementation

H021

LOOK BEYOND THE TEETH: ORAL CANCER SCREENING

Dr. drg. Indriasti Indah Wardhany, Sp.PM(K)

drg. Ambar Kusuma Astuti, Sp.PM(K)

Department of Oral Medicine, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

NURI 1

TIME:

16.00 – 18.30

The number of oral cancer cases in Indonesia might be just the tip of an iceberg due to the low awareness and uncontrolled risk factors. Most of the oral cancer cases were found in the late stage, which eventually worsened the morbidity and mortality rate. Indonesians have many risk factors related to the development of oral cancer such as smoking, drinking alcoholic beverages, betel nut chewing, inappropriate diet and high level of stress. Dentists might be the first health professionals who encounter the patient with signs and symptoms of oral cancer. The high frequency of dental visits and the anatomy of the oral cavity should ease the dentist to spot any suspicious changes and perform suitable referral, however some dentists find difficulties in recognizing early clinical symptoms of oral cancer. Often, the early oral cancer lesions are overlooked because dentists are either not aware of them or too focused on working on the hard tissues. On the other hand, some patients are getting too anxious about the accidental finding of normal oral variation after having experiences with relatives who have oral cancer. This situation might lead to unnecessary referral and procedures. The prognosis of oral cancer will be much improved if detected in an early stage. Therefore, dentists play a very important role to detect, evaluate and perform the right referral. The awareness and knowledge of oral cancer screening need to be enhanced for dentists. This hands-on will present methods of oral cancer screening for general dental practitioners.

DIAGNOSIS OF PERIODONTITIS AND ITS MANAGEMENT IN ACCORDANCE WITH THE EFP/AAP 2017 GUIDELINES

drg. Benso Sulijaya, Sp.Perio(K), Ph.D

Dr. drg. Fatimah Maria Tadjoedin, Sp.Perio(K)

Department of Periodontology, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

KENARI

TIME:

16.00 – 18.30

The classification of periodontitis has been renewed in 2017 by the European Federation of Periodontology (EFP) and American Academy of Periodontology (AAP), followed with other periodontology societies all over the world. This update may implicate to the changing of diagnosis system in the clinical setting and its management as well. Our workshop will discuss and elaborate this issue and give a simple approach to the clinicians in a way to improve periodontal therapy. Participants of this workshop will be able to determine periodontal cases through prepared algorithm and plan a proper treatment strategy based on the S3 of the latest periodontal therapy approach.

Dr. Gerd Frahsek

DATE

3 February 2023

VENUE:

MURAI

TIME:

16.00 – 18.30

DIGITAL IMPLANTOLOGY - LIVE DEMONSTRATION FROM IMPLANT PLANNING TO THE FINAL RESTORATION USING DIGITAL IMPRESSIONS, CBCT, CADCAM AND 3D PRINTING

Digital Implantology is a safe, reliable and efficient workflow for implant treatments. Based on a real patient case all steps are demonstrated, starting with a prosthetically orientated implant planning (virtual implantation) using CBCT, digital impressions and modern software (SICAT Implant 2.0). The in-house fabrication of a surgical guide through 3D printing and milling will be shown as well as its clinical use during the surgical treatment in detail. This includes the intrasurgical registration of the implant position for the implant restoration using an intraoral scanner. Modern CADCAM and 3D printing devices as well as integrated software solutions allow the efficient production of final and temporary restorations, but also e. g. insertion aids.

HISTOPATHOLOGICAL DIAGNOSIS OF ODONTOGENIC TUMORS

Prof. Tohru Ikeda, D.D.Sc., Ph.D

Tokyo Medical and Dental University

DATE

3 February 2023

VENUE:

MALEO

TIME:

16.00 – 18.30

Bone destruction caused by direct invasion or hematogenous metastasis of tumors is not rarely seen in patients of many kinds of cancers. It is well known that prostatic cancer and breast cancer are highly metastatic to the bone. Direct invasion into the bone is seen with relatively high frequency in oral cancers, most of which is oral squamous cell carcinoma (OSCC). Except for prostatic cancer, tumor invasion into the bone induces osteolysis, which leads to bone destruction, poor QOL and poor prognosis of the patients. Biological mechanism of bone resorption has been clarified to be induced by RANKL, which is expressed by osteoblasts and osteocytes. Interaction of RANKL and the receptor RANK, which is expressed in macrophage-derived osteoclast progenitor cells maintained with M-CSF dedicates osteoclast progenitor macrophages to differentiate into osteoclasts and finally induces osteoclastogenesis. However, RANKL is not widely expressed in OSCC. It has been reported that certain factors expressed in OSCC cells stimulates RANKL expression in stromal cells. In addition, TNF-□, which is expressed in OSCC might participate in the bone resorption. However, information to support these kinds of hypotheses is limited, the accumulation of supportive data is needed, and other unknown common mechanisms might be present. We have been studied the mechanism of OSCC-induced bone resorption and found that many of OSCC cells possessed potent osteoclastogenic properties from macrophages exposed to RANKL for 24h, which are defied as osteoclast precursor cells (OPC), but not from RANKL untreated osteoclast precursor macrophages. OPC do not express any osteoclast functions and are unable to differentiate into osteoclasts without further stimulation by RANKL. The osteoclastogenesis induced by OSCC cells was resistant to RANKL inhibitory agents, denosumab and osteoprotegerin, in contrast to conventional RANKL-induced osteoclastogenesis. We also found that OSCC-induced osteoclastogenesis was partly induced by extracellular microvesicles (ECV) generated by OSCC cells. Furthermore, we found that the osteoclastogenesis was effectively attenuated by cannabidiol, one of the cannabinoids that does not express psychotomimetic functions, effectively attenuated osteoclastogenesis induced by OSCC cells and did not affect RANKL-induced osteoclastogenesis. Recently, we analyzed soluble factors generated by OSCC cells and found that IL-1 expressed in OSCC cells stimulated both OSCC-induced osteoclastogenesis and conventional RANKL-induced osteoclastogenesis, and IL-1 inhibitors significantly attenuated the stimulatory effects on both osteoclastogenic pathways. In this meeting, effects of IL-1 on OSCC-induced osteoclastogenesis will be introduced and will consider the mechanism of bone resorption induced by infiltration of OSCC into the bone tissue.

H025

Prof. drg. Laura S Himawan, Sp.Pros(K)

Prof. Dr. drg. Ira Tanti, Sp.Pros(K)

drg. Pinta Marito, Sp.Pros

drg. Ariyanti Rezeki, Sp.Pros

drg. Fakhrana Ariani Ayub, Sp.Pros

drg. Astari Larasati, Sp.Pros

Department of Prosthodontic, Faculty of Dentistry, Universitas Indonesia

DATE

3 February 2023

VENUE:

KAKATUA

TIME:

16.00 – 18.30

PROSTHODONTIC APPROACH IN THE MANAGEMENT OF SLEEP APNEA

Sleep apnea or obstructive sleep apnea (OSA) is increasingly recognized in the community. Sleep apnea is one of the most common sleep disorders as well as insomnia, with a prevalence of around 9-38%. Until now, there has been no detailed explanation of the relationship between OSA and temporomandibular disorders (TMD), but OSA patients suffer from TMD more than other healthy individuals. Therefore, what can a dentist, especially a prosthodontist, do to treat OSA? OSA can be categorized into mild, moderate, and severe in terms of the Apnea Hypopnea Index (AHI). Dentists or Prosthodontists can treat OSA with mild to moderate AHI. Mandibular Advancement Device (MAD) is one of the treatments that can be used in this case. This hands-on will present the theory of sleep, OSA, AHI, and determining the bite registration for making MAD according to the indications.

INTRALESIONAL STEROID THERAPY IN MANAGEMENT OF ORAL MUCOSAL DISEASE

Dr. Nathaniel Simon Treiser

Harvard School of Dental Medicine

DATE

4 February 2023

VENUE:

NURI 2

TIME:

10.30 – 12.00

Participants will learn the fundamentals of providing intralesional steroid therapy for the management inflammatory and immune-mediated oral mucosal conditions. Appropriate indications and importance of correct diagnosis will be reviewed. Proper technique, including preparation of the injection, site selection, delivery, and post-procedural considerations will be demonstrated and performed on practice tissue. At the end of this session, participants will have the knowledge and skills to be able to provide intralesional steroid therapy to the oral mucosa safely and effectively.

H027

FIBER POST UTILIZATION FOR POST ENDODONTIC TREATMENT

drg. Aryo Megantoro, Sp.KG, Subsp.KR(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

KENARI

TIME:

09.00 – 11.30

Endodontic treatment comes in different teeth conditions. Some teeth suffer from extensive crown loss that need attention in the retention and resistance for the post endodontic restoration. The use of post will increase the retention of the restoration. Nowadays post can be found in many different materials, such as metal, carbon, or fiber. Besides the material, post also come in different shapes and sizes. Clinician should be aware which type of post suitable for every case, based on the indication and also the clinical applications protocol of using such post. Fiber post has become a vast choice among clinician due to the benefits of the materials, the strength, and the ease of using in clinical case, regarding the limitations. Yet, it needs to be understood that fiber post comes along with other tools and materials that needs highly care to give an optimum result for the patients.

POST ENDODONTIC CAVITY PREPARATION PRIOR TO INDIRECT RESTORATION & DIGITAL APPROACH IN RESTORATIVE DENTISTRY: 3D INTRAORAL SCANNER WORKFLOW

Dr. drg. Aditya Wisnu Putranto, Sp.KG, Subsp. KR(K)

Department of Conservative Dentistry, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

MURAI

TIME:

09.00 – 11.30

Nowadays the esthetic conservative dentistry become priority among patients. The adaptation of 3D intraoral scanner (IOS) in dentistry can improve the effectivity and efficiency on delivering esthetic indirect restoration. The various of preparation design for post endodontic cavity make the dentist have a difficult decision to choose the ideal concept for clinical practice prior to digital scanning. Understanding the new concept of preparation design prior to esthetic indirect restoration can give optimalization of protection for residual hard tissue. The new material of adhesive recently can optimize the bonding characteristic between enamel and also dentin to composite or ceramic indirect material. Practicing ideal protocol how to use adhesive can improve the longevity of adhesive especially in restoration on direct & indirect. Bulk-fill composite resin (SDR+ - Dentsply Sirona) have a good characteristic such as the ability to be cured up to 4 mm thickness and can be used to block-out the undercut in the cavity and the application for dentin hybridization. For final impressive digital impression, the use of 3D IOS (Primescan – Dentsply Sirona) is mandatory to achieve high accuracy & trueness. As a conclusion esthetic direct labial veneer & bulk-restoration on posterior can be achieve if the operator uses the right tools on the right case.

HO29 & 31

IMMEDIATE IMPLANT PLACEMENT : CLINICAL DECISIONS AND CONSIDERATION

drg. Yudy Ardilla Utomo, Sp.BM(K)

Department of Oral and Maxillofacial surgery, Faculty of Dentistry, Universitas Indonesia

DATE

4 February 2023

VENUE:

KAKATUA

TIME:

09.00 - 11.30

13.00 - 15.30

BRILLIANT COMPONEER: A SMILE MADE EASY

Kara Monica Marie P. Achacoso, DMD

At the completion of the hands-on, the Dentist should be able to understand when to use direct free-handed bonding of composite resin versus the use of Componeers.

- The know-hows of Componeer
- A step by step guide to the application of Componeer from start to finish
- Techniques involved for success of Componeer
- How to handle different and practical cases using Componeer

DATE

4 February 2023

VENUE:

KENARI

TIME:

13.00 – 16.00

SECTION

E1

DENTAL EXHIBITION

FLOOR PLAN
Main Lobby
DENTAL EXHIBITION

DENTAL
EXHIBITION

Booth	Company
1	PT. Unilever Indonesia Tbk (Pepsodent)
2	Bank Syariah Indonesia
3	FKG UI
4	PT. Tawada Healthcare
5	PT. Andini Sarana
6	PT. Fondaco Jayatama
7	PT. Bintang Saudara Semesta Jaya
8	PT. Thomasong Nirmala
9	PT. Revo Medika Parahyangan (Revoden)
10	PT. Promed Nusantara Jaya
11	PT. Ferron Par Pharma
12	PT. Surya Mandala
13	PT. Admiral Blesensa Abadi (Fotona Laser)
14	PT. Global Dent
15	PT. Sometech Indonesia (ST)
16	GC Asia Dental
17	PT. Raya Dental
18	PT. Apex Innomed
19	PT. Multi Medika Raya
20	PT. Ultra Dentalindo Mandiri
21	PT. Hympari Berkat Perkasa
22	PT. DS Solutions
23	PT. Doremi Refala Indonesia
24	PT. Sugiarto Dental Supply
25	PT. Mandala Mitratama
26	PT. Morita Dental Indo

DENTAL
EXHIBITION

Booth	Company
27	PT Gratia Jaya Mulya (Belanja Gigi)
28	PT. SheepMedical Group Indonesia
29	CV. Asia Afrika Dental
30	Elsevier Singapore Pte Ltd
31	PT. Yunex Global Indonesia
32	PT. Fixiprima Persada
33	PT. Dentsply Sirona Indonesia
34	PT. Cobra Dental Indonesia
35	PT. Dental Jaya
36	PT. Klik Dental Sejahtera
37	PT. Intisumber Hasil Sempurna Global
38	PT. Labora Mandiri Indo Pratama
39	PT. Johnson & Johnson (Listerine)
40	PT. Mentari Murni Mulia (M3i)
41	PT. Berkah Dental Indonesia
42	PT. CAB Dental
43	PT. Osstem Implant
44	PT. Meditrust Indonesia
45	PT. Dentalities Group Indonesia
46	PT. Cipta Dental Lab
47	PT. Azuri Bahtera Raya – Interbat
48	PT. Kirana Jaya Lestari
49	PT. Cahaya Tiga Bintang Abadi
50	PT. American Orthodontics Indonesia
51	PT. Henli Jaya Mandiri
52	PT. Hexpharm Jaya Laboratories
53	PT. Haleon Indonesia Trading (Sensodyne)

Booth No. 1

PT. Unilever Indonesia Tbk (Pepsodent)

Booth No. 2

Bank Syariah Indonesia

Gedung The Tower lt.6, Jl.Gatot Subroto No.27 Jakarta
Contact Person: Erik Hardiyanto
Email: erik.hardiyanto@bankbsi.co.id
No. Hp: 081232621920

Booth No. 4

PT. Tawada Healthcare

Jl. Tentara Pelajar Pertama Senayan Blok A 18-19 Grogol Utara - Kebayoran Lama, Jakarta Selatan, DKI Jakarta
Contact Person: Akbar
Email: akbar@tawadahealthcare.com
No. Telp: 081574483233

Booth No. 5

PT. Andini Sarana

Jl. Rawa Sumur III Kav III Blok DD No. 11, Jatinegara, Cakung, Jakarta Timur
Contact Person: Wiwin Oktawinata
Email: wiwin@andini.co.id
No. Telp: 0815 8855 325

Booth No. 6

PT. Fondaco Jayatama

Gedung APL Tower Central Park Lt 27 Suite 1.2.5 Jl. Letjen S Parman Kav 28 RT 009 RW 008
Contact Person: shanty soedja
Email: education@fondaco.co.id
No. Telp: 081316452484

Booth No. 7

PT. Bintang Saudara Semesta Jaya

Jl. Asia No 212 A-B Seirengas II, Medan Area, Medan
Contact Person: Sanusi
Email: bsa@bintangsaudara.com
No. Telp: +62 878-7133-6968

Booth No. 8

PT. Thomasong Nirmala

JL. Am Sangaji No. 20-A, Petojo Utara, Gambir, Jakarta Pusat, DKI Jakarta
Contact Person: Tiara
Email: sales@thomasong.co.id
No. Telp: 0811958589

Booth No. 9

PT. Revo Medika Parahyangan (Revoden)

Jl. Batununggal Indah II Ruko RD 17 RT 001 RW 005 Mengger Bandung Kidul, Kota Bandung, Jawa Barat, 40267
Contact Person: Kiki Rahman
Email: marketingrevo17@gmail.com
No. Telp: 087788698593 / 082115810312

Booth No. 10

PT. Promed Nusantara Jaya

Jl. Syarifudin Yoes RT 053 RW 000, Sepinggan Baru, Balikpapan Selatan
Contact Person: Ratna Arif
Email: promednj.info@gmail.com
No. Telp: 081351776751

Booth No. 11

PT. Ferron Par Pharma

Jl. Jababeka VI Blok J 3 Kawasan Industri, Jababeka, Cikarang Utara, Bekasi, Jawa Barat
Contact Person: Parris
Email: parrishany.eka@ferron-pharma.com
No. Telp: 08111523038

Booth No. 12

PT. Surya Mandala

Komplek Taman Ratu Indah, Duri Kepa, Kebon Jeruk, Jakarta Barat
Contact Person: Sandy Ismawan
Email: info@suryamandala.com
No. Telp: 087777656768

Booth No. 13

PT. Admiral Blesensa Abadi (Fotona Laser)

Jl. Kyai Caringin, Cideng, Gambir, Kota Adm. Jakarta Pusat, DKI Jakarta, 10150
Contact Person: Ilham Kamil
Email: 0813-1818-0318
No. Telp: ilham.kamil@blesensa.co.id

Booth No. 14

PT. Global Dent

Jl. Kyai Maja Kav 65 No A-1 Kramat Pela Kebayoran Baru
Contact Person: Pieter
Email: globaldent.jakarta@gmail.com
No. Telp: 081398600181

Booth No. 15

PT. Sometech Indonesia (ST)

Jl. Panjang AKR Tower Lt. 11 Unit 11G, Kebon Jeruk, Kota Adm. Jakarta Barat, DKI Jakarta, 11530
Contact Person: Ananda
Email: sales02.sometechindo@gmail.com
No. Telp: 081293190522

Booth No. 16

GC Asia Dental

Jl. Pulo Asem Timur 8 No. 5, Rawamangun, Jakarta Timur
Contact Person: Hanni
Email: handriani.hanni@gc.dental
No. Telp: 087880135888

Booth No. 17

PT. Raya Dental

Klampis Semolo Barat VII/60a, Surabaya
Contact Person: Hasjim
Email: hasjimsu@gmail.com
No. Telp: 08155220504

Booth No. 18

PT. Apex Innomed

Jl. Boulevard Raya Blok QJ 1 Lt. 2 No. 31 RT 011/RW 012, Kelapa Gading,, DKI Jakarta, 14240
Contact Person: Arie
Email: apexinnomed@gmail.com
No. Telp: +62 812-9605-4421

Booth No. 19

PT. Multi Medika Raya

Citypark Business District (CBD) E1 No. 8 Cengkareng Timur, Cengkareng, Jakarta Barat, DKI Jakarta
Contact Person: Gilang Pratiwi
Email: gilang@mmr.co.id
No. Telp: 081312802843

Booth No. 20

PT. Ultra Dentalindo Mandiri

Jl. Biak no. 38C Kel. Cideng, Kecamatan Gambir, Jakarta Pusat
Contact Person: yemima
Email: financeultradentalindomandiri@gmail.com
No. Telp: 081298039191

Booth No. 21

PT. Hympari Berkat Perkasa

Rukan Sentra Niaga RSN 5 No. 028, Jaka Setia, bekasi Selatan, Kota Bekasi, Jawa Barat
Contact Person: Batista Galih PS
Email: hympari.galih@gmail.com
No. Telp: 085780965652

Booth No. 22

PT. DS Solutions

Jl. Arteri Kelapa Gading Rukan The Fifty No. 6-7 RT 001 RW 001, Pegangsaan Dua Kelapa Gading, Jakarta Utara
Contact Person: Natasha
Email: natasha@solutions-ds.com
No. Telp: 08128075945

Booth No. 23

PT. Doremi Refala Indonesia

Jl. Alaydrus No. 44C Petojo Utara, Gambir, Kota Adm. Jakarta Pusat, DKI Jakarta, 10130
Contact Person: harsono mulyono
Email: harsono.mulyono@gmail.com
No. Telp: 08170710063

Booth No. 24

PT. Sugiarto Dental Supply

Jl. Gandhi No 160 RT 000 RW 000 Sei Rengas II Medan Area, Kotamadya Medan
Contact Person: poniman sugiarto
Email: Info@sugiartodental.com
No. Telp: 08126048285

Booth No. 25

PT. Mandala Miratama

Komplek Ruko Roxy Mas Blok C2 No 12 JL KH Hasyim Ashari No. 125, Cideng Gambir, Jakarta Pusat, DKI Jakarta
Contact Person: Novi
Email: mitratam@centrin.net.id
No. Telp: 087789302220

Booth No. 26

PT. Morita Dental Indo

Ruko Roxy Trade Center, JL KH Hasyim Ashari No 233 K RT 001 RW 005 Cideng Gambir, Jakarta Pusat, DKI Jakarta
Contact Person: Budi Prasetyo
Email: budi@moritadentalendo.com
No. Telp: 087884100391

Booth No. 27

PT. Gratia Jaya Mulya (Belanja Gigi)

Gading Park View Jl. Boulv. Tmr Blok ZC.01 No 10-11, Pegangsaan Dua, Kelapa Gading, Jakarta Utara, DKI Jakarta
Contact Person: joyce
Email: office@gratiajm.co.id
No. Telp: 087870072277

Booth No. 28

PT. SheepMedical Group Indonesia

Business Park Kebon Jeruk Blok E2 No. 9, Jl. Mer Meruya Utara Kembangan
Contact Person: Stefany
Email: Admin.id@sheepmedical.com, stefany.yunita@gmail.com

Booth No. 29

CV. Asia Afrika Dental

Jl. Asia Afrika No. 157-159 Kebon Pisang, Sumur Bandung, Kota Bandung, Jawa Barat
Contact Person: Desi Pratiwi A'inun
Email: desiiprtw30@gmail.com
No. Telp: 083824970292

Booth No. 30

Elsevier Singapore Pte Ltd

3 Killiney Road, Winsland House 1, #08-01, Singapore 239519
Contact Person: Jade
Email: j.aw@elsevier.com

Booth No. 31

PT. Yunex Global Indonesia

Gedung Lavenue Office Tower Lt 12 JL Raya Pasar Minggu Kav 16, Pancoran, Jakarta Selatan, DKI Jakarta, 12780
Contact Person: Nadilla Ika
Email: nadilla.yunex@gmail.com
No. Telp: 0813 8126 0729

Booth No. 32

PT. Fixiprima Persada

Jl. Pintu Air Mitra Pintu Air, Pasar Baru, Sawah Besar, Kota Adm. Jakarta Pusat, DKI Jakarta, 10710
Contact Person: kenneth
Email: fixiprima@gmail.com
No. Telp: 08129534283

Booth No. 33

PT. Dentsply Sirona Indonesia

Gedung Tempo Scan Tower Lt. 28 Jl. HR Rasuna Said Kavling 3-4, Kuningan Timur Setiabudi, Jakarta Selatan
Contact Person: Edy Gunawan
Email: edy.gunawan@dentsplysirona.com
No. Telp: 081286868892

Booth No. 34

PT. Cobra Dental Indonesia

Jl. Pakuningratan No. 69 Cokrodiningratan, Jetis, Yogyakarta
Contact Person: Lutfi Satia Wibawa
Email: lutfisatia@cobradental.co.id
No. Telp: 081282084054

Booth No. 35

PT. Dental Jaya

JL. AM Sangaji No 71A RT 033 RW 009, Karangwaru, Tegalrejo
Contact Person: Daniel Santoso
Email: dentaljayahrd2@gmail.com
No. Telp: 0274-5019537

Booth No. 36

PT. Klik Dental Sejahtera

Jl. Pluit Selatan Raya No. 1 CBD Pluit Ruko B-2 Penjaringan, Jakarta Utara, DKI Jakarta
Contact Person: Wiwin
Email: wiwisumiati.w@gmail.com
No. Telp: 0818420914/ 08111598987

Booth No. 37

PT. Intisumber Hasil Sempurna Global

Komplek Darmo Park II Blok III No 8 RT 004 RW 002 Dukuh Pakis, Kota Surabaya, Jawa Timur
Contact Person: Dian
Email: dian@onemed.co.id
No. Telp: 08113544860

Booth No. 38

PT. Labora Mandiri Indo Pratama

Jl. C Simanjuntak No 47 Terban, Terban Gondokusuman, Kota Yogyakarta, D.I. Yogyakarta
Contact Person: Lenny
Email: lennykoris@gmail.com
No. Telp: 0816786676

Booth No. 39

PT. Johnson & Johnson (Listerine)

K-Link Tower Lt.12, Jl. Jend. Gatot Subroto Kav. 59A, Jakarta 12950, Indonesia
Contact Person: Emil
Email: eeventha@its.jnj.com
No. Telp: 08119115262

Booth No. 40

PT. Mentari Murni Mulia (M3i)

Jl. Pecenongan, Kebon Kelapa, Gambir, Kota Adm. Jakarta Pusat, DKI Jakarta, 10120
Contact Person: Andreas marunduri
Email: andreas.maru@yahoo.com
No. Telp: 085714582937

Booth No. 41

PT. Berkah Dental Indoneaia

Jl. Talas 2 No. 80 RT 001/RW 001, Pondok Cabe Ilir
Pamulang, Tangerang Selatan, Banten
Contact Person: Ita Miftakhul Jannah
Email: sales@berkahdental.com
No. Telp: 087789440643

Booth No. 42

PT. CAB Sejahtera Dental

Taman Kopo Indah II Blok E2 No 23 RT 010 RW 017,
Margahayu Selatan, Margahayu, Kab. Bandung, Jawa Barat
Contact Person: hendi kusnadar
Email: cabdental.bdg@gmail.com
No. Telp: 087803036161/ 08980916191

Booth No. 43

PT. Osstem Implant Indonesia

K-link Office Tower, Jl. Gatot Subroto No.1, RW.4, East
Kuningan, Setiabudi, South Jakarta City, Jakarta 12950
Contact Person: Fahri
Email:
No. Telp: 085718911891

Booth No. 44

PT. Meditrust Indonesia

Jl. Warung Buncit Raya No. 8 RT 007/003 Kalibata, Pancoran,
Jakarta Selatan, DKI Jakarta, 12740
Contact Person: budi mulyono
Email: budi.mulyono@meditrust.id
No. Telp: 08161850590

Booth No. 45

PT. Dentalities Group Indonesia

Graha Samastya Lt. 2, Jl. Alaydrus, Petojo Utara, Gambir, Kota
Adm. Jakarta Pusat, DKI Jakarta, 10130
Contact Person: M. Wahyu
Email: Bobby@dentalities.com
No. Telp: 082113562277

Booth No. 46

PT. Karya Kreasi Cipta (Cipta Dental Lab)
Tokopedia Care Tower level 10 Suite 03 Ciputra International
Jl. Lingkar Luar Barat No. 101 Rawa Buaya, Cengkareng,
Jakarta Barat, DKI Jakarta
Contact Person: sarah arifin
Email: arifinsarah@gmail.com / member@ciptadlba6.com
No. Telp: 082147034503

Booth No. 47

PT. Azuri Bahtera Raya - Interbat

Ruko Cibubur Indah Jl. Lapangan Tembak B No.16 RT 011
RW 002 Cibubur, Ciracas, Jakarta Timur, DKI Jakarta, 13720
Contact Person: Bakhtiar
Email: azuri_dentamed@yahoo.co.id
No. Telp: 08111334513

Booth No. 48

PT. Kirana Jaya Lestari

Jl. Tanah Abang 2 No 37, Petojo Selatan, Gambir, Jakarta
Pusat, DKI Jakarta
Contact Person: Mariana
Email: info@ptkirana.com
No. Telp: 08158156311

Booth No. 49

PT. Cahaya Tiga Bintang Abadi
Jl. Musi No. 8, Jakarta Pusat
Contact Person: shania sekar
Email: shania.sekar@ctbadental.com
No. Telp: 0818167126

Booth No. 50

PT. American Orthodontics Indonesia

Ruko Mezzanine B.07 Jl. Nginden Semolo No. 38-40 Nginden
Jangkungan Sukolilo, Kota Surabaya, Jawa Timur
Contact Person: Priyanto
Email: americanorthoindonesia@gmail.com
No. Telp: 081806731925

Booth No. 51

PT. Henli Jaya Mandiri

Jl. Alaydrus No. 76C RT 002 RW 002 Petojo Utara, Gambir, Jakarta Pusat
Contact Person: Suyudi
Email: yudi@henlijayadental.co.id
No. Telp: 08121026508

Booth No. 52

PT. Hexpharm Jaya Laboratories

Jl. Angsana Raya A3-1 Kel. Sukaresmi, Kec. Cikarang Selatan, Bekasi, Jawa Barat
Contact Person: yovita
Email: yovita.pratiwi@hexpharmjaya.com
No. Telp: 081288985129

Booth No. 53

PT. Haleon Indonesia Trading (Sensodyne)

Pondok Indah Office, Tower 5, Suite 1201, Lantai 12, Jl. Sultan Iskandar Muda, Kav. V-TA, D-2, Pondok Pinang, Kebayoran Lama, Kota Adm. Jakarta Selatan, DKI Jakarta, 12310
Contact Person: Agus Joko
Email: agus.j.haryanto@haleon.com
No. Telp: 08128335846

SECTION

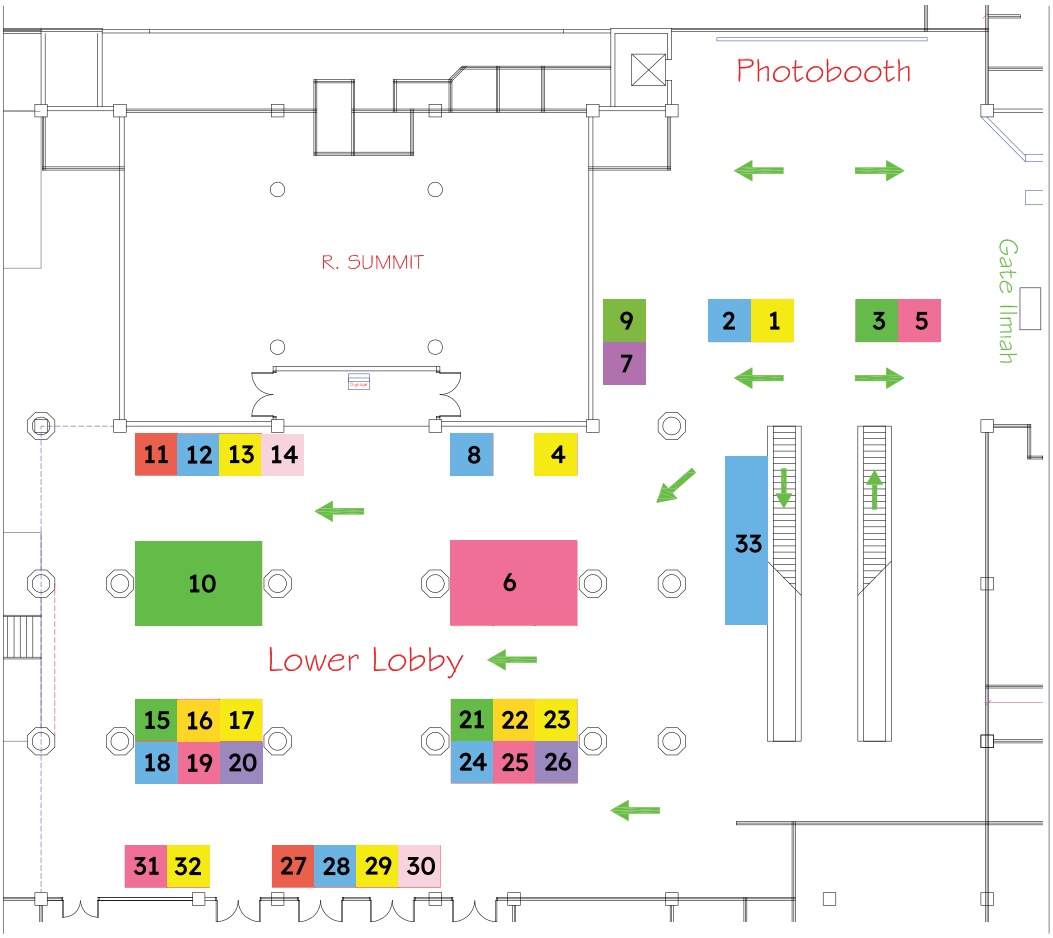
E2

UMKM EXHIBITION

FLOOR PLAN

Lower Lobby

UMKM EXHIBITION



NON DENTAL
EXHIBITION

Booth	Company
1	Messis
2	GEpro-id
3	Indress
4	Ria Jewellery
5	Rasyidin
6	Trustwear
7	Yasokhy
8	UI Store
9	Filladent
10	Artu Ready by Indah Veny Pepari Leather CV. Primarasa Izzani Budestore Fey Attire Koekis Keren
11	Ana Pearls
12	Riana Meilia
13	HS Silver
14	Indhe
15	Kultiva
16	Rafins

NON DENTAL
EXHIBITION

Booth	Company
17	Rostcas
18	Sanrah Food
19	Hariang Mitra Mandala & Ing Pawon
20	Mimi Tea & Oza Tea
21	Batik Ciwaringin
22	Batik Marunda
23	Boolao
24	Zuki Batik
25	Dwi Hadi
26	Batik Komar
27	Base Artisan
28	Krakakoa & Coklat CK
29	Beskabean
30	Kopi Boehoen
31	Sineng Boutique
32	BNI KC Universitas Indonesia
33	PT. Paragon Technology and Innovation

Booth No. 1

PT. Messis Nusa Raya (Kacamata Clic)
Jl. Tole Iskandar no. 37-40, Sukamaju, Cilodong
Contact Person: Yuli Arda
Email: cs.messis@gmail.com
No. Telp: 085218888442

Booth No. 2

GEpro-id
Jl. Blunyahrejo, TR II No. 974A, Karangwaru, Tegalrejo, Yogyakarta
Contact Person: Ratihana
Email: gepro.id@gmail.com
No. Telp: 085292955946

Booth No. 3

Indress
Jl. YRS 1A/12 RT08/RW09, Bintaro-Pesanggrahan, Jakarta Selatan
Contact Person: Lili Indreswari
Email: indress_coll@yahoo.co.id
No. Telp: 0816758808

Booth No. 4

Ria Jewellery
Jl. Cipinang Timur V RT/RW 001/003, Cipinang, Pulogadung, Jakarta Timur
Contact Person: Zetria Dharma
Email: zetria4@gmail.com
No. Telp: 0813010840736

Booth No. 5

Rasyidin
Puri Citra Kencana C.5 RT 07 RW 12, Rempoa, Ciputat Timur, Tangerang
Contact Person: Rasyidin
No. Telp: 081381222968

Booth No. 6

PT. Tri Usaha Sinar Timur (Trustwear)
Jalan Solo-Tawangmangu RT 003/RW 001, Blok KM7 No. 2, Triyagan, Mojolaban, Sukoharjo
Contact Person: Putri Kurniasih
Email: info@trustwearofficial.com
No.Telp: 08112840496

Booth No. 7

Yasokhy
Jl. Swadaya No 14B Jakarta Selatan
Contact Person: Florentina
Email: yasokhybsyflo12@gmail.com
No. Telp: 08121340400

Booth No. 9

Filladent
Ruko cempaka mas Blok i, no.18. Jakarta pusat
Contact Person: Ubaida Ahmad A
Email: Filladent.id@gmail.com
No. Telp: 085716150845

Booth No. 10

Artu Ready by Indah Veny
Gedung Sarinah, Lantai 2, Jl. M.H Thamrin, Jakarta Pusat
Contact Person: Indah Veny
No. Telp: 081511748054

Booth No. 10

Pepari Leather
Perumahan Kiara Residence Blok A2 No.18, Kelurahan Curug, Kecamatan Bogor Barat, Bogor 16113
Contact Person: Maya
No. Telp: 08111797933

Booth No. 10

CV. Primarasa Izzani
Blok I No.4, Perum Pelangi Jawaringan Sukamanah Rajeg, Tangerang, Banten
No. Telp: 087871496293
Email: izzaniprimarasa@gmail.com

Booth No. 10

Budestore
Jl. Percetakan Negara 10, Blok A No. 52, Jakarta Pusat
Contact Person: Tulis Setiyowati
No. Telp: 081383308301

Booth No. 10

Fey Attire
Jl Mardani Raya No 71, Johar Baru, Jakarta Pusat
Contact Person : Ellin Mahaya
No. Telp: 081546027619

Booth No. 10

Koekis Keren
Taman Kenari Blok C 1 No.1, Cimahpar, Bogor Utara, Kota Bogor
Contact Person: Clara Maureen
No. Telp: 087873047770

Booth No. 11

Ana Pearls

Booth No. 12

Riana Meilia

Booth No. 13

HS Silver

Booth No. 14

Indhe

Booth No. 15

Kultiva

Booth No. 16

Rostcas

Booth No. 17

Rafins

Booth No. 18

Sanrah Food

Booth No. 19

Hariang Mitra Mandala & Ing Pawon

Booth No. 20

Mimi Tea & Oza Tea

Booth No. 21

Batik Ciwaringin

Booth No. 22

Batik Marunda

Booth No. 23

Boolao

Booth No. 24

Zuki Batik

Booth No. 25

Dwi Hadi

Booth No. 26

Batik Komar

Booth No. 27

Base Artisan

Booth No. 28

Krakakoa & Coklat CK

Booth No. 29

Beskabean

Booth No. 30

Kopi Boehoen

Booth No. 31

Sineng Boutique
Jl. Salak Putih No. 54, RT 03/ RW 12 , Kel. Pakujaya, Kec. Serpong Utara, Tangerang Selatan
No Telp: 081510387347

Booth No. 32

BNI KC Universitas Indonesia
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PT. Paragon Technology and Innovation

Booth No. 33

Brand : Wardah
No HP & Nama PIC : +62 812-9685-1201 Ike
Alamat : Ulujami-Jaksel

Brand : Labore
No HP & Nama PIC : +62 858-9170-1755 Dije
Alamat : Ulujami-Jaksel

Brand : Biodef
No HP & Nama PIC : +62 882-9959-2608 Indah
Alamat : Ulujami-Jaksel

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