Stefen Koubi

Doctor Koubi graduated from the University of Marseille in 1998. He has been an Associate Professor in the university’s Restorative Department since 2008 and received his PhD there in 2011. For three years after his graduation he was resident at the University of Paris. He has a private practice in Marseille and a smile consultation office in Paris. Dr Koubi’s main interest is in the aesthetic and functional rehabilitation of worn dentition. He has lectured at many prestigious aesthetic academies on simple ways to achieve highly aesthetic dentistry, with his main focus the “teachability” of aesthetic dentistry. He has been a speaker at numerous aesthetic post-graduate university programs around the world. In 2012, students at the University of Marseille awarded him the Gold Molar title for best teacher, and best French speaker. In 2014 he was awarded the Silver Molar. Since 2012 he has been a member of the Style Italiano Group, as head of their indirect topics. In 2013 he founded L’Institut de la Facette, a private training centre focused on smile design for worn dentition and cosmetic rehabilitation. He is the author of many scientific articles and case reports on aesthetic dentistry.

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3-DAY HANDS-ON
31th October - 2nd November 2016
SYDNEY

SMILE DESIGN AND WORN DENTITION:
Recipes for repeatable and predictable
everyday dentistry

Stefan Koubi

www.dentaledglobal.com
INTRODUCTION

Style Italiano philosophy can be summarised in one sentence: “Everyday dentistry must be aesthetic, simple and guided to be popular.”

The aim of this program is to teach participants a unique approach to contemporary dentistry in diverse clinical situations. Three key areas will be covered: MINIMALLY INVASIVE DENTISTRY through prep, prepless, flapless surgery and microplastic surgery; GUIDED procedures to assist in achieving repeatable and predictable optimal outcomes; and the use of SIMPLE, everyday concepts to treat worn dentition.

DAY 01

CREATING A SMILE WITH WHICH CONCEPT: PREP, PREPLESS OR NO PREP?

Abstract

In the last 15 years, partially bonded restorations (laminate veneers) have become the most aesthetic, biological and biomechanical means of restoring dental defects. With the use of new materials we are now able to mimic natural teeth better than ever, but we also need to implement new techniques and concepts to achieve optimal results.

The aim of this program is to provide a simple way of working and thinking, which can be summed up in three key words: simple, teachable and repeatable. On day two of this course, laminate veneers will be presented as a versatile tool to solve cosmetic and functional problems (worn dentition). The topics covered will use the same philosophy (minimally invasive approaches), the same bonded materials (CAD/CAM materials, press materials), the same concept (visualisation, validation, navigation through the mock-up) and the same clinical procedure (prep design, temporisation, cementation).

PROGRAM

MORNING (Theory)

Laminate veneers

• Key factors to design a smile: analysis, aesthetic diagnosis, direct try-in
• Which materials to use for partially bonded restorations
• Visualisation and navigation with the mock-up
• Prep specificities for laminate veneers: too buccal, too palatal, diastema, black triangle and dyschromia
• Temporisation
• Cementation/individual dam/repeatable process

AFTERNOON (Hands-on session)

Prepping laminate veneers in a precise way

• How to use a mock-up for a precise and repeatable prep protocol
• How to make a mock-up
• How to control depth of cut
• Bur selection
• Material selection for the mock-up
• Specificities of the prep (too buccal, too palatal)
• Finishing steps
• Tips and tricks for impressions
• How to make your own silicone index for controlling your prep

Cementation of laminate veneers in a repeatable way

• How to place a rubber dam in 20 seconds
• Tips and tricks for isolation
• Preparation of the tooth and the bonding procedure
• Preparation of the laminate
• Finishing steps

DAY 02

A NEW PARADIGM FOR WORN DENTITION: THE FULL MOCK-UP CONCEPT

Abstract

Treating tooth wear has come a long way in the last two decades. Nevertheless, the treatments involved have still not been satisfactory for most patients, nor have they always achieved the expected clinical goals. New, revolutionary techniques have emerged to reconstruct full arches in a minimally invasive way, but their application requires proper training to achieve optimal results.

The purpose of this session is to teach a precise and reproducible technique for simplifying the treatment of worn dentition. A wax-up and mock-up is predominantly used as a guide for designing aesthetic preparations of anterior teeth. This technique can also be used on posterior occlusal surfaces, and will not only provide the exact new vertical dimension of the occlusion but will also allow the dentist to guide the occlusal preparation simultaneously with the buccal preparation.

The classical cavi-osity for a partially bonded restoration on worn posterior dentition will also be discussed. During the preparation of the occlusal surfaces of the posterior teeth, the marginal ridges must be preserved to reduce the biological cost and the mechanical stress that leads to fracture. A new type of thin and reduced restoration called a “table top” will also be discussed in this session.

PROGRAM

MORNING (Theory)

Worn dentition

• Worn dentition: an aesthetic, biological and functional challenge
• Clinical sequence for treatment planning
• The full mock-up concept: see, validate and prep!!!
• How to prep occlusal laminates
• Which materials for a functional restoration
• New design for cavities
• Bonding procedure

AFTERNOON (Hands-on session)

• The full mock up technique in worn dentition
• How to place a precise full mock-up on 1 arch
• Prep driven by functional mock-up in posterior area
• Prep driven by aesthetic mock-up in anterior area
• Functional laminate: prep for a table top
• Sandwich restoration in posterior area

DAY 03

PINK AND IMPLANTS IN THE AESTHETIC ZONE: GUIDED SURGERY DRIVEN BY THE AESTHETIC PROJECT

Abstract

Interdisciplinary dentistry is an everyday issue in the dental practice. The most important challenge is to know when and how to use interdisciplinary approaches. There are two types of situation we can be presented with: do we keep the tooth or not? If we decide to keep the tooth, orthodontics, plastic surgery, restorative procedures and prosthetics can be used. If we can’t keep the tooth, let’s go for an implant. These have improved a lot, especially in the anterior zone in terms of final aesthetic results, less morbidity, predictability of the case materials, and the new techniques and concepts have offered new solutions to our patients. Whether it be in the anterior zone or not, everything starts with the final expected design. All the procedures will be guided by the physical project, including prep design, connective tissue grafts, placement of the implant and digital planification. Advanced pink concepts where the pink part is created after the placement of the final restoration will be presented in this session. The latest material developments, and their selection according to aesthetic, functional and financial requirements, will also be discussed.

PROGRAM

Pink and implants in the aesthetic zone: Guided surgery driven by the aesthetic project

• Interdisciplinary approach (ortho, perio) in worn dentition
• The new challenge in the anterior zone in implantology
• Prosthetic planification driven by the ideal design
• Surgical strategy in basic/complex cases
• New implant design and the prosthetic component
• Prosthetic strategy for creating ideal proportion
• When and why to use orthodontics in worn dentition
• Plastic surgery in aesthetic treatments
• Recipes for designing a smile
• Recipes for specific clinical issues: dyschromia, disposition, single unit, worn dentition
• Precise and repeatable methods for managing simple and complex cases, following a guided protocol
• Recipes for cementation of laminate veneers, table tops, crowns
• Use of e.max materials for each clinical indication (choice of ingot, thickness required)
• How to jump into digital dentistry, from cosmetic to functional rehabilitation