

# CAPTEK™ PRESSED FOR SUCCESS by Keller

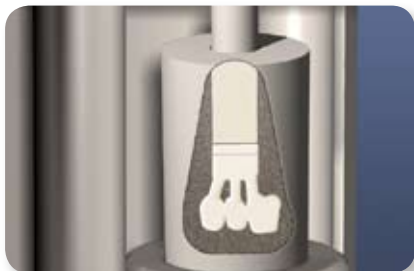
## What Are Press-to-Metal Ceramics and Why Do Dentists Care?

Pressed-to-metal ceramic technology produces predictable crowns by eliminating shrinkage, porosity, and the inconsistency of powder/liquid ceramic build-ups.

To understand both the process and benefits of “pressed ceramics” think first of waxing a full cast crown to ideal anatomy, occlusion, contour, contacts and margins. Invest the wax pattern. Burn it out. Cast it under high heat and pressure. Then, devest and finish the crown.



A. Waxed to ideal occlusion, contour, etc.



B. Burn out and press – no porosity.

If you waxed carefully, and managed the system, you produced what you waxed. Predictable fit, occlusion, contacts, and contours. Only minimal adjustments to the final product are necessary if the wax-up was accurate. Working with wax is easier than making corrections in the cast metal.

### Maintain Profitability Despite High Gold Costs

Gold prices recently hit a 25 year high and dentists saw an immediate increase in fees for many precious metal crowns. Captek users, however, have seen very modest price changes as a result of the turbulent market.

Captek \$129 per unit

### Captek + Pressed Technology = Success



- Exceptional internal fit
- Biocompatible High Gold Alloy
- No oxides – no black lines
- Bacteriostatic
- Superior strength
- Predictable Cost

Press-to-metal ceramics uses the same “lost wax” technique. Instead of using a brush to build-up porcelain powder on the metal coping to create the veneer, a wax-up is done directly to the metal coping (Fig A). The coping with wax is invested and the wax is burned out. The ring is placed into a “pressing” oven and a shaded ceramic pellet is melted to a honey consistency and “pressed” under high heat and pressure directly on-to the metal coping (Fig B).



Because the process produces crowns without porosity or shrinkage, additional porcelain corrections and add-ons are eliminated.

By combining Press-to technology with Captek, Keller technicians can now provide a crown that delivers exceptional value to you and your patient.

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*Illustrations and photo used with permission of Dentsply International.*



Consistent shade with “blended” translucency.



# Neurologist Predicts Increased Referrals to Dentistry

**Andrew Blumenfeld, M.D.** is a graduate of the University of Massachusetts Medical School, where he completed both a neurology residency and a neurodiagnostics fellowship. With over 10 years' experience in the use of Botulinum Toxin Type A, Dr. Blumenfeld is an internationally recognized authority on the utilization of Botulinum Toxin Type A for the treatment of headache and has significant experience as a researcher, speaker and national trainer. He was Chief of Service for the Department of neurology at Kaiser Permanente in San Diego, and is currently Director of The Headache Center of Southern California. Dr. Blumenfeld is board certified by the American Board of Psychiatry and Neurology.

Speaking recently at a TMD conference in San Diego, **Andrew Blumenfeld , M.D.** predicted that soon neurologists and internists will refer a significant number of patients to dentists trained in the use of an enhanced deprogrammer.

*Someday, when physicians understand the benefits of an enhanced deprogrammer, a considerable portion of their headache patients will be referred to a dentist educated in trigeminal hypersensitivity.*

Recent medical research has identified nocturnal trigeminal motor hyperactivity and the resultant noxious afferent input as a primary cause of severe headache (migraine) pain. According to Dr. Blumenfeld, a disclusion splint (such as an NTI-TSS) can interrupt that afferent input.

With the number of Americans now suffering from severe headaches estimated between 23 and 28 million, the potential exists for dentistry to play a significant role.

## Current headache drugs have limited benefits.

In the October issue of *Practical Neurology*, Dr. Blumenfeld wrote: "Conventional pharmacotherapies for migraine headache can have undesirable systemic side effects, and medications currently accepted for prophylactic treatment rarely have a better than 55 percent efficacy." When the high costs of these drugs are added to the mix, compliance becomes an issue for many and transformation to chronic daily headache occurs.

Many of these patients already visit a dentist regularly but never consider mentioning their condition. Instead, they suffer in silence, self medicating, or making frequent visits to physicians for relief.

Dr. Blumenfeld aims to heighten the awareness of both dentists and physicians to the potential for improved patient care with an alternative treatment.

## NTI: Not a Cure, but the First Option

After working with Jim Boyd, DDS (inventor of the NTI-TSS), for more than a year using the enhanced deprogrammer with migraine patients, Dr. Blumenfeld was convinced of the benefits.

*Primary headache is a disorder of the trigeminal nerve... We won't cure migraine or severe tension type headaches with a disclusion splint. We will significantly reduce the intensity of the trigeminal activity (sometimes to zero) and the trigeminal's tendency to trigger such attacks. . . Although an NTI may not be the only treatment, it is the first order of business.*

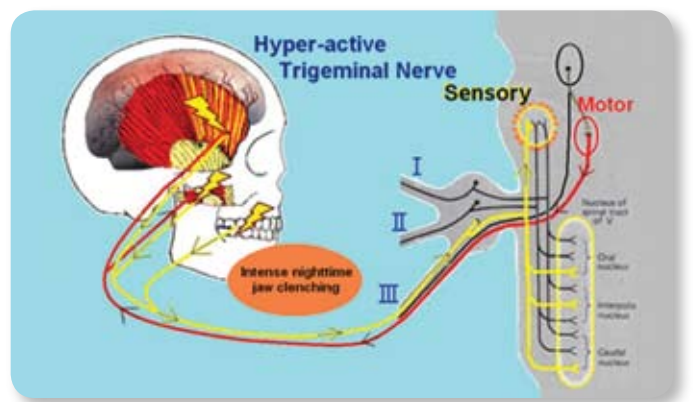


Illustration of Hyper-active Trigeminal Nerve (permission from Dr. Jim Boyd, DDS.)

You can learn more about using the NTI-TSS by visiting our website [www.kellerlab.com](http://www.kellerlab.com) or attending one of several lectures held throughout the United States in 2006.

## What do I send the lab for an NTI-TSS Plus™ ?

We have updated the records we recommend you include when sending an NTI-TSS Plus case.

### Upper and Lower PVS Impressions

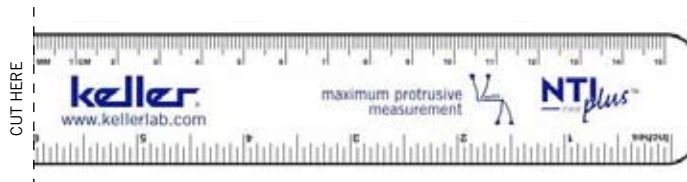
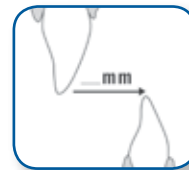
- To increase accuracy of final fit
- To ensure safe arrival from your office to ours

Recommended cost effective impression materials  
– Alginate™ from Kerr or Position™ Penta™ from 3M.

If you would like a Keller millimeter ruler, call the NTI-TSS Plus Team at (866) 535-5371 or email us at [keller@kellerlab.com](mailto:keller@kellerlab.com)

### Maximum Protrusive Measurement

Measure from the facial – incisal of the maxillary centrals to the incisal edge of the lowers. This will determine the proper length of the Discluding Element (DE) and decrease adjustments at seating. For best results cut the end of the ruler at zero.



## Upcoming Educational Opportunities for NTI-TSS

**ABC's of TMD's, NTI's and Occlusion**  
Diagnostic techniques of common disorders and their common sense therapy.

16 CE Credits

With Jim Boyd, DDS and Barry Glassman, DMD

**February 24-26, 2006**  
**San Diego Sheraton**  
**San Diego, CA**

### Migraine and TMD

Dental therapy for trigeminally mediated disorders.

7 CE Credits

With Jim Boyd, DDS and Andrew Blumenfeld, MD

**March 10, 2006 – San Francisco**  
**Ritz-Carlton**

**March 24, 2006 – Los Angeles**  
**Beverly Hills Hotel**

Log on to [www.kellerlab.com](http://www.kellerlab.com) or call 866-535-5371 for complete details.

## TransDenture:



**An Immediate Transition Denture in 2 Appointments**

Because all immediate dentures require subsequent relines or reproductions, we have developed a simple procedure to help you make an immediate transition denture in less chair time and at a lower cost.

**\$114** per arch

Price includes teeth. (Lab Choice).

### 1st Appointment: Pre-Extraction

1. Full arch models or fully extended PVS impressions
2. Vertical/centric bite record
3. Stick bite/with photo to communicate horizontal plane
4. Shade
5. If no anterior teeth are present provide both Alamerter and Papillameter measurements.

- 2nd appointment:**
1. Extractions
  2. Delivery

For more complete details including our step-by-step Denture RX, go to [www.kellerlab.com](http://www.kellerlab.com) and click on Resources – Rx forms or call Jane Olsen at 888-919-7577 ext. 4262.



# Valplast, A Plus in my Practice

*Dr. Rebecca Siscel, 7 years of Valplast experience*

Dr. Becky Siscel tried her first Valplast partial in 1998. A

patient with a broken metal framework, already once repaired, came in looking for an answer. After discussing the case with Mike Mohrhard, CDT at Keller, she decided to give Valplast a try. At this point, she says, "I just wanted a durable replacement for a disappointed patient."

Since that first Valplast, Dr. Siscel has steadily increased her use of Valplast every year. She delivered 32 Valplast cases in 2005.

*Every year I have gained more confidence in Valplast and now it is my first option for just about every removable partial denture.*

A 1987 UMKC graduate, Dr. Siscel operates 2 practices in the St. Louis metro area. One of those practices, purchased just 2 years ago, has given her more experience with partial and full dentures than she expected.

"I really like doing these cases. After an emphasis on cosmetic dentistry, veneers, crowns and composites in my original location, I enjoy the challenge of providing esthetic and functional removables."

By eliminating metal clasps Valplast helps to meet the esthetic challenge. "For years my patients expressed concerns about both the esthetics and the function of metal partials... they feared that metal clasps caused abutment tooth loss. Using Valplast tissue-borne partials, I was able to address both of these concerns."



*Valplast Flipper Partial*

Patients returning for check-ups report better comfort and greater satisfaction with their Valplast partials. "Once I have properly adjusted to accommodate the flexibility of the material,

patients remain very happy with these partials. And I've seen less tissue irritation and abutment tooth loss with Valplast."



Keller is a Certified Valplast Laboratory.

Dr. Siscel charges identical partial fees to patients regardless of the material used. "I really don't want my patient choosing a partial based on price. I present Valplast benefits and compare them to a metal case. Patients choose Valplast most of the time. I think they sense my confidence in this treatment option."

While maxillary Valplast cases have been highly predictable, Dr. Siscel says lower free-end saddles still present some challenges. "No different for me than delivering metal frameworks. These cases require more care and adjustment to deliver but the results are worth the effort."



*Valplast Nesbit Partial*

Her favorite indication for Valplast is the posterior unilateral or anterior "flipper" type partial. "I think every dentist should know this option exists for patients missing one or two teeth.

Valplast cases have been an excellent solution. When a bridge or an implant isn't indicated, or affordable, these partials have looked great and functioned comfortably. I can't imagine using anything else."

## Keller Locations

- (800) 325-3056 St. Louis, Missouri
- (800) 292-1894 Louisville, Kentucky
- (800) 325-3056 Indianapolis, Indiana
- (800) 821-3107 Kansas City, Missouri



By Shawn Creason  
Customer Relations Manager

When you ship multiple cases in one box to Keller, you save on shipping charges with our "Inbound Bundling" program.

Include 2 or more cases in one box (using one airbill) and we will charge the usual \$9 shipping charge on the first case. For every other case included in the same box, the shipping charge will be only \$1.00. You save \$8.00 shipping on every case that you send "bundled." The savings add up quickly when you send multiple cases per box. Please call me for details.

## Low Profile Implant Abutment Strengthens Overdentures

The "Locator" implant abutment for overdentures provides functional retention, durability and easy, inexpensive maintenance compared to other retention systems. But it is the low profile of the attachment that provides the significant advantage.

Implant overdentures are prone to fracture because patients have the ability to generate much higher compressive biting forces with dental



A. Nylon inserts for variable retention and easy replacement.

implants and retained bone. When bulky attachment systems reduce denture thickness, fractures of the denture base are often a reoccurring problem.

With a total height of 3.17 mm, the Locator Implant Attachment provides more room for denture base

strength. Compared to other common attachment systems or bar retainers, (Fig A) this allows for an additional 2-4 mm of acrylic over the attachment. The easy to replace resilient nylon "snaps" provide retention. (Fig B).

Based on these benefits Keller continues to recommend this attachment. More details are available at the website [www.zestanchors.com](http://www.zestanchors.com) or by calling your Keller technician.



B. Lowest Profile, 3.17 mm Locator.



### Did you know you can contact us for:

- Free Captek Patient Brochures
- Free Captek Preparation CD
- Free 3 Appointment Denture System Instructional CD



Give us a call or log on to [www.kellerlab.com](http://www.kellerlab.com)

## Gold Price Reaches 25 Year High

On January 9th gold soared to its highest level in 25 years. Despite this news Keller Gold prices remain relatively stable and patient demand remains strong. In fact, it seems that with the headline news, more patients recognize the value of gold and accept or request gold as a restorative material.

At Keller we offer 3 Type III yellow cast gold crowns:

**Type III 20% Gold \$110** (D 6792)

**Type III 50% Gold \$131** (D 6792)

**Type III 62% Gold \$147** (D 6790)

The above prices include Gold market up to \$600 per ounce.  
4 working days in lab.



*Would you like to receive this newsletter via email? Just email us at [keller@kellerlab.com](mailto:keller@kellerlab.com) with "Newsletter" and your name in the subject line and you're on the list.*



Keller Laboratories, Inc.  
160 Larkin Williams Industrial Court  
P.O. Box 260161  
St. Louis, MO 63026

[www.kellerlab.com](http://www.kellerlab.com)

**Return service requested**