President Message:

I bring you greetings from Ann Arbor and I am hopeful that all of you have survived a very long winter this year! I believe that there is much to be grateful for as we plan the coming year for the MSP. First, I am honored to serve the MSP as President and would like to acknowledge the leadership put forth by Dr. Jon Jenkins over this past year. He has helped bring about important progress for the Society during his years of service to the MSP. I will do my best to keep up the spirit of contributions of Jon and our other officers.

This past MSP meeting was well attended and one that was excellently organized by our program Chair and Research Forum Chairs, Drs. Rodrigo Neiva and Jason Cooke, respectively. Our 2008 program of having an array of speakers such as Mark Setter on practice management, Pam McClain on periodontal regeneration, and Terrence Griffin on soft tissue esthetics, provided a good variety of presentations for our broad membership. Further, we had a highly competitive graduate forum this year with many thanks to our Periodontal Program Directors in the Region. Our program for next year looks to continue to be of interest with our 2009 speakers of Drs. Marc Nevins, Daulton Keith, and Pat Allen. I am confident that they will not disappoint in sharing their knowledge.

As we look towards this year and 2009, I would like to thank the membership and Executive Committee for their strong leadership support of a very important initiative to our profession: the Education Action Campaign for the AAP. As many of you know, the MSP has contributed significantly to the efforts of the campaign, and has served as an example to encourage other societies to give to this important effort. In particular, John Kobs, Vice-Chair for the AAP Foundation Ambassador’s Program has been supportive of our efforts. John has become a recent addition to the AAP Foundation Board, as well as Vanchit John. Thus, our District is representing the Foundation Board well! Below, I provide you with information with thanks to Dr. Sharon Mellor for our membership on how each one of us can support the AAPF and how this support is crucial to all members of the MSP!
AAP Elections

Don’t forget to vote in the upcoming AAP election. You should receive your ballot on or about June 1 and have until July 1 to cast our vote.

Jim Hinrichs and Steven Blanchard candidates for a Director for the American Board of Periodontology.

Bill Sorensen completed the term of Steve Seibert as Trustee position, hence there needs to be an election to fill the trustee position for the full term. The candidates for this position are Eugene E. Altierie, Duluth, MN and William P. Sorensen, Ann Arbor, MI.

Many thanks to Nancy Newhouse, who is completing her second term as Trustee, for her years of service to the AAP. Charles Cobb and Stanley L. Wint are candidates to fill this position.

Nancy Newhouse is running for the position of Secretary/Treasurer against Richard Cutler and Pamela McClain.

We are very fortunate in District 4 to have an abundance of highly qualified people. Your vote is extremely important so please support the candidate of your choice. Vote online or send your ballot in early so it does not get buried on your desk!!

GENERAL MEETING SUPPORT

We want to express our thanks to the exhibitors who support the Midwest Society of Periodontology by participating in our annual meeting. We appreciate their support of our organization.

Ace Surgical Supply
Astra Tech, Inc.
BioHorizons Implant Systems, Inc.
Biomet 3i
Brassler USA
Colgate Oral Pharmaceuticals
Concise Vision
Curasan
DENTSPLY Tulsa Dental Specialties
G. Hartzell & Son
Innovative Implant Technology, LLC
Keystone Dental, Inc
Lifecore Biomedical, Inc.
Materialise
Meisinger
Millennium Dental Technologies
Neoss
Nobel Biocare
OMNI Preventive Care, A 3M ESPE Company
OraPharma
Osteohealth Co.
Piezosurgery, Inc.
Predictable Surgical Technologies (PST)
Salvin Dental Specialties, Inc.
Straumann USA
Sunstar Americas
Thommen Medical USA, L.L.C
Treloar & Heisel, Inc.
XCPT, Inc
Zimmer Dental

THANK YOU!

Reserve These Dates!
Midwest Society of Periodontology
52nd Annual Meeting
February 28-March 1, 2009
Short history of the AAPF supporting our specialty, including the MSP region

The AAP Foundation has a proven record of success in supporting the periodontal specialty. By 2000 the AAPF Foundation has raised more than $12 million in gifts and pledge commitments and is providing more than $525,000 annually to the periodontal community via scholarships, fellowships and grants. The Foundation keeps the specialty strong by offering an award portfolio that includes:

- Fellowships to reward and encourage outstanding young educators
- Fellowships to support advanced training
- Fellowships to encourage entry into academic careers
- Awards to encourage periodontal research
- Grants to bring outstanding periodontal lecturers to the entire dental professional team
- Scholarships to encourage postdoctoral achievement

Current Focus on Keeping the MSP Periodontist in Periodontology!

More than half of all periodontal educators are older than 50 and one in five is older than 60. Their potential replacements are burdened by staggering educational debt and are increasingly opting for private practice. With few joining the ranks of academia, the specialty could lose half of its educator workforce in the next 10 to 15 years. When that happens, who will educate general dentists about periodontology in the classroom? Who will perform the research that places periodontology at the forefront of oral health breakthroughs? Who will reinforce the scientific foundations of the specialty and impart them to students? And how does the specialty ensure a sufficient pool of periodontists to take over your practice when you are ready to retire?

With generous support from the AAP, the Foundation has taken up the challenge of bolstering the pipeline of educators. New initiatives include scholarships for students who must fulfill a teaching requirement, debt-relief fellowships for young periodontal educators to enable them to remain in academia, and fellowships to provide training to mature practitioners who wish to transition from private practice to full- or part-time teaching.

These programs are an important step in making academia an attractive and viable career path for periodontology’s best and brightest. Our goal is to ensure that our training institutions attract and retain the most gifted academicians so that future generations of periodontists may learn from and be inspired by them.

Why as an MSP Periodontist, your Support is Necessary

 Virtually all of the donations received by the Foundation are donor-restricted to existing scholarship and fellowship programs. The Foundation does not have unrestricted funds that may be used to address emerging issues. In recognition of this fact, 110 of your colleagues have identified themselves as Foundation Ambassadors and have volunteered to raise funds for the Education Action Campaign. When an Ambassador contacts you about the campaign, please consider that the future of the specialty is in your hands. This is the time for action. The specialty has a very narrow window of opportunity to create a pool of talented educators who can fill the gaps created by retirement and declining interest in academic careers. Currently, 42% of U.S. periodontists are donors to the AAP Foundation. In order to secure and promote the specialty’s future, our goal is to increase the percentage of periodontists who are regular investors in the Foundation. We welcome annual gifts, two- and five-year pledges, and bequests and other planned gifts. You may make your gift in honor of, or in memory of, a mentor or other special person in your life. The AAP Foundation is the only philanthropic organization created to preserve and promote your specialty. We thank you for your ongoing support.

For more information about the AAP Foundation’s case for support, you may visit the web site at http://www.perio.org/eap. There you will find the full case as well as the opportunity to give online. Otherwise, you may contact me by phone at (800) 282-4867 ext. 3256 or via e-mail at sharon@perio.org.

Please continue to correspond and support of our leaders in the MSP with dedicated roles in the AAP. We thank our district 4 representatives Greg Fauth, Bill Sorenson and Nancy Newhouse. From our recent District 4 Forum you will note the important leading efforts this group has done for our district and our specialty. I also urge you to support one of our own: Dr. Nancy Newhouse who is a candidate for Secretary of the AAP. Her track record of leadership in our district would bode well for the Academy!

If you have any issues or matters regarding ways I can better help advance the MSP, please do not hesitate to contact me (wgiannob@umich.edu) or one of our other officers.

Talk to you later this summer!

Will Giannobile
A NOVEL COMPREHENSIVE ASSAY DEMONSTRATES REDUCTIONS IN GINGIVAL CREVICULAR FLUID (GCF) CYTOKINES AND CHEMOKINES FOLLOWING INITIAL PERIODONTAL THERAPY

Dr. Daniel Thunell
University of Iowa, Iowa City, Iowa

Objective: Cytokines and chemokines play an important role in the pathogenesis of periodontal diseases. The objective of this study was to quantitatively assess the effect of initial periodontal therapy on GCF levels of a comprehensive panel of cytokines and chemokines*, including several novel mediators.

Materials and Methods: GCF fluid from six subjects with generalized advanced chronic periodontitis was collected prior to initial periodontal therapy. Four diseased (PD and CAL ≥5mm with BOP) and 2 healthy (PD and CAL ≤3mm, no BOP) sites were sampled in each subject. GCF and clinical parameters were reassessed at 6 – 8 weeks. GCF mediators were quantified using a multiplex antibody capture and detection platform. Statistical analyses were performed by fitting mixed effects linear models to the log transformed GCF volumes.

Results: GCF volumes were greater for all sites at initial examination compared to re-evaluation. 13 of the 16 detectable cytokine and chemokine amounts decreased significantly following initial therapy in diseased sites (p value range = <0.0001 – 0.04). This included the pro-inflammatory cytokines IL-1α, IL-1β, IL-6, and IL-12 (p40) and the chemokines, IL-8, RANTES, eotaxin, MCP-1 and MIP-1α. These changes were accompanied by a reduction in BOP, PD, and CAL. At healthy sites, only 3 of the 16 mediators were significantly altered following therapy.

Conclusion: This is the first study to our knowledge to comprehensively evaluate a complete spectrum of GCF mediators within the same sample. The results confirm that periodontal therapy effectively reduces pro-inflammatory cytokines; in addition, new findings include reductions in novel chemokines important in initiation of the inflammatory lesion.
RESEARCH FORUM ABSTRACTS

COMPARISON OF 5-YEAR SURVIVAL RATES BETWEEN TURNED AND ANODIZED TITANIUM IMPLANTS AMONG SMOKERS AND NON-SMOKERS

Dr. Ayman Balshe
Mayo Clinic, Rochester Minnesota

Materials and Methods: A retrospective chart review was conducted for two time periods, January 1, 1991 through December 31 1996 “turned titanium implants (Branemark System, Nobel Biocare, Yorba Linda, CA)” and January 1, 2001 through December 31 2005 “anodized titanium implants (TiUnite System, Nobel Biocare, Yorba Linda, CA)”, to include all implants placed and restored in one institution during that time frame. The data collected from each group includes implant placement date, patients’ age at the time of placement, gender, smoking status, location of implant placement, implants length and diameter, immediate vs. delayed placement, dated follow up appointments, and survival information.

Results: There were 593 patients who had received 2,182 turned titanium implants between 1991 and 1996 and 905 patients who had received 2,425 anodized titanium implants between 2001 and 2005. Data analysis revealed no significant differences in implant survival relative to smoking for anodized implants for any time period up to 5 years. In contrast, smoking was a risk factor for implant failure for all time periods when turned implants were used. Smoking had a negative effect on achievement of osseointegration and on maintenance of osseointegration with turned implants. Anatomic location of implants had no effect on implant survival for smokers or non-smokers when anodized implants were used while location did affect implant survival in smokers who received turned implants. Anatomic location did not affect implant survival in non-smokers who received turned implants.

Conclusions: Based upon this retrospective study of more than 4,600 implants the following conclusions were made: Smoking was identified as a risk factor (HR = 3.3) for implant failure among the turned implants only. Among the smokers who received turned implants, a correlation was found between failure rate and location of the implant placement. No correlation was found between the two variables among the smokers in the anodized implant group.
RESEARCH FORUM ABSTRACTS

HUMAN PERIODONTAL CLINICAL PHENOTYPES: IDENTIFICATION BASED ON GINGIVAL AND DENTAL CHARACTERISTICS

Huei-Ling Chang
Ohio State University, Columbus, Ohio

Objectives: It is well documented that periodontal phenotypes are associated with different susceptibility to recession and clinical treatment outcomes. The aim of this clinical investigation was to identify periodontal phenotypes in young adults, using gingival and dental characteristics.

Materials and Methods: Systemically and periodontally healthy young adults (18-36 years old) were recruited for the study. Clinical parameters were recorded from teeth #7 and #8, including the width of keratinized gingiva (WKG) and attached gingiva (WAG), and the thickness of gingiva (GTH), measured at midpoint of the labial attached gingiva and at the base of distal interdental papilla. Polyvinylsiloxane impressions of the teeth were used to fabricate stone casts, from which the crown width (CW) and crown length (CL) ratio (CW/CL) was recorded. A clustering analysis was first employed based on all standardized measurements from both teeth. K-means clustering algorithm was applied to all 12 standardized variables. Based on group labels reported from the clustering analysis, Fisher’s Linear Discriminates Analysis (LDA) was used to access the importance of variables in classifying subjects.

Results: Ninety-six (96) subjects (F:73, M:23) with an average age of 24 ± 5 years were included in the study. The use of the clustering algorithm resulted in the identification of three groups: Group A (n=29), Group B (n=54) and Group C (n=13). Group A had widest KG and AG, least GTH, and intermediate CW/CL; Group B had narrowest KG and AG, intermediate GTH, and lowest CW/CL; Group C had intermediate WKG and WAG, uppermost GTH, and highest CW/CL. LDA indicated that without GTH related variables, the rest provide 88.5% accurate classification.

Conclusions: Three periodontal phenotypes were identified in young adults by cluster analysis. The elimination of an invasive measure (GTH) does not greatly alter subject classification.
At the February meeting of the Midwest Society of Periodontology in Chicago the finalists were all presented plaques and $500 checks at the awards ceremony and reception. The Research Forum and awards ceremony are supported by a generous grant from Sunstar Americas, Inc.

Dr. Jason Cooke (left), Kimberly, WI, was Chairperson of the Research Forum. Dr. Daniel Thunell (right), University of Iowa is the first place winner. Dr.’s Ayman Balshe, Mayo Clinic and Dr. Huei-Ling Chang, Ohio State University were Honorable mention.

The Program Booklets were provided by AstraTech, Inc. and Osteohealth supplied the notebooks for the meeting. The Society appreciates their contribution.

The Midwest Society Wishes to Acknowledge

Sunstar Americas, Inc. is the underwriter of the Graduate Student Research Forum and the Awards Ceremony. Their support enables the Society to foster interest among graduate students in periodontics and provides a very enjoyable awards ceremony. Thank you Sunstar.

The Midwest Society of Periodontology Graduate Student Research Forum

First Place
Dr. Daniel Thunell - University of Iowa
“A Novel Comprehensive Assay Demonstrates Reductions in Gingival Crevicular Fluid (GCF) Cytokines and Chemokines following Initial Periodontal Therapy”

Honorable Mentions
Dr. Ayman Balshe - Mayo Clinic
“Comparison of 5-Year Survival Rates between Turned and Anodized Titanium Implants among Smokers and Non-Smokers ”

Dr. Huei-Ling Chang - Ohio State University
“Human Periodontal Clinical Phenotypes: Identification Based on Gingival and Dental Characteristics ”
New Members:

All members and officers express a hearty welcome to each new member and look forward to your participation in the Society

Dr. Dan Ang Kansas City MO
Dr. Doug Awde London, ON Canada
Dr. Julie Bacon Des Plaines IL
Dr. Jeffrey Burke West Allis WI
Dr. Renita Burrell Milwaukee WI
Dr. Leyvee Cabanilla South Lyon MI
Dr. Susan Cascino Naperville IL
Dr. Chun-Han Chou Medford OR
Dr. Yiu Chung Chow Ann Arbor MI
Dr. Tricia Crosby St. Charles IL
Dr. Jill Rogers Doan Chicago IL
Dr. Joseph D’Souza Davenport IA
Dr. Basel Hajjar Crown Point IN
Dr. Russell Hatfield Marion OH
Dr. Donald Janoff Chaipaign IL
Dr. Darnell Kaigler Detroit MI
Dr. Amar Katranji Ann Arbor MI

Dr. Nadia Kawar Westmont IL
Dr. Samer Khoury Dallas TX
Dr. Patricia Kinston Fergus Falls MN
Dr. Deena Kuempel Cedar Rapids IA
Dr. Charles Lau Madison WI
Dr. Jacob Lueder Grand Rapids MI
Dr. Shilpa Mailapur Aurora IL
Dr. Marmar Modarressi Colorado Springs CO
Dr. Maria Patino Chicago IL
Dr. Elizabeth Ramos Columbus OH
Dr. Robert Ryan Mt. Prospect IL
Dr. Thomas Statz West Des Moines IA
Dr. Jonathan Thomas Kansas City MO
Dr. Paula Weistroffer Iowa City IA
Dr. Jeffrey Wessel Chesapeake VA
Dr. Aaron Zeevi Oak Park IL