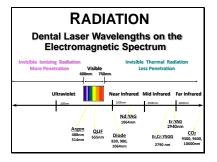
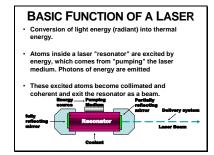


Slide 3







### **ACTIVE MEDIUM OF LASERS**

- Crystal Laser: Active medium is suspended in a transparent crystal. The host material is grown in or "doped" with atoms that will create the desired wavelength. Erbium, Neodynium, Holmium, etc.
- Gas Lasers: Have a hollow tube filled with the appropriate gas or mixture of gases. Carbon dioxide, argon.
- Liquid Dye Lasers: Have the dye dissolved in methanol or water solvent.
- Diode Laser: Semiconductor crystals. Pumped electronically.

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Slide 6

### **DELIVERY SYSTEMS**

- Fiberoptic
- Articulated Arm
- Hollow Tube

### MODES OF OPERATION

- Continuous wave mode
- · Gated pulse mode
- Free running pulse mode

Slide 8

### LASER TISSUE INTERACTION

- Absorption Dependent on laser wavelength, tissue pigment, composition and water content.
- Transmitted Energy travels w/no effect, dependent on tissue type and wavelength.
- Scattered Dependent on wave length absorption may obscure effect.
- Reflected Dependent on tissue type laser has no effect on tissue.

# Slide 9

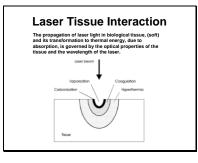
### **ABSORPTION CHARACTERISTICS**

- Laser light is absorbed in target tissue differently depending on the wavelength.
- This affects the way it ablates the tissue.
- Tissue elements that exhibit a high affinity for particular wavelengths are called chromophores.

### LASER TISSUE INTERACTION

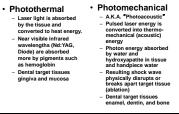
- Photomechanical High power density, short pulse duration.
- Photothermal Moderate power density, longer pulse duration.
- Photochemical Low power density,
- longest pulses.
- Photofluorescence Low power density,
- longest pulses. • Photobiomodulation (PBM) – Very low
- power density, low thermal input.

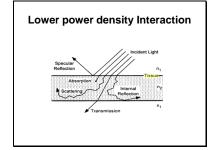
### Slide 11



# Slide 12

# LASER/TISSUE INTERACTIONS





Slide 14

### Variables which impact Laser Results

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- .
- •
- Results Wavelength Average power output, Peak power output Spot size (power density) Duration and interval of laser pulses Initiated Tips verses direct laser energy Tissue Relaxation thermal accumulation, pain sensation Rate of motion often overlooked –but critical Color of Tissue, water content, pigment, (composition) Cooling, via air or water
- •
- .

# Slide 15

Photothermal Effect of Laser on Tissue	
Tissue Temperature(°C)	Observed Effect
• 50 •	Bacterial inactivation, PBM
• 60 •	Protein denaturation, coagulation
• 100-150 •	Vaporization, ablation
• 200 •	Carbonization

# LASER CLASSIFICATIONS

- Class 1: Self contained (CD ROM, laser printer).
- Class 2: Low powered visible light (laser pointers, UPC scanners).
- Class 3: Requires special training (argon curing lasers, cold/soft lasers).
- Class 4: Potentially hazardous, specific
- safety measures (dental & medical lasers).

# Slide 17

# SOFT TISSUE LASERPROCEDURES PERFORMED BY:DentistsDental Hygienist• FrenectomyLaser Bacterial<br/>Reduction• Fibrotomy• Laser Bacterial<br/>Reduction• Gingival<br/>Recontouring• De-epithelialization<br/>dentinal sensitivity• Gingival Troughing• Apthous<br/>Ulcers/Herpetic<br/>lesions

Slide 18

# PERIODONTAL (HYGIENE) APPLICATIONS

- Bacterial Decontamination
- Elimination of diseased epithelial lining
- Biostimulation (PBM)

### LASER HYGIENE PROTOCOL

- Review health history
- Patient interview
- Probe and observe tissue
- Laser Bacterial Reduction
- (LBR)

# Slide 20

# LASER BACTERIAL REDUCTION

- · Set the laser at an average power of
- .50-.75 watts is being delivered.
- Before turning the power on insert fiber 1mm into the sulcus.
- Direct fiber towards tissue, away from the tooth.
- Lase approximately 7-10 seconds per tooth surface.
- Uninitiated fiber

# Slide 21

### LASER ASSISTED PERIODONTAL THERAPY

- Anesthetize the area to be treated (not because of laser, but because of scaling!)
- Full mouth Laser Bacterial Reduction (NON-INITIATED TIP)
- Mechanically scale hard deposits from the teeth (ultrasonic/hand scale)
- De-epithelialize periodontal pockets (INITIATED TIP) 1mm from base of pocket
- Review Post operative instructions and home
- care

# **BIOSTIMULATION** (Low Level Laser Stimulation)

- Laser energy stimulates local blood
- flow, macrophages, fibroblasts, etc.
- Reduces pain receptor mechanisms.
- Used in TMJ, post-op surgery, pulpal inflammation, dentin hypersensitivity, dental abscess, etc.

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# **PHOTOMECHANICAL TISSUE** INTERACTION

 Laser energy is absorbed by the atomized water particles creating a microexplosion or micropropulsion of the water molecules which is the photomechanical cutting force on the target tissue.

# Slide 24

### HARD TISSUE LASER

- Erbium crystal.
  Water spray cutting technology.
  Hard and soft tissue applications.
  Endodontic applications.
  Periodontal applications.
  Surgical applications.
  Contract mades

- Contact/noncontact modes. Precision cuts with no dentinal smear layer.
- Crystalline structure preserved. Many procedures can be performed with little or no anesthetic.

### LASERS IN ENDODONTICS (HISTORICAL)

- Both near-infrared and mid-infrared wavelengths used.
- Initial application was for canal
- decontamination.
- Mid-infrared wavelengths receive FDA approval for cleansing and shaping the canal.
- Results showed the irradiated dentin was clean and debrided but serious secondary effects were also seen primarily in thermal damage to the canal.

Slide 26

# LASER ACTIVATED IRRIGATION

- LAI is an endodontic method using laser energy at sub-ablative power levels to chemically clean and debride the root canal system (Laser Activated Irrigation).
- LAI harnesses the power of the Er:YAG laser to create a photoacoustic shock wave.
- Research is showing that the net result within the canals is a near 100% bacterial kill rate.

Slide 27

# L.A.I. ENDODONTICS



# LASER PERIODONTAL THERAPY

- Laser surgical periodontal pocket reduction procedure involving multiple wavelengths, Er:YAG and Nd:YAG.
- These unique wavelengths produce optimal pocket elimination with bone and attachment regeneration.
- The result is a healthy periodontal environment.

Slide 29

### LASER PERIODONTAL THERAPY (LASER APPLICATIONS)

- Nd:YAG Diseased epithelial lining
- removal • Erbium - Calculus removal
- Erbium Biofilm destruction (PIPS) & root
- surface decontamination
- Nd:YAG Clot formation, biostimulation

Slide 30

# LASER PERI-IMPLANTITIS

- Nd:YAG is effective at removal of the granulation tissue and will decontaminate the implant threads.
- Er:YAG will debride calculus off implant surfaces safely (with minimal temp. changes) and remove biofilm as well.

### LASER SAFETY (HAZARDS)

- Ocular: Retinal or corneal burn (N.O.H.D.).
- Tissue: Thermal photodisruption.
- Environmental: Airborne plume.
- Combustion: Flammable materials.

# Slide 32

# LASER SAFETY (Control Measures)

- Laser safety officer.
- Eye protection.
- Control of airborne contaminants.
- Workspace controlled area.
- Laser regulatory agencies

# Slide 33

### CHART DOCUMENTATION (SPECIFIC TO LASER USE)

- Patient use of safety glasses.
- Wavelength (specific to <u>your</u> laser)
- Watts (what energy setting?)
- Pulse mode (continuous or pulsed)
- Areas treated
- Tip (initiated vs. uninitiated)

### Advantages of Owning a Laser

- More comfortable in-chair experience for your patients Reduces the anxiety and fear of dentistry Fewer shots, less anesthesia Minimal or no bleeding in most cases Less post operative swelling faster healing Reduced chance for post operative infection More precise and selective issue reduction More comfortable alternative for children and phobic patients Minima hale incompanience discontext for calinate and •
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- . Minimal pain, inconvenience, discomfort for patients and staff
- . More procedures per visit -less appointments for the patient!

# Slide 35

### Advantages of Owning a Laser

- Practices focused on delivering the very best care to their patients
- Less invasive alternatives to traditional treatment modalities, i.e. drill, scalpel, needle
- Interested in creating a exciting, energizing environment in the office
- Wanting to reduce stress in their practice for themselves, patients, and their staff
- Interested in efficiently growing practice revenue
- Searching for a more satisfying work experience