Paradox: (1) a seemingly contradictory statement that may nonetheless be true. (2) a person or situations having contradictory aspects. (3) conflicting with expectation.

Between the dental manufactures, dental schools, dentists, and dental lab’s there is a complete absence of communication.

That certainly applies to the subject of occlusion. Recently I received a program of events and clinics from a major convention. I counted the number of subjects dedicated to either TMJ or occlusion for the three days. I counted five. On occlusion the count was zero; on dentures – one! Is there no interest? The answer is – yes; or at least very little.

I present full denture courses throughout the United States and Canada. One of my topics is occlusion. Whenever I take a cross section accounting of who is in the room, I quite often get a high number of denture department managers, lab owners and a sprinkling of ambitious “wanna be’s.” Once in a while, I find a dentist or a school educator present. I find the interest very high
In 1935, my father Mario Pozzi was operating a silversmith and goldsmith laboratory in Florence, Italy. A group of dentists who were friends of the gold and silver shots supplier for my father's lab asked him to look into making stainless steel crown shells for permanent obturation like Krupp was making in Germany. My father asked for quantity and when the number was right, he got motivated. He thought it would be easy to work with stainless steel like dealing with gold and silver but he discovered otherwise. He realized that to make the crown shells he had to move to a larger location to accommodate all the heavy duty stamping machineries, ovens, special sinks, heavy duty rollers, large tumblers, special storage for acids, saw dust and hemp material. He had to have special hoods and fans when they had to treat the stainless steel shells with acid. His trademark was a lion head (Leone).

After World War II, he became the “King of Stainless Steel Crown Shells” for the Mediterranean countries. Merchants from France, Spain, Turkey, Syria, Greece, Albania, Libya and many other European and North Africa countries would come and buy his Pozzi crown shells. He made them in different thickness and shapes, he was making Mellot to use for making dies to mold the shells. He also started making aluminum crowns for temporary use. He would make molar, bicuspid, central, lateral, canine crown shells in different sizes and different contouring. He then developed many products that are still being used today.

Following in the tradition of my father, I have continued to provide dentistry with a line of Super Crowns (Pozzi Style 2000) that are used by laboratories and doctors everywhere.

Present day, Pozzi Stainless Steel Crowns Style 2000

The stainless steel crown line is manufactured to meet the needs of all facets of dentistry. The posterior molar crowns are designed with a shallow occlusal anatomy allowing for a healthier tooth structure after tooth reduction. The shallow occlusal cusps permit complete compatibility with opposing teeth and reduced cuspal interference during normal mastication. The crowns are parallel on the mesial and distal walls. Unlike bell shaped crowns, these crowns will not rock or cause separation when two or more adjoining crowns are used. We have made these crowns with a thickness that prevents occlusal wear-through that sometimes occurs with the use of thinner crowns. Unlike some of the other crowns made with thinner and less durable materials, our crowns may be welded with ease.

These are the crowns you want for making semi-permanent restoration, space maintainers, or for Herbst appliances. Through our own research, we have determined these crowns to be of the ideal length; short enough to eliminate excess crown trimming, and long enough to provide optimum length and contour.

To make our line complete to the user, we offer first and second primary molars, first and second permanent molars and first and second bicuspids. Pozzi Style 2000 crowns are a match for Unitek® crowns. The Pozzi® Crown numbers and sizes are the same as Unitek®. A very attractive price is offered for this line.

Unitek® is not a trademark of American Tooth Industries.
Description of Stainless Steel Crown Type 2000 and the Cutting Tools

Description of Pozzi Style 2000 Molars and Bicuspids

First Primary Molar Crown
Kit 72 pcs. 7 sizes
UR UL LR LL
Group/Item # 040-40-0022

Second Primary Molar Crown Kit
72 pcs. 7 sizes
UR UL LR LL
Group/Item # 040-40-0023

First Permanent Molar Crown
72 pcs. 7 sizes
UR UL LR LL
Group/Item # 040-40-0024

Second Permanent Molar Crown Kit
72 pcs. 7 sizes
UR UL LR LL
Group/Item # 040-40-0025

First Permanent Bicuspid Crown Kit
72 pcs. 6 sizes
UR UL LR LL
Group/Item # 040-40-0020

Second Permanent Bicuspid Crown Kit
72 pcs. 6 sizes
UR UL LR LL
Group/Item # 040-40-0021

Description of Stainless Steel Crown Cutting Tools

Small Straight Scissors
Used for trimming anterior crowns
Group/Item # 040-40-0028

Regular Crown Crimping Plier
This is the standard in the industry for all posterior crowns.
Group/Item # 040-40-0030

Small Crown Crimping Plier
This tool is handy for anterior crowns and smaller sizes in the primary molars.
Group/Item # 040-40-0031

Crown Contouring Plier
For adding contour to the crown for a better fit.
Group/Item # 040-40-0032

Tube Crimping Plier
Used for tube crimping
Group/Item # 040-40-0033

Each Pozzi Style 2000 Stainless Steel Crown
can be sold in a kit, or in a package of 5 pieces of one size. See page 47 of the ATI catalog or go to our web site at www.americantooth.com

Visit American Tooth Industries website at www.americantooth.com
once I expose them to the problems and how simply they can be solved.

When I talk to groups of doctors and approach the problems chairside and tell them how they can solve them quickly, the response is great!

Why is the entire profession, educators and laboratories, passing over such an intriguing subject? Why should it be intriguing? MONEY! If a doctor only knew how fast he can achieve comfort and function, he would attend any course anywhere. If a dental lab could be certain that their products would be more functional and create less chair time, then they too, would clamor for lecture time.

Is there really an answer to this rather utopian concept? Well yes and no. Now let us examine this more carefully.

If we think about why this subject is so complicated, we can really become frustrated. I'm alluding to: materials used, processing, remount procedure, type of posterior teeth selected, records, compression accuracy, patient health and skill of the set up person. Quite often, I find a laboratory adding a new processing system. Some are very expensive. In turn, they want to receive a dollar return on their investment. They then amortize the cost to the doctors to be upgraded. In turn, the doctor expects a superior fit, so he, too, can justify his cost. Many times, he stops ordering the extra processing, and the lab begins to see reduction of sales in this new expense item. They then amortize the cost to the doctors to be upgraded when they go out of the lab. Now, let's examine the problem more closely.

Why are we always trying to sell Utopia? One new thing will trigger a doctor to think – “Wow – This is it! If I prescribe this new “widget” process all of my fits will be great and I will have fewer headaches.” Don't you see that the big picture is to offer all services on a higher plane? Group it all together and find that not only will you keep your present accounts, but your sales acquired from gaining new accounts will add more profits to the department.

For this “superior” denture service, do you expect to see your material cost rise? Yes – but very little. Labor? Only if you must assign a special person to process cases.

The major decision is in the direction of occlusion. At this juncture, you are asking yourself, “What's this guy saying? My cases are balanced when they go out of the lab.” Now, let's examine the problem more closely.

“ROOTS”? That’s the problem! Full dentures don't have roots! What has that go to do with the occlusion problem? Everything! You see, back in the old days, dentists copied the shape of teeth when trying to make teeth for dentures. Ivory, wood, bone – whatever was carved, (porcelain only came into play during the last century). Dr. Gysi developed a semblance of natural teeth in an articulated designed posterior tooth. He found that the average condulor slope was 33˚. Thus, the first major break-through was a porcelain tooth with an average of (33˚) from first bicuspid to second molar. That study was so impressive that a major tooth company began to manufacture the tooth along with an articulator. Before long, every dental school began to lecture students on this profound concept. It was very scientific and God knows we are very scientific people. The students were taking a mush-bite in beeswax but putting the case on a Gysi articulator using 33˚ teeth! Now I ask you, what’s wrong with this scenario?

The answer then is still the answer today. Balance (or B.U.L.L.): buccal of the upper and lingual of the lower is OK but – dear readers – the poor patient has a profound problem. He only has the opposing surfaces with which to chew and swallow. I would say – one big tooth up against a big tooth down. Does he need articulation (without roots) to balance while he’s trying to eat? No, he does not. Does a patient occlude by contact while chewing? No. Does a patient contact (fractionally) while swallowing? Yes. (The only exception is tongue thrusting.) So why don’t we calm down and admit to ourselves that we have been caught up in a scientific delusion. “Bolus in - Balance out”!

My background involved me in gnathology. I have studied under the main disciples of Dr. B. B. McCullum, Stuart, Moore, Swepton, Patton, Grainger, Dickson, and Peter K. Thomas. While operating my laboratory, I worked for a great number of dentists who practiced restorative dentistry by way of gnathology. They used face bows, pantographs, intra-oral tracers, extra-oral tracers, and every conceivable articulator on earth. But what these men did in restorative work that they didn’t do with their removable practice was to try to obtain B.U.L.L."

The majority selected linear occlusion as their choice. This later developed into a modification called lingualized occlusion. To this day, I feel that it’s the occlusal direction of choice.

Let’s examine this approach more closely. If I place two bases on the opposing ridges without teeth on...
them and the patient didn’t occlude, what would happen to the ridges? The answer is – nothing! There would be no resorption.

So, what does this tell us? Only by contact does something happen. Now, if a 1st molar has approximately 18 contact points, then he popped the Quiz. He asked – Which set of “before and afters” of the dentures, including color, tissue and ridge preservation. Then he popped the Quiz. He asked – Which set of slides did he take 16 years ago or last week? They couldn’t answer. They seemed identical! Then he gave them the reason why the ridge had been presented so beautifully. He used linear (lingualized) occlusion. Fantastic! If the patient looks good, is able to masticate properly and maintains good health, that is the name of the game.

Basically, there are four different types of occlusal schemes: Anatomical (and Modifications i.e. 33˚ and 20˚), Flat plane, lingualized, and linear. They all have good and bad features. If you glean away the minor features, what becomes foremost is – anatomical teeth look better than the others. Now, we must ask ourselves, is that my priority above all else? If it is, then you do not need to read further. On the other hand, if you sincerely desire to reach a satisfactory compromise, you must begin to explore ways to achieve it.

Let’s first take a look at flat plane teeth. Do I like them? No. The reason is twofold. They don’t particularly look good and they require an articulation maneuver not conducive to preserving the ridge. You actually have two flat planes opposing each other, of which the upper must be one half tooth over-jet to the lower. Not favorable.

Let’s get to the main players in this discussion – linear & lingualized teeth. First lingualized is a coined word that best attempts to cover a multitude of meanings. Every tooth manufacturer advertises their product as the best, but few attempt to educate. The anterior teeth are the leading profit centers and they hope to pull you along with a vast array of posteriors. …nothing wrong here. It’s just the nature of things.

To lingualize, you must tilt the buccal of the upper cusp 5 degrees off of the plane. This, in turn, will create the lingual cusps as a biting edge into the center culsi of the lower.

Now, here’s the rub. Do you incorporate curve of spee and curve of Wilson? If the manufacturer designs the teeth to compensate for them, then you have little choice. I have found, however, that a patient can chew the best without them. In other words, the simpler the scheme, the better they function. A must is to main-
tain the plane of occlusion. It must be from the retro-molar pad to the incisal edge of the maxillary anteriors. A flat plane template will do the job.

I've examined and worked with most of the teeth sold today. All have good features. Some better than others. With the advent of hardened plastic, I find no reason to prefer one over another. All have good to excellent qualities. Popular combinations are: 33˚ upper vs. 10˚ lower; 10˚ upper vs. 0˚ lower (senior – poor muscle tonus); 33˚ upper vs. 33˚ lower. A favorite of mine is to use a block (1 x 4) on each side. They are hard to find but a time saver.

Another occlusal design that has held up for over 40 years is Linear. The term means line, one blade, one surface, one direction, and one dimension. Its simplicity is the secret to its many years of success. It was designed by Dr. John Frush and Mr. Jack Goddard. It is carded in 1 x 16's only. They make a block or singles. The design consists of a flat surface on the upper and a single blade on the lower. As you can see, it can be very stable in any eccentric movement as well as in centric. As the denture settles, the doctor should do all of the adjusting on the bladed lower. It is the most efficient because of its cutting ability.

As in a ball mill or any commercial crushing, the proximity of the crushing surface determines the fineness of the separate particles. For instance, in the ball mill where gypsum is crushed by stainless steel balls, it is interesting to note that in the finest of particles, the ball never quite touches!

Patients and dentists have been aware of the limitations of artificial teeth for a long time. In 1895, G.V. Black invented a gnathodynamometer to measure a wide range of chewing forces for various types of food. These forces varied from 5 to 175 pounds. Black found that denture patients used chewing forces of only 20 to 30 pounds because of pain or fear of pain. It is not surprising that Manley and Soman conducted chewing tests and found that artificial dentures were only one sixth as efficient as natural teeth.

A myth or a fact: Natural teeth have 500 psi crushing capability while dentures have only 25 to 50 psi only.

The difference in efficiency between natural and artificial teeth is obvious. Natural teeth have crowns, which are supported by roots, periodontal ligaments, and bony sockets. Artificial teeth are supported by soft thin layer of oral mucosa that rests on a bony ridge, which cannot provide the sturdy support available to be natural teeth. Because of this difference, it is illogical to use the natural tooth forms for denture teeth. Artificial dentures are only one sixth as efficient as natural teeth.

Conclusion: In order to make a decision of changing your accounts over to a superior technique what do you do? The answer is too obvious; start next Monday by simply “doing it”. Some laboratories have included a short note with each case stating that by popular national preference, your case will now be articulated with lingualized or linear occlusion. Note: Please do a majority of your adjusting on the lower.

I have personally encouraged many, many lab’s to change. They did and, guess what, everything always went well. Now, you have an edge on competition. Keep the edge. What better way do you have to show your ability and skills? Help your accounts deliver a better product. I can assure you the rewards are great!

Denture Seminars U.S.A.
Contact by phone: (817) 738-7242
Print date: 4/21/2005

Now Available! www.americantooth.com
Denture Mart is a quarterly catalog with outstanding specials and huge savings for all of your denture needs. To be sure you receive a copy call 800-628-1437
The Schreinemaker Edentulous Impression Trays have gained reputation as the No. 1 impression tray in the prosthodontic field by dentists from countries all over the world. Now is sold in the U.S.A. endorsed by Pozzi®.

The black colored autoclavable Border-Lock® trays are reusable acrylic impression trays. The name Border-Lock® refers to the patented retention system. Special horizontal slits along the border of the tray provide an excellent locking mechanism for the impression material. The tray is made from Ryton, Polyphenylene Sulphide (PPS). This is a thermoplastic material with high dimensional stability at elevated temperatures. The rigidity of the Border-lock® tray has been scientifically tested and proven suitable for making precision impressions. A characteristic of the autoclavable border-lock trays is that they have a “metal sound”.

The border-lock dentulous impression trays have been designed specifically for both the monophase and sandwich impression techniques. In the monophase impression technique, the tray is filled with one impression material. The sandwich impression technique, the tray is filled with two impression materials of different viscosities, which are used simultaneously when making an impression. Impression materials that can be used in the trays are materials like alginites, silicones and polyether.

Tray selection of the edentulous for the lower arch: measure intraorally the distance between the retromolar pads, using a caliper. The caliper is then placed on the template to identify the proper size of tray to use. The upper arch: measure the greatest distance between the buccal faces of the alveolar ridge with the caliper. Place the caliper on the measuring template to identify the proper size of tray to use.

If activation and the removal of the impression tray using the pressure technique occur correctly, it is not necessary to use a adhesive with elastomers or polyether, in combination with the impression trays. For certain particular hard impression case, the specialist may select the adhesive suggested by the impression material manufacturer.

Disinfect in accordance with the instructions provided by the producer of the impression material used. The black color “metal sound” can withstand a maximum heat of up to 600 degrees Fahrenheit, and are suitable for sterilization in an autoclave.

5 Maxillary and 5 Mandibular trays designed for perfect fit to record the exact edentulous shape (upper and lower).
Imperial®
Teen & Young Adult Shades

Bleached Shades Are Ready to be Shipped

We have extended our Age Shade range of the Imperial teeth line to include this excellent product: the Imperial Teen and Young Adult Shade guide pictured on the right. The shades are as follows: 17 Teen White, 18 Pearl, 19 Smile, and 21 Young.

Laboratories can market the Imperial Teen and Young Adult Shade guide as is or we can personalize / customize this shade guide and create a very unique marketing message.

For more information please call and ask to speak to your representative or to inquire about your nearest dealer at (805) 487-9868 or toll free at (800) 628-1437.

Group/Item # 083-50-0102TS Teen & Young Adult Anterior 1x6
# 083-50-0202TS Teen & Young Adult Anterior 1x8
# 084-50-0301TS Teen & Young Adult Shades 1x28
# 084-51-0425TS Shade Guide with Kroma Tab

Slide™ “Revolutionary System” Low Friction Ligature Pads

Leone’s Slide™ Ligature pads are shaped to allow better sliding mechanics, faster tooth movement, and lower friction. This polyurethane ligature pad is bulbous by design to help protect the soft tissues from impingement.

The Slide ligature pads are available in the following kit configurations:

1. Multicolored Kit - Small (K6251-03), Medium (K6252-93), and Large (K6253-93). Each kit contains: 72 ligature pads per color (blue, yellow, green, white, red, and black) 432 pads per kit.

2. Multisized Kit - Ice (K6220-93) and Silver (K6260-93). Each kit contains: 144 small ligature pads, 216 medium ligature pads and 72 large ligature pads, 432 pads per kit.

Very Attractive Quantities and Discounts are Available.

NOTICE

The current General Catalog and Retail Pricing for American Tooth Industries, the current Catalog for Leone and LeoneAmerica Products and the current Price List (#2/LEO)* for the Leone/LeoneAmerica Orthodontics Products are featured at:

www.americantooth.com

* for USA, Canada, Puerto Rico and all other countries
European Dental and Laboratory Products with a Difference

ALGINMAX

120 HOURS PLUS CASTING

HIGH PRECISION ALGINATE FOR IMPRESSIONS WITH CHROMATIC PHASE INDICATOR

Thirty years ago we were the first to introduce a chromatic alginate to the United States and now in our European facility, we are manufacturing an alginate designed for dentures, crowns and bridges and orthodontics, with these unique features:

• Dimensional Stability - more than 120 hours (After washing, rinsing and removing excess water by shaking, impression must be placed in a plastic bag.)

• Patients like the pleasant vanilla scent which has a neutral taste.

• Chromatic Phases:
  - Violet (Mixing - approximately 35 seconds)
  - Rose (Packing/Working - approximately 40 seconds)
  - Light Blue (Setting - approximately 45 seconds)
  (The impression is complete in just about 2 minutes)

• Final impression is light blue for easier reading
• Lead and Cadmium free
• Very low dust
• Bio-compatible
• Meets ISO 1563 and ADA 18
• Easy removal - High Tear Strength
• Four pound package includes: 4-one lb. bags and 2 measuring cups

Ormalab

These polysiloxane based, condensation curing materials were designed exclusively for extra-oral use in the dental laboratory. Ormalab 95 is ideal for matrices for fixed and total prosthesis, duplications, prosthesis repair, and matrices for temporary crowns and bridges. Ormalab 75 is intended for matrices for fixed and total prosthesis, prosthesis repair, and matrices for temporary crowns and bridges.

GROUP/ITEM # DESCRIPTION
073-M7510 Ormalab 75 - 5 kg.
073-M7520 Ormalab 75 - 5 kg. + 2 Ormactivator Catalyst (Gel) 60 ml
073-M7590 Ormalab Activator (paste)
073-M9510 Ormalab 95 - 5 kg.
073-M9520 Ormalab 95 - 5 kg. Ormalab 95 - 5 kg + 2 Ormactivator Catalyst (Gel) 60 ml
073-M7500 Ormalab 75 - 1600 g.
073-M9500 Ormalab 95 - 1600 g.

Trade Show Calendar

Following are some of the Trade Shows that we’ll be attending in the 2005-2006 year. Please stop by and see us so that we can show you the exciting new products that we offer and the sale promotion available.

2005-2006

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
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<tbody>
<tr>
<td>Santa Barbara Ventura County Dental Society</td>
<td>September 16, 2005</td>
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<td>American Dental Association</td>
<td>October 6-9, 2005</td>
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<td>American Academy of Implant Dentistry</td>
<td>October 19-23, 2005</td>
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<tr>
<td>American College of Prosthodontists</td>
<td>October 26-29, 2005</td>
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<tr>
<td>Greater New York Dental Meeting</td>
<td>November 27-30, 2005</td>
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<td>Rocky Mountain Dental Convention</td>
<td>January 19-21, 2006</td>
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<td>Yankee Dental Congress</td>
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<td>2006 Chicago DTA Preview Show</td>
<td>February 23, 2006</td>
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<td>Arizona Dental Association</td>
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<td>SBVC Dental Society- C.E. Seminars</td>
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<td>Lab Day East 2006</td>
<td>March 18, 2006</td>
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<td>Thomas P. Hinman Dental Show</td>
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<td>American Dental Association</td>
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<tr>
<td>Greater New York Dental Meeting</td>
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Justi Tooth Division of American Tooth Industries compares the benefits and features with other tooth brand companies

## Comparison Chart 2005 Type 1 Anteriors

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<tr>
<td>1. Inventor of Harden Plastic Teeth</td>
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<td>2. Made in USA</td>
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<td>3. ADA Accepted</td>
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<td>4. Shape of Tooth Based on Body</td>
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<td>5. Definition of tooth design G,L,M,N,S,T *</td>
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<td>6. Shape of Tooth Based on Face</td>
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<td>7. Hollywood Lifelike</td>
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<td>8. Personalized Custom Shade Guide</td>
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<td>9. 100% Bondability to base material</td>
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<td>10. No Diatoric Retention is Necessary</td>
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<td>11. Fluorescent Photogenic</td>
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<td>12. Disclose ADA Test Results</td>
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<td>13. ISO CERTIFIED</td>
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<td>15. Incisal &amp; Interproximal Blend</td>
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<td>16. Tooth Express Service®</td>
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Definition of tooth design: G=giant, L=large, M=medium, N=normal, S=small, and T=tiny.

# Trademark of American Tooth Industries

* All information contained on this comparison chart by ATI is to the best of our knowledge and should not be held responsible for any information in error. Justi Imperial®, Justi Blend®, Justi Regal-D-Blend®, Dymon-Hue® HPT, Justi ViForm®, Justi Tripex™ MSLV, Justi Cristal®, RA/RD and Hollywood Teeth® are trademarks of American Tooth Industries. NewHue®, Classic™, BioTone®, Bioform® IPN, Portrait™ IPN, Bioblend®, Vita Antaris®, Vivodent®-DCL, Darby Super-Dent®, Ultra-Dent®, Dentorium Teeth® and New Shade Plus® are trademarks of American Tooth Industries.

Definition of tooth design: G=giant, L=large, M=medium, N=normal, S=small, and T=tiny.
Prosthodontics/Salivary Research from The Ohio State University College of Dentistry

No single dental material is universally accepted as the best for artificial denture teeth. The wear resistance of porcelain assists in providing longevity of a prosthesis while the adjustability of synthetic resin provides for application to a wider variety of clinical situations. Many manufacturers have attempted to blend the two attributes through increasing the wear resistance of acrylic resin teeth. The purpose of this study was to assess the relative abrasion rates of five acrylic resin denture teeth: Bioblend and Bioform (IPN) (Dentply), Justi Blend (JB), Imperial (IP), and Vif orm (VF) (American Tooth Industries). A continuous flush pin-on disk was used with the various materials acting as the pin and abrading against a 30pm diamond disk. The pin length was digitally recorded at one second intervals over the entire test period and the number of revolutions recorded. The means (pm/rev) and standard deviations for the wear rate were: JB, IP and VF = 1.368 (0.052), IPN = 1.323 (1.031). One-way ANOVA and Tukey multiple comparison tests were used for analysis of the data (0.05). End results showed no significant difference in wear. All were essentially the same.

Paul Joseph
American Tooth Industries
1200 Stellar Drive
Oxnard, CA 93033-3913
Re: Ormalab 75/ Ormalab 95

Dear Paul,
I am writing you today regarding the Ormalab 75 and 95 lab putty that your company distributes through selected dealers in the United States. The New England Denture Centers are the largest providers of denture services in Maine and have used both these products extensively and have used virtually every other lab putty on the market. The Ormalab 75 with its softer feel and more fluid action is preferred by some of our technicians for processing partial dentures and repairs with the matrix technique. The Ormalab 95 is my products of choice as it has the rigidity to form repair models and bases that do not bend or distort during processing. We also use this product as a model for duplicating dentures and it does not require separating medium as it does not stick to the denture base material.

I speak on behalf of the entire staff of The New England Denture Center when I state that the Ormalab products are the best that we have tried and will continue to use these products.

Sincerely;
William F. Buxton LD
President

*Original testimonials on file.
American National Standard/American Dental Association Specification No. 15 for Synthetic Polymer Teeth

The American Dental Association Specification No. 15 for Synthetic Polymer Teeth has been approved by the Council on Scientific Affairs of the American Affairs of the American Dental Association. The Council acts as administrative sponsor in the United States in the standardization of materials, instruments and equipment in dentistry. The Council has adopted the specifications, showing professional recognition of their usefulness in dentistry, and has forward them to the American National Standards Institute with the recommendation that the specifications be approved as American National Standards. The American National Standards Institute granted approval of ADA Specification No. 15 as an American National Standard on October 20, 1999. This standard became effective October 20, 2000.

The Scope: this standard specifies a classification, requirements and test methods for teeth that are composed of synthetic polymers such as polymethyl methacrylate and its copolymers, and that are manufacture for use in prostheses used in dentistry.

Announcement

American Tooth Industries is proud to announce the availability of the following Hollywood Teeth™ mold charts on our web site:

- Imperial®
- Justi Blend®
- ViForm®
- Dymon-Hue®
- HPT
- Triplex®
- MSLV
- Regal-D®-Blend
- Imperial® Flatback Facings

www.americantooth.com/moldcharts.htm
ATI Test No.1
Indentation Resistance

When prepared and tested according to the ADA Specification No.15 the teeth shall not be indented by more than 0.090 mm and recovery from the depth of the indentation shall be at least 75%.

Results: Justi teeth exhibited the following:

- Justi Imperial – 92%
- Justi-Blend – 91%
- Viform – 87%
- Regal-D-Blend – 91%
- Dymon-Hue HPT – 87%

ATI Test No.2
Control of Raw Materials

To insure perfection in the making of synthetic resin teeth, Justi utilizes complete control of all ingredients used. A proprietary formula for the molecular composition of the polymers and the co-polymers is verified for every batch assuring consistency in the tooth shade materials. We believe that Justi’s exclusive process carries the refinement of plastic teeth one step further than other tooth brands. This added step enable Justi to produce excellent teeth.

ATI Test No.3
Solvent Resistance

This photograph shows that Justi teeth remain virtually unaffected after immersion in a solvent for several hours, while certain other brands nearly disintegrate! If teeth are not adequately resistant to solvents, they may enter the tooth, sever the molecular bonds, release strains, and eventually, completely dissolve the tooth.

Once this disintegration starts, it can, if undetected, continue after the case is inserted into the patient’s mouth. Properly formulated plastic teeth will not craze and yet will bond readily with the denture base. Justi teeth are so tightly bonded, cross-linked, and laminated that they keep their strength in spite of 24 hours of exposure to solvents.

ATI Test No4
Fluorescence and Photogenic

Justi is a pioneer in the field of fluorescence. Justi chemists have incorporated the best and most stable fluorescent materials, which give consistency of fluorescence in every shade. In these days of modern lighting, with its ultraviolet effects (UV/light), this fluorescence quality is very important to the patient.

In addition the fluorescence employed in our Justi teeth is highly photogenic making a patient’s smile, in a photograph, lifelike.

Additional Test No.5
Molds

Justi teeth are available in the most popular molds to supply the whole spectrum of the American population.

<table>
<thead>
<tr>
<th>Tooth brand</th>
<th>Justi Imperial</th>
<th>Justi Blend</th>
<th>Regal-D-Blend</th>
<th>Dymon-Hue HPT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upper anterior</td>
<td>39</td>
<td>27</td>
<td>27</td>
<td>20</td>
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<tr>
<td>Lower anterior</td>
<td>10</td>
<td>8</td>
<td>8</td>
<td>14</td>
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<tr>
<td>Upper posterior</td>
<td>21</td>
<td>18</td>
<td>21</td>
<td>18</td>
</tr>
<tr>
<td>Lower posterior</td>
<td>21</td>
<td>18</td>
<td>12</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Justi teeth molds of anterior and posteriors</td>
<td></td>
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</tr>
</tbody>
</table>

Additional Testing, Results and Specifications for Justi Teeth, Validated by Our Testing Department
JUSTI BLEND ANTERIOR TEETH ARE MOLDED TO THE SAME SHAPE AND SIZE AS DENTSPLY'S BIOFORM® TOOTH SYSTEM. AESTHETICS ARE ENHANCED.

**Unique Justi Imperial® Anterior Designs (1x6)**

**Justi’s Top Line!**
For quality, durability & price, they’re the best teeth in the world! Many universities use them as a test standard. Recommended for your “Premium” House Brand Cases. Premium quality at a medium price!

**High Quality Blended Teeth!**
Justi Blend anterior molds are similar to Bioblend, Trublend, and Portrait which are made with Bioform type design. Recommended for all your “Blended Premium” cases. Premium quality at a medium price!

**Premium Posteriors!**
Unique Justi Design in 0° - 10° - 20° and 33°
The best and hardest teeth, recommended for all your cases.

**Quality at an Economy Price!**
For the price concerned lab’s that want to maximize quality for their “House Brand” teeth. Match 13 Bioform and/or Vita shades.

**LAB PRICE**

<table>
<thead>
<tr>
<th></th>
<th>JUSTI</th>
<th>DENTSPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Justi</td>
<td>$13.72</td>
<td>$33.20</td>
</tr>
<tr>
<td>Justi Maximum Discounted Price</td>
<td>$10.98 per set</td>
<td></td>
</tr>
<tr>
<td>Justi Maximum Discounted Price</td>
<td>$13.24 per set</td>
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</tr>
<tr>
<td>Justi Maximum Discounted Price</td>
<td>$10.02 per set</td>
<td></td>
</tr>
<tr>
<td>Justi Maximum Discounted Price</td>
<td>$10.02 per set</td>
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</tr>
<tr>
<td>Justi Maximum Discounted Price</td>
<td>$4.24 per set</td>
<td></td>
</tr>
</tbody>
</table>

**Bioform Anterior Design**

Bioform® IPN Upper Anterior

**Bioform Anterior Design**

Portrait® IPN® Anterior

**Justi Blend® Anterior 1x6**

**Premium Posteriors with Trubyte Design**

**Justi Blend® Posterior 1x8**

**Justi Blend® Anterior 1x6**

**Justi Blend® Posterior 1x8**

**Dymon-Hue® HPT Anteriors & Posteriors**

*No Equivalent* to Dymon-Hue HPT has been found for aesthetic, bondability, overall quality and PRICE. Dymon-Hue HPT Anterior Molding design is similar to the *BioTone New Hue shapes. However, this anterior tooth line has very distinctive unique aesthetics and great durability. The posterior line is available in multiple molds within the 0° - 10° - 20° and 33° occlusal forms with functional Justi design.

*No Equivalent*
# Justi Blend® Anterior and Posterior

## Features & Benefits

<table>
<thead>
<tr>
<th>INFORMATION &amp; ACCESSORIES</th>
<th>FEATURES</th>
<th>BENEFITS</th>
<th>FINAL BENEFITS</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 AMERICAN SHADES LIGHT TO DARK 200, 202, 204, 206, 208 210, 212, 214, 216</td>
<td>ADA ACCEPTED ISO 9001 CE Certified</td>
<td>STRICT QC PROCEDURES</td>
<td>CONSISTENT QUALITY</td>
</tr>
<tr>
<td>27 UPPER ANTERIOR MOLDS</td>
<td>MANUFACTURED IN THE U.S.A.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 LOWER ANTERIOR MOLDS</td>
<td>EXCEED ADA SPECIFICATION #15 FOR ARTIFICIAL RESIN TEETH</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 UPPER &amp; 18 LOWER POSTERIOR MOLDS</td>
<td>CROSS-LINKED WEAR RESISTANT SOLVENT RESISTANT FLUORESCENT VACUUM PROCESSED</td>
<td></td>
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</tr>
<tr>
<td>POSTERIORS AVAILABLE IN 33°, 20°, 10° AND 0° OCCLUSAL FORMS</td>
<td>100% BONDABLE TO METHYL-METHACRYLATE DENTURE BASE MATERIALS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MULTI LAYERED BLENDED PLASTIC TEETH</td>
<td>HUE &amp; VALUE OF CUSPIDS MATCHING POSTERIORS</td>
<td>NO DIATORIC RETENTION REQUIRED</td>
<td>SAVE TIME</td>
</tr>
<tr>
<td>BIOFORM-TYPE UPPER &amp; LOWER ANTERIOR MOLDS</td>
<td>CHARACTERIZED</td>
<td>A NATURAL LOOKING DENTURE</td>
<td>PERFECT FOR COSMETIC DENTISTRY</td>
</tr>
<tr>
<td>MOLD CHART &amp; SAMPLES AVAILABLE</td>
<td>COMPARE TO BIOFORM MOLDING</td>
<td>PERFECT FOR PARTIALS</td>
<td></td>
</tr>
<tr>
<td>WORKING MOLD GUIDE AVAILABLE</td>
<td>COMPARE TO BIOBLEND OR PORTRAIT AESTHETICS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HOUSE BRAND PACKAGE AVAILABLE</td>
<td>SQUARE, TAPERING &amp; OVOID MOLD CLASSIFICATION SYSTEM</td>
<td>SIMPLIFIES MOLD SELECTION</td>
<td>SAVES TIME</td>
</tr>
<tr>
<td>HIGHLY CROSS-LINKED INTERSECTIONAL POLYMER NETWORK</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Advantages:
- ADA Accepted
- ISO 9001 Certified
- Manufactured in the U.S.A.
- Exceeds ADA Specification #15 for Artificial Resin Teeth
- Cross-linked for wear resistance and solvent resistance
- Fluorescent vacuum processed
- 100% bondable to methyl-methacrylate denture base materials
- Hue and value of cuspids matching posteriors
- Characterized square, tapering & ovoid mold classification system
- Simplifies mold selection

## Benefits:
- Strict QC procedures
- No diatoric retention required
- A natural looking denture
- Perfect for partials
- Saves time
- Perfect for cosmetic dentistry
- Saves money
Advantages of Using the TOOTH EXPRESS Service

• Tooth Express Service is available for all of our product lines.
• No order is too small for us.
• 50% off the price of Dentply teeth, for all tooth products which are of the same molds and colors.
• Our teeth are manufactured in the U.S.A.
• ADA data on teeth is supplied - most other manufacturers do not.
• Orders received by 12:00 noon PST (3:00 EST) will be shipped the same day.
• New accounts will have FREE freight charges for their stocking order.
• Full sets and broken sets are accepted for credit/exchange - see tooth policy.
• FREE 800# for TOOTH EXPRESS Service in California and Nationwide. (800) 628-1437.
• FREE Technical Consultation.
• FREE Full Service can be arranged. A representative will come to service your cabinets.
• Monthly sales promotions.
• Invoice is included in the package.
• FREE or at-cost accessories - please request an order form.
• House Brand marketing package available to lab’s.
• Immediate Delivery.

TOOTH EXPRESS SERVICE Call TOLL FREE to Order
(800) 628-1437 • FAX (805) 483-8482

Check out our web site!

Catalogs & Price Lists:
• ATI 2005 General Dental Product Catalog
• New Mold Charts

Ortho
• Leone General Products Catalog
• Expansor Atlas
• #2 LEO - 2005 Leone Price List

Newsletters:
• Tooth Express #27, #28, #29, #30, #31, #32
• Ortho News #25, #26, #27

Services:
• Tooth Express Service
• Free Prewelding

New Products:

- History of the Pozzi Stainless Steel Crown Shells, page 2
- Pozzi Schreinemakers Edentulous Trays, page 7
- BLockCutter Teeth, page 1
- Mastique Teeth, page 1