

Europe Ticker +++



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France discusses new law

Violence against doctors to be included in the criminal code

France is moving towards stricter penalties for violence against healthcare staff. A new law, currently under discussion in the Senate, aims to include both physical and verbal assaults in the criminal code. The legislation, part of a broader initiative to improve safety for healthcare workers, focuses on three key articles.

Article 1 proposes harsher sentences for physical attacks on healthcare professionals. Assaults resulting in incapacity to work for more than eight days will be punishable by up to five years' imprisonment and a fine of €75,000. Lesser attacks that do not lead to incapacity will incur a penalty of up to three years in prison and a fine of €45,000. Additionally, the theft of medical equipment from healthcare facilities will carry a maximum sentence of five years and a €75,000 fine.

Article 2 extends the criminal offense of insult to all healthcare employees, including those in freelance roles. Insults will be subject to fines of up to €7,500.

Article 3 grants employers the right, with the employee's consent, to act as a joint plaintiff in cases of violence or threats against their staff and to file a criminal complaint.

On average, around 65 healthcare professionals in France, including many working in dental practices, experience verbal or physical abuse at work each day.

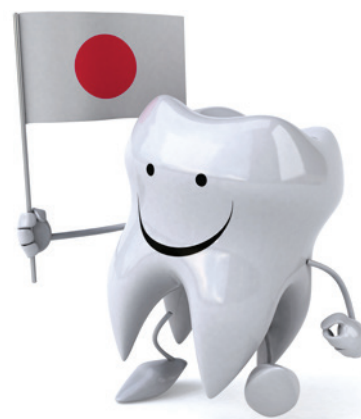
Source: *zm* 14/2024, Germany

Medication under test in Japan

Growing new teeth

A groundbreaking drug developed in Japan aims to regrow missing teeth, offering an alternative to conventional prosthetics. Following successful animal trials, the medication is now undergoing human testing, reports Swiss radio SRF. According to Prof. Michael Bornstein, Head of Research at the Institute of Dentistry at the Basel University Centre for Dentistry (UZH), the drug works by stimulating the body to produce new teeth endogenously. "The goal is to restore missing teeth within the patient's own body, rather than using prosthetics," explains Bornstein.

The mechanism relies on specific cellular messengers that transmit signals, leading to tooth growth. Researchers at Kyoto University have discovered that the protein USAG-1 inhibits tooth development. By blocking this protein, they believe it is possible to stimulate the growth of new teeth.



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The drug is particularly intended for children suffering from tooth agenesis. In such cases, the medication can directly influence and stimulate the formation of the tooth structure. However, Bornstein notes that its effectiveness diminishes significantly in patients over the age of 40: "At that age, the natural predisposition for tooth growth is largely absent, and other approaches, such as stem cell implantation, are necessary." Nonetheless, researchers continue to explore natural methods as alternatives to traditional dental implants.

Source: *SRF* (Swiss radio), 4 June 2024

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EPP in the EU Parliament

ENVI Committee to be split up

The EU Parliament's Committee on Environment and Health (ENVI), which was remarkably busy in the last legislative period, should be split up. Following the EU elections, the Parliament's largest political group, the European People's Party, wants to change the structure to accommodate the growing number of laws passing through the Environment and Health Committee.

Although the matter is not "100 % fixed", the EPP sees a "growing consensus among the leaders of the different groups" and expects a decision soon. The split would entail a Health and Food Safety Committee separate from ENVI, which would remain in charge of environmental and climate legislation. Other political groups are reportedly not yet confident the split will materialise.

Source: euractiv, 2 July 2024



Breast cancer patients with bone metastases

Osteonecrosis of the jaw now frequent and occurring later during cancer treatment

Osteonecrosis of the jaw (ONJ) is a significant complication in the treatment of bone metastases using antiresorptive therapies such as bisphosphonates and denosumab. A recent study found that 8.8 % of women with breast cancer undergoing these treatments develop ONJ—a figure notably higher than previously reported in international literature. The study, led by Dr Christine Brunner from the Medical University of Innsbruck and published in the *Journal of Clinical Oncology*, revealed that ONJ occurred more frequently in patients treated with denosumab compared to bisphosphonates. This marks the first comprehensive long-term survey of ONJ in breast cancer patients with bone metastases.



The researchers examined 639 women receiving monthly antiresorptive therapy: 292 were treated with denosumab, 255 with bisphosphonates, and 92 sequentially with both drugs. ONJ was observed in 56 women (8.8 %): 11.6 % of those treated with denosumab, 2.8 % with bisphosphonates, and 16.3 % of those who received both drugs. The study also highlighted treatment duration as a key risk factor. Among patients who developed ONJ, the median time to onset was 4.6 years for denosumab, 5.1 years for bisphosphonates, and 8.4 years for those treated with both therapies sequentially.

These findings emphasise the importance of dental pre-treatment and regular check-ups for patients with advanced breast cancer before and during antiresorptive therapy. In addition, they should have regular dental check-ups to ensure optimal dental care and to recognise the first signs and symptoms of jaw necrosis at an early stage.

Source: Medscape 12 September 2024; *Journal of Clinical Oncology*



2024 OSSTEM EUROPE MEETING LONDON

22. - 23. November 2024



Mukesh Soni | Session 1: Clinical procedures for favorable immediate implant placement & loading

22. Nov.
09:30 - 11:00



N. Saynor

Time of implant positioning:
How to reach predictable results



L. Muzzi

Timing of implant positioning:
Do Immediate implants work?



V. Rutkunas

Improving implant
prosthodontics through the total
fit workflow



Ieva Gendviliene | Session 2: Role of bone regeneration in enhancing successful osseointegration

22. Nov.
11:30 - 13:00



D. Chong

GBR in Implant Dentistry:
Essential or Optional?



A. Ashraf

The craft of decision making
before, during and after ridge
augmentation surgeries



S. Meloni

Vertical and horizontal prosthetic
and aesthetic Computer Guided
Bone Regeneration.



Árpád Joób-Fancsaly | Session 3: Soft tissue stability for optimal esthetic outcomes

22. Nov.
14:00 - 15:30



P. Windisch

Implant site soft tissue manage-
ment prior to augmentation &
implant placement.



A. Sculean

Management of soft tissue
complications after implant
placement. Etiology & treatment.



D. Božić

Xenogenous collagenous soft
tissue matrices for soft tissue
augmentation around implants.



Matthias Kaue | Session 4: Discover the Benefits of a Digital Workflow for Treating Fully Edentulous Patients

22. Nov.
16:00 - 17:30



N. Oberai

Full-arch dentistry with a focus on
analog techniques



A. Ricci

How to restore a terminal
dentition: from esthetic diagnosis
to follow-ups



E. Clozza

FP1 Full-arch Implant Restorations
with Photogrammetry



Kyoungwon Kim | Session 5: Gain tips and techniques for the management of implant complications

23. Nov.
09:00 - 10:30



C. Barclay

Implant disease



F. Barrak

Is there a place for bioactive glass
in implant dentistry today?



M. Tallarico

Re-treatment of failed implants:
from prevention to advanced
hard and soft tissue management



David Chong | Session 6: Live Surgery - Full arch implant placement in the maxilla with 4 implants and immediate loading on the same day

23. Nov.
11:30 - 13:00



A. Ali

Live Surgery

