Evidence-based protocols for biofilm management on teeth, soft tissues and implants.
MINIMALLY INVASIVE MAXIMALLY PREVENTIVE

1. MAKE BIOFILM VISIBLE
2. AIRFLOW® FIRST
3. PS INSTRUMENT FOR REMAINING CALCULUS
4. LESS POWDER AND HAND INSTRUMENTS
5. NO MORE RUBBER CUPS, NO MORE PASTE

1 Throughout this document, NO PAIN applies when used in accordance with EMS instructions and/or training by the Swiss Dental Academy.
GBT - THE NEW AND MODERN WAY

ONLY THE VERY BEST FOR MY PATIENTS
ONLY THE SWISS ORIGINALS

“I FEEL GOOD”
GBT SAVES TEETH, IMPLANTS

22 APPLICATIONS OF GBT
AND MUCH MORE

GUIDED BIOFILM THERAPY®
08 RECALL
HEALTHY PATIENT = HAPPY PATIENT
▶ Schedule recall frequency according to risk assessment
▶ Ask your patient if he or she liked the treatment

07 CHECK
MAKE YOUR PATIENT SMILE
▶ Do a final check for remaining biofilm
▶ Ensure calculus is fully removed
▶ Accurately diagnose caries
▶ Protect with fluoride

06 PIEZON®
REMOVE REMAINING CALCULUS
▶ Use the minimally invasive EMS PIEZON® PS Instrument supra- and subgingivally up to 10 mm
▶ Clean > 10 mm pockets with mini curette
▶ Use EMS PIEZON® PI Instrument around implants up to 3 mm subgingivally and on restorations

05 PERIOFLOW®
REMOVE BIOFILM IN >4 TO 9 MM POCKETS
▶ Use AIRFLOW® PLUS Powder on natural teeth in deep pockets and root furcations and on implants
▶ Use new and slimmer PERIOFLOW® Nozzle
01 ASSESS
PROBE AND SCREEN EVERY CLINICAL CASE
► Healthy teeth, caries, gingivitis, periodontitis
► Healthy implants, mucositis, peri-implantitis
► Start by rinsing with BacterX® Pro mouthwash

02 DISCLOSE
MAKE BIOFILM VISIBLE
► Highlight to patients the disclosed biofilm and their problematic areas with EMS Biofilm Discloser
► The color will guide biofilm removal
► Once biofilm is removed, calculus is easier to detect

03 MOTIVATE
RAISE AWARENESS AND TEACH
► Emphasize prevention
► Instruct your patients in oral hygiene
► EMS recommends Philips Sonicare toothbrushes, interdental brushes and Airfloss Ultra

04 AIRFLOW®
REMOVE BIOFILM, STAINS AND EARLY CALCULUS
► Use AIRFLOW® for natural teeth, restorations and implants
► Remove biofilm supra- and subgingivally up to 4 mm using AIRFLOW® PLUS 14μm Powder
► Also remove biofilm from gingiva, tongue and palate
► Remove remaining stains on enamel using AIRFLOW® CLASSIC Comfort Powder
THE AIM OF GBT IS

GINGIVITIS
EMS Biofilm Discloser visibly reveals the presence of early and mature biofilm. The sulcus area (gingival margin) shows mature biofilm due to an inappropriate brushing technique leaving biofilm untouched.

In this case, GBT was limited to AIRFLOW® PLUS Powder up to 3mm. Some bleeding from the gingival margin (red line) indicates low-grade gingivitis. GBT fosters the patient’s motivation to use correct tooth brushing techniques.

- GBT prevents and treats gingivitis

CARIES DETECTION
Accurate caries detection requires clean teeth. Here, the EMS Biofilm Discloser shows the presence of biofilm, interdentally as well as at the gingival margin. Finally, GBT reveals interdental caries at an advanced stage.

- GBT helps detect caries with precision.
- No more biofilm: No more caries.

IMPLANTS
In this sequence of peri-implantitis, AIRFLOW® removes supra- and subgingival biofilm up to 4mm. The EMS Biofilm Discloser helps to minimize treatment time. PERIOFLOW® removes biofilm in peri-implant pockets up to 9mm. Finally, the PIEZON® PI Instrument removes the remaining calculus around the implant.

- GBT contributes to the treatment of peri-implantitis in a minimally invasive way.
TO ELIMINATE ALL BIOFILM ON TEETH, IMPLANTS AND SOFT TISSUES.
**GUIDED BIOFILM THERAPY**

**CHILDREN**
In this case, using a 2-tone disclosing agent visibly reveals cariogenic biofilm and helps motivate the young patient. Children love AIRFLOW® – it is “cool” and they lose the fear of the treatment.

- The pain-free GBT method motivates children and helps prevent caries.

**ORTHODONTICS**
Orthodontic appliances are a challenge for patients and professionals performing biofilm management. Using a 3-tone disclosing agent reveals cariogenic biofilm (pH < 4.5) in areas difficult to access during home care and helps to motivate the young patient. AIRFLOW® PLUS Powder during GBT reveals demineralized white spots which were impossible to identify before.

- GBT prevents caries during orthodontic treatment.
- GBT maintains orthodontic appliances.

**EXPOSED DENTINE**
Biofilm and calculus removal on exposed dentine surfaces is usually critical in terms of patient comfort (dentine hypersensitivity) and risk of over instrumentation. The disclosed biofilm helps to minimize AIRFLOW® treatment and to save time. No more color (of the disclosing agent) - no more biofilm. AIRFLOW® PLUS Powder and PIEZON® NO PAIN with PS Instrument are the best assurance for high quality and painfree treatments.

- GBT preserves exposed dentine preventing sensitivity.

**STAINS AND CALCULUS**
AIRFLOW® removes stains and facilitates further calculus removal with PIEZON® PS Instrument, minimizing power instrumentation.

- GBT will make your patient smile again.
MORE CASES

AFTER DISCLOSING

AFTER GBT

Photos: Courtesy, Prof. Magda Mensi

AFTER DISCLOSING

AFTER GBT

Photos: Courtesy, Dr. Gleb Aseev

AFTER DISCLOSING

AFTER GBT

Photos: Courtesy, Dr. Gleb Aseev

AFTER DISCLOSING

AFTER GBT

Photos: Courtesy, Prof. Magda Mensi
Dental biofilm is the main etiological factor for caries, periodontitis and peri-implant infections. Periodontitis may increase the risk of systemic diseases, such as cardiovascular and respiratory disorders, arthritis or diabetes.

Regular oral hygiene, combined with professional measures, keeps biofilm under control – for a better oral and systemic health. Axelsson and Lindhe pioneered preventive dentistry in the 1970’s with studies and clinical protocols based on prophylaxis in “recall hours”.

GBT follows the recommendations on Professional Mechanical Plaque Removal (PMPR) and Oral Hygiene Instructions (OHI) for Home Care issued by the European Federation of Periodontology (EFP).

“Our Periodontal Health for a Better Life!”

**PROFESSIONAL TOOTH CLEANING CAN BE A PAINFUL EXPERIENCE**

**PATIENTS DO NOT LIKE IT AND OFTEN STAY AWAY FROM RECALLS**

This shows that dental biofilm is not always visible.

1. Removing calculus with hand instruments can often be painful for the patients. Dental surfaces and implants often will be scratched.

2. Polishing with rotary rubber cups and brushes is time-consuming and often messy. With many areas not reachable, the gingiva will be affected mechanically. Dental hygienists and assistants know that traditional cleaning may be a painful experience. For this reason, patient compliance is not often very high. Now, almost fifty years later, it is time for change.

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GBT IS THE NEW AND PATIENT ORIENTED CONCEPT

1. Before removal, biofilm is always disclosed with a dye solution. Biofilm and early calculus are easily removed with AIRFLOW® and PERIOFLOW® — supra- and subgingivally.

2. If needed, this is followed by debridement with PIEZON® PS NO PAIN piezoceramic instruments.

3. Guided Biofilm Therapy means that the clinician is guided by the disclosed biofilm during tooth cleaning procedures.

4. Guided Biofilm Therapy is truly minimally invasive and reduces the need for hand and sonic/ultrasonic instrumentation. It is safe, effective and gentle to teeth and soft tissues, implants and restorations.1-4

5. GBT is very comfortable for patients and practitioners.5 It is efficient and timesaving.6

This also valid for primary caries and perio prevention in children and teenagers.

6. GBT is part of a comprehensive preventive concept — to preserve your patients’ oral health — and to make the patients feel good.

7. Since 1982 EMS has provided dental practices all over the world with AIRFLOW® air polishing and PIEZON® PS NO PAIN piezoceramic scaling technology.

8. In 2012 EMS added the high-tech erythritol-based AIRFLOW® PLUS Powder with a particle size of only 14 μm.

9. Guided Biofilm Therapy is based on clinically proven technologies invented by EMS. It was developed in cooperation with highly respected and experienced periodontologists, caries specialists and dental hygienists.

10. GBT is a systematic, predictable, risk-oriented and user-friendly treatment for all age groups and each individual patient.


1. WHY MAKE BIOFILM VISIBLE?

- With GBT we intend to eliminate all the biofilm, including areas which are difficult to access.
- If biofilm is made visible, it is removed much faster with GBT.
- What you see is what you remove. Color removal = Biofilm removal. Also on soft tissues.
- The users of hand instruments, rubber cups and “polishing” paste do not like to disclose biofilm as they would need much more time to finish the treatment.
- The German Stiftung Warentest reported that the conventional prophylaxis only removes 50% of Biofilm in the difficult to access areas.
- Colored teeth and gums will also help motivate the patient to improve their homecare – OHI.

[Image of biofilm visible on teeth]

This 14 year old patient has a significant lack of oral hygiene. Disclosing agent reveals massive acidogenic biofilm.

2. WHY AIRFLOW® FIRST?

- AIRFLOW® removes biofilm, stains and colorations first as well as the thin layers of early forming calculus. Now you will see the remaining calculus better and it will be easier to eliminate it with the PIEZON® NO PAIN PS Instrument.
- With GBT the removal of calculus in supra- and subgingival areas is easier, faster and truly minimal invasive.
- This pain free and comfortable GBT treatment method, if done correctly by trained GBT dental professionals will help create happy and loyal patients for your recall practice.
- AIRFLOW® = CASH FLOW.
3. WHY ONLY THE PS INSTRUMENT?

- The PIEZON® PS (Perio Slim) Instrument is slim and smooth like a probe. It is gum-friendly, minimally invasive, maximally preventive and preserves the epithelium due to its absolute linear movements.
- By using only one instrument to do 95% of the work, things will be easier. For the 5% that remain we recommend our new curved PIEZON® PSL and PSR (Perio Slim Left and Right) Instruments. The PIEZON® PS Instrument gives the clinician a good haptic and secure feeling when working subgingival.
- The treatment with the PS instrument is Pain Free if used the correct way.
- A Pain Free and pleasant treatment is the dream of every patient. This is the key for patient loyalty and satisfaction.
- The cost of a PS instrument is only 5 cents per treatment and per patient! It is absolute nonsense to buy copy or “compatible” tips.
- If EMS handpieces get damaged (e.g. the thread) with a “compatible“ tip you will lose your EMS warranty.
- The PIEZON® PS Instrument, the PIEZON® Handpiece and the PIEZON® NO PAIN electronic module were made/matched for each other. This Trilogy works in harmony.

4. WHY NO MORE „POLISHING“ PASTE?

- The enamel prisms of the natural tooth enamel are easily recognizable. The photo shows the remnants of the bacteria killed off with sodium hypochlorite.
- The vital enamel prisms have been „polished“ away. Pastes have caused scratches. Biofilm has spread into natural crevices.
- Overall abrasive pastes cause a loss of valuable enamel. No improvement of the dental surface.
- The biofilm has been removed with AIRFLOW®. The surface is clean down to the pores. No abrasion. The enamel prisms remain intact and the surface is perfectly smooth. The tongue no longer feels any roughness - no need to „polish“ with abrasive paste. Save enamel and treatment time.

THE GLASS PLATE TEST:
Touch the glass plate with the PS instrument on its side as shown on the left, set the Piezon to medium power, apply gentle pressure, turn on the spray and you won’t hear anything – acoustic proof that you have the right instrument in your hand. Now allow a small lump of dental cement to harden on the glass plate. Then lay the instrument to one side on the glass plate as in the previous test and guide it towards the “tartar”. You will notice that it disappears instantly. That is precisely what makes it so different from other instruments which do not move in such a controlled and consistent fashion.

ONE POWDER ONLY
FOR 90% OF ALL CASES

GUIDED BIOFILM THERAPY®

OPTIMAL COMFORT
MINIMALLY INVASIVE
MAXIMALLY PREVENTIVE

TEETH
- Primary and permanent teeth
- Interdental spaces
- Crowded teeth
- Exposed dentine
- Pits and fissures
- Demineralized enamel

CARIES MANAGEMENT
- Before caries detection
- Before sealing
- Before fluoridation

SOFT TISSUES
- Sulcus
- Shallow pockets up to 4mm
- Deep pockets >4 to 9mm
- Tongue and palate

ORTHODONTICS
- Orthodontic brackets
- Patients with Invisalign

AESTHETIC DENTISTRY
- Crowns and veneers
- Before placing restorations
- Before bleaching

IMPLANTS
- Peri-implant sulcus
- Deep peri-implant pockets.
ONE INSTRUMENT ONLY

FOR 95% OF ALL CASES

OPTIMAL COMFORT
MINIMALLY INVASIVE
MAXIMALLY PREVENTIVE

SUPRAGINGIVAL
▶ Primary and permanent teeth
▶ Best interproximal access
▶ Crowded teeth
▶ Exposed dentine

SUBGINGIVAL
▶ Sulcular deposits
▶ Preserves the epithelium
▶ Pockets up to 10mm

ORTHODONTICS
▶ Around orthodontic brackets

1 Clinical Research Associates, Newsletter.

PIEZON®
NO PAIN
The SWISS ORIGINAL.

THE AIRFLOW® PROPHYLAXIS MASTER


1 GOOD DESIGN®, one of the most important design awards in the world from the Chicago Athenaeum Museum of Architecture and Design.
The Swiss-Made AIRFLOW® Prophylaxis Master was developed at the EMS Research Centre with more than 100,000 hours of technical and clinical testing in collaboration with leading dental professionals worldwide.
AIRFLOW® REMOVES BIOFILM, STAINS & EARLY CALCULUS. CLEANS AND POLISHES AT THE SAME TIME.

- After the use of AIRFLOW® no extra polishing with rubber cups/paste is necessary any more.
- Dental practices using AIRFLOW® and GBT have more and happier recall patients.
- Professional prophylaxis is becoming an important economic factor.\(^1\)

- AIRFLOW® removes biofilm and early calculus in all these situations. It also cleans the gingival or peri-implant sulcus to a depth of 4mm.\(^2\)–\(^4\)
- At the same time AIRFLOW® is fast, efficient and comfortable for the patient.
- Fine tune the air pressure/power for all clinical situations.

1. O’Hehir TE. dentaltown.com 2014(1);94-96.
THE MULTITASKER

ABOVE CEMENTO-ENAMEL JUNCTION

SUBGINGIVAL

AROUND BRACKETS

EXPOSED DENTINE

TONGUE AND PALATE

ON PRIMARY TEETH

INTERDENTAL

IN PITS AND FISSURES

BEFORE COMPOSITE RESTORATIONS

BEFORE BLEACHING

ON RESTORATIONS

AROUND IMPLANTS
STUDY FROM BARNES, ET AL J CLIN DENT 2014, 25-76-87 ON POWDER ABRASITIVITY.

Objective: The purpose of this study was to investigate the effects of each of the commercially available air polishing powders on the surface characterization of human enamel, hybrid composite, and glass ionomer using a highly standardized protocol. The air polishing powders utilized in the study included aluminum trihydroxide, calcium carbonate, calcium sodium phosphosilicate, glycine, and sodium bicarbonate.

THERE ARE DAMAGING POWDERS IN THE MARKET

Based on the results of this study, the air polishing powders that are compatible with use on hybrid composite and glass ionomer cements are EMS glycine and EMS sodium bicarbonate. The air polishing powders that are compatible for use on enamel include EMS glycine, Dentsply sodium bicarbonate, and EMS sodium bicarbonate. In the study a particle size of 65μm of the EMS powder was used. Since 2013, EMS has reduced the particle size of its Comfort sodium bicarbonate Powder to only 40μm.

"The results of this research indicate that there are air polishing powders that are significantly less abrasive than others, even with similar ingredients, specifically sodium bicarbonate."

Please read the full study, just download the QR code below.

ERYTHRITOL 14μm PLUS POWDER

Today, EMS offers an even better erythritol based prophylaxis powder, which enables supra- and subgingival treatment with superior comfort and efficiency than glycine powder.

OSSPRAY CALCIUM SODIUM PHOSPHOSILICATE

EMS AIRFLOW® PLUS POWDER ERYTHRITOL

EMS SODIUM BICARBONATE

EFFECT OF 5 SEC AIR POLISHING ON HUMAN ENAMEL

EFFECT OF 5 SEC AIR POLISHING ON GLASS IONOMER

With 2 chemical laboratories in Germany and Switzerland, EMS is the only company producing its own powder. With 35 years of clinical research and testing, many scientific studies and millions of patients treated, EMS recommends the following 2 powders for all clinical cases.

### RECOMMENDED

<table>
<thead>
<tr>
<th>Name</th>
<th>PLUS</th>
<th>CLASSIC</th>
<th>CLASSIC</th>
<th>SOFT</th>
<th>PERIO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ref</td>
<td>DV-082</td>
<td>DV-048</td>
<td>DV-048/LEM/65</td>
<td>DV-071</td>
<td>DV-070</td>
</tr>
<tr>
<td>Flavor</td>
<td>NEUTRAL</td>
<td>LEMON MINT CHERRY NEUTRAL</td>
<td>LEMON</td>
<td>NEUTRAL</td>
<td>NEUTRAL</td>
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<tr>
<td>Composition</td>
<td>ERYTHRITOL</td>
<td>SODIUM BICARBONATE</td>
<td>SODIUM BICARBONATE</td>
<td>GLYCINE</td>
<td>GLYCINE</td>
</tr>
<tr>
<td>Particle size</td>
<td>~14μm</td>
<td>~40μm</td>
<td>~65μm</td>
<td>~65μm</td>
<td>~25μm</td>
</tr>
<tr>
<td>pH</td>
<td>-7</td>
<td>-8.1</td>
<td>-8.1</td>
<td>-6</td>
<td>-6</td>
</tr>
</tbody>
</table>

**Teeth**
- Stains and early calculus: ✓ ✓ ✓ ✓ ✓ ✓
- Enamel: ✓ ✓ ✓ ✓ ✓ ✓
- Enamel white spots: ✓ ✓ ✓ ✓ ✓ ✓
- Pits and fissures: ✓ ✓ ✓ ✓ ✓ ✓
- Dentine: ✓ ✓ ✓ ✓ ✓ ✓

**Soft tissues**
- Gingiva: ✓ ✓ ✓ ✓ ✓ ✓
- Tongue and palate: ✓ ✓ ✓ ✓ ✓ ✓

**Restorations**
- Hybrid composite: ✓ ✓ ✓ ✓ ✓ ✓
- Glass ionomer: ✓ ✓ ✓ ✓ ✓ ✓

**Implants**
- ...and peri-implant tissues: ✓ ✓ ✓ ✓ ✓ ✓

**Orthodontics**
- Brackets and appliances: ✓ ✓ ✓ ✓ ✓ ✓

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**Other EMS Powders**

**Name**
- PLUS
- CLASSIC
- CLASSIC
- SOFT
- PERIO

**Ref**
- DV-082
- DV-048
- DV-048/LEM/65
- DV-071
- DV-070

**Flavor**
- NEUTRAL
- LEMON MINT CHERRY NEUTRAL
- LEMON
- NEUTRAL
- NEUTRAL

**Composition**
- ERYTHRITOL
- SODIUM BICARBONATE
- SODIUM BICARBONATE
- GLYCINE
- GLYCINE

**Particle size**
- ~14μm
- ~40μm
- ~65μm
- ~65μm
- ~25μm

**pH**
- -7
- -8.1
- -8.1
- -6
- -6

**Beware of so-called „EMS compatible“ powders in the market, which can damage oral tissues and the device. See here a nozzle completely damaged by such aggressive powders.**

- Use only EMS powders with your EMS devices.
- The use of not authorized powders by EMS will result in a loss of warranty.
NEW PERIOFLOW® NOZZLE

- Subgingival biofilm removal (debridement) in >4 to 9 mm periodontal\(^1\) and peri-implant\(^2\) pockets
- Initial and follow-up (SPT) periodontal therapy\(^3\)
- Prevention of mucositis / peri-implantitis\(^4\)
- Initial and follow-up treatment of mucositis / peri-implantitis\(^5\)

3 POWDER SPRAYS
+ water rinsing

NEW PERIOFLOW® NOZZLE

EMS invested in research on safety matters before it decided to offer the subgingival PERIOFLOW® application.
EMS’ main concern was to limit risks of emphysema.
In 2019 at IDS, EMS will offer for sale the third generation new PERIOFLOW® exchangeable nozzle - slimmer, safer and easier to use.

The new PERIOFLOW® Nozzles are thinner and more flexible and able to adapt to the topography of periodontal/peri-implant pockets. A pressure release groove limits pressure in periodontal/peri-implant pockets.

PERIOFLOW® APPLICATIONS
AFTER USING AIRFLOW®, REMOVE REMAINING SUPRA- AND SUBGINGIVAL CALCULUS WITH THE PIEZON® NO PAIN¹ PS INSTRUMENT.

- Linear movement of the PS Instrument = no damage to tooth surfaces and soft tissues. Minimally invasive with regard to root cementum. Dynamic power setting.
- “EMS PS (Perio Slim) Instrument delivers the best interproximal and subgingival access.”²
- Patients will be surprised as the treatment with the PIEZON® PS Instrument will be entirely Pain Free when used in the correct way by Dental Professionals.

¹ NO PAIN: when used in accordance with EMS instructions and/or the training by the Swiss Dental Academy.
95% OF ALL CASES

CALCULUS REMOVAL WITH EMS PIEZON® PS INSTRUMENT

PS - THE ONE AND ONLY

EMS PS PERIO SLIM INSTRUMENT IS INDICATED FOR 95% OF ALL CASES.
CARIES DETECTION REQUIRES CLEAN TEETH

The following dental surfaces are most at risk for caries\textsuperscript{1,2}:

1 - Occlusal.
2 - Approximal.
3 - Cervical areas.

In these areas:

\textcolor{red}{\checkmark} GBT helps effectively remove the biofilm and prevent caries in a minimally invasive way.

At an early stage of demineralization, caries is often hard to detect even with X-rays. Biofilm and calculus may conceal them. The International Caries Detection and Assessment System - ICDAS (2011) underscores the importance of „clean and dry“ surfaces for accurate detection.

1 **OCCLUSAL**

BEFORE GBT
The caries is not detectable

AFTER GBT
Dentine caries is revealed

COURTESY, PROF. DENT. HERVÉ TASSERY, MARSEILLE/FRANCE

2 **APPROXIMAL**

BEFORE TREATMENT
Carious lesions may be hidden

AFTER GBT
Lesions are fully visible on clean teeth

COURTESY, DR. WOLFGANG GUTWERK ASCHAFFENBURG/GERMANY

3 **CERVICAL**

BEFORE GBT
In this case: biofilm, no white spot.

AFTER GBT
In this case: white spots are revealed.

COURTESY, PROF. DENT. ADRIAN LUSSI, BERN/SWITZERLAND
The width of occlusal fissures of cavities is often less than 100μm. This is less than toothbrush bristles and any hand instrument.

**Disclosing + AIRFLOW sequence supporting early caries treatment:**
- After an initial biofilm disclosure, the fissure is cleaned with AIRFLOW® PLUS 14μm Powder.
- If needed, enlarge the fissure with 40μm CLASSIC Comfort Powder and polish with PLUS Powder.
- Burs can be used selectively in addition to AIRFLOW® if the lesion is still present.
- Clean with AIRFLOW® erythritol prior to sealing enables optimal adhesion.

**AIRFLOW® BEFORE COMPOSITE RESTORATIONS**

*Images of dental preparations and treatments with AIRFLOW®.*

COURTESY, PROF. DENT. HERVÉ TASSERY, MARSEILLE/FRANCE
EMS AND PHILIPS COOPERATE

Philips and EMS have decided to combine forces to improve the oral health of patients as any successful Prophylaxis is based on two pillars: Homecare and Professional Oral Care.

Many years ago both companies envisioned the future importance of Prevention and Prophylaxis and consequently focused their efforts to continue offering better oral healthcare – Philips for Dental Care at Home and EMS for Dental Professionals.
EMS and Philips cooperate to improve oral health.

- GBT is a modern clinical protocol for Professional Tooth Cleaning. Philips joins GBT with its Homecare Oral Hygiene Consultation.
- For many years Philips and EMS have been leaders in oral healthcare, so today’s cooperation was predictable and logical.
- This will help Patients and Dental Professionals to maintain and to improve oral health daily in a modern, efficient, gentle and pain-free way. In the spirit of: “Healthy Mouth - Healthy Body”
GBT IS COOL...*

“I do not want to do without Airflow technology or air-polishing in my everyday work. Gentle on substance, clean, pleasant for patients and quicker, particularly in the interdental spaces. The results are accordingly good. Less inflammation, and the tooth necks are no longer sensitive after treatment.”

PETRA NATTER, DENTAL HYGIENIST

“The devices of the company EMS helped us very much to simplify the procedure protocol of our “prophylaxis sessions”, to make it more gentle on substance and more patient-friendly (less pain). After more than 3 years, prophylaxis has become a technically and economically very important part of our dental practice thanks also to the scientific and technical competence (e.g. NO PAIN with PS tip, PLUS Powder) of EMS.”

DR. NADINE STRAFELA-BASTENDORF, DENTIST

“I’m so happy with GBT, I could not accept any other tooth cleaning method anymore. Due to GBT I see my dentist regularly and gladly for my prophylaxis. And each time I leave the office I’m happy with my clean and brilliant white smile! To me prophylaxis with GBT has become a great experience and I dearly recommend it!”

SABINE PAVICIC, PATIENT

“Due to the small particle size of the product, especially the Plus powder, there is practically no traumatic gingivitis anymore... We were able to increase turnover in the area of prophylaxis by approx. 50 percent from 2015 to 2016, which is surely also due to the now much more pleasant treatment. The reactions were positive without exception.”

DIRK PALME, DENTIST

“Patients started to book in particularly with me. They thought I was more gentle than the other hygienists and their mouths were feeling better than ever. The bosses had also noticed a seemingly higher standard of treatment being delivered with lower bleeding scores and cleaner mouths coming from my surgery. They thought it was me. They thought I was more skilled. A better motivator. An exceptional communicator. It wasn’t me. It was the AIRFLOW®.”

FAYE DONALD, BEST UK DENTAL HYGIENIST 2014 AND 2017

“With the EMS devices, we can motivate our patients in terms of prophylaxis. Through a pleasant feeling in the mouth – WELLNESS factor. Removal of stains – BEAUTY factor. 100% plaque removal – HEALTH factor.”

MICHAELA GRUL
PATIENTS AND USERS ARE FANS

“AIRFLOW® IS COOL - SUPER COOL.”

MORRIS MEYER (9 YEARS)
01 ASSESS
Anamnesis: review the case history of your patient and raise awareness of caries promoting and reducing factors.
Pre-rinse with BacterX® Pro.
After patient and clinician preparation, perform the periodontal probing and screening.

02 DISCLOSE
Apply disclosing solution, then rinse with water.

03 MOTIVATE
Show your patients the disclosed biofilm and provide appropriate oral hygiene instruction.
EMS recommends Philips Sonicare.

04 AIRFLOW®
Remove stains, biofilm and early calculus supra- and subgingivally up to 4mm on natural teeth, implants, restorations, orthodontic brackets, dentine and soft tissues.

05 PERIOFLOW®
Remove biofilm in 4-9 mm periodontal and peri-implant pockets.

06 PIEZON®
Remove calculus on natural teeth up to 10 mm subgingivally with PS Instrument NO PAIN® and on implants up to 3 mm subgingivally with PI Instrument.

07 CHECK
Check for any remaining biofilm, stains and calculus. Diagnose caries and other dental hard-tissue defects, protect with fluoride and inform the patient on personal preventive measures.

08 RECALL
Schedule next recall appointment adapting recall frequency to individual risk.

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1. NO PAIN applies when used in accordance with EMS instructions and/or training by the Swiss Dental Academy
1 A Pivot Point Model to Evaluate Different Non-surgical Periodontal Treatment Modalities in Terms of Biofilm Removal and Periodontal Reformation, Surface Alterations and Attachment of Periodontal Ligament Fibroblasts.

2 A Paradigm Shift in Mechanical Biofilm Management? Subgingival Air Polishing: A New Way to Improve Mechanical Biofilm Management in the Dental Practice.

3 Randomized Controlled Trial Assessing Efficiency and Safety of Glycine Powder Air Polishing in Moderate-to-Dense Periodontal Pockets.

4 Subgingival Air-Polishing with Erythritol During Periodontal Maintenance: Randomized Clinical Trial of Twelve Months.

5 Subgingival Debridement of Periodontal Pockets by Air Polishing in Comparison with Ultrasound Instrumentation During Maintenance Therapy.

6 A Clinical Comparison of the Efficacy and Efficiency of Two Professional Prophylaxis Procedures in Orthodontic Patients.

7 In Vitro Study of Surface Changes in Fixed Orthodontic Appliances Followed by Air Polishing: Clinpro® Proprietary Airflow.

8 Pain Perception During Debridement of Hypersensitive Teeth Elicited by Two Ultrasonic Scalers.

9 Exposure Time of Enamel and Dentine to Saliva for Protection Against Erosion: A Study in Vitro.

10 Clinical Practice Guidelines for Recall and Maintenance of Patients with Tooth-Borne and Implant-Borne Dental Restorations.

11 Dental Recall: interval between routine dental examinations – appendix G.

12 Biofilm Removal and Anti-microbial Activity of Two Different Air-Polishing Powders: An In Vitro Study.

13 Air Polishing: A Review of Current Literature.

14 A New Multi-antibiotic Non-Surgical Therapy in the Treatment of Peri-implantitis: A Case Series.


16 Polishing Powders on Enamel and Selected Esthetic Restorative Materials.

17 A Biofilm Pocket Model to Evaluate Different Non-surgical Periodontal Treatment Modalities in Terms of Biofilm Removal and Periodontal Reformation, Surface Alterations and Attachment of Periodontal Ligament Fibroblasts.

18 Polishing powders compatible with enamel are EMS glycine and EMS sodium bicarbonate powders.

19 Subgingival air-polishing: a new way to improve mechanical biofilm management in the dental practice.

20 Penetration depths with an ultrasonic mini insert compared with a conventional curette in patients with periodontitis and in periodontal maintenance.

21 In untreated periodontitis patients, the ultrasonic tip penetrated the pocket deeper than the pressure-controlled probe and the Gracey curette.

22 Subgingival debridement of periodontal pockets by air polishing in comparison with ultrasonic instrumentation during maintenance therapy.

23 A clinical comparison of the efficacy and efficiency of two professional prophylaxis procedures in orthodontic patients.

24 In vitro study of surface changes in fixed orthodontic appliances followed by air polishing: Clinpro® proprietary airflow.

25 Pain perception during debridement of hypersensitive teeth elicited by two ultrasonic scalers.
SMILE IS IN THE AIR

"I FEEL GOOD"

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