

KIYOSHI TAI, D.D.S., Ph.D.	
	<p>The Japanese Specialist of Orthodontics (Japan Association of Adult Orthodontics), 2015            Ph.D., Okayama University, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, 2012            The Japanese Qualified (recognized) Orthodontist, The Japanese Orthodontic Society, 2012            Orthodontic Department, Okayama University Dental School, 1997            Prosthetic Department, Okayama University Dental School, 1992            Doctor of Dental Surgery, Tokushima University, 1992            Visiting Clinical Professor, Post graduate Orthodontic Program, Arizona School of Dentistry and Oral Health, Mesa Arizona, USA            Adjunct Assistant Professor, Graduate School of Dentistry, Kyung Hee University, South Korea, 2010-2015            Visiting Clinical Assistant Professor, Post graduate Orthodontic Program, Arizona School of Dentistry and Oral Health, Mesa Arizona, USA, 2009 - 2015            Instructor, Orthodontic Specialty Program, Japan Association of Adult Orthodontics, 2013</p>
<b>Presentation Date:</b>	<b>Monday 7 May 2018 9:00 AM - 10:00 AM &amp; 2:00 PM - 3:00 PM</b>
<b>Venue</b>	<b>SMX CONVENTION CENTER MANILA Function Room 5</b>
<b>Presentation Title:</b>	<b>THE DAWN OF DIGITAL ORTHODONTICS</b>
Abstract	<p>On the application of digital radiography in orthodontics.</p> <p>Digital imaging is now an important tool for orthodontists, and the greatest advancement in the past decade has come with the development CBCT. It is possible to reconstruct a 3D image of a patient's skull and dental anatomy. An alternative to CBCT is the safer MRI. With software we can extract hard tissue data from soft tissue images, making it practical in orthodontics. MR images offer several advantages over conventional imaging modalities, without the risk of radiation. We demonstrated that MRI could be added to CBCT as a useful orthodontic diagnostic procedure. We have rendered 2D cephs from MRI data. This means MRI can be used to evaluate facial growth and treatment outcomes. Technological advances, representing the 3D intraoral scanner have already reached practical level. By superimposing the scanned data on the CBCT or MRI data, we can create a virtual patient. This is also advantageous for the finite element simulation analysis. Mechanical evaluation of dental orthodontic movement can be analyzed by this technique. For individual orthodontic patients, we can simulate the movement of teeth and their roots. Treatment can be better optimized and customized using these data. Combining these new techniques with MRI or CBCT, more efficient and effective treatment can be proposed to the patient.</p>

