# Making Anti-snoring Devices

A one day hands-on course suitable for CDTs & Dental Technicians

With 6 hours enhanced CPD



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Up to 40% of the population snore, potentially disrupting the sleep of themselves and their partners. A proportion of them will suffer from Obstructive Sleep Apnea (OSA) which requires medical intervention if severe.

Suitably trained GDPs, working in conjunction with properly accredited technicians can successfully treat most patients. However, it is ethically, clinically and legally necessary to first identify patients at risk of OSA and appropriately refer them before treatment.

With increasing efforts being made to train dentists to screen, refer and treat patients with snoring conditions, there is a corresponding need for appropriately trained and accredited technicians and clinical dental technicians to construct these devices.

### Aims, Objectives & Anticipated Outcomes

At the end of the course delegates should be able to better understand:

- > The principles of anti snoring devices.
- Requirements of impressions and bite records using a protrusion gauge.
- Blocking out and duplicating of the master models in casting of the secondary working models.
- > Increasing the protrusion.
- Construction and assembly of Silensor-sl Mandibular Adjustment Splints (MAS).
- > Communication with dentists regarding fit and configuration of the appliance in the patient's mouth.
- Compliance with Medical Devices Directive,
  General Dental Council requirements and related
  Medico legal issues.
- > How to modify bite planes.
- > Repair of Silensor-sl.



### The Presenter

## **Giles Bradley**

Giles, qualified as a dental technician in 1990, and has owned and run Ultralight Dental Laboratory in West Yorkshire for more than 25 years.

He has over 30 years' experience of fabricating thermoformed appliances, with a particular focus on the **Silensor-sl** anti-snoring device for the past 20 years. Working with consultant dentists with a special interest in Dental Sleep Medicine, he is an integral part of the team at a Teaching Hospital which seeks to positively impact the quality of life of some of the hardest to treat patients

Giles has committed himself for many years to improving his knowledge and developing new skills and techniques, prioritising continued education in both the UK and Europe. He brings this commitment to education to his passion to help others to improve their skills and further their own knowledge.



## Silensor-sl anti-snoring device

The **Silensor-sl** is a unique mandibular advancement splint that:

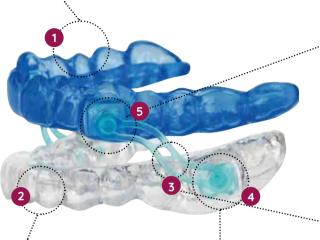
- > has proven effectiveness in treating snoring.
- > is more comfortable and so acceptable to patients.
- > allows for adjustable advancement.
- > is completely metal-free.





### **Silensor-sl** important features

1. The upper splint can be made from **Erkoloc-Pro** 3.0mm or from **Erkodur** 2.5mm

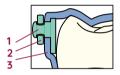


**5.** The connector on the upper splint must be placed on the canine. It will click firmly in place on the anchor.

The connectors are easily interchangeable by sliding the anchor along the connector slot until it is in position.







The connecting area consists of three parts: 1. Anchor, 2. Connector & 3. Splint

- 2. The lower splint must stay firmly in place. If enough retention is available, the lower splint can also be made from Erkoloc-Pro 3.0mm, but failing that Erkodur 2.5mm.
- 4. The connector on the lower splint should be placed on or near the molar. It will click loosely in place on the anchor. This allows the anchor to move along the connector in case of sudden movement during sleep. This avoids compressing and over-loading the connectors.





3. The double-S shaped connectors are metal free and slightly flexible, improving the comfort and reducing the load in the connecting area of the splints. The connectors come in six different lengths, which can be easily changed to adjust the protrusion of the lower splint.



#### **PROGRAMME:**

9:00 - 9:30 Registration & Refreshments 9:30 - 11:00 Snoring & Sleep Apnoea

Introduction to snoring & Sleep Apnoea.

How can a Mandibular Advancement Splint (MAS) make a difference.

11.00 - 11.15 Refreshment break

11.15 – 12.00 **Model casting & preparation** 

Requirements of impression and bite registration.

Casting of models & duplications, as well as model preparation prior to

fabricating.

12.00 – 13.00 Demonstration on fabricating the Silensor-sl

Step by Step demonstration on how to fabricate the Silensor-sl,

with practical hints and tips.

13.00 - 14.00 Lunch

14.00 - 16.00 Hands-on: Fabricating the Silensor-sl

Participants prepare the model and fabricate a Silensor-sl

16.00 - 16.15 Refreshment break

16.15 - 17.00 Repairs & Clinical Issues

Advice on repairs and problems you might encounter, as well as communication with dentists regarding fitting the device and

increasing the protrusion.

17.00 - 17.15 Course Reflection & Questionnaires.

This seminar meets GDC Development Outcomes A, C & D.





#### **VENUE**

Schottlander Training Centre, Letchworth, Herts SG6 2WD

#### **2023 DATES:**

Friday 13th and Saturday 14th October

## **Making Anti-snoring Devices**

A one day hands-on course - limited to 8 places

Suitable for CDTs & Dental Technicians

BOOKING FORM

**COURSE FEE: £150 per person** (£180 inc. VAT per person). Price includes refreshments.

Dates: Friday 13th October	Saturday 14th October	
Places are limited so reserve your place(s) today. Freefax 0800 97 000 78 or contact the Schottlander Education Coordinator direct on <b>01462 704 633</b> , e-mail: courses@schottlander.co.uk or Freephone <b>0800 97 000 79</b>		
Name GDC No	Name	GDC No
Clinic/Laboratory Name	Account	No. (if known):
Address		Postcode
Telephone	Email	
Cheque for £ enclosed. Please make cheques payable to <b>Davis Schottlander &amp; Davis Ltd.</b>		
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Schottlander accepts all major credit and debit cards.		
Card Holders Name	Card No.	
Expiry date/ Card Security Code	Signature	Date







