



SDA CONVENTION 2025 SPEAKERS AT A GLANCE

5TH & 6TH APRIL (SAT & SUN) | ORCHARD HOTEL SINGAPORE

DENTISTRY TODAY: EMBRACING CHANGE, DRIVING PROGRESS, PUSHING FRONTIERS

We are delighted to present the lineup of esteemed speakers of the Convention. Starting now for every 2 weeks, we will be introducing the various speakers. Their expertise spans across a range of topics that we believe will provide invaluable takeaways for attendees. Be sure to register by [CLICKING HERE](#) or scanning the QR code to reserve your spot and learn from them.

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* RATE IS INCLUSIVE OF GST

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SDA MEMBER : S\$294.30 NON-SDA MEMBER : S\$463.25

REGULAR RATE (1ST NOV 24 TO 21ST MAR 25)

SDA MEMBER : S\$403.30 NON-SDA MEMBER : S\$626.75

ON-SITE (5TH APR 25)

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SCAN TO REGISTER



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convention@sda.org.sg

ADJ. ASSOC. PROF. LOH KAI WOH

SHORT AND SWEET ORTHODONTICS: TIPS AND TECHNIQUE TO AVOID PROLONGED ORTHODONTIC TREATMENT



- BDS (U Of Singapore). MDS (U Of Pittsburgh)
- Founding President - Association Of Orthodontists, Singapore
- Past President - Asian Pacific Orthodontic Society
- Past Hon Gen Secretary - Singapore Dental Association
- Adjunct Associate Professor - National University Of Singapore
- Past Visiting Professor - Wenzhou Medical College
- Delivered Lectures In 24 Countries

SYNOPSIS

Orthodontic treatment can be a long-drawn affair. In rare cases, orthodontic treatment can be prolonged to 5 years. This can be very stressful for both the patient and the clinician. To ensure a short and sweet orthodontic treatment, proper diagnosis and treatment planning are most vital. It is through these procedures we can then make a proper case selection for orthodontic treatment according to the level of competence of the clinician. Appropriate case selection will lead to a shorter treatment time. In general, extraction cases will take a longer time. Class 1 malocclusion cases will take a shorter time.

LEARNING OBJECTIVES

- Diagnosis
- Case selection
- Reduce treatment time

KEY WORDS

Diagnosis, Treatment Plan

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DR. TONG HUEI JINN

OUTMANOEUVRING THE ANXIOUS GENERATION ALPHA CHILD – MOVING FORWARD IN BEHAVIOUR MANAGEMENT



- BDS (Singapore); MDentSci With Distinction (Leeds, UK); MPaeddent RCS (England)
- Vice President, Society For Paediatric Dentistry (Singapore)
- Accredited Specialist In Paediatric Dentistry (Private Practice - Petite Smiles Children's Dental Clinic)
- Special Interests: Managing Special Needs Children; Interdisciplinary Management Of Dental Trauma; Systematic Reviews

SYNOPSIS

Behaviour management is the cornerstone in paediatric dentistry, where the child's level of cooperation directly influences how well dental treatment can be performed. Behavioral management is often challenging as clinicians need to be familiar with a range of techniques to meet individual patient's needs, while being flexible in their implementation. This lecture will cover modern strategies for behaviour guidance applicable to the anxious child of this generation and their parents. The evidence behind the effectiveness and acceptability of these new techniques in comparison with traditional behaviour management strategies will be presented.

LEARNING OBJECTIVES

- To provide an evidence-based appraisal on the effectiveness and acceptability of both conventional and modern behaviour management strategies and their modifications.
- To present an update on recent advancements and modern strategies for behaviour guidance in paediatric dentistry.
- To discuss the ethical and practical considerations, as well as future directions of behavior management.

KEY WORDS

Behaviour Management, Anxious Children, Paediatric Dentistry

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DR. JOHN LOH

ORAL CANCER – DIAGNOSIS AND THE ROLE OF THE GENERAL DENTAL PRACTITIONER



John Ser Pheng Loh is a practicing Oral and Maxillofacial surgeon from the National University Centre for Oral Health, Singapore (NUCOHS) as well as the National University Cancer Institute, Singapore (NCIS), under the National University Healthcare System (NUHS) in Singapore. He graduated with the Bachelor of Dental Surgery from the National University of Singapore and the Master in Dental Surgery from the University of Hong Kong. He obtained his medical degree (MBBS) from Barts and the London School of Medicine and Dentistry, Queen Mary College, University of London, UK. John holds a concurrent appointment as Assistant Professor in the Faculty of Dentistry,

National University of Singapore. He subspecializes in Oral Oncology and Reconstruction Surgery and has undergone dual fellowship training in the Department of Head and Neck Oncology and Reconstructive Surgery, Shanghai 9th Hospital, China and Mund-, Kiefer- und Gesichtschirurgie (MKG), Klinikum Rechts der Isar at the Technical University of Munich (TUM), Germany. He is also a researcher with N1.Institute of Health, NUS as well as the OMFS-IMPACT (Katholic University of Leuven, Brussels)

SYNOPSIS

Oral cancer is a common malignancy with high morbidity and mortality, however general public awareness remains limited. Every year, 377,713 new cases are reported worldwide, representing 2% of all new cancer cases. There are, however, very wide regional variations, and Asia has the highest incidence of oral cancer of all continents, which may be closely linked to local lifestyles and cultural practices. Although the well-established aetiological factors associated with oral cancer such as smoking, betel quid, and alcohol are avoidable, many individuals continue to engage in these behaviours. The incidence of oral cancer is relatively low in Singapore with a 5-year prevalence of oral cancer in all age groups estimated at 12.79 per 100,000. This will likely change as immigration patterns, a major driver of Singapore's population growth, evolve with increased immigration from other countries including India where oral cancer accounts for as much as 30% of all cancers. In addition, an emerging incidence of oral cancer associated with human papillomavirus (HPV) in the younger population has been observed worldwide, especially in developed countries, and is likely to increase the burden of oral cancer in Singapore in the coming years. Tongue cancer is also an emerging disease in the young female cohorts in Singapore.

In this talk, the speaker will discuss the current understanding of oral cancer and its diagnosis, as early diagnosis helps with the disease outcomes. There will be a focus on the role of the general dental practitioner (GDP) and the significant impact GDPs have on oral cancer management.

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DR. JOHN TAY

A FRESH LOOK AT ROOT RESECTIVE THERAPY IN PERIODONTALLY COMPROMISED MOLARS



Dr. John Tay is an Associate Consultant at the Department of Restorative Dentistry, National Dental Centre Singapore (NDCS). His current practice includes the management of severe forms of periodontitis, and performs periodontal and implant surgeries for patients with unrestorable teeth, anatomical deformities, and masticatory dysfunction. He firmly believes in the need to rely on sound scientific evidence to deliver the best care for his patients. He was awarded the NMRC Research Training Fellowship in 2024, and strives to be a clinician-scientist by exploring the interrelationships between periodontitis and the overall health of the patient, as well as engaging in health services research to deliver optimal outcomes for his patients.

SYNOPSIS

Restorative treatment becomes challenging when molars are affected by periodontal attachment loss. Retaining periodontally involved teeth may be seen as compromising the overall restorative plan, but extractions are not the only alternative. Root resective therapy involves removing one root at the level of the furcation while leaving the remaining roots with part or all of the crown intact. This presentation will cover the rationale for root resective therapy in the context of periodontal treatment. Potential complications, the need for hard tissue grafting, and novel concepts in resective protocols will also be discussed.

LEARNING OBJECTIVES

- Rationale For Root Resective Therapy
- Indications For Root Resective Therapy
- Potential Complications
- Novel Root Resective Concepts

KEY WORDS

Root Amputation, Furcation Defects, Periodontal Surgery, Hopeless Teeth, Tooth Survival

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DR. CHRISTOPHER SIM

PUSHING THE SURGICAL AND PROSTHETIC BOUNDARIES OF FULL ARCH ORAL REHABILITATION WITH DENTAL IMPLANTS



- BDS Singapore, National University Of Singapore 1981
- MSc Conservative Dentistry, Eastman Dental Institute, University Of London 1984
- FAMS Prosthodontic 1998. Prosthodontist Registration 2008.
- Director Mount Elizabeth Dental Surgery.
- International Speaking Engagements In Dental Implants Includes,
 - Hong Kong 2009, 2012
 - Bangkok 2009
 - Shenzhen 2010
 - Krakow 2011
 - Ho Chi Minh City 2012
 - Tokyo 2012
 - Kuala Lumpur 2012
 - Shanghai 2013
 - Yokohama 2015
 - Sydney 2016
 - Barcelona 2017
 - Seoul 2018
 - Taipei 2019

SYNOPSIS

For the restorative dentist, prosthetic driven implant placement is more desirable. It ensures that the dentist is able to replace a tooth at its original position, thus retaining both its aesthetic and function. Conversely, for the implant surgeon, bone driven implant placement is preferable, as it is a biologically sound option.

In an atrophied jawbone planned for full arch dental implants rehabilitation, a fine balance must be struck between these diametrically opposing concepts so as to simplify bone grafting procedures, implant placements and prosthetic procedures.

In this lecture, modified surgical techniques for narrow ridges and prosthetic compensation for implants placed in less than ideal positions will also be presented.

LEARNING OBJECTIVES

- Treatment planning for full mouth implants in thin ridges.
- Understanding the delicate balance between bone driven and prosthetic driven implant placement for atrophic bone and the limitations of each concept.
- Modified surgical and prosthetic techniques for narrow ridges.
- How to push the surgical and prosthetic boundaries to the limit in order to minimise and simplify bone grafting procedures.

KEY WORDS

Full Mouth Implants, Atrophic Alveolar Bone, Surgical And Prosthetic Procedures, Simplified Bone Grafting Procedures

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DR. RONNIE YAP

THE UGLY SIDE OF DENTAL VENEERS: ADDRESSING FAILURES, COMPLICATIONS, AND THE IMPACT OF ILLEGAL PRACTITIONERS



Dr. Ronnie Yap is past President of the Asian Academy of Aesthetic Dentistry and also past President of the Aesthetic Dentistry Society of Singapore. He was previously an adjunct senior lecturer in the restorative dentistry department of the National University of Singapore. Dr. Ronnie Yap is currently a partner in two private group dental practice with a total of 20 dentists where his area of practice is focused on aesthetic and restorative dentistry, clear aligner therapy and Airway / TMD dentistry.

He is also co-founder of the Aesthetic and Digital Dentistry Academy which provides training courses for dentist with live patient courses, hands-on and demonstrations.

He is currently on the editorial board of the International Journal of Esthetic Dentistry and seats on advisory panel of the MiCD (Minimally Invasive Cosmetic Dentistry) Global Network. Ronnie has lectured extensively in Asia (including Japan, China, Korea and most of the South East Asian nations) on the topic of aesthetic dentistry. In addition, he has a keen interest in nutrition, exercise and health.

SYNOPSIS

In an era where aesthetic dentistry is increasingly sought after, dental veneers have continued to gained popularity as a solution for enhancing smiles. However, this lecture will delve into the often overlooked challenges and pitfalls associated with veneer procedures. We will discuss complications and failures that can arise from both dentist and illegal dental services offered by beauticians.

Participants will gain insight into poorly executed cosmetic dentistry, often performed by beauticians lacking formal dental training. Many consumers remain unaware of the substandard quality of these treatments, leading to disappointing results and, in some cases, significant oral health issues. We will discuss the ramifications of these practices and the ethical responsibilities that dental professionals need to bear to protect the public.

Additionally, the lecture will address the shortcomings of licensed dentists who may not have received adequate training in aesthetic dentistry. Such inadequacies can result in less-than-ideal outcomes and dissatisfied patients, especially in patients with a high aesthetic awareness.

Dr Ronnie will also cover effective strategies for resolving problems created by unlicensed practitioners and for correcting or redoing previously done professional veneers. Attendees will learn best practices for patient communication, managing expectations, and implementing corrective procedures that restore both function and aesthetics. Join us for this critical discussion aimed at enhancing the quality of dental care and ensuring that patients receive the safe, effective, and beautiful results they deserve.

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DR. ADRIAN SAURAJEN

THE ROLE OF THE DENTIST IN RECOGNITION AND MANAGEMENT OF OBSTRUCTIVE SLEEP APNOEA



- MBBS(Sydney) FRCS(Edin) FRCS(Glas) FAMS(ORL) MMed(Sleep Medicine)(Syd)
- Fellowship In Sleep Medicine And Sleep Surgery (Medical College Wisconsin)
- Member Of Chapter Of Sleep Medicine Physicians And Chapter Of Otorhinolaryngologists, Academy Of Medicine
- Senior Consultant ENT Surgeon Nobel ENT Centre

Dr. Adrian Siew Ming Saurajen is an ENT Surgeon with subspecialty training in Sleep Medicine and Surgery. He also has a special interest in Pediatric ENT development of the dentofacial airway. He is a proponent of the multidisciplinary approach in the management of obstructive sleep apnoea and has given talks locally and overseas on collaborative management of Obstructive Sleep Apnoea. He is a member of both the Chapter of Sleep Medicine Physicians and Chapter of

SYNOPSIS

Obstructive Sleep Apnoea is highly prevalent in Singapore. This talk will show dentists how to recognize clinical features of patients at risk of or who have sleep apnoea. It will also give an overview of the development of the craniodentofacial respiratory complex and emphasise the role of the dentist in management and modification of this complex. The last segment will focus on the Dentist's role in the management of obstructive sleep apnoea. Management of Obstructive Sleep Apnoea requires a multidisciplinary approach and the Dentist has an important role in the management alongside Sleep Physicians, Sleep Surgeons (ENT) and Myofunctional therapists.

LEARNING OBJECTIVES

- Development Of The Craniodentofacialrespiratory Complex
- How Dentists Can Help Manage This Complex And Improve The Airway
- How Dentists Can Recognize Patients At Risk Of Developing Sleep Apnoea
- How Dentists Can Recognize Patients With Obstructive Sleep Apnoea
- How Dentists Can Help In The Management Of Obstructive Sleep Apnoea

KEY WORDS

Dental Sleep Medicine, Palate Expansion, Mandibular Advancement Device, Myofunctional Therapy

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DR. YUE WENG CHEU

THE ROLE OF DENTISTS IN DETECTION AND MANAGEMENT OF SLEEP RELATED BREATHING DISORDERS



- Founder And Director Of DP Dental (Katong And Orchard)
- Completed BDS At NUS, Awarded The Pierre Fauchard Academy Foundation Annual Scholarship
- Elected FRACDS And Member Of The Joint Dental Faculties Of The Royal College Of Surgeons, England, MJDF RCSEng
- Special Interest In TMD, Completed Two Mini-Residencies In Dental Sleep Medicine At TUFTS University

- Lectures Internationally On Digital Dentistry, Laser, TMD And MFT
- Delivered TEDxSingapore Talk In 2017 On Wellness Through The Power Of The Tongue
- Serves On The Advisory Board for Nanyang Polytechni's School Of Oral Health Therapy
- Editorial Board Member Of The International Journal Of Orofacial Myology And Myofunctional Therapy

SYNOPSIS

Dr. Yue emphasizes the critical role dentists play in managing overall health through a dental approach. Understanding cranial nerves, reflexes, and oral functions is essential for identifying and addressing sleep-related breathing disorders (SRBDs). The tongue, acting as a valve, controls airflow during sleep, impacting craniofacial development and respiration. With millions affected by SRBDs, dentists are now at the forefront of screening and co-managing these conditions with medical professionals. It is imperative for dentists to be equipped with knowledge to address this growing global health crisis.

LEARNING OBJECTIVES

- Define Sleep Related Breathing Disorders (SRBDs)
- Understand the Role Of Dentists In Identifying Patients Who Are At Risk Of SRBDs
- Prevention And Co-Management Of SRBDs With The Dental, Medical And Allied Teams

KEY WORDS

Mouthbreathing, Snoring, UARS, OSA, Myofunctionaltherapy, MAD

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