

Isolite in Clinical Practice

Chris Anderson graduated from Otago University in 1986. His passion is innovation and excellence in dentistry, with a focus on full mouth rehabilitation, cosmetic dentistry, orthodontics and implants.

Isolite is a unique retraction, suction and illumination system that allows easy and effective simultaneous isolation of upper and lower quadrants on a single side.

The Isolite system consists of an anatomically shaped, transparent polymer mouthpiece attached to a light and suction control head, which is in turn attached to a suction hose and low-voltage power supply. As well as cheek and tongue retraction, the mouthpiece incorporates light transmission, suction and a bite block, so it is an all-in-one device. Isolite mouthpieces are single use and available in several sizes. They are also affordable, costing only a few dollars apiece.

The Isolite system comes with pretty much everything needed for installation. Setting it up in your operatory is reasonably straightforward, if you have a few DIY skills it is something you might easily accomplish yourself. The one problem we have yet to solve is the lack of a hanger for the extra high volume hose, so we have a temporary fix for now.

Isolite is quick to learn and easy to use. control head and fold it into the patient's

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You simply attach an appropriately sized mouthpiece to the autoclavable

control head and fold it into the patient's mouth with the aid of a small amount of lubricant. The technique is almost harder to describe than to do; place the folded mouthpiece inside the patient's cheek and then ease the bite block into position on the contralateral side. There is an excellent video at http://www.isolitesystems.com/support/mouthpiece-sizing-and-insertion that



demonstrates how to select and insert the mouthpiece without stimulating the gag reflex.

Once in place, you can easily control the amount of suction and the level of illumination using the control head. There are several light output settings, including a "cure-safe" mode for use with light-curing materials. As a loupe and headlight user I find the added illumination somewhat superfluous, however the Isodry is also available, a more affordable version of the Isolite system without LED illumination. High volume suction is still necessary when using an air turbine but saliva and water at the back of the mouth are extremely well controlled.

The main benefit of using Isolite has been a reduction in treatment times, along with significantly lower operator and assistant stress and fatigue during long appointments. Time pressure can be one of the most stressful aspects of a dentist's day, and one of the biggest challenges to staying on time is treating those patients who fight every move with tongue, cheek or lips. Isolite simply takes those factors out of consideration.

Improved access, lighting and moisture control also help enormously with complex restorative dental procedures, particularly adhesive dentistry. The constraints and challenges of rubber dam mean many practitioners do not bother with its use, and in my view Isolite offers a valid alternative for restorative procedures. The only problem I have encountered is that it is difficult to use a handpiece horizontally, such as for occlusal reduction during a crown prep, due to a lack of space.

Patients have also found Isolite to their liking and most adapt to it quickly, particularly after a brief explanation of how the device works and how comfortable and helpful it will be for them. I was a little nervous the first few times I used Isolite on a gagger, but once the device was in place they were able to get through extended appointments without gagging, choking or jaw strain.

There are a number of other advantages to using Isolite. Studies have highlighted a significant reduction in aerosols and splatter during dental



A dentist's eye view of the Isolite in use. Note that the camera flash has overwhelmed the LED illumination in this photo

procedures as well as reduced procedural time during sealant placements. Operative ergonomics are significantly improved and assistants

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are freed from constant attention to moisture control, allowing procedures to flow more easily and predictably. You won't be able to sack your chairside assistant just yet, but you will make her life considerably easier and her time more productive.

I first heard of Isolite years ago in user forums on Dentaltown and for the most part its users were wildly enthusiastic. Unfortunately. Isolite was not

distributed in New Zealand at the time and I wasn't willing to make a significant international purchase without getting my hands on one first. Now that I have, I believe it represents a quantum leap in procedural isolation and there is no way I would willingly work without it. My next goal is to get

them into the hands of my associate and hygienists, partly to enhance their working environment, but also because the increase in efficiency and patient satisfaction makes sound economic sense.

