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## Oral carcinomas detected after extraction of teeth: a clinical and radiographic analysis of 32 cases with special reference to metastasis and survival

**Suzuki K, Shingaki S et al.**  
**Int J Oral Maxillofac Surg 1998; 27: 290-294**

This is rare evidence that where teeth associated with carcinoma are extracted, lymph node involvement may be significantly higher with a trend towards reduced survival.

In 29 referred patients and 3 self-referred patients over a 27 year period in a Japanese oral and maxillofacial surgery department, carcinoma was diagnosed after previous tooth extraction. The initial complaint was local swelling and/or pain in 27 cases. In 8 patients, hypermobility was noticed, and in 3 there was lower lip numbness. In 27 cases, the clinical presentation suggested a tumour to the oral surgeons. Most lesions were squamous cell carcinoma, though 2 were adenoid cystic carcinoma.

There was sufficient information on 29 tumours for a comparison to be made with a control group of 64 carcinomata of similar size, but where teeth were not extracted. Where teeth had been extracted, proportionately twice as many clinically positive lymph nodes were found (86% v. 48%), and the same applied to histological diagnosis (52% v. 26%). In the extraction group, 5-year survival was also higher (48% v. 35%) but this did not reach statistical significance. The authors comment on the need for awareness of malignancies, especially with poorly healing extraction sockets.

## Tooth size and morphology in hemifacial microsomia

**Farial M, Vargervik K**  
**Int J Paediatr Dent 1998; 8: 197-201**

In this rare congenital anomaly, the teeth on the affected side may be smaller and exhibit more variations from normal anatomy.

Hemifacial microsomia may occur because of developmental alteration of neural crest cells and vascular accidents in first and second branchial arch development. Ears, zygomatic arches, condyles, rami and associated muscles may be affected. The authors' classification gives 5 types of increasing severity. Dental models were examined from 40 subjects of age 8–21 years, and the mesio-distal dimensions of all permanent teeth were measured.

There was a tendency for teeth on the affected side to be smaller in all cases, but for no maxillary tooth was the difference statistically significant. In the mandible, the differences reached significance for first molars in Types IV and V of the disorder, and for canines in Type V. The mean differences varied from 0.5–1.0 mm. In 6 subjects, a four-cusp mandibular molar on the affected side was matched by a five-cusp tooth on the other. The authors comment that the variation in teeth was greater in subjects with more severe anomalies.

## Mandibular overdentures supported by two or four endosteal implants. A prospective, comparative study

**Batenburg RHK, Raghoobar GM et al.**  
**Int J Oral Maxillofac Surg 1998; 27: 435-439**

This study indicates that many mandibular overdentures may require the support of no more than two implants connected with a bar.

Sixty edentulous patients with severe mandibular resorption were randomised to either 2 or 4 IMZ implants in the anterior region of the mandible. No prophylactic antimicrobials were given. Second stage surgery with abutment placement was at 3 months. Overdentures were supported with round bar and clip attachments, with careful attention to occlusion.

In the one year post-prosthesis follow-up, one implant was lost (in the 2 implant group), and successfully replaced. Increase in radiographic bone height tended to be greater in the 2 implant group, though not significantly so. No patients reported any sensory changes in the lip or chin. There was no difference between the two groups, and the authors considered that 2 implants were normally sufficient for this mode of treatment in the situation described. They suggested that 4 implants were appropriate for patients with a dentate maxilla, or for those with mandibular discomfort or extreme bone resorption.

## Relationship between mothers' gingival condition and caries experience of their 3-year-old children

**Sasahara H, Kawamura M et al.**  
**Int J Paediatr Dent 1998; 8: 261-267**

Mothers with better gingival health have children with less caries.

Over a 2 year period, 1,471 out of 2,144 pairs, comprising mothers with 3-year-old children who were eligible for a check-up, were examined at a community health centre in Hiroshima. Gingival health of mothers was rated on a 5-point scale. Two overall demographic relationships were reported: children of working mothers had more decayed teeth, and children born earlier in the family had better dental health than those born later.

From the best to the worst level of maternal gingival health, there was an increase in the mean number of decayed teeth in the children from 1 to 4. No relationship was apparent for filled teeth, but there was a decrease in the number of children who were caries-free, from 69% for the mothers with healthiest gingiva to 38% for those with the least healthy gingiva. The authors discuss the dominant nature of the mothers' health beliefs in the health of their children, and suggest that encouragement of the mothers to care for their own teeth may lead to improvement in the health of their children.