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MEDICAL JURISPRUDENCE

The accompanying adult: authority to give consent in the UK

Lal SML, Parekh S *et al.* *Int J Paediatr Dent* 2007; 17: 200-204

Not all accompanying adults had legal authority for consenting to the child's dental treatment.

Children under 16 may require parental consent for dental treatment, but not all adults accompanying children are competent to give consent for treatment of the children concerned. In this study, a questionnaire was given to all persons accompanying children to a London dental hospital over a 6 month period, and 250 completed answers were obtained (response rate not stated).

Genders were equally represented among children, and mean age ranged from 1 to 19 yrs. Mothers were 72% of accompanying persons, and fathers, 20%. Full legal responsibility was possessed by 80% of fathers and all mothers. This gave a total of 12% of all accompanying persons who did not have parental responsibility. The authors suggest that efforts should be made to inform parents and dentists about such responsibility.

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CARIOLOGY; PREVENTIVE DENTISTRY

Chlorhexidine and preservation of sound tooth structure in older adults. A placebo-controlled trial

Wyatt CCL, Maupome G *et al.* *Caries Res* 2007; 41: 93-101

Chlorhexidine (CHX) rinsing had no effect on caries incidence.

Caries, both coronal and root surface, may still be a problem in older adults and this study explored the possibility of reducing it with a CHX rinse. In Seattle and Vancouver, 1101 subjects aged 60-75 yrs were enrolled in a trial of 0.12% CHX used daily for 1 month, with weekly rinsing for 5 months, repeated every 6 months for 5 yrs.

Annual coronal caries incidence rate in the CHX group was 1.98 per 100 surfaces, and 2.24 for control surfaces. Respective root caries incidence rates were 3.01 and 3.28. The differences were not significant at the 5% level. The authors conclude that the preventive regime used in the study was not effective, and recommend studies of other methods.

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ORAL MEDICINE; ONCOLOGY

The possible premalignant character of oral lichen planus and oral lichenoid lesions: a prospective five-year follow-up study of 192 patients

van der Meij EH, Mast H *et al.* *Oral Oncol* 2007; 43: 742-748

Squamous cell carcinoma (SCC) was no higher in lichen planus (OLP) patients than in the general population, but much higher in patients with lichenoid lesions (OLL).

Studies of malignant change in lichen planus are controversial, and there is limited evidence of such change in OLL. In this study, 67 patients with OLP and 125 with OLL were followed up for a mean 4½ yrs. Strict diagnostic criteria were applied.

In the OLL group, 4 patients developed SCC of the mucosa, but none of the OLP group did so. The incidence of OLL transformation to SCC was 0.71% per yr. From population data, the expected levels of transformation over the period were 0.017 in the OLP group and 0.028 in the OLL group. The OLL rate was therefore 142 times the expected level, and the authors advise strict monitoring of such patients.

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PROSTHODONTICS; TRAUMA

Frequency and location of traumatic ulcerations following placement of complete dentures

Kivovics P, Jahn M *et al.* *Int J Prosthodont* 2007; 20: 397-401

Vestibular tissues were most frequently affected.

Denture-induced lesions may be caused by sharp edges or by premature occlusal surface contact. In this Hungarian study, 61 patients receiving complete upper and lower dentures according to a defined protocol were examined 1 week after insertion.

At the follow-up visit, 87% of dentures required some adjustment. Denture irritations appeared most often in the maxillary vestibular sulcus (44%), tuberosity (37%), retromylohyoid area (18%), lingual sulcus (14%) and mandibular vestibular sulcus. Significantly more lesions were detected in males. The authors conclude that denture adjustment is an important phase of prosthetic treatment.

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