

## IN BRIEF

- Identification marking of dentures is regulated by guidelines in several other countries.
- Within the UK, there are no specific guidelines or policies for civilian denture identification marking.
- The prevalence of denture marking in the UK is low.
- The overwhelming opinion of prosthodontic specialists within the UK supports the philosophy of denture marking as a routine procedure.

## Denture marking in the UK

A survey of denture identification marking within the United Kingdom **C. A. Murray,<sup>1</sup> P. T. Boyd,<sup>2</sup> B. C. Young,<sup>3</sup> S. Dhar,<sup>4</sup> M. Dickson<sup>5</sup> and J. N. W. Currie<sup>6</sup>**

### ABSTRACT

#### Aim

To assess the attitudes of healthcare workers within the UK towards identification marking of removable prostheses, and quantify the frequency with which this is currently undertaken.

#### Design

A postal questionnaire-based study.

#### Setting

The study was undertaken within the UK between 2002 and 2006 and surveyed prosthodontists working in a wide range of clinical settings.

#### Subjects and methods

Questionnaires were sent to two sample groups: 1. Specialists in prosthodontics registered on the GDC specialist list; 2. Nursing staff in elderly care homes within the locality of Glasgow.

#### Results

Return rate of questionnaires from prosthodontic specialists was high, with 119 from 160 (74%) completed and returned. 54.9% of prosthodontic specialists carried out complete denture marking in their clinical practice and 40.9% undertook identification marking of partial removable prostheses. The vast majority (81.0%) of specialists indicated that denture identification marking was a worthwhile procedure. Furthermore, 68.9% thought the introduction of some form of guideline would be beneficial. Differences in the frequency of denture marking existed between varying clinical environments. Denture marking was not undertaken by healthcare workers within any of the surveyed care homes.

#### Conclusion

The overwhelming opinion of prosthodontic specialists within the UK promotes the use of denture marking as a routine procedure.

### EDITOR'S SUMMARY

The benefits of marking dentures with some means of identification would seem, at first glance, to be obvious – the practise enables easy separation of different sets of dentures, whether belonging to one or many individuals. This obviousness is borne out by one of the main findings of this study: the majority of specialists surveyed thought that denture identification marking was worthwhile.

Given that this is the case, it is surprising that the frequency of denture marking in the study did not reflect this majority opinion. While 81% of prosthodontic specialists surveyed considered denture marking to be worthwhile, only 55% undertook complete denture marking and 41% undertook partial denture marking. More surprising still is the fact that denture marking was not carried out in any of the residential nursing homes surveyed – an environment where the ability to distinguish a particular individual's dentures should be particularly important.

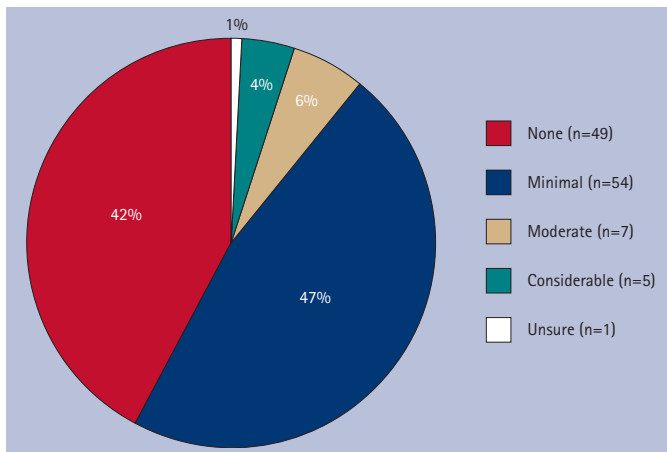
In several countries, including the USA, labelling of removable dentures is regulated by legislation. So should mandatory guidelines for denture identification marking be introduced in the UK? Here what was initially obvious becomes more complicated. While some specialists indicated that marking should be mandatory and guidelines were necessary, others felt that there were already too many guidelines in dental clinical practice. An important point to consider is the issue of a patient's civil liberties, which was a concern raised by some of the specialists surveyed. As the authors point out, any guidelines would have to give patients the option to decline marking of their dentures. It is clear that some barriers to mandatory denture marking may exist.

Further investigation and debate on denture marking are necessary in order to reach a satisfactory conclusion with regards to legislation and encourage suitable beneficial marking practise. It is hoped that this paper will act as a stimulus by raising awareness of the issue and highlighting the current situation.

The full paper can be accessed from the *BDJ* website ([www.bdj.co.uk](http://www.bdj.co.uk)), under 'Research' in the table of contents for Volume 203 issue 11.

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Journal Editor

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Pie chart demonstrating the time surveyed specialists spent caring for institutionalised patients

#### FULL PAPER DETAILS

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## AUTHOR QUESTIONS AND ANSWERS

### 1. Why did you undertake this research?

This research was prompted by our increasing concern about oral care provision amongst elderly population groups within nursing homes, particularly the edentate cohort. The loss or mismatching of removable prostheses is at best inconvenient and at worst highly distressing. Interestingly, prosthetic technicians within our dental team expressed the opinion that all removable prostheses should be marked. One author has had experience in the Armed Services, and was aware of the benefit of conscientious application of denture identification. Although there is no substantial reason why it could not be as easily undertaken in civilian life, and despite NHS payment being available, evidently denture marking is seldom undertaken. Since this pattern of behaviour seems to be simple habit or attitude, rather than a calculated balance of incentives and disincentives, we decided it would be informative to survey the judgement of those who influence opinions and encourage different practices within this field of dentistry.

### 2. What would you like to do next in this area to follow on from this work?

The next step in this area would be to experiment with the various methods of denture identification and establish which of them would be the most pragmatic for general use. We would also be interested to know whether there are particular circumstances when a different method would be more appropriate. Ultimately, we would hope to form a set of helpful guidelines that may inform the prosthodontist as to when and for whom denture identification would be appropriate and which method would be most suitable for each individual patient. In addition, we would hope to emphasise the importance of teaching such marking within undergraduate curricula. Finally, we are re-evaluating whether educating health care workers in residential nursing homes improves their actions of denture marking.

## COMMENT

The frequency of edentulousness has decreased in recent years due to factors such as fluoridation and improved oral health. Nevertheless, owing to variations in the oral status of populations in different countries, the need to address the issue of denture identification still remains.

Identification of badly mutilated bodies, or bodies burned beyond all recognition, can usually be made if labeled dentures are present.<sup>1</sup> Furthermore, the efficacy of establishing ownership of dentures in long-term care facilities is both self-evident and well-documented. Despite numerous reports in the dental literature made over many years, there remains a general sense of apathy towards finding a universally agreeable solution to this problem.

This paper presents the results of a questionnaire-based study designed to assess the attitudes of two groups of UK healthcare workers toward the practice of denture marking. In group one, 160 questionnaires were sent to a random selection of GDC-registered prosthodontic specialists practising throughout the UK. Of the 119 respondents only 54.9% carried out complete denture marking in their clinical practice and 40.9% undertook identification marking of partial removable prostheses. The vast majority however (81.0%), indicated that denture identification marking was a worthwhile procedure. Furthermore, 68.9% thought the introduction of some form of guideline would be beneficial.

In group two, to evaluate knowledge and attitudes of nursing staff and managers of long stay nursing homes for the elderly within the Glasgow region, 58 telephone interviews were undertaken. Within this sector however, the results were even less positive in that not one of the interviewees reported denture marking to be of a priority.

Following the Bradford football fire (UK) on May 11 1985, the first of twenty recommendations made by the inquest jury was '...clearer marking of dentures, preferably with the name of the owner, should be mandatory.'<sup>2</sup> The results of this study suggest that further research is required in order to determine the barriers to the placement of the markings in dentures.

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