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ORAL EMBRYOLOGY; NUTRITION

Folic acid supplements and risk of facial clefts: national population based case-control study

Wilcox AJ, Lie RT *et al.* *BMJ* 2007; **334**: 464-467

The risk of cleft lip appears to be reduced by folic acid supplements (FAS), but not the risk of cleft palate.

In early pregnancy, folic acid reduces the risk of neural tube defects, but there is conflicting evidence on facial clefts. In Norway, which has a high rate of clefts, families who had infants born over a 5 year period and referred for cleft surgery (n = 652) were asked to participate, and 573 did so. Of a random sample of 1006 controls, 763 took part.

After assessing folic acid intake from diet, FAS and multivitamin supplements, no association was found between low dose folate (<400 µg/day) and cleft palate. The groups at lowest risk for cleft lip were those who took 400+ µg/day of folic acid in combination with either multivitamins or good diet. Relative risk for women who took all three was 0.36 (95% CI: 0.17-0.77). The authors estimate that if all pregnant women in Norway took 400+ µg/day of folic acid, 22% of cleft lip cases could be averted.

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IMPLANT DENTISTRY; PERIODONTOLOGY

Outcome of implant therapy in patients with previous tooth loss related to periodontitis

Schou S, Holmstrup P *et al.* *Clin Oral Imp Res* 2006; **17** (supp 2): 104-123

Increased peri-implantitis was identified in patients who had lost teeth through periodontitis, but the evidence is limited.

Studies have yielded inconsistent answers to the question of whether susceptibility to periodontitis affects implant treatment outcome. In this systematic review, from an initial list of 2,116 papers, 547 abstracts were examined, 49 full-text articles were studied, and 2 were finally included in the review.

One study of 346 implants in 97 partially-dentate patients identified definite periodontitis and non-periodontitis groups, each of 25 subjects with respectively 100 and 92 implants. The other study, of 112 implants in 53 patients, yielded respective groups of 8 and 45 patients. At 5 yrs in the first study, 7 patients lost 8 implants in the periodontitis group, and 3 control patients lost 3 implants. In the second study, just one implant was lost, in the control group. These differences were not statistically significant. The only significant differences were that more periodontitis patients had peri-implantitis and greater peri-implant bone loss.

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REMOVABLE PROSTHODONTICS

Association between factors related to the time of wearing complete dentures and oral health-related quality of life in patients who maintained a recall

John MT, Szentpétery A *et al.* *Int J Prosthodont* 2007; **20**: 31-36

These factors had little effect on perceived quality of life.

Oral health-related quality of life (OHRQoL) is less satisfactory in complete denture (CD) wearers, but there is little evidence on the factors affecting this. In the present study, 50 patients out of 161 who received CDs in a German university clinic over a 4.5 yr period agreed to participate. Subjects completed questionnaires on OHRQoL and on their CD history. OHRQoL data were compared with those of another group of CD patients taken before treatment, and with general population scores.

Subjects with impaired OHRQoL scores were more often female, and had worn their current CDs longer (no statistical tests reported). Comparison of the present group with the other two groups gave no reported differences. Regression analysis relating age of current CDs, time since first CDs, number of previous CDs and age of first CD provision to OHRQoL scores gave no significant results. The authors suggest that such changes are slow.

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ORAL MEDICINE

Oral lichen planus: a retrospective study of 690 British patients

Ingafou M, Leao JC *et al.* *Oral diseases* 2006; **12**: 463-468

In this population over a 1-20 yr follow-up, oral lichen planus (OLP) was rarely associated with malignancy.

Most studies of OLP have been in USA and Scandinavia. This is the largest UK study to date of an OLP cohort, and records of 690 patients were retrospectively reviewed. Most patients were Caucasian and nearly 2/3 were female. Median age of onset was 53 for females and 48 for males. The commonest symptom was discomfort and soreness in 63% of patients, while 27% experienced no symptoms. Biopsy confirmation was obtained for 546 patients.

The commonest type of lesion was reticular in presentation (n=651) and on the buccal mucosa. Most patients had more than one type of lesion: 225 plaque-like, 78 papular, 256 atrophic, 16 ulcerative and 27 bullous. In 13% of patients, OLP lesions resolved in a median 3 yrs. In 10 patients with erosive and 3 with plaque-like lesions, oral squamous cell carcinoma later developed.

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