Abstracts on this page have been chosen and edited by Dr Trevor Watts

MAXILLOFACIAL SURGERY; NEUROSURGERY

Frequency of postoperative complications after balloon compression for idiopathic trigeminal neuralgia: prospective study

Sigueira SRDG, Nóbrega JCM *et al. Oral Surg* 2006; **102**: e39-e45

Although this technique appears to have no reports of mortality, there are significant possible complications.

Severe idiopathic trigeminal neuralgia (ITN) may be treated with microvascular decompression surgery which has on occasion caused death. This has not been reported as a complication of percutaneous balloon compression, although a number of other adverse events have been reported. In the present study, 105 ITN patients were treated.

After 7 days, 1 subject needed additional surgery for ITN; 12 had recurrence after 30 days, and 5 more after 210 days. Pseudoaneurysm affected 1 patient, and so did meningitis, in each case producing severe cognitive deficiency. Surgery was needed in 3 more patients before 210 days, and 3 dropped out of the study.

Rarer complications reported included loss of hearing, taste or olfaction, visual disturbance and severe dysaesthesia. Common complications included *Herpes simplex*, occlusal abnormalities, pain from other causes, facial or oral haematoma and mandibular movement limitation.

DOI: 10.1038/bdj.2007.497

ORAL MEDICINE

A long-term follow-up on the natural course of oral leukoplakia in a Swedish population-based sample

Roosaar A, Yin L *et al. J Oral Pathol Med* 2007; **36**: 78-82

Disappearance of oral leukoplakia (OL) was associated with smoking cessation.

OL has been reported to have a risk of malignant transformation varying from 4% upwards. This is probably the first population-based longitudinal study in Europe. In a Swedish county, 555 subjects with OL were identified in 1973-4, and 20 yrs later a sample of 104 was invited for examination, of whom 67 attended.

In 3 individuals from the whole 555, oral cancer had developed, and these were smokers and moderate alcohol users in 1973-4. OL had disappeared in 29 (43%) re-examined subjects, and 23 of these had either never smoked or had given it up since the previous examination ($P < 0.01$). Alcohol use was not associated with the disappearance of OL. The authors conclude that smoking cessation is good advice for smokers with OL.

DOI: 10.1038/bdj.2007.499

PROSTHODONTICS

Nasal width as a guide for the selection of maxillary complete denture anterior teeth in four racial groups

Varjão FM, Nogueira SS *J Prosthodont* 2006; **15**: 353-358

Inter canine distance (ID) and nasal width (NW) in dentate subjects were not closely associated.

Nasal width is used as one method of estimating size of upper anterior teeth for edentulous patients. This study in Brazil compared NW with ID in 40 dentate subjects from each of White, Mulatto, Black and Asian (Japanese and Chinese) ethnic groups. Subjects had all maxillary teeth in good alignment, and had never had orthodontic treatment. A digital sliding calliper was used to measure the nose from ala to ala (NW), and ID was similarly measured on a maxillary cast for each subject.

Mean NW measurements in mm were 35 for Whites, 37 for Mulattos, 43 for Blacks and 37 for Asians; respective mean ID measurements were 34, 34, 36 and 35. Respective correlations were: 0.24, 0.44, 0.27 and 0.09. Respective largest individual discrepancies identified were 9, 15, 28 and 15 mm. Respective % of subjects with prediction errors >5 mm were 40, 56, 82 and 48. The authors conclude that the method is not accurate and leads overall to selection of wider teeth for dentures.

DOI: 10.1038/bdj.2007.498

ORAL MICROBIOLOGY

Effect of a chronic nail-biting habit on the oral carriage of Enterobacteriaceae

Baydas B, Uslu H *et al. Oral Microbiol Immunol* 2007; **22**: 1-4

More of these pathogens were found in the mouths of nail-biters.

In children with poor hygiene, enteric bacteria may enter the body as a result of nail-biting and cause infections. This study compared salivary samples in 25 nail-biters and 34 without the habit. There was no difference between mean plaque indices for the groups.

Among nail-biters, 15 patients had *Escherichia coli* and 4 others, *Enterobacter* species. Respective numbers in the control group were 7 and 2. The difference for *E. coli* was significant ($P = 0.002$) but not that for *Enterobacter* spp. The authors suggest that dentists should advise nail biters to quit the habit, with help if necessary.

DOI: 10.1038/bdj.2007.500