# Other journals in brief

A selection of abstracts of clinically relevant papers from other journals. The abstracts on this page have been chosen and edited by **Reena Wadia**.

### Compliance with supportive therapy

Amerio E, Mainas G, Petrova D, Giner Tarrida L, Nart J, Monje A. Compliance with Supportive Periodontal/Peri-Implant Therapy: A Systematic Review. *J Clin Periodontol* 2019; doi: 10.1111/jcpe.13204. [Epub ahead of print].

#### Sufficient information and motivation increase patient compliance.

This systematic review assessed the degree of compliance with supportive periodontal/peri-implant therapy and identified patient-related factors that could play a role on patient compliance. Following a literature search, 39 articles were included. Descriptive statistics were performed to shed light on compliance rate and the patient-related factors. No consensus regarding the definition of 'compliance' was found in the analysed literature. The percentage of fully compliers and non-compliers ranged between 3%-87% and 1.7%-64% respectively. Smoking habit and history of periodontal disease were found to be associated with patients' compliance. Inadequate information/motivation was found as the main patient-reported reason for non-compliance. Despite the high variability across studies, compliance to the supportive periodontal/peri-implant maintenance therapy was found to be unsatisfactory. The authors concluded that attitudes, psychological traits and construct associated with compliance remain largely unknown, but lack of information and motivation are paramount to be addressed during the periodontal/implant therapy to increase patient compliance.

https://doi.org/10.1038/s41415-019-0903-5

### Furcation tunnelling - supportive periodontal therapy

Nibali L, Akcalı A, Rüdiger S G. The importance of supportive periodontal therapy for molars treated with furcation tunnelling. *J Clin Periodontol* 2019; doi: 10.1111/jcpe.13181. [Epub ahead of print].

# A high rate of tooth loss was observed following tunnelling surgery, mainly in patients not undergoing regular SPT.

A limited number of studies have assessed the survival of molars with degree III FI treated with tunnelling procedures. This study aimed to assess periodontal disease progression and tooth loss in a cohort of patients with degree III FI treated with tunnelling by two periodontists in a private practice setting in the UK and in a hospital setting in Sweden. A retrospective study was conducted on 102 consecutive surgically-created tunnelled molars in 62 periodontitis patients and followed up at least five years later (average seven years and nine months follow-up). Overall tooth loss for tunnelled molars was 29%. Multivariate analysis revealed statistically significant associations with tooth loss for irregular supportive periodontal therapy (SPT) and age. Tooth loss occurred only in the Swedish sample, not undergoing regular SPT. A high rate of tooth loss was observed following tunnelling surgery, mainly in patients not undergoing regular SPT. The authors suggested that clinical studies should be carried out to compare tunnelling with other treatment options for advanced furcation involvement in patients on SPT.

https://doi.org/ 10.1038/s41415-019-0908-0

### Diabetic patient's knowledge of the bidirectional link

Siddiqi A, Zafar S, Sharma A, Quaranta A. Diabetic patient's knowledge of the bidirectional link: Are dental healthcare professionals effectively conveying the message? *Aust Dent J* 2019; doi: 10.1111/adj.12721.

## A significant number of diabetic patients are unaware of the link between oral/periodontal health and diabetes mellitus.

This review evaluates the literature that has investigated the awareness and attitude of diabetic patients about their oral/periodontal health to identify gaps in the dissemination of this critical information. Literature addressing diabetic patients' awareness/knowledge, response to their periodontal health needs, and the source of oral health education was investigated using a computer search of electronic databases. Twenty-six papers were included in the systematic review. The studies reported data from 13 different countries involving 10,550 participants, 9,843 patients with DM and 974 healthy-controls. The overall analysis of the studies showed that around 73% of the diabetic patients were unaware of the link between diabetes and periodontal health. There is a strong need to implement the recent guidelines established by the IDF/EFP concerning mutual care of diabetic patients by the medical and dental healthcare professionals. This will result in improved general and oral health of our diabetic patients.

https://doi.org/ 10.1038/s41415-019-0906-2

### Peri-implant disease – local risk indicators

Giovannoli J L, Roccuzzo M, Albouy J P, Duffau F, Lin G H, Serino G. Local risk indicators - Consensus report of working group 2. *Int Dent J* 2019; **69 Suppl 2:** 7-11.

#### Several local conditions around an implant have a clear influence on peri-implant diseases development and progression.

This consensus report focuses on local risk indicators for peri-implant disease. Use of cemented prostheses should be limited to avoid excess cement acting as a foreign body and leading to peri-implant disease. The crown margins should be supramucosal, and the connection should be precise to avoid a gap between the implant and the suprastructure. The soft-tissue conditions around the implant, the width of keratinised mucosa, and the phenotype and thickness of the mucosa are also considered major risk indicators, as the presence of any mucosal defect around an implant can increase plaque accumulation and result in tissue inflammation. The pathogenicity of the microbiota around an implant is primarily dependent on pocket depth. Deep pockets around implants should be avoided and, if present, closely monitored and/or reduced. Proximity to natural teeth presenting endodontic and/or periodontal lesions may result in implant contamination, but the influence of the type of edentulism on perio-pathogen presence is still unclear.

https://doi.org/ 10.1038/s41415-019-0907-1