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.

Transmission routes of COVID-19 in the dental practice

Peng X, Xu X, Li Y, Cheng L, Zhou X, Ren B. Transmission routes of 2019-nCoV and controls in dental practice. *Int J Oral Sci* 2020; **12**: 9.

Dental professionals are at increased risk but equally play an important role in reducing transmission.

This review outlines characteristics of coronavirus and transmission routes in dental practice. The novel β -coronavirus (2019-CoV) is different from SARS-CoV but shares the same host receptor, the human angiotensin-converting enzyme 2 (ACE2). The natural host of 2019-nCoV may be the bat *Rhinolophus affinis* as 2019-nCoV showed 96% of whole-genome identity to BatCoV RaTG13. The person-to-person transmission routes of 2019-nCoV include direct transmission, droplet inhalation transmission, and contact transmission. Those working in dental practices are at increased risk of infection due to the face-to-face communication and the exposure to saliva, blood, and other body fluids, as well as the handling of sharp instruments. Dental professionals equally play an important role in preventing the transmission of 2019-nCoV. The authors recommend infection control measures under the themes of patient evaluation, personal protective measures, mouth rinses, rubber dam isolation, use of anti-retraction handpieces, disinfection and waste management.

<https://doi.org/10.1038/s41415-020-1547-1>

Social capital and sleep quality in those who self-isolate

Xiao H, Zhang Y, Kong D, Li S, Yang N. Social Capital and Sleep Quality in Individuals Who Self-Isolated for 14 Days During the Coronavirus Disease 2019 (COVID-19) Outbreak in January 2020 in China. *Med Sci Monit* 2020; **26**: e923921.

During a period of individual self-isolation during the COVID-19 epidemic, increased social capital improved sleep quality by reducing anxiety and stress.

Social capital is a measure of social trust, belonging, and participation. This study investigated the effects of social capital on sleep quality and the mechanisms involved in people who self-isolated at home for 14 days in January 2020 during the COVID-19 epidemic in central China. Individuals (n = 170) who self-isolated at home for 14 days completed self-reported questionnaires on the third day of isolation. Individual social capital (Personal Social Capital Scale 16), anxiety (Self-Rating Anxiety Scale), stress (Stanford Acute Stress Reaction questionnaire) and sleep (Pittsburgh Sleep Quality Index) were measured. Low levels of social capital were associated with increased levels of anxiety and stress, but increased levels of social capital were positively associated with increased quality of sleep. Anxiety was associated with stress and reduced sleep quality, and the combination of anxiety and stress reduced the positive effects of social capital on sleep quality.

<https://doi.org/10.1038/s41415-020-1548-0>

Effectiveness of health marketing campaigns

Bradley J, Gardner G, Rowland M K *et al*. Impact of a health marketing campaign on sugars intake by children aged 5–11 years and parental views on reducing children's consumption. *BMC Pub Health* 2020; **20**: 331.

A health marketing campaign had a positive impact in reducing sugars intake, but reductions were not sustained.

Public Health England instigated a range of approaches to reduce sugars, including a national health marketing campaign (Sugar Smart). The campaign aimed to raise awareness of the amount of sugars in foods and drinks and to encourage parents to reduce their children's intake. This study determined whether the campaign was effective in altering dietary behaviour, by assessing any impact on sugars consumed among children aged 5–11 years. Parental perceptions were explored. Parents of 873 children aged 5–11 years took part. Dietary information was collected online using Intake24 before, during, and at 1, 10 and 12 months following the campaign. Completion rates for dietary assessment ranged from 61–72%. Qualitative telephone interviews were conducted with 20 parents. Total sugars intake decreased on average by ~6.2 g/day at peak campaign and the percentage of energy from total sugars significantly decreased immediately and 1-year post campaign. The percentage of energy from free sugars significantly decreased across all time points with the exception of the long term follow up at 12-months. Parents expressed a willingness to reduce sugars intakes, however, identified barriers including time constraints, the normalisation of sugary treats, and confusing information.

<https://doi.org/10.1038/s41415-020-1549-z>

Plant-based diets

Mazur M, Bietolini S, Bellardini D *et al*. Oral health in a cohort of individuals on a plant-based diet: a pilot study. *Clin Ter* 2020; **171**: e142-e148. doi: 10.7417/CT.2020.2204.

Individuals in this study on a plant-based diet had good overall oral health.

This study investigated the oral health status in a cohort of adults who had been following a plant-based diet for a minimum of 24 months. Seventy-seven adults enrolled. Individuals were administered questionnaires covering risk areas for oral diseases and the Oral Health Impact Profile -14 (IOHIP-14). Clinical examination was completed. On average, individuals followed a plant-based diet for the last four years, had four meals a day and brushed their teeth twice a day. Fruit was the most frequently consumed food at breakfast by 48 of the participants. Thirty-four responders did not drink beer or wine, 65 did not drink spirits, 57 avoided carbonated beverages and 62 did not consume any highly-sugared beverages. Answers 'never and almost never' to the IOHIP-14 questionnaire were observed in 87%–100% of the individuals.

<https://doi.org/10.1038/s41415-020-1550-6>