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.**

Eating advice for complete denture wearers

Al-Sultani H F F, Breckons M, Field J, Thomason J M, Moynihan P. Development of patient-centric eating advice for complete denture wearers. *Gerodontology* 2022; DOI: 10.1111/ger.12618. Online ahead of print.

A patient-centric evidence-based patent leaflet on eating with dentures is likely to be well received.

Focus groups, two with purposive samples of patients and two with dental professionals, explored experiences and opinions about advice on eating with complete dentures. Findings were distilled with evidence from the literature to underpinned concepts for eating interventions. User engagement informed prioritisation of ideas and led to the development of a leaflet on eating with dentures. Patients receive no advice on what they can realistically expect when eating with dentures, and professionals lacked confidence to provide eating advice. Patients did not think dentists a credible provider of eating advice, feeling peer support more appropriate and offering numerous strategies for eating with dentures. Concepts for eating intervention included a patient leaflet, web-based eating interventions, patient support blogs, waiting room videos and improved nutrition training for dental professionals. User feedback informed prioritisation of ideas, leading to the development of a leaflet on eating with dentures. Justified by the data, the leaflet focused on patient-generated tips for overcoming the functional limitations of eating with dentures, and unobtrusive healthier eating advice. Face validity with users confirmed acceptability.

https://doi.org/10.1038/s41415-022-4008-1

Power brushes in those with mild cognitive impairment

Flyborg J, Renvert S, Berglund J S, Anderberg P. Use of a powered toothbrush to improve oral health in individuals with mild cognitive impairment. *Gerodontology* 2022; DOI: 10.1111/ger.12619. Online ahead of print

Powered brushes have a positive impact on oral health in people with mild cognitive impairment.

This studied included 213 individuals with the mean age of 75 years living without official home care and with a Mini-Mental State Examination (MMSE) score between 20 and 28. The individuals received a powered toothbrush and instructions on how to use it. Clinical oral examinations and MMSE tests were conducted at baseline, 6 and 12 months. In total, 170 participants (36.5% women and 63.5% men) completed a 12-month follow-up. The use of a powered toothbrush resulted, for the entire group, in a significant decrease in plaque index from 41% at baseline to 31.5% after 12 months. The values for bleeding on probing changed from 15.1% to 9.9% and the percentage of probing pocket depths ≥4 mm from 11.5% to 8.2%. The observed improvements in the Oral Health Impact Profile 14 correlate with the clinical improvements of oral health.

https://doi.org/10.1038/s41415-022-4009-0

Implant therapy – comparing periodontitis and non-periodontitis patients

Alhakeem M, Kanounisabet N, Nowzari H, Asleroosta H, Moslemi N. Risk indicators of long-term outcome of implant therapy in patients with a history of severe periodontitis or no history of periodontitis: A retrospective cohort study. *Int J Dent Hyg* 2022; DOI: 10.1111/idh.12587. Online ahead of print.

Partially edentulous patients with a history of severe periodontitis have a higher probability of peri-implantitis.

The aim of this retrospective cohort study was to assess factors associated with peri-implant disease in partially edentulous patients with a history of severe periodontitis or no history of periodontitis. Partially edentulous patients with a history of severe periodontitis/without history of periodontitis who received implant surgery within the past six to eight years were recalled. Clinical and radiographic examinations were recorded.

Periodontal probing depth, marginal bone loss and peri-implantitis were considered as the primary outcome, and peri-implant bleeding on probing was considered as the secondary outcome. In addition, the following criteria were considered as the predictors: history of severe periodontitis, gender, age, smoking, frequency of brushing, recall interval, full-mouth plaque score, full-mouth bleeding score, splinted prosthesis, open/tight interproximal contact, width of keratinised mucosa, mucosal thickness, implants placed in the grafted bone and implant type. Univariate and multivariate regression analyses were utilised.

A total of 88 patients (186 implants) were included. Forty-seven patients (108 implants) had a history of severe periodontitis, while 41 patients (78 implants) had no history of periodontitis. There was a higher chance of peri-implantitis in patients with a history of severe periodontitis (OR = 11.13; P = 0.045), implants with lack of peri-implant keratinised mucosa (<2 mm) and implants placed in the grafted bone (OR = 14.94, P <0.001; OR = 4.93, P = 0.047). The risk of peri-implant marginal bone loss ≥3 mm was higher in patients with greater full-mouth bleeding score (OR = 1.20; P <0.001). The chance of peri-implant bleeding on probing was independently higher in patients who brushed their teeth at most once per day (OR = 3.20; P = 0.04); those who had a higher full-mouth bleeding score (OR = 1.16; P <0.001); and those who had irregular recall visits (OR = 15.34; P = 0.001).

Partially edentulous patients with a history of severe periodontitis, lack of peri-implant keratinised mucosa and implants placed in bone-grafted sites expressed higher probability of peri-implantitis. In addition, inadequate frequency of brushing (at most once daily) and irregular recall visits were associated with greater chance of peri-implant bleeding on probing.

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