

# 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.

## Tooth loss during supportive periodontal care

Rattu V, Raindi D, Antonoglou G, Nibali L. Prevalence of stable and successfully treated periodontitis subjects and incidence of subsequent tooth loss within supportive periodontal care: A systematic review with meta-analyses. *J Clin Periodontol* 2023; DOI: 10.1111/jcpe.13835.

### **An overwhelming majority do not achieve the proposed endpoints for periodontal stability, yet most periodontal patients preserve most of their teeth during an average of 10–13 years in SPC.**

The study aimed to identify: i) the prevalence of meeting the endpoints of 'stable periodontitis' (probing pocket depth [PPD]  $\leq 4$  mm, bleeding on probing [BoP]  $< 10\%$ , no BoP at 4 mm sites), 'endpoints of therapy' (no PPD  $> 4$  mm with BoP, no PPD  $\geq 6$  mm), 'controlled periodontitis' ( $\leq 4$  sites with PPD  $\geq 5$  mm), 'PPD  $< 5$  mm' and 'PPD  $< 6$  mm' at the start of supportive periodontal care [SPC]); and ii) the incidence of tooth loss in relation to not meeting these endpoints within a minimum of five years of SPC. Systematic electronic and manual searches were conducted and meta-analyses were carried out. Fifteen studies including 12,884 patients and 323,111 teeth were retrieved. Achievement of endpoints at baseline SPC was rare (1.35%, 11.00% and 34.62%, respectively, for 'stable periodontitis', 'endpoints of therapy' and 'controlled periodontitis'). Less than a third of the 1,190 subjects with five years of SPC data lost teeth – a total of 3.14% of all teeth were lost. Statistically significant associations with tooth loss, at the subject-level, were found for not achieving 'controlled periodontitis'.

<https://doi.org/10.1038/s41415-023-6233-7>

## Brush biopsies

Edman K, Stark C R, Basic V, Lindblad J, Hirsch J-M. Dental hygienists and dentists as providers of brush biopsies for oral mucosa screening. *Int J Dent Hyg* 2023; **21**: 524–532.

### **Dentists and DHs are capable of collecting satisfactory material for cytology and hrHPV analysis.**

This study investigated if dental hygienists (DHs) and dentists (Ds) in general dental practice care can be entrusted to perform brush sampling of oral potentially malignant disorders (OPMDs). Five DHs and five Ds participated – they received one day of theoretical and clinical training in oral pathology to identify OPMDs and perform brush sampling for PAP cytology and high-risk human papillomavirus (hrHPV) analysis. Out of 222 collected samples, 215 were adequate for morphological assessment and hrHPV analysis. All the participants agreed that sample collection can be incorporated in DHs and Ds routine clinical duties, and most of them reported that sample collection and processing was easy/quite easy.

<https://doi.org/10.1038/s41415-023-6235-5>

## Supportive peri-implant care

Stiesch M, Grischke J, Schaefer P, Heitz-Mayfield L J. Supportive care for the prevention of disease recurrence/progression following peri-implantitis treatment: A systematic review. *J Clin Periodontol* 2023; DOI: 10.1111/jcpe.13822.

### **Prospective, randomised, controlled studies designed to evaluate supportive peri-implant care protocols are needed.**

This systematic review evaluated the efficacy of supportive care provision, frequency and protocol in patients treated for peri-implantitis, as reported in prospective and retrospective studies of at least three years' duration. A systematic search of three electronic databases was undertaken up to July 2022 and supplemented by hand-search. Owing to high heterogeneity, a meta-analysis was not appropriate. The search identified 2,596 studies. Of 270 records selected, 15 studies were retained for qualitative assessments. Supportive peri-implant care (SPIC) following different surgical peri-implantitis treatment protocols and with recall intervals varying between two months and annually resulted in peri-implant tissue stability ranging from 24% to 100% at patient level and from 28% to 100% at implant level. Provision of SPIC following peri-implantitis therapy may prevent disease recurrence or progression. Insufficient evidence is available to identify: a specific supportive care protocol, the effect of adjunctive local antiseptic agents and the impact of frequency of supportive care measures.

<https://doi.org/10.1038/s41415-023-6234-6>

## Mass media campaigns and oral health knowledge

Banakar M, Lankarani K B, Vali M, Tabrizi R, Taherifard E, Akbari M. The effect of mass media campaigns on oral health knowledge: A systematic review and meta-analysis. *Int J Dent Hyg* 2023; DOI: 10.1111/idh.12715.

### **Mass media campaigns may have positive effects on oral health knowledge, especially in the working-age population.**

This study evaluated the effect of mass media campaigns on oral health knowledge as a systematic meta-analysis and review. The databases such as the Web of Sciences (ISI), Scopus, PubMed/Medline, and the Cochrane Library were searched systematically until February 2022. The meta-analysis comprised a total number of seven articles. The pooled results indicated significant increases in oral health knowledge among included studies. In subgroup analyses, the effects of mass media campaigns on oral health knowledge remained significant for the studies with follow-up of less than 150 weeks and working-age populations compared to other categories. More initiatives are needed for improving health knowledge among children. The effects of these campaigns seem to be time-dependent and higher in shorter follow-up periods.

<https://doi.org/10.1038/s41415-023-6236-4>