

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 Dr Trevor Watts.

PERIODONTICS

Clinical evaluation of nanocrystalline hydroxyapatite paste in the treatment of human periodontal bony defects – a randomized controlled clinical trial: 6-month results

Kasaj A, Röhrig B *et al.* *J Periodontol* 2008; **79**: 394–400

The addition of the paste gave improved short-term outcomes.

Numerous adjunctive substances, including hydroxyapatite, have been shown to improve the clinical outcome of periodontal surgery. In this study, 28 subjects received non-surgical periodontal treatment, followed by flap surgery with randomisation to either insertion of the new paste or no paste.

In the control group, mean probing depth reduced from 7.4 mm at baseline to 4.9 mm 6 months later, and in the test group, from 7.4 to 3.4 mm. Respective mean clinical attachment levels changed from 8.1 to 6.4 mm, and from 8.0 to 4.4 mm. The differences between groups were statistically significant. However, no data are given regarding tobacco smoking, and it is not stated whether the surgeon was aware of the status of the surgical site before its preparation.

DOI: 10.1038/sj.bdj.2008.618

ORTHOGNATHIC SURGERY; ORTHODONTICS

Stability of the hard and soft tissue profile after mandibular advancement in sagittal split osteotomies: a longitudinal and long-term follow-up study

Joss CU, Thüer UW *Eur J Orthod* 2008; **30**: 16–23

After 12 years, there was a significant skeletal relapse.

Bilateral sagittal split osteotomy with accompanying orthodontic treatment is a common treatment for major malocclusion, and rigid internal fixation provides greater surgical stability. Results up to 5 yrs have been reported, and the present study was of 16 consecutive patients treated in Bern and followed for 12.7 yrs with cephalometric analysis of hard and soft tissues.

Immediately after surgery, mean mandibular advancement was 4.8 mm at point B (over first incisor apices), 5.3 mm at pogonion (anterior edge of chin) and 4.1 mm at incision inferior (incisive edge of incisors). At 12.7 yrs, respective relapses were 2.4, 3.2 and 1.7 mm. There were accompanying changes of greater magnitude in overlying soft tissues.

DOI: 10.1038/sj.bdj.2008.619

BEHAVIOURAL SCIENCE; DENTAL TREATMENT

What are people afraid of during dental treatment? Anxiety-provoking capacity of 67 stimuli characteristic of the dental setting

Oosterink FMD, de Jongh A *et al.* *Eur J Oral Sci* 2008; **116**: 44–51

Invasive stimuli appeared to provoke most anxiety.

A majority of patients experience anxiety in respect of dental treatment. In this study, 1,119 people were approached in public places in the Netherlands and 960 participated satisfactorily in answering a questionnaire on dental anxiety and the level provoked by 67 specified stimuli.

Invasive stimuli (n = 35; e.g. drilling, injections) were largely rated more anxiety-provoking than non-invasive (32; eg having X-rays, hands of dentist in mouth). Women rated almost all stimuli higher than men, and higher ratings were given by younger persons, those from a non-Dutch background, and those with higher dental trait anxiety scores. The authors suggest that individual dental anxiety assessments may help in treatment.

DOI: 10.1038/sj.bdj.2008.620

BEHAVIOURAL SCIENCE; DENTAL PRACTICE

Positive engagement and job resources in dental practice

Gorter RC, te Brake HJHM *et al.* *Community Dent Oral Epidemiol* 2008; **36**: 47–54

In a large sample of Dutch dentists, the dentist-patient relationship appeared particularly important for engagement with work.

Occupational stress is well-recognised in dentistry, and professional burnout (mental or emotional exhaustion, negative attitude towards patients and self) is a possible serious consequence in up to 15% of dentists. Work engagement (subdivided into vigour, dedication and absorption) has been proposed as the positive counterpart of burnout. A sample of 943 Dutch GDPs was approached for this survey, and 561 participated.

On a 5 point scale, mean scores for vigour, dedication and absorption were 3.95, 4.32 and 3.86. There was a moderate decline in each with age, but an increase in the 60–65 yr age group. Engagement was high in 15%, moderate in 73% and low in 12%. Of 8 specified 'job resources' (factors which give the dentist work satisfaction), the most important predictors for positive engagement were professional idealism and pride, and caring for patients.

DOI: 10.1038/sj.bdj.2008.621