

# 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.

ABSTRACTS

## PERIODONTICS

### Free gingival grafts to increase keratinized tissue: a retrospective long-term evaluation (10 to 25 years) of outcomes

Agudio G, Nieri M *et al. J Periodontol* 2008; **79**: 587-594

**Where sites devoid of attached gingiva were treated, the gingival margin moved coronally over a long period of time.**

In recession sites where free mucosal grafts have been performed, there has sometimes been a tendency for the gingival margin to creep coronally with time. In this Italian study of 224 teeth in 105 subjects (19 smokers), 76 teeth were treated with a graft placed at the gingival margin (MG), and 148 with a graft placed apically to the margin (SMG).

In the MG group, mean recession decreased from 3.2 to 2.1 mm 1 yr postoperatively, and to 1.3 mm at final follow-up after 10-25 yrs. Respective data for the SMG group were 2.2, 1.6 and 1.0 mm. The mean probing depth remained constant at 1 mm throughout. The authors noted that only 2 recessions increased slightly and attribute the protection of the vast majority of sites to the surgical procedure.

DOI: 10.1038/sj.bdj.2008.665

## PAEDIATRIC DENTISTRY

### Changes in parent-assessed oral health-related quality of life among young children following dental treatment under general anaesthetic

Malden PE, Thomson WM *et al. Community Dent Oral Epidemiol* 2008; **36**: 108-117

**In children for whom treatment under GA is indicated, oral health-related quality of life (OHQoL) may improve substantially.**

There is limited evidence on patient-based outcomes for paediatric dental treatment under GA. This study in 2 hospitals in New Zealand used a special children's questionnaire on OHQoL, and parents or carers of 214 consecutively treated children were asked to complete this while children were undergoing treatment. A follow-up questionnaire was given within 1-4 weeks of treatment.

Complete baseline data were returned for 202 children, and follow-up data for 130. Most data were recorded by parents. At the follow-up, 89 children were considered much improved in OHQoL after treatment, 20 were a little improved, 18 had not changed, and 2 were worse, according to the opinions of the adults.

DOI: 10.1038/sj.bdj.2008.666

## DENTAL PUBLIC HEALTH

### Modelling lifelong costs of caries with and without fluoride use

Splieth CH, FleBa S *Eur J Oral Sci* 2008; **116**: 164-169

**Use of fluorides substantially reduces the cost of treating caries.**

In the former East Germany, use of fluorides was minimal until 1989, with fluoridated toothpaste reaching only 15% of the population. The present study used data from the former East and West parts of Germany to model lifetime reductions in the cost of treating caries when fluorides were applied in different ways.

From an epidemiological survey in East Germany, the mean cost of caries treatment over an individual lifetime, using 2007 German prices, was estimated as €6,976 for 34.8 fillings, 2.6 endodontic treatments, 1.6 crowns and 1.3 bridges. The least cost-intensive preventive scenario involved use of fluoridated salt, fluoride toothpaste, and weekly home applications of gel. When preventive programme costs were added to the lifetime caries treatment cost, the total was estimated as €482.

DOI: 10.1038/sj.bdj.2008.667

## ORTHOGNATHIC SURGERY

### A 3-year patient-centred follow-up of 516 consecutively treated orthognathic surgery patients

Espeland L, Høgevoid HE *et al. Eur J Orthod* 2008; **30**: 24-30

**Most patients were satisfied with the result of surgery.**

Patients undergoing orthognathic surgery may have varied expectations of the outcome, and there are sometimes significant complications to this elective procedure. This study reports the outcomes for 516 of 583 patients treated by a team at Oslo over a 9 year period, and subsequently reviewed 3 yrs later. Skeletal class III accounted for 285 patients, Class II for 154 and Class I for 77. Surgery included mandibular setbacks and advancements, Le Fort I and other procedures.

About 85% of patients wanted improved dental appearance, 60%, improved facial appearance, and 80%, improved chewing ability. In these categories, expectations were not fulfilled respectively for 5%, 10% and 15% of all patients. Over 88% would have agreed to surgery based on knowledge of their actual experiences, and 3% would not. Overall satisfaction with treatment was reported by 92%. Impaired sensory function was a problem for nearly half of the 316 patients who had a sagittal split osteotomy.

DOI: 10.1038/sj.bdj.2008.668