

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 John R. Radford.

ALZHEIMER'S DISEASE

Herpes simplex virus type 1 in Alzheimer's disease: the enemy within

Itzhaki RF, Wozniak MA. *J Alzheimers Dis* 2008; **13**: 393-405

Is herpes simplex virus a causative factor in Alzheimer's disease?

This fascinating review explores the putative role of herpes simplex virus type 1 (HSV1) in Alzheimer's disease (AD). HSV1 is present in the 'temporal and frontal cortices but absent from the occipital cortex' of a high proportion of brains of older people, some of whom have AD, but not the majority of the young. 'A known susceptibility factor' for AD is a gene variation known as APOE. 'Intriguingly (APOE)...is a risk factor for cold sores' but also other infectious conditions. It has been suggested that HSV1 might act as a 'seed' for amyloid plaques and neurofibrillary tangles that are characteristics of AD brains. 'Interestingly, HSV1 infection leads to a marked accumulation of cholesterol' in brain cells. This observation may link with reports that show that statins reduce the risk of AD. The authors argue that there is a strong rationale for treating AD using antiviral therapy and, perhaps in early life, vaccination against HSV1.

DOI: 10.1038/sj.bdj.2009.169

LICHEN PLANUS

Oral lichen planus: a condition with more persistence and extra-oral involvement than suspected?

Bidarra M, Buchanan JAG *et al. J Oral Pathol Med* 2008; **37**: 582-586

Forty percent of patients with oral lichen planus report extra-oral manifestations.

The self-reported lifetime experience of extra-oral manifestations of lichen planus was ascertained by asking 87 patients, with oral lichen planus, to complete a questionnaire. All patients in this study had 'clinical features of oral lichen planus and most had had histopathological confirmation'. Forty percent reported signs and symptoms suggestive of extra-oral manifestations of lichen planus. Most commonly, this involved the nails (27.6%), although 25.3% complained of a persistent sore throat indicative of oro-pharyngeal involvement. Genital involvement was 'relatively infrequent' (10.3%) and 17.2% implied skin manifestations. Seventy percent of those with extra-oral lichen planus 'reported involvement of only one extraoral site'.

DOI: 10.1038/sj.bdj.2009.170

DENTAL TRAUMA

Dental injuries in mountain biking – a survey in Switzerland, Austria, Germany and Italy

Müller KE, Persic R *et al. Dent Traumatol* 2008; **24**: 522-527

Dental injuries in mountain bikers.

The aim of this study was to determine the experience of dental injuries in 473 mountain bikers. This group included 50 'junior' participants. Only 5.7% of those studied had experienced a dental injury, with the majority comprising fractures of the crowns of the teeth. However, over one half of the total group had sustained injuries elsewhere, including the head and neck. Less than 1% of the subjects had experienced tooth avulsion. The authors argued it was 'disturbing' that only 6.3% of all subjects were aware of Dentosafe[®], a tooth rescue kit. Surprisingly, junior participants 'experienced more dental trauma than amateurs or professionals'. Explanations for this finding are that either this activity has become more aggressive or professionals are not able to recall earlier dental trauma. Only 4.4% of participants used mouthguards and urged the 'use of mouthguards should be enforced'. When considering helmets, those without jaw protection were used more commonly.

DOI: 10.1038/sj.bdj.2009.171

ALLERGY TO TITANIUM

Suspected association of an allergic reaction with titanium dental implants: a clinical report

Egusa H, Ko N *et al. J Prosthet Dent* 2008; **100**: 344-347

Putative allergy to 'ASTM grade I high-purity titanium'.

This case report describes a patient who reported a '2-year history of inflammatory skin lesions on her face' following the placement of two titanium implants. As patch-testing can result in false positive results, the allergy was confirmed by lymphocyte transformation test (LTT). As a specific LTT was found for both titanium chloride and some other metal salts, the implants were surgically removed. After a brief exacerbation of the inflammation, the condition completely resolved. It was 'purported by the manufacturer (that the implants were) made of ASTM grade I high-purity titanium (99.64%)'. Although the authors state that this allergy is a very rare occurrence, they cite clinical reports that suggest titanium, in other prosthetic devices, is associated with contact dermatitis and other generalized health problems.

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