

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.

DENTISTRY – AN ART OR SCIENCE

Esthetic 7/8 crown – the Tucker technique

Allan RJ *Op Dent* 2008, **33**–6: 601–605

Meticulous operative skills.

Behind this paper is the enduring debate as to whether or not dentistry is an art or science. Linked to this many would argue that there is now no indication, if there ever was, for the provision of a 7/8 crown. Notwithstanding this, the author gives an insight into this dental treatment viewpoint. The terminology is quaint. The dentist has to assess if the remaining tooth has 'adequate stock'. The 'draw of the rest of the preparation' is described as the 'hollow grind' characteristic. Some of the instruments used to form this are from a seemingly bygone age. The preparation for this crown and the restoration is illustrated on a phantom head plastic tooth and for a patient. The castings restoring these teeth are superb. Regrettably for the patient, the photographic evidence shows gross interdental damage to the adjacent tooth carried out at earlier previous treatment.

DOI: 10.1038/sj.bdj.2009.486

DROOLING

Drooling

Scully C, Limeres J *et al. J Oral Pathol Med* 2009; **38**: 321–327

'acceptable results obtained with most of the treatments, (but) none is free of undesirable effects'

Drooling 'is not usually associated with an increased production of saliva' but with some form of neurological disturbance. It has been reported that this condition occurs in as high as 50% of those with cerebral palsy and a similar proportion of patients with Parkinson's disease. Drooling is not only socially disturbing, but saliva soils anything and everything. In addition, the individual can suffer from perioral maceration and infections. Treatment can range from biofeedback and 'anti-drooling classes' to pharmacological approaches that reduce cholinergic activity or increasing adrenergic activity with, for example, clonidine patches. Percutaneous injection of botulinum toxin into the salivary glands has some short term benefit. Submandibular duct relocation to the back of the mouth is considered the surgical gold standard. Nevertheless, saliva is 'still present on the chins of up to 70% of those cases deemed by the surgeon to be successful'.

DOI: 10.1038/sj.bdj.2009.487

PERIODONTAL HEALTH IN THOSE WITH CLEFTS

Are teeth close to the cleft more susceptible to periodontal disease?

Almeida ALPF, Gonzalez MKS *et al. Cleft Palate Craniofac J* 2009; **46**: 161–165

Teeth in sextants with the cleft do not have more periodontal disease.

In this study, probing depth measurements, clinical attachment loss, gingival and plaque indices were measured on teeth in 400 individuals aged 15–49 years old with a cleft. These values from teeth in sextants with a cleft were compared with those from teeth in the non-cleft sextant in the same individuals. Among other exclusion criteria that affect periodontal health, none of the individuals had received bone grafting. The sextant with the cleft 'did not present higher means of probing depth, clinical attachment level, plaque index, and gingival index' compared with those teeth in the sextants without the cleft. Unlike other studies, these investigators did not analyse separately data of teeth immediately adjacent to the cleft and compare these with contra-lateral teeth.

DOI: 10.1038/sj.bdj.2009.488

MEASURING TOOTHWEAR

A new index of tooth wear. Reproducibility and application to a sample of 18- to 30-year-old university students

Fares J, Shirodaria S *et al. Caries Res* 2009; **43**: 119–125

Less than ideal intra-examiner reliability when using a new tooth wear index.

The aim of this study was to devise a tooth wear index that could be used to measure particularly the prevalence of enamel wear and be used in population-based studies. The teeth of over one thousand students were examined by three trained and calibrated examiners using a modified tooth wear index based on the 'principles of the Smith and Knight Index'. The index used in this study comprises five scores for enamel and six for dentine. At the intra-examiner level, one examiner had intra-class correlation coefficients (ICC) above 0.77, the second examiner 'had a lower ICC for the buccal surfaces of 0.46 and a third examiner had 0.26 for dentine, 0.29 for enamel and 0.43 for enamel on the cervical surfaces'. Notwithstanding 'some challenges in the scoring', the prevalence of toothwear in this 'single convenience sample' would appear common.

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