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.

FACIAL SEXUAL DIMORPHISM

A three-dimensional look for facial differences between males and females in a British-Caucasian sample aged 15½ years old

Toma A M, Zhurov A *et al.* *Orthod Craniofac Res* 2008; **11**: 180–185

In a third of adolescents, there is no difference in facial profiles between males and females.

Male and female facial profiles of 380 'British-Caucasian' adolescents were compared using optical surface scanning. This 'records the three-dimension shape of the face non-invasively'. The subjects were recruited from an initial sample of 14,541 pregnancies that made up the Avon Longitudinal Study of Parents and Children (ALSPAC). Thirty scans were excluded from the study. Thirty-one percent of 'facial shells' from males and females matched exactly. From the remaining subjects, males tended to have more prominent noses and mouths, whereas females had more prominent eyes and cheeks, although the differences were small (<2.5 mm). These observations confirmed findings from other studies.

DOI: 10.1038/sj.bdj.2009.69

HARM FROM ORAL HYGIENE?

Oral hygiene products: potential for harm to oral and systemic health?

Addy M. *Periodontology* 2000 2008; **48**: 54–65

'...nonjuxtaposition of logic with biologic'.

This is a comprehensive overview of the area written by an authority. Using normal tooth brushing, it would take 2-3 years to remove the dentinal smear layer. Toothpaste is therefore required to produce any significant wear. Surprisingly, when using the same toothpaste, soft brushes cause more abrasion than hard brushes, possibly because the narrow filaments of soft brushes retain the paste better and flex to increase surface contact. A recent systematic review of gingival recession concluded that 'the data to support or refute the association between tooth brushing and gingival recession are inconclusive'. The use of a chlorhexidine mouthwash results in more supragingival calculus. This would call in to question whether plaque has to be present to initiate such calculus. Contrary to anecdote, alcohol in mouth rinses does not appear to act as a co-carcinogen with smoking for oral and pharyngeal cancers.

DOI: 10.1038/sj.bdj.2009.70

IMPLANTS; CONTROLLING DENTAL AESTHETICS

Two prosthetic crowns supported by a single implant – an esthetic alternative for restoring the anterior maxilla

Barreto M, Francischone C E *et al.* *Quintessence Int* 2008; **39**: 717–725

Minimising 'black-triangle disease'.

Following the surgical placement of an implant, the horizontal crestal bone resorbs and forms a trough around the implant platform. When two implants are placed adjacent to each other, these 'troughs of destruction' merge at the interdental area. This can result in an unpredictable soft tissue morphology. This paper describes the treatment of two patients, both with two missing adjacent upper anterior teeth. For each patient, one implant only was used to support a cantilever bridge to replace the missing unit. Also carried out for these patients, were 'successive compression cycles of peri-implant tissue...by the addition of self-polymerizable resin in the cervical region' of the provisional restorations. In both patients, an excellent dental soft tissue appearance was achieved.

DOI: 10.1038/sj.bdj.2009.71

SLEEP-RELATED XEROSTOMIA

The application of a night guard for sleep-related xerostomia

Yamamoto K, Nagashima H *et al.* *Oral Surg Oral Med Oral Pathol Oral Radiol Endod* 2008; **106**: e11–e14

The use of a night-guard would appear to alleviate the symptoms of sleep-related xerostomia.

Other investigators have reported that in a survey of Swedish pensioners, 13.7% of men and 24.1% of women complain of sleep-related xerostomia. The aim of this study was to determine if the wearing of a 1.5 mm-thick ethylene vinyl acetate night-guard, over a two week test period, alleviated the symptoms associated with this condition. These were measured using a Visual Analogue Scale (VAS). The test and control groups each comprised 14 subjects and all had normal salivary function. In those subjects who wore the appliance, significant improvement was reported compared with the control group. In addition, in the test group, the post-treatment VAS values for oral dryness, thirstiness and burning sensation of the tongue were significantly decreased compared with that of the pre-treatment period.

DOI: 10.1038/sj.bdj.2009.72