

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.

DABIGATRAN (PRADAXA®) – DENTAL IMPLICATIONS

Protocol in managing oral surgical patients taking dabigatran

Breik O, Cheng A *et al. Aust Dent J* 2014; **59**: 296–301

Compared with warfarin, dabigatran '...allows a fixed dose regimen in most patients without the need for routine monitoring of anticoagulant effects.'

There are important implications for dentists, for those patients taking dabigatran. At the heart of this paper is a case series. Three patients taking dabigatran for atrial fibrillation, received single tooth extractions without significant post-operative bleeding and no alteration to this drug regimen. Another patient received multiple extractions, also without complications. For this patient, dabigatran was stopped pre-operatively. The other patient in this series experienced serious postoperative bleeding following extraction of 18 teeth and drainage of an abscess. Bleeding was controlled after the patient was returned to theatre, further sutures placed and dabigatran was stopped. Much of the discussion is focused on risk assessment; 'Intraoral bleeding can often be managed and is rarely catastrophic, but a stroke can be permanently debilitating.' Stopping dabigatran, or any anticoagulant, must only be directed by the patient's general medical practitioner or cardiologist. As there is currently no effective reversal agent for dabigatran, this drug can be cleared only with dialysis.

DOI: 10.1038/sj.bdj.2014.1027

GOOGLE AND BING HAVE A 'USAGE RIGHTS FILTER'

OPINION. Intellectual property and the internet

John B A. *Fac Dent J* 2014; **5**: 158–163

'...Google is a search engine and not a repository of free images...'

Intellectual property is 'owned, bought and sold.' Despite it being so very easy to 'screenshot' anything and everything on the Internet, violations may result in damages awarded for 'lost revenue and royalties plus expenses'. This is regardless as to whether or not the resource is used for scholarly purposes only. The bar for having breached intellectual policy is set low, on balance of probabilities. Software is constantly being refined to identify such violations. Web crawler software identified students from King's College London that used a medical image (gettyimages®) without permission. They were invoiced for £7,500. Then, Uckfield Community Technical College were fined £23,000 for copyright infringement. Internal use of such intellectual property, however, may be covered. Under a Creative Commons licence, resource may be imported from, for example, morgueFile and Jorum (free open educational resources). An illuminating angle on this subject was the cost levied for legally posting screenshots on slideshare. Despite the Newspaper Licensing Agency (NLA) agreement, three UK newspapers required a £50 fee, and the New York Times requested \$375 and a further sum of \$10,000 per year thereafter.

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ORAL HEALTH, GENERAL HEALTH AND COST UTILITY

Cost-effectiveness of silicone and alginate impressions for complete dentures

Hulme C, Yu G *et al. J Dent* 2014; **42**: 902–907

A randomised controlled trial of complete denture impression materials

Hyde TP, Craddock HL *et al. J Dent* 2014; **42**: 895–901

Complete dentures made from silicone impressions improved patients' quality of life (OHIP-EDENT score) compared with those made from alginate impressions.

These two papers report the findings from an elegant UK single centre, double blind, controlled, crossover clinical trial comparing the efficacy of use of silicone materials (heavy, regular and light bodied) and alginate impression materials when used to make complete dentures. As background, only 6% of adults in England are edentulous. The study was funded by the National Institute for Health Research.

This abstract will focus on that arm of the study that compared the cost-effectiveness of fabricating dentures that used either silicone or alginate impression material. Incremental cost effectiveness ratios (ICERs) were calculated for complete dentures, made after recording impressions using these different materials. The ICER represents the ratio of the difference in costs and difference benefits of the two interventions (silicone *vs.* alginate impressions). More specifically the analyses presents the additional cost 1) per QALY gained, and 2) OHIP-EDENT point gained. In this study QALYs were derived from the EQ-5D, a measure of generic health-related quality of life. Given there were concerns about the sensitivity of the EQ-5D (highlighted in a personal communication), the second analysis used a condition specific measure, the oral health impact profile adapted for edentulous individuals (OHIP-EDENT).

This study recruited 85 patients. Each patient received two sets of dentures, made after recording impressions with either the silicone or alginate impression material. The investigators found that the mean costs associated with dentures from the silicone impression material was £25.29 more than when using alginate impression material (£388.57 *vs.* £363.18). This was attributed almost entirely to the higher cost of the silicone impression material with little difference in the number of appointments required for denture adjustment.

There were negligible between-group differences when comparing QALY gains (ICER). On the other hand, the mean difference between baseline OHIP-EDENT scores and follow-up was 15 in the silicone group and eight in the alginate group.

In the paper, reported by Hyde TP, Craddock HL *et al.*, patient satisfaction was measured (including OHIP-EDENT) after an initial 'habituation' and then a 'confirmation period' for denture wear. Patients preferred those complete dentures made from the silicone impression material.

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