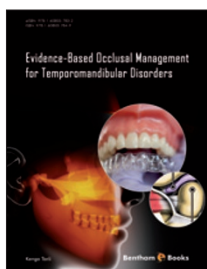


BOOK REVIEW



EVIDENCE-BASED OCCLUSAL MANAGEMENT FOR TEMPOROMANDIBULAR DISORDERS (EBOOK)

K. Torii

Bentham Books

price \$59.00; pp 206

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This is an ebook and a series of ten articles, each presented as a separate chapter. It aims to provide a broad overview of temporomandibular joint disorders (TMJD). The author feels that, while controversial, there is evidence for a link between occlusal factors and TMJD. He believes the use of occlusal management for treatment should not be ruled out. This text aims to provide a thorough review of the evidence for the reader.

The author begins by describing the epidemiology and aetiology of the disease, followed by the anatomy and physiology relevant to occlusion. It focuses on the impact of occlusion in TMJD and describes a variety of treatment options including occlusal adjustment. It also gives a useful guide to signs and symptoms of TMJD.

This is an academic work; it walks the reader through over 100 years of research on TMJ and TMJD. Many papers are reviewed in the book, however; there is little information on the strength and power of these studies. It becomes apparent that there is little international agreement on disease indicators or treatment outcomes for TMJD and this appears to make bringing together different studies difficult. In places, it is also difficult to work out which outcomes are from studies and which are the author's own conclusions from study results.

Some of the explanations, for example of occlusion and jaw movements, are voluble. The author appears to deem this necessary to allow correct identification and treatment of occlusal interferences. The length of some passages makes the read quite difficult, particularly as this is an ebook, on a computer screen. In places, this is heightened by the unusual language and phraseology employed by the author.

The book aims to give a step-by-step guide for clinicians, however, despite giving a thorough explanation I would not feel confident carrying out treatment based on the guidance in this book without further training.

While presenting the case for the use of occlusal adjustment in the treatment of TMJD the author does accept that other, less destructive treatments such as splint therapy or physiotherapy often give good outcomes for patients.

The author presents a good case for the consideration of occlusion as an aetiological factor in cases of severe and persistent TMJD. This book would be a good starting point for clinicians who would like to begin developing their clinical practice in this area.

E. LEVEY

BDIA CLARIFIES THE USE OF SAFE SHARPS

Following the introduction of The Health and Safety (Sharp Instruments in Healthcare) Regulations 2013 in May last year there still seems to be some confusion regarding the interpretation of the Regulations and the role of risk assessments in relation to the use of safer sharps and recapping.

Edmund Proffitt, Policy and Public Affairs Director at the British Dental Industry Association (BDIA) comments: 'From May last year all dental practices have to ensure that they comply with the "Sharps" regulations. This means that dental practices must avoid the unnecessary use of sharps and where this is not possible a safer sharp must be used where reasonably practicable.

'[...] Therefore, it will be in very limited cases that "traditional" devices can still be used, and this should be justified by the risk assessment process. Ultimately, it is for a dentist to justify to the courts why they did not use a

safety device, and it would be very difficult for a court to agree with the dentist if there was a safety device on the market and others were using them.'

In terms of the 'recapping' of needles, the Regulations clearly state that needles must not be recapped after use unless the employer's risk assessment has identified that recapping is itself required to prevent a risk (eg to reduce the risk of contamination of sterile preparations). In these very limited cases appropriate devices to control the risk of injury to employees must be provided.

As a result of the constant development of devices and technologies by BDIA members and others it is suggested that if a dentist has decided that it is not reasonably practicable to use a safer sharp in a specific circumstance the decision is regularly reviewed to see if a different or new product is suitable.

PHOTO STORY

Top speakers shared lingual techniques and insights at the recent meeting of the British Lingual Orthodontic Society at the National Railway Museum in York. The meeting was called 'Adventures in Lingual' and pictured are (l-r) Richard George, Peter Taylor, Ian Hutchinson, Paul Ward (BLOS Chairman) and Robbie Lawson.



DENTAL PROFESSIONALS NEEDED FOR ZIMBABWE MISSION

There are a few places still available for a two-week dental volunteering trip to Zimbabwe this September, organised by Dentaaid.

Dental volunteers will work as part of a team to give

pain-relieving treatments and oral health in disadvantaged communities, schools and orphanages.

To find out more or to register your interest, email barbara@dentaaid.org or call 07970 163798.