

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 Paul Hellyer

Titanium vs fibre posts

Dentin-like versus rigid endodontic post: 11-year randomized controlled pilot trial on no wall to 2-wall cavity defects

Maumann M, Sterzenbach G *et al.* *J Endod* 2017; **43**: 1770–1775

Study shows little difference in tooth survival rates after 5 years

With an increasingly dentate, ageing population, the restoration of severely damaged, endodontically treated teeth becomes a more common clinical procedure. This project looked at a series of 91 restorations over a 12-year period. At baseline, all teeth were symptomless, had a maximum of two cavity walls remaining, a minimum 2 mm ferrule and no radiographic endodontic defects. All teeth were restored using either a titanium or fibre post, bonded post and core placement, and a porcelain fused to metal single crown or bridge abutment.

Due to the small sample size, no valid statistical differences between the two types of post could be established. The study shows that after 5 years the survival rate for fibre posts was 86.4% and for titanium, 92.5%. Failure across both types increases rapidly after 8 years. However, the authors postulate that the type and rigidity of the post material is less relevant to long-term survival of the tooth than the height of the ferrule.

DOI: 10.1038/sj.bdj.2017.1066

The pros and cons of mixed practice

Navigating payer heterogeneity in the United States: lessons for primary care

Liauw W, McCorry D, Bazemore A. *J Prim Health Care* 2017; **9**: 200–203

Hybridisation may lead to innovation, complication and privatisation

Having a number of different income streams (hybridisation) has been a feature of UK general dental practice for many years. The situation of general medical practitioners in the US is similar, reimbursed by government-funded Medicare and Medicaid and by private insurers. The system is described as complex and inefficient, and as a fee-per-item remuneration, may incentivise over-diagnosis and over-treatment.

There is evidence that hybridisation and market forces encourage innovation, encouraging expanded hours, walk-in clinics and video consultations. Payers are experimenting with different payment models to provide greater efficiency. However, hybridisation is administratively complex with different payers having individual requirements for reporting and quality measures. Administrative costs have more than doubled to US\$315 billion in the past 10 years.

Because of the complexities and costs of hybrid practice, some practitioners in the US are moving to an independent system of primary care, charging a monthly fee for the service provided direct to the patient. These providers report that they have 'more availability, more time per encounter and lower overhead costs'.

DOI: 10.1038/sj.bdj.2017.1068

68% increase in self-harm by girls aged 13–16

Incidence, clinical management and mortality risk following self harm among children and adolescents: cohort study in primary care

Morgan C, Webb RT *et al.* *BMJ* 2017; **359**: j4351

Self-harm may be related to poor body image

Using electronic health records from 674 UK medical practices, the authors looked at data on 16,912 children and adolescents (73.3% ♀, 26.7% ♂) aged 10–19 who were recorded as self-harming during 2001–2014.

The annual incidence of reports from practices in socially deprived areas was increased when compared to those from less deprived areas. Those from socially deprived areas were also less likely to be referred to mental health services, illustrating the 'inverse care law where the quantity or quality of healthcare provision is inversely associated with the level of need in the population'. The risk of unnatural death (suicide or drug/alcohol poisoning) is raised in the self-harm cohort.

Of relevance to dentistry, the incidence of self-harm in adolescents is probably underreported. It is speculated that dissatisfaction with self appearance has increased two-fold in girls aged 12+ and may be a contributory factor to self-harming. Thus, dental appointments (with requests for cosmetic treatment?) may be opportunities to address otherwise unnoticed behaviours.

DOI: 10.1038/sj.bdj.2017.1067

Chronic fibrosing osteomyelitis of the jaws (CFOJ)

Chronic fibrosing osteomyelitis of the jaws: an important cause of recalcitrant facial pain. A clinicopathological study of 331 cases in 227 patients

Goldblatt LI, Adams WR *et al.* *Oral Surg Oral Med Oral Pathol Oral Radiol* 2017; **124**: 403–412

A possible cause of chronic 'dental' pain in middle aged adults

CFOJ is a condition which mimics dental pain but to which dental interventions offer no improvement. It has been known previously by other names (Ratner bone cavity, ischaemic osteonecrosis amongst others) but the authors suggest CFOJ is the most appropriate classification. Patients (n = 227, mean age 53) were sourced from a single endodontic practice between 2007 and 2013. Females outnumbered males 7:1.

Typified by intractable jaw pain, the bony lesions do not appear on standard intra-oral or panoramic radiographs but are visible on CBCT. They are most commonly found in the posterior regions but multiple sites are not unknown. Intra-oral symptoms include pain on palpation of the alveolar bone. A carefully placed local anaesthetic injection into the lesion eliminates the pain temporarily. Treatment involves surgery and curettage of the lesions. Repeat surgery is sometimes required but most subjects reported improvements after one procedure.

DOI: 10.1038/sj.bdj.2017.1069