

# **Dental PBRN Newsletter**

Winter 2007

Welcome to the Dental PBRN quarterly newsletter! This newsletter is designed to provide you a synopsis of the contents of our website, <u>http://www.DentalPBRN.org</u>.

You can also view the projects for which we are currently recruiting dental practitioners, as well as suggest and view new research ideas.

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**Contact Us** 

provide the foundation for you to begin on a project if you have not already done so.

When you visit our website you can complete your online training course that will

## First Annual DPBRN Practitioner-Investigator Meetings

First annual meeting for HealthPartners and Minnesota DPBRN practitionerinvestigators

HealthPartners and Minnesota DPBRN practitioner-investigators held their first annual meeting on October 19, 2006. The meeting provided a forum for members to discuss important clinical questions that should be addressed in DPBRN studies, and to share their experiences about participating in DPBRN. Because DPBRN is committed to being a practitioner-driven network, this meeting was designed to help shape DPBRN's future activities.

Our Mission: "To improve oral health by conducting dental practice-based research and by serving dental professionals through education and collegiality." Practitioner-investigators interacted in small groups during "breakout" sessions. Evaluations of the meeting provided by attending practitioner-investigators indicated that these discussions were the highlight of the meeting. These discussions also led to suggestions for future DPBRN studies:

- Assessment and guideline development for cracked tooth syndrome
- Long-term prognosis for endodontically-treated maxillary teeth
- Excessive wear causes, role of diet, how to treat sensitivity
- Diagnosis (including technology) and treatment of incipient occlusal lesions
- When to place a crown to prevent cusp fracture
- Staging process for fracture
- Progression of pulpitis
- Oral facial disease such as sleep apnea
- Longevity of large intracoronal restorations
- Patient compliance and patient experience
- Bisphosphonate treatment
- Dry mouth and medications, when are they a significant risk for caries?
- How much tooth structure should be removed for cavity preparation?
- At what depth should we restore caries?
- What preventive measures work best for caries?
- When is biannual prophylaxis and scaling of value?
- Comparison of endodontic treatment to implant
- When should you restore vs. extract?
- Long-term success of bridges
- Repair vs. replacement of restorations
- Impact of oral habits on health

#### Continued

- Fluorosis: prevalence and issues related to fluoride use
- Occlusal interferences: what is their impact?
- Sinuses and relationship to dental issues
- Salivary diagnostics
- Oral cancer
- Impact of economics and reimbursement on decision-making and dental care

Practitioner-investigators were welcomed by Andrew Nelson, Executive Director of the HealthPartners Research Foundation. Dr. Bruce Pihlstrom of the National Institute of Dental and Craniofacial Research (NIDCR) spoke on the NIDCR's national role in promoting the dental practice-based research networks and introduced Dr. Donald DeNucci, NIDCR's new liaison to DPBRN. Dr. Gregg Gilbert of the University of Alabama at Birmingham updated practitioner-investigators on the overall progress of the network and Dr. Ivar Mjör of the University of Florida presented preliminary results from DPBRN Study 1.

Local speakers included Bobette Godding, manager of the HealthPartners Office of Research Subjects. She addressed the group regarding human subjects issues, including the elements of informed consent. Merry Jo Thoele, Regional Coordinator, presented an update on recruitment, enrollment, and Study 1 and Study 2 activities. Dr. Brad Rindal, Principal Investigator for the Minnesota region of DPBRN, led an open discussion. Post-meeting evaluations of the meeting by the attending practitioner-investigators were very positive. The meeting underscored the importance of having practitioner-investigators lead DPBRN activities and chart its future directions.



## First annual meeting for Kaiser Permanente Northwest (KPNW) and Permanente Dental Associates (PDA) DPBRN practitioner-investigators

KPNW and PDA DPBRN practitioner-investigators held their first annual meeting in Portland, OR, on October 21, 2006. Participants gathered to discuss the DPBRN studies and share their experiences. This Saturday meeting was well-attended and provided a great opportunity for practitioners to discuss clinical practice and research issues amongst themselves and with Dr. Bruce Pihlstrom and Dr. Donald DeNucci from NIDCR, Dr. Gregg Gilbert from the University of Alabama at Birmingham, and Dr. Ivar Mjör from the University of Florida.

## Continued

The Tigard clinic was the first in DPBRN to implement and complete Study 2, *Reasons for placements of resorations on previously unrestored surfaces.* Dr. Dan Pihlstrom, who was the Master of Ceremonies, presented Study 2 results from the Tigard Clinic. Drs. Pihlstrom, Jeff Houtz, Mike Grishman, and Greg Bowers (see photo) received certificates of participation for completing Study 2. Drs. Bruce Pihlstrom and DeNucci discussed NIDCR's role in promoting dental practice-based research networks. Dr. Gilbert updated PDA practitioners on the overall progress of the network, and Dr. Mjör presented preliminary data from Study 1. Dr. Jeffrey Fellows, Principal Investigator for the KPNW region, described two DPBRN studies (Nos. 7 and 12) about the incidence and risks of osteonecrosis of the jaws. Also attending the meeting were Dr. John Snyder, Associate Director for Clinical Effectiveness, and Nancy DeRoos from PDA. Attendees from KPNW's Center for Health Research (CHR) included Sally Jo Little, KPNW Regional Coordinator and Gail Morgan, KPNW Project Manager in addition to Dr. Fellows.

Attendees separated into small groups to discuss either the studies; transition of research into practice; or using the DPBRN website. When the groups came back together to summarize their discussions, the information from each breakout session was electrifying. Practitioner-investigators were very interested in receiving study results (overall, regional, and individualized) as soon as practicable. They would welcome opportunities to discuss practice-based research with practitioners from other regions and compare procedures and outcomes. The groups also generated suggestions for several future studies: cracked tooth syndrome, materials used to repair fractured teeth or teeth at risk for fracture, attrition wear on anterior teeth, and treatment of abfraction lesions. Overall, the event was a big success and attendees had a great chance to share information about ongoing and planned studies.



## **Future Meetings**

## First Annual DPBRN Meeting for Florida and Georgia practitioners

The first annual DPBRN meeting for Florida and Georgia practitioners will be held January 5th and 6th at the Best Western Gateway Grand Gainesville, FL. If you have any questions, please contact the Florida Regional Coordinator, Deborah McEdward, at dmcedward@dental.ufl.edu or by telephone at (352) 273-5848.

## First Annual DPBRN Meeting for Alabama and Mississippi practitioners

The first annual DPBRN meeting for Alabama and Mississippi practitioners will be held March 9th and 10th at the Ross Bridge Golf Resort and Spa in Birmingham, AL. If you have any questions, please contact the Alabama/Mississippi Regional Coordinator Andi Mathews, at ahmathews@uab.edu.

## Tip of the Month

Tip of the month for December provided by Ken Tilashalski, DMD, Associate Professor, Department of Diagnostic Sciences, University of Alabama at Birmingham School of Dentistry. Email address: drt@uab.edu

## **New Treatments for Fever Blisters**

Fever blisters, cold sores, and herpes labialis are all synonyms for the recurrent lesions associated with the Herpes Simplex Virus (HSV). About one-third of people in the US experience these painful and unsightly lesions on their lips.

There are several treatment choices available. For any treatment to be most effective, the earlier it is used, the better. Many people who suffer with recurrent HSV report prodromal symptoms. They often describe a sensation of tingling, soreness, itching, or burning prior to a lesion outbreak. This period of prodrome is the ideal time to start treatment.

There are several new medications that have been shown to be effective in decreasing lesion pain and healing time.

-Abreva is available as a cream and it is the first over-the-counter topical medication that has been approved by the FDA to shorten healing time of herpes labialis.

- Denavir (penciclovir) is a new prescription cream that works very well in reducing the pain and duration associated with recurrent HSV.

-Valacyclovir (Valtrex) is dispensed as a caplet and recently gained FDA-approval for the treatment of fever blisters in adults. The recommended dosage is 2 grams taken by mouth twice in one day.

Hopefully, adding these new treatment regimens to your armamentarium will result in happier, healthy patients!

If you would like to have your Tip of the Month featured in our newsletter and our website, please contact Dr. Sonia Makhija at smakhija@uab.edu.