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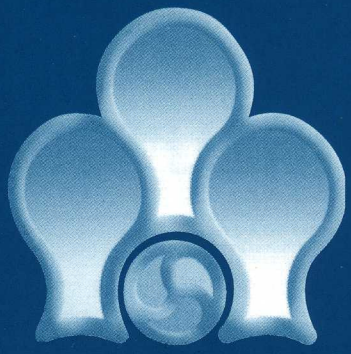

Towards Continuing Oral Health Improvement in Asia: Issues and Challenges

The official journal of the Asian Academy of Preventive Dentistry

Ref 061

AN EXPERIENCE IN SUPPORTING SMOKING CESSATION TREATMENT

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Aim: The aim of this report is to discuss the usefulness and effect of smoking cessation treatment in dental clinic. **Material and method:** Seven patients (6 males, 1 female) aged between 27 -65 years (mean= 50 years) who visited Kosei dental clinic from September 2009 to May 2010 took part in the smoking cessation treatment. The level of smoking was measured using the TDS (Tobacco Dependence Screener) and Brinkmann Index. Varenicline Tartrate was used for a recommended treatment period: The treatment period of three months. Non smoking confirmation was determined by subjects' diary records, personal interview and measurement of the Carbon Monoxide level. Success criteria of the treatment was subject abstain from smoking for one month after treatment. The non smoking follow-up support followed the original clinical schedule under the guidance of the dentist. **Result:** Six of the seven who stopped smoking succeeded by using this medicine. The main motivations for stopping were: three people wanted the implant to be successful, two gave health reasons and, two other for family reasons. Findings also suggested that the treatment difficulty did not agree with the degree of dependence and the level of the smoking. Three people stopped taking the medicine because of nausea and stomach aches. Despite stopping in taking the medicine, they did not continue smoking. **Discussion and Conclusion:** This study showed that dental problems can be effective in motivating subjects to cease smoking**.** In addition preventive dentistry procedures which included smoking cessation program were useful in supporting patients opting for cessation smoking. Dental hygienist was also recognized to be meaningful in conducting smoking cessation program.

(edited – Smoking Cessation)

Ref 062

A CASE OF XEROSTOMIA WITH DENTAL IMPLANT TREATMENT

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Aim: The aim is to discuss the influence of xerostomia caused by Sjogren's syndrome (SS) on implant treatment and oral hygiene maintenance. **Method:** This is a case report of a 45-years-old female, (156cm tall, 57kg) and a nonsmoker who visited the clinic for the first time on 1st August 1983. Oral examination showed an edentolous maxilla, 8 remaining teeth in the mandible. Main complaint was dissatisfaction with wearing upper jaw dentures. Implant surgeries were performed seven times between 19 February 1984 to 19 April 2009. As of 2010, 20 implants had been placed. During the implant treatment, all of the remaining teeth had to be extracted because of cavities. In 2009, SS was diagnosed. The patient had been receiving a regular maintenance care program and oral wetting care program. The wetting care program consisted of salivary glands massage, health education on rehydration, eating habits, and how to use the wetting gel oral spray. From May 2010, pilocarpine tablets have been administered to improve oral dryness. Progress is been observed, and follow-up is continuing. **Results:** The survival rate of the loaded 20 implants was 100%. Finally, the patient became completely edentulous. The oral hygiene of the patient has remained in good condition. **Discussion and Conclusion:** For this case, xerostomia caused by SS did not appear to influence the retention of implants. Oral dryness is a problem in the prevention of caries. It was therefore necessary to make sure that dental hygienist perform the maintenance associated with oral dryness and SS. Scheduled follow-up were recommended.

(edited - prevention and special care dentistry - Implant)

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Ref 063

ORAL BREATHING, MALOCCLUSION AND MALODOR IN ORTHODONTIC PATIENTS

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Aim. Oral breathing (OB) has been reported to be one of the causes of malocclusion and has also an influence on oral condition to induce malodor. The aim of this study is to investigate oral breathing, malocclusion, malodor and general oral condition among orthodontic patients in our clinic. **Methods**: Thirty four (11 male, 23 female) orthodontic patients with an average age of 23.1 years-old were examined from 2006 to 2010 in Kosei dental clinic (Chiba, Japan). Eleven patients (male 7, female 4, average age 16.0) complained of OB, but not in 23 patients (male 4, female 19, average age 21.3). Nasal blockage, Open bite and double protrusion, DMF teeth, plaque score, saliva test, streptococcus mutans ratio (streptococcus mutans / the whole streptococci), lactobacilli level, exhalation, oral mal odor and anaerobic bacteria level were investigated. **Result**: Six OB patients were found to have open bite while double protrusion was observed in 2 OB patients. Those without OB had neither open bite nor double protrusion. Eight OB patients and one without OB had nasal blockage. The average measurement of malodor in OB patients was oral (40.8) and exhalation (36.4). On the other hand those without OB measruemetns were; oral (38.6), exhalation (41.8). The average Lactobacilli level of OB patients was 0.70, without was 0.05 ($p \leqq 0.05$). The average anaerobic bacteria level and streptococcus mutans ratio in OB patients was a little higher. **Discussion and conclusion**: There was no difference between OB patients and no OB patients in terms of malodor in orthodontic patients. However OB patients had more open bite, double protrusion and nasal blockage. Increased Lactobacilli level, anaerobic bacteria level and streptococcus mutans ratio and poorer oral condition was found in orthodontic patients with OB relative to those without

(edited, Halitosis).

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