

eviDent scores runs

The second eviDent Dental Practice Based Research Network (DPBRN) Annual Meeting was held 9th October at the ADAVB, and proved to be just as successful as the first.

About 40 were in attendance, including eviDent Associate Investigators, eviDent Chief Investigators, eviDent Research Collaborators, ADAVB Councillors, and other invited guests.



The evening meeting featured a status update on eviDent projects (current and proposed), a panel discussion about integrating research into practice, as well as a very informative presentation about dry mouth tips to help manage affected patients.



Guests and speakers listen in on the panel's discussion

Prof Mike Morgan, eviDent Foundation Director, eviDent Chief Investigator and eviDent DPBRN Committee Co-Chair, welcomed everyone to the meeting, and reported on some key highlights of the last 12 months, including:

- The inaugural annual meeting, which provided a great opportunity for those in attendance to learn more about eviDent projects, exchange ideas and network with eviDent members, stakeholders and collaborators
- A hands-on workshop, which developed out of the first annual meeting; 'Preparing my first eviDent project proposal', which was led by Emeritus Professor Louise Brearley Messer AM and Dr Denise Bailey. Participants of the small workshops all agreed that the workshop improved their overall knowledge about how to plan and design an eviDent project proposal
- The continuing collaboration with PEARL (Practitioners Engaged in Applied Research and Learning) for their 'Practitioner Investigator perceptions of participation and information dissemination' project (which eviDent project 001 will compare results with), and 'A case study of diagnosis, treatment and maintenance/ recall of periodontal patients by general dentists' (which eviDent project 006 will compare results with)

- eviDent's presence on the program of major conferences, including the ADAVB's Convention, ACAD, and the Australian Society of Periodontology's Conference. eviDent has also been invited to present at the ADA Inc Congress in April next year.
- eviDent project 004's fact sheets, 'What is dry mouth?' and 'Care of a dry mouth', which have been circulated to all eviDent members, ADAVB members and are available from the eviDent website (www.evident.net.au). The project has also submitted its final report to IADR

Prof Morgan thanked the eviDent DPBRN Committee (Prof Morgan, Dr Bailey, Prof David Manton, and Emeritus Prof Brearley Messer AM, Dr Tony Robertson, Dr Mary Miller and Dr Jeremy Sternson) for their endless efforts and contributions. He also thanked Dr Simon Wylie, who had recently resigned from the Committee due to other commitments, and welcomed Dr Tim Stolz. The eviDent Foundation Board was overwhelmed with the response to the applications they received to their advertisement for Dr Wylie's replacement, and particularly impressed with the calibre of the applicants. Any one of the applicants could have been appointed, but, given that there was only one vacancy, the tough decision had to be made, and the Committee looks forward to welcoming Dr Stolz at their next meeting in December. Dr Stolz brings with him an active interest in practice based research, as well as extensive committee experience.



Dr John Sheahan and E/Prof Louise Brearley Messer AM

Status update – eviDent projects by Dr Bailey, eviDent Foundation Chair, eviDent Chief Investigator and eviDent DPBRN Committee member.

eviDent project 001, Evaluation of eviDent

Dr Bailey reported on the two surveys, 'Practitioner perceptions of participation in the eviDent network' which was completed by 18 of the 34 eligible Associate Investigators at the time and a second questionnaire designed for, and completed by 21 of the 26 involved with eviDent as a data collection practice with the implant complications project.

Of the Associate (practitioner) Investigators who responded to questionnaire 1, the majority rated the 'means to influence clinical research' as the most important benefit of being an eviDent investigator. The majority rated 'opportunity to improve clinical procedures' as the most important (potential) benefit to practice, and 'means to contribute directly to the evidence-base of dentistry' and 'means to "give back" to the dental profession' as the most important (potential) benefits to the community and profession.

When it came to detractors/ burdens, Dr Bailey stated that the results reported eviDent Associate Investigators rated 'completion

of eviDent research training' as the single most significant detractor. As a result, the project team recommended that, in addition to the training being available online, a training day should be held each year, to ease the burden.

Of the data collection practice respondents, the majority reported that:

- they felt informed about the project and what was required
- the ongoing communication with the research team was adequate
- practice staff felt preparation for the project was sufficient
- practice staff were happy to be part of the project
- they were happy to be involved in another project as a data collection practice

When asked whether they would like to become an eviDent Associate Investigator, Dr Bailey reported that the results indicated most neither agreed nor disagreed, and the rest split between agreed and disagreed. Again, as a result, the project team recommended that another category of membership be created for those wanting to assist as 'data collection' practices.

Dr Bailey reported that all 13 of the project team's recommendations were accepted by the eviDent DPBRN Committee, some of which have already been implemented, and others are in progress.

The next steps for this project are:

- compare results with PEARL
- implement recommendations
- progress other areas of evaluation.

eviDent project 002, A 5-year retrospective assay of implant complications in private practice

Dr Bailey reported initial findings from the project, including:

- number of patients: 4128
- number of restorations: 6368
- number of implants: 8552
- number of implants restored by enrolled practitioners: 5509 v number of restorations placed: 3979
- number of implants placed by enrolled practitioners: 4163

The project team has defined a complication as 'anything that requires the practitioner to revisit the case other than for ongoing maintenance', and have split the complications into three main groups:

- surgical – at the time of surgery
- biological – including post operative (≤ 6 weeks) and later biological (> 6 weeks)
- restorative

The project team has a lot more work to do, including further analysis of the outcome and management of complications and the identifications of trends, risk factors etc. This analysis will help the team formulate treatment planning and management guidelines.

eviDent project 003, Molar Incisor Hypomineralisation (MIH)

Dr Bailey provided an overview of the project, together with some initial findings. Of particular interest to the audience was the 'take home messages', including:

- MIH is common! If you look for it, you will see it
- Don't watch and wait! Diagnose and plan as soon as possible
- Once diagnosed:
 - o Treatment is dependent upon defect colour, location and presence of post eruptive breakdown
 - o Affected first permanent molars will need more treatment than unaffected first permanent molars
 - o Re-treatment of restorations is common, and so it is best to warn parents about this
 - o Timed extraction with orthodontic advice may be necessary

eviDent project 004, The PREVENT study: reducing the X factor – understanding the relationship between general practice prescribing

and xerostomia

Dr Bailey provided an overview of the project and reported some initial findings. Some of the positive findings from the project include:

- Significant improvement in General Medical Practitioners' awareness of dry mouth
- Significant improvement in General Medical Practitioners' ability and willingness to incorporate identification of dry mouth and management of dry mouth into their clinical practice
- Patients were comfortable receiving dry mouth advice from both General Medical Practitioners and Dental Practitioners
- Dentists were comfortable with the advice given to their patients by the General Medical Practitioners

The next steps include:

- Further consideration of possible under-identification of dry mouth by dentists
- Further training for dentists to better prepare them for identifying and managing dry mouth
- Consideration of the model being extended to a wider population of General Medical Practitioners, other chronic health conditions or implemented in other health practitioner settings.

Future Projects

eviDent project 005, Children's Dental Program

Dr Bailey reported that this project aims to:

- assess the value of school dental screening
- improve the rate of attendance for children at a community health clinic
- promote regular and timely dental check-ups that provide preventively focused oral health care for children at risk



Drs Samantha Lew and Tan Nguyen (Research Collaborator, eviDent project 005)

eviDent project 006, Diagnosis, treatment and maintenance of periodontal patients by general dentists

Dr Bailey reported that this project aims to determine the criteria used in general practices to:

- establish a diagnosis of health, gingivitis or mild, moderate or severe periodontitis.
- triage periodontal care of patients with periodontitis among the dental hygienist, general dentist and periodontist.
- determine the interval of maintenance & recall of patients

General dentists are encouraged to complete the online survey (available in the members' only section of the ADAVB website), when available. For more information about the survey, please

contact Meaghan Quinn ask@evident.net.au or 8825 4603.

Other projects in the pipeline include:

- investigation of the longevity of anterior resin bonded bridges
- identification of unrecognised diabetes and pre-diabetes in a dental setting
- ideas generated by you!

Panel Discussion: Integrating research into your daily practice

moderated by E/Prof Brearley Messer AM. Panel: Dr Mary Miller (Associate Investigator, eviDent project 001), Dr Jeremy Sternson (Associate Investigator, eviDent project 002), Dr Margarita Silva (Associate Investigator, eviDent project 003), Dr Jane Crowe (VicReN Member, eviDent project 004) and Mr Tan Nguyen (Research Collaborator, eviDent project 005).

In response to questions posed by E/Prof Brearley Messer, the panel reported on their experiences with eviDent projects, and how it affects their practice, patients and staff, including:

- patients (of the medical clinic) enjoyed asking questions about oral health
- the involvement is both stimulating and rewarding
- the collaboration is interesting and educative
- patients and staff were apprehensive initially, but soon became enthusiastic supporters
- involvement provided an opportunity to be involved in translational research about a strong topic of interest for Melbourne practitioners
- eviDent projects have the opportunity to inform policy
- the support provided by eviDent is encouraging, including training, ethics applications, protocol development and links with academics (Chief Investigators)



From left: Drs Jane Crowe, Jeremy Sternson, Margarita Silva, Mary Miller and Tan Nguyen

Dry Mouth – tips to help manage your patients by Dr Margaret Stacey, Member of eviDent project 004 team.

Dr Stacey gave an informative and practical presentation about dry mouth, and how to help patients affected by it. After providing an

overview of the condition, and some of the causes of dry mouth, Dr Stacey provided advice on how to assess saliva, the conditions associated with salivary deficiency and provided some practical advice to help patients improve their xerostomia. The presentation was well received, and generated a number of questions from the audience.

Closing remarks by Ms Meaghan Quinn, eviDent Foundation Executive Officer

Ms Quinn reiterated the value of DPBRNs as identified within the literature, all of which had been highlighted by the panellists, and the findings from the evaluation surveys.

Ms Quinn encouraged those present to consider what clinical questions they may wish to find the answer to, and write them down on the eviDent project proposal form (available online at www.evident.net.au) and discuss them with others whilst networking after the formal presentations.

Closing remarks by Mr Garry Pearson, eviDent Foundation CEO/Secretary

The evening concluded with Mr Pearson reflecting on the Foundation's progress to date, and recognised the considerable in-kind support provided by the Board, the Committees, the project teams (including practice staff), the ADAVB and the Oral Health CRC.

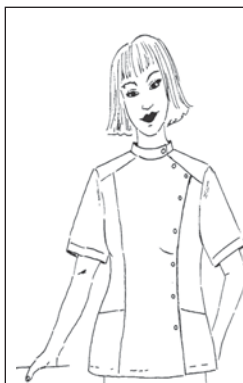
He acknowledged Dr Bailey's award for decay prevention, and encouraged projects to consider other competitive grant opportunities.

Mr Pearson recognised the significant support provided by a number of societies, and noted that eviDent depends on and appreciates the generosity of the ADAVB, the Oral Health CRC and the profession. He then invited those present to consider making a donation to the eviDent Foundation, and asked that they encourage others to do so as well.

Mr Pearson thanked everyone involved with eviDent, including:

- The academics, fitting eviDent into their busy schedules and being so enthusiastic and supportive
- The research support team - Karen and Wendy, for turning their hands to anything and everything
- The eviDent DPBRN committee members for their ongoing contributions
- The ADAVB and the Oral Health CRC for their support and resources, especially Ms Quinn, whose personal commitment to eviDent is a key success factor for the Foundation
- Various societies for their financial support and encouragement
- Collaborators both in Australia and the United States
- And most of all, to the reason eviDent is here, the practitioners, for becoming involved and giving up their time, expertise and records!

For further information about eviDent visit www.evident.net.au, email ask@evident.net.au or phone Meaghan Quinn on (03) 8825 4603.



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