eviDent Annual Meeting

Reviewing the past to learn for the future

This year's interactive eviDent Dental Practice Based Research Network (DPBRN) Annual Meeting program included:

- Findings from two of eviDent's projects that show links between your patients' oral and general
- A preview of projects in the pipeline
- A discussion about the place of clinical guidelines in dentistry; and
- A brainstorming session for new eviDent projects.

Attended by about 40 people, including eviDent Associate Investigators, eviDent Chief Investigators, eviDent Research Collaborators, ADAVB Councillors, and other invited guests, the evening was not only informative, but also provided a great opportunity to network with new and old friends.

What's in it for me?

by Dr Tony Robertson, eviDent Associate Investigator and eviDent DPBRN Committee Co-Chair

Dr Robertson welcomed everyone to the third eviDent Annual Meeting and advised that, rather than the usual report on the various research projects, this year's event would indulge in some navel gazing as eviDent reviews the past to see what can be learnt for the future.

Dr Robertson gave a personal account of his involvement with eviDent as a data collection practice, reporting that whilst at times he feels like he is waiting for something that is never going to happen, and eviDent has experienced a learning curve, eviDent is optimistic that the outcome will be well worth the wait and the best is yet to come.

Beyond the mouth - links between your patients' general and oral health

by Dr Denise Bailey, eviDent Foundation Chair, eviDent Chief Investigator and eviDent DPBRN Committee member

Dr Bailey flagged that it is increasingly accepted that practitioners should view patients holistically, that is, as people, not as a group of diseases; the whole person is made up of interdependent parts and if one is not working properly then all the other parts will be affected. With this in mind, Dr Bailey shared some of the oral and general health interactions that were found as part of two eviDent projects, and encouraged those present to keep the whole person in mind.

The PREVENT Study found that symptoms significantly associated with a dry mouth diagnosis include dry lips, sleep disturbances and heartburn/ acid reflux. This suggests that it would not be unreasonable to ask patients about their sleeping habits, and doing a routine saliva examination for all patients with a history of sleep apnoea, while remembering the importance of referral for further investigation where necessary.

The Implant Complications study has started to create health profiles of patient types commonly presenting for implant treatment. Preliminary analysis suggests that the biological complication rate is 10/100 for non smokers, compared with 13/100 for smokers. It also suggests that the biological complication rate is 14/100 for patients with psychiatric

Diagnosis, treatment and maintenance of perio patients

by Dr Susan Wise, eviDent Associate Investigator

Hot off the statistician's desk, Dr Susan Wise provided a snap shot of preliminary findings, just hours after the project team had seen the data.

So far, the study has found that general

- are giving the majority of oral hygiene instruction, but it is unclear what they are recommending, e.g. floss, interdental brushes etc;
- are doing the majority of scaling and root planing, although specialists take on a lot more root planing in cases of more severe disease; and
- are mostly referring patients with severe disease to specialists for root planing, but some undertake periodontal surgery for moderate

Investigation of the longevity of anterior resin bonded bridges

by Dr Gordon Burt, Associate Investigator

Dr Gordon Burt reported on a project in the pipeline that aims to evaluate the survival and clinical performance of anterior bridges with a specific tooth preparation design provided to a patient cohort by prosthodontists.

The project's objectives are to:

- assess the overall longevity of resin bonded bridges (history of debonds, re-bonds and re-makes);
- compare the long-term survival of resin bonded bridges with different tooth preparation designs used by prosthodontists in Victoria; and
- determine the incidence and reasons for any failures/ complications (e.g. caries and periodontal disease of abutment).

Identifying new cases of diabetes in the dental practice: the iDENTify study

by Dr Andre Priede, Associate Investigator

Knowing that one in five adults have undiagnosed diabetes, Dr Priede reported on another project in the pipeline that seeks to:

- describe the distribution of unidentified diabetes/ pre-diabetes amongst patients attending private dental practices
- determine the impact of screening on patient compliance with referrals and management plans from the perspective of the patient, the dentist and the physician; and
- identify the public benefit and economic advantage or disadvantage of the program as compared with current practice.

Subject to funding approval, eviDent will once again work with VicReN, the Victorian Primary Care Practice-Based Research Network (who worked with eviDent on the PREVENT study), to:

 evaluate the potential for dental clinics to improve health outcomes for patients through earlier diagnosis of diabetes:

- improve cooperation between medical and dental professionals;
- enable assessment of patient referral and subsequent management; and
- provide optimal management of patients with diabetes.

Pulpal regeneration – the new buzz in endo

by Dr Jeremy Sternson, eviDent Foundation Director, eviDent Associate Investigator and eviDent DPBRN Committee member

Dr Sternson demonstrated how easy it is to put a project proposal before the eviDent DPBRN Committee. He simply had an idea to establish a correct/ proven treatment protocol for pulpal regeneration in teeth with open apices, considered how the project could be investigated in a dental practice setting, completed a project proposal form and had it assessed.

Clinical quidelines – best practice or restrictive practice?

by Dr Richard Clark, eviDent Chief Investigator and A/Prof Hanny Calache, Director Clinical Leadership, DHSV

Dr Clark and A/Prof Calache, provided information about the purpose of clinical guidelines, examples of DHSV guidelines and how guidelines are used in other clinical disciplines before leading a discussion about their place in dentistry and the benefits/disadvantages of guidelines for practitioners.

The audience considered which areas of dentistry could there/ should there be guidelines for and the DPBRN Committee will discuss some of the suggestions at their next meeting.

Where to next?

by Prof David Manton, eviDent Chief Investigator and eviDent DPBRN Committee member

Prof Manton reiterated the importance of eviDent's membership driving the research program, with guidance from Melbourne Dental School academics. Ideas generated in the room ranged from caries risk assessment in prosthodontics to prevention and education in schools. Practitioners were encouraged to engage with their patients to consider what might be of interest/ benefit to them, e.g. why dentists prescribe different fissure sealants. Again, the

eviDent DPBRN Committee will consider these suggestions at their next meeting.

Closing remarks

by Mr Garry Pearson, eviDent Foundation CEO/ Secretary

The evening concluded with Mr Pearson suggesting that things often move too fast for us to reflect, demanding tasks give us no time to think and we barely notice the lack of meaning until we are forced to stand still because of illness, tragedy or job loss. In spite of our hurry, he suggested we cannot stop life's dynamic of self-reference or the human need for meaning. He quoted Margaret Wheatley, author of Leadership and the New Science: "if we want to influence change, anywhere, we need to work with this powerful process rather than deny its existence".

He referred to the McKeon Review, which states: "...research must be routinely performed as part of healthcare delivery and there must be greater linkage between healthcare providers and research organisations ... there is need for greater translational research, including health services research that identifies opportunities and strategies to increase health system efficiency and research into evidence-based healthcare and policy". This report validates the work of the eviDent Foundation, and Mr Pearson congratulated those involved with eviDent, as they are engaged in world leading practice based research. eviDent provides opportunity: to find solutions to old problems, to find solutions for new and emerging issues, to improve treatment outcomes, obtain better insights, create better practitioners and provide meaningful engagement.

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 Board and committee members for their ongoing contributions
- The ADAVB and the Oral Health CRC for their support and resources
- Donors for their generous contributions
- 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)



