Dentists can identify undiagnosed diabetes

In a recent study, “Identification of unrecognized diabetes and pre-diabetes in a dental setting,” in the Journal of Dental Research, researchers at Columbia University College of Dental Medicine found that dental visits represented a chance to intervene in the diabetes epidemic by identifying individuals with diabetes or pre-diabetes who are unaware of their condition. The study sought to develop and evaluate an identification protocol for high blood sugar levels in dental patients and was supported by a research grant from Colgate-Palmolive. The authors report no potential financial or other conflicts.

“Periodontal disease is an early complication of diabetes, and about 70 percent of U.S. adults see a dentist at least once a year,” said Dr. Ira Lamster, dean of the College of Dental Medicine, and senior author on the paper. “Prior research focused on medical settings. Oral health-care settings have not been evaluated before, nor have the contributions of oral findings ever been tested prospectively.”

For this study, researchers recruited approximately 600 individuals visiting a dental clinic in Northern Manhattan who were 40 years old or older (if Hispanic or non-Hispanic white) and 50 years old or older (if non-Hispanic white), and had never been told 30 years old or older (if Hispanic or non-Hispanic white), and had never been told they have diabetes or pre-diabetes. Approximately 530 patients with at least one additional self-reported diabetes risk factor (family history of diabetes, high cholesterol, hypertension or overweight/obesity) received a periodontal examination and a finger stick, point-of-care hemoglobin A1c test. In order for the investigators to assess and compare the performance of several potential identification protocols, patients returned for a fasting plasma glucose test, which indicates whether an individual has diabetes or pre-diabetes.

Researchers found that in this at-risk dental population, a simple algorithm composed of only two dental parameters (number of missing teeth and percentage of deep periodontal pockets) was effective in identifying patients with unrecognized pre-diabetes or diabetes. The addition of the point-of-care A1c test was of significant value, further improving the performance of this algorithm.

“Early recognition of diabetes has been the focus of efforts from medical and public health colleagues for years, as early treatment of affected individuals can limit the development of many serious complications,” said Dr. Evanthia Lalla, an associate professor at the College of Dental Medicine, and the lead author on the paper. “Relatively simple lifestyle changes in pre-diabetic individuals can prevent progression to frank diabetes, so identifying this group of individuals is also important. Our

Head west to San Diego for the AGD meeting

Researchers at the New York University College of Dentistry (NYUCD) recently surveyed otolaryngologists from New York State to help establish a referral protocol before performing a maxillary sinus lift.

The study, “New York state ear, nose, and throat specialists’ views on pre-sinus lift referral,” by M. T. Cote, S.L. Segelnick, A. Bastogi and R. Schoor, appeared in the February 2011 issue of the Journal of Periodontology and assessed the need to consult an ear, nose and throat (ENT) specialist in the pretreatment work-up.

Results showed that the majority (58.7 percent) of ENT specialists recommended a CT scan be done before sinus elevation surgery, even in the absence of symptoms. The greatest concerns of the ENT specialist that would warrant a referral were prior sinus surgery, severe sinus inflammation, and sleep apnea. The San Diego skyline and so much more awaits those who are heading to the Academy of General Dentistry Annual Meeting July 27–31. (Photo/San Diego Convention Center, courtesy of Corporate Helicopters)

Sinus lift referral protocol

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Domestic violence survivors

According to the American Psychological Association, nearly one in three adult women experience at least one domestic assault by a partner during adulthood, which translates into approximately 4 million American women who experience domestic violence during a 12-month period.

As a dentist in Kalamazoo, Mich., Brett Magnuson, DDS, performs a spectrum of procedures designed to give his patients a fresh start in life. In cooperation with the American Academy of Cosmetic Dentistry (AACD), Magnuson dedicates his time and cosmetic dentistry expertise to the Give Back a Smile (GBAS) program, which provides free consultations and dental treatments for survivors of domestic violence.

The need is great for those affected by domestic violence. “The AACD and I remain dedicated to helping these patients reclaim their smiles, their self-esteem, and ultimately, their lives.”

Victims of domestic violence who have suffered dental injuries can contact GRAS toll-free at (800) 773-GRAS (4227), or visit www.givebackasmile.com for more information. Survivors of domestic violence must make an appointment with a counselor, domestic violence advocate, social worker, or therapist to complete the application section of the GBAS application.

GBAS then reviews the application and turns it over to the dentists. If eligible, the AACD connects the survivor with a local GBAS volunteer, who has suffered dental injuries. If you would like to make any change to your subscription (name, address or to opt out) please send us a copy of your invoice or a copy of your subscription or contact Group Editor Robin Goodman at r.goodman@dental-tribune.com.

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