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<th>Title</th>
<th>Denture quality and patient satisfaction in elderly Chinese in Hong Kong</th>
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Divisional Abstracts: Southeast Asian Division

33 In vivo Evaluation of Cheeses Using Intra-Oral Caries Index Testing
K. J. TOUMBA* and M. E. CURZON (Department of Paediatric Dentistry, Leeds Dental Institute, Leeds, UK)

Cheeses are frequently recommended as snack foods which are safe for teeth. The aim of this study was to investigate the degree of caries minimisation of cheese slabs after exposure to four different cheddar cheeses using the intra-oral caries index test of Koukoulides et al. (1976). Four cheddar cheeses were used in this study. Sicke, block, spread and toay 10% sucrose and 10% sorbitol solutions were used as positive and negative controls respectively. Five adult volunteers with a DMFT score ≥2 wore a lower removable appliance with one guamer covered human enamel slab (1.5mm x 1.5mm x 3mm) in position on each tooth. A baseline surface microhardness (SMH) test was performed for each enamel slab using a Knoop diamond with a 100μg load. Each volunteer was instructed to immerse the appliance in the test or control solutions for 10 mins twice daily for a period of five days. 10g of the test cheeses were chewed by the volunteers to 60s to obtain a cheese/saliva slurry which was used to cover the enamel slabs for the 10 mins immersion periods. SMH testing was repeated after the five day testing period. The mean(SD) difference of SMH (%) between the control group (1+2 control = 21.42±4.55) and the 4 groups was 1.66±2.46. Cheese slices 0.20±0.99g; cheese block 0.90±0.99g, cheese spread 2.43±0.39 and cheese toay 1.41±0.79g ANOVA and Tukey's test analysis showed that sucrose was significantly (p<0.01) different to all of the other control groups. In conclusion the cheeses tested showed low cariogenic potential and can be regarded as safe for teeth.

35 Dental implant service in Hong Kong - demand and supply.
T.T. SHE* E.C.M. LO (Faculty of Dentistry, The University of Hong Kong)

Dental implant has been shown to be successful and has become an important treatment in the replacement of missing teeth. However, no information on the provision of dental implant service in Hong Kong was available. The objectives of this study were to describe the prevalence of dental implant treatment among Hong Kong adults, to find out factors associated with dental implant treatment among dentists, and to examine the characteristics of dentists who provided this treatment with those who did not. This study consisted of a mailed questionnaire survey of 160 randomly selected dentists in Hong Kong and a telephone survey of adult members of the Hong Kong Dental Association. 143 dentists were returned by the dentists and 314 adults were interviewed. Only 15% of the interviewees had heard of dental implant though the percentage was higher in the younger age and higher education groups. None of them had ever received dental implant. Most respondent dentists had received some form of dental implant training but the training varied widely. One-quarter of them had provided some form of implant treatment to their patients. Proportionally more dentists who provided dental implant treatment had received training involving real patients than dentists who did not. In conclusion, the prevalence of dental implant treatment among Hong Kong adults was very low. Yet a significant percentage of Hong Kong dentists had provided or potentially can provide this treatment.

37 The Profile of Partial Denture Patients Attending an Academic Institution.
S.B. Keng* and P.L.P. Loh (Faculty of Dentistry, National University of Singapore)

Patients who exhibit partial edentulism require the replacement of lost teeth to restore oral function and appearance. The type of patients seen together with the clinical condition they present would provide useful information to assist prosthodontic treatment planning. The aim of this study was to obtain basic information as regards to the presenting clinical conditions in the mouth together with the status of prosthesis in use. 310 clinical hospital denture patient records were randomly selected for the study. The data collected were from patients attending the Department of Removable Prosthodontics, National University of Singapore. The following related information were grouped together and extracted for the study: 1) Patient: face form, presence of teeth, restore oral function and appearance, and the patient's status; 2) Medical: previous oral surgery, 3) Prosthesis: DPO findings and Postural status; 4) Clinical Condition: occlusal classification, alveolar ridge, abutment teeth status, esthetics and aesthetic criteria of the prosthetic dentures; 5) Measurements: a) age, b) length presented with face form distribution of oral 46.3%, squint 28.9%, and tapering 20.8%. Patients receive due to lack of teeth distribution 53.6%, absence of teeth distribution 21.1%, and presence of teeth distribution 55.3%. 50.3% complained of poor retention of their present denture while 48.7% did not. Of the patients who had worn present denture for periods 60% used it for 1-5 years, 25% for 6-10 years, and 15% for 11 years or more. 85.5% of denture wearers had lost teeth. 67.5% of sample was satisfied with the present occlusion and esthetics effectively. No significant differences were found when the groups were compared. The findings showed that 10% of abutment teeth examined showed slight mobility. Examination showed 86.8% with marginal defects and 13.2% with porcussion. Caries were encountered in 27% of cases. Comparing upper and lower arches 37.4% of upper and 61.1% of lower presented with 2 saddle spaces of which only 5.5% of upper and 28.8% lower had poor ridges. The study showed that patients attending traditional dentistry were able to replace dentures for functional reasons and their esthetic appearance were not high priorities. The main reason for removal of prosthesis were not optimal and needed attention before commencement of prosthodontic treatment.

39 The Discharge of Lubricant from Dental Air Turbine Handpiece.
S.M. PONG* and J.E. DYSON (Oral Rehabilitation, Faculty of Dentistry, HKU)

Although not well accepted in standard text, lubricant discharged from dental equipment during routine procedures may contaminate the field of operation and compromise the results of handling techniques. The aim of this present study was to report on the discharge of lubricant from dental air turbine handpiece and to discuss its clinical significance in this context. Nine handpieces were evaluated by subneting the lubricant (VaVo Spry, VaVo, Germany) which was used to lubricate 4 examples of one brand of dental air turbine handpiece made in the U.S.A. according to the manufacturer's instructions. Each handpiece was then allowed to run on air at the manufacturers' recommended conditions for the pressure of the air supplied to the handpiece and the size and type of the air control valve. The lubricant was measured as the oil discharged on to the chair over a 40 minute period. Ranges of 1.0 to 1.5 mL were recorded for the lubricant oil discharged over time. One example of each of seven different models of handpiece was tested. For this handpiece, discharge was decreased and almost completely eliminated when the pressure of the air was reduced to below 200 psi. After standard lubrication using degassed VaVo Spry, the lubricant was retained. It was then allowed to run on air for 20 mins, and the lubricant was measured as the oil discharged 240 minutes later. At fixed time intervals the handpiece was used to determine the amount of lubricant discharged. All of the handpieces were both effective and demonstrated a complete discharge of lubricant over the entire test period. Most oil, however, being discharged in the first minute. Analysis of the data from Experiment 2, showed the lubricant (oil in the test) was found to be tanked in the behaviour of all the handpieces.

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40 DENTAL PATIENTS' RIGHTS IN HONG KONG
C.W. LAM, F.N.F. LEE, M.C.M. WONG, J.K.S. LUI (THE UNIVERSITY OF HONG KONG)

In Hong Kong, patients' rights and responsibilities became more concerned in recent years. Different authorities have proposed their patients' charters that were mainly related to the medical services. However, no related charter or guidelines has been made in dentistry. This research aimed to study the knowledge of the public on patients' rights and the extent of the public in exercising their rights in dental services. A telephone survey was conducted with a structured questionnaire on Hong Kong Chinese aged 25-49 with dental experience. A total of 1626 calls were made, of which 408 were eligible and 401 questionnaires were completed. Results showed that 73% of the respondents knew at least 10 out of 14 rights. However, 65% of the respondents believed that it was too easy to exercise their rights. The more the respondent knew about his/her rights, the more he/she exercised them. The ratio of the number of rights exercised, divided by the number of rights exercised was around 1/3. A significant positive association was found between education level and the knowledge of patients' rights. Results which can be applied simply and conveniently. Most Females were exercised more rights than males. The commonest reasons for not exercising the specific rights were "trust the dentist" and "dentist has done". In conclusion, it found that the public knowledge on their rights was more than the public's attitude towards their rights. Further reinforcement in educating the public about the rights of accessing one's own medical information. To receive quality dental care such as treatments with adequate pain control and to be informed of the alternative treatment options was necessary. Approximately one third of the patients, "right the public known has been exercised". This proportion was relatively constant no matter how many rights the respondents knew.