



Summer 2019 ~ A Quarterly Update

Dear Colleague:

Each year we continue to see growth and development in our practice accompanied by an increase in treatment success. Through this quarterly newsletter, we wish to share with you some of the latest developments in oral surgery and implant dentistry, as well as open communication with your office.

If we can provide any additional information, or if you would like to see an article on a particular topic in our next issue, please do not hesitate to call. We appreciate the trust you place in us by allowing us to participate in the care of your patients.

Regards,

Drs. Elyassi and Tebyanian

Salivary Myeloperoxidase and Malondialdehyde are Increased in Patients Exhibiting an Asymptomatic Mandibular Impacted Third Molar

Camacho-Alonso F, Tudela-Mulero MR, et al.
Med Oral Patol Oral Cir Bucal. 2019 Jul 1;24(4)

The purpose of this study was to determine whether saliva is a good means of evaluating concentrations of oxidative stress biomarkers, analyzing the correlation between concentrations in saliva and in follicular tissue, and to compare biomarker concentrations in patients with one asymptomatic mandibular impacted third molar (MITM) (before extraction) with a healthy control, and to determine how biomarkers are modified by extraction. Eighty patients with one asymptomatic MITM and 80 healthy controls were included. Saliva samples were collected from all subjects (before extraction in the study group) to evaluate Myeloperoxidase (MPO) and Malondialdehyde (MDA) concentrations. Follicular tissues were obtained during surgery to measure biomarkers. One month after extraction, saliva samples were collected to assess changes of oxidative stress.

Salivary MPO and MDA showed positive correlation with concentrations in follicular tissue (MPO: =0.72; MDA: =0.92. Patients with asymptomatic MITMs showed higher salivary concentrations of oxidative stress biomarkers than healthy control subjects, with statistical significance for both MPO and MDA. *One month after extraction, salivary biomarkers decreased significantly in the study group. Salivary MPO and MDA are higher among patients with one asymptomatic MITM, but these levels decrease significantly one month after surgical extraction. The large decrease in oxidative stress biomarkers could justify third molar extraction despite the absence of symptoms.*

Ali Elyassi, D.D.S.

Diplomate, American Board of Oral & Maxillofacial Surgery

Anis Tebyanian, D.M.D., M.D.

Diplomate, American Board of Oral & Maxillofacial Surgery

7525 Greenway Center Drive, Suite 109
Greenbelt, MD 20770
ph: (301) 982-4555



Dr. Elyassi grew up in Potomac, Maryland, where he received his undergraduate degree from the University of Maryland and his Doctorate in Dental Surgery (DDS) degree from the University of Maryland, Baltimore College of Dental Surgery. He completed his Oral & Maxillofacial Surgery residency at Tripler Army Medical Center and is Board Certified with the National Dental Board of Anesthesiology, and is a Diplomate of the American Board of Oral & Maxillofacial Surgeons. Dr. Elyassi has been a Assistant Professor at Fort Hood, Texas, and Walter Reed. He has publications in various journals leading to the development of the surgery field along with several other publications in process.



Dr. Anis Tebyanian attended George Mason University and graduated with honors Summa Cum Laude in 2006. He continued to earn his DMD from the prestigious University of Connecticut School of Dental Medicine in 2010 and received his MD from Stony Brook School of Medicine in 2013. He completed a 6-year residency at Northwell Health, Northshore-LIJ in Oral & Maxillofacial surgery that included Medicine, General surgery and Anesthesia. Dr. Tebyanian trained in full scope Oral and Maxillofacial Surgery with heavy emphasis in Orthognathic and TMJ disorders.

Does Intensity-modulated Radiation Therapy Lower the Risk of Osteoradionecrosis of the Jaw?

Willaert R, Nevens D, et al.
Int J Oral Maxillofac Surg. 2019 Jun 20

The purpose of this study was to analyze the impact of different radiation techniques on the long-term incidence of osteoradionecrosis in head and neck cancer. Risk factors and the occurrence of osteoradionecrosis were analyzed in a retrospective, comparative, observational study. Medical files and radiological images of 109 patients treated with primary intensity-modulated radiation therapy (IMRT) and 129 patients treated with primary three-dimensional conformal radiotherapy (3D-CRT) were evaluated. Proportional hazards models were used to analyze the effects of the radiation modality and patient characteristics on the necrosis risk.

Twenty-two patients developed osteoradionecrosis (9.2%) during a mean follow-up of 4.3 years. A numerical difference was observed, with more osteoradionecrosis after 3D-CRT (n=18) than after IMRT (n=4). After correction for group differences and confounders, no statistical difference in risk was observed between the two treatment groups. *Statistical analysis showed evidence of a higher osteoradionecrosis risk for patients with a tumor of the oropharynx and for patients with tooth extraction after radiation therapy. Although the incidence of osteoradionecrosis tended to be lower after IMRT, due to the multifactorial etiology it remains a severe problem and cannot be prevented by new radiotherapy techniques. Continuous efforts are necessary to control additional risk factors and avoid osteoradionecrosis.*

Implications of Use of Opioid-containing Analgesics for Palliation of Acute Dental Pain

Chakote K, Guggenheimer J
J Opioid Manag. 2019 Jan/Feb;15(1):35-41

Initial palliation of acute dental pain with an opioid-containing pain reliever (OPR) is inappropriate but more likely to occur among the under- and uninsured who are unable to access the customary resources for dental care. To assess the implications of palliation with an OPR, the authors determined the prevalence of several health attributes and socioeconomic status (SES) of patients taking prescription or over-the-counter (OTC) palliative medications before they presented to an academically affiliated dental clinic for definitive treatment of acute dental pain. Prior palliation with any OPR/antibiotic combination was compared with a self-reported mood disorder, use of a psychotherapeutic or street drug, low SES (on Medicaid or self-payer), or high SES (having commercial dental insurance).

Palliative medications were being taken by 34 percent of 851 patients including 20 percent who were taking an OPR. Use of any palliative prescription medication was significantly associated with low. By comparison, high SES patients were significantly more

likely to have used OTC analgesics or no medication. Significantly more low SES patients self-reported mood disorders and street drug use, respectively. Patients taking OPRs included those with self-reported mood disorders or use of a psychotherapeutic or street drug. *Palliation of acute dental pain with OPRs cannot resolve the underlying dental condition and contributes to drug misuse and adverse interactions. Preferable palliation should utilize combinations of non-OPR analgesics. These have fewer risks and may provide an incentive to seek definitive dental treatment.*

Satisfaction Analysis of Patients with Single Implant Treatments Based on a Questionnaire Survey

Dong H, Zhou N, et al.
Patient Prefer Adherence. 2019 May 7;13:695-704

The factors influencing satisfaction of the patients with implant treatments are still unclear. This study seeks to evaluate the patients' satisfaction and to identify influencing factors, which will improve the medical quality of oral implantology. Patients who lost single teeth and received implant treatments were enrolled in hospital study between February 2016 and March 2018. A questionnaire survey was performed to assess patient satisfaction and data were collected at four time points. Information included gender, age, educational level, application of bone augmentation, type of prosthetic restoration, period of teeth loss, dentist qualification, and tooth position. Meanwhile, the satisfaction of the patients was evaluated by visual analog scale.

A total of 373 patients completed the questionnaires. The mean of overall satisfaction score was 69.05. Lower overall satisfaction score was found in patients who received bone augmentation and those with a longer period of teeth loss. In the bone augmentation group, the elements of pain and complication were significantly associated with a decrease in the median satisfaction score, and a similar result was obtained from the duration of operative time and healing response. On the other hand, the satisfaction scores for elements including the duration of operative time and healing response, aesthetics and psychology, and chewing function decreased with an extended period of teeth loss. Meanwhile, over half of respondents were more concerned about the survival time (40.70%) and success rate (20.49%) of implants. *The investigators concluded that bone augmentation and the period of teeth loss are negative factors affecting patient satisfaction, and the success rate and survival time of implants are considerable aspects for patients. It is essential to raise general awareness of oral hygiene and optimize the dental implant therapeutic process.*

Ali Elyassi, D.D.S.
Anis Tebyanian, D.M.D., M.D.
7525 Greenway Center Drive, Suite 109
Greenbelt, MD 20770
ph: (301) 982-4555

www.greenbeltsurgery.com

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