2014 AAP Clinical Research Award in Periodontology Goes to…

Each year, the American Academy of Periodontology (AAP) presents the Clinical Research Award, sponsored by Quintessence Publishing Company, to an outstanding published scientific study with direct clinical relevance in periodontics. The winning study must follow established scientific methods for a human study, be published in English in a scientific journal during the previous calendar year, directly apply to the practice of periodontics, and provide new information that can be readily used by practitioners in the evaluation of patients.

The 2014 award recognized the study entitled "Patient Stratification for Preventive Care in Dentistry" (William V. Giannobile, Thomas M. Braun, Anna Caplis, Lynne Doucette-Stamm, Gordon Duff, Kenneth S. Kornman, *J Dent Res* 2013;92:694–701). The study authors accepted the award at the AAP's 2014 Annual Meeting in San Francisco, California, USA.

Drs William V. Giannobile and Kenneth S. Kornman are two of the authors recognized for their study.

The study, which appeared in the August 2013 issue of the *Journal of Dental Research*, investigated whether current evidence supports biannual preventive dental care for all adults. Using 16 years of insurance claims of 5,117 adults, the authors used risk-based approaches to test tooth loss association with one versus two annual preventive visits in high-risk (HiR) and low-risk (LoR) patients. Patients were classified as HiR for progressive periodontitis if they had one or more of the following risk factors: smoking, diabetes, or interleukin-1 genotype. Patients were classified as LoR if they had no risk factors. LoR tooth extraction rates were 13.8% and 16.4% for two or one annual preventive visits, respectively (absolute risk reduction: 2.6%; 95% confidence interval (CI): 0.5% to 5.8%; $P = .092$). HiR event rates were 16.9% and 22.1% for two or one preventive visits, respectively (absolute risk reduction: 5.2%; 95% CI: 1.8% to 8.4%; $P = .002$). Additional risk factors increased tooth extraction events. Oral health care costs were not increased by any single risk factor, regardless of preventive visit frequency, but multiple risk factors increased costs compared to no or one risk factor. For LoR individuals, the association between preventive dental visits and tooth loss was not significantly different whether the frequency was once or twice annually. The study findings suggest that a personalized medicine approach may be useful in resource allocation for preventive dentistry.

To view the study's abstract, please visit http://jdr.sagepub.com/content/92/8/694. For information about the AAP Clinical Research Award, please visit www.perio.org/members/ma/ma.html#clinical.