

Correlation between ClinproTM Cario Diagnosis and Clinical Parameters

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Introduction

Individual risk assessment of patients is necessary to select optimal regimens for the prevention, diagnosis and management of caries. Currently, the recent history of carious activity is regarded as the best predictor for future caries increment. Plaque bacteria produce lactate, the most important agent for generating caries. Therefore, the detection of lactate in dental plaque may be an appropriate tool to determine the site specific caries risk.

Objectives

The aim of the study was to determine the correlation between the new site-specific lactate test (ClinproTM Cario Diagnosis) and the site-specific caries prevalence as well as oral hygiene indices.

Material und Methods

31 subjects (11-13 years old)

- Caries diagnosis (D1-4MFS)
- Gingivitis index (PBI)
- Plaque index (QHI)
- Approximal plaque index (API)



Tooth brushing after 5 minutes

ClinproTM Cario Diagnosis



A: no discoloration (lactate negative)

B: blue discoloration of smooth surfaces and fissures (lactate positive)

Results

Parameter	Kappa value
D ₁₋₄ MFS	0,013 (poor)
d ₁₋₄ mfs	0,014 (poor)
QHI	0,3 (fair)
API	0,15 (poor)

Tab.: Correlation between Clinpro[™] Cario Diagnosis discoloration and caries on permanent teeth, primary teeth, QHI, and API respectively



Fig.: Distribution of different QHI-values and their matching with positive or negative signals of ClinproTM Cario Diagnosis. Higher QHI values do correlate better with a positive signal than lower values

Discussion and Conclusions

- There was only a fair or poor agreement between ClinproTM Cario Diagnosis and QHI, API, and caries respectively. In addition, the QHI and API are also very poor measures for caries risk assessment (Powell 1998).
- To determine if ClinproTM Cario Diagnosis is appropriate for caries risk assessment it is necessary to establish its correlation to the caries increment over time.

In this study, we did not find any good correlation between oral hygiene indices and ClinproTM Cario Diagnosis nor between ClinproTM Cario Diagnosis and caries. Judgment of reliability of ClinproTM Cario Diagnosis to determine site specific and general caries risk respectively requires additional research. *The study was supported by 3M ESPE.*

Bibliography

• Powell LV, 1998, Caries prediction: a review of the literature Community Dent Oral Epidemiol. 1998 Dec;26(6):361-71

This poster was submitted by Dr. Mozhgan Bizhang.

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Poster Faksimile:



Correlation between Clinpro™ **Cario Diagnosis and Clinical Parameters**

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Aim of the study

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Material and Methods









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Parameter Kappa value D_{1.4}MFS 0,013(poor)

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d_{1.4}mfs QHI

QHI-value

Fig.: Distribution of different QHI-values and their matching with positive or negative signals of Clinpro™ Cario Diagnosis. Higher QHI values do correlate better with a positive signal than lower values.

Discussion

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To determine if Clinpro[™] Cario Diagnosis is appropriate for caries risk assessment it is necessary to establish its correlation to the caries increment over time.

Conclusion

In this study, we did not find any good correlation between oral hygiene indices and Clinpro[™] Cario Diagnosis nor between Clinpro[™] Cario Diagnosis and caries. Judgment of reliability of Clinpro™ Cario Diagnosis to determine site specific and general caries risk respectively requires additional research.

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