● 치은 판막수술후의 치유에 관한 임상적 연구

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全身的 疾患과 機能的 障害가 없고 齒周疾患 以外에 特別한 疾病이 없는 35~45才 男女 34名을 對象으로 上顎前齒部에서 齒周囊의 깊이가 3~6mm인 174個의 齒牙를 選定 齒石除去와 齒齦瓣膜手術을 實施하고 治癒過程을 1週日 間隔으로 觀察하여 齒齦烈溝滲出液의 量, 齒周囊 깊이, 齒根露出量을 測定 量的變化를 比較調査하여 다음과 같은 結論을 얻었다.

1. 齒齦烈溝滲出液의 量的變化는 齒石除去 1週 後 가장 크게 減少하였으며 齒齦瓣膜手術 3週 後부터 變化가 거의 없었다.
2. 齒周囊 깊이는 齒石除去 後의 變化가 거의 없는 반면 齒齦瓣膜手術 1週 後부터 큰 幅으로 減少하였다.
3. 齒根露出量은 齒齦瓣膜手術 1週 後에 가장 많은 減少가 있었다.
4. 齒齦瓣膜手術을 施行한 結果 齒周囊 減少는 齒石除去 1週 後와 6週 後와의 比較에서 平均 1.41±0.24mm이며 齒齦退縮量은 0.48±0.15mm, 齒齦再附着量은 0.93±0.33mm이었다.

● 치근활택술 처치후의 치근면 조도에 관한 연구

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齒周炎으로 因하여 拔去된 齒牙를 選別하여 齒根滑澤術에 使用되는 File, Curette, Ultrasonic instrument, Jaquette scaler로 齒根面을 處理하여 表面粗度를 測定하고 化學的으로 枸櫞酸液 pH 1.0溶液으로 處理한 齒根面의 粗度를 測定하여 硏究한 結果 다음과 같은 結論을 얻을 수 있었다.

1. 齒根滑澤術 後의 齒根面 粗度는 超音波齒石除去器에서 21.05±4.13μ으로 가장 높았고 그 다음 枸櫞酸液 10分塗布群은 19.20±4.12μ, 對照群은 18.41±4.35μ, 枸櫞酸液 3分塗布群은 15.50±3.82μ, 枸櫞酸液 1分塗布群은 14.87±3.61μ, Jaquette scaler를 使用한 群이 12.90±2.24μ, File를 使用한 群이 12.43±3.64μ, Curette를 使用한 群이 7.77±2.03μ으로 Curette를 使用한 境遇가 가장 낮았다.
2. 그러나 超音波齒石除去器를 使用한 群과 枸櫞酸液 10分塗布群, 枸櫞酸液 10分塗布群과 對照群, File를 使用한 群과 Jaquette scaler를 使用한 群, Jaquette scaler를 使用한 群과 枸櫞酸液 1分塗布群, 枸櫞酸液 3分塗布群과 枸櫞酸液 1分塗布群 各各의 粗度사이에는 統計學的인 差異를 認定할 수 없었다.
3. 枸櫞酸液塗布群은 塗布時間이 길수록 粗度도 增加하였다.
4. 枸櫞酸液 齒根面 處置는 그 妥當性을 認定할 수 있다고 思料된다.

A study of surface roughness after root planing

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Forty periodontally involved human teeth were selected to determine the surface roughness of root after treatment with hand instruments, file, curette, Jaquette scaler, and ultrasonic instrument and citric acid solution(pH 1.0). The following results were obtained.

1. The surface roughness when using the ultrasonic instrument was 21.05± 4.13μ, citric acid solution (pH 1.0) application for 10 minutes 19.20± 4.12μ, control group 18.41± 4.35μ, citric acid solution application for 3 minutes 15.50± 3.82μ, citric acid solution application for 1 minute 14.87± 3.61μ, Jaquette scaler 12.90± 2.24μ, file 12.43± 3.64μ, and curette 7.77± 2.03m.
2. There were no statistically significant differences between the ultrasonic instrument and citric acid solution application for 10 minutes, control group and citric acid solution application for 10 minutes, file and Jaquette scaler, citric acid solution application for 1 minute and Jaquette scaler, citric acid solution application for 3 minutes and citric acid solution application for 1 minute.
3. The surface roughness was increased in inverse proportion to time of citric acid solution application.
4. It can be suggested that root treatment with citric acid solution is available.

Electron microscopic study on clinically inflammed human gingival tissues of spontaneous incipient periodontitis

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The purpose of this study was to investigate the ultrastructural features of normal and inflammed gingival tissues.

The tissue specimens were taken from five patients with early periodontitis who came to Dept. of periodontology, the Dental College of Yonsei Univ. and from two dental students with healthy gingiva.

The tissues for electron microscopic observation were prefixed with 3% glutaraldehyde in Phosphate buffer solution for 24 hours. Tissues were rinsed with phosphate buffer solution(pH 7.4) and postfixed in 1% osmium tetroxide for 2 hours. After tissues were dehydrated with graded ethanol series, they were embedded in Epon 812, each specimen was sectioned 500Å in thickness by means Sorvall MT-2B Blum ultramicrotome, doubly stained with uranyl acetate and lead citrate and examined with Hitachi Hu-500 electron microscope.

The results are as follows ;

1. Intercellular spaces of periodontal pocket epithelium showed widening and had more reduced number of desmosomes than in that of healthy gingiva. In some areas, intercellular space appeared to be wider than the cell width.