

● 미세결정형 수산화 인회석 함유치약의 상아질 지각과민증 완화효과에 관한 임상적 연구

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지각과민증을 호소하는 남녀 80명을 대상으로 Microcrystalline Hydroxyapatite 함유 치약의 지각과민 완화효과를 확인하기 위하여 2주후와 4주후에 그 사용효과를 항염제 함유 치약과 비교 검토하여 다음과 같은 결론을 얻었다.

1. 지각과민의 가장 큰 원인은 치근노출이며 그 다음이 치경부 마모이다.
2. 지각과민 치아의 분포상태는 상악이 하악보다 높았으며 전치부위가 소구치 및 대구치보다 약간 낮았다.
3. 지각과민 증상은 온도적 변화에 가장 예민 하였으며 특히 찬것에 대한 반응이 제일 높았다.
4. Microcrystalline Hydroxyapatite군의 지각과민 완화효과가 인정되는 경우가 2주에서 93%, 4주에서 97.5%였으며 대조군에 비해 유의하게 높았다. ($P < 0.05$, $P < 0.025$)
5. Microcrystalline Hydroxyapatite 함유 치약의 완전한 지각과민 억제효과는 2주에서 52.5%, 4주에서 67.5%로 대조군에 비해 현저하게 높았으며 통계학적 유의성이 있었다. ($P < 0.01$, $P < 0.005$)
6. 치약에 의한 지각과민 완화효과를 인정할수 있으며 Microcrystalline Hydroxyapatite 함유 치약의 지각과민 완화효과가 우수하였다.

tant to notice that this improvement is not related to the decreasing Plaque Index but to anti-inflammatory effect of permethol. Two cytological parameters(Pyknotic Index and Keratinization Index)showed an improving status of gingival health.

In other hand, none of intolerance symptom has been noticed during the whole periods of the study.

From these results, it can be concluded that toothpaste with permethol has a definite therapeutic bennefits to simple gingivitis.

The effect of topically applied fibronectin on the restoration of periodontal attachment

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A histologic study was done to investigate the effect of fibronectin treatment on the restoration of periodontal attachment apparatus by topical application.

Inducing the experimental periodontitis with cotton flosses for 13 weeks in five adult dogs and performing the modified Widman flap on the labial side of eight upper incisors, forty teeth were divided into two groups : I control group (Surgery alone, II) experimental group (fibronectin : 1mg/ml, 4min). Radicular notches were made as reference points at the apical extent of the instrumented area using a high speed bur under water cooling.

Block sections including the entire tooth and periodontal tissues were obtained after 7, 21 and 40 days, routinely processed and stained with hematoxylin and eosin.

Control and experimental sections showed epithelial migration along the root surfaces, separating them from the adjacent connective tissue and thus preventing new attachment.

Within the limit of this study, the present results suggest that fibronectin itself is not the critical agent for success in obtained new connective tissue attachment.

Clinical evaluation of microcrystalline hydroxyapatite toothpaste in the control of dentin hypersensitivity

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The purpose of this study was to observe the relief effect of hypersensitivity in the toothpaste containing Microcrystalline hydroxyapatite for the subject of eighty persons of both sexes, who complained hypersensitivity.

After 2 weeks and 4 weeks, comparison of relief effect between Microcrystalline hydroxyapatite

group and control group was performed :

The results were as follows.

1. The main causes of dental hypersensitivity are the root exposure and cervical abrasion.
2. The occurrence rate of hypersensitive tooth in the upper jaw was higher than that of the lower jaw, and more or less, the incisor area showed less occurrence of hypersensitivity than the molar area.
3. Patients showed very sensitive response to the thermal stimulus, specially cold stimulus.
4. Excellent relief effect of hypersensitivity in the Microcrystalline hydroxyapatite group showed 93% at 2weeks, 97.5% at 4 weeks, and these values were higher than the control group.
5. The complete relief effect of hypersensitivity of the Microcrystalline hydroxyapatite group revealed 52.5% at 2 weeks, 67.5% at 4 weeks, and the effectiveness of this paste was higher than the control group.
6. Although we admit that all toothpaste furnish the relief of hypersensitivity, the relief of hypersensitivity in the Microcrystalline hydroxyapatite group revealed more effectiveness than in the control group.