

Dental PBRN Newsletter

Spring 2007

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Welcome to the Dental PBRN quarterly newsletter. This newsletter is designed to provide you a synopsis of the contents of our website, http://www.DentalPBRN.org.

You also can view the projects for which we are currently recruiting dental practitioners as well as suggest and view new research ideas.

When you visit our website you can complete your online training course that will provide the foundation for you to begin on a project.

News Items

First annual meeting for Alabama and Mississippi DPBRN Practitioner-Investigators

Alabama and Mississippi DPBRN practitioner-investigators held their inaugural meeting on March 9 and 10, 2007 at the Renaissance Ross Bridge Golf Resort and Spa in Hoover, AL (http://www.rossbridgeresort.com). More than 70 practitioners attended to discuss DPBRN studies and share their experiences.

Dr. Gregg Gilbert, DPBRN Network Chair, introduced AL/MS DPBRN staff and gave an overview of DPBRN progress to date. Dr. Donald DeNucci of the National Institute of Dental and Craniofacial Research (http://www.nidcr.nih.gov), one of the institutes of the U.S. National Institutes of Health (http://www.nih.gov), presented important background information on dental PBRNs and provided a national perspective for the conference. Dr. Edward Bozeman, a private practitioner from Columbus, MS, presented results from the DPBRN enrollment questionnaire, and concluded that DPBRN practitioner-investigators have much in common with dentists nationally. Dr. Martha Wallace, a private practitioner from Birmingham, AL, presented her experiences on the DPBRN Executive Committee, which is the main decision-making body of DPBRN. She concluded that the function of the Executive Committee is what places DPBRN practitioner-investigators in the driver's seat. Dr. Wallace also shared her successes with doing Study 2; she was the first AL/MS practitioner-investigator to finish DPBRN Study 2 ("Reasons for placements of restorations on previously unrestored surfaces"). Dr. Allen Kessler, a private practitioner from Fairfield, AL, presented the latest results f Study 1 Assessment of Caries Diagnosis and Caries Treatment". Findings from this study generated a lot of interest and discussion. Attendees were especially interested in the substantial differences between DPBRN practitioner-investigators in the network's five regions. Clearly, this was an excellent topic for the network's first study.





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Continued

Drs. Harold Emmons (Alabaster, AL), Martha Wallace (Birmingham, AL), and Edward Bozeman (Columbus, MS) received certificates for completing Study 2 (see photograph above). Congratulations to all three for being at the forefront of research on daily clinical practice!

Attendees separated into eight small groups to discuss five topics: (1) using DPBRN research findings to improve daily clinical practice, (2) feedback on the planned DPBRN Study 6 (questionable occlusal caries lesions), (3) feedback on the planned DPBRN Study 9 (restoration of endodontically-treated teeth), (4) ideas for future DPBRN research projects, and (5) feedback on the planned DPBRN Study 13 (dentinal cracks).

When the groups reconvened to summarize their discussions, the information from each breakout session was thought provoking. Thanks to all the attendees for putting so much energy into the breakout sessions! Thanks also to the eight DPBRN practitioner-investigators who led each of the groups: Drs. George Allen (Mobile, AL), Gerald Anderson (Selma, AL), Edward Bozeman (Columbus, MS), Robert Connor (Birmingham, AL), Bruce Cunningham (Jacksonville, AL), Harold Emmons (Alabaster, AL), Allen Kessler (Birmingham, AL), and Martha Wallace(Birmingham, AL).

Practitioner-investigators were very interested in future opportunities to discuss practice-based research with practitioners from the other DPBRN regions and to compare procedures and outcomes. Overall, based on evaluation forms completed by the attendees, the event was a big success and provided a fun opportunity to share information about ongoing and planned studies. Many thanks to DPBRN staff for their hard work, as well as to all of the practitioner-investigators, for making the AL/MS region's first annual meeting a great success!

First annual Meeting for Florida and Georgia DPBRN Practitioner-Investigators

The Inaugural Meeting of the Florida/Georgia Region of DPBRN was held on January 5th and 6th 2007 at the Best Western Gateway Grand Hotel in Gainesville, FL. Thirty-eight practitioners attended. Speakers presented information on the network and requirements for doing research with human participants. Dr. Martha Wallace, DPBRN member and practitioner from Birmingham Alabama, provided practitioners with information on the impact of doing research in private practice. Dr. Paul Benjamin, who represents the Florida region of DPBRN on the Executive Committee, talked with the group about the structure of DPBRN and how decisions are made by the EC regarding study approvals and other DPBRN business.

After the presentations, the practitioners met in small groups to discuss a variety of topics for possible future studies. These topics were xerostomia – geriatric or medication induced, dental materials, endo vs implants, cracked tooth syndrome, and marginal integrity/leakage/longevity. Discussion was lively with many suggestions, and participant feedback indicated that more time could have been allowed for discussion. Presentations were given by a moderator from each breakout group to the group at large.

Practitioners were enthusiastic to get started with the in-office research and expressed the desire for more time for discussion and interaction with colleagues at the next annual meeting.



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DPBRN Present at the International Association for Dental Research Annual Meeting

The annual meeting of the International Association for Dental Research was held in New Orleans, LA, March 21st-24th, 2007. Dr. Ivar Mjör, member of the DPBRN Executive Committee, presented a lecture entitled "Study Organization and Development: The DPBRN Network Experience" at the symposium entitled "Practice-Based Research: What's It All About?". This was an opportunity to meet with all three PBRNs funded by NIDCR, as well as to hear about dental PBRNs in Europe. Dr. Martha Wallace, a practitioner-investigator and Executive Committee member from Birmingham, AL represented DPBRN in the panel discussion. The symposium was well-attended with many audience members inquiring about topics such as balancing private practice and research, compensation, and incorporating these studies in day-to-day practice.

DPBRN Enrollment Data Poster Wins First Place

Kellen Spivey, Student Research Assistant at the University of Alabama School of Dentistry, won first place for his poster entitled "Dental PBRN Enrollment Questionnaire Results" at the School of Dentistry at the University of Alabama at Birmingham Scholar's Day Symposium on March 7, 2007.

Changes in the Informed Consent Process for Study 2 Practitioner-Investigators in Florida and Georgia

When DPBRN Study 2 "Reasons for Placing the First Restoration on Permanent Tooth Surfaces" first began in the Florida/Georgia region in early 2007, nine pages of written informed consent documents needed to be signed. Following recent discussions between DPBRN and the University of Florida Institutional Review Board (IRB), the University of Florida IRB agreed to allow practitioner-investigators from Florida and Georgia to obtain informed consent with a shortened version (two pages) thereby reducing the amount of paperwork needed to enroll patients in the study.

Changes in the Informed Consent Process for Study 2 Practitioner-Investigators in Alabama and Mississippi

When DPBRN Study 2 "Reasons for Placing the First Restoration on Permanent Tooth Surfaces" first began in the Alabama/Mississippi region in 2006, three sets of six-page written informed consent documents needed to be signed. Early feedback from Alabama DPBRN practitioner-investigators and Study 2 patients was that this was a cumbersome process, and did not effectively foster all the objectives for the informed consent process. Following discussions between DPBRN and the UAB Institutional Review Board (IRB) in late 2006, the UAB IRB agreed to allow practitioner-investigators from Alabama and Mississippi to document that informed consent was obtained verbally from Study 2 participants. This makes the informed consent process much easier. We appreciate your feedback and are working hard to ensure that DPBRN studies integrate easily into your daily clinical practice routines! The HIPAA form still needs to be signed by participants, although the UAB IRB also approved a version that was customized to our DPBRN efforts, which made it much more directly applicable for the patients in your practice.

DPBRN Presentation at the University of Minnesota Continuing Dental Education Winter Hygiene Seminar

Merry Jo Thoele, MPH RDH, Regional Coordinator for the Minnesota DPBRN practitioners, was one of the speakers at the University of Minnesota Continuing Dental Education Winter Dental Hygiene Seminar on February 23, 2007. The program focused on alternative careers in Dental Hygiene. The title of her presentation was "Research Opportunities in Dental Hygiene." There were 175 in attendance for this important topic.

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Testimonials



Mike Bauer, DDS Full-time private practice of general dentistry HealthPartners Riverside Clinic Minneapolis, Minnesota

I am currently involved in DPBRN study 2. While I find the study very easy to incorporate into my daily practice routine, I have found that my staff members have become interested and engaged as well. They want to know what the study is about and why we are participating. They can see how our practice philosophy of evidence based care and minimally invasive dentistry fits into the broader practice of dentistry throughout the United States. I recommend that all dentists get involved.



James L. Sanderson Jr. DMD LLC Full-time private practice of general dentistry Hoover, Alabama

Our clinical team recently began DPBRN Study 2, which involves documenting the restoration of previously unaffected tooth surfaces. After Jackie Love trained our team, we have been able to implement the study without impacting our daily routine. Jackie has made herself available any time we have questions about the study, but because of her thorough training and well-developed documentation, we have had little need to contact her. Patients who qualify as subjects for the study are asked if they are willing to participate and we have not had anyone refuse to participate so far. The way the process is set up the patients have been comfortable with allowing us to gather the needed information. Most really appreciate the fact that we are working with this group.

We look forward to the final compilation of all the data gathered from those participating in Study 2. Based on our experience, we will gladly participate in future DPBRN studies.

Thanks for the OPPORTUNITY!