2023

UpToDate、The Cochrane Library等

循证医学数据库检索技巧

主要内容

01 循证医学概述

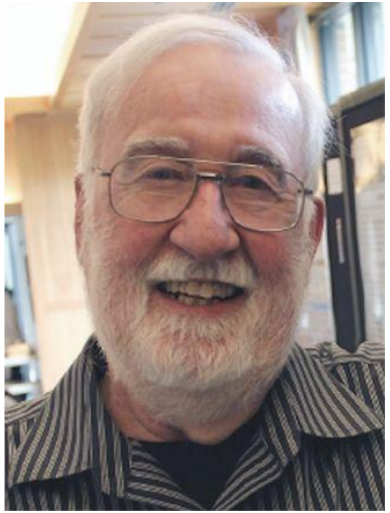
02 UpToDate

03 The Cochrane Library

01 循证医学概述

Evidence-based medicine, EBM

01 | 循证医学的定义



“Evidence-based medicine is the integration of best research evidence with clinical expertise and patient values””

--David Sackett

“慎重、准确、明智地应用所能获得的最好研究证据来确定个体病人的诊治方案。实施EBM意味着医生需综合参考当前最佳研究证据、临床经验和病人意见进行实践。”

01 | 循证医学的定义

“临床实践需结合临床医生个人经验、患者意愿和来自系统化评价和合成的研究证据。”

--Guyatt GH

三要素：

当前最佳的研究证据 → 系统化评价和合成的研究证据

医务工作者的临床经验

患者的意愿及价值观

临床循证过程：“5A”

- 提出临床问题（Acquire clinic question）
- 获取最佳证据（Acquire best evidence）
- 评价证据（ Appraise evidence）
- 应用证据（Apply evidence）
- 后效评估（ Assess effect）

PICO原则

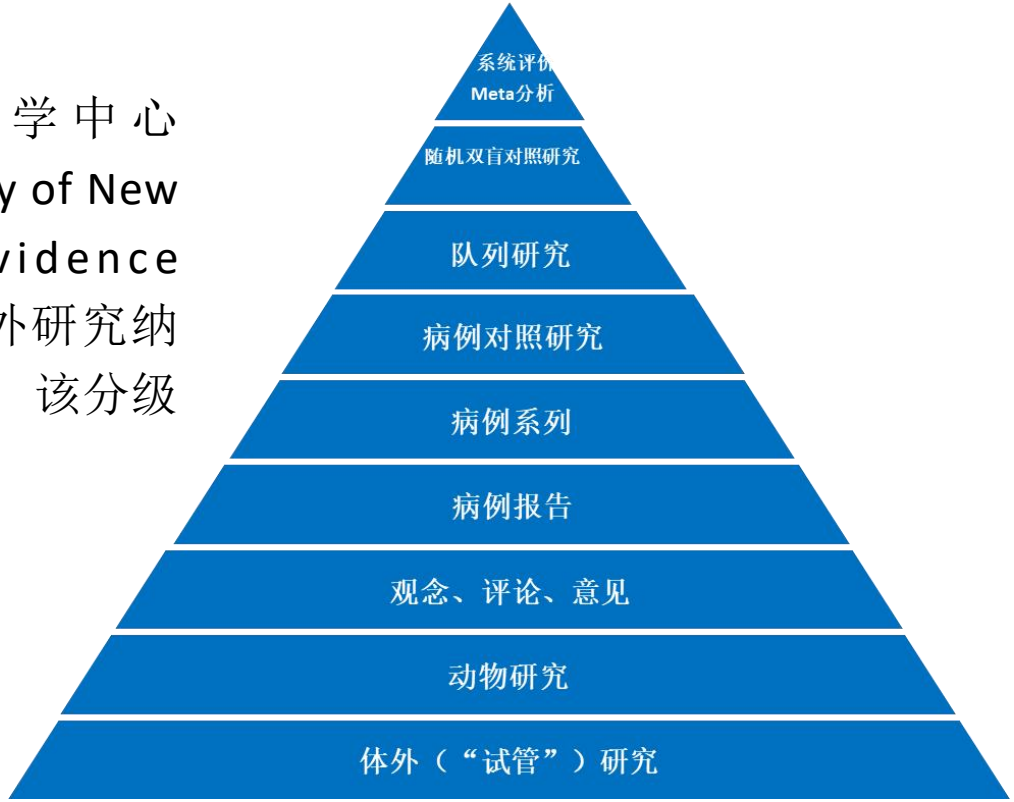
P: patient/participant 患者或问题

I : intervention 干预措施

C: comparison 对比措施

O: outcome 结局指标

2001年美国纽约州立大学医学中心（Medical Center of State university of New York）提出**证据金字塔**（the evidence pyramid），首次将动物研究和体外研究纳入证据分级系统，拓展了证据范畴，该分级方式简洁、直观，得到广泛传播。



临床问题	最佳研究设计
病因学与不良反应问题	队列研究 → 病例对照 → 病例报告
诊断问题	诊断性试验研究（横断面研究），与金标准盲法比较
治疗问题	RCT随机对照试验 → CCT半随机对照 → 病例报告
预后问题	队列研究 → 病例对照 → 病例报告

PICOS原则

P: patient/participant 患者或问题

I : intervention 干预措施

C: comparison 对比措施

O: outcome 结局指标

S: study design 研究设计

病因问题——PECO

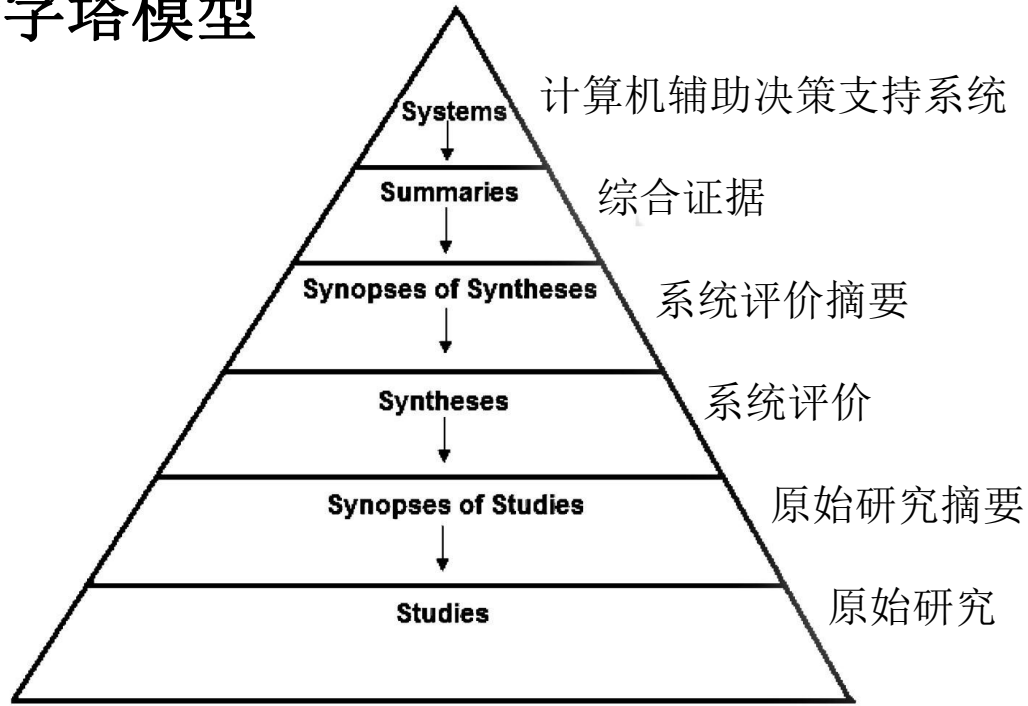
P: patient/participant 患者或问题

E: exposure 暴露因素

C: comparison 对比措施

O: outcome 结局指标

“6S”证据金字塔模型



自上而下

Dicenso A, Bayley L, Haynes RB. Accessing pre-appraised evidence: fine-tuning the 5S model into a 6S model. Evid Based Nurs. 2009 Oct;12(4):99-101.

Studies 原始研究

直接在患者中进行的有关于病因、预防、诊断、治疗及预后等方面的单个研究。

PubMed.gov

Embase

SinoMed
中国生物医学文献服务系统

cnki中国知网
www.cnki.net
中国知识基础设施工程

万方数据
WANFANG DATA
知识服务平台 V2.0

VIP
维普资讯

Synopses of studies 原始研究摘要

原始研究摘要是根据严格的评价标准从有关期刊中筛选出好的论文及有价值的研究后，所撰写出来的结构式摘要或评述。一般发表在循证医学期刊上。

美国内科医师学会《ACP Journal Club》（1991-2008）
https://www.acpjc.org
《Evidence-based medicine》等期刊
https://ebm.bmj.com/

Syntheses 系统评价

又称为系统综述，是针对某一具体临床问题，系统、全面地收集所有已发表或未发表的研究，采用临床流行病学的原则和方法对研究进行严格的评价、筛选出符合纳入标准的研究，进行定性或定量合成，从而得出可靠的结论。

The Cochrane Library 考克兰图书馆
https://www.cochranelibrary.com/

Synopses of Syntheses 系统评价摘要

系统评价摘要是对高质量的系统评价进行严格筛选评价后撰写出来的大纲式摘要。

美国内科医师学会《ACP Journal Club》（1991-2008）
https://www.acpjc.org
《Evidence-based medicine》等期刊
https://ebm.bmj.com/
Cochrane效果评价文摘库
(Database of Abstracts of Reviews of Effectiveness , DARE)
https://www.crd.york.ac.uk/

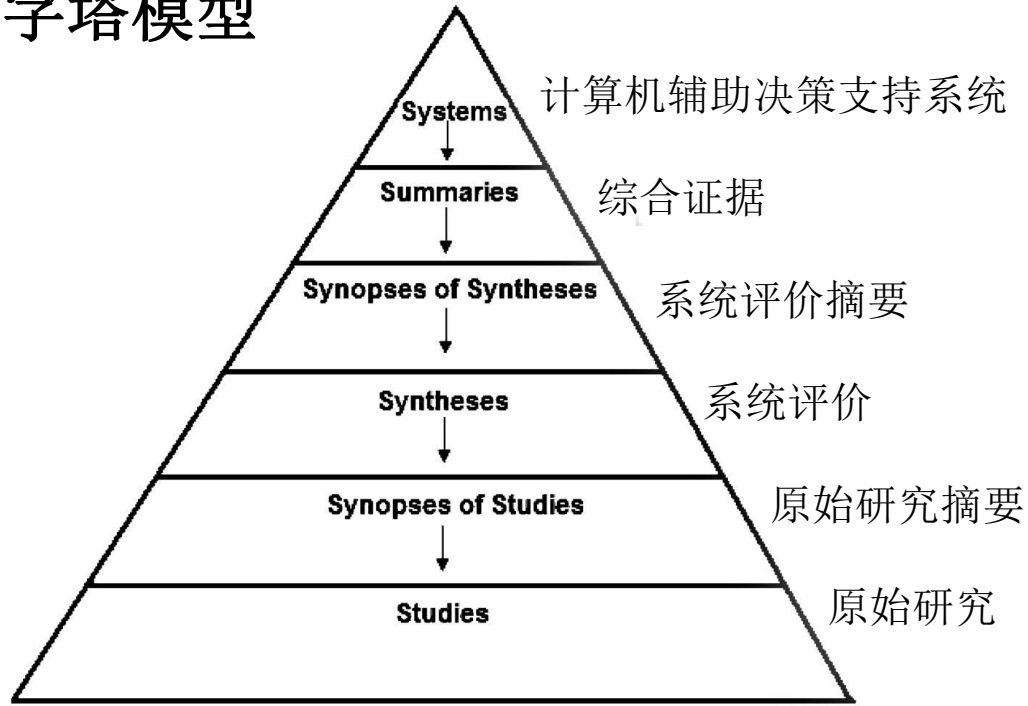
Summaries 综合证据

★临床实践指南

针对患者的特定临床问题，基于系统评价形成的证据，并对各种备选干预方式进行全面的利弊平衡分析后提出的最优指导意见。

NICE 英国国家卫生与临床优化研究所 https://guidance.nice.org.uk
SIGN 苏格兰校际指南网络 https://www.sign.ac.uk/
UpToDate https://www.uptodate.com/contents/search
BMJ Best Practice https://bestpractice.bmj.com/

“6S”证据金字塔模型

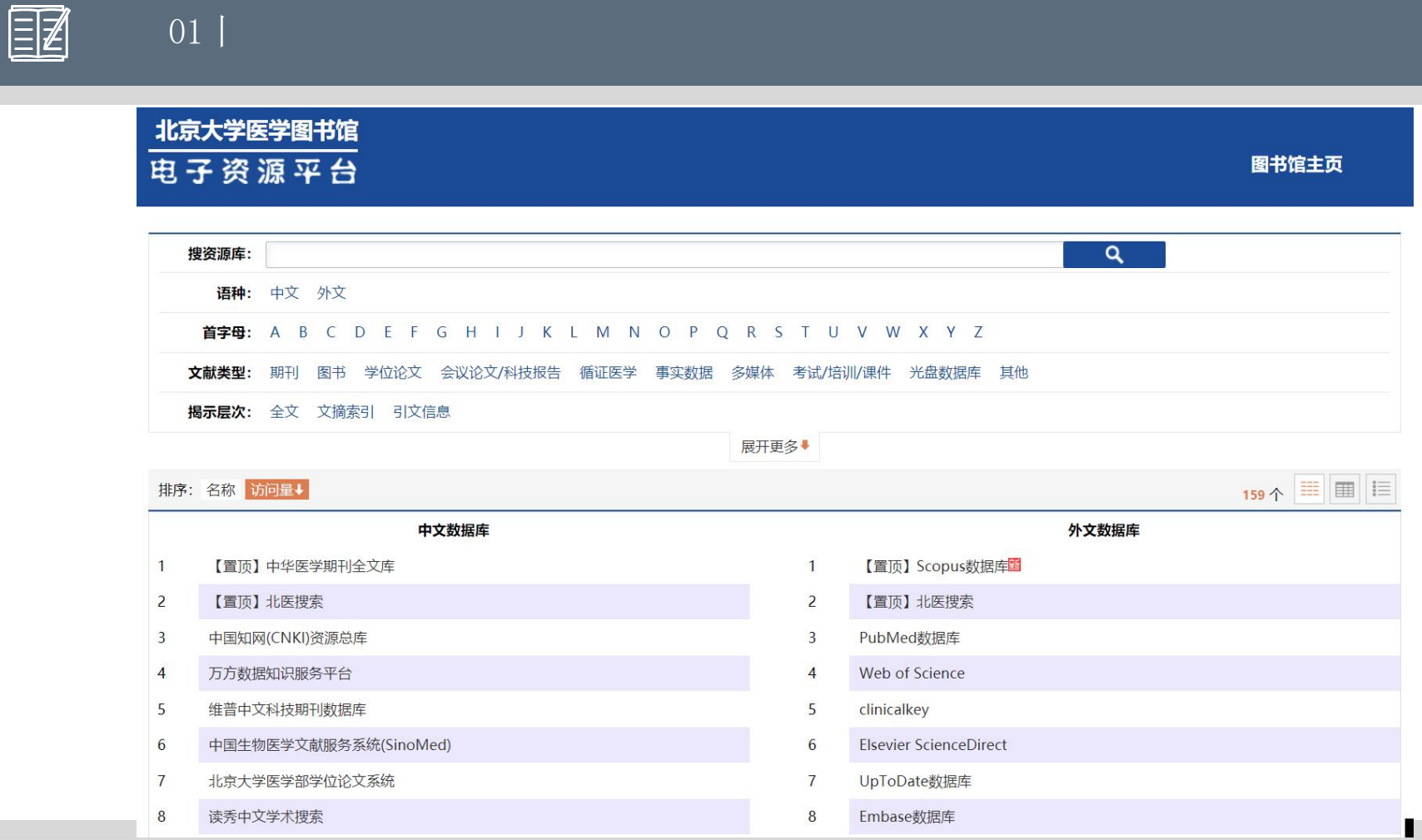


自上而下

Dicenso A, Bayley L, Haynes RB. Accessing pre-appraised evidence: fine-tuning the 5S model into a 6S model. Evid Based Nurs. 2009 Oct;12(4):99-101.

01 | 如何进入数据库

进入北京大学口腔医院官网https://ss.bjmu.edu.cn/
点击右上角【图书馆】
【电子资源】→【数据库】


北京大学医学图书馆
电子资源平台
图书馆主页
搜资源库:
语种: 中文 外文
首字母: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z
文献类型: 期刊 图书 学位论文 会议论文/科技报告 循证医学 事实数据 多媒体 考试/培训/课件 光盘数据库 其他
揭示层次: 全文 文摘索引 引文信息
展开更多
排序: 名称 访问量
159 个
中文数据库
1 【置顶】中华医学期刊全文库
2 【置顶】北医搜索
3 中国知网(CNKI)资源总库
4 万方数据知识服务平台
5 维普中文科技期刊数据库
6 中国生物医学文献服务系统(SinoMed)
7 北京大学医学部学位论文系统
8 读秀中文学术搜索
外文数据库
1 【置顶】Scopus数据库
2 【置顶】北医搜索
3 PubMed数据库
4 Web of Science
5 clinicalkey
6 Elsevier ScienceDirect
7 UpToDate数据库
8 Embase数据库

【文献类型】→【循证医学】

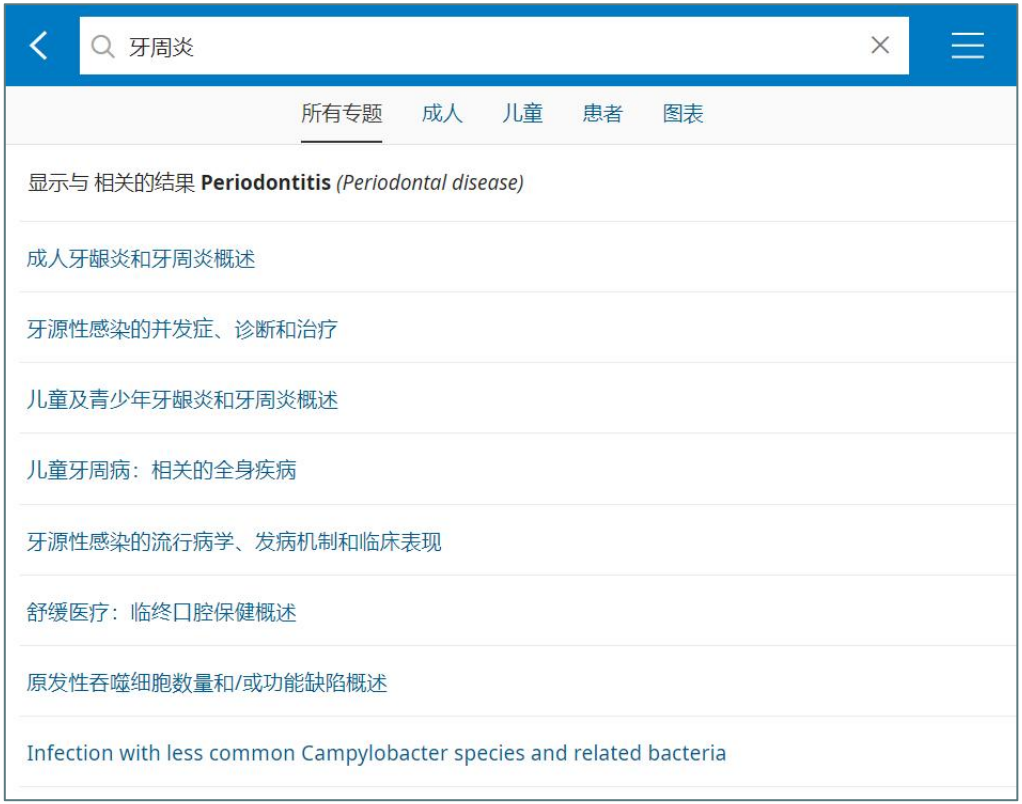

搜资源库:
语种: 中文 外文
首字母: A B C D E F G H I J K L M N O P Q R S T U V W X Y Z
文献类型: 期刊 图书 学位论文 会议论文/科技报告 循证医学 事实数据 多媒体 考试/培训/课件 光盘数据库 其他
揭示层次: 全文 文摘索引 引文信息
展开更多
排序: 名称 访问量
3 个
中文数据库
外文数据库
1 UpToDate数据库
2 The Cochrane Library
3 Best Practice

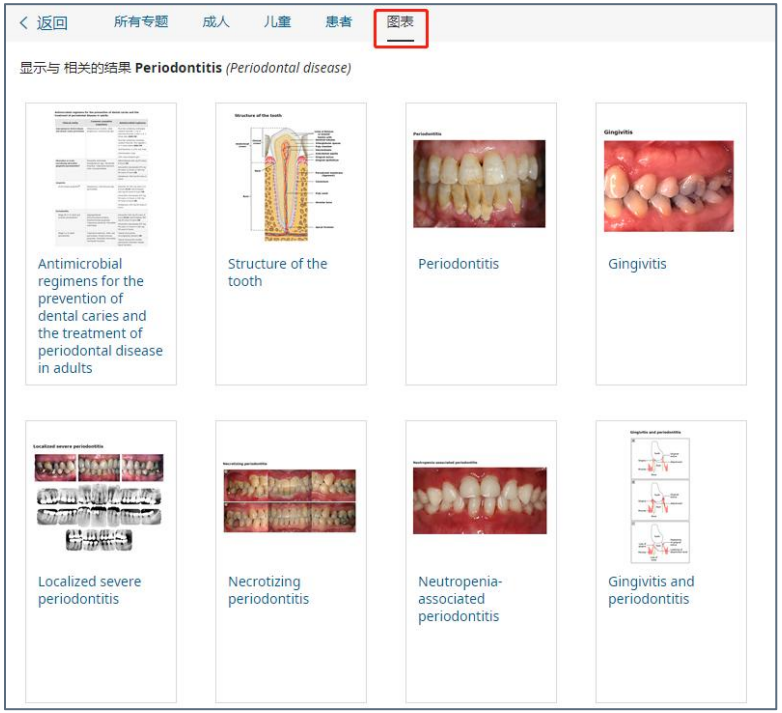
02 UpToDate

基于循证医学原则的临床支持系统

https://www.uptodate.com/contents/search

02 | 检索


牙周炎
所有专题
成人
儿童
患者
图表
显示与 相关的结果 **Periodontitis** *(Periodontal disease)*
成人牙龈炎和牙周炎概述
牙源性感染的并发症、诊断和治疗
儿童及青少年牙龈炎和牙周炎概述
儿童牙周病：相关的全身疾病
牙源性感染的流行病学、发病机制和临床表现
舒缓医疗：临终口腔保健概述
原发性吞噬细胞数量和/或功能缺陷概述
Infection with less common Campylobacter species and related bacteria


返回
所有专题
成人
儿童
患者
图表
显示与 相关的结果 **Periodontitis** *(Periodontal disease)*
Antimicrobial regimens for the prevention of dental caries and the treatment of periodontal disease in adults
Structure of the tooth
Periodontitis
Gingivitis
Localized severe periodontitis
Necrotizing periodontitis
Neutropenia-associated periodontitis
Gingivitis and periodontitis

成人牙龈炎和牙周炎概述

View in language

Authors: Rebecca S Wilder, BSDH, MS, Antonio J Moretti, DDS, MS
Section Editor: Daniel G Deschler, MD, FACS
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翻译：徐屹，副主任医师，副教授

Contributor Disclosures

我们的所有专题都会依据新发表的证据和同行评议过程而更新。

文献评审有效期至： 2022-09. | 专题最后更新日期： 2022-08-26.

There is a newer version of this topic available in English. 该主题有一个新的英文版本。

引言

牙周病是累及牙齿支持结构(包括牙龈、牙骨质、牙周韧带和牙槽骨)的常见病，主要是牙龈炎和牙周炎(图 1)。

本文将介绍牙龈炎、牙周炎和相关疾病，包括累及牙种植体。牙源性感染的发病机制、临床表现及抗生素治疗详见其他专题。(参见 “牙源性感染的流行病学、发病机制和临床表现”和 “牙源性感染的并发症、诊断和治疗”)

定义

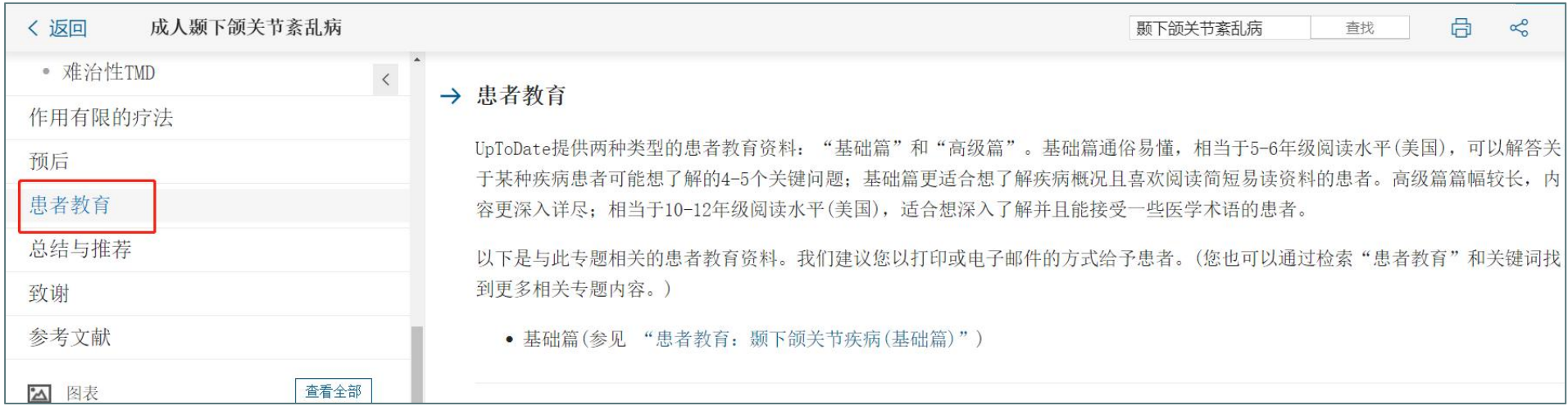
牙周病包括牙龈炎和牙周炎，根据牙周韧带和/或牙槽骨是否受累分类(图 1)[1,2]。

专题提纲

图表 查看全部

总结与推荐

- **定义** - 牙周病包括牙龈炎和牙周炎，根据是否累及牙槽骨分类(图 1)。(参见上文‘定义’)
  - 牙龈炎仅累及牙龈(图片 1)，是一种炎症病变，表现为牙龈红肿和日常刷牙、使用牙线或牙周探诊时出血。健康牙龈组织呈粉红色、有点彩(与橘皮相似)，质韧(图片 2)。
  - 牙周炎的特征为牙龈炎症伴支持性结缔组织(包括牙周韧带和牙槽骨)丢失(图 1)。临床表现包括：探诊时牙龈出血、探诊深度增加和牙齿动度增加。
- **临床表现** - 大多数情况下，牙科医生诊断出牙龈炎或牙周炎后，应告知患者的初级保健医生。初级保健医生也可在常规体检时发现牙龈或牙周疾病，并嘱患者去牙科接受进一步评估和治疗。(参见上文‘临床表现’)
- **菌斑相关性牙龈炎和牙周炎：病程和治疗** - 最常见的牙龈炎是细菌生物膜诱发的牙龈炎，仅累及牙龈组织，经治疗可逆转。如不治疗，牙龈炎很可能发展为牙周炎，但进展时间从数周至数年不等。牙周炎通常缓慢进展，有不可预测的短暂快速进展及附着丢失阶段。活动性骨丢失的诱发机制尚未明确，但似乎与优势菌由革兰阳性菌转变成革兰阴性厌氧杆菌有关。(参见上文‘发病机制’)
  - 我们建议通过机械性清洁(在日常刷牙的基础上使用牙线，并定期接受牙科护理)预防牙菌斑相关性牙龈炎和牙周炎(**Grade 2C**)。日常口腔清洁的目的在于减少龈上和龈下细菌，以免引发或维持炎症。(参见上文‘菌斑相关性牙龈炎和牙周炎的预防’)
  - 牙石必须通过专业手段清除，以促进炎症消退。(参见上文‘菌斑相关性牙龈炎和牙周炎的预防’)
  - 菌斑相关性牙周炎的主要治疗包括由牙科医生进行牙周清洁(针对龈下生物膜和牙石进行刮治和根面平整)，还应进行细致的日常口腔清洁，包括每日使用氯己定含漱液2次，待能够安全地恢复正常刷牙后(一般是在刮治或手术后2周)，每日刷牙2次(用手动或电动牙刷)、每日使用牙线1次，并酌情戒烟。(参见上文‘菌斑相关性牙龈炎和牙周炎的治疗’)
    - 病情较轻时，除上述治疗外，牙科医生还可能在牙周袋内局部用抗生素，包括多西环素或米诺环素(表 2)。


返回
成人颞下颌关节紊乱病
颞下颌关节紊乱病
查找
难治性TMD
作用有限的疗法
预后
患者教育
总结与推荐
致谢
参考文献
图表
查看全部
患者教育
UpToDate提供两种类型的患者教育资料：“基础篇”和“高级篇”。基础篇通俗易懂，相当于5-6年级阅读水平(美国)，可以解答关于某种疾病患者可能想了解的4-5个关键问题；基础篇更适合想了解疾病概况且喜欢阅读简短易读资料的患者。高级篇篇幅较长，内容更深入详尽；相当于10-12年级阅读水平(美国)，适合想深入了解并且能接受一些医学术语的患者。
以下是与此专题相关的患者教育资料。我们建议您以打印或电子邮件的方式给予患者。(您也可以通过检索“患者教育”和关键词找到更多相关专题内容。)
基础篇(参见 “患者教育：颞下颌关节疾病(基础篇)”)


UpToDate临床顾问
专题分类
诊疗实践更新
重要更新
患者教育
药物信息
计算器
专科下主题
药物相互作用
搜索 UpToDate
Important Information
COVID-19
COVID-19 Homepage
COVID-19 Questions and Answers
Monkeypox
Epidemiology, clinical manifestations, and diagnosis of monkeypox
Treatment and prevention of monkeypox

专题分类 → 药物信息（**Drug Information**）

General drug information 一般药物信息

International drug information (concise) 国际药物简明信息

Patient drug information 患者用药信息

Pediatric drug information 儿科药物信息

What's new in drug therapy 药物治疗新的变化

Patient Education 患者教育

02 | 专题分类--药物信息

搜索框中直接搜索某种药物，例：氟康唑（fluconazole）

氟康唑，一种有机化合物，主要用作抗真菌药，对人和动物的真菌感染均有治疗作用。

氟康唑

中国药物信息 国外药物信息

药物专论

氟康唑

药物剂型

眼用制剂

普通胶囊剂

分散片

颗粒剂

注射剂

片剂

氟康唑

中国药物信息 国外药物信息

药物信息

Fluconazole: Drug information

Fluconazole: Pediatric drug information

Fluconazole: Patient drug information

Launch drug interactions program →

02 | 专题分类--药物信息

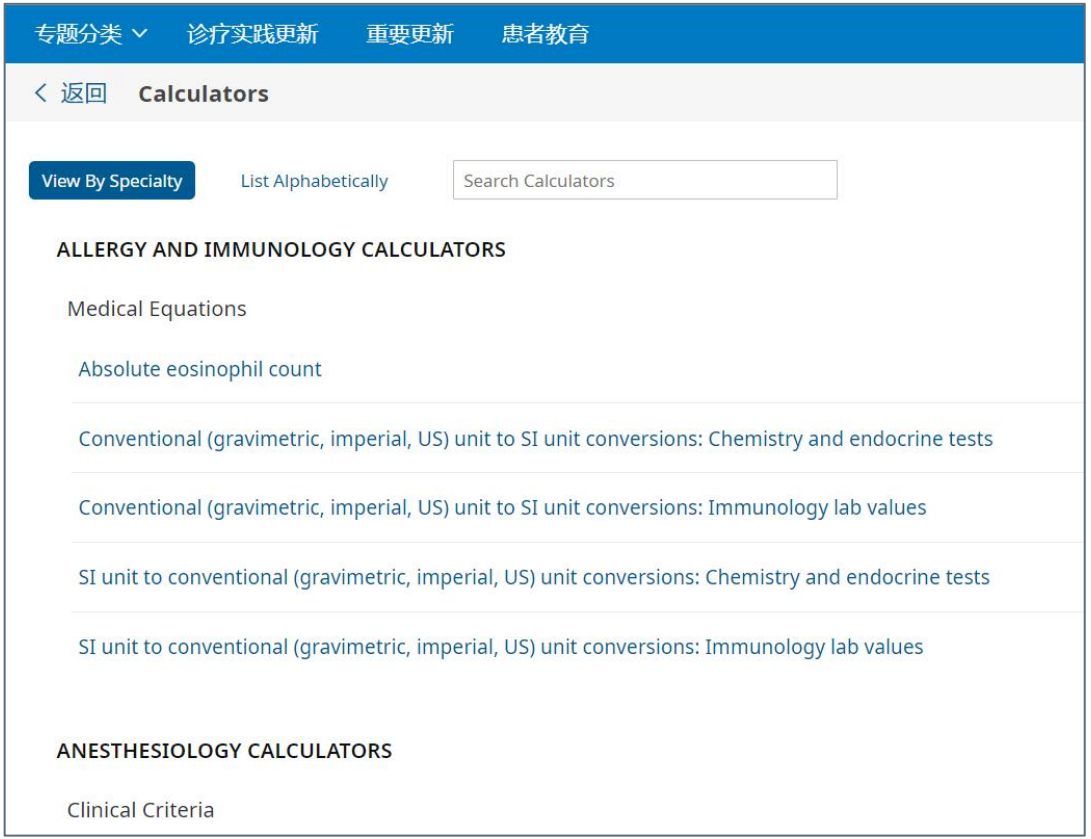

氟康唑
中国药物信息
国外药物信息
药物专论
氟康唑
药物剂型
眼用制剂
普通胶囊剂
分散片
颗粒剂
注射剂
片剂


氟康唑
麦道氟康（氟康唑胶囊）
氟康唑胶囊（常州兰陵）0.15g
常州兰陵制药有限公司
氟康唑胶囊（成都倍特）50mg
成都倍特药业有限公司
氟康唑胶囊（辅仁药业）0.15g
辅仁药业集团有限公司
氟康唑胶囊（辅仁集团）100mg;
辅仁药业集团有限公司


专题提纲
英文名
通用名
商品名
成份
适应症
用法用量
不良反应
禁忌
注意事项
孕妇及哺乳期妇女用药
儿童用药
老年用药
药物相互作用
毒理研究
贮藏
批准文号
是否OTC
生产企业
数据来源：丁香园
英文名
Fluconazole Capsules
通用名
氟康唑胶囊
商品名
麦道氟康
成份
本品主要成分为氟康唑
适应症
本品主要用于以下适应症中病情较重的患者：
念珠菌病：用于治疗口咽部和食道念珠菌感染；
播散性念珠菌病，包括腹膜炎、肺炎、尿路感染等；
念珠菌外阴阴道
用法用量
口服：成人


UpToDate临床顾问
专题分类
诊疗实践更新
重要更新
患者教育
药物信息
计算器
专科下主题
药物相互作用
搜索 UpToDate
Important Information
COVID-19
COVID-19 Homepage
COVID-19 Questions and Answers
Monkeypox
Epidemiology, clinical manifestations, and diagnosis of monkeypox
Treatment and prevention of monkeypox

02 | 专题分类--计算器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SI unit to conventional (gravimetric, imperial, US) unit conversions: Chemistry and endocrine tests
SI unit to conventional (gravimetric, imperial, US) unit conversions: Immunology lab values
ANESTHESIOLOGY CALCULATORS
Clinical Criteria

Calculator: Body mass index (BMI; Quetelet's index) in adults

Input

Height [ ] in
Weight [ ] lb

Result

BMI [ ] kg/m^2

Decimal precision 2

Reset form

BMI interpretation

BMI <18.5:	Below normal weight
BMI ≥18.5 and <25:	Normal weight
BMI ≥25 and <30:	Overweight
BMI ≥30 and <35:	Class I Obesity
BMI ≥35 and <40:	Class II Obesity
BMI ≥40:	Class III Obesity

Calculator: WHO assessment of malnutrition in females 0 to 2 years old

Input

Age [ ] mo
Length [ ] cm
Weight [ ] kg

Results

Z-score length
Z-score weight for length
Length percentile
Weight for length percentile

Decimal precision 1

Reset form

Assessment of linear growth

Z-score >-2:	No stunting
Z-score >-3 and ≤-2:	Moderate stunting
Z-score ≤-3:	Severe stunting

Assessment of weight for length

Z-score >-2:	No wasting
Z-score >-3 and ≤-2:	Moderate wasting
Z-score ≤-3:	Severe wasting


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Epidemiology, clinical manifestations, and diagnosis of monkeypox
Treatment and prevention of monkeypox

02 | 专题分类--专科下主题

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Endocrinology and Diabetes

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Gastroenterology and Hepatology

General Surgery

Geriatrics

Hematology

Hospital Medicine

Infectious Diseases

Nephrology and Hypertension

Neurology

Obstetrics, Gynecology and Women's Health

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Primary Care Sports Medicine (Adolescents and Adults)

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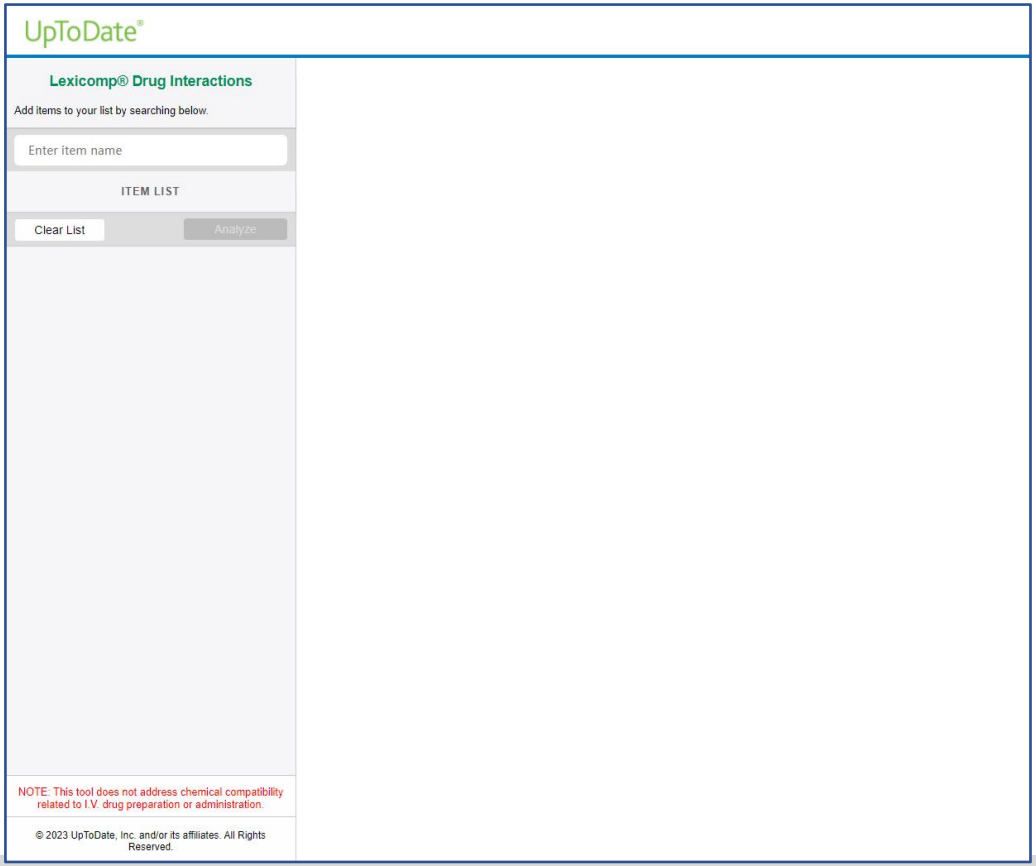
02 | 专题分类--药物相互作用



X 避免组合
数据表明指定的药物可能以临床上显着的方式相互作用。伴随使用这些药物相关的风险通常大于益处。通常应避免同时使用这些代理。

D 考虑治疗修改
数据表明，这两种药物可能以具有临床意义的方式相互作用。必须进行患者特异性评估，以确定伴随治疗的益处是否超过风险。必须采取具体行动，以实现伴随使用药剂所带来的好处和/或最大限度地降低风险。这些行动可能包括积极的监测、经验性剂量变化或选择替代药物。

C 监测治疗
数据表明，指定的药物可能以具有临床意义的方式相互作用。同时使用这两种药物的益处往往大于风险。应实施适当的监测计划，以查明潜在的负面影响。对于某些患者，可能需要调整一种或两种药物的剂量。

B 无需
采取行动数据表明指定的药物可能相互作用，但几乎没有证据表明伴随使用会引起临床关注。

— 没有已知的相互作用
数据没有证明指定药物之间的药效学或药代动力学相互作用

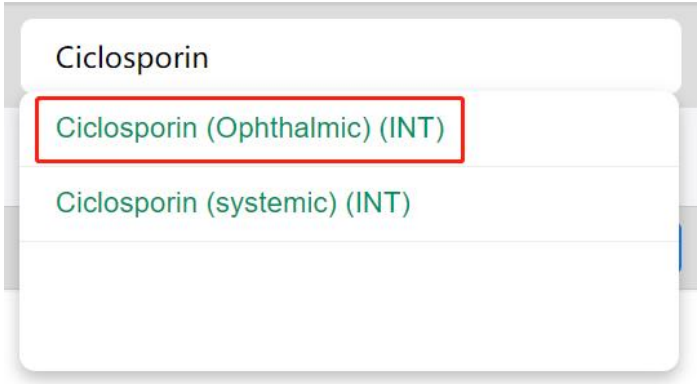
X Avoid Combination
Data demonstrate that the specified agents may interact with each other in a clinically significant manner. The risks associated with concomitant use of these agents usually outweigh the benefits. Concurrent use of these agents should generally be avoided.

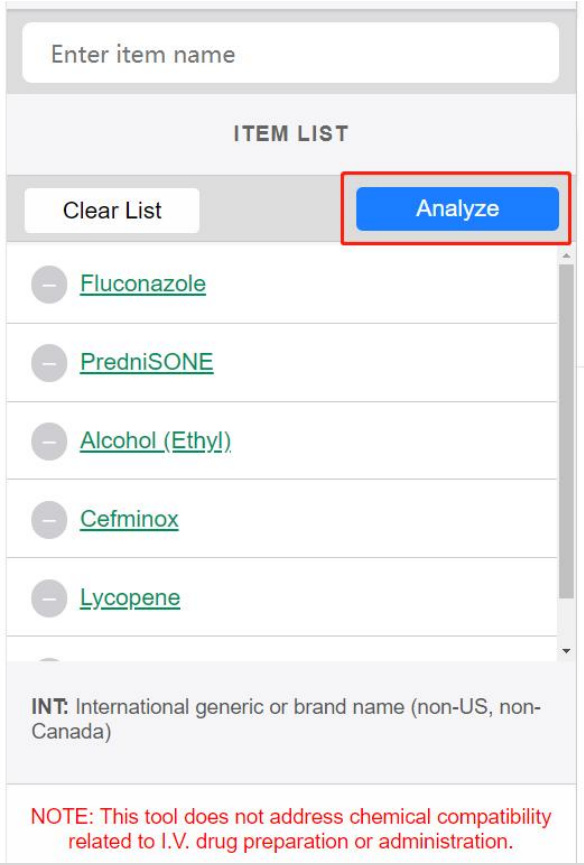
D Consider Therapy Modification
Data demonstrate that the two medications may interact with each other in a clinically significant manner. A patient-specific assessment must be conducted to determine whether the benefits of concomitant therapy outweigh the risks. Specific actions must be taken in order to realize the benefits and/or minimize the risks resulting from concomitant use of the agents. These actions may include aggressive monitoring, empiric dosage changes, or choosing alternative agents.

C Monitor Therapy
Data demonstrate that the specified agents may interact with each other in a clinically significant manner. The benefits of concomitant use of these two medications often outweigh the risks. An appropriate monitoring plan should be implemented to identify potential negative effects. Dosage adjustments of one or both agents may be needed in some patients.

B No Action Needed
Data demonstrate that the specified agents may interact with each other, but there is little to no evidence of clinical concern resulting from their concomitant use.

A No Known Interaction
Data have not demonstrated either pharmacodynamic or pharmacokinetic interactions between the specified agents


Ciclosporin
Ciclosporin (Ophthalmic) (INT)
Ciclosporin (systemic) (INT)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Clear List
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PrediSONE
Alcohol (Ethyl)
Cefminox
Lycopene
INT: International generic or brand name (non-US, non-Canada)
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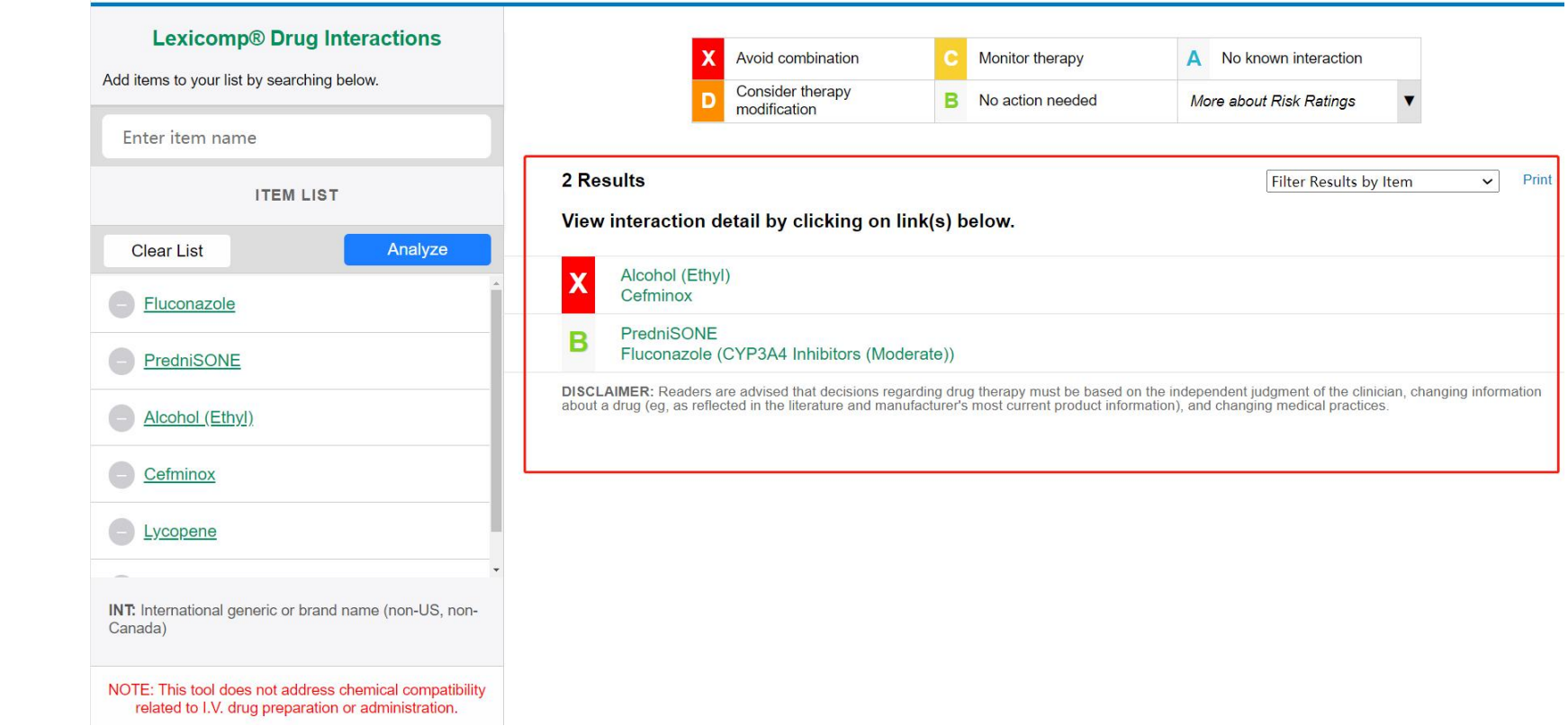
02 | 专题分类--药物相互作用



Title Alcohol (Ethyl) / Cefminox

Print

Risk Rating X: Avoid combination

Summary Cefminox may enhance the adverse/toxic effect of Alcohol (Ethyl). **Severity** Major **Reliability Rating** Fair: Reported in the prescribing information

Patient Management Use of alcohol should be avoided during treatment with cefminox and for at least one week after completion of cefminox treatment. Note that alcohol may be contained in beverages and pharmaceutical products (eg, elixirs).

Discussion The cefminox labeling cautions that the use of alcohol should be avoided during treatment with cefminox and for at least one week after cefminox treatment is completed.[1] Use of alcohol with cefminox may result in a disulfiram-like reaction (i.e., flushing, palpitations, dizziness, nausea, etc.).[1] Studies in rats found evidence that cefminox, along with other cephalosporins with similar chemical structures, increased blood acetaldehyde concentrations.[2] Flushing occurred in 5 of 8 healthy subjects after receiving ethanol (0.5 g/kg) following the administration of 3 doses of cefotetan (2 g every 12 hours), a cephalosporin containing a chemical structure similar to that of cefminox.[3] Other signs and symptoms of disulfiram-like reactions were noted (eg, changes in heart rate and blood pressure); however, no changes in the pharmacokinetics of alcohol or acetaldehyde were observed.

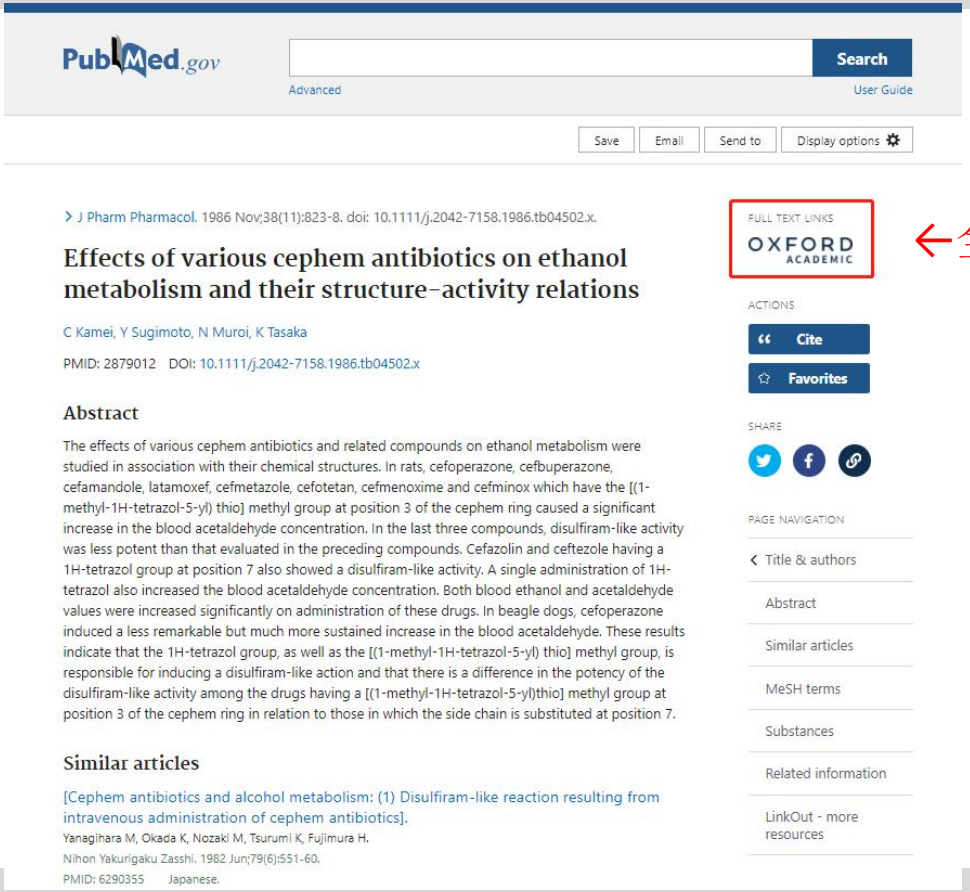
The mechanism of this potential interaction is uncertain, but it has been proposed that cefminox may inhibit adehyde dehydrogenase, impairing the metabolism of acetaldehyde generated in the metabolism of alcohol.

Footnotes

1. Meicelin (cefminox) [Japan Pharmaceutical Reference]. Tokyo, Japan: Meiji Seika Kaisha, Ltd.; June 2005.

2. Kamei C, Sugimoto Y, Muroi N, Tasaka K. Effects of various cephem antibiotics on ethanol metabolism and their structure-activity relations. *J Pharm Pharmacol*. 1986;38(11):823-828. [PubMed 2879012]

3. Kline SS, Mauro VF, Forney RB Jr, Freimer EH, Somani P. Cefotetan-induced disulfiram-type reactions and hypoprothrombinemia. *Antimicrob Agents Chemother*. 1987;31(9):1328-1331. [PubMed 3479045]



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J Pharm Pharmacol. 1986 Nov;38(11):823-8. doi: 10.1111/j.2042-7158.1986.tb04502.x.

Effects of various cephem antibiotics on ethanol metabolism and their structure-activity relations

C Kamei, Y Sugimoto, N Muroi, K Tasaka

PMID: 2879012 DOI: 10.1111/j.2042-7158.1986.tb04502.x

Abstract

The effects of various cephem antibiotics and related compounds on ethanol metabolism were studied in association with their chemical structures. In rats, cefoperazone, cefbuperazone, cefamandole, latamoxef, cefmetazole, cefotetan, cefmenoxime and cefminox which have the [(1-methyl-1H-tetrazol-5-yl) thio] methyl group at position 3 of the cephem ring caused a significant increase in the blood acetaldehyde concentration. In the last three compounds, disulfiram-like activity was less potent than that evaluated in the preceding compounds. Cefazolin and ceftezole having a 1H-tetrazol group at position 7 also showed a disulfiram-like activity. A single administration of 1H-tetrazol also increased the blood acetaldehyde concentration. Both blood ethanol and acetaldehyde values were increased significantly on administration of these drugs. In beagle dogs, cefoperazone induced a less remarkable but much more sustained increase in the blood acetaldehyde. These results indicate that the 1H-tetrazol group, as well as the [(1-methyl-1H-tetrazol-5-yl) thio] methyl group, is responsible for inducing a disulfiram-like action and that there is a difference in the potency of the disulfiram-like activity among the drugs having a [(1-methyl-1H-tetrazol-5-yl)thio] methyl group at position 3 of the cephem ring in relation to those in which the side chain is substituted at position 7.

Similar articles

[Cephem antibiotics and alcohol metabolism: (1) Disulfiram-like reaction resulting from intravenous administration of cephem antibiotics].

Yanagihara M, Okada K, Nozaki M, Tsurumi K, Fujimura H.

Nihon Yakurigaku Zasshi. 1982 Jun;79(6):551-60.

PMID: 6290355 Japanese.

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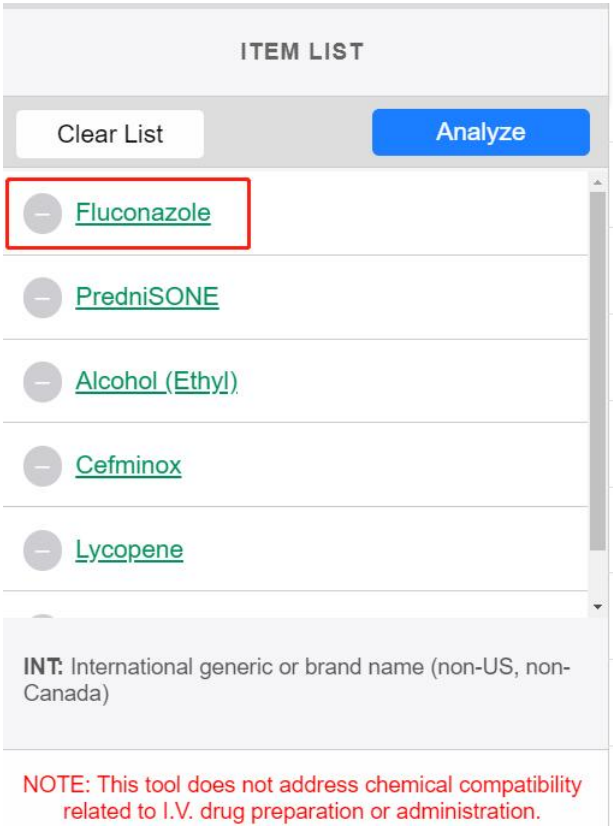

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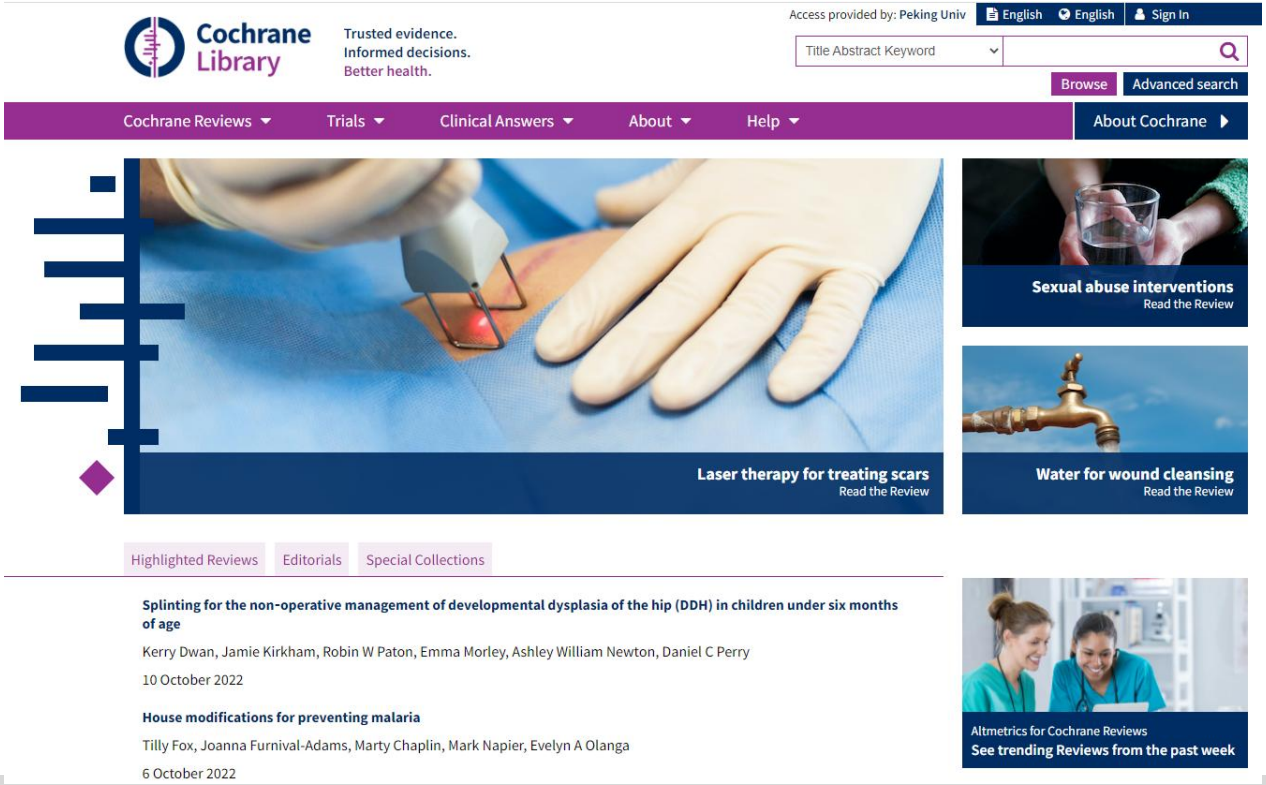

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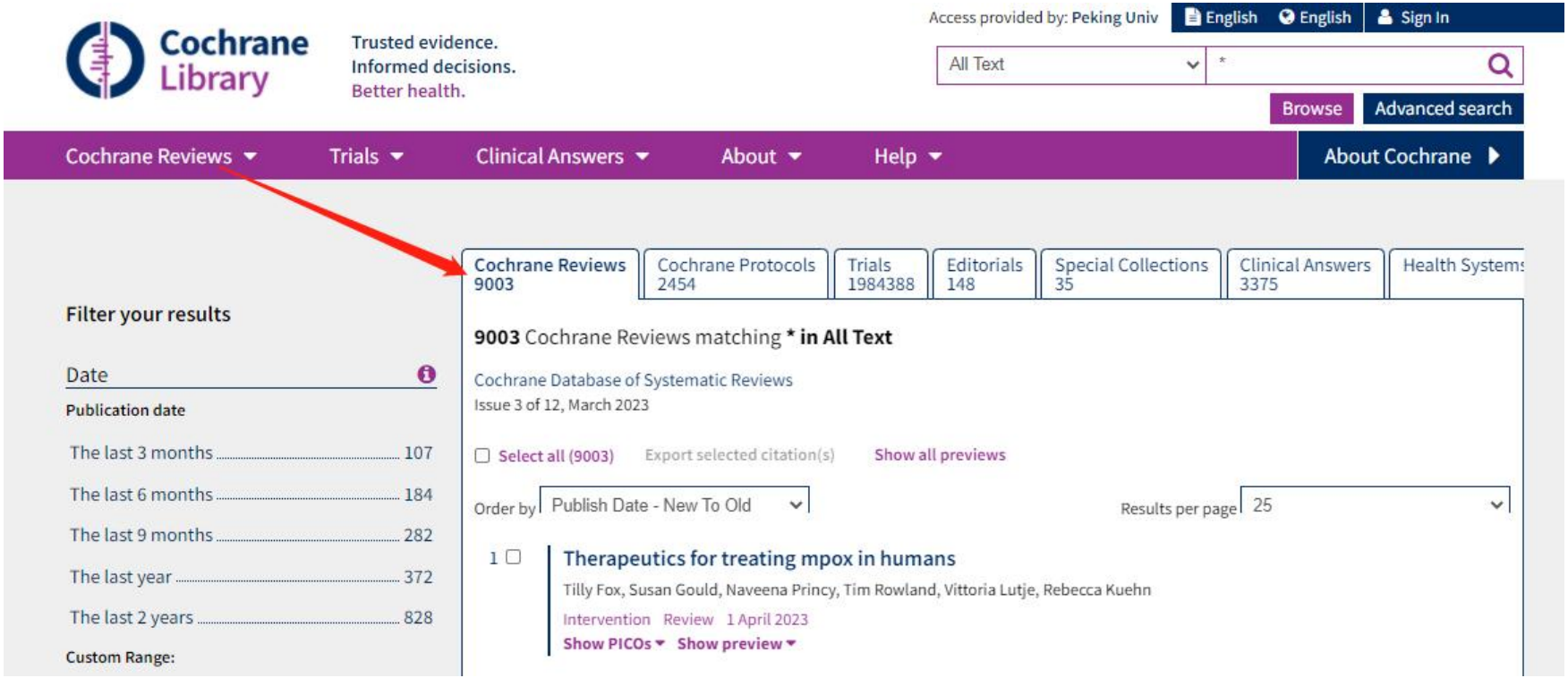
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Sedation of children undergoing dental treatment

Paul F Ashley, Mohsin Chaudhary, Liege Lourenço-Matharu Authors' declarations of interest

Version published: 17 December 2018 Version history

https://doi.org/10.1002/14651858.CD003877.pub5

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Abstract

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Background

Children's fear about dental treatment may lead to behaviour management problems for the dentist, which can be a barrier to the successful dental treatment of children. Sedation can be used to relieve anxiety and manage behaviour in children undergoing dental treatment. There is a need to determine from published research which agents, dosages and regimens are effective. This is the second update of the Cochrane Review first published in 2005 and previously updated in 2012.

Objectives

To evaluate the efficacy and relative efficacy of conscious sedation agents and dosages for behaviour management in paediatric dentistry.

Search methods

Cochrane Oral Health's Information Specialist searched the following databases: Cochrane Oral Health's Trials Register (to 22 February 2018); the Cochrane Central Register of Controlled Trials (CENTRAL; 2018, Issue 1) in the Cochrane Library (searched 22 February 2018); MEDLINE Ovid (1946 to 22 February 2018); and Embase Ovid (1980 to 22 February 2018). The US National Institutes of Health Ongoing Trials Register (ClinicalTrials.gov) and the World Health Organization International Clinical Trials Registry Platform were searched for ongoing trials. No restrictions were placed on the language or date of publication when searching the electronic databases.

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Sedation of children undergoing dental treatment

Review question

The aim of this Cochrane Review was to find out which drugs used to sedate children during dental treatment were the most effective.

Background

Fear of the dentist may be expressed as unco-operative behaviour in children requiring dental treatment. Behaviour management problems can result in a child's tooth decay going untreated. While behavioural techniques play an important role in managing children, some children still find it difficult to co-operate with dental treatment and may require sedation. This review examined the effects of drugs to sedate a child whilst keeping them conscious.

Study characteristics

Authors from Cochrane Oral Health carried out this review and the evidence is up to date to 22 February 2018. A total of 50 randomised controlled trials were included with a total of 3704 participants. Within these studies 34 different sedatives were used, often with inhalational nitrous oxide as well. Dosages and delivery of these drugs varied widely. We grouped studies into those where drugs were compared to a placebo, where drugs were compared to other drugs or where different dosages of drugs were compared. Because all the studies were so different we could only carry out a meta-analysis for studies comparing oral midazolam to a placebo. The review showed that use of oral midazolam made patients more co-operative for dental treatment than a placebo drug. Where reported, adverse effects were few and minor.

Key results

Oral midazolam probably improves behaviour of children during dental treatment. We evaluated other sedatives but there is insufficient evidence to draw any conclusions.

Certainty of the evidence

There is some moderate-certainty evidence that midazolam administered in a drink of juice is effective.

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Sedation of children undergoing dental treatment

Paul F Ashley, Mohsin Chaudhary, Liege Lourenço-Matharu Authors' declarations of interest

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2012 Mar 14 Show revisions	Sedation of children undergoing dental treatment	Review	Liege Lourenço-Matharu, Paul F Ashley, Susan Furness	https://doi.org/10.1002/14651858.CD003877.pub4
2006 Jan 25 Show revisions	Sedation of anxious children undergoing dental treatment	Review	Liege Matharu, Paul F Ashley	https://doi.org/10.1002/14651858.CD003877.pub3
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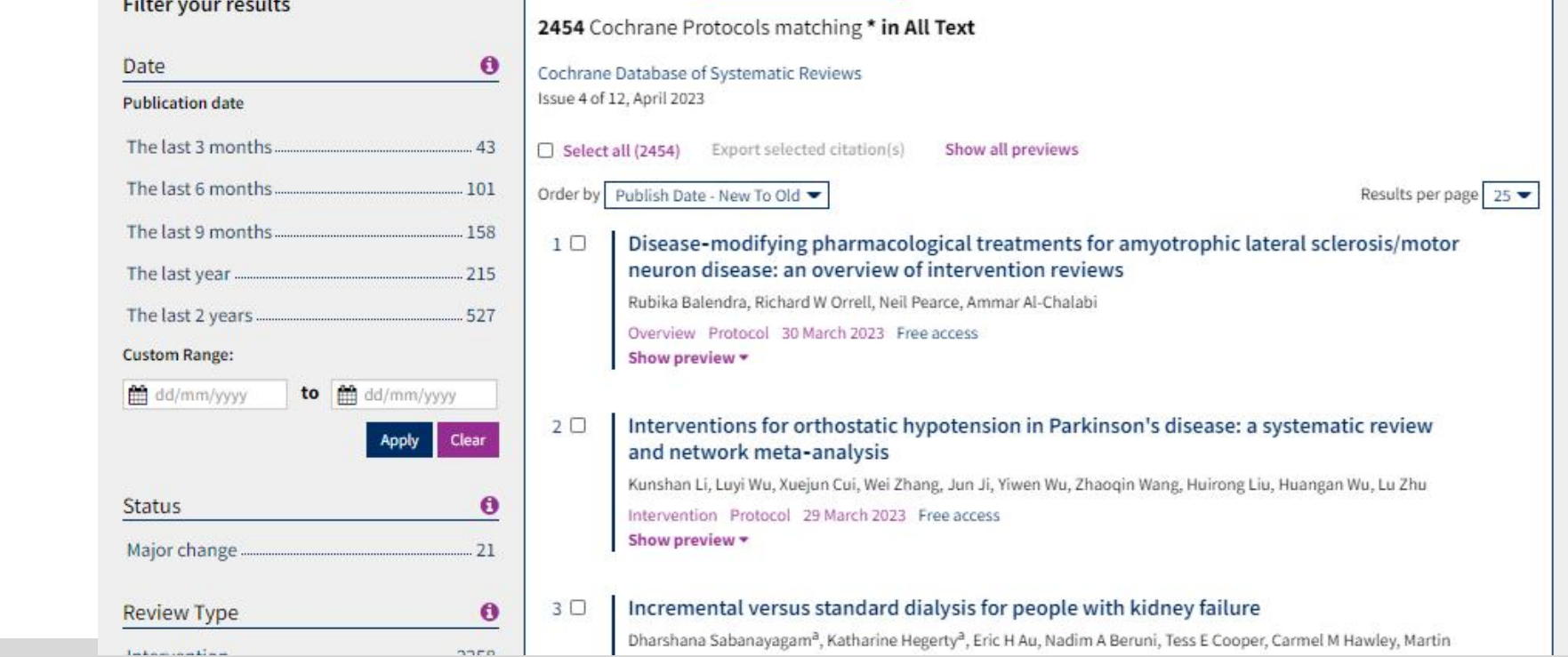

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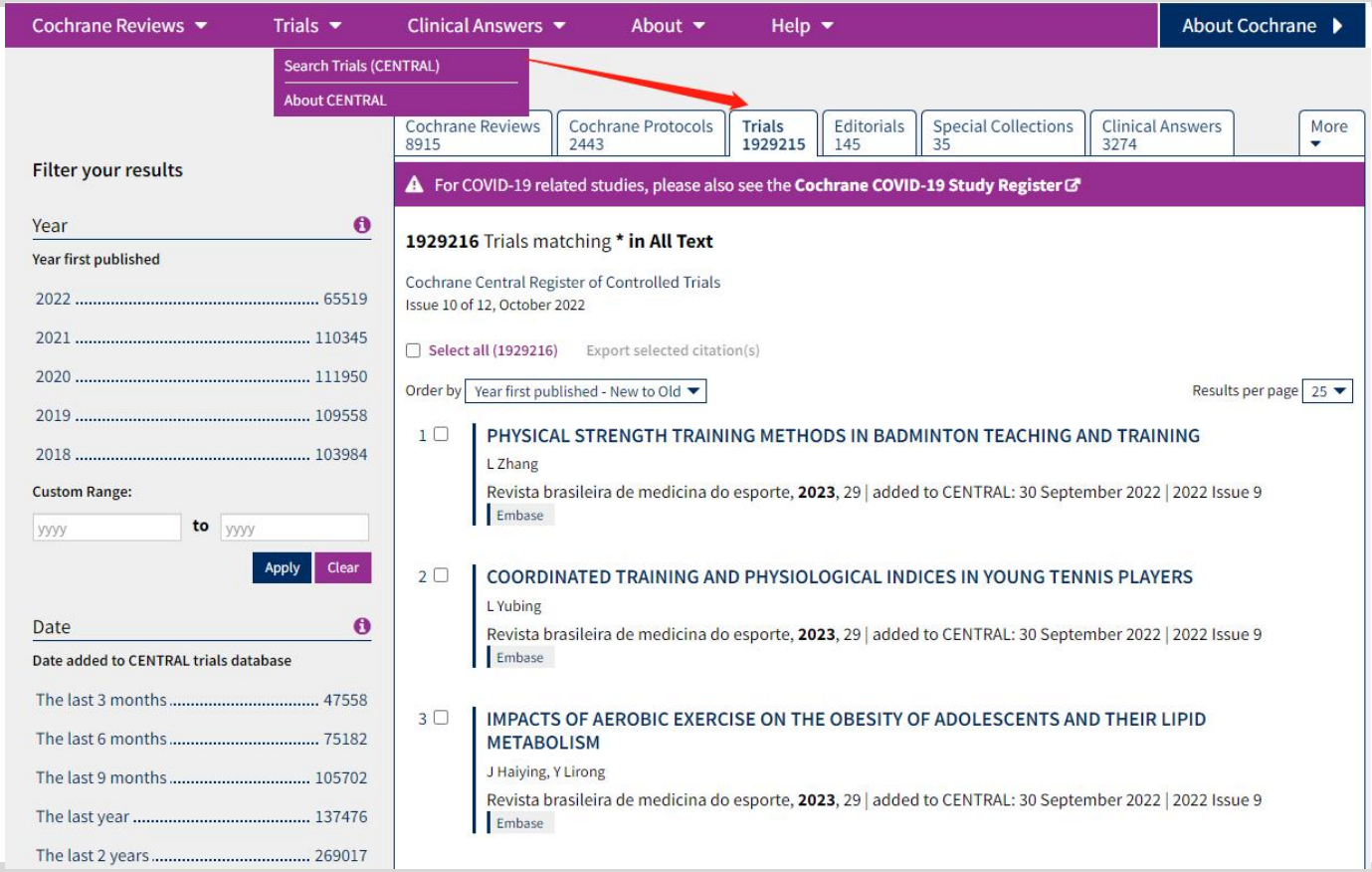
03 | Trials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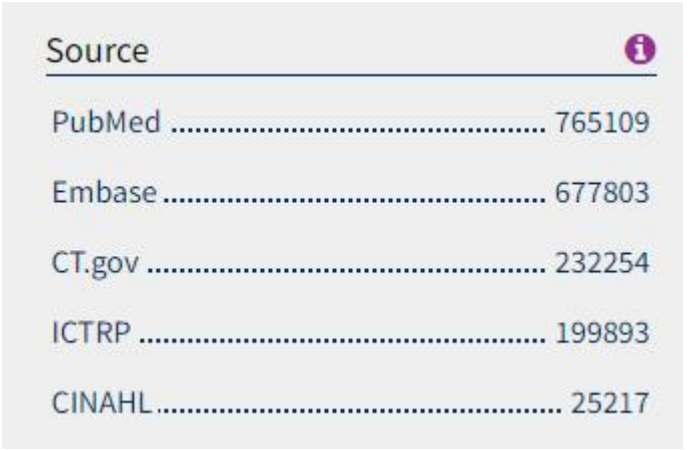

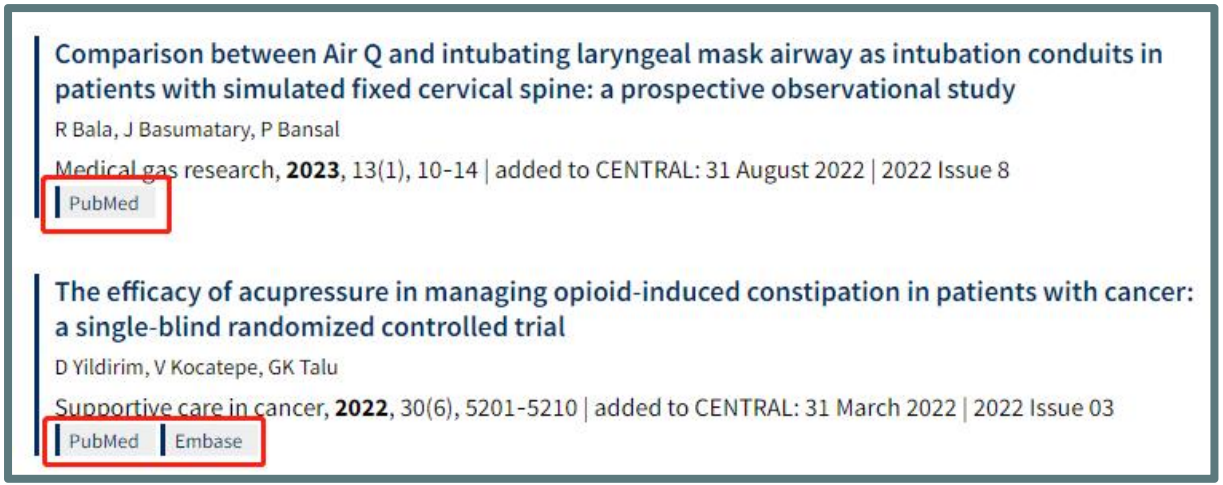

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Alhaidari RI, AlSarheed M, Sheta SA, Aldhubaiban M

Pediatric dentistry, 2022, 44(4), 255-260 | added to CENTRAL: 30 September 2022 | 2022 Issue 9

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Abstract

Purpose: The purpose of this study was to compare the effectiveness of intranasal fentanyl combined with oral midazolam to oral midazolam alone in pediatric dental patients. Methods: Thirty-two uncooperative healthy children aged three to six years old, who met the inclusion criteria, were randomly assigned to receive oral midazolam (0.7 mg/kg) with either intranasal fentanyl (one µg/kg) or intranasal placebo (saline). A controlled, randomized, double-blinded, crossover clinical trial design was followed so that each child received both regimens. Data collected included the onset of sedation, working time, sedation and behavior assessment, and occurrence of side effects. Results: The onset of sedation time was not statistically different between the two groups (P=0.62), while the median working time of the midazolam/fentanyl sedation was sig- nificantly longer than the midazolam sedation (P<0.001). Sedation scores were significantly better with the midazolam/fentanyl sedation regimen at separation from parents (P=0.032), local anesthesia administration (P=0.018), rubber dam application (P=0.035), after five minutes of dental treatment (P=0.035), after 10 minutes (P=0.039), after 15 minutes (P=0.012), and after 20 minutes (P=0.038). Behavior scores were significantly better with the midazolam/fentanyl sedation only at local anesthesia administration (P=0.021), rubber dam placement (P=0.004), and after five minutes of dental treatment (P=0.049). Minor side effects occurred in 12.5 percent of sedation procedures and were not significantly associated with either of the two groups (P=0.70). Conclusion: The combination of oral midazolam with intranasal fentanyl sedation, when compared to oral midazolamas a single agent, significantly improved sedation and behavior during local anesthesia and operative dentistry for healthy three- to six-year-old children in addition to prolonged sedation working time.

Information

Database:	Cochrane Central Register of Controlled Trials (CENTRAL)
Date Added to CENTRAL:	30 September 2022
Issue Added to CENTRAL:	2022 Issue 9
Source:	Pediatric dentistry
Year of Publication:	2022
Volume:	44
Issue:	4
Pages:	255-260
Accession Number:	PUBMED 35999678; EMBASE 638829289
Language:	English
Publication Type:	Journal article
ID Number:	CN-02454040

Cochrane Central Register of Controlled Trials

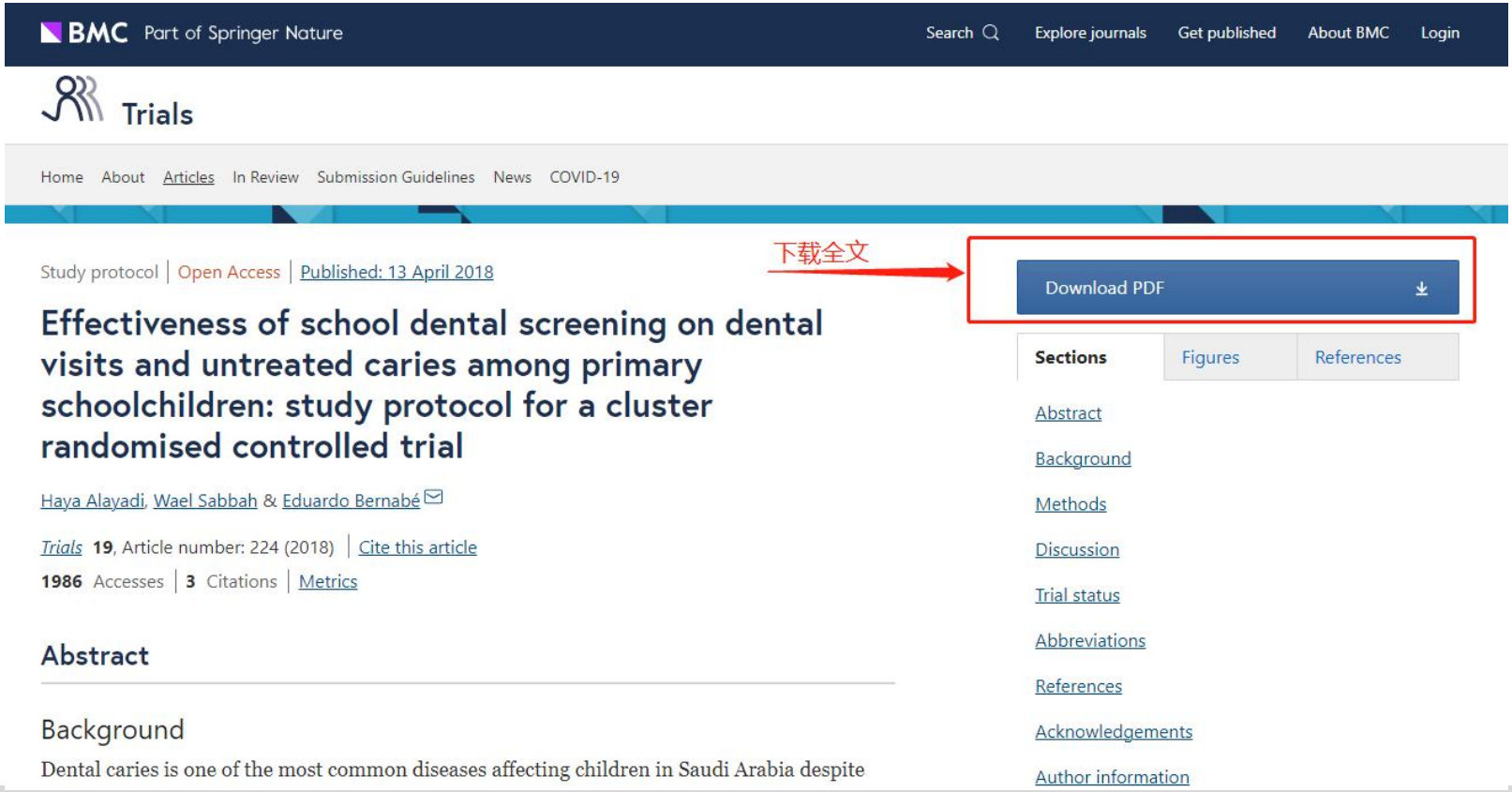
Effectiveness of school dental screening on dental visits and untreated caries among primary schoolchildren: study protocol for a cluster randomised controlled trial

Alayadi H, Sabbah W, Bernabe E

Trials, 2018, 19(1) (no pagination) | added to CENTRAL: 31 May 2018 | 2018 Issue 5

https://doi.org/10.1186/s13063-018-2619-2

Sourced from: Embase



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Study protocol | Open Access | Published: 13 April 2018

Effectiveness of school dental screening on dental visits and untreated caries among primary schoolchildren: study protocol for a cluster randomised controlled trial

Haya Alayadi, Wael Sabbah & Eduardo Bernabé

Trials **19**, Article number: 224 (2018) | Cite this article

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Sections Figures References

Abstract

Background

Dental caries is one of the most common diseases affecting children in Saudi Arabia despite

Cochrane Central Register of Controlled Trials

Essential Oils Mouthrinse and Dental Floss, Comparison of Efficacy on Interproximal Gingivitis and Dental Plaque Accumulation

NCT01236963

https://clinicaltrials.gov/show/NCT01236963, 2010 | added to CENTRAL: 31 May 2018 | 2018 Issue 5

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Essential Oils Mouthrinse and Dental Floss, Comparison of Efficacy on Interproximal Gingivitis and Dental Plaque Accumulation

ClinicalTrials.gov Identifier: NCT01236963

The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. Read our disclaimer for details.

Recruitment Status : Completed
First Posted : November 9, 2010
Last Update Posted : November 10, 2010

Sponsor:
University of Lisbon

Collaborator:
Instituto Piaget

Information provided by:
University of Lisbon

Study Details | Tabular View | No Results Posted | Disclaimer | How to Read a Study Record

Study Description

More Information Go to

Publications:

Barnett ML. The rationale for the daily use of an antimicrobial mouthrinse. J Am Dent Assoc. 2006 Nov;137 Suppl:16S-21S. Review. Erratum in: J Am Dent Assoc. 2008 Mar;139(3):252.

Bauroth K, Charles CH, Mankodi SM, Simmons K, Zhao Q, Kumar LD. The efficacy of an essential oil antiseptic mouthrinse vs. dental floss in controlling interproximal gingivitis: a comparative study. J Am Dent Assoc. 2003 Mar;134(3):359-65. Erratum in: J Am Dent Assoc. 2003 May;134(5):558.

Gordon JM, Lamster IB, Seiger MC. Efficacy of Listerine antiseptic in inhibiting the development of plaque and gingivitis. J Clin Periodontol. 1985 Sep;12(8):697-704.

Sharma N, Charles CH, Lynch MC, Qaqish J, McGuire JA, Galustians JG, Kumar LD. Adjunctive benefit of an essential oil-containing mouthrinse in reducing plaque and gingivitis in patients who brush and floss regularly: a six-month study. J Am Dent Assoc. 2004 Apr;135(4):496-504.

Sharma NC, Charles CH, Qaqish JG, Galustians HJ, Zhao Q, Kumar LD. Comparative effectiveness of an essential oil mouthrinse and dental floss in controlling interproximal gingivitis and plaque. Am J Dent. 2002 Dec;15(6):351-5.

Responsible Party:	Henrique Soares Luis, Faculdade de Medicina Dentária da Universidade de Lisboa
ClinicalTrials.gov Identifier:	NCT01236963 History of Changes
Other Study ID Numbers:	9/2006b
First Posted:	November 9, 2010 Key Record Dates
Last Update Posted:	November 10, 2010
Last Verified:	July 2010

Cochrane Central Register of Controlled Trials

A behavioural intervention to reduce the inequalities in the uptake of routine dental care: main trial

ISRCTN84666712
https://trialsearch.who.int/Trial2.aspx?TrialID=ISRCTN84666712, 2021 | added to CENTRAL: 31 May 2021 | 2021 Issue 05

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Main

Note: This record shows only 22 elements of the WHO Trial Registration Data Set. To view changes that have been made to the source record, or for additional information about this trial, click on the URL below to go to the source record in the primary register.

Register:	ISRCTN
Last refreshed on:	5 August 2022
Main ID:	ISRCTN84666712
Date of registration:	12/04/2021
Prospective Registration:	Yes
Primary sponsor:	University of Liverpool
Public title:	A behavioural intervention to reduce the inequalities in the uptake of routine dental care: main trial
Scientific title:	InteRvention to rEduce inequaliTies in the Uptake of Routine deNtal care - RETURN main trial
Date of first enrolment:	18/08/2021
Target sample size:	1180
Recruitment status:	Ongoing
URL:	https://www.isrctn.com/ISRCTN84666712
Study type:	Interventional
Study design:	Randomized; Both; Design type: Prevention, Process of Care, Psychological & Behavioural, Qualitative (Treatment)
Phase:	Not Applicable

Countries of recruitment

England United Kingdom

Contacts

Name:	**Name:**	Rebecca Harris
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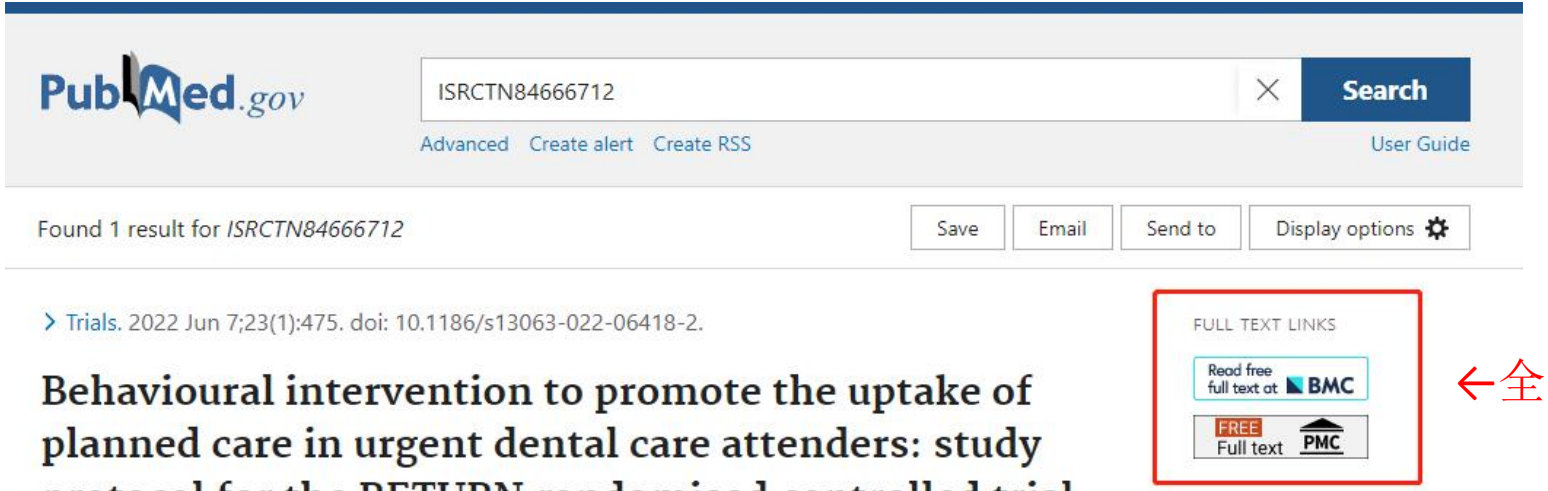
Telephone:	**Telephone:**	+44 (0)151 795 5334
Email:	**Email:**	harrisrv@liverpool.ac.uk
Affiliation:	**Affiliation:**	



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Trials. 2022 Jun 7;23(1):475. doi: 10.1186/s13063-022-06418-2.

Behavioural intervention to promote the uptake of planned care in urgent dental care attenders: study protocol for the RETURN randomised controlled trial

R Harris [1], V Lowers [2], C Hulme [3], G Burnside [4], A Best [5], J E Clarkson [6], R Cooke [7], M Van Der Zande [2], R Maitland [2 5]

Affiliations + expand

PMID: 35672830 PMCID: PMC9172193 DOI: 10.1186/s13063-022-06418-2

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Cochrane Central Register of Controlled Trials

The Effect of Continuing Education on Dental Hygienists' Knowledge, Attitudes, and Practices Regarding Human Papillomavirus Related Oropharyngeal Cancer

McLeroy TM, Gurenlian J, Rogo EJ

Journal of dental hygiene, 2020, 94(3), 16-28 | added to CENTRAL: 3

Sourced from CINAHL

Information

Database:	Cochrane Central Register of Controlled Trials (CENTRAL)
Date Added to CENTRAL:	30 November 2020
Issue Added to CENTRAL:	2020 Issue 11
Source:	Journal of dental hygiene
Year of Publication:	2020
Volume:	94
Issue:	3
Pages:	16-28
Accession Number:	CINAHL 144241053
Language:	English
Publication Type:	Journal article
ID Number:	CN-02198900
Cochrane Group Code:	SR-ORAL


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结果列表 精确检索 1 共 1

The Effect of Continuing Education on Dental Hygienists' Knowledge, Attitudes, and Practices Regarding Human Papillomavirus Related Oropharyngeal Cancer.

作者: McLeroy, Toni M.; [1]Gurenlian, JoAnn; [2]Rogo, Ellen J.[3]

单位: [1]CRDH, MS is an associate professor, Dental Hygiene Department, State College of Florida, Manatee-Sarasota, FL
[2]RDH, PhD, AFAAOM, is a professor and the Graduate Program Director, Dental Hygiene Department, Idaho State University, Pocatello
[3]RDH, PhD is a professor, Dental Hygiene Department, Idaho State University, Pocatello, ID

来源: Journal of Dental Hygiene (J DENT HYG), Jun2020; 94(3): 16-28. (13p)

出版物类型: Article - research, tables/charts, randomized controlled trial

语言: English

主要主题: Dental Hygienists -- Psychosocial Factors
Education, Continuing
Dental Hygienists -- Education -- Florida
Professional Knowledge
Dental Hygienist Attitudes
Dentistry
Papillomavirus Infections -- Prevention and Control
Oropharyngeal Neoplasms -- Prevention and Control

次要主题: Human; Randomized Controlled Trials; Random Sample; Pretest-Posttest Design; Experimental Studies; Florida; Questionnaires; Descriptive Statistics; Data Analysis Software; Analysis of Variance; Power Analysis; Random Assignment; Summated Rating Scaling; Content Validity; Course Content; Adult; Middle Age; Aged

图像

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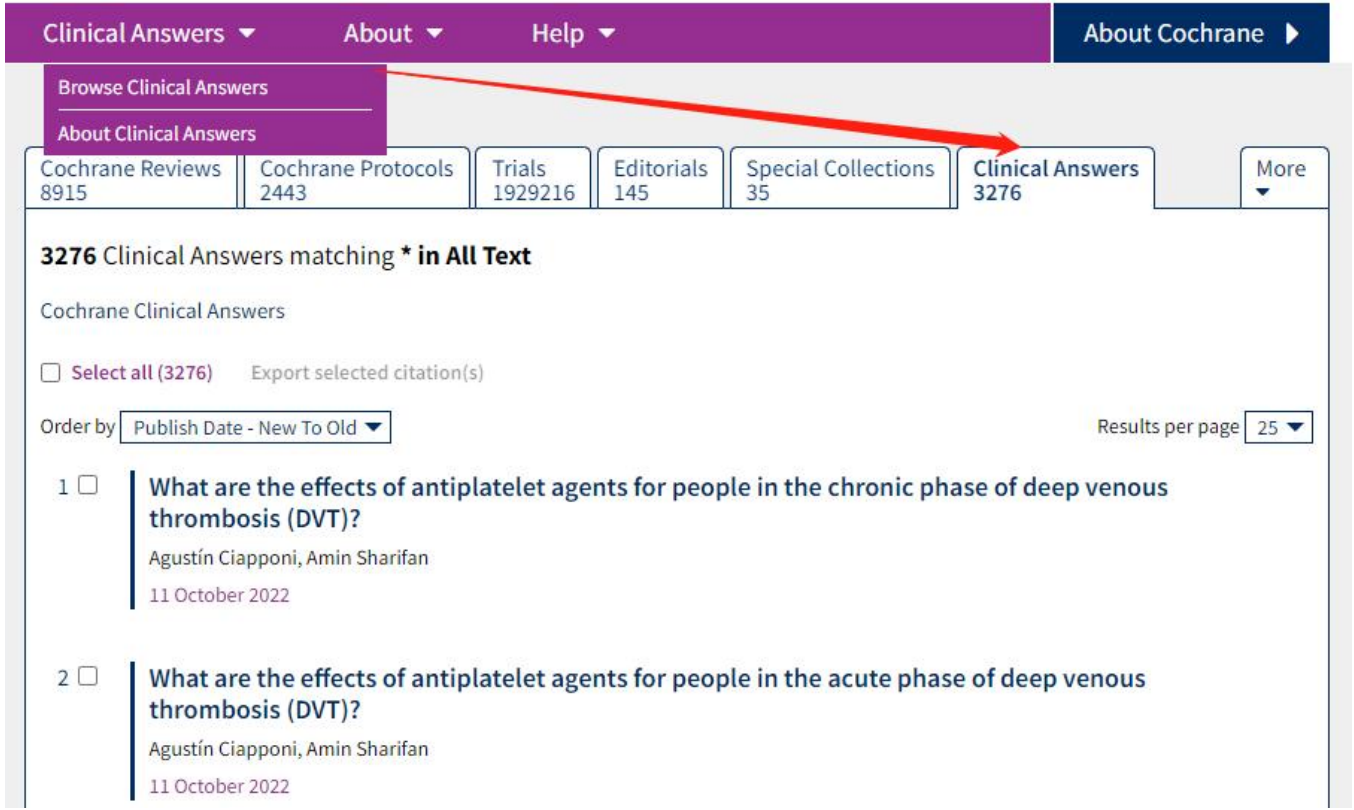
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1
What are the effects of antiplatelet agents for people in the chronic phase of deep venous thrombosis (DVT)?
Agustín Ciapponi, Amin Sharifan
11 October 2022
2
What are the effects of antiplatelet agents for people in the acute phase of deep venous thrombosis (DVT)?
Agustín Ciapponi, Amin Sharifan
11 October 2022

Cochrane Clinical Answers

Question:

Is there randomized controlled trial evidence to support the use of fluoride gels for preventing dental caries?

Mojtaba Dorri

25 July 2016
https://doi.org/10.1002/cca.876

Clinical Answer:

Moderate-quality evidence indicates that children or adolescents who have fluoride gel applied to their teeth, either by professionals or self-applied, are less likely to develop caries increment than those who have had no treatment or placebo. The mean reduction in caries on tooth surfaces was on average 28% per and on whole tooth was on average 32%. One RCT with 280 participants suggested that fluoride gel may reduce development of new caries lesions on the surfaces of permanent teeth.

Low-quality evidence suggests that fluoride gel can reduce caries increment on the surfaces of primary teeth (20 per 100 people, 95% CI 1% to 38%).

Adverse events evidence was very low quality. There was no clear difference between groups in nausea, gagging or vomiting.

Comparisons

1. Fluoride gel versus placebo or no treatment	Expand All »
› OUTCOME 1.1 Changes in caries on the surfaces of permanent teeth (D(M)FS increment nearest to 3 years)	
› OUTCOME 1.2 Changes in caries on whole teeth of permanent dentition D(M)FT increment nearest to 3 years	
› OUTCOME 1.3 Changes in caries on the surfaces of primary teeth (d(e/m)fs increment nearest to 3 years)	
› OUTCOME 1.4 Development of new caries	
› OUTCOME 1.5 Withdrawals	
› OUTCOME 1.6 Nausea or vomiting	
› OUTCOME 1.7 Mucosal irritation/allergic reaction	

OUTCOME 1.6 Nausea or vomiting

Narrative result

Two RCTs with 490 participants found no statistically significant difference between groups.[6]

Quality of the evidence

The reviewers performed a GRADE assessment of the quality of evidence for this outcome at this time point and stated that the evidence was very low quality. See Summary of findings from Cochrane review

Relative effect or mean difference

There was no statistically significant difference between groups (risk difference 1%, 95% CI -1% to 2%).

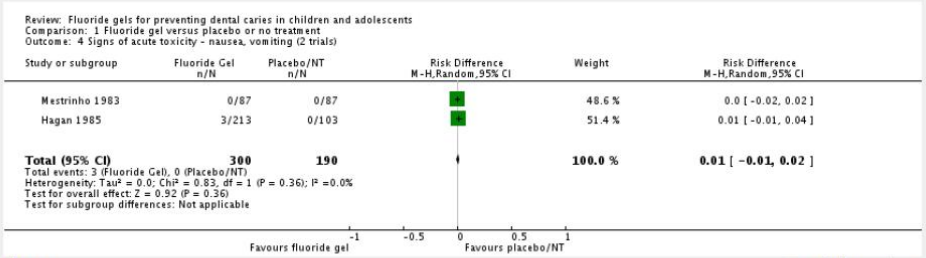

Figure 5

Open in figure viewer

Forest plot from Cochrane Review

Reference

Marinho VCC, Worthington HV, Walsh T, Chong LY. Fluoride gels for preventing dental caries in children and adolescents. *Cochrane Database of Systematic Reviews* 2015, Issue 6. Art. No.: CD002280. DOI: 10.1002/14651858.CD002280.pub2. [Review search date: November 2014]

Population, Intervention, Comparator

Population

Children and adolescents (mean age 12 (range 2 to 15) years) attending school or school clinics. Decayed, missing and filled surfaces (D(M)FS) at baseline ranged from 0 to 12.2. Of the 27 trials 11 reported exposure of at least some participants to other fluoride sources (water, salt or toothpaste); exposure was low or none in four trials and unclear in the remaining trials

Intervention

Fluoride gel applied by professionals (17 studies), or self-applied with supervision by dental (4 studies) or non-dental (7 studies) personnel; where reported, using a tray (18 trials) or a brush (5 studies). Different fluoride gels were used: acidulated phosphate fluoride (21 studies), sodium fluoride (7 studies), amine fluoride (4 studies) and stannous fluoride (1 study); some trials had more than one intervention arm. The application frequency ranged from once to 140 times a year (most commonly ≤4 times) and application times ranged from 2 to 10 minutes. Study duration ranged from 1 to 4 years

Comparator

Placebo (17 studies) or no treatment (10 studies)

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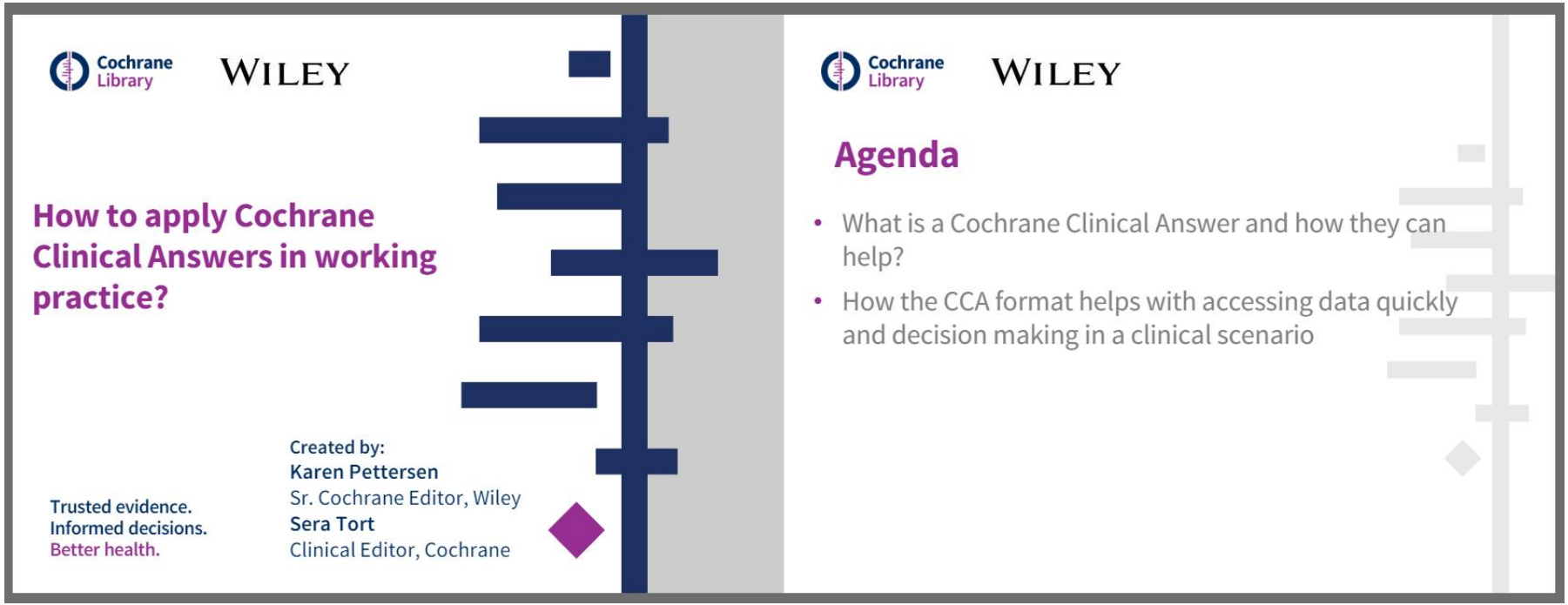

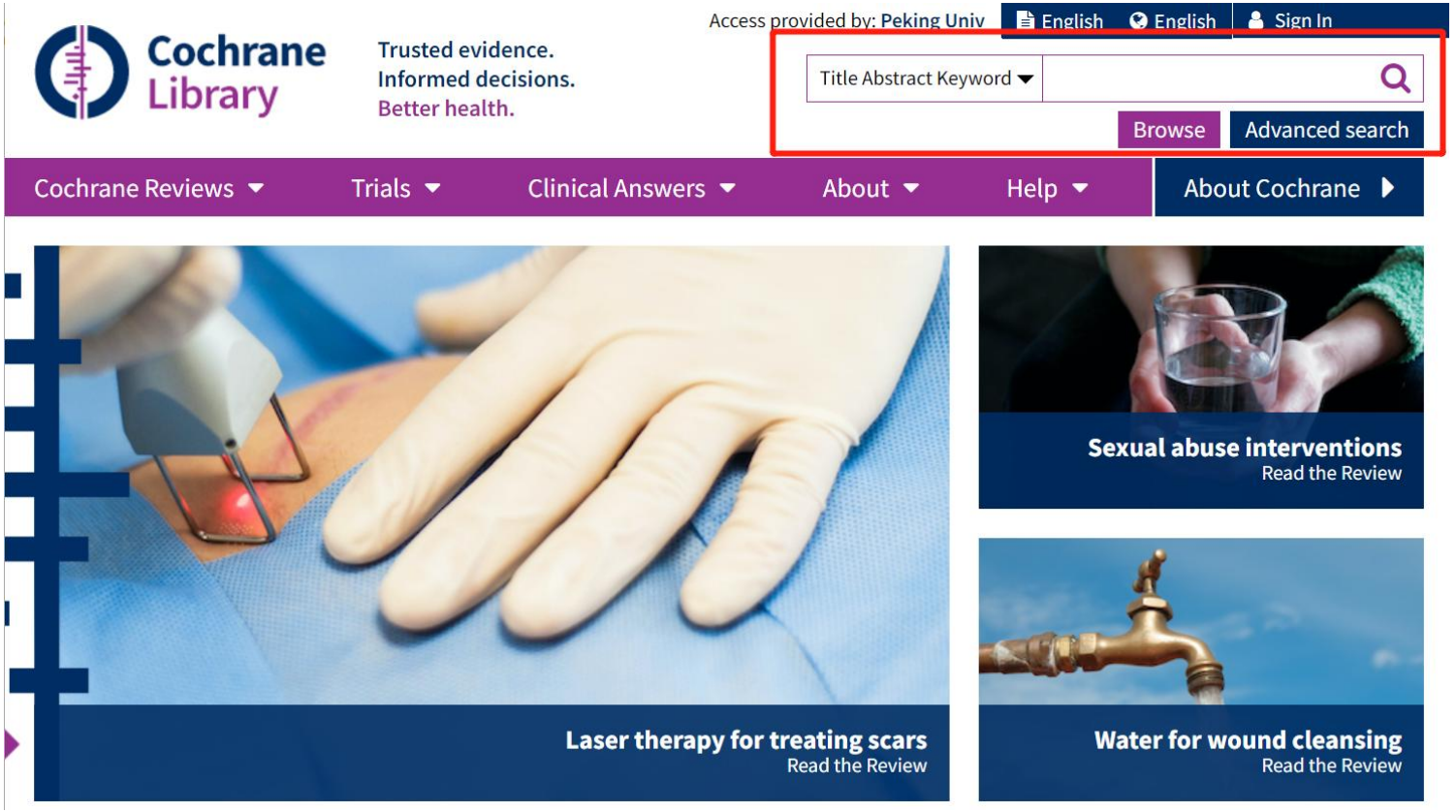
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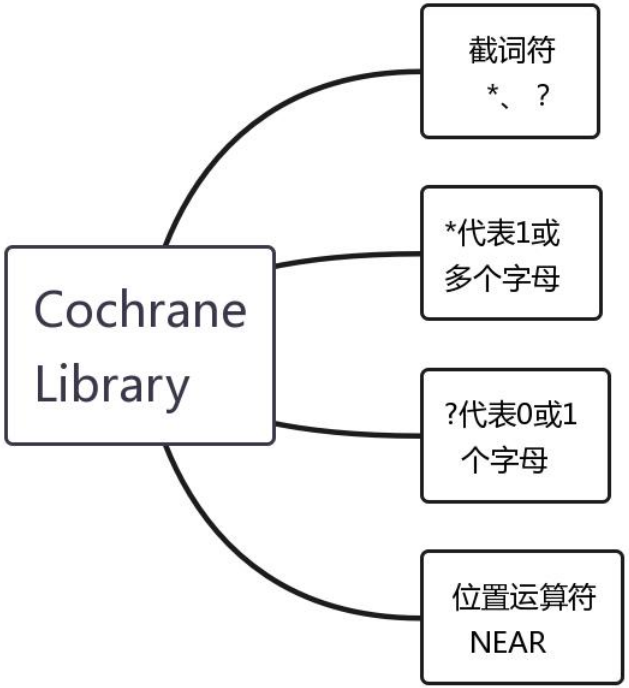

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如检索"wom?n"，可检出"woman"或"women"

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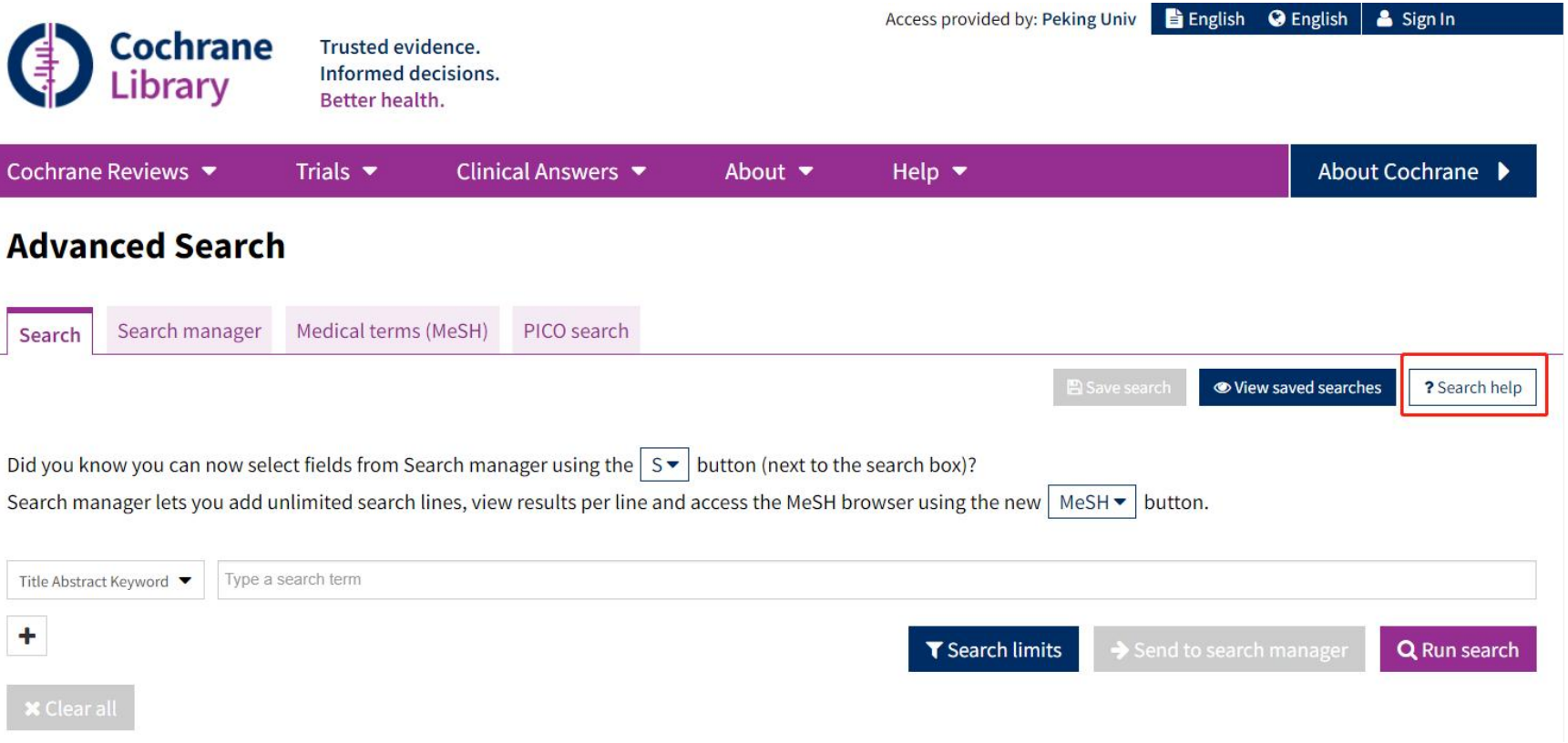
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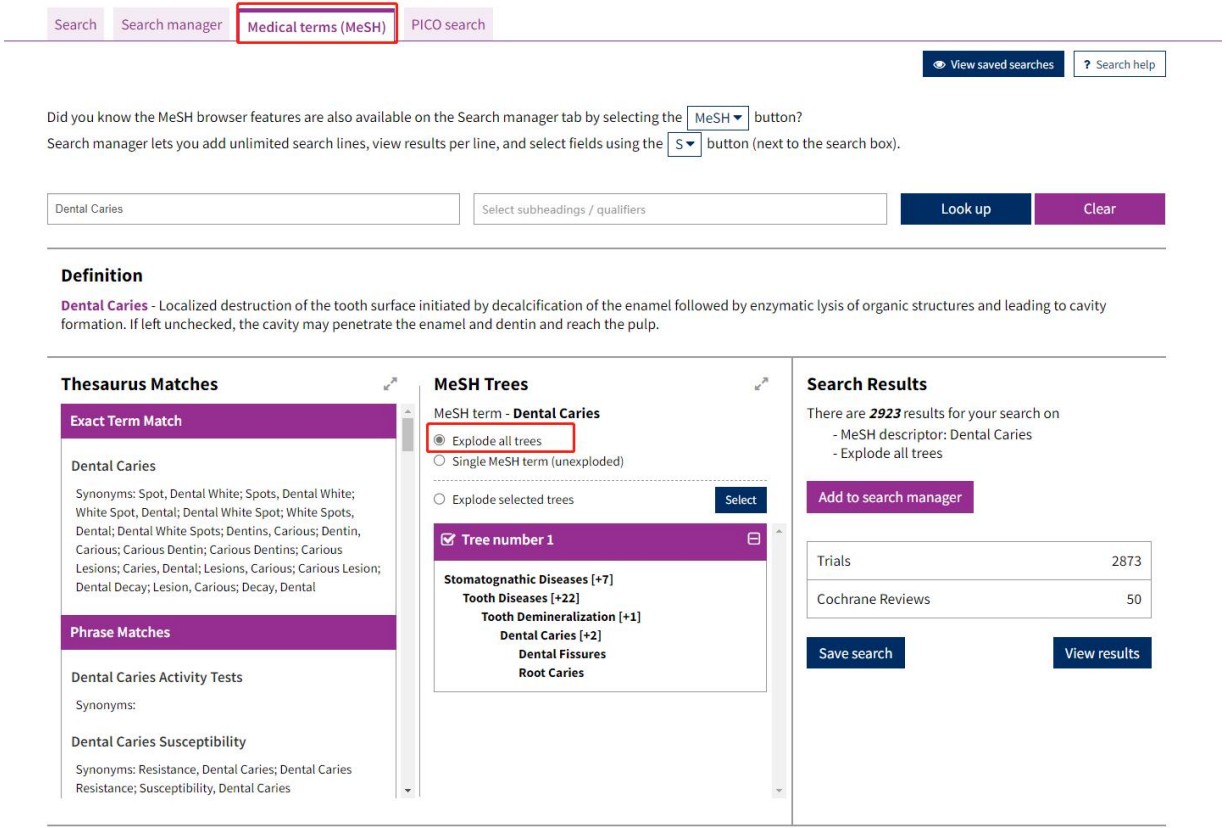
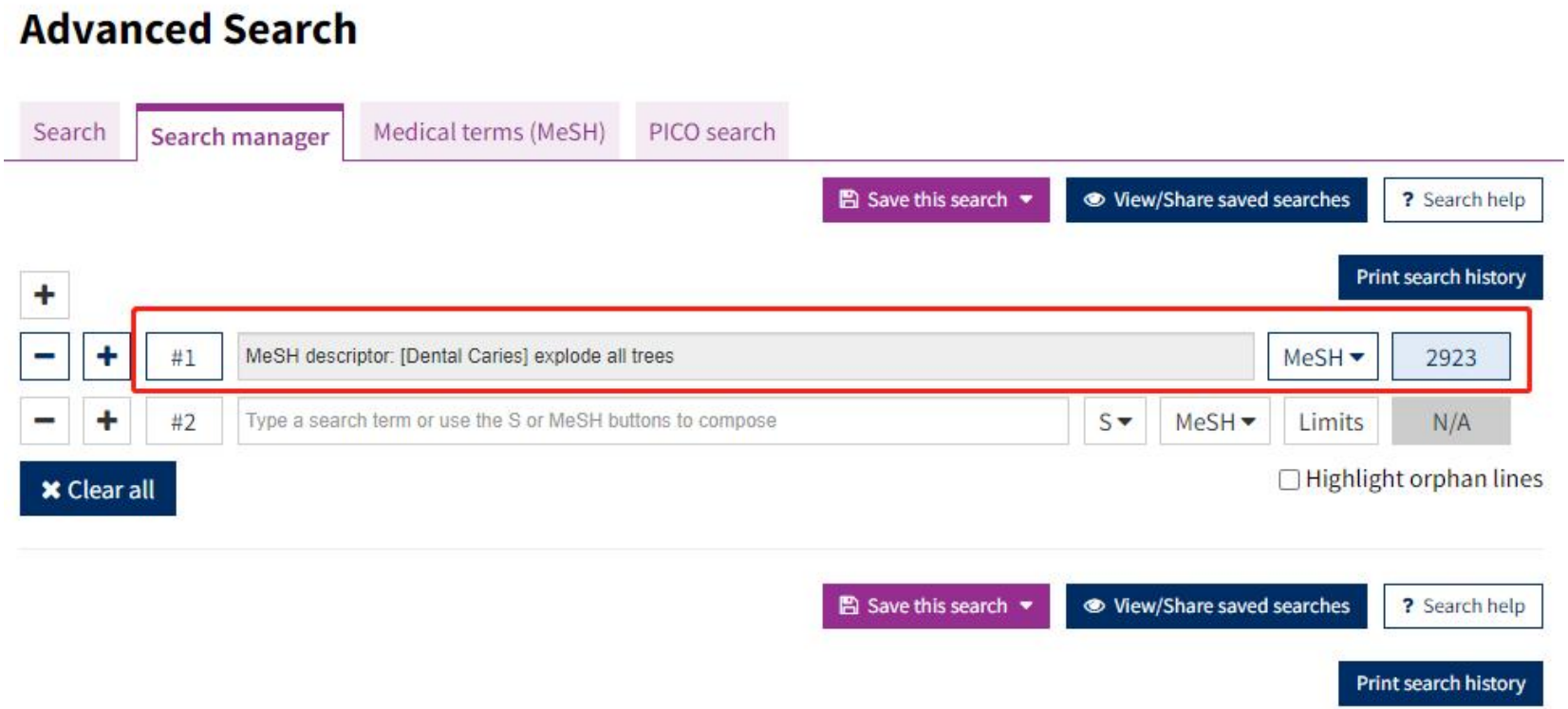
03 | 检索--“儿童龋齿”

主题词检索

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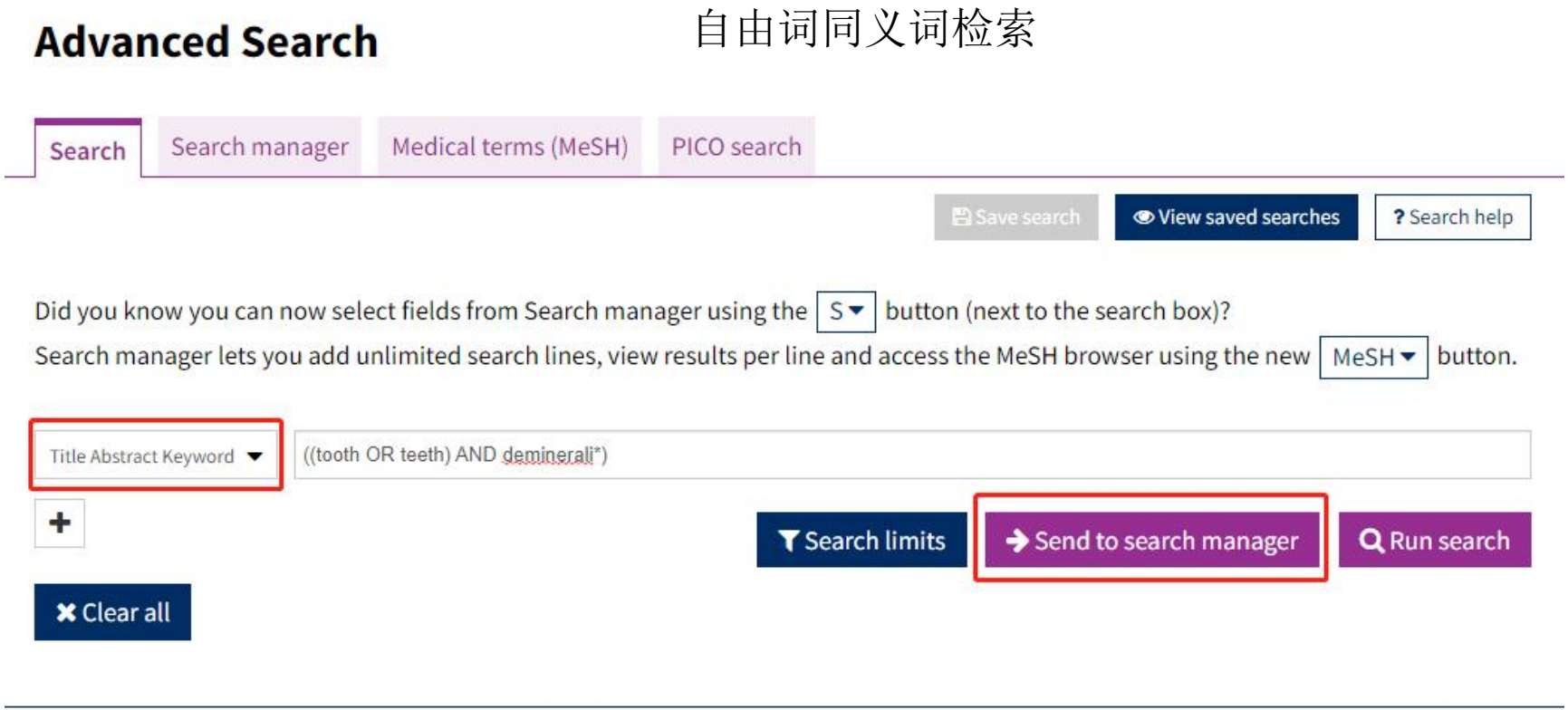
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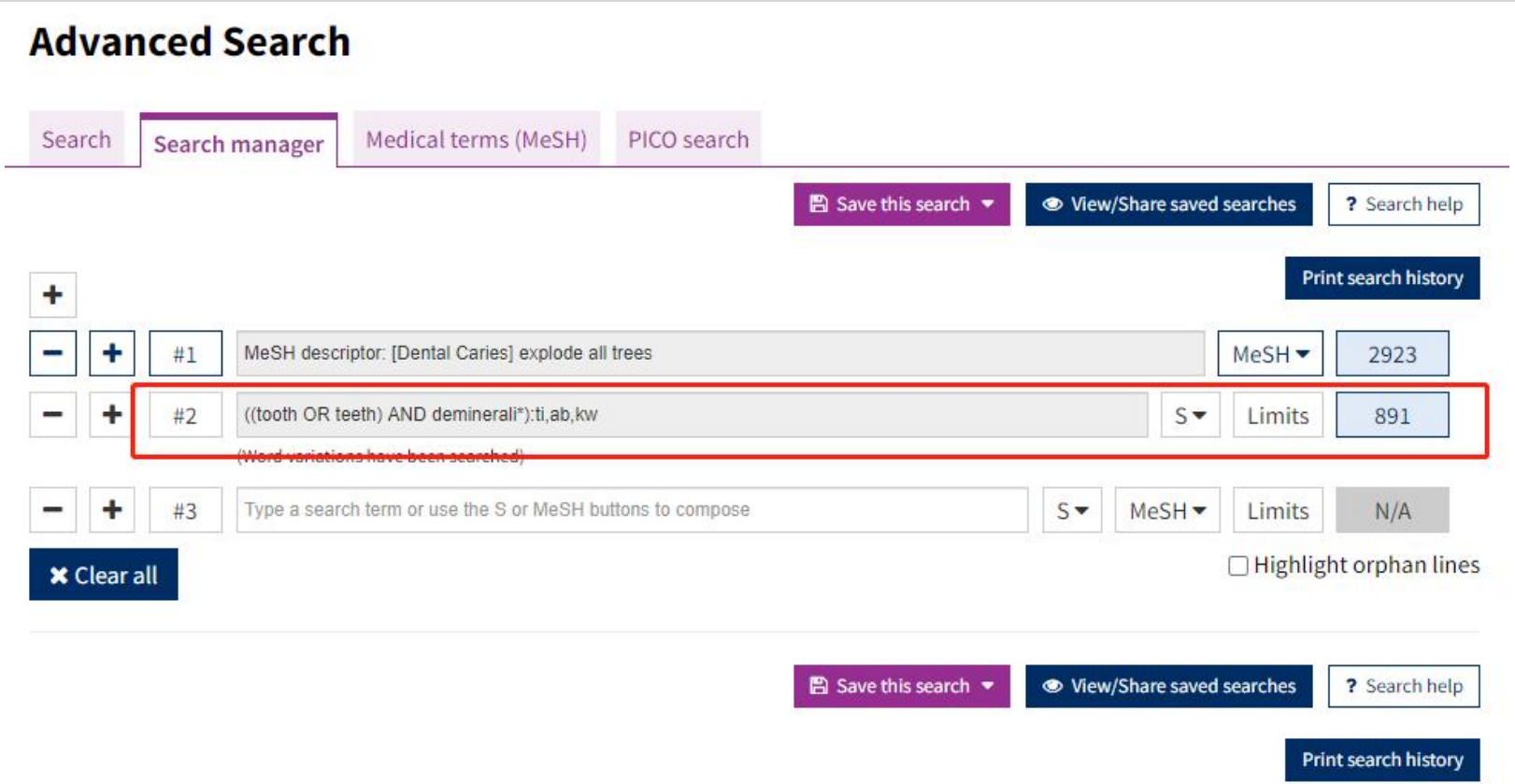
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#1
MeSH descriptor: [Dental Caries] explode all trees
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#4	((tooth OR teeth OR dental) AND cavit*):ti,ab,kw	Limits	4277
#5	(caries OR carious):ti,ab,kw	Limits	8498
#6	((tooth OR teeth OR dental OR enamel OR dentin) AND decay):ti,ab,kw	Limits	574
#7	#1 OR #2 OR #3 OR #4 OR #5 OR #6	Limits	12570

03 | 检索--“儿童龋齿”

#1	MeSH descriptor: [Dental Caries] explode all trees	MeSH		2923
#2	((tooth OR teeth) AND demineral*):ti,ab,kw	Limits		891
#3	((tooth OR teeth OR dental) AND lesion*):ti,ab,kw	Limits		3745
#4	((tooth OR teeth OR dental) AND cavit*):ti,ab,kw	Limits		4277
#5	(caries OR carious):ti,ab,kw	Limits		8498
#6	((tooth OR teeth OR dental OR enamel OR dentin) AND decay):ti,ab,kw	Limits		574
#7	#1 OR #2 OR #3 OR #4 OR #5 OR #6	Limits		12570
#8	MeSH descriptor: [Child] explode all trees	MeSH		62000
#9	(child* OR adolescen* OR toddler* OR baby OR babies OR teenager*):ti,ab,kw	Limits		283594
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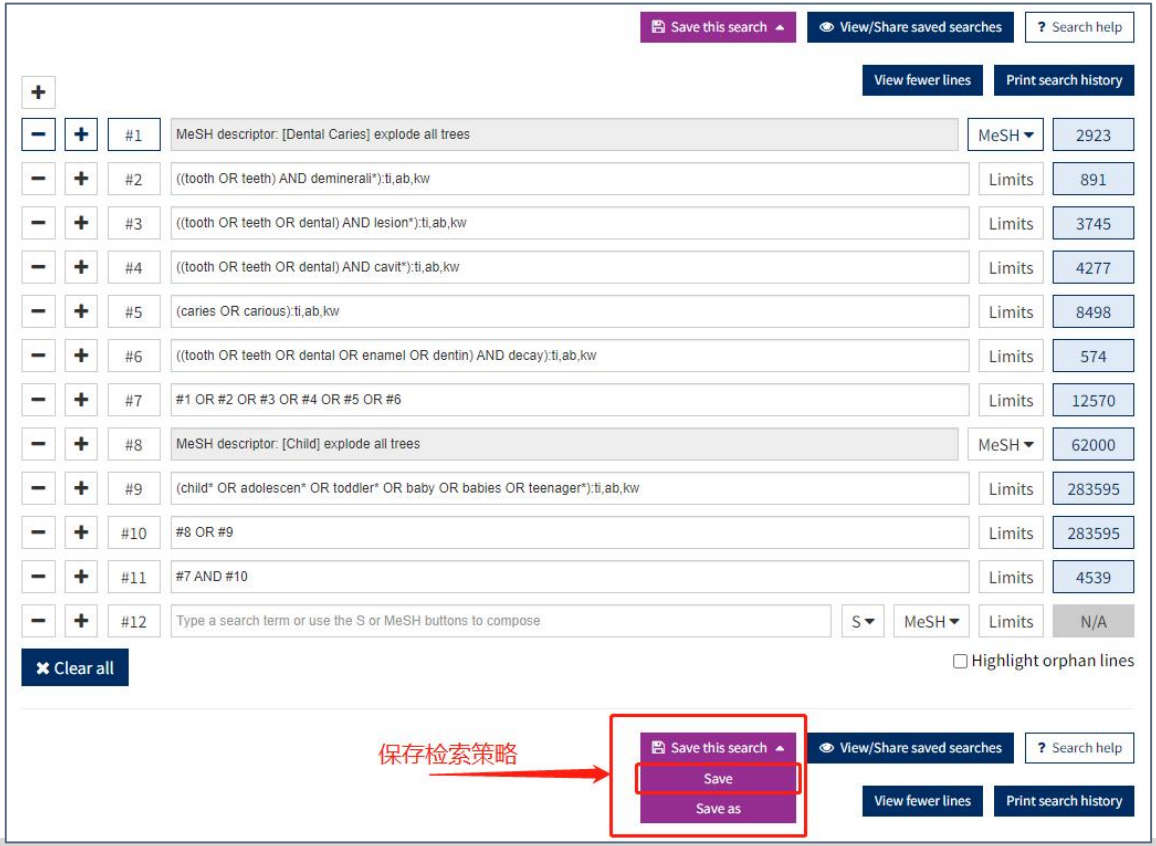
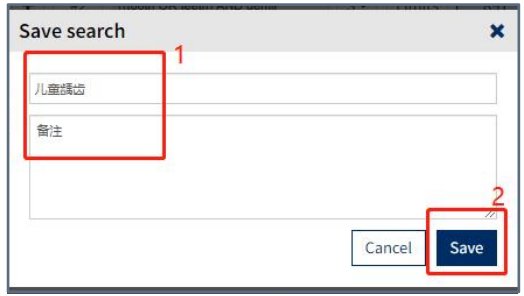
03 | 检索--“儿童龋齿”

−	+	#1	MeSH descriptor: [Dental Caries] explode all trees	MeSH ▾	2923
−	+	#2	((tooth OR teeth) AND demineral*):ti,ab,kw	Limits	891
−	+	#3	((tooth OR teeth OR dental) AND lesion*):ti,ab,kw	Limits	3745
−	+	#4	((tooth OR teeth OR dental) AND cavit*):ti,ab,kw	Limits	4277
−	+	#5	(caries OR carious):ti,ab,kw	Limits	8498
−	+	#6	((tooth OR teeth OR dental OR enamel OR dentin) AND decay):ti,ab,kw	Limits	574
−	+	#7	#1 OR #2 OR #3 OR #4 OR #5 OR #6	Limits	12570
−	+	#8	MeSH descriptor: [Child] explode all trees	MeSH ▾	62000
−	+	#9	(child* OR adolescen* OR toddler* OR baby OR babies OR teenager*):ti,ab,kw	Limits	283594
−	+	#10	#8 OR #9	Limits	283594
−	+	#11	#7 AND #10	Limits	4539
−	+	#12	Type a search term or use the S or MeSH buttons to compose	S ▾ MeSH ▾	Limits N/A

03 | 检索--“儿童龋齿”


Save this search
View/Share saved searches
Search help
View fewer lines
Print search history
#1 MeSH descriptor: [Dental Caries] explode all trees MeSH 2923
#2 ((tooth OR teeth) AND demineral*):ti,ab,kw Limits 891
#3 ((tooth OR teeth OR dental) AND lesion*):ti,ab,kw Limits 3745
#4 ((tooth OR teeth OR dental) AND cavit*):ti,ab,kw Limits 4277
#5 (caries OR carious):ti,ab,kw Limits 8498
#6 ((tooth OR teeth OR dental OR enamel OR dentin) AND decay):ti,ab,kw Limits 574
#7 #1 OR #2 OR #3 OR #4 OR #5 OR #6 Limits 12570
#8 MeSH descriptor: [Child] explode all trees MeSH 62000
#9 (child* OR adolescen* OR toddler* OR baby OR babies OR teenager*):ti,ab,kw Limits 283595
#10 #8 OR #9 Limits 283595
#11 #7 AND #10 Limits 4539
#12 Type a search term or use the S or MeSH buttons to compose S MeSH Limits N/A
Clear all
Highlight orphan lines
保存检索策略
Save this search
Save
Save as
View/Share saved searches
Search help
View fewer lines
Print search history

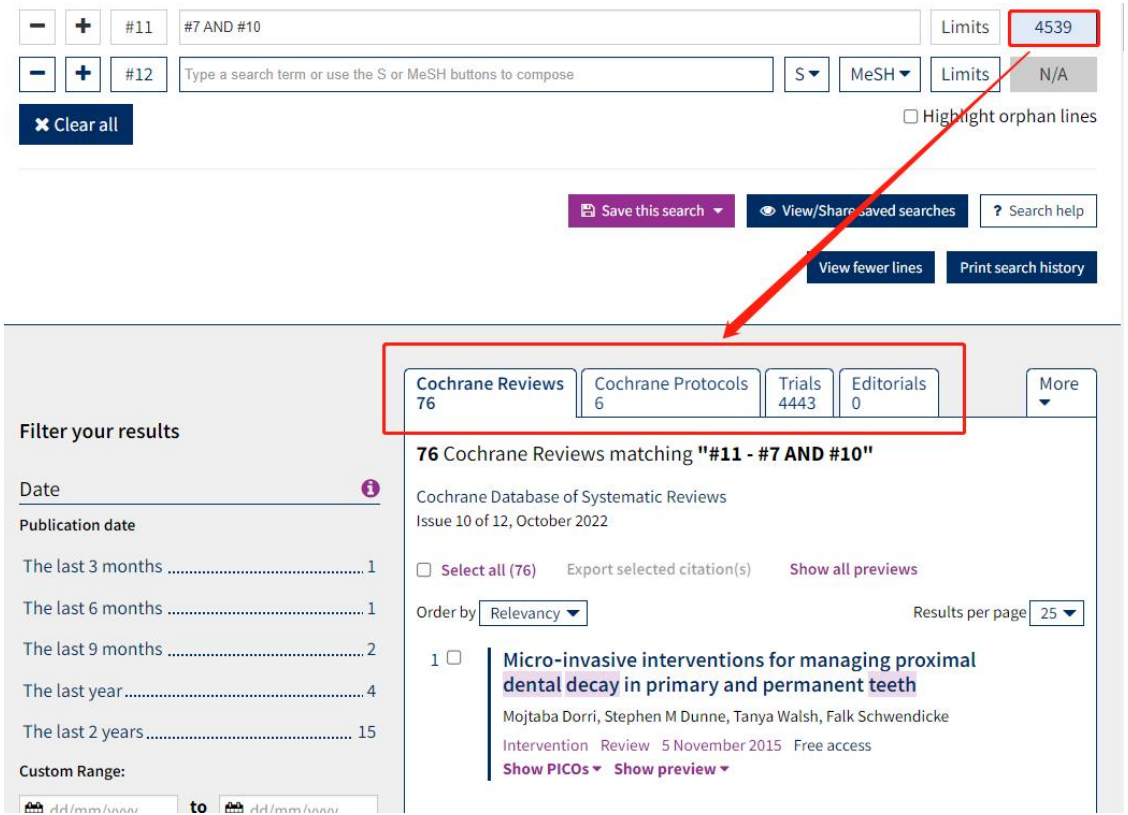

Save search
1
儿童龋齿
备注
2
Cancel
Save

03 | 检索--“儿童龋齿”


Advanced Search
查看保存的检索策略
Search
Search manager
Medical terms (MeSH)
PICO search
Save this search
View/Share saved searches
Search help
Print search history
#1
MeSH descriptor: [Dental Caries] explode all trees
MeSH
2923


Saved searches
You have 1 saved search
Order by date - Newest first
1 儿童龋齿
备注
Last saved: 18/10/2022 10:53:55
e-mail alert
Run
Add to search
Share
Export
Delete

03 | 检索--“儿童龋齿”


#11
#7 AND #10
Limits
4539
#12
Type a search term or use the S or MeSH buttons to compose
S
MeSH
Limits
N/A
Clear all
Highlight orphan lines
Save this search
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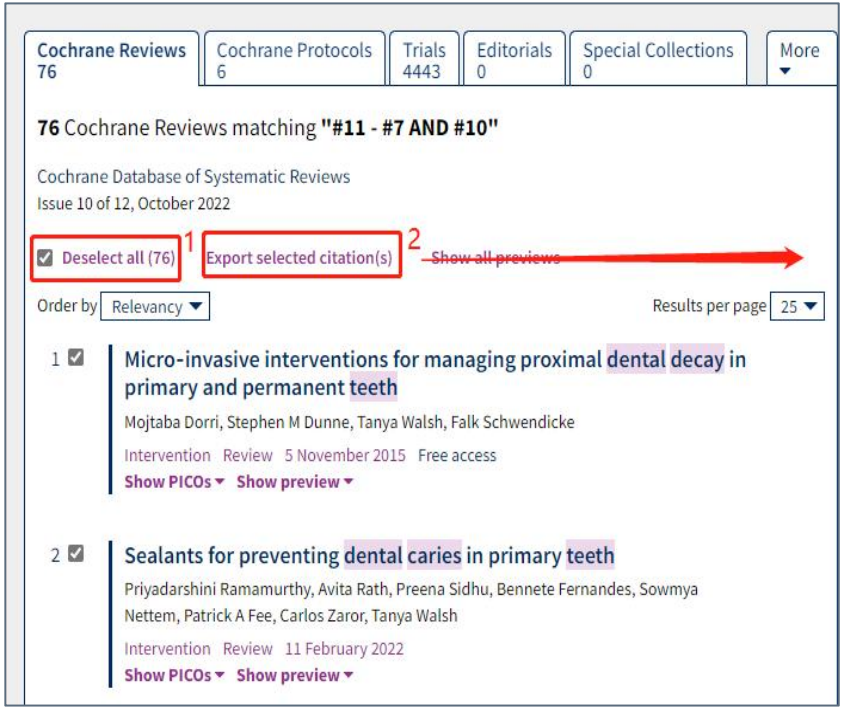
View fewer lines
Print search history
Cochrane Reviews 76
Cochrane Protocols 6
Trials 4443
Editorials 0
More
Filter your results
Date
Publication date
The last 3 months 1
The last 6 months 1
The last 9 months 2
The last year 4
The last 2 years 15
Custom Range:
dd/mm/yyyy
to
dd/mm/yyyy
76 Cochrane Reviews matching "#11 - #7 AND #10"
Cochrane Database of Systematic Reviews
Issue 10 of 12, October 2022
Select all (76)
Export selected citation(s)
Show all previews
Order by Relevancy
Results per page 25
1
Micro-invasive interventions for managing proximal dental decay in primary and permanent teeth
Mojtaba Dorri, Stephen M Dunne, Tanya Walsh, Falk Schwendicke
Intervention Review 5 November 2015 Free access
Show PICOs
Show preview

03 | 结果导出


Cochrane Reviews 76
Cochrane Protocols 6
Trials 4443
Editorials 0
Special Collections 0
More
76 Cochrane Reviews matching "#11 - #7 AND #10"
Cochrane Database of Systematic Reviews
Issue 10 of 12, October 2022
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1
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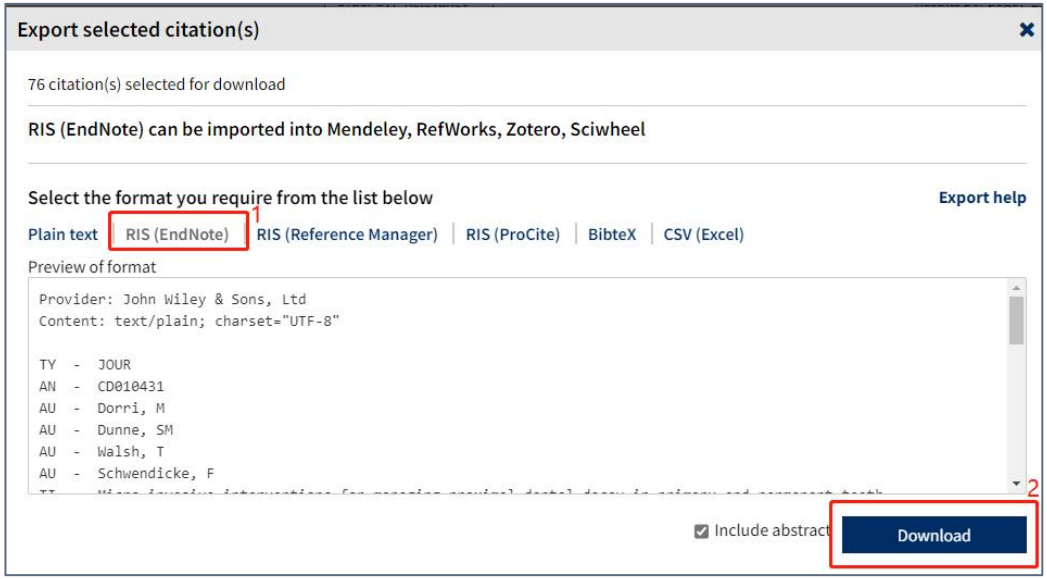
2
Show all previews
Order by Relevancy
Results per page 25
1
Micro-invasive interventions for managing proximal dental decay in primary and permanent teeth
Mojtaba Dorri, Stephen M Dunne, Tanya Walsh, Falk Schwendicke
Intervention Review 5 November 2015 Free access
Show PICOs
Show preview
2
Sealants for preventing dental caries in primary teeth
Priyadarshini Ramamurthy, Avita Rath, Preena Sidhu, Bennete Fernandes, Sowmya Nettem, Patrick A Fee, Carlos Zaror, Tanya Walsh
Intervention Review 11 February 2022
Show PICOs
Show preview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76 citation(s) selected for download
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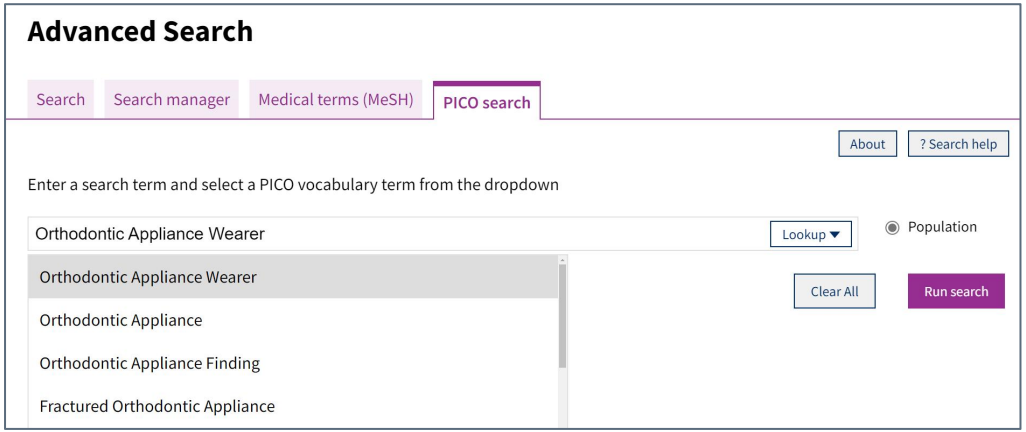
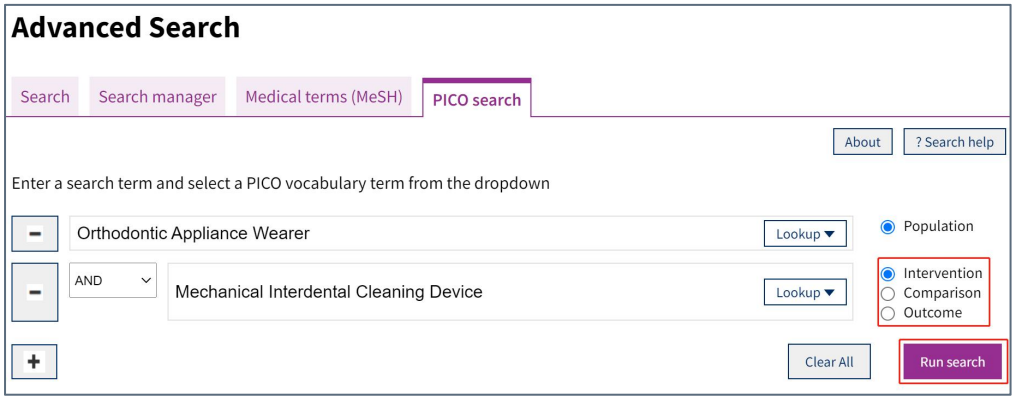
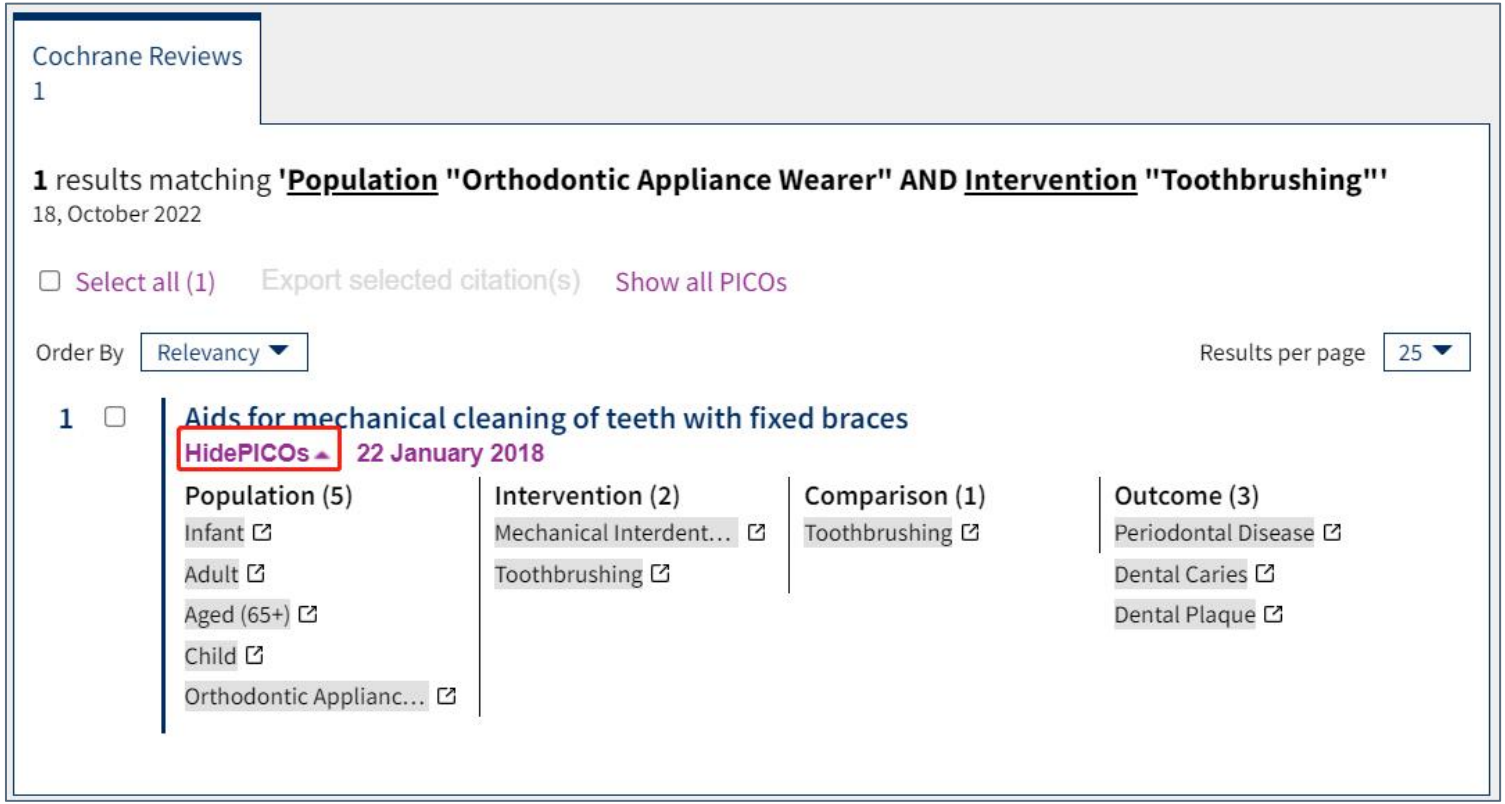
Export help
Plain text
RIS (EndNote)
1
RIS (Reference Manager)
RIS (ProCite)
BibteX
CSV (Excel)
Preview of format
Provider: John Wiley & Sons, Ltd
Content: text/plain; charset="UTF-8"
TY - JOUR
AN - CD010431
AU - Dorri, M
AU - Dunne, SM
AU - Walsh, T
AU - Schwendicke, F
Include abstract
Download
2

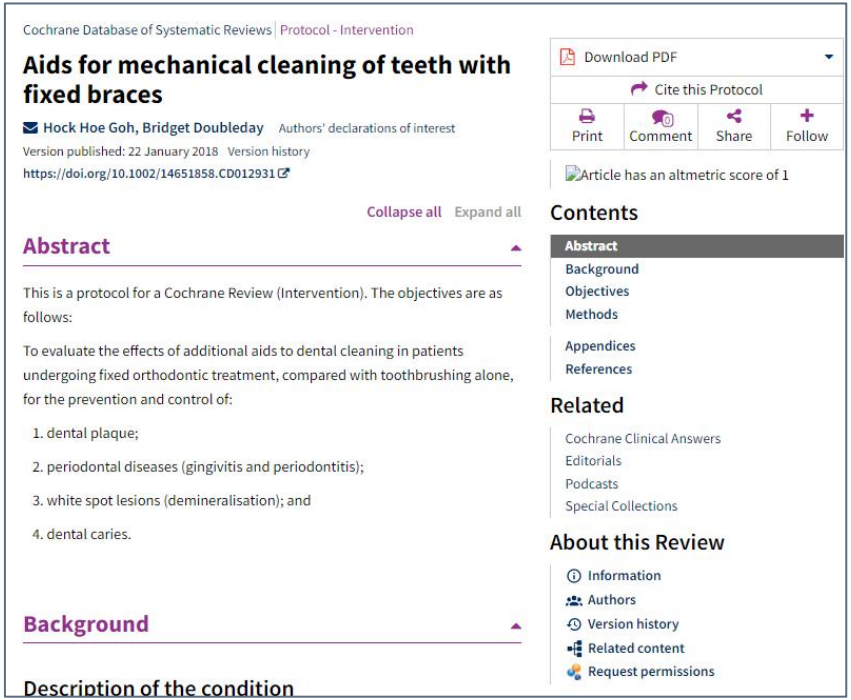
例：评估与单独刷牙相比，在接受固定正畸治疗的患者中，额外的牙齿清洁辅助工具在预防和控制龋齿和牙周病等方面的效果。

P人群：佩戴正畸矫治器
I干预：牙间清洁装置
C比较：对照组
O结局：龋齿、牙菌斑等






Cochrane Reviews
1
1 results matching 'Population "Orthodontic Appliance Wearer" AND Intervention "Toothbrushing"'
18, October 2022
Select all (1)
Export selected citation(s)
Show all PICOs
Order By
Relevancy
Results per page
25
1
Aids for mechanical cleaning of teeth with fixed braces
HidePICOs
22 January 2018
Population (5)
Infant
Adult
Aged (65+)
Child
Orthodontic Applianc...
Intervention (2)
Mechanical Interdent...
Toothbrushing
Comparison (1)
Toothbrushing
Outcome (3)
Periodontal Disease
Dental Caries
Dental Plaque



Cochrane Database of Systematic Reviews | Protocol - Intervention

Aids for mechanical cleaning of teeth with fixed braces

Hock Hoe Goh, Bridget Doubleday Authors' declarations of interest

Version published: 22 January 2018 Version history
https://doi.org/10.1002/14651858.CD012931

Collapse all Expand all

Abstract

This is a protocol for a Cochrane Review (Intervention). The objectives are as follows:

To evaluate the effects of additional aids to dental cleaning in patients undergoing fixed orthodontic treatment, compared with toothbrushing alone, for the prevention and control of:

1. dental plaque;
2. periodontal diseases (gingivitis and periodontitis);
3. white spot lesions (demineralisation); and
4. dental caries.

Background

Description of the condition

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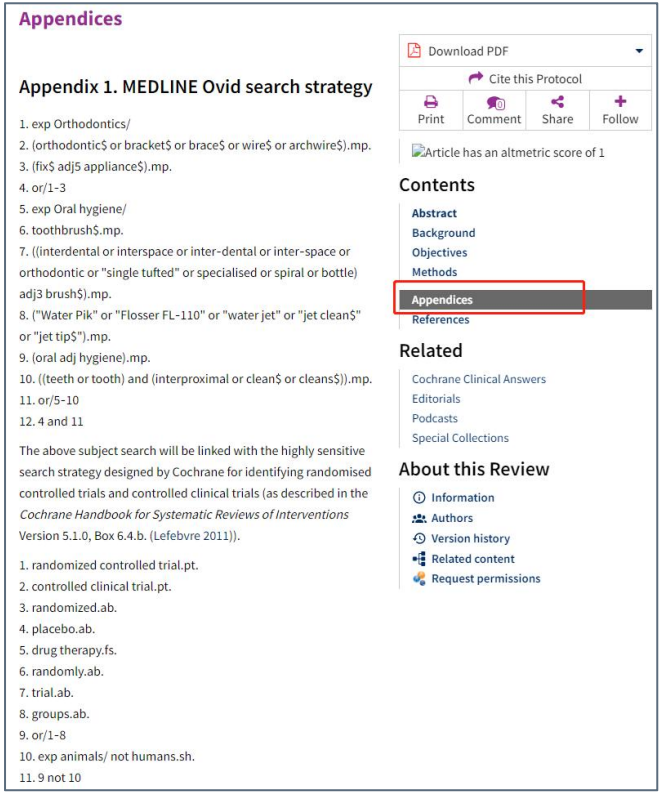

Appendices

Appendix 1. MEDLINE Ovid search strategy

1. exp Orthodontics/
2. (orthodontic$ or bracket$ or brace$ or wire$ or archwire$).mp.
3. (fix$ adj5 appliance$).mp.
4. or/1-3
5. exp Oral hygiene/
6. toothbrush$.mp.
7. ((interdental or interspace or inter-dental or inter-space or orthodontic or "single tufted" or specialised or spiral or bottle) adj3 brush$).mp.
8. ("Water Pik" or "Flosser FL-110" or "water jet" or "jet clean$" or "jet tip$").mp.
9. (oral adj hygiene).mp.
10. ((teeth or tooth) and (interproximal or clean$ or cleans$)).mp.
11. or/5-10
12. 4 and 11

The above subject search will be linked with the highly sensitive search strategy designed by Cochrane for identifying randomised controlled trials and controlled clinical trials (as described in the *Cochrane Handbook for Systematic Reviews of Interventions* Version 5.1.0, Box 6.4.b. (Lefebvre 2011)).

1. randomized controlled trial.pt.
2. controlled clinical trial.pt.
3. randomized.ab.
4. placebo.ab.
5. drug therapy.fs.
6. randomly.ab.
7. trial.ab.
8. groups.ab.
9. or/1-8
10. exp animals/ not humans.sh.
11. 9 not 10

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- Objectives
- Methods
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例

Fluoride toothpastes of different concentrations for preventing dental caries.

预防龋齿的不同浓度含氟牙膏

Appendix 3. MEDLINE Ovid search strategy

1. Dental Caries.mp. or exp Dental Caries/
2. Dental Caries Activity Tests/
3. Dental Caries Susceptibility/
4. carie$.mp.
5. DMF$.mp.
6. exp Fluorides/
7. exp Fluorides, Topical/
8. FLUOR$.mp.
9. AMF.mp.
10. AMINE F.mp.
11. SNF2.mp.
12. STANNOUS F.mp.
13. NAF.mp.
14. SODIUM F.mp.
16. SMFP.mp.
17. MFP.mp.
18. monofluor$.mp.
19. exp Cariostatic Agents/
20. exp Dentifrices/
21. toothpaste$.mp.
22. paste$.mp.
23. dentrifice$.mp.
24. 4 or 1 or 3 or 2 or 5
25. 6 or 11 or 7 or 9 or 17 or 12 or 15 or 14 or 8 or 18 or 19 or 16 or 10 or 13
26. 22 or 21 or 23 or 20
27. 25 and 24 and 26

Appendix 4. Embase Ovid search strategy

1. Dental caries/
2. (teeth adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$ or defect$)).mp.
3. (tooth adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$ or defect$)).mp.
4. (dental adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$ or defect$)).mp.
5. (enamel adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$ or defect$)).mp.
6. (dentin adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$ or defect$)).mp.
7. (root adj5 (cavit$ or caries or carious or decay$ or lesion$ or demineral$ or remineral$)).mp.
8. or/1-7
9. exp Fluoride/
10. (fluorid$ or fluor or "PPM F" or PPMF or APF or NAF or "Sodium F" or "Amine F" or SNF2 or "Stannous F" or "phosphat$ F" or "acidulat$ F" or "phosphat$ fluor$" or fluorphosphat$ or "amin$ fluor$" or "sodium fluor$" or "stannous fluor$" or SMFP or MFP or monofluor$).mp.
11. 9 or 10
12. Tooth brushing/
13. Toothpaste/
14. toothpast$.mp.
15. ((tooth or teeth) adj3 brush$).mp.
16. or/12-15
17. 8 and 11 and 16

Appendix 3. MEDLINE Ovid search strategy

1. Dental Caries.mp. or exp Dental Caries/
2. Dental Caries Activity Tests/
3. Dental Caries Susceptibility/
4. carie$.mp.
5. DMF$.mp.

Appendix 3. MEDLINE Ovid search strategy

1. Dental Caries.mp. or exp Dental Caries/
2. Dental Caries Activity Tests/
3. Dental Caries Susceptibility/
4. carie$.mp.
5. DMF$.mp.

Ovid	PubMed
/：主题词检索	[Mesh]
mp：标题/摘要	[Title/Abstract]
$：无限截词符	*

Ovid	PubMed
/：主题词检索	[Mesh]
mp：标题/摘要	[Title/Abstract]
$：无限截词符	*

Appendix 3. MEDLINE Ovid search strategy

1. Dental Caries.mp. or exp Dental Caries/
2. Dental Caries Activity Tests/
3. Dental Caries Susceptibility/
4. carie$.mp.
5. DMF$.mp.

#2	carie*[Title/Abstract] OR DMF[Title/Abstract]
#1	(("Dental Caries"[Mesh]) OR "Dental Caries Activity Tests"[Mesh]) OR "Dental Caries Susceptibility"[Mesh]

Appendix 3. MEDLINE Ovid search strategy

1. Dental Caries.mp. or exp Dental Caries/
2. Dental Caries Activity Tests/
3. Dental Caries Susceptibility/
4. carie$.mp.
5. DMF$.mp.
6. exp Fluorides/
7. exp Fluorides, Topical/
8. FLUOR$.mp.
9. AMF.mp.
10. AMINE F.mp.
11. SNF2.mp.
12. STANNOUS F.mp.
13. NAF.mp.
14. SODIUM F.mp.
16. SMFP.mp.
17. MFP.mp.
18. monofluor$.mp.
19. exp Cariostatic Agents/
20. exp Dentifrices/
21. toothpaste$.mp.
22. paste$.mp.
23. dentrifice$.mp.
24. 4 or 1 or 3 or 2 or 5
25. 6 or 11 or 7 or 9 or 17 or 12 or 15 or 14 or 8 or 18 or 19 or 16 or 10 or 13
26. 22 or 21 or 23 or 20
27. 25 and 24 and 26

History and Search Details

Download

Search	Actions	Details	Query	Results
#10	•••	›	Search: **#3 AND #6 AND #9** Sort by: **Most Recent**	2,358
#9	•••	›	Search: **#7 OR #8** Sort by: **Most Recent**	46,335
#8	•••	›	Search: **toothpaste*[Title/Abstract] OR paste*[Title/Abstract] OR dentrifice*[Title/Abstract]** Sort by: **Most Recent**	42,271
#7	•••	›	Search: **"Dentifrices"[Mesh]** Sort by: **Most Recent**	7,304
#6	•••	›	Search: **# 4 OR #5** Sort by: **Most Recent**	883,625
#5	•••	›	Search: **FLUOR*[Title/Abstract] OR AMF[Title/Abstract] OR AMINE F[Title/Abstract] OR SNF2[Title/Abstract] OR STANNOUS F[Title/Abstract] OR NAF[Title/Abstract] OR SODIUM F[Title/Abstract] OR SMFP[Title/Abstract] OR MFP[Title/Abstract] OR monofluor*[Title/Abstract]** Sort by: **Most Recent**	883,624
#4	•••	›	Search: **("Fluorides"[Mesh] OR "Fluorides, Topical"[Mesh]) OR "Cariostatic Agents"[Mesh]** Sort by: **Most Recent**	40,851
#3	•••	›	Search: **#1 OR #2** Sort by: **Most Recent**	75,871
#2	•••	›	Search: **carie*[Title/Abstract] OR DMF[Title/Abstract]** Sort by: **Most Recent**	59,825
#1	•••	›	Search: **(("Dental Caries"[Mesh]) OR "Dental Caries Activity Tests"[Mesh]) OR "Dental Caries Susceptibility"[Mesh]** Sort by: **Most Recent**	50,735

Appendix 4. Embase Ovid search strategy

1. Dental caries/

9. exp Fluoride/

14. toothpast$.mp.

15. ((tooth or teeth) adj3 brush$).mp.

Ovid	Embase
/：主题词检索	/exp
mp：标题/摘要 $：无限截词符	:ab,ti *
adjn：邻近检索 【检索词之间最多允许插入**n-1**个单词，词序可互换】	NEAR/n 【连接的两个检索词之间相隔不超过**n**个单词，无前后顺序要求】

Appendix 4. Embase Ovid search strategy

1. Dental caries/
2. (teeth adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$ or defect$)).mp.
3. (tooth adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$ or defect$)).mp.
4. (dental adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$ or defect$)).mp.
5. (enamel adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$ or defect$)).mp.
6. (dentin adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$ or defect$)).mp.
7. (root adj5 (cavit$ or caries or carious or decay$ or lesion$ or deminerali$ or remineral$)).mp.
8. or/1-7
9. exp Fluoride/
10. (fluorid$ or fluor or "PPM F" or PPMF or APF or NAF or "Sodium F" or "Amine F" or SNF2 or "Stannous F" or "phosphat$ F" or "acidulat$ F" or "phosphat$ fluor$" or fluorphosphat$ or "amin$ fluor$" or "sodium fluor$" or "stannous fluor$" or SMFP or MFP or monofluor$).mp.
11. 9 or 10
12. Tooth brushing/
13. Toothpaste/
14. toothpast$.mp.
15. ((tooth or teeth) adj3 brush$).mp.
16. or/12-15
17. 8 and 11 and 16

History Save | Delete | Print view | Export | Email

Combine using And Or Collapse

#17	#8 AND #11 AND #16	3,271
#16	#12 OR #13 OR #14 OR #15	23,699
#15	((tooth OR teeth) NEAR/2 brush*):ab,ti	4,748
#14	toothpast*:ab,ti	5,624
#13	'toothpaste'/exp	9,439
#12	'tooth brushing'/exp	13,601
#11	#9 OR #10	87,956
#10	fluorid*:ab,ti OR fluor:ab,ti OR 'ppm f':ab,ti OR ppmf:ab,ti OR apf:ab,ti OR naf:ab,ti OR 'sodium f':ab,ti OR 'amine f':ab,ti OR snf2:ab,ti OR 'stannous f':ab,ti OR 'phosphat* f':ab,ti OR 'acidulat* f':ab,ti OR 'phosphat* fluor*':ab,ti OR fluorphosphat*:ab,ti OR 'amin* fluor*':ab,ti OR 'sodium fluor*':ab,ti OR 'stannous fluor*':ab,ti OR smfp:ab,ti OR mfp:ab,ti OR monofluor*:ab,ti	77,179
#9	'fluoride'/exp	37,981
#8	#1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7	84,448
#7	(root NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral*)):ab,ti	4,827
#6	(dentin NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral* OR defect*)):ab,ti	3,805
#5	(enamel NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral* OR defect*)):ab,ti	7,208
#4	(dental NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral* OR defect*)):ab,ti	28,543
#3	(tooth NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral* OR defect*)):ab,ti	7,357
#2	(teeth NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR remineral* OR defect*)):ab,ti	12,112
#1	'dental caries'/exp	62,691

#10	#3 AND #6 AND #9
#9	#7 OR #8
#8	toothpaste*[Title/Abstract] OR paste*[Title/Abstract] OR dentrifice*[Title/Abstract]
#7	"Dentifrices"[Mesh]
#6	# 4 OR #5
#5	FLUOR*[Title/Abstract] OR AMF[Title/Abstract] OR AMINE F[Title/Abstract] OR SNF2[Title/Abstract] OR STANNOUS F[Title/Abstract] OR NAF[Title/Abstract] OR SODIUM F[Title/Abstract] OR SMFP[Title/Abstract] OR MFP[Title/Abstract] OR monofluor*[Title/Abstract]
#4	("Fluorides"[Mesh] OR "Fluorides, Topical"[Mesh]) OR "Cariostatic Agents"[Mesh]
#3	#1 OR #2
#2	carie*[Title/Abstract] OR DMF[Title/Abstract]
#1	(("Dental Caries"[Mesh]) OR "Dental Caries Activity Tests"[Mesh]) OR "Dental Caries Susceptibility"[Mesh]

03 | 检索--举例（Embase检索式）

#17	#8 AND #11 AND #16
#16	#12 OR #13 OR #14 OR #15
#15	((tooth OR teeth) NEAR/2 brush*):ab,ti
#14	toothpast*:ab,ti
#13	'toothpaste'/exp
#12	'tooth brushing'/exp
#11	#9 OR #10
#10	fluorid*:ab,ti OR fluor:ab,ti OR 'ppm f':ab,ti OR ppmf:ab,ti OR apf:ab,ti OR naf:ab,ti OR 'sodium f':ab,ti OR 'amine f':ab,ti OR snf2:ab,ti OR 'stannous f':ab,ti OR 'phosphat* f':ab,ti OR 'acidulat* f':ab,ti OR 'phosphat* fluor*':ab,ti OR fluorphosphat*:ab,ti OR 'amin* fluor*':ab,ti OR 'sodium fluor*':ab,ti OR 'stannous fluor*':ab,ti OR smfp:ab,ti OR mfp:ab,ti OR monofluor*:ab,ti
#9	'fluoride'/exp
#8	#1 OR #2 OR #3 OR #4 OR #5 OR #6 OR #7
#7	(root NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali*)):ab,ti
#6	(dentin NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali* OR defect*)):ab,ti
#5	(enamel NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali* OR defect*)):ab,ti
#4	(dental NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali* OR defect*)):ab,ti
#3	(tooth NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali* OR defect*)):ab,ti
#2	(teeth NEAR/4 (cavit* OR caries OR carious OR decay* OR lesion* OR deminerali* OR reminerali* OR defect*)):ab,ti
#1	'dental caries'/exp

2023

THE END

THANK YOU FOR YOUR WATCHING!