

MONTHLY E-UPDATE

March 2014

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A Prospective Study of Clinical Outcomes Related to Third Molar Removal or Retention

The February 2014 issue of *American Journal of Public Health* featured an article "A Prospective Study of Clinical Outcomes Related to Third Molar Removal or Retention". This article was co-authored by members of our network.

The important findings from the study are the following:

- The rates of paresthesia and TMD symptoms were significantly higher in patients who underwent third molar removal, and these effects lasted longer than the immediate postsurgical period.
- The average rate of attachment loss at distal sites of second molars was minimal over a 2-year period, regardless of third molar retention or removal.
- The incidence of caries on the distal surface of the second molars was less than 1%. For third molars, the caries rate was approximately 3.3% on the occlusal surfaces.
- When third molars were not removed, considerable eruption occurred during the 2-year period.

The purpose of the article was to investigate outcomes of third molar removal or retention in adolescents and young adults. This was accomplished by recruiting patients aged 16 to 22 years from former regional PBRN (PRECEDENT) who had at least 1 third molar present and had never undergone third molar removal. Data were acquired via

questionnaire and clinical examination at baseline, periodic online questionnaires, and clinical examination at 24 months.

A total of 801 patients participated. Among patients undergoing third molar removal, rates of paresthesia and jaw joint symptoms lasting more than 1 month were 6.3 and 34.3 per 100 person-years, respectively. Among patients not undergoing removal, corresponding rates were 0.7 and 8.8. Periodontal attachment loss at distal sites of second molars did not significantly differ by third molar removal status. Incident caries at the distal surfaces of second molars occurred in fewer than 1% of all sites.

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