



# MONTHLY E-UPDATE

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## September 2012

Each month we highlight a recent publication, recent study results, or other important information from the nation's network.

### The National Dental PBRN is now enrolling practitioners

The National Dental PBRN is now enrolling practitioners. You can enroll online by clicking [here](#), and following directions from there. You need to have a functioning email address to enroll. If you previously participated in another network such as the DentalPBRN, PEARL or PRECEDENT, you will need to re-enroll due to revised enrollment questions, the need to update information, and the opportunity to submit ideas for research studies. For more information on the nation's network, click [here](#).

If you have completed the Enrollment Questionnaire, thank you for joining the nation's network! If you feel any of your colleagues may be also interested in joining the network, please invite them to join by visiting [NationalDentalPBRN.org](http://NationalDentalPBRN.org) and clicking on the "Enroll Now" tab.

## National Dental PBRN Article of the Month

### Restorative material and other tooth-specific variables associated with the decision to repair or replace defective restorations: findings from The Dental PBRN

The May 2012 issue of the *Journal of Dentistry* featured an article entitled "Restorative material and other tooth-specific variables associated with the decision to repair or replace defective restorations: findings from The Dental PBRN".

The authors sought to determine two objectives: (1) to identify and quantify the types of restorative materials in the existing failed restorations; and (2) to identify and quantify the materials used to repair or replace those failed restorations.

Practitioner-investigators recorded data on consecutive restorations in permanent teeth that needed repair or replacement. Data included the primary reason for repair or replacement, tooth surface(s) involved, restorative materials used, and patient demographics.

Data for 9875 restorations were collected from 7502 patients in 197 practices for which 75% of restorations were replaced and 25% repaired. Most of the restorations that were either repaired or replaced were amalgam (56%) for which most (56%) of the material used was direct tooth-colored. The restorative material was 5 times more likely to be changed when the original restoration was amalgam. The likelihood of changing an amalgam restoration differed as a function of the tooth type, arch; and number of surfaces in the original restoration.

The authors concluded that the probability of changing from amalgam to another restorative material differed with several characteristics of the original restoration. The change was most likely to take place when (1) the treatment was a replacement; (2) the tooth was not a molar; (3) the tooth was in the maxillary arch; and (4) the original restoration involved a single surface

Click [here](#) to view the PubMed abstract.