## An appraisal of the papers in The International Journal of Prosthodontics.

Asbjørn Jokstad

Department of Prosthetics and Oral Function. Faculty of Dentistry. University of Oslo, Norway.

All slides available on: http://www.odont.uio.no/protetikk/appraisal/

#### Background and aim

Evidence about effectiveness of patient treatment depends on study design<sup>1</sup>.

The aim of the present review was to appraise the papers published in an influential refereed journal in prosthetic dentistry, i.e. *The International Journal of Prosthodontics.* 

<sup>1</sup> Sackett DL, Richardson WS, Rosenberg W, Haynes RB. Evidence-based Medicine. Churchill Livingstone, 1997.

#### Method

All papers published in Int J Prosthodont in the period 1988-98 were categorised by:

- prosthodontic subtopic
- principal authors' address
- study aim and design
- the sample size and observation period when appropriate

The variables were crosstabulated to elucidate possible relationships.

#### **Prosthodontic subtopics**



Fixed p. (n=230)
Implant p. (n=116)
Function (n=57)
Non-prosthetics (n=36)

Removable p. (n=158)
Prosthetics- general (n=107)
Maxillofacial p. (n=21)

#### Contributors



#### USA UK Japan Candinavia Canada Other

#### 21 % Study design



Only 23% of all papers described in vivo study findings.



#### Clinical studies - design characteristics

	Number of cohorts			Observation period		Size	
	1	2	>2	span	average	span	average
Prospective (n=44)	39	2	3	48 days - 23 years	4.7 years	4 -300	56
Retrospective (n=17)	13	1	3	2 - 20 years	7.2 years	24 - 273	95
Case series (n=15)	15	-	-	3 mths - 13 years	4.4 years	8- 344	88
RCT (n=10)	-	7	3	14 days - 4 years	< 1 year	14-85	43

	Size	
	span	average
Cross-sectional (n=25)	13- 879	202
Experimental (n=34)	1 -79	22
Case-controll (n=10)	8- 250	95

#### I. Educational (2%)

## Study aims

- 11 Self improvement, teaching, skill improvement, critical appraisal II. Clinical problems (39%)
- **12 Therapy (**treatment selection; efforts versus cost)
- 88(12%) Main focus on therapy process
- 47(7%) Main focus on therapy outcome
- **3** Main focus on esthetic appearance
- **2** Main focus on economic analysis
- 71(10%) Prognosis; likely course over time and complications
- **29 Diagnosis;** differential; strength testing/validation, treatment need
- **22 Clinical findings;** patient history gathering, examination, treatment plans
- 4 **Etiology**; identification of causes for disease
- **7 Prevention:** screening, identification of risk factors

III. Basic sciences (59%)

- 228(31%) Chemistry; physics; physical-chemical properties
- 85(12%) Biomechanics; fit accuracy; wear; stress
- **29** Physiology, immunology
- **22** Optics; color
- **20** Hygiene; microbiology
- **19** Biocompatibility
- **17** Anatomy; histology
- 8 Standardization; testing methods



#### Prosthodontic subtopics vs. country



The distribution of papers within the different subtopics varied among the contributors.



18 %





#### Conclusions

- Many papers describe:
  - basic research problems
  - clinical studies with poor evidence of therapeutic benefits of prosthodontic treatment
- Few papers focus on:
  - comparative clinical studies
  - longitudinal clinical studies that validate treatment outcomes
- Future appraisal of papers in other journals will show if this situation reflects the state of science of prosthodontic research.

All slides available on: http://www.odont.uio.no/protetikk/appraisal/

# Thank you for

## kind attention

