
Conference Summary and Future Goals

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The officers and board of directors of the American Academy of Pedodontics felt that it was very important to join with the University of Iowa, Department of Pedodontics in sponsoring this International Symposium on the Prevention of Periodontal Disease in Children and Young Adults. We are pleased to see that this symposium has attracted not only pedodontists and periodontists in research and education, but also pedodontists and periodontists from private practice, dental educators in community and preventive dentistry, and basic researchers with training in microbiology.

We compliment Dr. Wei, Dr. Walker, members of the planning committee, and the moderators for their careful planning and skillful execution of this symposium. We especially commend the speakers, for without exception they met the difficult challenge given to them. We have heard an outstanding group of researchers and clinicians these past two days.

Publication of the proceedings of this international symposium as a supplement to *Pediatric Dentistry*, the Journal of the American Academy of Pedodontics, is an indication of our commitment to further research in the diagnosis, prevention and treatment of periodontal diseases in children. The proceedings of this symposium will be sent to pedodontists in every state and in many foreign countries. They in turn will share these proceedings with colleagues in periodontics as well as with other dentists and researchers. This will assure that this symposium will have a broad impact and that it will meet the stated purpose of "... generating increased interest in obtaining knowledge as to the causes, prevention, and the treatment of periodontal disease in children and young adults."

My task is to summarize this symposium and identify goals. We cannot help but be impressed with the need for extensive research in periodontal disease in children and young adults. Each one of our speakers has been able to clearly identify this need. The goal of this research should be to find a way for the dentist to 1) identify the child who is susceptible to periodontal disease, and 2) prevent the occurrence of that disease. A general goal is to narrow the gap between research in periodontal diseases in children and the clinical practice of dentistry for children. By reviewing this symposium chronologically we will be able to define these goals.

At the start of this symposium, Professor Poulsen impressed us with the primitive nature of our indices of gingival disease and recommended that we record both gingival index and the loss of periodontal attachment. He first raised the question of the clinical usefulness of the gingival index for identifying the child who would require intervention to prevent further disease.

Dr. Ranney, our second speaker, assured us that the pathogenesis of gingivitis and periodontal disease is different in children. He carefully detailed the areas of research which may delineate these differences from pathogenesis in the adult. He also noted on several occasions that he was reporting means, and the generalizations often did not apply to all the individuals studied. This points directly to the problem that the clinician faces in applying research to clinical practice.

Dr. Axelsson emphasized the impact that education and motivation in proper tooth cleaning could have on caries experience and gingival health. He reminded us of the caries susceptible areas and outlined a program where individuals are taught to clean meticulously between the interproximal surfaces of the posterior teeth.

Next, Dr. Bawden gave us some interesting data to support his challenge to our schools of dentistry to add new emphasis to the teaching of plaque control in children. His presentation appropriately followed Dr. Axelsson's presentation. We have been challenged to motivate children to keep their teeth clean and have learned some new techniques to accomplish this task.

Dr. Newman finished the Thursday session with an outstanding presentation on juvenile periodontitis. He presented the clinicians with an interesting problem when he reported success in the treatment of juvenile periodontitis using tetracycline, yet cautioned us that this treatment was conducted in a research setting. Without specific precautions it seems difficult to deny treatment to any patient once success has been reported.

Dean Wally Mann's presentation on "A Problem List for Dental Research" was the highlight of a delightful Thursday evening banquet. We thank all the members of the conference for the warm hospitality that they extended to us throughout the conference.

Friday morning's session started with a very clini-

cally oriented discussion by Dr. Lilly on the management of oral soft tissue lesions in children. He reminded the clinicians of many important issues associated with specific gingival lesions in children. Dr. Lilly discussed his difficulty in treating some diseases, pointing again to the need for more research.

Dr. Steinberg and Dr. Hassell's presentation on dilantin hyperplasia seemed to emphasize the gap which exists between research and clinical practice. This afternoon Dr. Vanarsdall showed us several clinical cases where treatment of periodontal disease was an important part of a child's orthodontic therapy. His presentation emphasized the clinical complexities associated with trying to identify the child who is susceptible to these serious periodontal problems. He also showed us several techniques to help assure gingival

and periodontal health around teeth which must be surgically exposed and pulled into the dental arch.

Finally, the panel discussion brought together all the participants of this symposium and served well to emphasize the need for research and the need to narrow the gap between research and clinical practice.

Just as this symposium was conducted with the cooperation of many individuals and organizations, we recognize that further developments in the prevention of periodontal disease in children and young adults will only occur with the continued cooperation of many individuals and organizations. The American Academy of Pedodontics pledges itself to continue in the same cooperative effort that has been initiated here. Although this is the end of this symposium, for all of us, our work has just begun.
