

DEPARTMENT OF THE AIR FORCE 59TH MEDICAL WING (AETC) JOINT BASE SAN ANTONIO - LACKLAND TEXAS



16 MAR 2017

MEMORANDUM FOR SGDTP ATTN: CAPT HARRISON D GORDNER

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

- Your paper, entitled <u>Cantilever Resin-Bonded Fixed Dental Prosthesis Show Clinical</u> <u>Success</u> presented at/published to <u>Texas Dental Journal</u> in accordance with MDWI 41-108, has been approved and assigned local file #<u>17147.</u>
- 2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.
- 3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are a 59 MDW staff member, we can forward your request for funds to the designated Wing POC at the Chief Scientist's Office, Ms. Alice Houy, office phone: 210-292-8029; email address: alice.houy.civ@mail.mil.
- 4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

inda Steel-Goodwin

LINDA STEEL-GOODWIN, Col, USAF, BSC Director, Clinical Investigations & Research Support

Warrior Medics — Mission Ready — Patient Focused

PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

INSTRUCTIONS

USE ONLY THE MOST CURRENT 59 MDW FORM 3039 LOCATED ON AF E-PUBLISHING

- 1. The author must complete page two of this form:
 - a. In Section 2, add the funding source for your study [e.g., 59 MDW CRD Graduate Health Sciences Education (GHSE) (SG5 O&M); SG5 R&D; Tri-Service Nursing Research Program (TSNRP); Defense Medical Research & Development Program (DMRDP); NIH; Congressionally Directed Medical Research Program (CDMRP); Grants; etc.]
 - b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables or photographs for your publication. Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.
- 2. Print your name, rank/grade, sign and date the form in the author's signature block or use an electronic signature.
- Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g. case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.
- 4. Attach a copy of your abstract, paper, poster and other supporting documentation.
- 5. Save and forward, via email, the processing form and all supporting documentation to your unit commander, program director or immediate supervisor for review/approval.
- 6. On page 2, have either your unit commander, program director or immediate supervisor:
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- 7. Submit your completed form and all supporting documentation to the CRD for processing (59crdpubspres@us.af.mil). If you have any questions or concerns, please contact the 59 CRD/ Publications and Presentations Section at 292-7141 for assistance.
- 8. The 59 CRD/Publications and Presentations Section will route the request form to clinical investigations, 502 ISG/JAC (Ethics Review) and Public Affairs (59 MDW/PA) for review and then forward you a final letter of approval or disapproval.
- Once your manuscript, poster or presentation has been approved for a one-time public release, you may proceed with your publication or presentation submission activities, as stated on this form. Note: For each new release of medical research or technical information as a publication/presentation, a new 59 MDW Form 3039 must be submitted for review and approval.
- If your manuscript is accepted for scientific publication, please contact the 59 CRD/Publications and Presentations Section at 292-7141. This information is reported to the 59 MDW/CC. All medical research or technical information publications/presentations must be reported to the Defense Technical Information Center (DITC). See 59 MDWI 41-108, Presentation and Publication of Medical and Technical Papers, for additional information.
- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement: "The views expressed are those of the [author(s)] [presenter(s)] and do not reflect the official views or policy of the Department of Defense or its Components"
- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving humans: "The voluntary, fully informed consent of the subjects used in this research was obtained as required by 32 CFR 219 and DODI 3216.02_AFI 40-402."
- NOTE: All abstracts, papers, posters, etc., should contain the following disclaimer statement for research involving animals, as required by AFMAN 40-401_IP :

"The experiments reported herein were conducted according to the principles set forth in the National Institute of Health Publication No. 80-23, Guide for the Care and Use of Laboratory Animals and the Animal Welfare Act of 1966, as amended."

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CAT OF THE MONTH

Critically Appraised Topics

Cantilever resin-bonded fixed dental prostheses show clinical success UT CAT#2808

Question: When replacing a missing maxillary anterior tooth, does a cantilever resin-bonded fixed dental prosthesis (RBFDP) improve clinical success rates compared to a two retainer RBFDP?

Clinical Bottom Line: A cantilever RBFDP demonstrates lower clinical failure rates compared to a two retainer RBFDP to replace a missing maxillary anterior tooth.

Best Evidence: Wei YR *et al.* Clinical performance of anterior resin-bonded fixed dental prostheses with different framework designs: A systematic review and meta-analysis. J Dent 2016; 47:1-7. PMID26875611

Botelho MG, Chan AW, Leung NC, Lam WY. Long-term evaluation of cantilevered versus fixed-fixed resinbonded fixed partial dentures for missing maxillary incisors. J Dent 2016; 45:59-66. PMID26756882

Key Results: Wei *et al.* analyzed 5 studies for the failure rate of different RBFDP framework designs. The failure rate of cantilever RBFDP's was significantly lower than two retainer RBFDP's (OR 0.42, 95% CI). A recent RCT by Botelho *et al.* evaluated clinical success of the same RBFDP designs (n=23). All cantilevered prostheses survived without complications (mean 18 years), while only 10% of the two retainer prostheses were complication free and 50% survived.

Comments on Evidence: The Wei systematic review included five articles; only 1 was a RCT. An additional RCT by Botelho adds confidence to the validity of the Wei findings. It has been suggested that two retainer FDP's tend to fail more due to differential movement between the abutment teeth under functional stresses.

Applicability or Significance: When a minimally invasive prosthesis of intermediate longevity is planned, a cantilever RBFDP may be the preferred treatment option.

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Faculty Author: Dr. Stephan Haney is an Associate Professor in the Department of Comprehensive Dentistry and Director of Graduate Prosthodontics at UT Health San Antonio.

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