

Efficacy of Pit-And-Fissure Sealants on Primary Molars

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Introduction and Purpose

- Dental caries is the most common chronic disease of children in the U.S.
- Previous studies show that pit and fissure caries account for 44% of all carious lesions in primary teeth
- The AAPD advocates further research owing to insufficient data in support of sealants placed on primary teeth. It is our goal to improve the evidence of pitand-fissure sealants on primary teeth in order to create a standard of care for their use on primary molars.

Objectives

- Aim #1: To determine the incidence and cumulative prevalence of caries detected on previously sealed primary molars at a hospital-based pediatric dental residency program.
- Aim #2: To explore associations between caries and demographic characteristics of the population that received sealants on primary molars placed at a hospital-based pediatric dental residency program.

Methods and Data Analysis

The study received Institutional Review Board (IRB) approval # 0826-21-EP

Type of Study: Retrospective Chart Review

Using Eaglesoft (Version 20.10) a report was generated for Service Code 01351 (Sealant, per tooth)

The report was generated for teeth sealed in 2017 (01/01/2017 – 12/31/2017)

Participants:

In this 2-year retrospective study, the authors reviewed dental records of 196 children (627 teeth) between 1 to 6 years of age.

Sealant placement was done either in the operating room under general anesthesia and in the traditional clinic setting

Data Analysis:

All data were collected and organized on Microsoft Excel Calculations were completed with Statistical Package for the Social Sciences (SPSS) software and Microsoft Excel

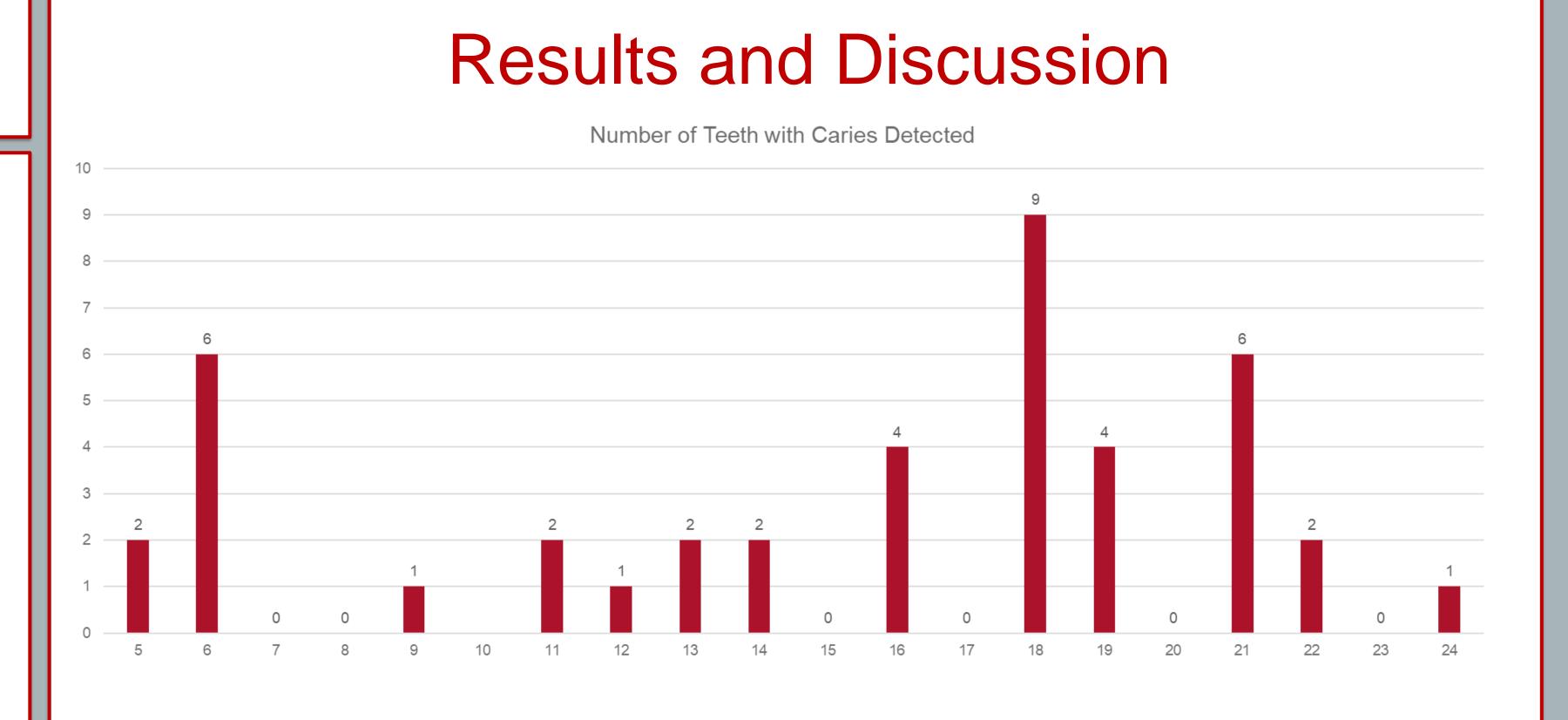
Flowchart: Inclusion / Exclusion Criteria Patients Age 1-6 Years Inclusions: tional Sealed Primary Mo n = 137 Noted but Not Charged Ou Non-Molar Primary Teeth n = 4 n = 9 Primary Molars Sealed in 2017 n = 485 Teeth with No Recall n = 166 Teeth Recalled >24 Mo. n = 34 Primary Molars Included n = 285

Characteristics Sample

	Total Teeth (n=285)
Gender	
Male	99 (34.7%)
Female	186 (65.3%)
Age (Years)	
1	2 (0.7%)
2	60 (21.1%)
3	91 (31.9%)
4	89 (31.2%)
5	38 (13.3%)
6	5 (1.8%)
Insurance	
Medicaid	235 (82.5%)
Private	37 (13.0%)
Uninsured	13 (4.6)

	Total Teeth (n=285)
Tooth Number	
Α	47 (16.5%)
В	34 (11.9%)
I	38 (13.3%)
J	38 (13.3%)
K	29 (10.2%)
L	31 (10.9%)
S	29 (10.2%)
Т	39 (13.7%)
Sealant Material	
Clinpro	225 (78.9%)
Beautifil	53 (18.6%)
Filtek	4 (1.4%)
Unknown	3 (1.1%)

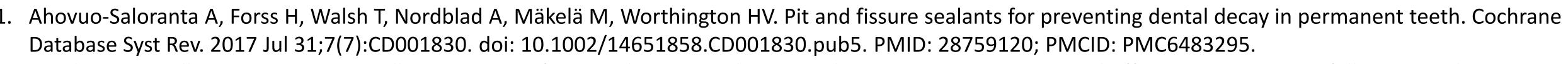
Results Occlusal Caries Detected (% of included primary molars) Out of 285 Included primary molars: - Occlusal Caries detected within 24 months 14.7% - **Yes**: 42 (14.7%) Teeth - **No**: 243 (85.3%) Teeth Treatment Setting: - **OR**: 231 (81.1%) Teeth - Clinic: 54 (18.9%) Teeth Sealant Material - Clinpro: 225 (78.9%) Teeth Beautifil: 53 (18.6%) Teeth ■Yes ■No

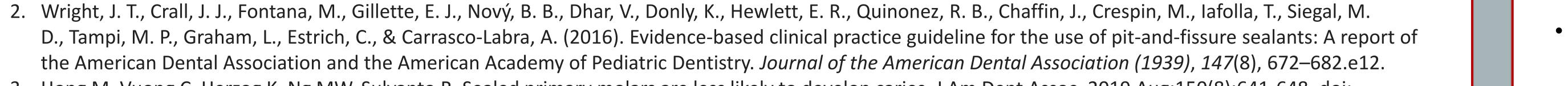


- Out of 90 patients evaluated, 18 (20%) presented with occlusal caries within 24 months from sealant placement
- Out of 285 primary molars which received pit-and-fissure sealants, 42 teeth (14.7%) were observed to have occlusal caries within 24 months from sealant placement
- Pit-and-fissure sealants were effective in preventing occlusal caries in 85.3% of primary molars evaluated in this
- No significant difference was found between caries detected and gender or tooth number
- Next Steps; additional analysis to examine correlations between caries by treatment setting (OR vs Clinic), Age, Material, Insurance Status

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- 3. Hong M, Vuong C, Herzog K, Ng MW, Sulyanto R. Sealed primary molars are less likely to develop caries. J Am Dent Assoc. 2019 Aug;150(8):641-648. doi:

Select References





10.1016/j.adaj.2019.04.011. PMID: 31352965.

Conclusions

- Placement of pit and fissure sealants reduces the percentage of incipient noncavitated carious lesions on primary molars
- Based on these findings, insurance companies should continue to reimburse for the use of pit-and-fissure-sealants on primary molars
- Limitations; This study did not have a comparison group. This author believes a split-mouth study would be a more effective study design. However, it does raise ethical issues to withhold potentially beneficial treatment

