

Abstract of Scientific
presentation in college
fest 'Dhadkan'

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Digital dentistry

Digital dentistry: Is this the future of dentistry?

Dentistry must actively shape the application of technology. Implementation of computers into each operatory and throughout the practice is the first and most frequent adoption of digital dentistry.

Advanced digital technology is rapidly improving the world as well as transforming the dental occupation the adoption of digital technologies in dentistry allied with efficient processes, and accurate high-strength materials are replacing outdated techniques to improve overall patients' experiences and outcomes.

Advantages

Daily advances and improved software adapted from other industries will allow this technology to be affordable –

1. Improved accuracy in comparison to previous methods
2. A high level of predictability of outcomes
3. offer a high return on investment.
4. Proves to be Time Efficient

Disadvantages

1. Initially it is Costly
2. Laidback attitude of clinician and team to adopt new technology
3. Maintenance and cost of machinery

The future of dentistry is now.



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DENTAL EROSION: Dental erosion is the loss of the surface of the teeth due to acids you eat or drink, or acids coming up from your stomach. These acids can dissolve the crystals that make up your teeth, leading to tooth surface loss.

CAUSE: Erosion may be caused by intrinsic (e.g. acid reflux and excessive vomiting) and/or extrinsic (e.g., diet) factors. Soft drinks, particularly carbonated sodas and sports drinks, appear to be a significant extrinsic cause of erosion.

Dietary sources of the acid can cause dental erosion. Common foods and drinks that contain high levels of acid include:

Vitamin c tablets
Lemon flavoured drinks or teas
Kombucha
Pre mixed alcoholic drinks

PREVENTION: Drink fluoridated water rather than soft drink or juice. Eat fruit rather than drinking fruit juice. Eat fruit at mealtimes rather than between meals. Reduce how often you eat or drink anything acidic and reduce the time it is in your mouth.

Do not chew vitamin C tablets. If necessary, take vitamin c supplements that are swallowed whole.

CONCLUSION: Saliva is a powerful natural defence against erosion. Saliva can wash acids out of your mouth into the stomach, it can neutralize acid and it can repair the early stages of tooth softening by repairing tooth mineral. However, it cannot restore the lost tooth surface. A reduced flow of saliva (dry mouth) can increase your risk of dental erosion.



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ORAL CANCER

A growth that occurs in mouth caused due to uncontrolled cell division, is called oral cancer. This causes mouth sore, white or reddish patch or lump that doesn't heal with time.

India observes more than 1 million cases / year.

CAUSES:

- Oral cancer just like any other cancer is caused due to mutation or damage in DNA.
- DNA on the other hand can be damaged due to various reasons, one of the most common causes is consumption of tobacco and alcohol, this can also be transmitted through underlying genetical condition.

SYMPTOMS:

- Sore throat or lump that does not heal.
- Ulcer, bad breath, white plaques are common.
- Coughing and enlarged neck are also common.

DIAGNOSIS:

- Physical examination
- Clinical examination aka biopsy.

TREATMENT

- Chemotherapy
- Radiation therapy
- Surgery

PREVENTION:

- Reducing exposure to tobacco and alcohol.
- Screening for early detection of oral cancer.
- Family of these patients are also at high risk.



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Vitamins and Minerals That Help Strengthen Teeth-

1. Calcium-

Calcium is one of the most important minerals for healthy teeth because it strengthens your enamel. Sure, you may know that **dairy products** are a great source of calcium, but so are **leafy greens, beans, and almonds**.

2. Vitamin D-

Vitamin D is doubly important because not only does it boost mineral density, it also helps absorb, carry, and deposit calcium in the bones that support your teeth. Some **dairy products and cereal** are fortified with vitamin D, but you can also get it naturally from the sun.

3. Phosphorus-

Phosphorus plays a critical role in dental health because it naturally protects and rebuilds tooth enamel. The best sources of phosphorus can be found in protein-rich foods like meat, poultry, fish, and eggs.

4. Vitamin A-

Vitamin A is a key nutrient in keeping your gums healthy as well as building tooth enamel. Most foods with vitamin A are orange—making it easy to remember that sweet potatoes, cantaloupe, and carrots are all vitamin A powerhouses.



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Denture Care: How Do I Clean Dentures?

Removable partial or full dentures require proper care to keep them clean, free from stains and looking their best. For good denture care:

- **Remove and rinse dentures after eating.** Run water over your dentures to remove food debris and other loose particles. You may want to place a towel on the counter or in the sink or put some water in the sink so the dentures won't break if you drop them.
- **Handle your dentures carefully.** Be sure you don't bend or damage the plastic or the clasps when cleaning.
- **Clean your mouth after removing your dentures.** Use a soft-bristled toothbrush on natural teeth and gauze or a soft toothbrush to clean your tongue, cheeks and roof of your mouth (palate). If used, remove any remaining denture adhesive from your gums.
- **Brush your dentures at least daily.** Remove and gently clean your dentures daily. Soak and brush them with a soft-bristled brush and nonabrasive denture cleanser to remove food, plaque and other deposits. If you use denture adhesive, clean the grooves that fit against your gums to remove any remaining adhesive. Don't use denture cleansers inside your mouth.



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Abstract

Since year 2020 we are suffering from COVID 19 pandemic, since then stress has become a matter of concern. COVID 19 has affected everyone. One of the most impacted areas are the medical and dental educational field, due to the forced break from the preclinical and clinical practices during the lockdown which affected both the educational part as well as the patients. Aim was to investigate the impact of COVID 19 pandemic on the dental student's education. Objective is to evaluate student's perception towards education during lockdown, and to investigate the stress management among the dental students during pandemic. Students took time to get used to the new situation, many subjects were online conducted, and online exam was also conducted. Online competitions were also held, many students participated.

The observed stress levels were from moderate to high, which can be alleviated by the support of faculty members. The integration of online counseling and stress management programs with the ongoing teaching can also help in the mitigation of the stress levels of the students.

Reference:- Saeed B Alzahrani, Adel A Ansari et.al. Impact of COVID 19 pandemic on dental education, research and student's volume 10 6 June 2020 3

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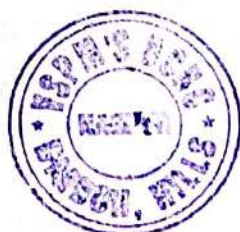
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Profiling of the Microbiota at the Mouth of Bottles and in Remaining Beverages after Drinking directly from plastic bottles

Abstract: It is been suspected that the oral bacteria can be transferred to the beverages in the plastic bottles, when it is drunk directly from the bottle, and that the bacteria can then multiply in the bottles.

According to study done by Wakui, A.; Sano, H.; Hirabuki, Y.; Kawachi, M.; Aida, A.; Washio, J.; Abiko, Y.; Mayanagi, G.; Yamaki, K.; Tanaka, K.; et al. Twelve healthy subjects (19 to 23 years of age) were asked to drink approximately 50 mL of unsweetened tea from a plastic bottle. The mouths of the bottles were swabbed with sterile cotton, and the swabs and the remaining tea in the bottles were analyzed by anaerobic culture and 16S rRNA gene sequencing. Metagenomic analysis of the 16S rRNA gene was also performed. The mean amounts of bacteria were $(1.8 \pm 1.7) \times 10^4$ colony-forming units (CFU)/mL and $(1.4 \pm 1.5) \times 10^4$ CFU/mL at the mouth of the bottles immediately after and 24 h after drinking, respectively. In contrast, $(0.8 \pm 1.6) \times 10^4$ CFU/mL and $(2.5 \pm 2.6) \times 10^6$ CFU/mL were recovered from the remaining tea immediately after and 24 h after drinking, streptococcus were the predominant bacteria, followed by schaalia, Gemella and Actinomyces. The metagenomic Analysis also showed similar findings. Furthermore, Streptococcus were the predominant bacteria 24 hrs after drinking. The findings demonstrated the presence of Oral Microbiota at the mouth of bottle and remaining tea. Though some microorganisms do not grow in some types of beverages, it is recommended that any remaining beverage should be discarded after drinking.

Keywords: Oral Microbiota, profiling, PET bottles, unsweetened tea



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***Key Points**

- Many common diseases are not inherited as a single gene defect but instead result from gene-environment interactions.
- No gene to date has been identified that has as large an impact on periodontal disease as do environmental influences, such as smoking or diabetes.
- A predictive test for dental caries or for periodontal disease does not currently exist; both of these are complex diseases with multiple genetic and environmental risk factors.
- While genetic testing holds potential for clinical application in the future, clinical measurements remain the best approach for assessment of caries and periodontal disease at this time.

***Significance**

Genes can increase the risk in a family for getting certain health conditions. They influence how healthy we are in later life.



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Assessment of knowledge and attitude towards Teledentistry during COVID-19 pandemic among undergraduate dental students and interns of a private dental institute of Nagpur city

Background—Teledentistry is a form of telehealth utilizing a combination of telecommunications and dentistry, which involves the exchange of clinical information and relevant imaging over remote distances for consultation and treatment planning. In the wake of current situation and considering practicing dentistry in the coming future, there is a need of tele dentistry.

Aims and Objectives – Assess the knowledge&attitude towards Teledentistry during COVID-19 pandemic.

Material &Methodology – Cross-sectional study among undergraduate dental students & interns of a private dental institute.

Result- 307 students & interns surveyed, 175 (57%) were aware of Teledentistry and 256 (83%) said they wish to practice tele dentistry.

Conclusion – The knowledge regarding Teledentistry was good & attitude was found to be satisfactory.



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A Survey on Knowledge and Attitude towards Oral Hygiene among Dental Students of Central Vidarbha

ABSTRACT

Attitudes of dental students toward their own health affect their oral health habits and also have a possible influence on the improvement of the oral health of their patients and society. Aim of study was assessment of Knowledge and Attitude towards Oral Hygiene among Dental Students of Central Vidarbha. In a cross-sectional study, a self-administered structured questionnaire consisting of 11 questions on attitudes toward dental care, oral health practice and knowledge of oral health was distributed to 1057 students of different years of course. In the present study, 72% students brush teeth more than once a day using fluoridated toothpaste. 41.8% visited dentist only when problem arose and 55.8% visited dentist for periodic check-up. The survey concluded that even the dental students were aware about different aids for maintaining the oral hygiene and the harmful affect in general health related to oral health.

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Title –“Red in the management of white.”

“Lycopene in the management of Oral leukoplakia.”

Abstract:

Aim: To evaluate the efficacy of lycopene in the management of Oral leukoplakia and its comparison with other treatment modalities.

Materials and Methods:

A comprehensive search was done in PubMed, Cochrane, Google Scholar, Medline and Ebscohost to identify Oral leukoplakia related clinical trials involving lycopene as one of the intervention. Studies were screened according to inclusion and exclusion criteria. A final inclusion of 4 RCT studies was done to evaluate the efficacy of lycopene alone or in combination with various drugs in the management of Oral leukoplakia to obtain three outcome variables i.e. reduction in size; complete healing of lesion and adverse effects of drug.

Results: Reduction in size, complete healing of lesion with no adverse effects of lycopene was observed.

Conclusion: To emphasize more on the effectiveness of lycopene in the management of oral leukoplakia, further clinical trials are still required.



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ABSTRACT

Nasolacrimal Canal for Gender Assessment

Gender estimation is an indispensable component of biological assessment in forensic science. Nasolacrimal canal is one of the prominent landmark of the craniofacial region which can be well evaluated routinely on computed tomographic examination. So, the aim of the study was to evaluate nasolacrimal canal for gender assessment. This study was carried out on 300 axial and sagittal CT scans which included images of subjects above 15 years of age. The anteroposterior, transverse diameters and sectional area of the bony nasolacrimal canal at the level of infraorbital margin, and the angle between the bony canal and the nasal floor were evaluated for gender determination. Except for the length, all other four dimensions were found to be highly statistical significantly greater in males ($p < 0.001$) while no statistically significant difference was found between right and left side. So, nasolacrimal canal is one of the reliable landmark for gender assessment.



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Buccal bone morphologic changes in corticotomy and micro-osteoperforations assisted orthodontic treatment – A CBCT analysis

Introduction: Periodontally Accelerated Osteogenic Orthodontics (PAOO) supports the use of osteotomy to aid tooth movement and rapid distraction of the periodontal ligament by utilizing tissue engineering principles with periodontal regenerative surgery. Flapless micro-osteoperforation (MOP) is a minimally invasive approach.

Aim and objectives: To evaluate and compare rate of tooth movement and associated buccal bone morphologic changes between corticotomy and MOP.

Methodology: Analysis of CBCT scans done pre (T1) and post (T2) operatively to evaluate radiographic parameters such as buccal bone thickness, root resorption, dehiscence and rate of tooth movement.

Results: The canine-premolar distance reduced significantly from T1 to T2 on both corticotomy and MOP sites. Corticotomy site shows statistically significant increase in bone thickness in coronal region.

Conclusion: Both techniques cause increase in canine retraction in short period of time with almost no harm to periodontium.



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**Title: Association of the Gingival Line Angle with the Gingival and Interdental Smile Line-
A Gender based Evaluation**

Objective: The present study was conducted to assess and correlate the nasolabial angle (NLA) and lip length (LL) with gingival smile line (GSL) and interdental smile line (ISL).

Materials and methods: 120 Periodontally healthy patients with an age group 20-40 years were equally divided based on gender into two groups. The parameters of NLA, LL, GSL, ISL, were recorded in the maxillary anterior teeth up to the canines.

Results: The mean values of NLA and LL at rest and on smiling were found to be higher in males than the females. Majority of male and female patients exhibited Low GSL (LGSL) and High ISL (HISL).

Conclusion: Within the smile arcade, NLA and LL influence the quantum of gingival exhibit in midfacial and interdental papilla region in maxillary anterior teeth with a definitive sexual dimorphism.



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IDIOPATHIC CONDYLAR RESORPTION a.k.a Cheerleader Syndrome !

Idiopathic condylar resorption (ICR) of the temporomandibular joint (TMJ) is a condition that is often esthetically and functionally altering, characterized by progressive resorption of the TMJ condylar heads, without a known cause.

Its also called "Cheerleader syndrome" because it frequently occurs in teenage girls participating in sports activities which, through minor/major trauma to the jaws, can initiate or exacerbate the condition.

Female to male ratio of prevalence is 9:1 and average age of the patients is 20 years.

The girls have typically high angle facial types and Class II skeletal & occlusal relationships.

ICR can be treated very effectively with the specific treatment protocol, provided the articular discs and condyles are still salvageable.

So, we Orthodontists, being the specialist for temporomandibular disorders, should take the responsibility to spread awareness regarding this unpopular condition.

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Guide: Dr. Sujoy Banerjee



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NUTRITION AND ORAL HEALTH

There is an interdependent relationship between nutrition and health of oral tissues. The well-being of the oral tissues depends on the intake of nutrients. Oral health determines the type of food consumed and ultimately the nutritional level. A review of literature was to outline this interdependent relationship.

Malnutrition often leads to retarded growth of skeletal & dentofacial structures and ultimately leads to malocclusion. Malnutrition can cause poor oral health and poor oral health can indirectly cause malnutrition. To break this vicious cycle, good nutrition habits must be imbibed.

Orthodontists should be responsible for counselling patients on diet as it relates to oral health.

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Comparative evaluation of left ventricular mass in patients with chronic kidney disease in periodontally healthy, chronic gingivitis and chronic periodontitis patients

Abstract

The study evaluated and compared Left Ventricular Mass (LVM) in patients with Chronic Kidney Disease undergoing hemodialysis (CKDH) in periodontally healthy, chronic gingivitis and periodontitis.

60 patients with CKDH were divided as: CKDH patients with healthy periodontium (CKDH + HP), CKDH patients with chronic gingivitis (CKDH + CG) and CKDH patients with chronic periodontitis (CKDH + CP). LVM in patients was calculated according to Devereux formula and was indexed to height.

CKDH + CG and CKDH + CP patients exhibited higher mean LVM of 199.51 ± 40.17 g and 200.35 ± 65.04 g respectively as compared to CKDH + HP of 161.56 ± 27.99 g.

Similarly LVM Index was found to be more in CKDH + CG and CKDH + CP than CKDH + HP patients.

Conclusions: Increasing severity of periodontal diseases in CKDH patients is associated with increase in LVM and LVM Index.



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