should be carefully considered bearing in mind the potential numerous aetiological factors involved.

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ABSTRACTS

DOES THE COLOUR OF THAT CROWN REALLY MATCH?

The Reliability of an Intraoral Dental Colorimeter. F.F. Tung, G.R. Goldstein, S. Jang and E. Hittelman. *Journal of Prosthetic Dentistry* 2002; **88**: 585–590.

Shade taking has always been a difficult subject. Indeed, I myself once sat next to a dentist at a national conference who was extremely distressed to discover, during the presentation, that she was severely colour blind in the green range! (The shade she claimed to choose most frequently was C3, and amongst her least favourite shades was A3.) This paper describes a system for automatically recording the shade of a patient's teeth, and attempts to assess its accuracy. Interestingly, perhaps, the examiners in the study had not themselves been assessed for colour vision deficiencies.

The colorimeter measures the colour of both natural teeth and metal-ceramic restorations and prints out a prescription for a particular porcelain system. The study assessed the reliability of the machine by taking shades on separate occasions, and compared its decisions with those of the two dental examiners.

It is reported that the colorimeter agreed with itself on only 82% of readings, slightly better than the examiners themselves (73%). However, shades selected by the colorimeter matched the two examiners on only 55% and 64% of the time. Whether or not the research is conclusive is doubtful, and the authors suggest that further investigations are required. Whether or not the purchase of such a machine will improve your clinical practice may also require further investigation!

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HOW SHOULD I CLEAN MY DENTURES, DOCTOR?

The Effectiveness of Seven Denture Cleansers on Tea Stain Removal from PMAA Acrylic Resin. D.C. Jagger, L. Al-Akhazami, A. Harrison and J. S. Rees. *International Journal of Prosthodontics* 2002; **15**: 549–552.

Patients faced with a plethora of commercial products frequently seek professional advice as to how best to clean their dentures. In this *in vitro* study the authors created simulated stained acrylic dentures with tea, chlorhexidine and a salivary pellicle. Samples were prepared with both smooth and roughened surfaces. The samples were then exposed for 5 minutes to 7 different cleansers to assess the percentage efficiency of each system. This was determined by measuring the optical density of the treated specimens using a spectrophotometer.

It was found that products containing alkaline hypochlorite were best at removing the stains. Not surprisingly, the roughened acrylic surfaces were less well cleaned, suggesting that abrasive cleansers should be avoided. The authors give details of various difficult stain situations, and also point out that some cleansers should not be used on metalbased dentures. The report provides full details of the products tested. The authors conclude that agents containing hypochlorite were the most effective, giving particular mention to the efficacy of Boots Denture Cleaning Powder whilst observing that the manufacturers do not provide details of its constituents.

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