

veterana bila neposredno izložena ratnome stresu. Proveden je potanki parodontni pregled i uzeti su uzorci subgingivne mikroflore svakog ispitanika. Klinički pregled je uključivao određivanje plak indeksa (PI), indeksa krvarećeg sulkusa (SBI), dubinu sondiranja (PD) i klinički gubitak pričvrstka (CAL). Metoda lančane reakcije polimeraze (PCR) upotrijebljena je za identifikaciju sljedećih bakterija: *Actinobacillus actinomycetemcomitans* (Aa), *Porphyromonas gingivalis* (Pg) i *Eikenella corrodens* (Es). Prevalencija u svim skupinama za Ec bila je 81% , za Aa 36% i za Pg 19%. Prevalencija za Ec bila je 74% u PTSP skupni, 80% u PP skupni i 93% u parodontno zdravih ispitanika. Prevalencija za Aa bila je 30% u PTSP skupini, 46% u PP skupini i 30% u parodontno zdravih ispitanika. Prevalencija za Pg bila je 16% u PTSP skupini, 16% u PP skupini i 26% u kontrolnoj skupini. S obzirom na vrstu parodontitisa prevalencija bakterija bila je : za Ec 74% u CP i 83% u AP pacijenata; za Aa 37% u CP i 39% u AP pacijenata; za Pg 16% u CP i 18% u AP pacijnata. Ispitanici s Ec imali su niže PI, SBI i CAL vrijednosti. Oboljeli od PTSP-a imali su najveće PI i SBI vrijednosti, a bili su slični PP pacijentima po PD i CAL vrijednostima. Slična prevalencija parodontnih patogena u PTSP i PP pacijenata pokazuje da se oboljeli od PTSP-a mogu smatrati rizičnom skupinom za inicijaciju i progresiju parodontne bolesti.

Post-Traumatic Stress Disorder Patients and Periodontal Health

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Progression of periodontitis depends on simultaneous occurrence of several factors of the disease. Besides subgingival plaque microorganisms, stress, through modifying host response, has been shown to contribute to tissue destruction seen in periodontal disease. War stress can cause permanent effects, including post-traumatic stress disorder (PTSD). We wanted to study the prevalence of periodontal pathogens, association of these microorgan-

isms with the clinical parameters of periodontitis and the influence of war stress on periodontal health in patients with PTSD. The investigation was conducted on 130 subjects: 50 war veterans diagnosed and treated for PTSD, 50 subjects with progressive periodontitis (PP) and 30 periodontally healthy subjects. The progressive periodontitis group included subjects with chronic (CP) and aggressive periodontitis (AP). Only the war veterans group has been exposed directly to war stress. Detailed periodontal examination and subgingival microbial amplification were conducted for each participant. Clinical examination included assessment of plaque index (PI), sulcus bleeding index (SBI), probing depth (PD) and clinical attachment loss (CAL). Polymerase chain reaction (PCR) was used for microbial identification of the following bacteria: *Actinobacillus actinomycetemcomitans* (Aa), *Porphyromonas gingivalis* (Pg) and *Eikenella corrodens* (Ec). The prevalence in all groups for Ec was 81%, for Aa 36% and for Pg 19%. Prevalence for Ec was 74% in PTSD group, 80% in PP group and 93% in periodontally healthy subjects. Prevalence for Aa was 30% in PTSD group, 46% in PP group and 30% in periodontally healthy subjects. Prevalence of Pg was 16% in PTSD group, 16% in PP group and 26% in the control group. Considering the periodontal diagnosis, the prevalence of bacteria was : for Ec 74% in CP and 83% in AP patients; for Aa 37% in CP and 39% in AP patients; for Pg 16% in CP and 18% in AP patients. Subjects harbouring Ec had lower PI, SBI and CAL values. PTSD patients had the highest PI and SBI values, and concerning PD and CAL were similar to PP patients. The similar prevalence of periodontal pathogens in PTSD and PP subjects indicates PTSD subjects as a risk group for periodontal disease initiation or progression.

Pilokarpin-hidroklorid ima kratkotrajan učinak u liječenju kserostomije

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Kserostomija, tj. suhoća usta jest stanje uglavnom uzrokovano uzimanjem lijekova, imunološkim bolestima