

sljedećih zaključaka: djeca ruralnog i subruralnoga dijela naše zemlje, a osobito iz ratnih područja, pokazuju vrlo visoke vrijednosti dmft/DMFT i i dmfs/DMFS indeksa. DMFT indeks iznosio je 6,67, a dmft 7,7. Dobivena vrijednost SiC indeksa iznosila je 10,89. Na temelju dobivenih rezultata možemo zaključiti da smo još veoma daleko od postavljenih ciljeva WHO i FDI za unapređenje oralnoga zdravlja. Postoji jako velik postotak ortodontskih anomalija, 68,72% u starijoj populaciji i 39,19% u mlađoj ispitnoj skupini. Istraživanjem je potvrđeno određeno pravilo distribucije karijesnih lezija prema zubi i čeljusti. Ta spoznaja, uz prikupljanje nekliničkih varijabli, može uvelike koristiti u svakodnevnoj kliničkoj praksi te omogućiti brzo i točno dijagnosticiranje. Tada se uz pravilnu preventivu i kurativnu skrb lakše može postići razina oralnoga zdravlja.

Caries Incidence in Children With Regard to Their Oral Hygiene Habits and Past Caries Experience

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Caries incidence in children is frequently connected to certain life habits of each individual. Multifactorial etiology of dental caries make it difficult to act on etiological factors, but if we get to know them better it can help us to prevent tooth decay as one of the most humane and economical ways of acting against caries, which is still an important issue of public health.

The aim of this study was to establish certain regularities in caries incidence in children during primary and permanent dentition, with regard to clinical and non-clinical variables which can be gathered in everyday clinical work. The study was conducted on 301 subjects, inhabitants of Petrinja and Topusko. The subjects were age from 3-6 and 11-14 years. Seventy-four subjects participated in the younger age group and 227 in the older. All the subjects were under the same protocol. The questionnaire examined the level of oral hygiene, use of additional supplements (antibacterial agents, fluorides), eating habits, nutrition and socio-economical status. Clinical examination was made by one experienced examiner. It consisted of a dental examination, determination of the quantity of

stimulated saliva and evaluation of oral hygiene index (Green-Vermillion). Orthodontic anomaly was also noted. On the basis of the collected and statistically processed data we reached the following conclusion: children in rural and sub-rural areas of Croatia, especially in parts affected by the recent war, show very high values of dmft/DMFT. DMFT index was 6.67 and dmft 7.7. The obtained value of SiC index was 10.89. On the basis of these results we can conclude that we are still far away from the goals set by WHO and FDI to improve oral health. We also found a very high percentage of orthodontic anomalies, from 68.72% in the older group to 39.19% in the younger. The study confirmed the rule of the distribution of caries lesions towards the tooth and jaw. This knowledge, with the collecting of non-clinical variables, can be effectively used in everyday clinical practice and allows quick and accurate diagnosis with the right preventive and curative care to improve the level of oral health.

Organizacija hitne stomatološke službe grada Zagreba i Zagrebačke županije

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Hitna stomatološka služba društvena je javnozdravstvena djelatnost primarne stomatološke zaštite organizirana i financirana od HZZO-a Grada Zagreba i Zagrebačke županije kako bi se na trima lokacijama svim građanima Grada Zagreba i Zagrebačke županije pružile hitne stomatološke usluge u vremenu kada ostale stomatološke ustanove i ordinacije ne ordiniraju, a to je tijekom svake noći od 22 sata do 6 sati ujutro, te nedjeljama, praznicima i blagdanima. U cijelosti sagledavši organizaciju spomenute službe, do 2000. godine Gradski je ured za zdravstvo, rad i socijalnu skrb proveo funkcionalnu reorganizaciju sa svrhom da se postignu najviši standardi u hitnoj zubozdravstvenoj zaštiti svih građana Zagreba i Zagrebačke županije. Služba je organizirana u uređenim prostorima i s novom stomatološkom opremom na trima lokacijama:

u KB Dubrava (Av. G. Šuška 6), u Stomatološkoj poliklinici Zagreb (Perkovčeva 3) i u Domu zdravlja Centar-lokacija Siget (Aleja pomoraca bb). Radi se sa sedam timova; od čega pet timova financira HZZO, a po jedan tim financiraju Grad Zagreb i Zagrebačka županija. Grad Zagreb ima 780 000 stanovnika, a Županija još dodatnih 310 000 stanovnika.

Organization of the Emergency Dental Service in the City of Zagreb and Zagreb County

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The emergency dental service is a social public health activity of primary dental health care organized and financed by the Croatian Institute for Health Insurance, city of Zagreb and the Zagreb county. The emergency dental service offers quick and important dental services to every citizen of the city of Zagreb and Zagreb county. The emergency dental service works when other dental institutions and practices do not work, i.e. each night from 10 pm. to 06 am., on Sundays, holidays and feasts. Based on the activity of the mentioned organization up to the year 2000, the city of Zagreb's "Department for Health, Work and Social Welfare" decided to conduct functional reorganization with the aim of achieving the highest standards of emergency dental service for each citizen of the town and county. The service is organized in new facilities with new dental equipment at three locations: Clinical Hospital "Dubrava" (Av. G. Šuška 6), Dental polyclinic Zagreb (Perkovčeva 3) and Health Center "Center"- location Siget (Aleja pomoraca bb.). The service has 7 teams, 5 of which are financed by the Croatian Institute for Health Insurance, 1 by the city of Zagreb, and 1 by the Zagreb county. The city of Zagreb has 780000 residents and the county has an additional 310000 residents.

Procjena kakvoće mandibularne kosti u nositelja potpunih i djelomičnih proteza

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Uspjeh protetske terapije često ovisi o stanju koštane strukture čeljusti. Stabilizacija proteza u njihovoj funkciji zahtijeva postojanje određene količine koštane strukture kao potpore protezama. Svrha ovog israživanja bila je odrediti postoji li povezanost gustoće mandibularne kosti (BMD) i nekih linearnih radiomorfometrijskih indeksa izmjerenih na ortopantomogramima s različitim vrstama protetskog opterećenja. U istraživanju je sudjelovalo 136 ispitanika (72 nositelja potpunih proteza, 64 nositelja djelomičnih proteza) Svim su pacijentima izrađeni ortopantomogrami, standardizirani uporabom bakrenoga kalibracijskog klina. Vrijednosti izmjerene gustoće mandibularne kosti (BMD) izražene su u ekvivalentima stvarne debljine bakrenoga kalibracijskog klina. Linearni radiomorfometrijski indeksi izmjereni su također na svakom ortopantomogramu.

Rezultati istraživanja pokazali su da postoji statistički znatna razlika u linearnim radiomorfometrijskim indeksima izmjerenima u nositelja potpunih i djelomičnih proteza ($p < 0.05$). Statistički znatna razlika također je pronađena kod izmjerenih gustoća mandibularne kosti na gornjem rubu čeljusti u nositelja potpunih i djelomičnih proteza ($p < 0.05$). Različiti oblici protetskoga opterećenja koštane strukture donje čeljusti utječu na promjene u gustoći mandibularne kosti i na debljinu kortikalne kosti izmjerenu na donjem rubu čeljusti.

Evaluation of the Mandibular Bone Quality in Complete and Removable Partial Denture Wearers

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Success of prosthodontic treatment depends on the state of bone tissue in the jaws and requires a certain amount