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Silver Diamine Fluoride Has Efficacy in Controlling Caries Progression in Primary Teeth: A Systematic Review and Meta-Analysis

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REVIEW ANALYSIS & EVALUATION – DIAGNOSIS/TREATMENT/PROGNOSIS

DECLARATIVE TITLE:

SILVER DIAMINE FLUORIDE IS EFFECTIVE ARRESTING CARIES LESIONS IN PRIMARY TEETH

REVIEWERS: YASMI O CRYSTAL & BENJAMIN W CHAFFEE

PURPOSE/QUESTION

The authors conducted a systematic review and meta-analysis of randomized clinical trials to evaluate the efficacy of silver diamine fluoride (SDF) in controlling caries progression in children when compared with active treatments (including preventive treatments, such as fluoride varnish) or placebos.

ARTICLE TITLE AND BIBLIOGRAPHIC INFORMATION

Silver Diamine Fluoride Has Efficacy in Controlling Caries Progression in Primary Teeth: A Systematic Review and Meta-Analysis. Chibinski AC, Wambier LM, Feltrin J, Dourado Loguercio A, Stadler Wambier D, Reis A. Caries Res 2017;51:527-541 DOI: 10.1159/000478668

STRENGTH OF RECOMMENDATION SORT SCORE: Grade A Consistent, good-quality, patient-oriented evidence

LEVEL OF EVIDENCE: Level 2 Limited-quality, patient-oriented evidence

SOURCE OF FUNDING: This study was partially supported by the National Council for Scientific and Technological Development (CNPq) of Brazil under grants 304105/2013-9 and 305588/2014-1.

TYPE OF STUDY/DESIGN: Systematic review with meta-analysis

KEY WORDS: Silver Diamine Fluoride, Dental Caries, Caries Arrest, Pediatric Dentistry

SUMMARY

Selection Criteria

The authors searched for parallel-design randomized clinical trials (RCTs) with follow-up >6 months that compared the efficacy of SDF application to other active treatments or placebo in arresting caries lesions in primary teeth or first permanent molars in children with active caries. Authors searched 6 electronic publication databases, 5 clinical trial registries, recent International Association for Dental Research abstracts, and the grey literature, without restrictions on publication date or language. Study protocol was registered in the PROSPERO database, and PRISMA statement reporting recommendations were followed. Titles and abstracts were screened and selected full texts reviewed. Trial authors were contacted for additional information, as the review authors determined necessary.

Risk of bias for each included study was evaluated using the Cochrane Risk of Bias Tool, with studies classified at low risk of bias if both of two domains (sequence generation and allocation concealment) were deemed at low risk. The authors performed meta-analysis on 4 trials considered at low risk of bias and that reported similar outcomes. The Download English Version:

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