

KLE Society's Institute of Dental Sciences, Bangalore -22 Department of Orthodontics

Critical appraisal form for journal club articles. (Case reports/ Clinical articles)

Date: 01/01/2020

Presented by: Niyosha Rizvi

Citation (Author(s), year, title, Journal, volume, issue, pages):

Zhang M, Liu S, Chen S, Yu F, Zhong C, Huang J, Lu H. Induced ankylosis of primary canines for absolute anchorage in the treatment of a patient with Class III malocclusion and cleft soft palate. Am J Orthod Dentofacial Orthop. 2019 Mar;155(3):398-410.

Title:

Does not include the words 'case report'.

Abstract:

Not structured and does not include keywords.

Introduction/Background:

Well explained about etiology and possible treatment modalities with side effects thus defending chosen treatment plan and need for the intervention described in the case report.

Diagnosis and etiology:

No previous history of dental treatment reported. Clinical findings described. Possible etiologic factors for the clefting not mentioned. Quantification of growth potential/ CVMI stage not mentioned. Three-quarter smiling view not included in extra-oral photogrpahs. Angulation of intra-oral maxillary occlusal photograph not proper. **Treatment objectives:** Clearly stated. **Treatment alternatives:** Clearly explained with various modalities to apply traction force detailed. **Treatment Plan:** Final protocol chosen explained in point-format. Reasons for choosing selected plan explained. Grade and level of evidence for treatment plan: Not specified.

Chief complaint and medical history included.

Treatment progress:

Whether the patient gave informed consent is not mentioned.

Explained in detail.

The bracket system used for treatment is not mentioned.

Design and rationale of splint used for ankylosis not mentioned.

Method of determination of ankylosis not mentioned.

Rationale behind alternate use of primary incisors and primary canines not mentioned.

The rationale behind placement of brackets on primary incisors even though they weren't ankylosed is not explained.

The reason why primary molars with a larger root surface area and later shedding were not chosen for ankylosis is not explained.

Three-quarter smiling view not included in extra-oral photogrpahs.

Angulation of intra-oral maxillary occlusal photograph not proper.

Treatment Results:

Satisfactory soft tissue appearance and occlusion.

Changes in cephalometric variables presented.

2 year and 4 year follow up included.

Patient not smiling in post treatment extra-oral photographs.

Maxillary occlusal photograph does not cover maxillary first molars completely in 2 year follow up.

The same photo is used frontal at rest and smiling in four year follow up photographs.

Discussion:

Scientific discussion of strengths included.

No mention of limitations or problems encountered during treatment.

Relevant literature consulted and included with references.

Patient perspective not included.

Conclusions:

Innovative and minimally invasive method for obtaining anchorage discussed by the authors.

New treatment strategy for early intervention of Class III patients.

CARE CASE PROOF BLASSET BEST		CARE Checklist of information to include when writing a case report	1
Topic	Item	Checklist item description	Reported on Line
Title	1	The diagnosis or intervention of primary focus followed by the words "case report".	×
Key Words	2	2 to 5 key words that identify diagnoses or interventions in this case report, including "case report"	
Abstract (no references)	3a	Introduction: What is unique about this case and what does it add to the scientific literature?	· ———
	3Ь	Main symptoms and/or important clinical findings	
	3с	The main diagnoses, therapeutic interventions, and outcomes.	·— У —
	3d	Conclusion—What is the main "take-away" lesson(s) from this case?	_ ×
Introduction	4	One or two paragraphs summarizing why this case is unique (may include references)	
Patient Information	5a	De-identified patient specific information.	
,	5b	Primary concerns and symptoms of the patient.	
	5c	Medical, family, and psycho-social history including relevant genetic information	
	5d	Relevant past interventions with outcomes	·——
Clinical Findings	6	Describe significant physical examination (PE) and important clinical findings.	
Timeline	7	Historical and current information from this episode of accessoration from the episode of accessoration from	
Diagnostic Assessment Therapeutic Intervention	8a	Historical and current information from this episode of care organized as a timeline	
	8Ь	Diagnostic challenges (such as access to lesting, financial, or cultural)	
	8c	billightesis (including other diagnoses considered)	_
	8d	r rogridus (such as staging in oncology) where applicable	_
	9a	Types of the apecual filler verified (SUC) as pharmacologic surprised properties colf and	
	9Ь	A straightful in the repetition I Such as dosage strength duration)	
	9c	and a supposed of the supposed	.,
Follow-up and Outcomes	10a	and pasericassessed outuaries (il available)	
	10b	Por tork topour op diagrassic and other rest rest rest re-	_
	10c	The state of the card to contain the card to contain the card to card	
	10d	- Literate and an an incipated events	
Discussion	11a	A Section discussion of the Subtribute AND Impropose accompled with the	
	11b	The state of the s	,
	11c		
	11d	man and and another than the second of the contract of the con	
Patient Perspective	12	be speciful if the ball and the street of th	
Informed Consent	13	Did the patient give informed consent? Please provide if requested	Yes D No S

Staff-in-charge

Dr. Sumitra

Professor & HOD

Dr. Sumitra