

CHETTINAD DENTAL COLLEGE AND RESEARCH INSTITUTE

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

Reports for Week 7 (11.05.2020 to 17.05.2020)

Theory class sessions

| S.No | Date | Batch | Lecture topic | Faculty | No of students participated |
|------|------------|---------------|----------------------------|--|-----------------------------|
| 1 | 11.05.2020 | Regular | Dental Practice Management | Dr.Cyril Benedict H | 74/78 |
| 2 | 11.05.2020 | Supplementary | Fluoride Toxicity | Dr.Nagaland.T | 7/7 |
| 3 | 16.05.2020 | Regular | Revision on Biostatistics | Dr.Nagappan Dr.H.Cyril Benedict Dr.Nagaland Dr.Ranjith Kannan | 76/78 |
| 4 | 16.05.2020 | Supplementary | Defluoridation | Dr.Jagannatha.G.V | 7/7 |

Clinical discussions

| S.No | Date | Batch | Lecture topic | Faculty | No of students participated |
|------|-------------------------|---------------|--|--|-----------------------------|
| 1 | 11.05.2020 Session 1 | Regular | Topical fluorides- rationale of use and types | Dr.Jagannatha.G.V Dr.Nagaland.T | 11/13 |
| 2 | 11.05.2020 Session 2 | Regular | Procedure of application of 1.23% APF gel, F varnish | Dr.Jagannatha.G.V Dr.Nagaland.T | 11/13 |
| 3 | 11.05.2020 Session 1 | Supplementary | Dietary Assessment-1 | Dr.Cyril Benedict Dr.Nagappan Dr.Nagaland.T | 1 |
| 4 | 11.05.2020 Session 2 | Supplementary | Dietary Assessment-2 | Dr.Cyril Benedict Dr.Nagappan | 1 |
| 5 | 12.05.2020 Session 1 | Regular | ART-1 | Dr.Cyril Benedict Dr.Jagannatha.G.V | 13 |
| 6 | 12.05.2020 Session 2 | Regular | ART-2 | Dr.Cyril Benedict Dr.Jagannatha.G.V | 13 |
| 7 | 12.05.2020 Session 3 | Regular | Combined session with Interns | Dr.Jagannatha.G.V Dr.Nagappan Dr.Nagaland T Dr.Cyril Benedict | 13 |
| 8 | 12.05.2020 Session 1 | Supplementary | Saliva and Oral Health Part I | Dr.Nagaland.T | 1 |

| | | | | | |
|----|-------------------------|---------------|---|--|----|
| 9 | 12.05.2020 Session 2 | Supplementary | Saliva and Oral Health Part II | Dr.Nagaland.T | 1 |
| 10 | 13.05.2020 Session 1 | Supplementary | Endemic diseases and mapping of dental fluorosis in India | Dr.Nagappan.N Dr.Ranjith Kannan | 1 |
| 11 | 13.05.2020 Session 2 | Supplementary | Endemic diseases and mapping of dental fluorosis in India - II | Dr.Nagappan.N | 1 |
| 12 | 13.05.2020 Session 1 | Regular | Nutrition and Oral Health - Sneha | Dr.Jagannatha.G.V | 13 |
| 13 | 13.05.2020 Session 2 | Regular | Seminar on water purification | Dr.Nagaland.T Dr.H.Cyril Benedict | 13 |
| 14 | 14.05.2020 Session 1 | Regular | Pit and fissure sealants | Dr.Nagappan Dr.Ranjith kannan Dr.Cyril Benedict Dr.Nagaland | 13 |
| 15 | 14.05.2020 Session 2 | Regular | Clinical application of PF sealants | Dr.Nagappan Dr.Ranjith Kannan | 13 |
| 16 | 14.05.2020 Session 3 | Regular | Quiz on case-based scenario about indices | Dr.Nagappan | 13 |
| 17 | 14.05.2020 Session 1 | Supplementary | Case- based scenario discussion | Dr.Jagannatha.G.V | 1 |
| 18 | 15.05.2020 Session 1 | Regular | Seminar on caries activity and susceptibility test: by Shruti Priya | Dr.Jagannatha.G.V | 13 |
| 19 | 15.05.2020 Session 2 | Regular | Online courses: the underexplored treasure trove of knowledge | Dr.Jagannatha.G.V Dr.Nagappan Dr.Nagaland T Dr.Cyril Benedict | 13 |
| 20 | 15.05.2020 Session 3 | Regular | Students' health education project discussion | Dr.Jagannatha.G.V | 13 |
| 21 | 15.05.2020 Session 1 | Supplementary | Levels of Prevention – Individual Level | Dr.Nagaland.T Dr.Nagappan | 1 |
| 22 | 15.05.2020 Session 2 | Supplementary | Online courses: the underexplored treasure trove of knowledge | Dr.Jagannatha.G.V Dr.Nagappan Dr.Nagaland T Dr.Cyril Benedict | 1 |
| 23 | 15.05.2020 Session 3 | Supplementary | Levels of Prevention – Community Level | Dr.Nagaland T Dr.Cyril Benedict | 1 |

| | | | | | |
|----|-------------------------|---------------|--|--|----|
| 24 | 16.05.2020 Session 1 | Regular | Seminar on PRR by Shivani and Discussion on PRR | Dr.Cyril Benedict | 13 |
| 25 | 16.05.2020 Session 2 | Regular | Discussion on Case history Viva questions | Dr.Cyril Benedict | 13 |
| 26 | 16.05.2020 Session 3 | Regular | Interns seminar presentation on topic advancements in treatment of autoimmune disorders | Dr.Cyril Benedict Dr.Jagannatha.G.V Dr.Nagappan Dr.Nagaland T | 13 |
| 27 | 16.05.2020 Session 1 | Supplementary | Dietary assessment and its significance | Dr.Nagappan Dr.Nagaland.T | 1 |
| 28 | 17.05.2020 | Regular | Health Education Project discussion | Dr.Jagannatha.G.V | 13 |

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION SESSION -11/05/2020

MORNING SESSION 9 TO 10 AM

Staff present:-

1. Dr. Jagannatha (In charge faculty)
2. Dr. Nagappan
3. Dr. Nagaland.T
4. Dr. Cyril Benedict H
5. Dr. Dilshad Banu

No of students posted in PHD: 22

No of students participated in discussion: 20

Department interns:-

Total No of students: 6

No of students present: 5

1. Akansha Tini. P
2. Keerthana S
3. Nandhini.R
4. Ilavarasi.K
5. Monisha D

Absentee

1. Clement solomon

E block interns:-

Total No of students: 3

No of students present: 3

1. Praveen R
2. Shanmugapriyan.P
3. Rebecca Joseph

Super speciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S
4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch:-

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|---|---|-----------------------------|
| 1 | 11.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty | Oral hygiene instructions in patients undergoing orthodontic and prosthodontic treatments. | Dr Jagannatha Dr Nagappan Dr Nagaland T Dr Cyril Benedict Dr Dilshad Banu | 20 |

Summary:-

- Today discussion topic was on oral hygiene care in patients undergoing orthodontic and prosthodontic treatments by Akansha and Shahana Fathima.

Akansha's seminar included the following:

- Introduction to orthodontic and prosthodontic post-operative oral problems.
- Patient's psychological types
- Oral manifestations of vitamin deficiency
- DIY orthodontics appliances
- Oral health education

- Magenta coloured tongue in B2 deficiency



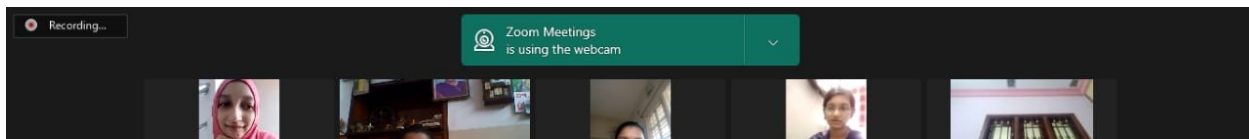
Photo showing bilateral
Angular Cheilitis

Nutritional deficiencies

ORAL MANIFESTATIONS OF

1. VITAMIN B2 DEFICIENCY
2. NIACIN DEFICIENCY
3. IRON DEFICIENCY
4. FOLIC ACID DEFICIENCY
5. VITAMIN B12 DEFICIENCY

- Risk factors after orthodontic treatment
- Psychological preparation of the patient
- Oral hygiene aids
- Methods of cleaning orthodontic appliances
- Oral hygiene in children and physically challenged



Introduction



- Good dental hygiene is essential for the overall health of the teeth. But while undergoing orthodontic treatment, it is even more vital.
- The most important aspect of orthodontic care is to have an extremely high standard of oral hygiene before and during orthodontic treatment.
- It is important to assess the risks of treatment as well as the potential gain & balance these aspects of treatment before deciding to treat a malocclusion.



Risk Factors for poor oral hygiene



Dental caries



Gingivitis

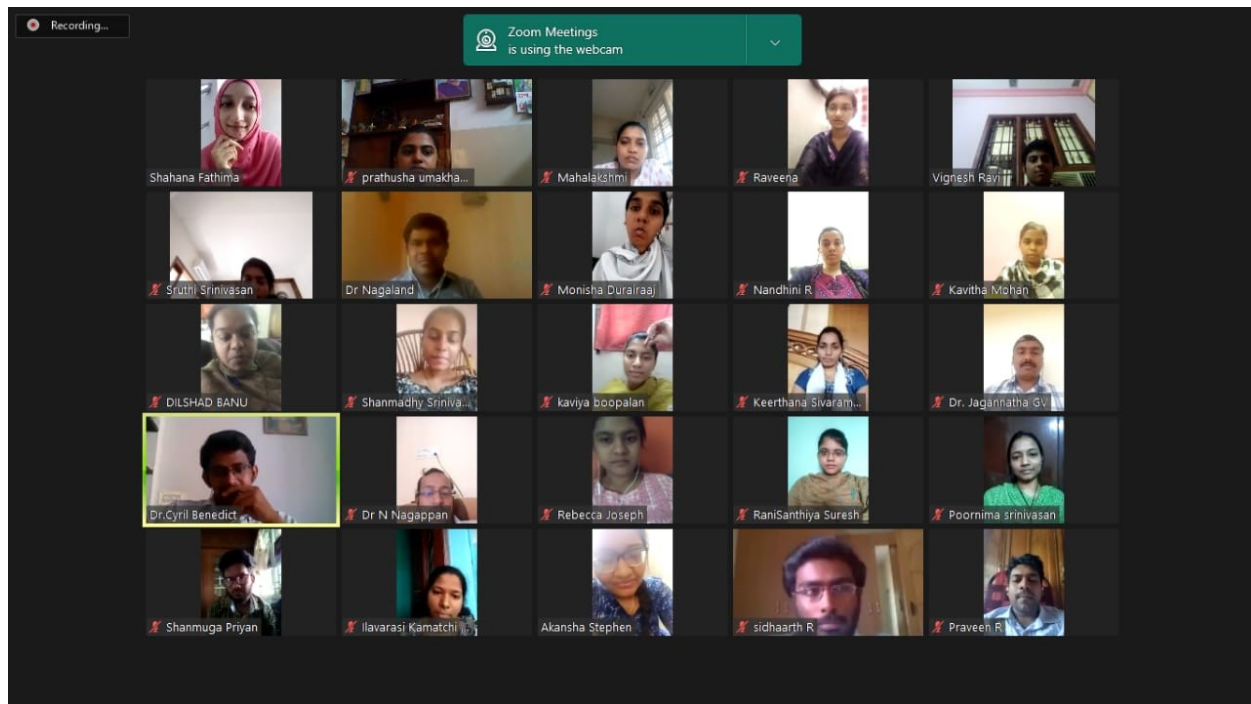


Periodontitis



White Spots





Participants (25)

Find a participant

Zoom Meetings is using the webcam

| | | | |
|----|----------------------|--|--|
| KM | Kavitha Mohan | | |
| KB | kaviya boopalan | | |
| | Keerthana Sivaraman | | |
| M | Mahalakshmi | | |
| MD | Monisha Durairaj | | |
| | Nandhini R | | |
| PS | Poornima srinivasan | | |
| | Praveen R | | |
| S | RaniSanthiya Suresh | | |
| R | Raveena | | |
| RJ | Rebecca Joseph | | |
| S | Shanmadhy Srinivasan | | |
| | Shanmuga Priyan | | |
| P | sidhaarth R | | |
| | Sruthi Srinivasan | | |

Invite Mute All Unmute All

Participants (25)

Find a participant

Zoom Meetings is using the webcam

| | | | |
|----|--------------------------------|--|--|
| PU | prathusha umakhanth (Host, me) | | |
| | Akansha Stephen | | |
| DN | Dr Nagaland | | |
| | Dr.Cyril Benedict | | |
| SF | Shahana Fathima | | |
| VR | Vignesh Ravi | | |
| | DILSHAD BANU | | |
| DN | Dr N Nagappan | | |
| DJ | Dr. Jagannatha GV | | |
| IK | Ilavarasi Kamatchi nathan | | |
| KM | Kavitha Mohan | | |
| KB | kaviya boopalan | | |
| | Keerthana Sivaraman | | |
| M | Mahalakshmi | | |
| MD | Monisha Durairaj | | |

Invite Mute All Unmute All

CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

Date: 11/05/2020 (Mid-morning session)

Time of the session: 11.30am to 12.00 pm

Faculty attended:-

- Dr. Nagaland T(Faculty In charge)
- Dr. Cyril Benedict
- Dr. Dilshad Banu

Department Interns:-

Total no of students: 6

No of students present: 5

1. Akansha Tini P
2. Ilavarasi K
3. Keerthana S
4. Nandhini R
5. Monisha D

No. of absentees: 1(Clement Solomon B)

E block Interns:-

Total no of students: 4

No of students present: 4

1. Praveen R
2. Shanmuga priyan
3. Rebecca Sussanah Elizabeth

Super speciality Interns

Total no of students: 6

No of students present: 6

1. Ranisanthiya
2. Mahalakshmi
3. Poornima
4. Shahana fathima
5. Kavitha M
6. Kavya B

Poonjeri Interns

Total no of students: 7

No of students present: 6

1. Vignesh
2. Prathusha
3. Siddharth
4. Raveena
5. Sruthi
6. Shanmadhy

No of students absent: 1

1. Methaf Mohideen S

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|--|---|-----------------------------|
| 1. | 11.05.2020 | Interns of department, Poonjeri, E-block, Super-specialty | Discussion on oral hygiene in patients with orthodontic or prosthodontic appliances. | Dr. Nagaland T Dr Cyril Benedict Dr. Dilshad Banu | 20 |

Summary of the meeting:

The topic for discussion was “Oral hygiene in patients with orthodontic or prosthodontic appliances.”.

Discussion was done by Vignesh on oral hygiene instructions in prosthodontic patients.

Following points were discussed

- Problems faced by the patients wearing prosthodontic appliances.
- Instructions to be followed by them.

Physical and chemical agents to maintain the appliance.


• Reducing Solutions: e.g. Sodium hypochlorite (e.g. 0.5% Sodium Hypochlorite solution).

Mode of action:

Action of sodium hypochlorite is by directly acting on organic matrix of plaque causing dissolution of polymer structure. They also solubilize mucin and other organic substance. This solution is an alkaline hypochlorite which eliminates denture plaque effectively even after shortterm exposure because of the presence of undissociated hypochlorous acid (HOCl).

Duration: 10 minutes

Effects: color change, surface roughness, denture strength, metal corrosion, denture relining affects

Denture brush

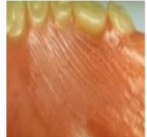
Two Size brush head double care

Large brush head cleaning denture surface / bristles surface head particles



Non-slip handle

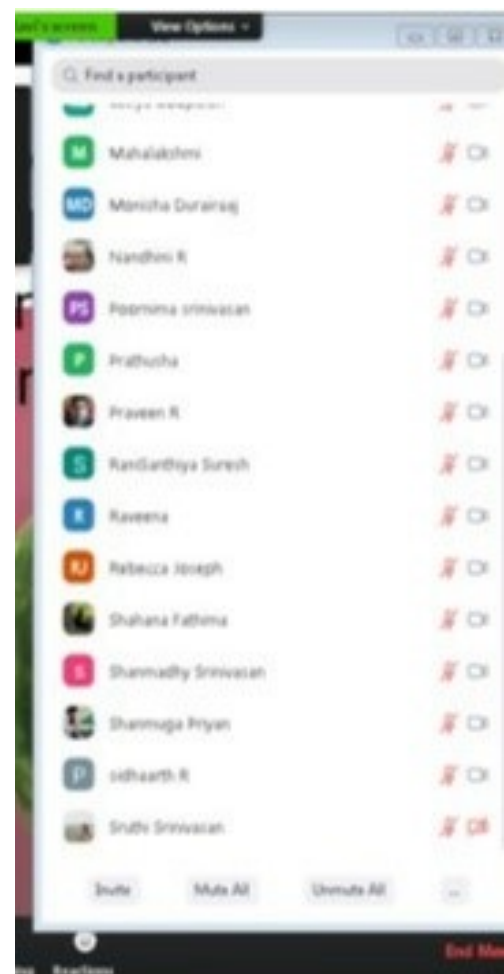
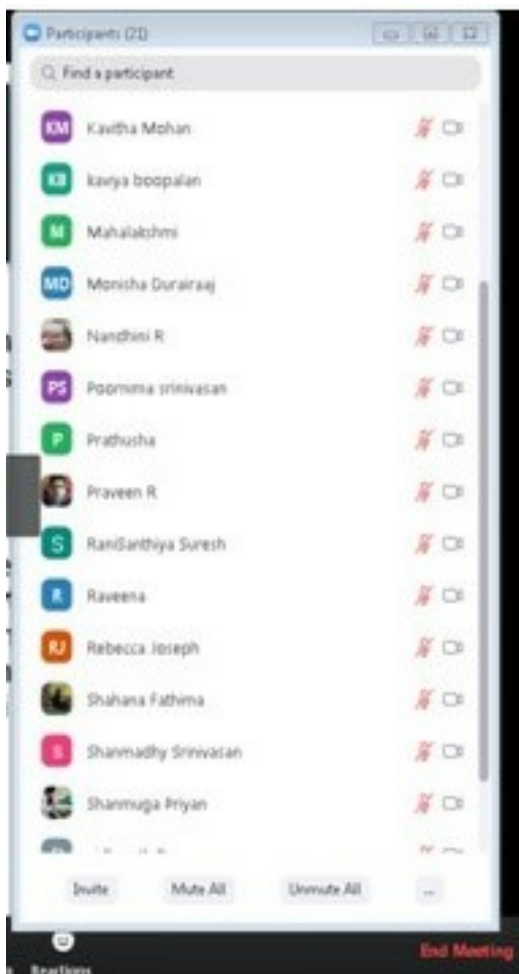
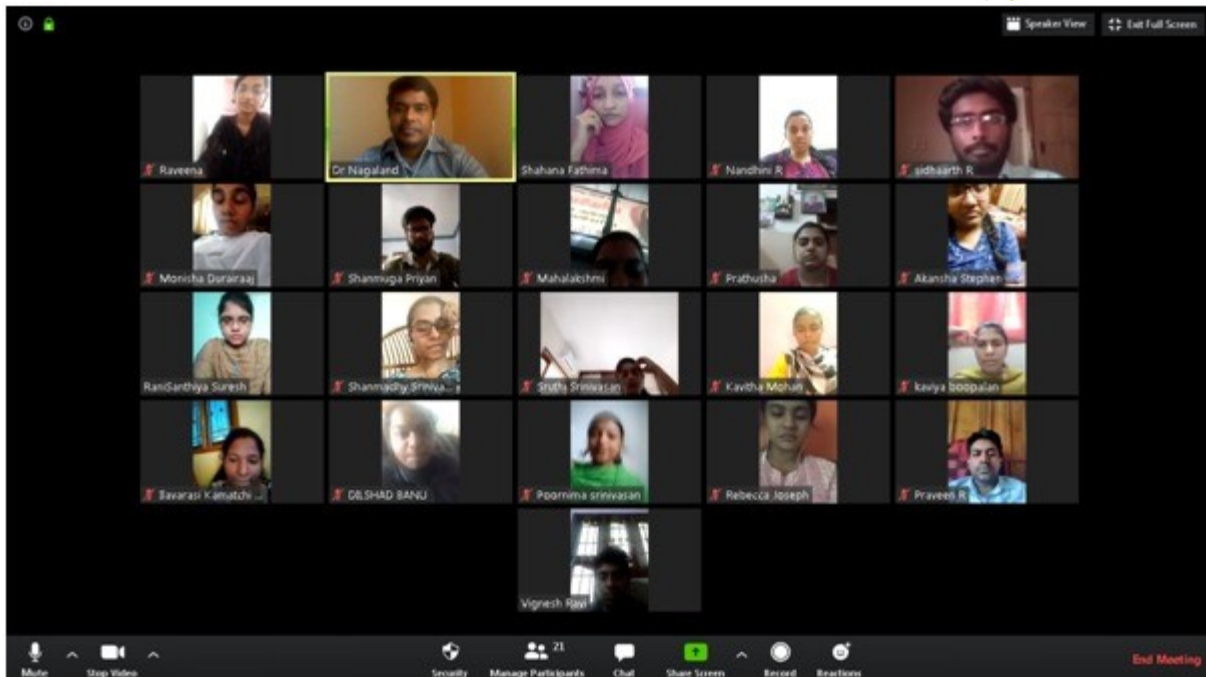
The small head head removes the bristles from the denture base / inside corner of the denture



Types of denture toothbrushes : manual and electric.

How To Brush Dentures?

- Rinse the dentures with cool water to loosen any debris. **Don't ever brush a dry denture** or use a dry brush – this could scratch the surface.
- If you want to remove any denture adhesive before or during brushing is done. Using a denture toothbrush, **gently scrub** every single surface of the appliance. Being thorough is more important than pressure.
- When you're done brushing, **rinse the denture** it with cool water.
- If you're not going to put the dentures back into your mouth right away, you should be soaked in water or a denture solution so they **don't dry out**.



CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION
DATE: 11TH APRIL 2020 (Evening session)
TIMING OF SESSION FROM 2:300 PM-3:30 PM

Staff present: -

1. Dr. Jagannatha GV (Faculty in charge)
2. Dr. Nagaland
- 3 Dr. Nagappan
4. Dr. Dilshad Banu
5. Dr. Cyril Benedict H

No of students posted in PHD: 22

No of students participated in discussion: 20

Department interns: -

Total No of students: 6

No of students present: 5

1. Akansha Tini. P
2. Keerthana S
3. Nandhini.R
4. Ilavarasi.K
5. Monisha D

Absentee: Clement Solomon

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Superspeciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S
4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch
Total No of students: 7
No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

| S.NO | DATE | BATCH | TOPIC | FACULTY | NO OF STUDENTS PARTICIPATED |
|------|------------|---|---|---|-----------------------------|
| 1 | 11-05-2020 | PHD department, Super Speciality, Poonjeri, E - block | Oral hygiene in patients with orthodontics and prosthodontic appliance. | DR. Jagannatha GV DR. Nagaland DR. Nagappan DR. Cyril benedict DR. Dilshed banu | 20 |

SUMMARY OF MEETING.

In this session, ORAL HYGIENE IN PATIENTS WITH ORTHODONTIC AND PROSTHODONTIC APPLIANCE is discussed by Vignesh And Shahana Fatima.

THE POINTS HIGHLIGHTED WERE:

Oral hygiene instructions in prosthodontic patient.

Instruction to be followed

Physical n chemical agents

Chemical agents sodium perborate, chlorhexidine, hydrogen peroxide, vinegar.

Physical - ultrasonic cleansing and UV mechanical brushing

Water jet floss.

Super floss

Shahana fathima's discussion included the following:

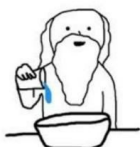
- Risk factors after orthodontic treatment
- Psychological preparation of the patient
- Oral hygiene aids
- Methods of cleaning orthodontic appliances
- Oral hygiene in children and physically challenged

QUESTIONS RAISED:

- What are the problems faced?
- What is color coded tooth brush?
- How far the patients maintain their dentures?

Home-made cleansing reagent

Sodium hypochlorite
(household bleach) -15cc

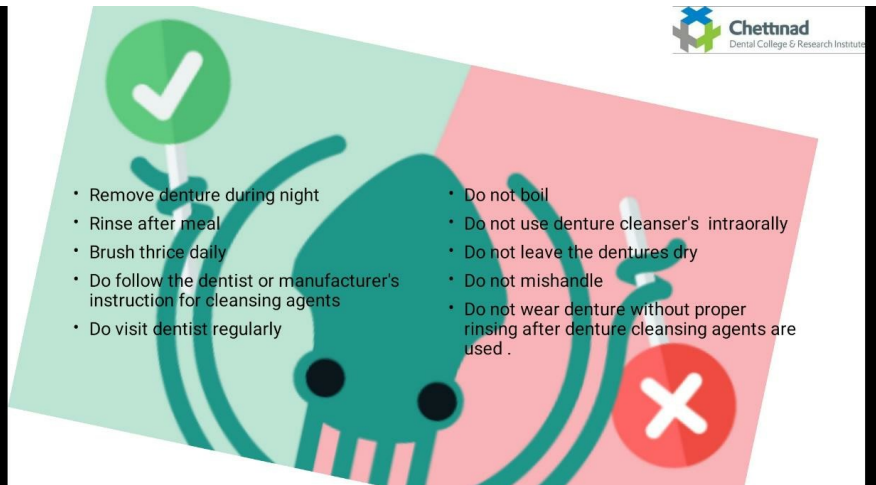


Calgon - 4cc



Water – 115cc





Tooth brush

- Tooth brushing is the first line of defense for most patients
- Either a soft-bristle or a bi-level toothbrush (one with longer bristles on the edges and shorter ones in the middle) can be effective in plaque removal — even with braces. An electric toothbrush can also be used, on a moderate setting.



Oral-B Orthodontic Brush



Sonicare FlexCare (ProResults brush head)

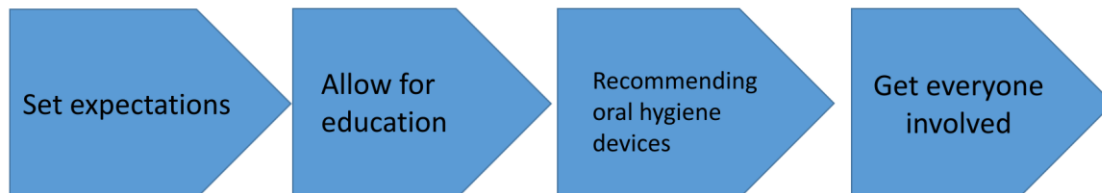


Sonicare FlexCare

MANAGEMENT

Patient Education

Simple Steps To Develop An Effective Hygiene Protocol



Priscila Ariede, Education and motivation in oral health — preventing disease and promoting health in patients undergoing orthodontic treatment, Dental Press J. Orthod. vol.16 no.3, May/June 2011

Participants (26)

Find a participant

| | | |
|----|---------------------------|--|
| BC | Benedict Cyril (Me) | |
| PS | Poomima srinivasan (Host) | |
| DJ | Dr. Jagannatha GV | |
| DN | Dr Nagaland | |
| MD | Monisha durairaj | |
| | Akarsha Stephen | |
| CS | Clement Solomon | |
| | DILSHAD BANU | |
| DN | Dr N Nagappan | |
| IK | Ilavarasi Kamatchi nathan | |
| KM | Kavitha Mohan | |
| KB | kaviya Boopalan | |
| | Keerthana Sivaraman | |
| M | Mahalakshmi | |
| | Nandhini R | |
| P | prathusha | |
| | Praveen R | |

Invite Mute Me

Participants (26)

Find a participant

- IK Ilavarasi Kamatchi nathan
- KM Kavitha Mohan
- KB kaviya Boopalan
- Keerthana Sivaraman
- M Mahalakshmi
- Nandhini R
- P prathusha
- Praveen R
- S Rani Santhiya Suresh
- R Raveena
- R Rebecca Joseph
- Shahana Fathima
- S Shanmadhy Srinivasan
- Shanmuga Priyan
- P sidhaarth R
- Sruthi Srinivasan
- VR Vignesh Ravi

Zoom Meeting

Recording 00:06:37

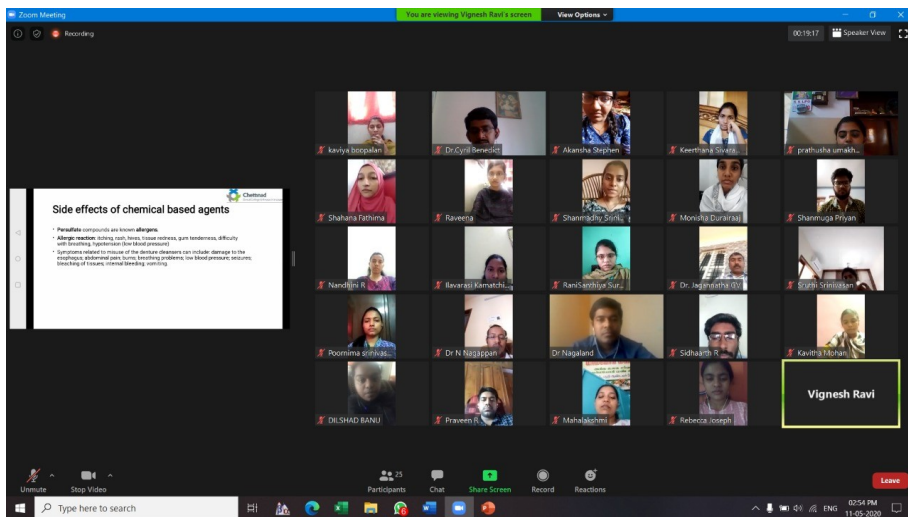
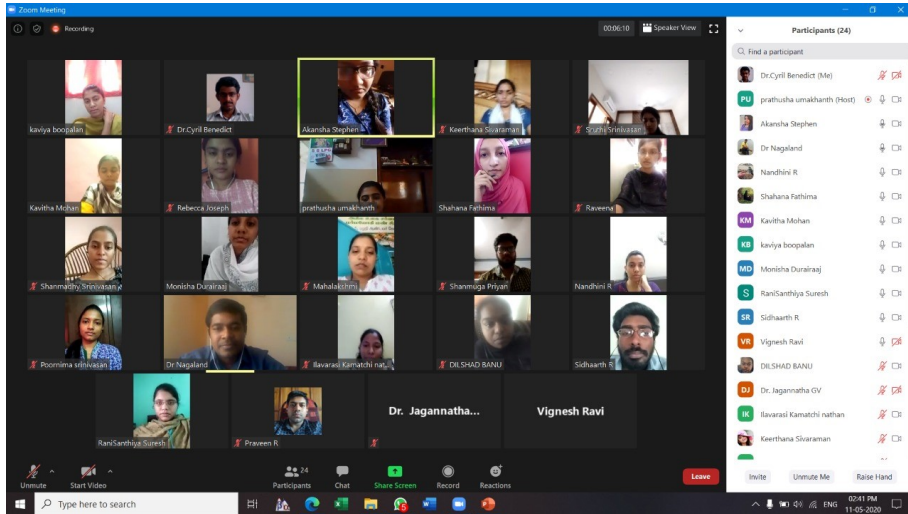
Participants (24)

Find a participant

Grid view showing participants:

- kaviya boopalan
- Dr.Cyril benedict
- Alanksha Stephen
- Keerthana Sivaraman
- Sidhaarth R
- Kavitha Mohan
- Rebecca Joseph
- prathusha umashankar
- Shahana Fathima
- Raveena
- Shanmadhy Srinivasan
- Monisha Durairaj
- Mahalakshmi
- Shanmuga Priyan
- Nandhini R
- Poonima Srinivasan
- Dr Nagaland
- Revarasi Kamatchi nathan
- DILSHAD BANU
- Sidhaarth R
- Rani Santhiya Suresh
- Praveen R
- Dr Jagannath S
- Vignesh Ravi

00:41 PM 11-05-2020



CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

Date: 12/05/2020 (Morning session)

Time of the session: 09.00Am to 10.00 Am

Faculty attended:-

- Dr. Jagannatha(Faculty In charge)
- Dr. Sangeetha
- Dr. Nagappan
- Dr. Nagaland T
- Dr. Cyril benedict
- Dr. Dilshad Banu

Department Interns:-

Total no of students: 6

No of students present: 5

1. Akansha Tini P
2. Ilavarasi K
3. Keerthana S
4. Monisha D
5. Clement Solomon

No of students absent -1

1. Nandhini.R

E block Interns:-

Total no of students: 3

.No of students present: 3

1. Praveen R
2. Shanmuga priyan
3. Rebecca Sussanah Elizabeth

Super speciality Interns

Total no of students: 6

No of students present: 6

1. Ranisanthiya
2. Mahalakshmi
3. Poornima
4. Shahana fathima
5. Kavitha M
6. Kavya B

Poonjeri Interns

Total no of students: 7

No of students present: 6

1. Vignesh
2. Prathusha
3. Siddharth
4. Raveena
5. Sruthi
6. Shanmadhy

No of students absent: 1

1. Methaf Mohideen S

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|---|---|-----------------------------|
| 1. | 12.05.2020 | Interns of department, Poonjeri, E-block, Super-specialty | Discussion on halitosis etiology and pathogenesis | Dr. Jagannatha Dr. Sangeetha Dr. Nagappan Dr. Nagaland Dr. Cyril benedict Dr. Dilshad Banu | 20 |

Summary of the meeting:

The topic for discussion was Halitosis.

Discussion was done by Kavitha on Introduction of halitosis and Prathusha on etiology and pathogenesis of halitosis.

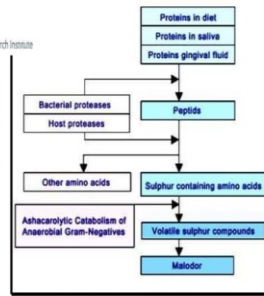
Following points were discussed

- Definition
- Introduction of halitosis
- Synonyms
- History of halitosis
- Epidemiology
- The summary of descriptive epidemiological study concerning to halitosis

Classification of halitosis.

- Introduction
- Classification
 - Etiology of halitosis
 - Intraoral causes
 - Extra oral causes
- Pathogenesis of halitosis
- Role of microorganisms in halitosis
- Case reports

Production and origin of oral malodor



- *Most of these compounds result from the **proteolytic degradation** by oral microorganisms of peptides present in saliva (sulfur-containing or non-sulfur-containing amino acids) shed epithelium, food debris, gingival crevicular fluid (GCF), interdental plaque, postnasal drip, and blood.
- *In particular, gram-negative, anaerobic bacteria possess such proteolytic activity.

Oral related conditions and diseases

- TONGUE COATING
- Malodor can arise from the patients even with good oral hygiene and the source is from the posterior dorsal tongue, as the large, papillary surface area of the dorsum of tongue can retain large amounts of desquamated cells, leukocytes, salivary constituents, and microorganisms and can facilitate putrefaction.
- Though, the microbial content of the tongue is greater, it is not necessarily different for the people with and without periodontitis.



EPIDERMIOLOGY:

In the general population, halitosis has a prevalence ranging from 50% in the USA to between 6% and 23% in china.

A recent study had revealed a prevalence of self-reported halitosis among Indian dental students ranging from 21.7% in males to 35.3% in females.

Zoom Meeting 40-Minutes

00:08:29 Speaker View

Participants (26)

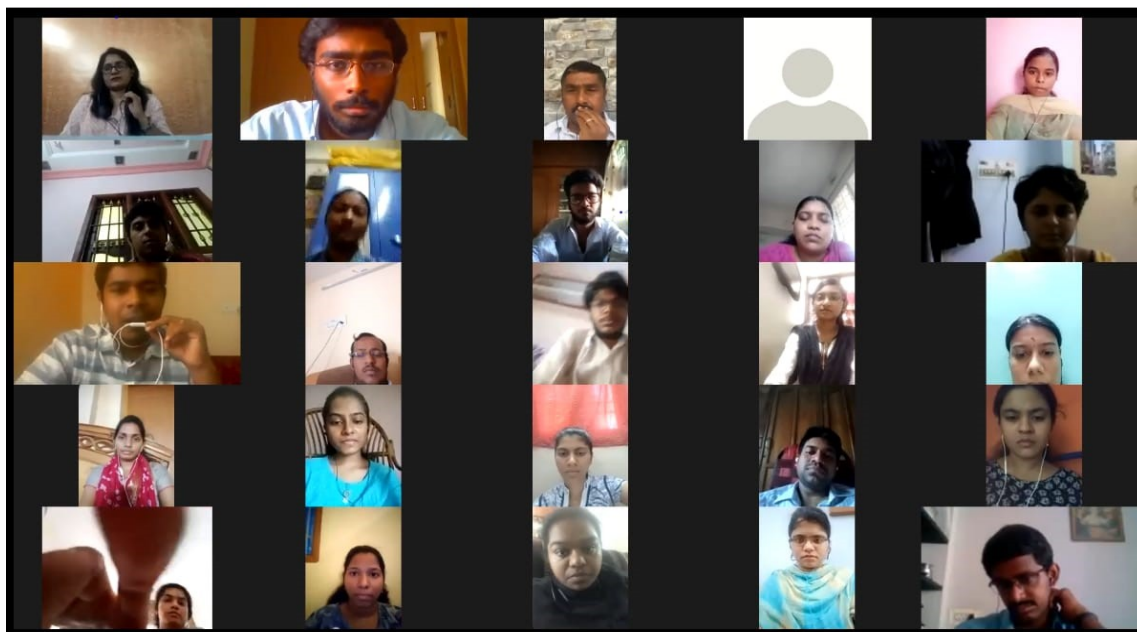
Find a participant

KB kaviya boopalan
Keerthana Sivaraman
M Mahalakshmi
MO Monisha Durairaj
P poornima
PU prathusha umakhant
Praveen R
S RaniSanthiya Suresh
R Raveena
RJ Rebecca Joseph
S Shanmadhy Srinivasan
Shanmuga Priyan
Sruithi Srinivasan
Sujatha Devi
VR Vignesh Ravi
NM Niveditha M

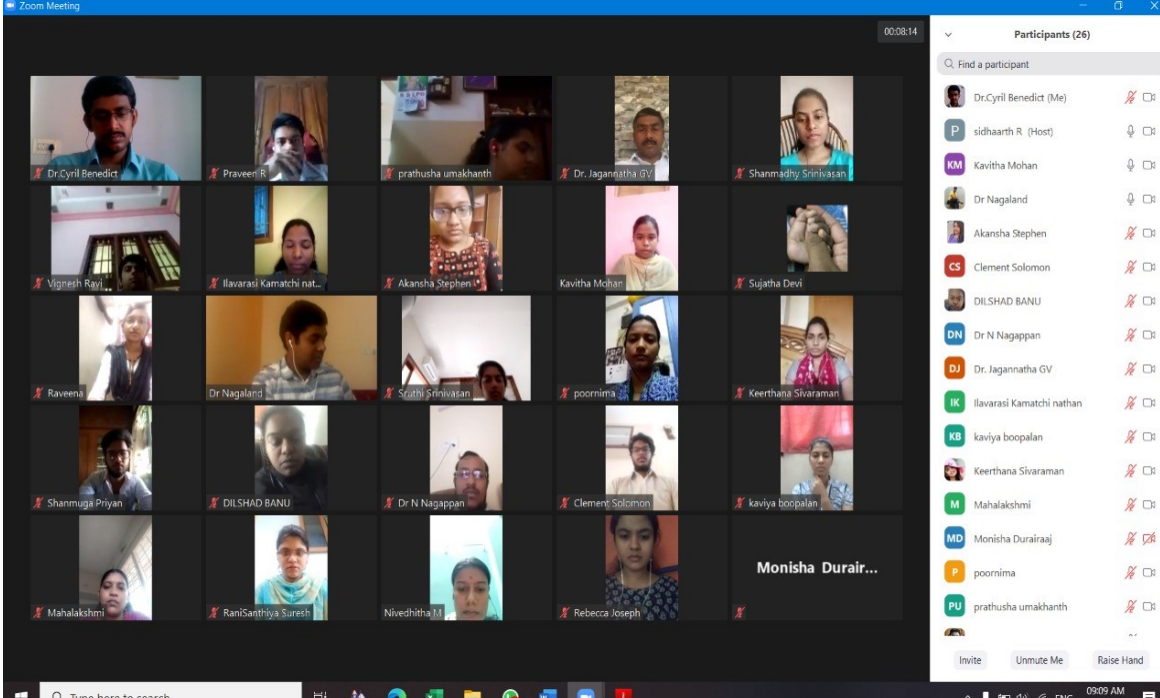
Unmute Stop Video Participants Chat Share Screen Record Reactions Leave

Type here to search

09:09 AM 12-05-2020



Zoom Meeting 00:08:14



Participants (26)

Find a participant

- Dr.Cyril Benedict (Me)
- cidhaanth R. (Host)
- Kavitha Mohan
- Dr Nagaland
- Akansa Stephen
- Clement Solomon
- DILSHAD BANU
- Dr N Nagappan
- Dr. Jagannatha GV
- Ilavarasi Kamatchi nathan
- kaviya boopalan
- Keerthana Sivaraman
- Mahalakshmi
- Monisha Durairaj
- poornima
- prathusha umakhanth

Invite Unmute Me Raise Hand

Type here to search

09:09 AM 12-05-2020

CHETTINAD DENTAL COLLEGE

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION

Date: 12/05/2020 (Mid-morning session)

Time of the session: 11.40am to 12.10 pm

Faculty attended:-

- Dr. Jagannatha (Faculty In charge)
- Dr. Nagappan
- Dr. Dilshad Banu

Department Interns:-

Total no of students: 6

No of students present: 5

1. Akansha Tini P
2. Ilavarasi K
3. Keerthana S
4. Monisha D
5. Clement Solomon B

No of students absent -1

1. Nandhini.R

E block Interns:-

Total no of students: 3

No of students present: 3

1. Praveen R
2. Shanmuga priyan
3. Rebecca Sussanah Elizabeth

Super speciality Interns

Total no of students: 6

No of students present: 6

1. Ranisanthiya
2. Mahalakshmi
3. Poornima
4. Shahana fathima
5. Kavitha M
6. Kavya B

Poonjeri Interns

Total no of students: 7

No of students present: 6

1. Vignesh
2. Prathusha
3. Siddharth
4. Raveena
5. Sruthi
6. Shanmadhy

No.of students absent: 1

1. Methaf Mohideen S

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|--------------------------------------|--|-----------------------------|
| 1. | 12.05.2020 | Interns of department, Poonjeri, E-block, Super-specialty | Discussion on diagnosis of halitosis | Dr. Jagannatha Dr. Nagappan Dr. Dilshad Banu | 20 |

Summary of the meeting:

The topic for discussion was Diagnosis of halitosis

Seminar was presented by Rebecca on diagnosis of halitosis

Following points were discussed

- Halitosis can be diagnosed through medical history and clinical examination
- Proper medical history, diet and dental history should be taken.
- Self-examination of halitosis can be done through sniff test , spoon test, wrist lick test , cupped breath test
- Objective tests are organoleptic test , volatile sulphur compound test , ammonia , Bana test , Ninhydrin test

OBJECTIVE TESTS

- Organoleptic measurement
- Gas chromatography (GC)
- Sulphide monitoring
- Electronic nose
- BANA test
- Tongue coating index
- Dark Field or Phase Contrast Microscopy
- Saliva Incubation Test

14

DIAGNOSIS OF MALODOR

• MEDICAL EXAMINATION

- Frequency (e.g., every month),
- Time of appearance during the day
- Time when the problem first appeared,
- Whether others (nonconfidants) have identified the problem,
- Medications
- Factors such as mouth breathing, dry mouth, allergies, and nasal problems.

• CLINICAL & LABORATORY EXAMINATION

- Self examination
- Subjective tests
- Objective test

11:55

Close Participants (23)

KB

kaviya boopalan

M

Mahalakshmi

MD

Monisha Durairaj

PS

Poornima Srinivasan

P

prathusha

Praveen R

S

Rani Santhiya Suresh

R

Raveena

Shahana Fathima

S

Shanmadhy Srinivasan

Shanmuga Priyan

Sruthi Srinivasan

VR

Vignesh Ravi

Invite

11:54

Close Participants (23)

CS

Clement Solomon(me)

P

sidhaarth R (host)

DN

Dr N Nagappan

RJ

Rebecca Joseph

Akansha Stephen

DILSHAD BANU

DJ

Dr. Jagannatha GV

IK

Ilavarasi Kamatchi nathan

KM

Kavitha Mohan

KB

kaviya boopalan

Keerthana Sivaraman

M

Mahalakshmi



MD



Monisha Durairaj








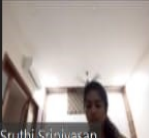












PS


Poornima Srinivasan

Invite











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| | | | | |
|---|--|---|---|--|
|  Rani Santhiya Sur... |  sidhaarth R |  Ilavarasi Kamatch... |  Poornima Sriniva... |  kaviya boopalan |
|  Vignesh Ravi |  Shahana Fathima |  Sruthi Srinivasan |  Akansha Stephen |  Clement Solomon |
|  Raveena |  Mahalakshmi |  Praveen R |  Shanmadhy Srin... |  Keerthana Sivara... |
|  Monisha Durairaj |  Kavitha Mohan |  DILSHAD BANU |  Shanmuga Priyan |  Dr N Nagaappan |


Rebecca Joseph

Dr. Jagannatha...

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 Security  Participants 22  Chat  Share Screen  Record  Reactions

End

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION EVENING SESSION - 12/05/2020

TIME OF THE SESSION: 2:30PM-3:00PM

STAFF PRESENT:-

1. Dr. Jagannatha.GV (Staff in charge)
2. Dr. Nagappan.N
3. Dr. Nagaland.T
4. Dr. Cyril Benedict
5. Dr. Dilshad Banu

POST GRADUATES PRESENT:-

1. Dr.Sujatha Devi
2. Dr.Niveditha.M

No of students posted in PHD: 22

No of students participated in discussion: 20

DEPARTMENT INTERNS:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon.B
4. Ilavarasi.K
5. Monisha.D
6. Nandhini.R

E BLOCK INTERNS:-

Total No of students: 3

No of students present: 3

1. Praveen.R
2. Rebecca Elizabeth Susanna .J
3. Shanmugapriyan.D

SUPERSPECIALITY INTERNS:-

Total No of students: 6

No of students present: 5

1. Kavya.B
2. Mahalakshmi.R
3. Poornima.S
4. Rani Santhiya.S
5. Kavitha

Absentee:

1. Shahana Fathima

POONJERI BATCH

Total No of students: 7

No of students present: 6

1. Prathusha.U
2. Raveena.M
3. Shanmadhy.S
4. Siddharth.R
5. Sruthi.S
6. Vignesh.R

ABSENTEE:

1. Methaf M

FINAL YEARS:

Total no of students: 13

No of students present: 13

1. Rakshanaa J
2. Ramprasath R
3. Ramu
4. Ranjani T S
5. Sai Aditya Narayanan
6. Sanjana D
7. Santra Joseph
8. Sathiya G
9. Shivani
10. Shwetha Ranjith
11. Shinduja
12. Shruthi priya
13. Sneha

FINAL YEAR FEB BATCH:

No of students: 1

No of students present: 1

1. Dhanesh Bala

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|--|---|--|-----------------------------|
| 1 | 12.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, Post graduates, Final years (E BATCH) | TREATMENT OF HALITOSIS by CLEMENT SOLOMON | 1.Dr.Jagannatha.GV 2..Dr.Nagappan.N 3.Dr.Nagaland.T 4.Dr.Cyril Benedict 5.Dr. Dilshad Banu | 36 |

Summary:

- Today's Discussion was on TREATMENT OF HALITOSIS by Clement Solomon B.

The details of it are as follows:

1. INTRODUCTION

2. TREATMENT

*Self-care products like mouth rinses, chewing gums, toothpastes

*Professional treatment by periodontal management, usage of antiseptic mouth rinse, proper oral hygiene instruction.

*Treatment of other intraoral causes

*Treatment of systemic causes

3. CONCLUSION

Questions raised:

1. Who proposed the treatment needs scale for Halitosis?

Zoom Meeting: 6 Minors
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 02:50 PM
12-05-2020

Classification

Treatment Needs

Dental College & Research Institute

| Classification | Treatment Needs |
|-----------------------|---|
| I. Genetic leukin | 1. Obvious malocclusion with extremely high overjet and overbite. |
| A. Physiologic leukin | 1. Malocclusion arises through pathologic process with/without and rarely. Neither specific disease nor pathologic condition that could cause leukin is found. 2. Changes mostly the disjunctive region of the tongue. 3. Temporary leukin due to dietary factors, e.g., garlic, could be excluded. |
| B. Pathologic leukin | |
| (i) Oral | 1. Leukin caused by disease, pathologic condition, malocclusion of oral tissues. 2. Malocclusion derived from tongue control, modified by pathologic condition, e.g., periodontal disease, carcinoma, is included in the subcategory. |
| (ii) Intraoral | 1. Malocclusion originates from nasal, paranasal, or intraoral lymphoid regions. 2. Malocclusion originates from palmarian tract or upper digestive tract. 3. Malocclusion originates from dysfunction anywhere in the body, whereby the color is bloodborne and entered up the large eye, diabetes mellitus, hepatic cirrhosis, anemia, internal bleeding. |
| C. Pseudo-leukin | 1. Obvious malocclusion is not perceived by others, although the patient subjectively complains of its existence. 2. Condition is imposed by overexaggerating, overexaggeration, education and explanation is necessary, usually simple and hygiene measures. |
| II. Malocclusion | 1. After treatment to genetic leukin or pseudo-leukin, the patient persists in believing that leukin has leukin. 2. Psychological or social evidence tends to suggest that leukin is present. |

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12-05-2020

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Table 3 Treatment needs (TN) malodour²²

Chettinad
Dental College & Research Institute

| Category | Description |
|----------|--|
| TN-1 | Explanation of halitosis and instructions for oral hygiene (support and reinforcement of a patient's own self-care for further improvement of their oral hygiene). |
| TN-2 | Oral prophylaxis, professional cleaning and treatment for oral diseases, especially periodontal diseases. |
| TN-3 | Referral to a physician or medical specialist. |
| TN-4 | Explanation of examination data, further professional instruction, education and reassurance. |
| TN-5 | Referral to a clinical psychologist, psychiatrist or other psychological specialist. |

Note: TN-1 is applicable to all cases requiring TN-2 through TN-5

Unmute **Stop Video** **Share Content** **Participants** **More**

Participants (40)

Find a participant

| | | |
|----|----------------------|--|
| ND | Norisha Duraisai | |
| | Nandini R. | |
| ND | Niveditha R. | |
| PS | Poornima srinivasan | |
| + | prathiba | |
| | Praveen R. | |
| P | Poornima srinivasan | |
| | Ram Prasad | |
| R | Ramu Ganesan | |
| S | Rani Santhiya Suresh | |
| RS | Ranjani Srinivasan | |
| R | Raveena | |
| RJ | Rebecca Joseph | |
| | Sai Adithya | |
| S | sangana | |
| | Santra Joseph | |
| SG | Sathya Ganesan | |

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Participants (40)

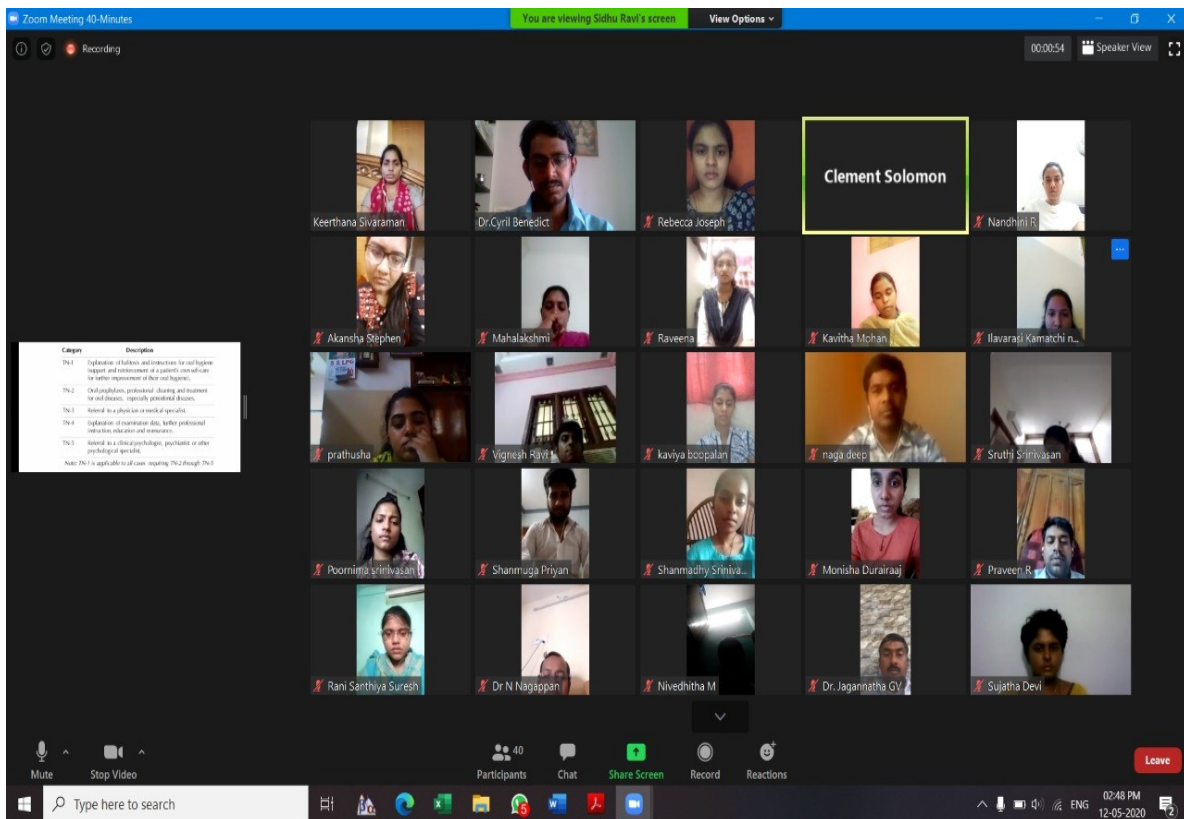
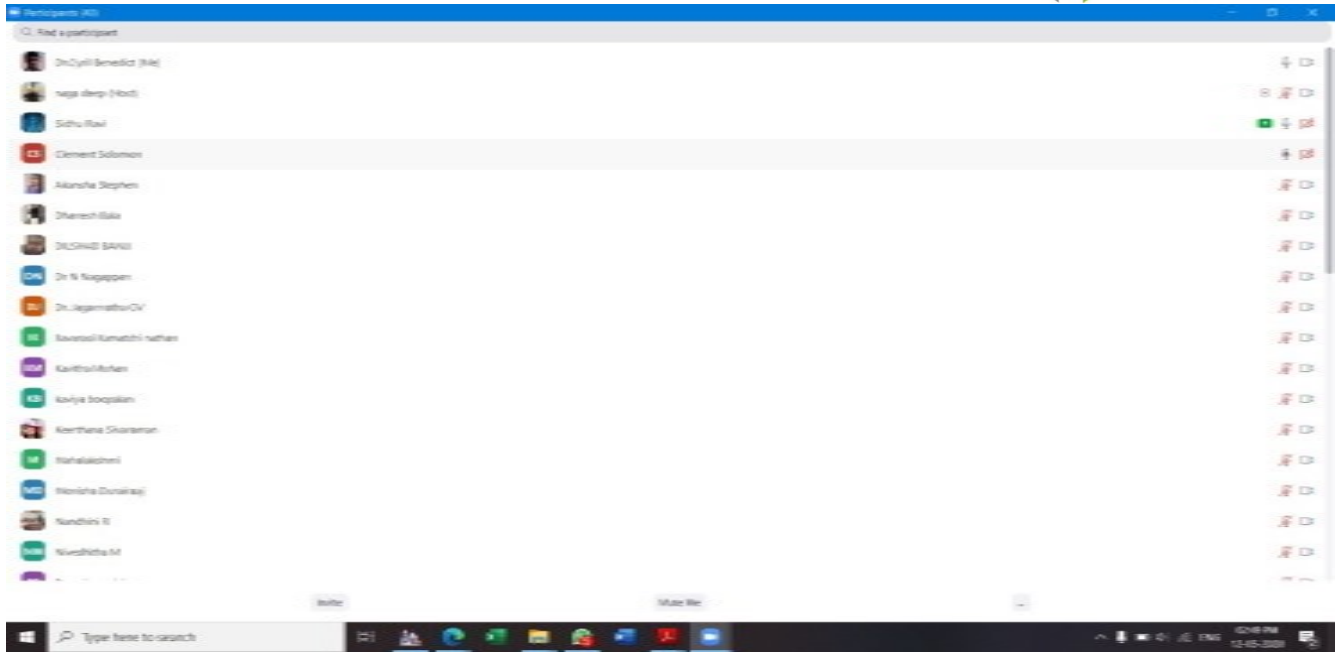
Find a participant

| | | |
|----|--------------------------|--|
| S | Rani Santhiya Suresh | |
| RS | Ranjani Srinivasan | |
| R | Raveena | |
| RJ | Rebecca Joseph | |
| | Sai Adithya | |
| S | sangana | |
| | Santra Joseph | |
| SG | Sathya Ganesan | |
| S | Shanmadhy Srinivasan | |
| | Shanmuga Priyan | |
| SN | Shindhuja N | |
| SS | Shivani Sivaramakrishnan | |
| | shruthi priya | |
| SR | Shweta Ranjith | |
| | Sruthi Srinivasan | |
| | Sujatha Devi | |
| VR | Vignesh Ravi | |

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02:49 PM 12-05-2020



Zoom Meeting 40-Minutes You are viewing Sidhu Ravi's screen View Options

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| Category | Description |
|----------|---|
| TN-1 | Explanation of factors and interventions for oral hygiene support and maintenance of a patient's oral health care for better improvement of their oral hygiene. |
| TN-2 | Oral prophylaxis, professional cleaning and treatment for oral diseases, especially periodontal diseases. |
| TN-3 | Interoral fix appliances in orthodontic appliances. |
| TN-4 | Explanation of occlusal inter, better professional instruction, education and maintenance. |
| TN-5 | Interoral fix appliances, psychiatric or other psychological appliances. |

Note: TN-1 is applicable to all cases requiring TN-2 through TN-5.

Participants: 40

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02:49 PM 12-05-2020

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION MORNING SESSION - 13/05/2020

TIME OF THE SESSION: 9.00 AM TO 10.00 AM

STAFF PRESENT:-

1. Dr. Jagannatha.GV (Faculty in charge)
- 2 Dr Sangeetha
3. Dr. Nagappan.N
4. Dr. Nagaland.T
5. Dr. Cyril Benedict
6. Dr. Ranjith Kannan

POST GRADUATES PRESENT:-

1. Dr.Sujatha Devi

No of students posted in PHD: 22

No of students participated in discussion: 21

DEPARTMENT INTERNS:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon.B
4. Ilavarasi.K
5. Monisha.D
6. Nandhini.R

E BLOCK INTERNS:-

Total No of students: 3

No of students present: 3

1. Praveen.R
2. Rebecca Elizabeth Susanna .J
3. Shanmugapriyan.D

SUPERSPECIALITY INTERNS:-

Total No of students: 6

No of students present: 6

1. Kavya.B
2. Mahalakshmi.R
3. Poornima.S
4. Rani Santhiya.S
5. Kavitha
6. Shahana Fathima S

Absentee: nil

POONJERI BATCH

Total No of students: 7

No of students present: 6

1. Prathusha.U
2. Raveena.M
3. Shanmadhy.S
4. Siddharth.R
5. Sruthi.S
6. Vignesh.R

Absentee:

1. Methaf Mohaideen

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|---|---|-----------------------------|
| 1 | 13.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, Post graduates | <ol style="list-style-type: none"> 1. Recent advances in caries detection 2. Caries detection methods | 1.Dr.Jagannatha.GV (Staff in charge) 2. Dr Sangeetha 3..Dr.Nagappan.N 4.Dr.Nagaland.T 5.Dr.Cyril Benedict 6.Dr. Ranjith Kannan | 22 |

Summary:

Today's Discussion was on recent advances in caries prevention by Kavya B, CRI and Caries detection methods by Ilavarasi K, CRI

The details of it are as follows:

Recent advances in caries detection

- Introduction
- Need and Goals for prevention
- Levels of prevention of dental caries
- Various preventive measures
- Fluorides
- Atraumatic Restorative Treatment
- Caries vaccine
- Ozone prevention
- Replacement treatment
- Lasers
- Antimicrobial agents
- Xylitol study
- Conclusion

Questions raised:

1. How plant extract play a role in caries prevention and the caries active ingredients in it, if tea has anti cariogenic properties, then why people who consumes tea have caries
2. Can ozone treatment helps to prevent all kinds of caries
3. How Slow fluoride releasing device is used

Caries detection methods

- 1.Introduction
- 2.Definition of diagnosis
- 3.Purpose of diagnosis
- 4.Ideal diagnostic aid
- 5.Diagnostic methods
- 6.Preliminary preperation
- 7.Conclusion

Questions raised :

1. Criterias which favors the diagnosis
 - Sensitivity , Specificity, True positive, True negative criterias
 - Reliability and Reproducibility
2. Diagnosis aids in clinical clinical setups

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SYNOPSIS

- Introduction
- Definition of diagnosis
- Purpose of diagnosis
- Initial diagnostic aid
- Diagnostic methods
- Preliminary preparation
- Results
- Conclusion
- References

ESSENTIAL OILS

- Essential oils have also been extensively studied for anti-microbial activity against various related bacteria. Essential oil derived from plants are typically a complex mixture of approximately 40-60 compounds but are in solution in various concentrations.
- They composed of terpenoids, aromatic and aliphatic compounds.
- Thymol and eugenol inhibit the growth of a wide range of oral microorganisms including various streptococci.
- Tea tree oil has the ability to kill off bacteria and diminish tooth decay.
- Cinnamon and peppermint oil has greater anti-microbial properties.

PLANT EXTRACTS

- There is a global need for alternative prevention and treatment options and products for oral diseases that are safe, effective and economical. One such strategy would be to verify the efficacious use of medicinal plants.

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| SOUND | OPACITY | OPACITY | LOCALIZED ENAMEL BREAKDOWN | UNDERLYING DASH SHADOW | DISTINCT CAVITY | EXTENSIVE DISTINCT CAVITY |
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| FLAT | FLAT | FLAT | FLAT | FLAT | FLAT | FLAT |
| CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING |
| CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING |
| CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING | CHANGING |

WHITE SPOT LESION (WSL) DETECTION

- Earliest sign of enamel lesions.
- Disappears partially or totally on wetting.
- White spot that differs from the adjacent translucent enamel.
- Smooth surface incipient lesion - opaque when dried.
- Nonhereditary enamel hypocalcification: childhood fever, trauma, fluorosis-visible even if the tooth is wet or dry.
- Undetectable by tactile sensation since the surface is intact, smooth and hard.

1. No clinical WSL

2. Minor WSL

3. Severe WSL

4. WSL with cavitation

CONCLUSION

PREVENTION IS BETTER THAN CURE!

- So, it is imperative that we, as dentists should focus on treating not only those who are ill but also treat those who are more likely to get ill.
- We have a variety of new agents which can be used to prevent dental caries but application of these agents in clinical trials is still limited.
- Moreover dental caries are multi-factorial and all preventive measures should be evaluated properly in human trials so that they can be introduced at the community level for the prevention of dental caries.

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kaviya boopalan's screen

| Close | Participants (27) | Close | Participants (27) | Close | Participants (27) |
|--------------------------------|-------------------|------------------------|-------------------|------------------------|-------------------|
| Search | | KM Kavitha Mohan | | Nandhini R | |
| S Rani Santhiya Suresh (me) | | Keerthana Sivaraman | | PS Poornima srinivasan | |
| PU prathusha umakhan... (host) | | M Mahalakshmi | | Praveen R | |
| CS Clement Solomon | | MD Monisha durairaj | | R Raveena | |
| KB kaviya boopalan | | Nandhini R | | RJ Rebecca Joseph | |
| Akasha Stephen | | PS Poornima srinivasan | | Shahana Fathima | |
| DN Dr N Nagappan | | Praveen R | | S Shanmadhy Srinivasan | |
| Dr Nagaland | | R Raveena | | Shanmuga Priyan | |
| DS Dr Sangeeta T | | RJ Rebecca Joseph | | P sidhaarth R | |
| DJ Dr. Jagannatha GV | | Shahana Fathima | | Sruthi Srinivasan | |
| Dr.Cyril Benedict | | S Shanmadhy Srinivasan | | Sujatha Devi | |
| IK Ilavarasi Kamatchi nathan | | Shanmuga Priyan | | VR Vignesh Ravi | |
| Chats | Invite | Chats | Invite | Chats | Invite |

Zoom Meeting 40-Minutes

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Speaker View

Chettinad
Dental College & Research Institute

- The gingival crevicular mechanism involves all the humoral and cellular components of the systemic immune system, which may exert its function at the tooth surface.
- The organism is phagocytosed and undergoes antigenic processing by macrophages in the lymphoid tissue, T and B lymphocytes are sensitized by the macrophages preventing the antigen HLA class-II complex and releasing IL-1.

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9:14 AM 13-May-20

Zoom Meeting

Recording...

Zoom Meetings is using the webcam

kaviya boopalan

Dr. Jagannatha...

prathusha umak...

Monisha durairaj

Clement Solomon

Ranjith Kannan

Vignesh Ravi

Sujatha Devi

Poornima sri...

Dr N Nagappan

Sruthi Srinivasan

Kavitha Mohan

Nandhini R

Dr Sangeeta T

Shanmuga Priyan

Raveena

Mahalakshmi

sidhaarth R

Keerthana Sivara...

Shahana Fathima

Rebecca Joseph

Shanmadhy Srin...

Rani Santhiya Su...

Akansha Stephen

Ilavarasi Kamat...

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9:26 AM 13-May-20

Zoom Meeting

Recording...

Zoom Meetings is using the webcam

Dr. Jagannatha...

Clement Solomon, Ranjith Kannan, Vignesh Ravi, Sujatha Devi, Poornima Sriniva..., Dr. N. Nagappan, Sruthi Srinivasan, Kavitha Mohan, Nandhini R., Dr. Sangeeta T., Shanmuga Priya..., Raveena, Mahalakshmi, sidhaarth R., Keerthana Sivara..., Shahana Fathima, Rebecca Joseph, Shanmadhy Srin..., Rani Santhiya Su..., Akansha Stephen, Praveen R., Ilavarasi Kamat..., naga deep..., Dr. Cyril Benedict

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9:26 AM 13-May-20

Zoom Meeting

Recording...

Zoom Meetings is using the webcam

MECHANISM OF ACTION

- Saliva contains secretory IgA and gingival sulcus has cellular components of the immune system such as lymphocytes, macrophage and neutrophils.
- Salivary immunoglobulin May act as a specific agglutination interacting with the bacterial surface receptors and inhibiting colonization and subsequent caries formation.
- Secretory IgA antibodies are produced by direct immunisation of the gut associated lymphoid tissue (GALT) from where sensitive B-cells May be home to the salivary glands.

Chettinad Dental College & Research Institute

kaviya boopalan

prathusha u..., Clement Solomon, Dr. Jagannat..., Monisha durai..., Ilavarasi Kam..., Vignesh Ravi, Sujatha Devi, Akansha Ste..., Poornima sri..., Shanmadhy ..., Dr. N. Nagap..., Sruthi Sriniva..., Kavitha Moh..., Nandhini R., Dr. Sangeeta T., Shanmuga Ph..., Raveena, Mahalakshmi, sidhaarth R.

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9:14 AM 13-May-20

DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION EVENING SESSION - 13/05/2020
TIME OF THE SESSION: 2:30PM-4:05PM

Staff present:-

1. Dr. Jagannatha GV (Faculty in charge)
2. Dr. Nagappan

1st year PG students:

1. Dr. Sujatha Devi

No of students posted in PHD: 22

No of students participated in discussion: 21

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Ilavarasi.K
5. Monisha D
6. Nandhini R

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Super speciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Rani Santhiya S
3. Mahalakshmi V
4. Kavya B
5. Kavitha
6. Shahana Fathima

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

Final years:

Number of students: 13

Students present: 13

1. Rakshanaa J
2. Ramprasath R
3. Ramu
4. Ranjani T S
5. Sai Aditya Narayanan
6. Sanjana D
7. Santra Joseph
8. Sathiya G
9. Shivani
10. Shwetha Ranjith
11. Shinduja
12. Shruthi priya
13. Sneha

Feb batch Final year:

No of students: 1

No of students present: 1

1. Dhanesh Bala

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|--|--|-----------------------------|
| 1 | 13.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, Post graduates, Final years(E BATCH) | Recent advances in pit and fissure sealants by Raveena and ideal diagnostic aids for caries by ilavarasi | 1.Dr.Jagannatha. G V 2..Dr.Nagappan.N | 36 |

Summary:

- Today's Discussion was on Topic recent advances in pit and fissure sealants by Raveena and continuation of morning session by Ilavarasi on the topic ideal diagnostic aids in detection of caries.

Electronic caries monitor, Ultrasonic detector

Endoscopes/videoscopes, Micro air abrasion

Multiphoton imaging, Laser influence fluorescence

RECENT ADVANCES IN PIT AND FISSURE SEALENTS

What are pit and fissure sealants?

Types of pit and fissures

Requisites of a sealant and AAPD guidelines

Classification of sealants

Case selection and clinical procedure

Types of recent advances in pit and fissure sealants in detail with various studies

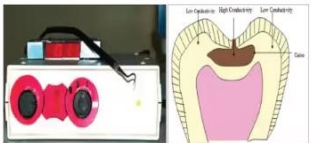
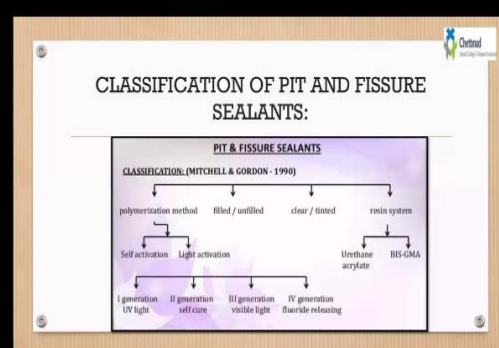
Questions raised:

1. What is the half-life of sealants?
2. Why dentin bonding agent is not applied in pit and fissure sealant treatment?
3. Difference between sensitivity and specificity
4. What is validity?

PRESENTATION ON RECENT ADVANCES IN PIT AND FISSURE SEALENTS AND DIAGNOSTIC AIDS IN CARIES DETECTION

ELECTRONIC CARIES MONITOR(ECM)

- In an **in vivo** study carried out by Ashley, it was concluded that in detection of non-cavitated occlusal lesions of posterior teeth, **electrical conductivity measurements** were **superior** to visual examination, FOTI, conventional and digital bitewing radiographs.
- Based on the electrical **conductivity differences** between sound and carious dental tissues.
- Enamel demineralization results to increased **porosity** of the enamel tissue and saliva fills the pores and forms conductive pathways for electrical transmission.
- Since saliva is a better electrical conductor than enamel tissue, the **conductivity increases** with **demineralization**.

3:13

Close

Participants (36)

Search

PS

Poornima srinivasan (me)

PU

prathusha umakhan... (host)

KB

kaviya boopalan

R

Raveena

Akansha Stephen

CS

Clement Solomon

Dhanesh Bala

DN

Dr N Nagappan

DJ

Dr. Jagannatha GV

IK

Ilavarasi Kamatchi nathan

Invite

3:13

Close

Participants (36)

Sai Aditiya

S

sanjana

Santra Joseph

SG

Sathiya Ganesan

S

Shanmadhy Srinivasan

Shanmuga Priyan

SN

Shindhuja N

SS

Shivani Sivaramakrishnan

shruthi priya

SR

Shweta Ranjith

sidhaarth R

Invite

3:13

Close

Participants (36)

IK

Ilavarasi Kamatchi nathan

KM

Kavitha Mohan

Keerthana Sivaraman

M

Mahalakshmi

Nandhini R

Praveen R

R

Rakshanaa Jeevan

Ram Prasath

R

Ramu Ganesan

S

Rani Santhiya Suresh

RS

Ranjani Srinivasan

Invite

3:13

Close

Participants (36)

Shanmadhy Srinivasan

Shanmuga Priyan

SN

Shindhuja N

SS

Shivani Sivaramakrishnan

shruthi priya

SR

Shweta Ranjith

P

sidhaarth R

Sneha D

Sruthi Srinivasan

Sujatha Devi

VR

Vignesh Ravi

Invite



CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

DATE: 14TH MAY 2020 (Morning session)

TIMING OF SESSION FROM 9:00 AM-10.00 AM

Staff present:-

1. Dr. Jagannatha (Faculty in charge)
2. Dr. Nagappan
3. Dr. Nagaland T
4. Dr. Cyril Benedict H
5. Dr. Dilshad Banu
6. Dr. Sangeetha

No of students posted in PHD: 22

No of students participated in discussion: 21

DEPARTMENT PGs:

1. Sujatha Devi
2. Niveditha.M

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Nandhini.R
5. Ilavarasi.K
6. Monisha D

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Super speciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S

4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|-------------|-------------|---|-----------------------|--|------------------------------------|
| 1 | 14.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty | RAMPANT CARIES | 1) Dr. Jagannatha GV 2) Dr. Nagaland T 3) Dr. Nagappan 4) Dr. Cyril Benedict H 5) Dr. Dilshad Banu | 23 |

Summary:-

Today's discussion was on Rampant Caries presented by Mahalakshmi and Keerthana CRI

The Points highlighted were:

- * Definition of rampant caries: Rapidly spreading, burrowing type of caries with early involvement of pulp .A lesion can be termed rampant caries when there is involvement of 10 new lesions per year
- * Etiology: which includes prolonged feeding time, prolonged use of drugs, radiation induced, pathological conditions (Sjogrens syndrome/ tumors), salivary factors etc.
- *there is increase in the number of streptococcus mutans, Scardovia wiggsiae, Velionella parvula.
- *Prevalence globally (32%) and in India, the prevalence rate is 46.9% (Andhra Pradesh with highest prevalence and Sikkim with lowest prevalence)
- *The presenter also highlighted few case reports.
- *The second presentation by Keerthana highlighted on the epidemiology and pathophysiology of rampant caries
- *Dental caries is still a major problem affecting 60-90% of school children
- *Epidemiological triad of dental caries given by keyes: which includes host, agent and environment and its modification given by Newburn where he included the 4th factor: Time
- *included caries susceptibility of individual tooth: where upper and lower first molars are 95% susceptible while Lower central and lateral incisors and canines have a susceptibility of 3%
- *Stephan's curve
- *Pathophysiology which included Millers acidogenic theory and Radiation induced xerostomia

Zoom Meeting You are viewing Poomima srinivasan's screen View Options

Recording 00:02:59

CLINICAL FEATURES

PREVALANCE: Globally 32% (Robert A Bagramian, Franklin Garcia; The global increase in dental caries J dent Res 2007 38:173-181 Britain)

- In India, a total of 19 studies were conducted and analysis revealed prevalence of about 46.9%
- In India- Andhra pradesh was found to have the highest prevalence (63%), while the lowest prevalence was found to be in Sikkim (41.9%)
- None of the states reported a prevalence below 40%.

AGE : any age group (infants/adolescents)

GENDER: Females are found to be at higher risk of developing rampant caries compared to males.

Evidence has been provided to demonstrate that caries riskfactors for women include a different salivary composition and flow rate, Hormonal fluctuations, Dietary habits, genetic variations

Participants (28)

Find a participant

- Dr.Cyril Benedict (Me)
- SR sidhaarth R (Host)
- PS Poomima srinivasan
- CS Clement Solomon
- Dr Nagaland
- M mahalakshmi
- Akansa Stephen
- DILSHAD BANU
- DN Dr N Nagappan
- DS DR SANGEETA T
- IK Ilavarasi Kamatchi nathan
- KM Kavitha Mohan
- KB kaviya boopalan
- Keerthana Sivaraman
- MD Monisha durairaj
- Nandhini R

Mute Stop Video Participants Chat Share Screen Record Reactions Leave

Type here to search 09:26 AM 14-05-2020

Zoom Meeting You are viewing Poomima srinivasan's screen View Options

Recording 00:03:10

CLINICAL FEATURES

PREVALANCE: Globally 32% (Robert A Bagramian, Franklin Garcia; The global increase in dental caries J dent Res 2007 38:173-181 Britain)

- In India, a total of 19 studies were conducted and analysis revealed prevalence of about 46.9%
- In India- Andhra pradesh was found to have the highest prevalence (63%), while the lowest prevalence was found to be in Sikkim (41.9%)
- None of the states reported a prevalence below 40%.

AGE : any age group (infants/adolescents)

GENDER: Females are found to be at higher risk of developing rampant caries compared to males.

Evidence has been provided to demonstrate that caries riskfactors for women include a different salivary composition and flow rate, Hormonal fluctuations, Dietary habits, genetic variations

Participants (28)

Find a participant

- KB kaviya boopalan
- Keerthana Sivaraman
- MD Monisha durairaj
- Nandhini R
- NM Niveditha M
- P Prathusha
- Praveen R
- Rani Santhiya Suresh
- R Raveena
- RJ Rebecca Joseph
- Shahana Fathima
- S Shanmadhy Srinivasan
- Shanmuga Priyan
- Sruthi Srinivasan
- Sujatha Devi
- VR Vignesh Ravi

Invite Mute Me Raise Hand 1 new notification

Type here to search 09:26 AM 14-05-2020

Zoom Meeting | You are viewing Poornima srinivasan's screen | View Options

00:03:30 | Speaker View

CLINICAL FEATURES

- PREVALENCE:** Globally 32% (Robert A Bagramian, Franklin Garcia, The global increase in dental caries J Dent Res 2007 88:175-182, Britain)
- In India, a total of 19 studies were conducted and analysis revealed prevalence of about 46.9%
- In India- Andhra Pradesh was found to have the highest prevalence (63%), while the lowest prevalence was found to be in Sikkim (41.5%)
- None of the states reported a prevalence below 40%.
- AGE:** any age group (infants/adolescents)
- GENDER:** Females are found to be at higher risk of developing rampant caries compared to males.
- Evidence has been provided to demonstrate that caries risk factors for women include a different salivary composition and flow rate, Hormonal fluctuations, Dietary habits, genetic variations

Participants: 28 | Chat | Share Screen | Record | Reactions | Leave

Type here to search

9:27 AM 14-05-2020

Zoom Meeting | You are viewing Poornima srinivasan's screen | View Options

00:04:03 | Speaker View

FEATURES:

- Initial lesions may present as an area of whitish decalcification on labial surfaces of maxillary anteriors.
- Less commonly, the lesion appears on palatal surface and in florid cases, may involve incisal edges of the tooth.
- This soon progresses to yellow discolouration followed by lateral extensions into the approximal areas and may circumscribe the entire tooth.
- Pulpal involvement is early, leading to multiple abscesses and pathological fractures of weakened tooth structure.

Participants: 28 | Chat | Share Screen | Record | Reactions | Leave

Type here to search

9:27 AM 14-05-2020

DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION MORNING SESSION - 14/05/2020
TIME OF THE SESSION: 11.30 AM TO 12.30 PM

STAFF PRESENT:

1. Dr. Nagaland.T
2. Dr. Ranjith Kannan
3. Dr. Cyril Benedict
4. Dr. Dilshad Banu.

POST GRADUATES PRESENT:-

1. Dr.Sujatha Devi
2. Dr.Nivedhitha.M

No of students posted in PHD: 22

No of students participated in discussion: 21

DEPARTMENT INTERNS:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon.B
4. Ilavarasi.K
5. Monisha.D
6. Nandhini.R

E BLOCK INTERNS:-

Total No of students: 3

No of students present: 3

1. Praveen.R
2. Rebecca Elizabeth Susanna .J
3. Shanmugapriyan.D

SUPERSPECIALITY INTERNS:-

Total No of students: 6

No of students present: 6

1. Kavya.B
2. Mahalakshmi.R
3. Poornima.S
4. Rani Santhiya.S
5. Kavitha
6. Shahana Fathima S

POONJERI BATCH

Total No of students: 7

No of students present: 6

1. Prathusha.U
2. Raveena.M
3. Shanmadhy.S
4. Siddharth.R
5. Sruthi.S
6. Vignesh.R

Absentee:

1. Methaf Mohaideen

| S.NO | DATE | BATCH | TOPIC | FACULTY | NO OF STUDENTS PARTICIPATED |
|------|------------|--|--|--|-----------------------------|
| 1 | 14-05-2020 | Interns of department, poonjeri, E-Block, super-specialty, post graduates. | 1. Epidemiology and pathophysiology of rampant caries 2. Diagnosis of rampant caries. | 1. Dr. Nagaland. T 2. Dr. Ranjith Kannan 3. Dr. Cyril Benedict 4. Dr. Dilshad Banu. | 23 |

SUMMARY:

Today's Discussion was on Epidemiology and pathophysiology of rampant caries by Keerthana.s and Diagnosis of rampant caries by Shanmadhy.s

The details of it are as follows:

Epidemiology and pathophysiology of rampant caries:

- Introduction.
- Epidemiological studies of dental caries.
- Global scenario
- Indian scenario.
- Epidemiological triad.
- A detailed case report.
- Pathophysiology.

Diagnosis of rampant caries:

- Diagnosis of ECC & S-ECC based on stage
- Criteria for S-ECC.
- Differential diagnosis for ECC.
- Effects of untreated ECC.

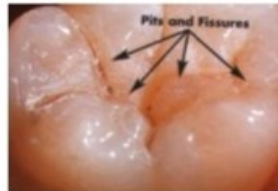
QUESTIONS RAISED:

1. About ICDAS, whether it can be performed in primary dentition.

A susceptible host tissue

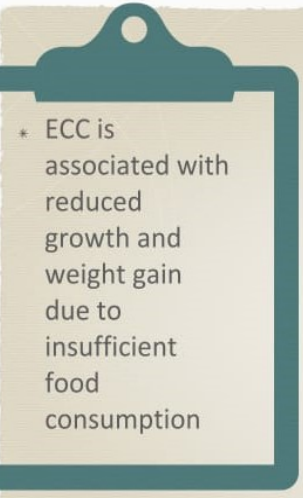
A person or other animal that affords subsistence or lodgement to an infectious agent under natural condition.

Predisposing factors

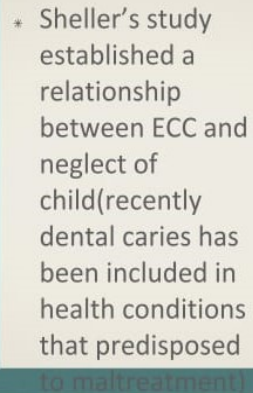


Epidemiological studies of dental caries



- Day and Tandon(1940) conducted a survey among 756 subjects aged between 5-18 years in Lahore and Point prevalence of caries was found to be 94.04%.
- Chaudhary and Chawla(1957) conducted a survey among 2900 school children of 5-16 years in Lucknow.They found that dmft as 11.1 and DMFT to 1.9.
- Onisi and Shinohra in 1976 in their survey of 1172 children in the age group of 13 years in Japan found that mean DMFT score was 7.5 and this was higher in females than in males.



- * ECC is associated with reduced growth and weight gain due to insufficient food consumption



- * Sheller's study established a relationship between ECC and neglect of child (recently dental caries has been included in health conditions that predisposed to maltreatment)



- * Children under 5 years of age with dental caries are at high risk for future caries.

* Sheller B, Williams BJ, Hays K, Reasons for repeated dental treatment under GA for healthy child. *Pediatr Dent* 2003;25:546-52 (pubmed)



Diagnostic potential of saliva as a bio marker in early childhood caries

-Dr. Srithi Ks, Dr. Yashoda R, Dr. Manjunath P Puranik

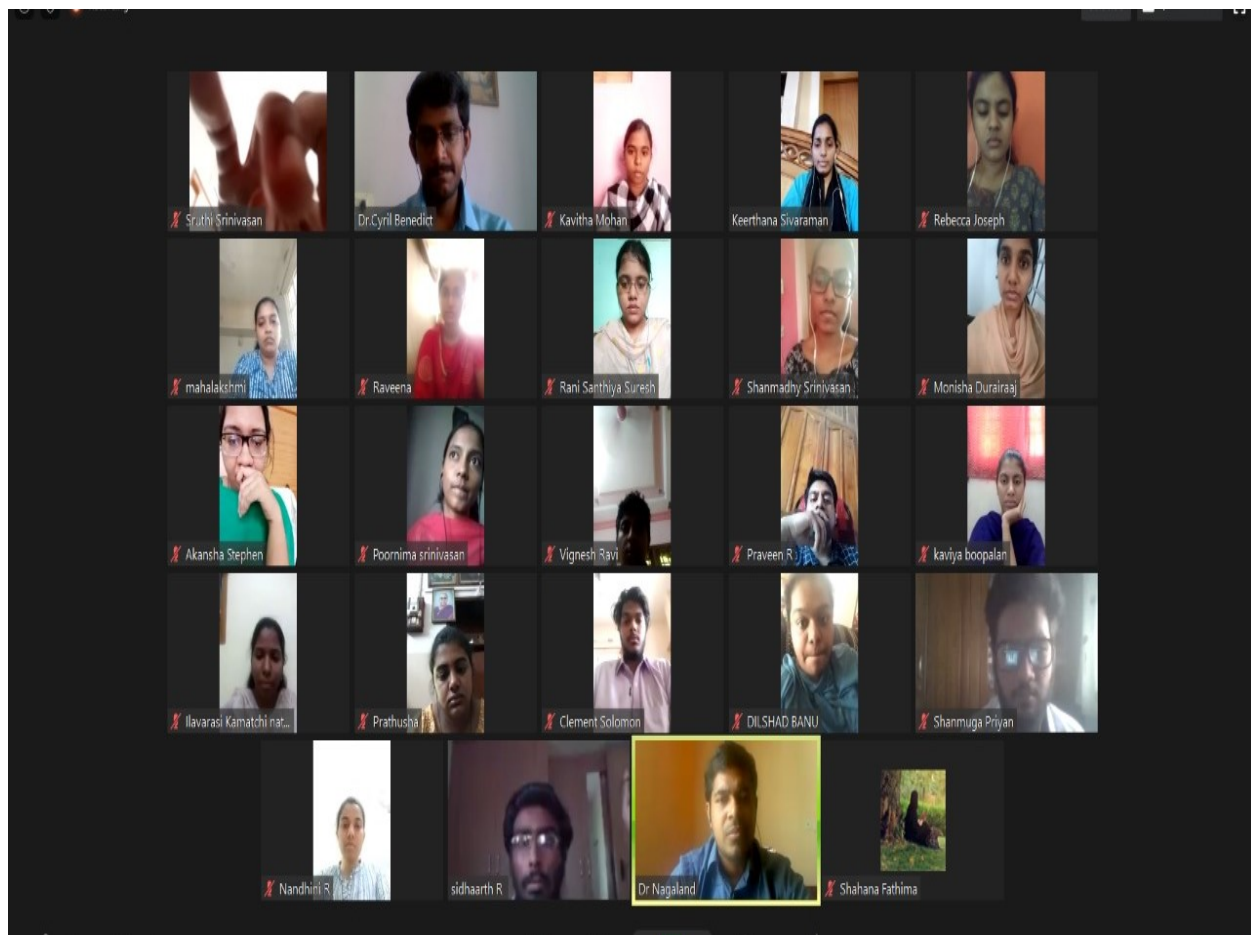
International journal of applied dental sciences 2019;5(2):341-347

Concluded that,

Salivary biomarkers have many potential role in diagnosis and management of ECC. Some of the biological and physical biomarkers have showed substantial evidence in predicting the risk for ECC.

Nevertheless, the association between salivary factors and dental caries is yet to be established.





CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

DATE: 14TH MAY 2020 (Evening session)

TIMING OF SESSION FROM 2.30PM -3.30PM

Staff present:-

1. Dr. Cyril Benedict H
2. Dr. Dilshad Banu
3. Dr. Nagaland T

No of students posted in PHD: 22

No of students participated in discussion: 21

DEPARTMENT PGs:

1. Sujatha devi
2. Niveditha.M

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Nandhini.R
5. Ilavarasi.K
6. Monisha D

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Superspeciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S
4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|--|-----------------------|---|-----------------------------|
| 1 | 14.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty and Post Graduates | RAMPANT CARIES | 1) Dr. Cyril Benedict H 2) Dr. Nagaland T 3) Dr. Dilshad Banu | 23 |

Summary:-

Today's discussion was on Rampant Caries presented by Shanmuga priyan.

The Points highlighted were:

* Definition of rampant caries: Rapidly spreading, burrowing type of caries with early involvement of pulp .A lesion can be termed rampant caries when there is involvement of 10 new lesions per year

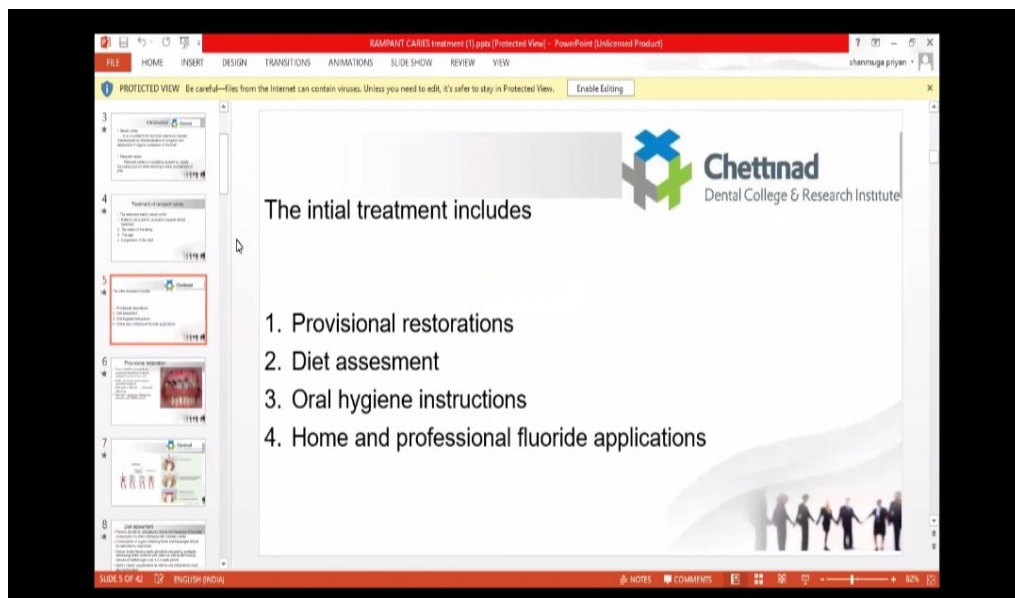
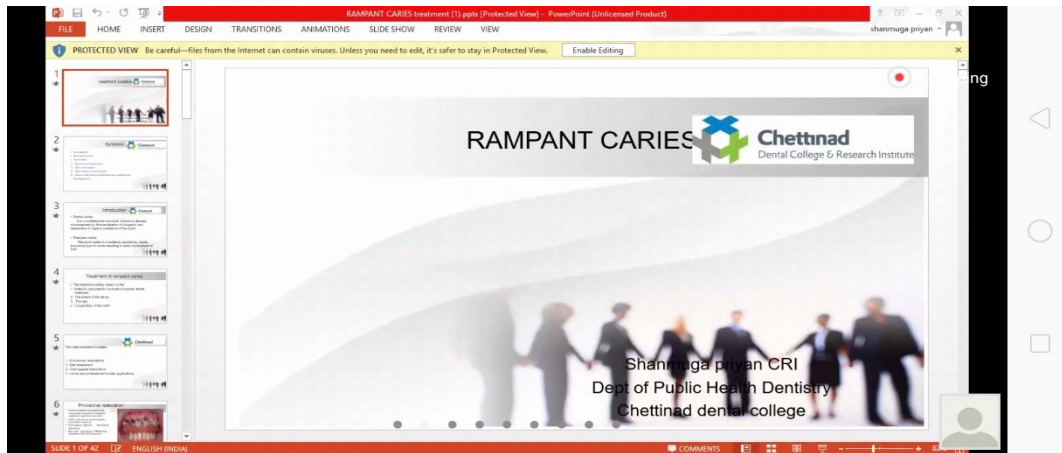
* Etiology: which includes Prolonged feeding time, prolonged use of drugs, radiation induced, pathological conditions (Sjogrens syndrome/ tumors), Salivary factors etc.

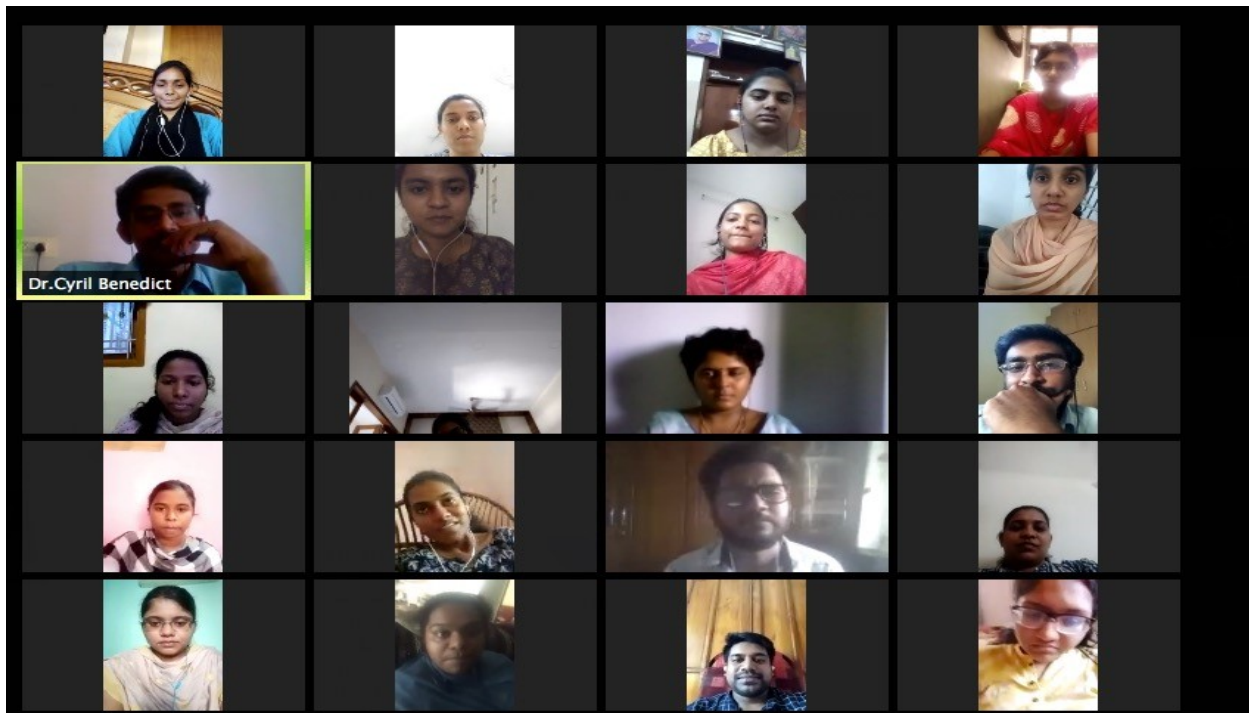
*Treatment of rampant caries includes,

- Provisional restoration
- Diet assessment
- oral hygiene instructions
- Home and professional fluoride application

Management of rampant caries includes

- consultation
- control measures
- Restorative procedures
- Preventive measures
- Dental check-Up and recall





CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

DATE: 15TH MAY 2020 (Morning session)

TIMING OF SESSION FROM 9:00 AM-10.00 AM

Staff present:-

1. Dr. Jagannatha (Faculty in charge)
2. Dr. Sangeetha
3. Dr. Nagappan
4. Dr. Nagaland T
5. Dr. Ranjith
6. Dr. Cyril Benedict
7. Dr. Dilshad Banu

DEPARTMENT PGs:

1. Sujatha devi
2. Niveditha.M

No of students posted in PHD: 22

No of students participated in discussion: 21

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Nandhini.R
5. Ilavarasi.K
6. Monisha D

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Super speciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S
4. Mahalakshmi V

5. Kavya B
6. Kavitha

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

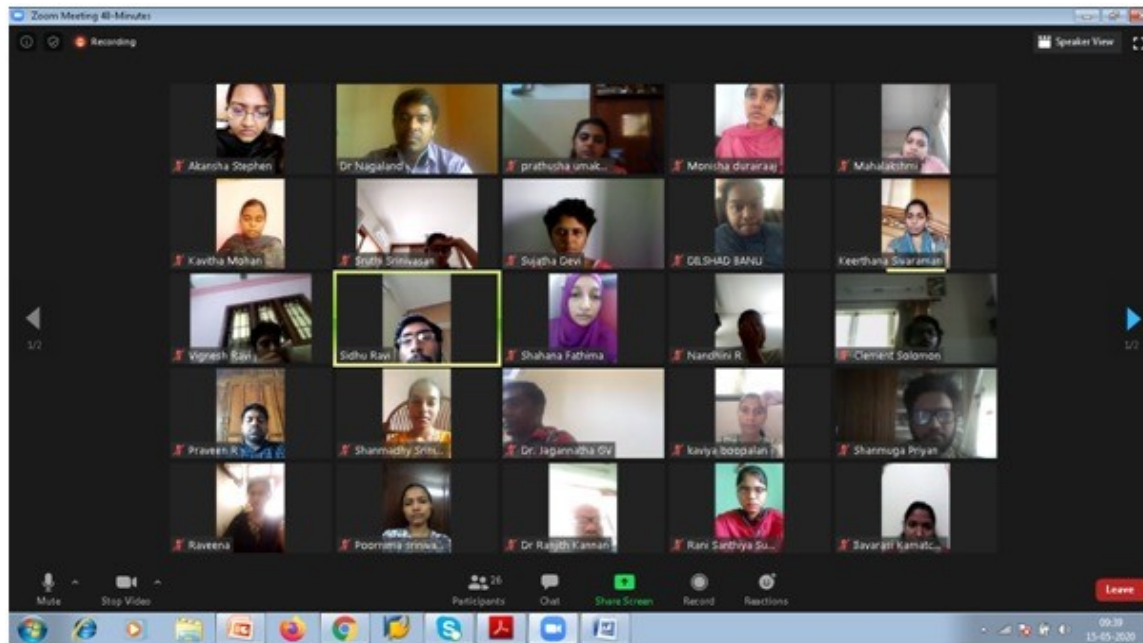
| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|-----------------|---|-----------------------------|
| 1 | 15.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, Post Graduates | Tooth ankylosis | Dr. Jagannatha GV Dr. Sangeetha Dr. Nagaland T Dr. Nagappan Dr. Cyril Benedict H Dr. Ranjith Dr. Dilshad Banu | 23 |

Summary:-

Today's discussion was on Tooth ankylosis presented by Siddharth and Monisha CRI

The Points highlighted were:

- *Definition of ankylosis
- *Radiographic feature of ankylosis
- *Pathogenesis of ankylosis
- *Etiology of ankylosis - trauma, metabolic, orthodontic movement
- *Complication of ankylosis
- *Ankylosis classification
- *Diagnosis of ankylosis-clinical diagnosis - percussion, mobility, X-ray, CBCT
- *Various Treatment modalities in ankylosed tooth.



Participants (28)

Find a participant

Zoom Meetings is using the webcam

M Mahalakshmi

MD Monisha durairaj

Nandhini R

NM Nivedhitha M

PS Poornima srinivasan

Praveen R

S Rani Santhiya Suresh

R Raveena

RJ Rebecca Joseph

SF Shahana Fathima

S Shanmadhy Srinivasan

SP Shanmuga Priyan

Sruthi Srinivasan

Sujatha Devi

VR Vignesh Ravi

Invite

Unmute Me

Raise Hand

Recording...

Zoom Meetings is using the webcam

Participants (28)

Find a participant

Zoom Meetings is using the webcam

P prathusha (Me)

Keerthana Sivaraman (Host)

Sidhu Ravi

CS Clement Solomon

Akansha Stephen

DILSHAD BANU

DN Dr N Nagappan

DN Dr Nagaland

DS Dr Sangeeta T

DJ Dr. Jagannatha GV

IK Ilavarasi Kamatchi nathan

KM Kavitha Mohan

KB kaviya boopalan

M Mahalakshmi

MD Monisha durairaj

Invite

Unmute Me

Raise Hand

DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION MID-MORNING SESSION -15/05/2020 from 1145am to 1.00 pm

Staff present:-

1. Dr. Jagannatha G V (In charge faculty)
2. Dr. Nagaland T
3. Dr. Cyril Benedict H
4. Dr. Nagappan
5. Dr. Dilshad Banu

No of students posted in PHD: 22

No of students participated in discussion: 21

Post graduate students:

- 1) Dr Sujatha
- 2) Dr Nivedhitha

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Nandhini.R
5. Ilavarasi.K
6. Monisha D

E block interns:-

Total No of students: 3

No of students present: 3

1. Praveen R
2. Shanmugapriyan.P
2. Shahana Fathima S
3. Rani Santhiya S
4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch:-

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

Final years:

Number of students: 13

Students present: 13

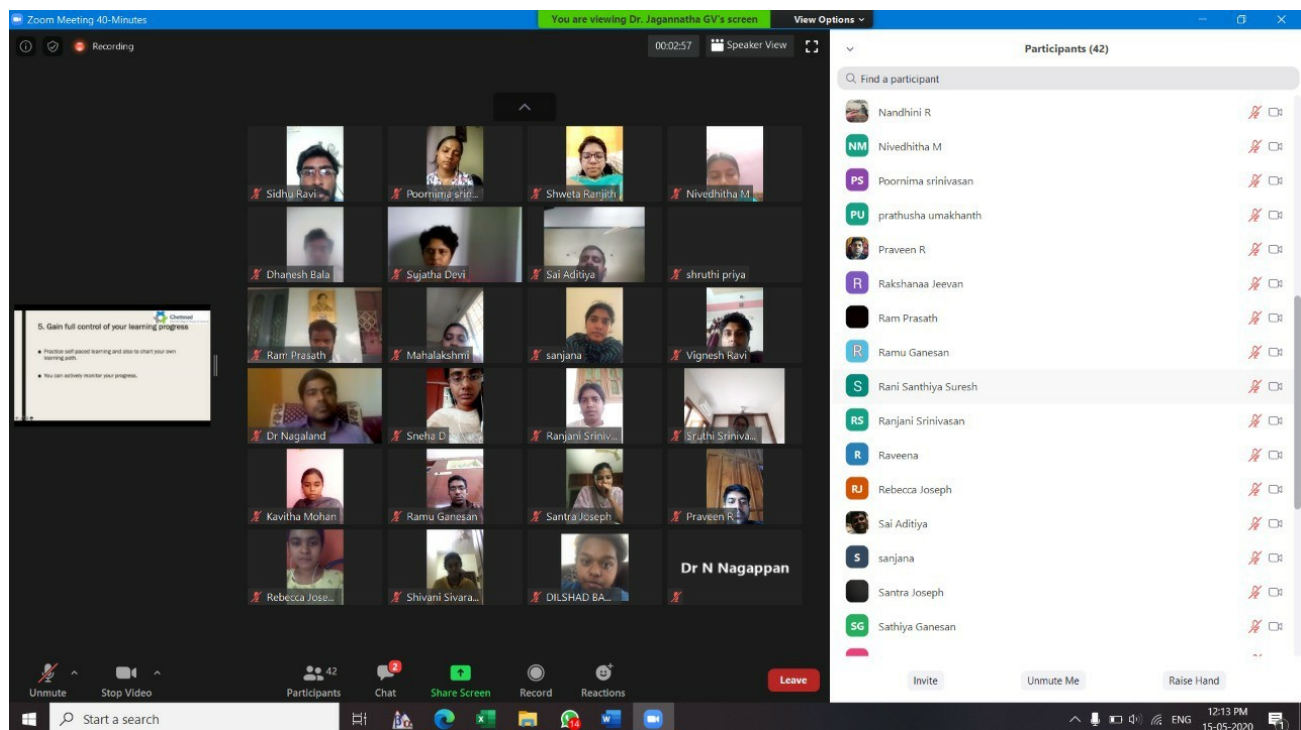
1. Rakshanaa J
2. Ramprasath R
3. Ramu
4. Ranjani T S
5. Sai Aditya Narayanan
6. Sanjana D
7. Santra Joseph
8. Sathiya G
9. Shivani
10. Shwetha Ranjith
11. Shinduja
12. Shruthi priya
13. Sneha

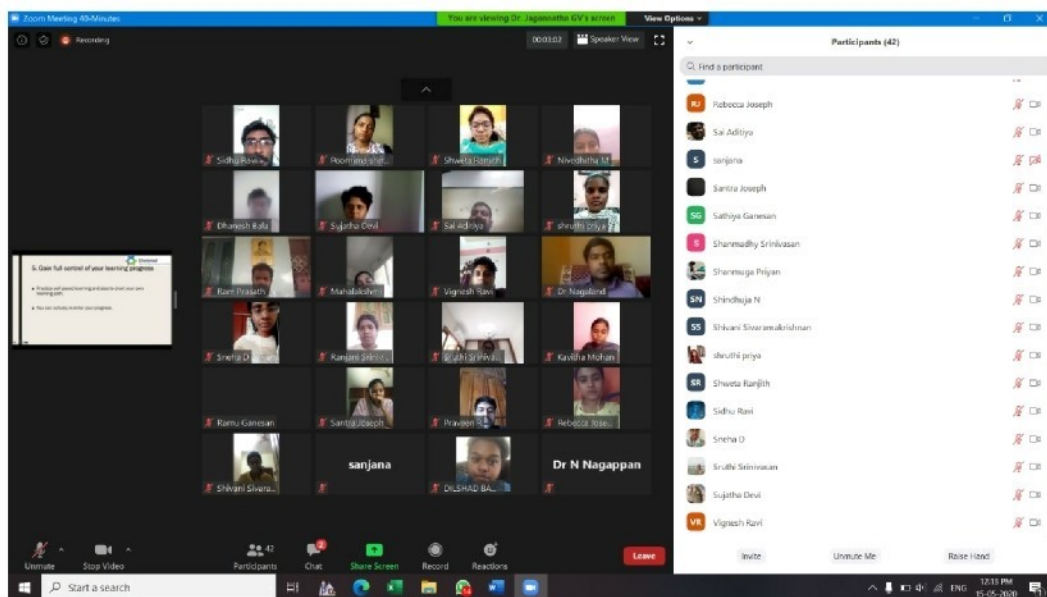
| S.No | Date | Participants | Topic | Faculty | Total |
|------|------------|---|--------------------------|---|-------|
| 1 | 15.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty and final year E Batch, Post Graduates | Orientation of E-Courses | Dr. Jagannatha GV Dr. Nagappan Dr Nagaland T Dr Cyril Benedict Dr. Dilshad Banu | 40 |

Summary:-

Presentation was done by Dr. Jagannatha regarding the online courses and about its benefits:

- 1) Where different online courses sites were mentioned
- 2) The certification programmes and its benefits were also explained







Zoom Meeting 40-Minutes You are viewing Dr. Jagannatha CV's screen View Options 00:03:25 Speaker View

Recording

Participants (42)

Find a participant

- RJ Rebecca Joseph
- SAI Aditya
- S sanjana
- SA Santra Joseph
- SG Sathya Ganesan
- S Sharmadhy Srinivasan
- SN Sharmuga Priyan
- SN Shindhuja N
- SS Shiveni Sivasankarishnan
- SR shruithi priya
- SR Shweta Ranjith
- Sidhu Ravi
- Sneha D
- Sruthi Srinivasan
- Sujatha Devi
- VR Vignesh Ravi

Chettinad Dental College & Research Institute

- Joining an online course can also contribute to strengthening your online presence
- Quality and quantity of your online identity and interactions.
- Your online presence can encourage others to become active in the community and provide opportunities to make new connections and boost your future career.

Unmute Stop Video Participants Chat Share Screen Record Reactions

Start a search

12:14 PM 15-05-2020

Zoom Meeting 40-Minutes You are viewing Dr. Jagannatha CV's screen View Options 00:03:12 Speaker View

Recording

Participants (42)

Find a participant

- RJ Rebecca Joseph
- SAI Aditya
- S sanjana
- SA Santra Joseph
- SG Sathya Ganesan
- S Sharmadhy Srinivasan
- SN Sharmuga Priyan
- SN Shindhuja N
- SS Shiveni Sivasankarishnan
- SR shruithi priya
- SR Shweta Ranjith
- Sidhu Ravi
- Sneha D
- Sruthi Srinivasan
- Sujatha Devi
- VR Vignesh Ravi

Chettinad Dental College & Research Institute

- Joining an online course can also contribute to strengthening your online presence
- Quality and quantity of your online identity and interactions.
- Your online presence can encourage others to become active in the community and provide opportunities to make new connections and boost your future career.

Unmute Stop Video Participants Chat Share Screen Record Reactions

Start a search

12:14 PM 15-05-2020

CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY

INTERNS DISCUSSION

DATE: 15TH MAY 2020 (Afternoon session)

TIMING OF SESSION FROM 2.30PM -3.30PM

Staff present:-

1. Dr. Nagappan (Faculty in charge)
2. Dr. Nagaland
3. Dr. Cyril Benedict H
4. Dr. Dilshad Banu

1st year PG students:

1. Dr. Sujatha Devi
2. Dr. Nivedhitha M

No of students posted in PHD: 22

No of students participated in discussion: 21

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Ilavarasi.K
5. Monisha D
6. Nandhini R

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Superspeciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Rani Santhiya S
3. Mahalakshmi V
4. Kavya B
5. Kavitha

6. Shahana Fathima

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|---|------------------------|--|-----------------------------|
| 1 | 15.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, Post Graduates | TREATMENT OF ANKYLOSIS | 1. Dr. Nagappan 2. Dr. Nagaland 3. Dr. Cyril Benedict H 4. Dr. Dilshad Banu | 23 |

Summary:-

Today's discussion was on Treatment of Tooth Ankylosis, presented by Poornima.S.

The Points highlighted were:

- Consequences of ankyloses-
Ankylosis leads to delayed exfoliation of teeth, occlusal discrepancy and supra eruption of opposing teeth.
- Treatment options for Primary teeth with successor depending on the onset.
- Treatment of primary teeth without successor based on rate of resorption.
- Treatment of permanent ankylosed teeth:
 - Decoration technique done for ankylosed teeth in growing patients

- Surgical luxation procedure and disadvantages
- Segmental Osteotomy and disadvantages
- Distraction osteogenesis
- Extraction
- Atraumatic extraction technology- Piezosurgery
- Case presentations



PRIMARY TEETH WITHOUT SUCCESSOR



SLOW ROOT RESORPTION

- NATURAL SPACE MAINTAINER
- EXTRACTION
- ORTHODONTIC INTERVENTION



SEVERE ROOT RESORPTION

- EXTRACTION FOLLOWED BY REPLACEMENT

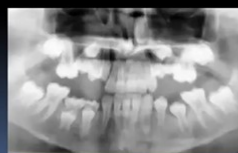


SLIGHTLY SUBMERGED WITH NO EVIDENCE OF ROOT RESORPTION

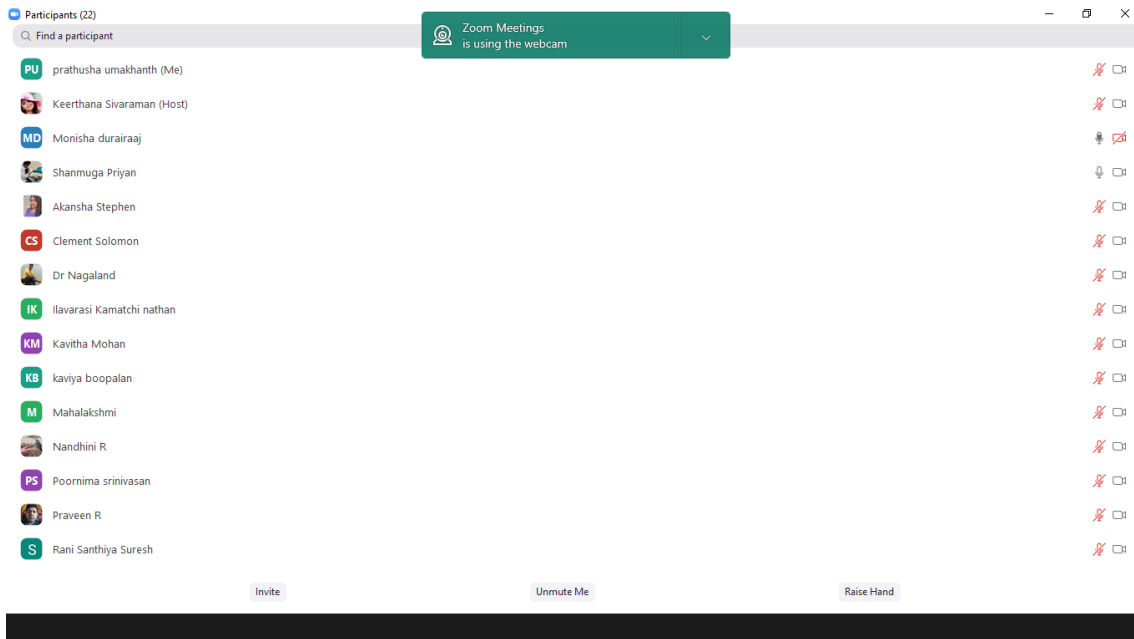
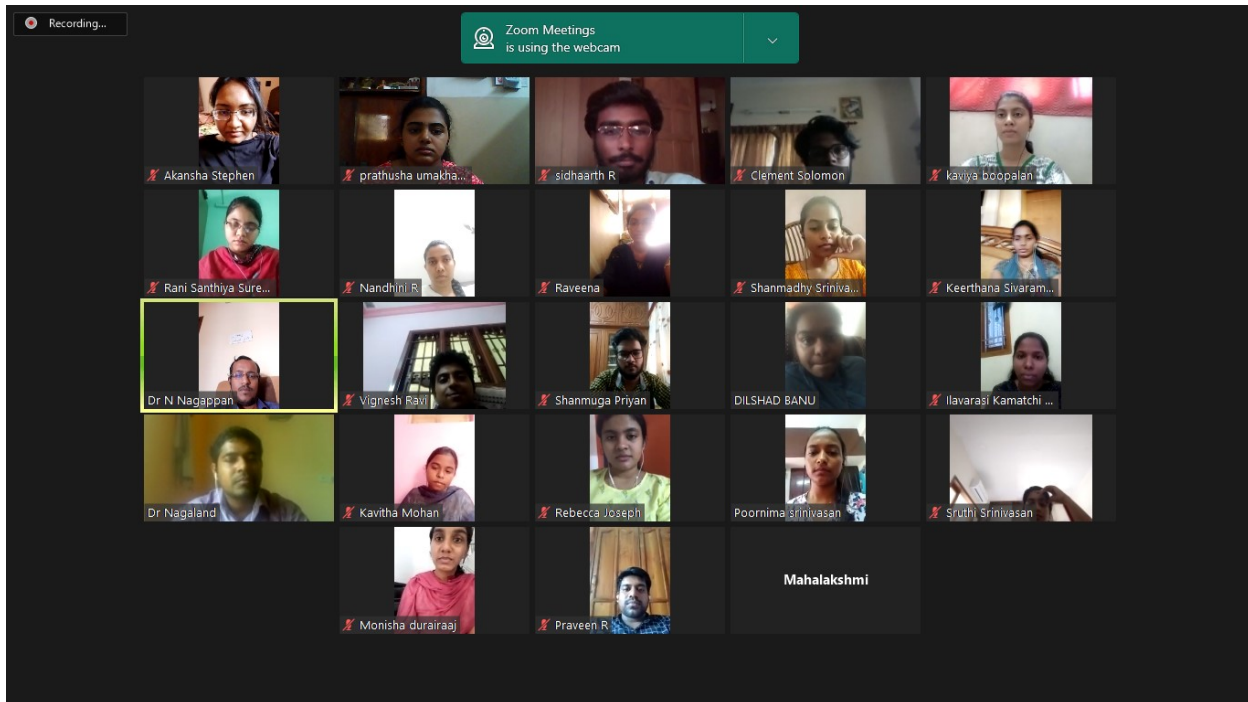
- STAINLESS STEEL CROWN/COMPOSITE BUILD UP

Arhakis A, Boutiou E. Etiology, diagnosis, consequences and treatment of infraoccluded primary molars. The open dentistry journal. 2016;10:714.

TREATMENT OF PRIMARY TEETH



Arhakis A, Boutiou E. Etiology, diagnosis, consequences and treatment of infraoccluded primary molars. The open dentistry journal. 2016;10:714.



DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION MORNING SESSION - 16/05/2020
TIME OF THE SESSION: 9.00 AM TO 10.00 AM

STAFF PRESENT:

Dr. Jagannatha.GV (Faculty incharge)

Dr Sangeetha

Dr. Nagaland.T

Dr. Cyril Benedict.H

Dr. Dilshed Banu.

POST GRADUATES PRESENT:-

1. Dr. Sujatha Devi

2. Dr. Nivedhitha.M

No of students posted in PHD: 22

No of students participated in discussion: 21

DEPARTMENT INTERNS:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P

2. Keerthana S

3. Clement Solomon.B

4. Ilavarasi.K

5. Monisha.D

6. Nandhini.R

E BLOCK INTERNS:-

Total No of students: 3

No of students present: 3

1. Praveen.R
2. Rebecca Elizabeth Susanna .J
3. Shanmugapriyan.D

SUPERSPECIALITY INTERNS:-

Total No of students: 6

No of students present: 6

1. Kavya.B
2. Mahalakshmi.R
3. Poornima.S
4. Rani Santhiya.S
5. Kavitha
6. Shahana Fathima S

POONJERI BATCH

Total No of students: 7

No of students present: 6

1. Prathusha.U
2. Raveena.M
3. Shanmadhy.S
4. Siddharth.R
5. Sruthi.S

6. Vignesh.R

Absentee:

1. Methaf Mohaideen

| S.NO | DATE | BATCH | TOPIC | FACULTY | NO OF STUDENTS PARTICIPATED |
|------|------------|---|---------------------------|--|-----------------------------|
| 1 | 16-05-2020 | Interns of department, Poonjeri, E-block, Super-specialty, Post graduates. | Autoimmune disease | 1.Dr.Jagannath a.GV 2. Dr Sangeetha 3. Dr. Nagaland.T 4. Dr. Cyril Benedict.H 5. Dr. Dilshed Banu. | 23 |

SUMMARY:

Today's Discussion was on Autoimmune disease by Rani santhiya.

The details of it are as follows:

- Introduction.
- Prevalence.
- Classification.
- Factors involved in autoimmunity.
- Mechanisms of autoimmunity.
- Apoptosis and autoimmunity.
- Autoimmune disorder.
- Case presentation.

Definition

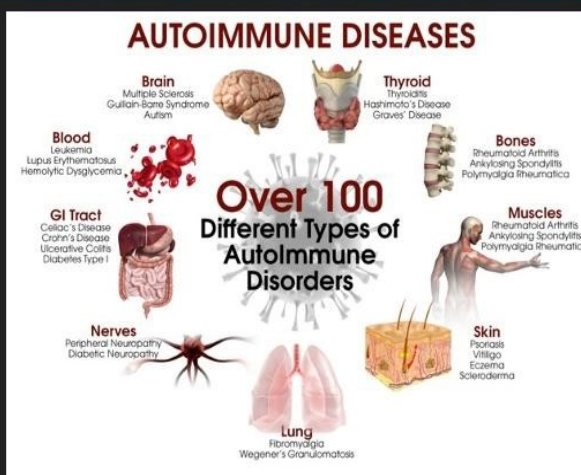
Autoimmunity involves a misdirection of the body's immune system against its own tissues, causing a large number of diseases.

- More than 80 autoimmune diseases have so far been identified: some affect only one tissue or organ, while others are 'systemic' (affect multiple sites of the body)



AUTOIMMUNE DISORDERS of head and neck

1. Diabetes mellitus
2. Multiple sclerosis
3. Rheumatoid arthritis
4. Sjogrens syndrome
5. Systemic sclerosis
6. Behcets syndrome
7. Oral lichen planus
8. Pemphigoid
9. Pemphigus
10. Erythema multiforme
11. Systemic lupus erythematosus
12. Psoriasis



Participants (25)

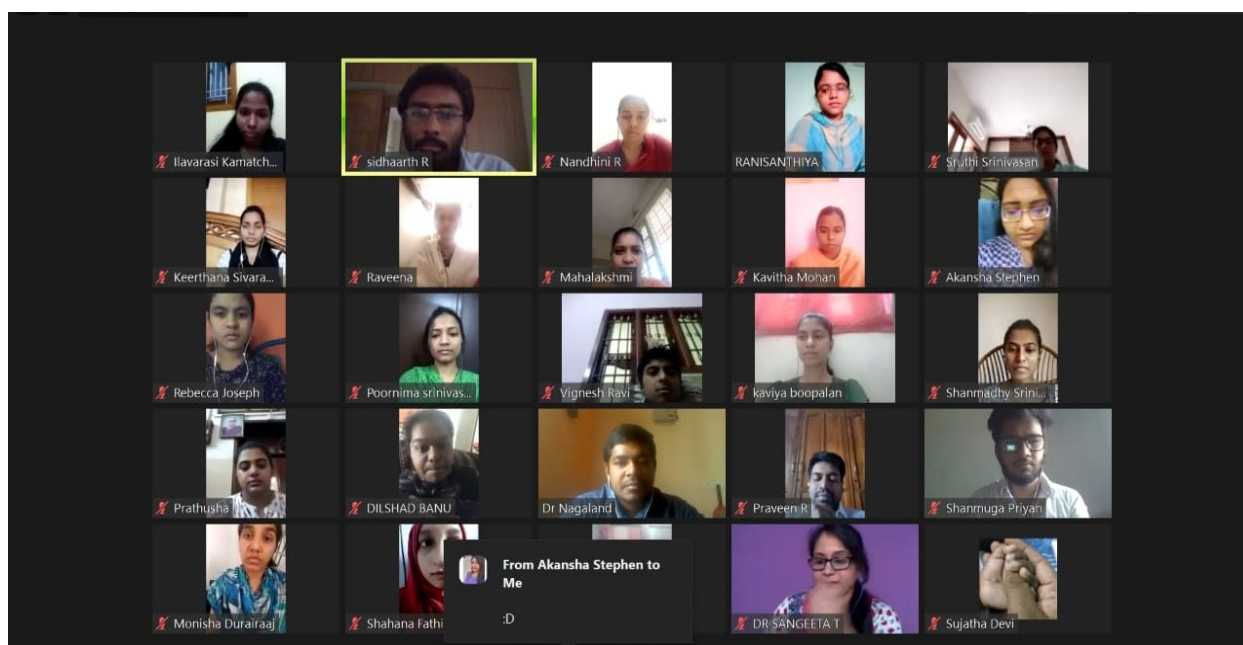
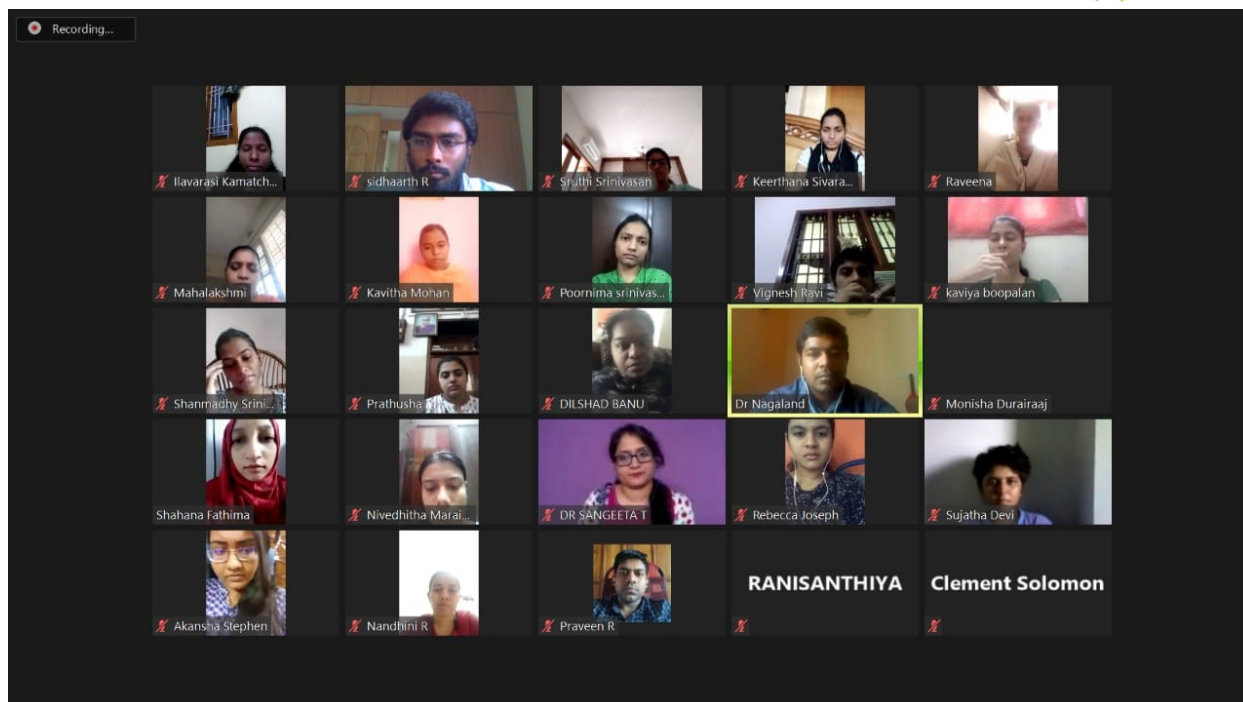
Find a participant

| | | | |
|----|----------------------|--|--|
| M | Mahalakshmi | | |
| MD | Monisha Durairaj | | |
| | Nandhini R | | |
| | Niveditha Maraimalai | | |
| PS | Poornima srinivasan | | |
| P | Prathusha | | |
| | Praveen R | | |
| R | RANISANTHIYA | | |
| R | Raveena | | |
| RJ | Rebecca Joseph | | |
| S | Shanmadhy Srinivasan | | |
| | Sruthi Srinivasan | | |
| | Sujatha Devi | | |
| VR | Vignesh Ravi | | |

Participants (25)

Find a participant

| | | | |
|----|----------------------------------|--|--|
| | sidhaarth R (Me) | | |
| IK | Ilavarasi Kamatchi nathan (Host) | | |
| DN | Dr Nagaland | | |
| SF | Shahana Fathima | | |
| | Akansa Stephen | | |
| CS | Clement Solomon | | |
| | DILSHAD BANU | | |
| DS | DR SANGEETA T | | |
| KM | Kavitha Mohan | | |
| KB | kaviya boopalan | | |
| | Keerthana Sivaraman | | |
| M | Mahalakshmi | | |
| MD | Monisha Durairaj | | |
| | Nandhini R | | |



CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION Date: 16/05/2020 (mid-morning session)
Time of the session: 11.30 am to 12.10 pm

Staff present: -

1. Dr. Dilshad Banu

No of students posted in PHD: 22

No of students participated in discussion: 21

Department interns: -

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Nandhini.R
5. Ilavarasi.K
6. Monisha D

E block interns: -

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Superspeciality interns: -

Total No of students: 6

No of students present: 6

1. Poornima S
2. Sahana Fathima
3. Rani Santhiya S
4. Mahalakshmi V
5. Kavya B
6. Kavitha

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
 2. Siddharth R
 3. Prathusha
 4. Raveena
 5. Shanmadhy
 6. Sruthi Srinivasan
- Absentee:
1. Methaf Mohideen

| S. No | Date | Batch | Topic | Faculty | No of students participated |
|-------|------------|--|--|---------------------|-----------------------------|
| 1 | 16.05.2020 | Interns of department, Poonjeri, Super-Specialty, | Autoimmune diseases-xerostomia and sjogrens syndrome | 1. Dr. Dilshad Banu | 21 |

Summary: -

Today's discussion was on the topic "Autoimmune diseases-xerostomia and sjogrens syndrome " by Nandhini R.

Points Covered:-

- Epidemiology of xerostomia
- Etiology of xerostomia
- Sjogrens syndrome
- Diagnosis of autoimmune diseases
- Diagnosis of Sjogrens syndrome
- Revised international classification criteria for sjogrens syndrome

Questions asked

- Why is xerostomia found in patients who have uncontrolled diabetes?

DIAGNOSIS OF SJOGREN SYNDROME:

Laboratory test results may indicate the following:

- Elevated erythrocyte sedimentation rate (ESR)- 80% of the patients
- Anemia
- Leukopenia
- Eosinophilia
- Hypergammaglobulinemia
- Presence of antinuclear antibodies (ANAs), especially anti-Ro and anti-La – 75% to 85% of the patient.
- Presence of rheumatoid factor (RF)- 52% of patients with primary ss & 98% with secondary ss.


Table 2 Revised international classification criteria for Sjögren's syndrome

| |
|---|
| I. Ocular symptoms: a positive response to at least one of the following questions: <ol style="list-style-type: none"> 1. Have you had daily, persistent, troublesome dry eyes for more than 3 months? 2. Do you have a recurrent sensation of sand or gravel in the eyes? 3. Do you use tear substitutes more than 3 times a day? |
| II. Oral symptoms: a positive response to at least one of the following questions: <ol style="list-style-type: none"> 1. Have you had a daily feeling of dry mouth for more than 3 months? 2. Have you had recurrently or persistently swollen salivary glands as an adult? 3. Do you frequently drink liquids to aid in swallowing dry food? |
| III. Ocular signs—that is, objective evidence of ocular involvement defined as a positive result for at least one of the following two tests: <ol style="list-style-type: none"> 1. Schirmer's I test, performed without anaesthesia (≤ 5 mm in 5 minutes) 2. Rose bengal score or other ocular dye score (≥ 4 according to van Bijsterveld's scoring system) |
| IV. Histopathology: In minor salivary glands (obtained through normal-appearing mucosa) focal lymphocytic sialoadenitis, evaluated by an expert histopathologist, with a focus score ≥ 1 , defined as a number of lymphocytic foci (which are adjacent to normal-appearing mucous acini and contain more than 50 lymphocytes) per 4 mm ² of glandular tissue ¹⁸ |
| V. Salivary gland involvement: objective evidence of salivary gland involvement defined by a positive result for at least one of the following diagnostic tests: <ol style="list-style-type: none"> 1. Unstimulated whole salivary flow (≤ 1.5 ml in 15 minutes) 2. Parotid sialography showing the presence of diffuse sialectasias (punctate, cavitary or destructive pattern), without evidence of obstruction in the major ducts¹⁹ 3. Salivary scintigraphy showing delayed uptake, reduced concentration and/or delayed excretion of tracer²⁰ |
| VI. Autoantibodies: presence in the serum of the following autoantibodies: <ol style="list-style-type: none"> 1. Antibodies to Ro(SSA) or La(SSB) antigens, or both |

Participants (22)



Find a participant

| | | | |
|---|----------------------|---|---|
|  | Keerthana Sivaraman |  |  |
|  | Mahalakshmi |  |  |
|  | Monisha Durairaj |  |  |
|  | Poornima srinivasan |  |  |
|  | Prathusha |  |  |
|  | Praveen R |  |  |
|  | Rani Santhiya Suresh |  |  |
|  | Raveena |  |  |
|  | Rebecca Joseph |  |  |
|  | Shahana Fathima |  |  |
|  | Shanmadhy Srinivasan |  |  |
|  | Shanmuga Priyan |  |  |
|  | Sruthi Srinivasan |  |  |
|  | Vignesh Ravi |  |  |

Invite

Unmute Me

Raise Hand

Participants (22)

Find a participant

| | | |
|---|---------------------------|---|
|  | sidhaarth R (Me) |   |
|  | Nandhini R (Host) |   |
|  | Akansha Stephen |   |
|  | Clement Solomon |   |
|  | DILSHAD BANU |   |
|  | Ilavarasi Kamatchi nathan |   |
|  | Kavitha Mohan |   |
|  | kaviya boopalan |   |
|  | Keerthana Sivaraman |   |
|  | Mahalakshmi |   |
|  | Monisha Durairaj |   |
|  | Poornima srinivasan |   |
|  | Prathusha |   |
|  | Praveen R |   |

Invite

Unmute Me

Raise Hand

Unmute

Stop Video

Participants

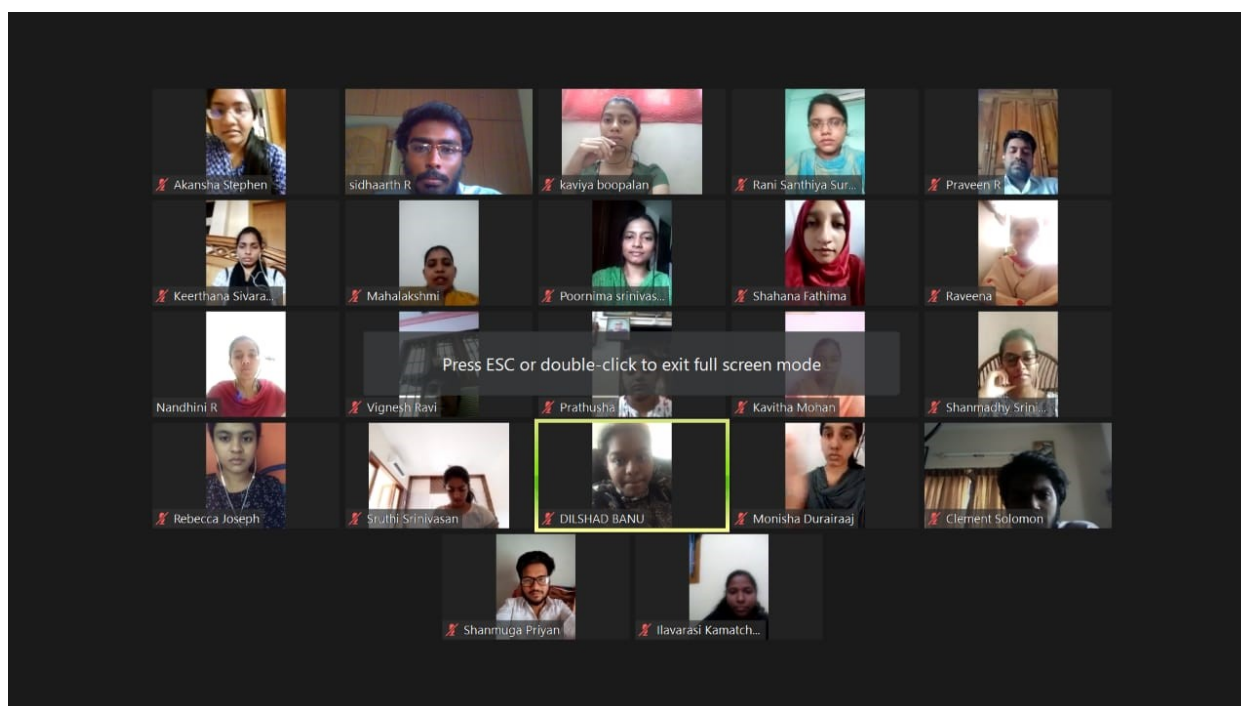
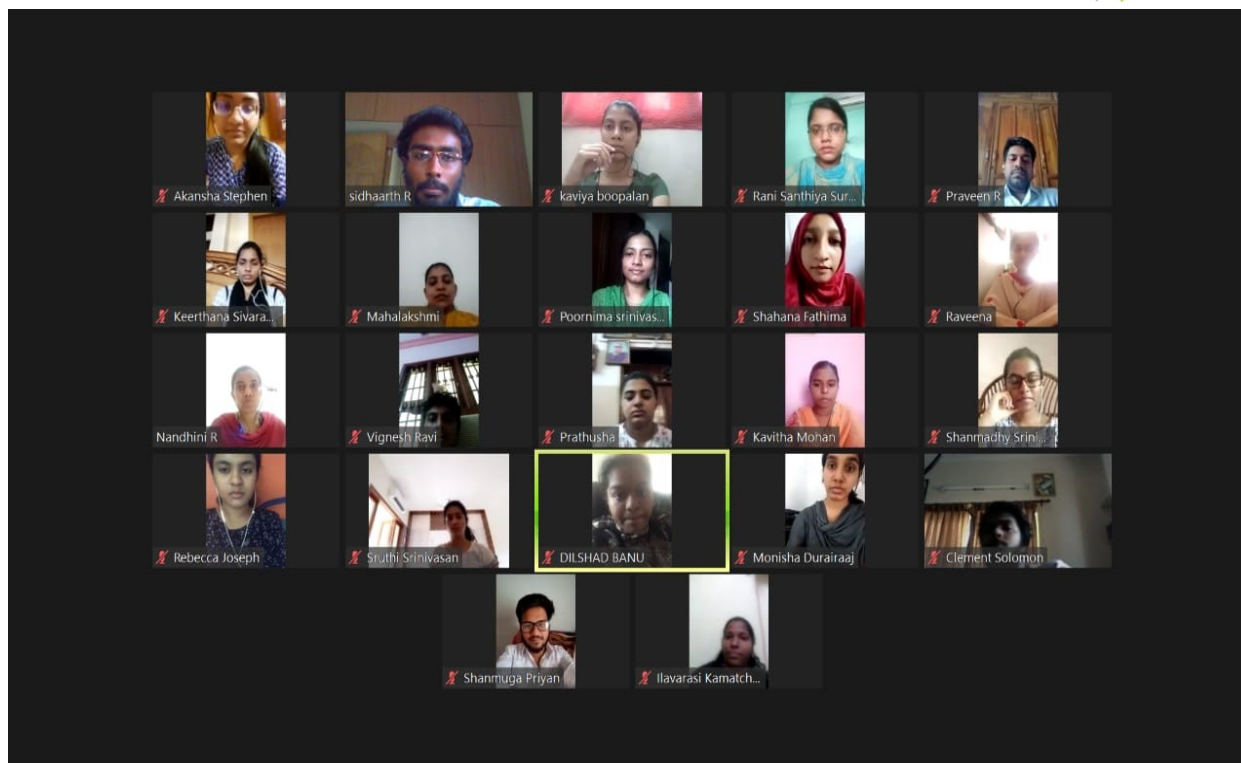
Chat

Share Screen

Pause/Stop Recording

Reactions

Leave



CHETTINAD DENTAL COLLEGE
DEPARTMENT OF PUBLIC HEALTH DENTISTRY
INTERNS DISCUSSION

DATE: 16TH MAY 2020 (Afternoon session)

TIMING OF SESSION FROM 2.30PM -3.30PM

INTERNS DISCUSSION EVENING SESSION on 16 May 2020

Staff present:-

1. Dr. Jagannath (Faculty in charge)
2. Dr. Nagaland
3. Dr Nagappan
4. Dr. Cyril Benedict H
5. Dr. Dilshad Banu

1st year PG students:

1. Dr. Sujatha Devi
2. Dr. Nivedhitha M

No of students posted in PHD: 22

No of students participated in discussion: 21

Department interns:-

Total No of students: 6

No of students present: 6

1. Akansha Tini. P
2. Keerthana S
3. Clement Solomon
4. Ilavarasi.K
5. Monisha D
6. Nandhini R

E block interns:-

Total No of students: 3

No of students present: 3

1. Shanmugapriyan.P
2. Praveen R
3. Rebecca Joseph

Superspeciality interns:-

Total No of students: 6

No of students present: 6

1. Poornima S
2. Rani Santhiya S
3. Mahalakshmi V

4. Kavya B
5. Kavitha
6. Shahana Fathima

Poonjeri batch

Total No of students: 7

No of students present: 6

1. Vignesh R
2. Siddharth R
3. Prathusha
4. Raveena
5. Shanmadhi
6. Sruthi Srinivasan

Absentee:

1. Methaf Mohideen

Final years:

Total no of students: 13

No of students present: 13

1. Rakshana J
2. Ramprasath R
3. Ramu
4. Ranjani TS
5. Sai Adithya narayanan
6. Sanajana D
7. Santra Joseph
8. Sathiya G
9. Shwetha Ranjith
10. Sindhuja
11. Shruthi Priya
12. Shivani
13. Sneha

Feb batch final year

No of students: 1

No of students present: 1

1. Dhanesh bala

| S.No | Date | Batch | Topic | Faculty | No of students participated |
|------|------------|--|---|--|-----------------------------|
| 1 | 16.05.2020 | Interns of department, Poonjeri, E-block, Super-Specialty, final years, Post Graduates | Clinical features of xerostomia and sjogrens syndrome and their management, Advancements in the management of autoimmune diseases | 1. Dr. Jagannath 2. Dr. Nagaland 3. Dr. Nagappan 4. Dr. Cyril Benedict 5. Dr. Dilshad Banu | 37 |

Summary:-

Today's discussion was on Clinical features of xerostomia and Sjogrens syndrome and their management presented by Praveen and the second seminar on recent advancements in the management of autoimmune diseases by Sruthi.

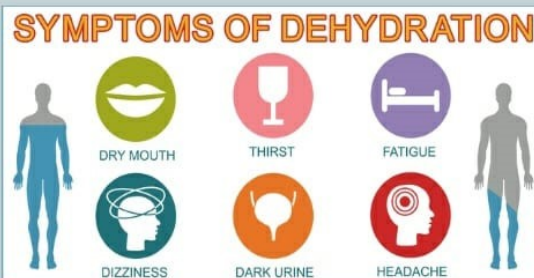
Summary of the seminar on Clinical features of Xerostomia and sjogrens syndrome and their management by Praveen:

- The clinical features of both Xerostomia and Sjogrens syndrome were explained in detail along with pictures.
- The common features were, functional alterations, decreased salivary function, and oral lesions such as candidiasis.
- Management was patient education, managing systemic condition and medication use, preventive measures to reduce oral lesions, caries prevention and control, intra oral topical agents, acupuncture.

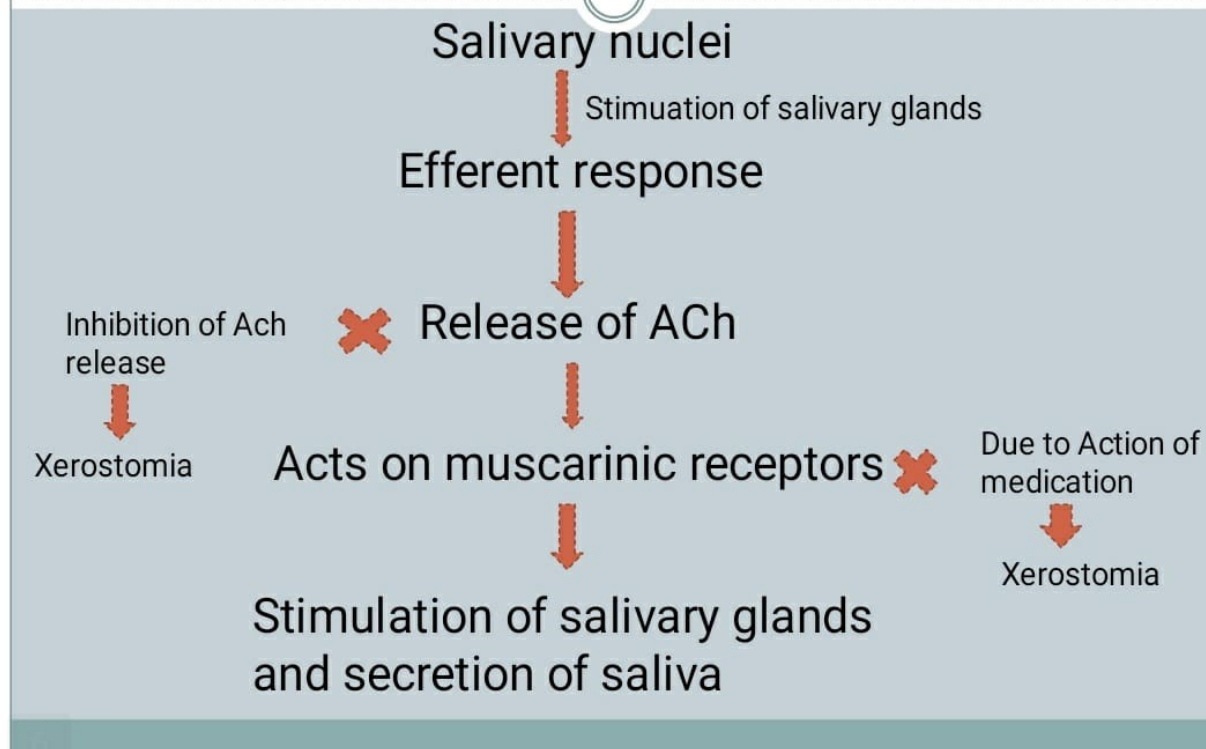
Summary of the seminar on Recent Advancements in management of Autoimmune diseases:

- The recent advancements in the management of autoimmune diseases were explained in detail about were costimulatory blockade, regulatory T cell therapy, restoring tolerance with antigen administration, manipulation of IL-2 pathway, stem cell transplantation and gene therapy.
- A short explanation was given the on prevention of autoimmune diseases and the risk factors of autoimmune diseases as well at the end.

- Patients with a history of
 1. mouth breathing
 2. dehydration
 3. poorly controlled diabetes
 4. end-stage renal disease (ESRD)
 5. graft versus host disease (GVHD)
 6. HIV/AIDS



Physiology and pathogenesis

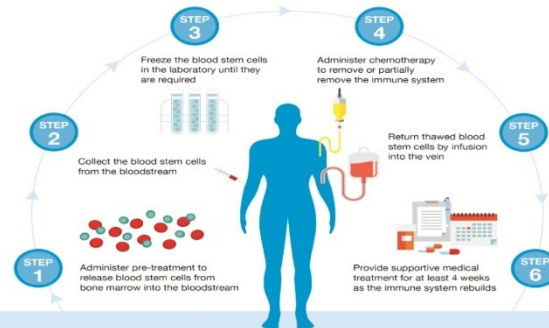


Prevention of autoimmune diseases

- Prevention of Autoimmune diseases mainly focuses on avoiding the risk factors.
- The main risk factors are:
 - ➔ Smoking
 - ➔ Low dose of Vitamin D
 - ➔ Exposure to UV light
 - ➔ Stress

Prediction and prevention of autoimmune diseases: additional aspects of the mosaic of autoimmunity by D Shepshelovich and Y Shoenfeld. DOI: 10.1191/0961203306lu2274r

What is autologous haematopoietic stem cell transplant (AHSCT)?

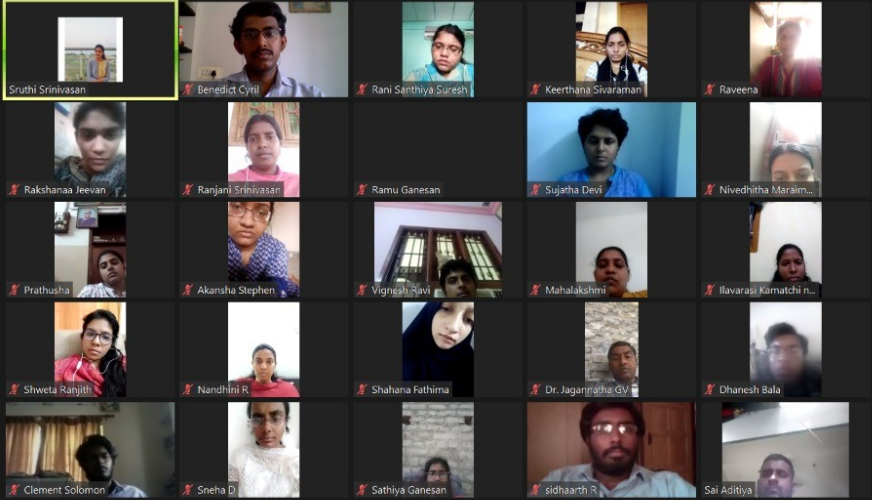


AHSCT is an immunosuppressive chemotherapy treatment combined with reinfusion of blood stem cells to rebuild the immune system.

For more information visit www.msra.org.au/AHSCT

Zoom Meeting 40-Minutes You are viewing Sruthi Srinivasan's screen View Options

Recording 00:06:38 Speaker View




Unmute Stop Video Participants Chat Share Screen Record Reactions Leave

Type here to search

03:12 PM 16-05-2020

Zoom Meeting 40-Minutes You are viewing Sruthi Srinivasan's screen View Options

Recording 00:06:24 Speaker View



Unmute Stop Video Participants Chat Share Screen Record Reactions Leave

Type here to search

03:12 PM 16-05-2020

Participants (24)

Find a participant

| | | | |
|--|----------------------------------|--|--|
| | sidhaarth R (Me) | | |
| | Ilavarasi Kamatchi nathan (Host) | | |
| | Praveen R | | |
| | Dr N Nagappan | | |
| | Sruthi Srinivasan | | |
| | Akansha Stephen | | |
| | Dhanesh Bala | | |
| | DILSHAD BANU | | |
| | Dr Nagaland | | |
| | Kavitha Mohan | | |
| | kaviya boopalan | | |
| | Keerthana Sivaraman | | |
| | Mahalakshmi | | |
| | Monisha Durairaj | | |

Invite Unmute Me Raise Hand

Participants (24)

Find a participant

| | | | |
|--|----------------------|--|--|
| | kaviya boopalan | | |
| | Keerthana Sivaraman | | |
| | Mahalakshmi | | |
| | Monisha Durairaj | | |
| | Nandhini R | | |
| | Poornima srinivasan | | |
| | Prathusha | | |
| | Rani Santhiya Suresh | | |
| | Raveena | | |
| | Rebecca Joseph | | |
| | Shahana Fathima | | |
| | Shanmadhy Srinivasan | | |
| | Shanmuga Priyan | | |
| | Vignesh Ravi | | |

Invite Unmute Me Raise Hand

PUBLIC HEALTH DENTISTRY

CLINICAL e –DISCUSSION REPORT

Time: 3:45PM – 5:15PM

Date: 17-05-2020

Faculty incharge: Dr. Jagannatha G V

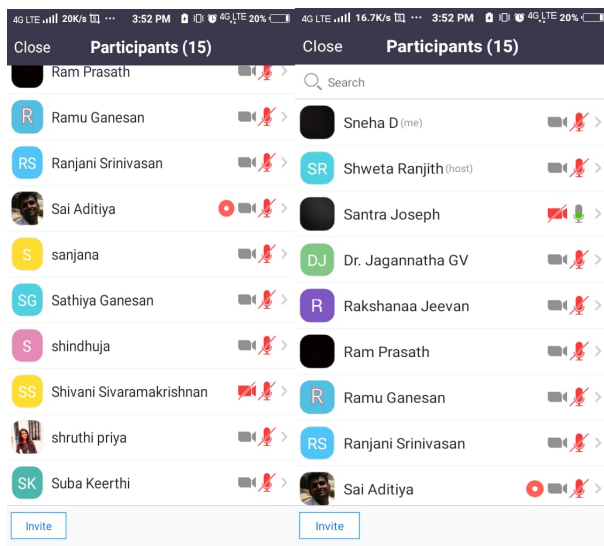
Students- 4th year regular batch(e-batch): 13/13

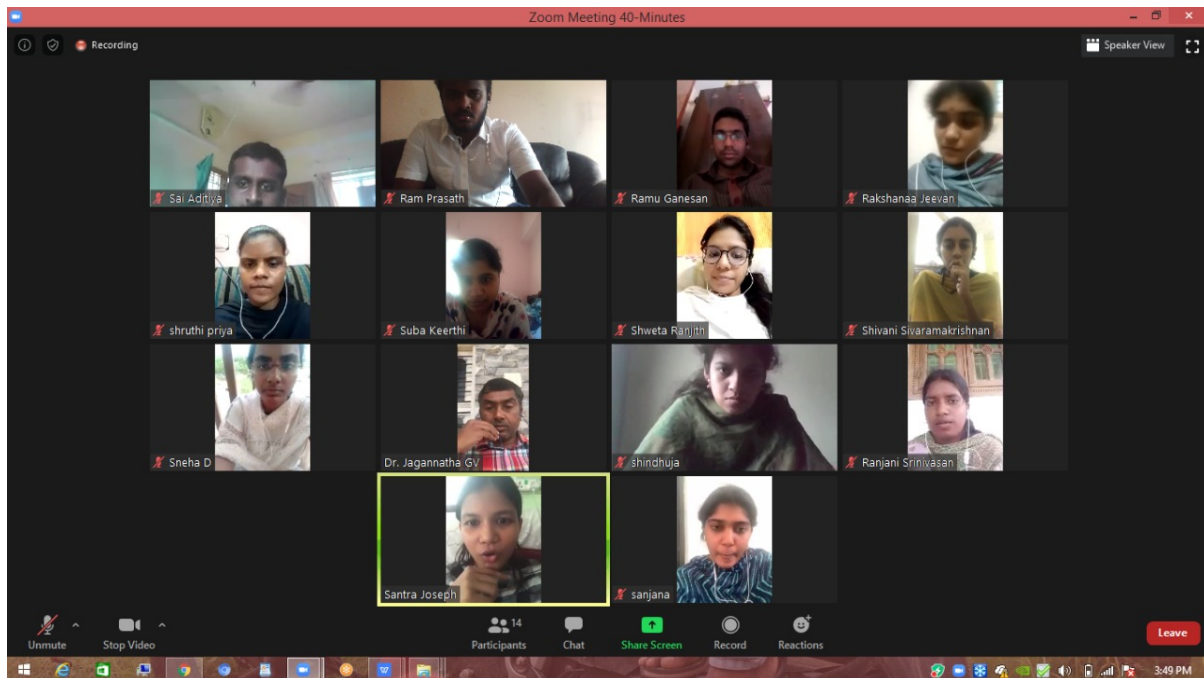
Discussion topic: Students' health education project discussion

SUMMARY

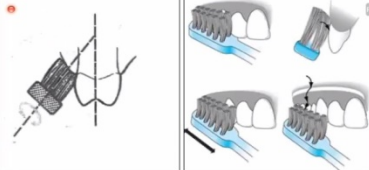
The students presented our projects one by one and explained our projects and contents in the projects in detail. Sir explained us the mistakes in our works individually and asked us to change the mistakes and progress the work and complete within next Sunday. They were asked to come up with catchy titles for our projects so that the project is more attractive.

LIST OF PARTICIPANTS:





PRESENTATION OF THE TOPIC:

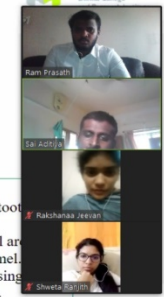




MODIFIED STILLMAN METHOD

- ❖ The filaments are placed at 45° angle to the long axis of the tooth . The filaments are placed half in the sulcus , half on the gingiva.
- ❖ The bristles are activated by short back and forth motions and simultaneously moved in a coronal direction.
- ❖ A soft bristled toothbrush is indicated for this method.

Indications

- General application for cleaning the tooth
- gingival massage.
- Dental biofilm removal from cervical area beneath the height of contour of enamel.
- Recommended in areas with progressing gingival recession and root exposure.



RETHINK YOUR DRINK AND SIPS SMART
(department of public health dentistry)

DIET SODA DRINKS

THE EFFECTS OF SUGAR

THE DANGEROUS SUGAR LEVELS

SUGAR LEVELS IN PRE-PACKAGED SUGAR-SWEETENED BEVERAGES IN SINGAPORE

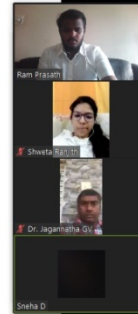
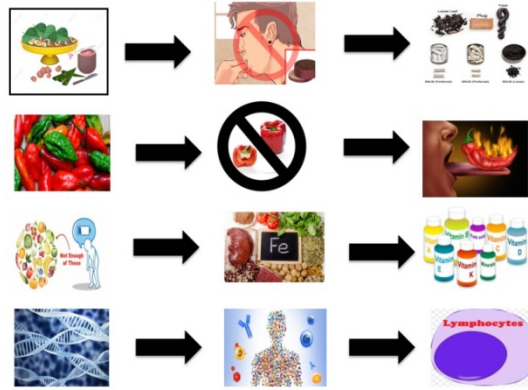
HOW SODA AFFECTS YOUR BODY

STOP! RETHINK YOUR DRINK. GO ON GREEN.





ETIOLOGY



Top 10 DENTAL TREATMENTS for a BEAUTIFUL SMILE

- Composite White Fillings**
 - It is a type of filling (cavities) that is made of a composite material.
 - It is a type of filling (cavities) that is made of a composite material.
- Root Canals (Endodontics)**
 - It is the process of removing the pulp (nerve) from the root canal of the tooth.
 - It is the process of removing the pulp (nerve) from the root canal of the tooth.

- Porcelain Veneers**
 - Veneers are thin layers of porcelain that are applied to the face of the teeth.
 - Veneers are an ideal treatment for people with heavy stains and tooth discoloration.
- Crowns**
 - A damaged tooth is covered with the help of crowns.
 - A crown is also used to strengthen the damaged tooth and to improve the tooth's shape, appearance or alignment.
- Dental Bonding**
 - It is the process of applying tooth-colored filling material to the tooth's surface.
 - It provides some greater advantage over veneers such as changing the shape, size and color of a tooth.
- Teeth Whitening**
 - In this procedure, a peroxide-based material is used to whiten the teeth.
 - It is one of the most effective procedures for treating stained and discolored teeth.

- Dental Implants**
 - With the latest development in the field of dentistry, dental implants are now available.
 - A dental implant is a prosthetic device that is used to replace a missing tooth.
- Gum Surgery**
 - Gum disease is an infection which affects the gum and bone.
 - Gingival grafting gum tissue which helps in reducing the gum recession.
- Sealant**
 - Dental sealants work as a barrier against decay-causing bacteria and are generally applied to the chewing surface of teeth.
 - The sealants are most commonly applied to the premolars and molars.

