

1. 齒齦裂溝滲出液은 量은 午後보다 아침에 더 많았다.
2. 齒齦裂溝滲出液의 量은 咀嚼에 依하여 增加되었다.
3. 齒齦裂溝滲出液의 量의 變化는 全齒部보다는 臼齒部에서, 小臼齒에서 더 顯著하였다.
4. 齒齦裂溝滲出液의 量의 變化에 있어서 性別에 따른 差異는 統計學的으로 有意性を 認定할 수 없었다. ( $P>0.1$ )

## ● 치아의 위치관계와 외상성교합에 관한 임상적 연구

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全類에 齒牙가 存在하면서 前齒部 齒牙位置 및 咬合關係가 非正常的인 25~35才의 男女 35名을 無作爲로 選定하여 口腔檢査, 石膏模型, 上下顎 前齒部 標準放射線 撮影을 通하여 非正常的인 前齒部 齒牙位置 및 咬合關係와 外傷性咬合의 症狀과의 關係를 調査한 結果 다음과 같은 結論을 얻었다.

1. 正常齒齦群에서 口內標準放射線寫眞에 나타난 外傷性咬合의 症狀은 齒槽白線과 齒周靱帶에서 가장 많았다. (36.74%)
2. 正常齒齦群 및 炎症齒齦群에서 齒齦(2.31%) 및 齒根(0.36%), 白堊質(0.18%)의 變化는 極히 적었다.
3. 檢査齒牙중 咬耗齒牙의 所見은 60.25%에서 觀察되었다.
4. 正常齒齦群과 炎症齒齦群 사이의 外傷性 咬合에 對한 反應의 差異는 統計學的 有意性を 認定할 수 없었다. ( $P>0.05$ )

## ● 치근면 처치후 백악질의 변화에 대한 주사전자현미경적 연구

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研究者는 慢性複合性 齒周炎과 齒周症으로 拔去된 齒牙 10個를 選擇하여 病的 露出白堊質과 齒根面鍊磨後 및 枸橼酸腐蝕後의 白堊質表面의 構造를 走査電子顯微鏡으로 觀察하여 다음과 같은 結論을 얻었다.

1. 病的 白堊質面에서는 不規則한 白堊質突起, 齒齦緣下 齒苔, 附着上皮殘渣와 齒周纖維等 여러 沈着物을 볼 수 있었다.
2. 齒根面鍊磨後 白堊質面에서는 病的 白堊質面보다 平滑한 面이 觀察되었으나 砂礫層模樣의 面을 볼 수 있었으며 沈着物의 附着은 거의 볼 수 없었다.
3. 枸橼酸腐蝕後 白堊質面에서는 數많은 膠原纖維 露出을 볼 수 있었으나 規則的인 白堊質突起는 전혀 볼 수 없었다.
4. 齒根面의 酸腐蝕에 依한 膠原纖維의 露出은 齒周纖維의 在附着力을 增進시킬 것으로 提示된다.

collagen fibers. Mast cells and histiocytes were observed around capillary walls.

3. In the group received of the progesterone and high sucrose diet, author could observe that lymphocyte-fibroblast interaction, round fibroblasts, destruction of mitochondria and collagen fibers, RER dilation, increased cellularity, and RMNL subjacent to the sulcular epithelium.

## **A study on the relationship between periodontal environment and gingival crevicular fluid flow**

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Fifty subjects(25 males and 25 females)aged 20 to 28 with clinically healthy gingiva were selected for determining the amount of gingival crevicular fluid by Periotron.

The gingival crevicular fluid was checked at eight thirty in the morning, at one thirty and four thirty in the afternoon.

For determining the influence of chewing on the gingival crevicular fuid flow, the same method was carried out after chewing paraffin wax(40mm in length, 20 mm in width and 3mm in thickness)for 10 minutes.

The results were as follows :

1. The amount of gingival crevicular fluid was more in the morning than in the afternoon.
2. The amount of gingival crevicular fluid was increased by chewing.
3. The quantifative changes of gingival crevicular fluid was more remarkable in posterior teeth than anterior teeth, and in molar teeth than premolar teeth.
4. In the quantitative changes of gingival crevicular fluid, there was no statistical singnificance according to sex( $P>0.1$ ).

## **A clinical study of relationship between position and trauma from occlusion**

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Thirsty-five randomly selected subjects of both sexes, aged twenty-five to thirty-five with anterior malalignment and malocclusion were examined to inspect the clinical changes no periodontium. After taking intraoral standard radiography on the area of anterior tooth of both jaws, films were interpreted as compared with changes inspected in intraoral examination.

The following results were obtained :

1. In the guoup with normal gingiva, sings of trauma from occlusion were prominent on the lamina dura and periodontal space in intraoral standard radiography.(36.74 percent).

2. In both groups, a few signs of trauma from occlusion were observed in gingiva(2.31 percent), root(0.36 percent)and cementum(0.18 percent).
3. In 60.25 percent of examined teeth, occlusal wear facets were observed.
4. There was no statistically significant difference found in response to trauma from occlusion between normal gingival group and gingivitis group.( $P>0.05$ ).

## **A scanning electron microscopic study on the cementum surface after root treatment of extracted teeth**

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Ten human extracted teeth with chronic periodontitis were selected to observe the cemental surfaces. All teeth were brushed in order to remove the debris from the root surface, and then each tooth was planed with the curette and etched with citric acid (pH 1.0).

After these root treatments, the specimens were fixed in 10% N-Formalin for several days, and all of the root surfaces were observed under scanning electronic microscope(JEOL JSM-35).

The results were as follows :

1. There were various deposits which could be considered as an irregular cemental projection, subgingival plaque, epithelial attachment remnants and periodontal fibers on the surface of the diseased roots.
2. The planed root surfaces were smoother and more pebbled than diseased root surfaces, but had some deposits.
3. The root surfaces after etching with citric acid had many meshed collagen fibers but there were not any other cemental projections observable.
4. Exposure of collagen fibers by acid etching of root surface is being considered for promoting the reattachment potential of periodontal fibers.

## **The scanning electron microscopic study of root surface following traumatic occlusion**

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The purpose of this study was to observe the root surface changes following traumatic occlusion. Five adult dogs were used, and divided into one control group and four experimental groups.

In experimental groups, high Sun Platinum casting metal crowns with 2.0mm thick were placed artificially onto the lower right third premolars to create the traumatic occlusion.