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Orthodontics more than braces on kids' teeth

By Ina Fried

Orthodontics at Duke is much more than braces on the teeth of a 13-year-old.

An infant with a cleft palate, an adult who cannot close his front teeth, and a teenager whose few malformed teeth are part of an unusual birth defect syndrome are examples of the patients being treated by the Division of Orthodontics in cooperation with a team of health care professionals.

Dr. Galen W. Quinn, professor and chief of the Division of Orthodontics in the Department of Surgery, has received a \$10,000 grant from a North Carolina corporation, which asked to remain anonymous, to continue research and treatment of patients.

First team improves treatment

"We're equipped to work with infants and guide the growth and development of their faces, jaws and dentition (arrangement of teeth)," Quinn said. "Patients include children of all ages as well as adults, since teeth can be moved

at any time in life."

Improved techniques for the treatment of abnormalities of the head, face, jaws and teeth are available through a team approach including plastic and general surgeons, speech therapists, orthodontists, dentists, pediatricians and ear, nose and throat specialists, Quinn said. The team was the first of its kind in the Southeast, he added.

The professor said innovations have been developed in diagnostic radiographic techniques, in treatment appliances and prostheses and in clinical treatment procedures.

"These innovations have reduced the number of treatment procedures, reduced the cost of treatment and, most important, improved the capabilities of the individual to eat, speak, swallow and look better," he said.

Duke among first

Duke was one of the first institutions in the United States to introduce bone-grafting procedures to stabilize the

jaw in cleft palate patients, Quinn said. More than 3,000 cleft lip and palate patients have been treated at Duke, and over 1,600 of them since the Division of Orthodontics was established in 1958.

A combination of Duke-developed

appliances, surgery and replacement of missing or improperly formed teeth gives the patient "a happier, healthier smile," the orthodontist said. "By the end of treatment you probably can't tell

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Research shows

Holding tongue hazardous

By David Williamson

How do you react when someone makes you mad?

Do you gnash your teeth or hold your tongue? Do you throw crockery, insults and fists, or do you try to calm troubled waters by saying nothing?

Most mental health experts now agree that individuals who always stifle their feelings when others make them angry risk a host of psychological problems.

Among the possible consequences of keeping silent, they say, are depression, increased hostility, impaired reasoning, psychosomatic illnesses, tension and a greater chance of committing violent acts.

It's better to let it out

Research conducted by a team of psychologists from here, the University of North Carolina and the Durham VA Hospital indicates that people who refuse to express anger openly also are likely to become the targets of greater abuse.

In addition, the studies show that people who display anger openly and then explain the reason for it will fare much better than if they had said nothing, according to Dr. W. Doyle Gentry, professor of medical psychology.



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The explanation tends to justify the anger to those who caused it, he said, and

may well get them to change their behavior through feelings of empathy.

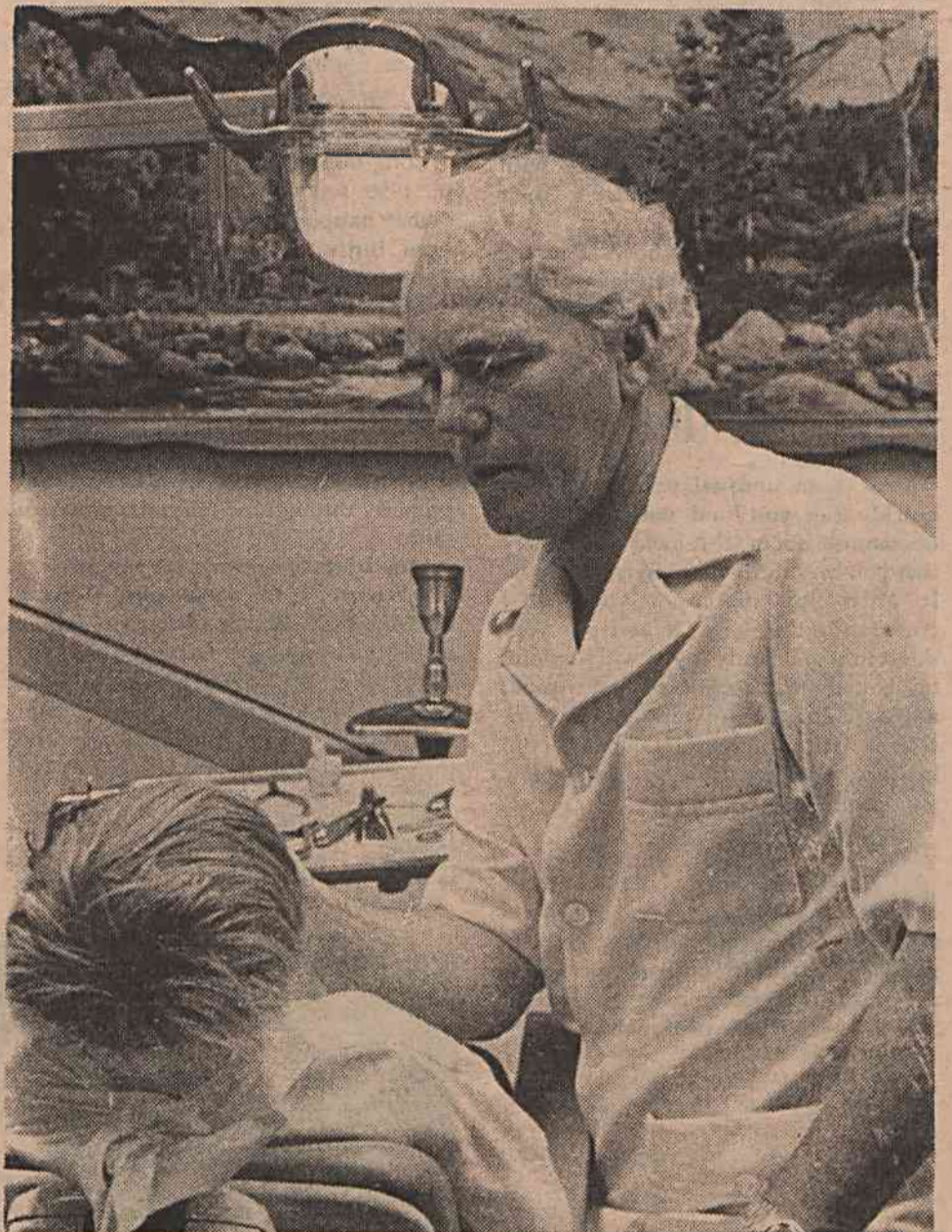
"We believe this work has some real implications for clinical psychology," Gentry said. "Until now, there has been no real scientific evidence to support the theories and therapies for anger and aggression."

Test elicited natural response

The experiments involved 60 UNC student volunteers who were told the research was concerned with the effects of competition on reaction time and physical arousal.

The students, all males, were asked to compete with an opponent they thought

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OPEN WIDE — Dr. Galen W. Quinn, professor and chief of the Division of Orthodontics, works with children of all ages and adults to guide the growth and development of their faces, jaws and teeth. (Photo by Thad Sparks)

Note of caution accompanies estrogen drugs

Women picking up their prescriptions of estrogen drugs began getting a reminder this week that the drugs may increase a user's risk of uterine cancer.

The reminder comes in a leaflet printed by estrogen manufacturers. The Food and Drug Administration (FDA) has ruled that the leaflet be inserted into every package of the drugs or be handed out by pharmacists every time they fill an estrogen prescription.

A woman reading the leaflet may find it unsettling. But she shouldn't panic, a hormone specialist here says.

"She should sit down and talk it over with her physician to see how it applies

to her own situation," said Dr. Charles B. Hammond, an associate professor of obstetrics and gynecology and a member of the Comprehensive Cancer Center.

Not every drug containing estrogen is covered by the FDA ruling. The drugs singled out usually are prescribed for middle-aged women to relieve symptoms of the menopause, such as hot flashes. Birth control pills, which also contain estrogen, are not covered by the ruling or mentioned in the leaflet.

The FDA required the leaflet to be printed and distributed because a number of studies showed that estrogen users had a higher than normal risk for

cancer of the lining of the uterus.

Ten studies have been published on the estrogen — uterine cancer issue, Hammond said. Six of the studies show an increased risk for estrogen users, the specialist said, while the other four show no risk increase.

Hammond added that a study is under way at Duke into possible links between estrogens and a list of diseases, including uterine cancer.

"Until our own data are available in three or four months," he said, "I'm reserving judgment on whether there's an increased risk for estrogen users."