

The Journal Can Do Better

I read with unease the recent article by Gregori M. Kurtzman, DDS, in the September issue of the *Journal of the California Dental Association* titled “Simplifying Endodontics With EndoSequence Rotary Instrumentation.” While I commend the disclaimer at the onset of the manuscript describing Dr. Kurtzman’s participation in the promotion of the EndoSequence file, I have some troubling concerns.

This manuscript is listed under “Features” in the Table of Contents. I am well aware of a history of the *Journal* of labeling manuscripts “opinion” when reviewers or the editorial board considered manuscripts to be anecdotal or unsupported by evidence. My criticism is neither with Dr. Kurtzman for his opinions nor the EndoSequence filing system for its value. My concern is with the *Journal* for publishing such a transparent piece of commercial advertising without identifying it as such. The manuscript makes numerous claims for the superiority of this file, none of them substantiated by research or any cited evidence. The two citations listed at the end of the article are publications by individuals who are also identified with sales of the EndoSequence system.

There are numerous claims in the article that promote the use of this system while offering negative comparisons in the behavior of other systems. This is done without any citation to research. There is nothing offered that might allow the reader to critically assess the arguments and statements put forth. A single example of the overstatements inherent in an opinion article of this kind is the argument made for the superiority of electroplating

of ground nickel-titanium rotary instruments in preventing stress fractures. This design feature has so far been equivocal in its benefits and as recently as September, the *Journal of Endodontics* published “A Scanning Electron Microscopy Evaluation of Microfractures, Deformation, and Separation in EndoSequence and Profile Nickel-Titanium Rotary Files Using an Extracted Molar Tooth Model.” This research by Herold, Johnson and Wenckus at the University of Illinois, Chicago, states that “unique file design and electropolishing did not inhibit the development of microfractures in EndoSequence nickel-titanium rotary files” and in this single study better performance was demonstrated by a competing file system. The danger here is that this evidence is from a single study and requires corroboration by other researchers.

I am not arguing the positives or negatives of any file system. I am arguing for more quality control in the jury system of our *Journal* and recommending a system similar to that utilized by many current journals, which categorize articles by content (e.g., research, clinical case report, opinion, etc.). How can our readership make informed decisions about what is in the best interest of their patients and practices if they are not adequately informed by their resources of the vetting process to publication or where an article stands in the hierarchy of evidence?

The *Journal of the California Dental Association* can do a lot better than this.

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Parental Responsibility Lacking

It was with interest that I read the article “Disparities in Children’s Oral Health and Access to Care” in the September issue of the *Journal of the California Dental Association*.

Many of the points the author, Ms. Lesa Paige Bentley, makes are poignant as she addresses the need to eliminate barriers to care. In my practice we choose to treat children with Medi-Cal. From observations at this office, she misses one significant barrier: lack of parental responsibility.

In the Medi-Cal system, most of the patients have no out-of-pocket expenses for treatment. All they have to do is show up. For whatever reason the patients who invariably are dismissed from my practice due to lack of follow-up are dismissed due to parental indifference, carelessness, and irresponsibility. Unfortunately, the state cannot legislate parents to be more responsible. What is most unfair about this is that children suffer. If parents would become more responsible, many of the health care issues facing our children would disappear: childhood diabetes, obesity, at-risk behaviors, etc.

In order to make a significant change in children’s health issues, parents, not insurance companies (whose primary goal it is to improve the financial bottom line of the company—not provide health benefits for their policy holders) nor state agencies, must make wise, responsible decisions for both treatment and prevention of all health related issues.

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