Relationship Between Systemic Diseases and Endodontics: An Online Study Guide

Abstract
The Editorial Board of the Journal of Endodontics has developed a literature-based study guide of topical areas related to endodontics. This study guide is intended to give the reader a focused review of the essential endodontic literature and does not cite all possible articles related to each topic. Although citing all articles would be comprehensive, it would defeat the idea of a study guide. This section will cover the relationship between systemic diseases and endodontics. (J Endod 2008;34:e195–e200)

Introduction
The delivery of high-quality clinical care requires a thorough understanding of the endodontic literature. The Editorial Board of the Journal of Endodontics (JOE) has developed this online study guide for endodontists and fellow clinicians interested in endodontics.

There are several potential applications for an online study guide. First, an online study guide permits clinicians to focus in on particular areas of endodontics where they can quickly review key papers devoted to one particular topic. For example, this particular study guide provides a summary of key papers in the area of the relationship between systemic diseases and endodontics.

Second, a study guide permits speakers to efficiently review background material in preparation for future courses, lectures, or continuing educational events. Third, an online study guide permits students to review key papers in preparation for future examinations or for development of residency seminars. And, fourth, an online study guide permits readers to quickly and efficiently access either the abstract or the entire paper cited in the tables (see Discussion for details).

Methods
One potential problem in developing an online study guide was to provide a summary of major papers that contributed to a given topic area. The inclusion of all possible papers on a given topic would lead to an unwieldy collection that failed to clearly identify key papers in the area. Of course, the exclusion of key papers is also problematic. To address this issue, the JOE Editorial Board developed the overall list of topics to be covered and then for each topic generated an initial tabulation of key historical and contemporary papers on that topic. This list was then sent to two outside reviewers who were both experienced educators and Diplomates of the American Board of Endodontics. These reviewers then recommended additions and deletions of papers to the proposed topic list.

In order to maintain currency, the JOE Editorial Board proposes to periodically update each topical study guide using the same peer-reviewed process as described above.

Results
The results of the study guide (1–54) provide an overview of selected literature on relationship between systemic diseases and endodontics. This information is organized into Table 1.

Discussion
The journey to clinical excellence requires not only outstanding clinical skills but also that special knowledge that accrues from a study of the endodontic literature. The purpose of the JOE online study guide is to serve as one source for efficiently reviewing key papers that are organized by topic area and presented with the advantages of online Internet technology.

Although JOE readers are undoubtedly familiar with many aspects of the Internet, there are special features available at JOE online that provide particular advantages in their application for a study guide. For example, if this particular study guide is downloaded as a pdf, it provides a useful but static listing of the cited articles. On the other hand, if the reader navigates to the table of contents page for the online study guide and then clicks on “Full Text” (Fig. 1), they will be taken to an HTML version of the study guide. This online version of the study guide has special capabilities including the fact that the references are hyperlinked. Thus, the reader can quickly obtain abstracts of nearly all cited papers and can review the entire paper of many of the cited papers with only a few clicks of their mouse (Fig. 2). Thus, combining a study guide with online capabilities provides particular benefits for efficiently reviewing key papers in the endodontic literature.

We hope that this study guide will prove useful to you as one source for developing a focused and special base of endodontic knowledge. As always, we are interested in your thoughts on this initiative and how JOE can better serve you, our readers. Feel free to e-mail us at: JEndodontics@UTHSCSA.edu.
<table>
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| 1.    | Montgomery S.  
Endodontic complications in an irradiated patient.  
| 2.    | Vire DE, Barrett KC.  
Endodontic Rx for the von Willebrand patient.  
| 3.    | Luce EB, Montgomery MT, Redding SW.  
The prevalence of cardiac valvular pathosis in patients with systemic lupus erythematosus.  
| 4.    | Levin JA, Glick M.  
Dental management of patients with asthma.  
| 5.    | De Rossi SS, Glick M.  
Lupus erythematosus: considerations for dentistry.  
| 6.    | Gillcrist JA.  
Hepatitis viruses A, B, C, D, E, and G: implications for dental personnel.  
| 7.    | Cleveland JL, Gooch BF, Shearer BG, Lyerla RL.  
Risk and prevention of hepatitis C virus infection.  
| 8.    | Miller CS, Egan RM, Falace DA, Rayens MK, Moore CR.  
| 9.    | ADA Council on Scientific Affairs.  
The dental team and latex hypersensitivity.  
| 10.   | Kleier DJ, Shibliksi K.  
Management of the latex hypersensitive patient in the endodontic office.  
| 11.   | Miller CS, Little JW, Falace DA.  
Supplemental corticosteroids for dental patients with adrenal insufficiency: reconsideration of the problem.  
| 12.   | Rhodus NL, Falace DA.  
Management of the dental patient with congestive heart failure.  
| 13.   | Little JW, Miller CS, Henry RG, McIntosh BA.  
Antithrombotic agents: implications in dentistry.  
| 14.   | Rose LF, Mealey B, Minsk L, Cohen DW.  
Oral care for patients with cardiovascular disease and stroke.  
| 15.   | Little JW.  
Anxiety disorders: dental implications.  
| 16.   | DePaola LG.  
Managing the care of patients infected with bloodborne diseases.  
| 17.   | Rhodus NL, Little JW.  
Dental management of the patient with cardiac arrhythmias: an update.  
| 18.   | Friedlander AH, Marder SR, Pisegna JR, Yagiela JA.  
Alcohol abuse and dependency: psychopathology, medical management and dental implications.  
| 19.   | Fouad AF, Burleson J.  
The effect of diabetes mellitus on endodontic treatment outcomes: data from an electronic patient record.  
| 20.   | Fouad AF.  
Diabetes mellitus as a modulating factor of endodontic infections.  
| 21.   | Frisk F, Hakeberg M, Ahlgqvist M, Bengtsson C.  
Endodontic variables and coronary heart disease.  
American Academy of Orthopaedic Surgeons Advisory Statement: antibiotic prophylaxis for dental patients with total joint replacements.  
| 23.   | Wisnom C, Siegel MA.  
Advances in the diagnosis and management of human viral hepatitis.  
<table>
<thead>
<tr>
<th>Ref #</th>
<th>Title</th>
</tr>
</thead>
</table>
| 24.   | Byrne BE.  
Drug interactions: a review and update.  
Endod Topics 2003;4:9–21 |
| 25.   | Cleveland DB, Rinaggio J.  
Oral and maxillofacial manifestations of systemic and generalized disease.  
| 26.   | Huber MA, Terezhalmy GT.  
The head and neck radiation oncology patient.  
| 27.   | Herman WW, Konzelman JL, Prisant LM.  
New national guidelines on hypertension.  
| 28.   | Sarathy AP, Bourgeois SL, Goodell GG.  
Bisphosphonate-associated osteonecrosis of the jaws and endodontic treatment: two case reports.  
| 29.   | Little JW.  
Dental management of patients with Alzheimer’s disease.  
| 30.   | Little JW.  
Syphilis: an update.  
| 31.   | Lessard E, Glick M, Ahmed S, Saric M.  
The patient with a heart murmur: evaluation, assessment and dental considerations.  
| 32.   | Segura-Egea JJ, Jimenez-Pinzon A, Rios-Santos JV, Velasco-Ortega E, Cisneros- Cabello R, Poyato-Ferrera M.  
High prevalence of apical periodontitis amongst type 2 diabetic patients.  
| 33.   | Miley DD, Terezhalmy GT.  
The patient with diabetes mellitus: etiology, epidemiology, principles of medical management, oral disease burden, and principles of dental management.  
| 34.   | Huber MA, Terezhalmy GT.  
The medical oncology patient.  
Pulpal inflammation and incidence of coronary heart disease.  
| 36.   | Hupp JR.  
Ischemic heart disease: dental management considerations.  
| 37.   | Hupp WS.  
Dental management of patients with obstructive pulmonary diseases.  
| 38.   | Firriolo FJ.  
Dental management of patients with end-stage liver disease.  
| 39.   | Dellinger TM, Livingston HM.  
Pregnancy: physiologic changes and considerations for dental patients.  
| 40.   | Little JW.  
Thyroid disorders. Part I: hyperthyroidism.  
| 41.   | Little JW.  
Thyroid disorders. Part II: hypothyroidism and thyroiditis.  
| 42.   | Little JW.  
Thyroid disorders. Part III: neoplastic thyroid disease.  
| 43.   | Rieken SE, Terezhalmy GT.  
The pregnant and breast-feeding patient.  
| 44.   | De Rossi SS, Slaughter YA.  
Oral changes in older patients: a clinician’s guide.  
Prevention of infective endocarditis: guidelines from the American Heart Association.  
Oral health and dental treatment of patients with renal disease.  
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<thead>
<tr>
<th>Ref #</th>
<th>Title</th>
</tr>
</thead>
</table>
| 47. | Huber MA, Terezhalmy GT.  
Risk stratification and dental management of patients with adrenal dysfunction.  
| 48. | Little JW, Rhodus NL.  
HIV and AIDS: update for dentistry.  
| 49. | Little JW, Rhodus NL.  
Pharmacologic management of type 1 diabetes: a review for dentistry.  
| 50. | Barasch A, Coke JM.  
Cancer therapeutics: an update on its effects on oral health.  
| 51. | da Fonseca M, Oueis HS, Casamassimo PS.  
Sickle cell anemia: a review for the pediatric dentist.  
| 52. | Gutta R, Louis PJ.  
Bisphosphonates and osteonecrosis of the jaws: science and rationale.  
| 53. | Huber MA, Terezhalmy GT.  
HIV: infection control issues for oral healthcare personnel.  
| 54. | Vasanthan A, Dallal N.  
Periodontal treatment considerations for cell transplant and organ transplant patients.  
References