Evidence based research in prosthodontics

The science of prosthodontics has several theories and beliefs of which many are unsubstantiated. The clinical practice and patient acceptance to prosthesis are variable. The difficulty arises on the procedure to teach or adapt and the lack of consensus on different concepts can affect future training and patient care. The harmony among various thoughts and beliefs can be obtained and resolved with the evidenced-based research and treatment.[1]

Evidence-based research (EBR) adapts the understanding of clinical acumen, patients’ choices, and the literature data available to support the treatment. It specifies the method and aids in making a decision. This method triggers with the patients’ perception on the diagnostic and treatment efficacy. EBR starts with a systematic evaluation on a research question, acquiring the evidence, appraise, apply, and evaluate the best available treatment.[2,3] The studies evaluated for can be of prospective controlled trials, randomized controlled trials, cohort studies or case–control studies. The efficacy of the EBR is valued with the clinical trials than the in-vitro studies.

EBR uses study designs based on research questions. The evaluation process of EBR filters the studies of lesser importance. The EBR design incurs less bias. The inference provides greater perception on the topic that is beneficial to both clinician and the patient. The databases that can facilitate in evidence perusal are Cochrane Database of Systematic Reviews (Wiley Online Library), Database of Reviews of Effectiveness, PubMed at U-M (with MGet It links), PsycINFO, MEDLINE (Ovid), CINAHL Complete (EBSCO), Indian Health Service – OSCAR, Social Services Abstracts, SAMHSA’s National Registry of Evidence-Based Programs and Practices, Social Work Policy Institute, Resources on Evidence-Based Practice, and Web of Science. SORT or CEBM-levels of evidence, reassess these evidences provided by different databases. This provides additional strength to recommendations or findings obtained from the databases.

The literature requires more evidence base data to support the patient needs and researcher’s requirements. With the needs and wants of justification increasing, the concurrences in prosthodontics is attained with the evidenced-based approach, EBR can provide an effective standard of care and improved data could be available to the researchers and policy makers.[4] A customized EBR data to Indian scenario is also required where the approach and managements are different due to geographical distribution. A greater caution is also essential in interpreting the results of these evidence-based studies.[5] The need to train and equip our self in synthesizing these evidences and critically appraising them is the need of the hour.

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