

of individuals, etc. Dental professionals will have more of these patients in their everyday practice. Every oral intervention is connected with higher risk among people with DM compared to patients without DM. This report shows the case of a patient with IDDM, where inadequate dental treatment lead to complications, damaged his general health and jeopardized his life. The aim of this paper is to point out obligatory application of protocol for dental treatment of patients with DM.

## Odnos između okluzijskih koncepcija i zvukova u temporomandibularnom zgobu

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Utjecaj okluzije na nastanak zvuka u temporomandibularnom zgobu nije potpuno potvrđen.

Svrha je ovog istraživanja bila utvrditi utjecaj okluzijskih koncepcija na nastanak zvuka u temporomandibularnom zgobu.

Ispitivana skupina sastojale se je od 96 ispitanika u dobi od 24 - 52 godine ( $x = 35,03 \pm 6,92$ ). Okluzijske koncepcije određene su kliničkim pregledom. U ovisnosti o kontaktima na laterotruzijskoj i meziotruzijskoj strani ispitanici su kategorizirani u tri skupine (okluzija vođena očnjakom, grupna funkcija, te bilateralno uravnotežena okluzija). Kliničkim pregledom te auskultacijom s pomoću stetoskopa registrirano je postojanje zvuka.

70,83 % ispitanika imalo je okluziju vođenu očnjakom, 16,66 % grupnu funkciju, a 12,5 % bilateralno uravnoteženu okluziju. Zvuk u temporomandibularnom zgobu postao je u 41,6 % slučajeva. Rezultati statističke raščlanbe (Pearson  $\chi^2$ ) pokazuju da između skupina nema statistički znatne razlike ( $\chi^2 = 2,09$  p = 0,351).

Rezultati ovog istraživanja upućuju na zaključak da okluzijske koncepcije nemaju utjecaja na nastanak zvuka u temporomandibularnom zgobu.

## The Relationship Between Type of Occlusion and TMJ Sounds

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The influence of occlusion on the occurrence of sound in the temporomandibular joint had not been completely proved.

The objective of this investigation was to determine the effect of type of occlusion on the occurrence of sounds in the TMJ.

A group of 96 subjects, aged from 24-52 years ( $x = 35,03 \pm 6,92$ ) was examined. The type of occlusion was determined by clinical examination. Depending on the contacts on the laterotrusal and mediotorusal side the subjects were categorized into three groups (canine guided occlusion, group function and balanced occlusion). The existence of sounds was registered by means of a clinical examination and auscultation by stethoscope.

In the examined group 70.83% of examinees had canine guidance, 16.66 % group function and 12.5 % balanced occlusion. Temporomandibular joint sound was present in 41.6 % of subjects. The results of the statistical analysis (Pearson  $\chi^2$ ) shows no statistically significant difference between these 3 groups ( $\chi^2 = 2.09$  p = 0.351).

The results of this study suggest that the type of occlusion does not have an influence on the occurrence of sound in the TMJ.

## Utjecaj pušenja duhana na stomatognati sustav žena oboljelih od šećerne bolesti

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Cilj rada bio je provjeriti utjecaj pušenja duhana na stomatognati sustav žena oboljelih od šećerne bolesti.